



**GHANA HEALTH SECTOR
2022 PROGRAMME OF WORK**

MINISTRY OF HEALTH

ACRONYMS

A&EU	Accident and Emergency Unit
ABFA	Annual Budget Funding Amount
ALS	Advanced Life Support
ANC	Antenatal Care
APoW	Annual Programme of Work
ARV	Anti-Retroviral
AU	African Union
AVAT	African Vaccine Acquisition Trust
BBU	Bed Bureau Unit
BCI	Blood Collection Index
BLS	Basic Life Support
BLSS	Basic Life Support Services
BSL 3	Biosafety Level 3
CCTH	Cape Coast Teaching Hospital
CDC	Centre for Disease Control
CHE	Current Health Education
CHPS	Community-based Health Planning & Services
COVAX	COVID-19 Vaccines Global Access
COVID-19	Corona Virus Disease 2019
CPD	Continuous Professional Development
CYP	Couple Year Protection
DHIMS	District Health Information Management System
EIP	Expanded Programme on Immunization
EmOC	Emergency Obstetric Care
EmONC	Emergency Obstetric and Newborn Care
EMT	Emergency Medical Technicians
FAO	Food Agriculture Organization
FDA	Food and Drugs Authority
FFP	Fresh Frozen Plasma
FHD	Family Health Division
GAVI	Global Alliance for Vaccines and Immunizations
GCNM	Ghana College of Nurses and Midwives
GCPharm	Ghana College of Pharmacy
GCPS	Ghana College of Physicians and Surgeons
GHØ	Ghana Cedis
GhILMIS	Ghana Integrated Logistics Information System
GHS	Ghana Health Service
	Government Intergrated Financial and Management Information System
GIFMIS	
GMP	Good Manufacturing Practice
GoG	Goovernment of Ghana
GPC	Ghana Psychology Council
GSS	Ghana Statistical Service
HDUs	High Dependency Units
HcFRA	Health Facilities Regulatory Agency

HIV	Human Immune Virus
HQ	Headquarters
HR	Human Resource
HSMTDP	Health Sector Medium-Term Development Plan
HTIs	Health Training Institutions
ICT	Information and Communication Technology
ICU	Intensive Care Unit
IGF	Internally Generated Fund
IMNCI	Integrated Management of Newborn and Childhood Illness
IPD	In-Patient Department
IPT	Intermittent Preventive Treatment
J&J	Johnson & Johnson
KATH	Komfo Anokye Teaching Hospital
KBTH	Korle Bu Teaching Hospital
KIA	Kotoka International Airport
LEKMA	Ledzokuku Municipal Assembly
LI	Legislative Instrument
LIGHTWAVE	Health Electronic Medical Records System
LLIN	Long Lasting Insecticidal Treated Nets
LMD	Last Mile Distribution
LMIS	Logistics Management Information Systems
MDAs	Ministries, Departments and Agencies
MDC	Medical and Dental Council
MHA	Mental Health Authority
MoF	Ministry of Finance
MoH	Ministry of Health
MTCT	Mother to Child Transmission
N&MC	Nurses and Midwives Council
NACP	National AIDS Control Programme
NAS	National Ambulance Service
NBS	National Blood Service
NCDs	Non-Communicable Diseases
NER	North East Region
NHIA	National Health Insurance Authority
NHIS	National Health Insurance Scheme
NMCP	National Malaria Control Programme
NTD	Neglected Tropical Disease
NTDCP	Neglected Tropical Disease Control Programme
NTP	National TB Control Programme
OPD	Out-Patient Department
PBB	Programme Based Budget
PC	Pharmacy Council
PCR	Polymerase Chain Reaction
PFM	Public Financial Management
PHC	Primary Health Care
PHEMCs	Public Health Emergency Management Committees
PMTCT	Prevention of Mother to Child Transmission

PPEs	Personal Protective Equipments
PPMED	Policy Planning Monitoring and Evaluation Directorate
PSA	Pressure Swing Absorbtion
RHML	Recommended Herbal Medicines List
RHN	Regenerative Health and Nutrition
RMNCAH	Reproductive, Maternal, Newborn, Child and Adolescent Health
RRT	Rapid Respond Team
RSIM	Research, Statistics and Information Management
SDGs	Sustainable Development Goals
SJAB	St. Johns Ambulance Brigade
SORMAS	Surveillance Outbreak Management Analysis and Response
SSNIT	Social Security and National Insurance Trust
TB	Tuberculosis
TBG	Total Government Budget
TCD	Technical Coordination Directorate
THs	Teaching Hospitals
TTH	Tamale Teaching Hospital
TTIs	Transfusion Transmissible Infections
U5MR	Under-5 Mortality Rate
UER	Upper East Region
UHC	Universal Health Coverage
WHO	World Health Organization
WIFA	Women In Fertility Age

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FOREWORD



The 2022 Annual Programme of Work (APOW) ushers in the implementation of the first year of the new Health Sector Medium-Term Development Plan (HSMTPD 2022 -2025).

In 2021, the sector focused on delivering its key obligations to the people of Ghana by improving access to quality healthcare delivery through investment in infrastructure, equipment and personnel in building capacity, to deal with COVID-19 and strengthen the general health systems for future pandemics.

Although significant progress has been made in improving health infrastructure and service delivery, the sector continues to face a number of challenges as far as working towards the attainment of Universal Health Coverage (UHC) is concerned. Persistent inequitable access to quality health services owing to mal-distribution of health facilities, professionals and rapid urbanization as well as threat to quality of healthcare arising out of deteriorating health infrastructure, obsolete equipment, transport and a number of uncompleted projects across the nation are among the difficulties that confront the sector.

Given these challenges and the current needs of the sector in 2022, the sector will, among others, strengthen the capacity of Ministry of Health (MoH) and its agencies to mobilize resources, increase active coverage of the National Health Insurance Scheme (NHIS), particularly indigent categories, develop an incentive strategy to attract and retain health professionals in deprived areas. To address the increase in Non-Communicable Diseases (NCDs) and pandemics, the Ministry will strategize moving forward, to increase training and in-service training of healthcare workers in the management of NCDs, and public health emergencies. The Ministry in 2022, will pursue the vaccination agenda as a means of containing the COVID-19 pandemic, and continue to strengthen partnership through the One-Health approach in service delivery and development of health infrastructure.

As part of the processes to improve the Ministry's capacity in dealing with pandemics and improving access, the government infrastructure program (Agenda 111) will be pursued strongly. In addition, new projects will be started and some ongoing projects will be completed and commissioned. The government will continue to push for the establishment of the National Vaccine Institute and the Ghana Centre for Disease Control (CDC).

As we enter the implementation of the first year Annual Programme of Work (APoW) 2022 of the HSMTDP 2022-2025, I do acknowledge the immense contribution of staff of the Ministry, Agencies, Development Partners and relevant stakeholders and urge all to work assiduously with the sector towards the attainment of the targets set in the APOW as part of the efforts towards the attainment of Universal Health Coverage.

A handwritten signature in blue ink, appearing to read 'Kwaku Agyeman-Manu', written over a horizontal line.

HON. KWAKU AGYEMAN-MANU
Minister for Health

CHAPTER ONE

1.0 Introduction

The Health Sector has developed a new Health Sector Medium Term Development Plan (2022-2025 HSMTDP) which reflects on the Government development agenda and the attainment of the health Sustainable Development Goals (SDGs). The medium-term plan consolidates government's policy plans and objectives for the health sector towards the attainment of Universal Health Coverage (UHC) in Ghana. The 2022 Annual Programme of Work (APOW) represents the action plan of the first implementing year of the new Health Sector Medium Term Development Plan (2022-2025 HSMTDP).

The APOW outlines the key priorities and activities for the implementing year to be executed by the Ministry and its Agencies in the year 2022. It will take on board health related government flagship programs and also look at the performance of the sector for the previous year 2021 as well as challenges faced. The document will continue to maintain the Programme Based Budget (PBB) structure. In this regard, all priorities are linked to the health objectives and related operations, expected outputs and output indicators.

2021 has been a challenging year for the sector due to the effects of the COVID-19 pandemic. The health sector response to the pandemic has been strategic and timely; and will continue the implementation of the National COVID-19 Strategic Plan (2020-2024) outlined by H.E. the President and proven interventions which includes surveillance, case management, laboratory testing, vaccination and risk communication in 2022.

1.1 Vision, Goal and Health Policy objectives

Vision

All people in Ghana have timely access to high quality health services irrespective of ability to pay at the point to use.

Goal

Increased access to quality essential health care and population-based services for all by 2030

Policy objectives

Universal access to better and efficiently managed quality healthcare services

Reduce avoidable maternal, adolescent and child deaths and disabilities

Increase access to responsive clinical and public health emergency services

CHAPTER TWO

2.0 2021 Performance

2.1 Summary of Key Achievements in 2021

Management and Administration

As part of the Ministry of Health oversight role, a Secretariat has been formed to formally start work on the Ghana Center for Disease Control (CDC) establishment and a draft Operational plan has been developed. The Ministry through the Presidential Vaccine Manufacturing Committee has developed a comprehensive strategy and action plan for local vaccine production. A cabinet memo has been prepared and submitted to Cabinet for approval.

The Ministry has developed a number of policies to strengthen its governance role which include a new Health Sector Medium Term Development Plan (HSMTDP 2022-2025) to guide health development for the next four years; the Non-Communicable Diseases Policy, which is to give direction and strengthen management of NCDs has been approved by Cabinet; the Food Safety Policy has been submitted to Cabinet as part of the public safety measures.

To give meaning to infrastructure planning in the medium term, a Hospital Infrastructure Strategy is being developed for the health sector to bring clarity on infrastructure planning. In addressing the oxygen flow challenges in our facilities as a result of the COVID-19 Pandemic, a draft Oxygen policy has been developed for consultation. The Ministry has also put in place the necessary steps to review the National Health Financing Strategy to guide the implementation of the UHC road map; and the new Health Sector Medium Term Development Plan (2022-2025).

The Ministry, as part of improving partnership, has initiated a number of partnerships such as training of health professionals under the Dr. Lee Jong Wook Fellowship of Korea (Twelve Health professionals sent to Korea for training in 2021), licensing the 10th Chinese Medical Team to commence duty at LEKMA, and collaborating with the private sector in the effective management of the COVID-19 pandemic through the supply of PPEs and construction of Infectious Diseases Treatment Centers. The Ministry has launched the National Human Resource Policy and Strategies for Health, and as part of the implementation two committees have been set up to draft a strategic document on Attraction and Retention of Health Workers to deprived areas.

The agenda to improve psychiatric care has gained momentum with the Mental Health Authority drafting guidelines for the setup of Mental Health Tribunal to deal with abuse of mental health patients.

Health Service Delivery

The quest for improving specialist facilities across the country is ongoing. The Cape Coast Teaching Hospital introduced Oncology, Pediatric, Surgical, Gynecology, and Medical Faculties in June 2021. It has held a Partnership meeting with African Diaspora Development Institute for the setting up of Endolaprosopy services, and established the innovative Bed Bureau Unit (BBU) to check the no bed syndrome.

Tamale Teaching Hospital (TTH) has completed renovation works on its Oncology center and equipment such as recliners among others have been received from donors, such as Roche Pharmaceuticals. It has drafted Occupational Health, Safety and Healthcare Policy for the hospital. Komfo Anokye Teaching Hospital (KATH) has integrated mental health into its services by creating 11 Psychiatry Beds, and provided outreach services to its catchment areas. The Pantang Psychiatric Hospital has instituted home visits and follow-ups on mentally ill patients.

Ministry of Health working with its Agency the Ghana Health Service (GHS) is currently working

with Zipline in the distribution of anti-snake and anti-rabies vaccines to the regional levels. Currently, Zipline serves as a depot for the collection of regional allocation of these products. For regions like the Western-North and North-East Regions, Zipline also serves as the sole distributor of anti-snake and anti-rabies vaccines within the regions. The development has resulted in stocks lasting longer in the Western-North and North-East Regions, improving the regional availability of the products. The Health Electronic Medical Records System (LIGHTWAVE) which started at Cape Coast Teaching Hospital has now been deployed to all the Teaching hospitals, all regional hospitals and is currently ongoing at other District health facilities.

The importance of ambulance services cannot be under estimated especially under the COVID-19 era. Six (6) Ambulance Service Secretariats has been established in the newly created regions.

The National Blood Service (NBS) intensified its donor education and recruitment drive, which yielded 173,938 units of blood. As part of implementing the NBS Act, 2020 (Act 1042), the NBS developed draft regulations on transportation of blood, inspection and accreditation of hospital blood banks and blood banks, medical standards for transfusion of blood in health facilities, and conditions for the supply of safe blood to patients. The NBS also finalized the national strategy for screening donated blood and immune-hematological testing to standardize testing strategies for donated blood prior to transfusion and pre-transfusion testing.

Human Resource for Health Development and Management

Human Resources remains an important pillar towards the attainment of the Sector's Universal Health Coverage (UHC) agenda. Over the years, the Ministry has been striving to increase and improve the human resource base of the sector to meet the increasing staffing requirements. In 2021, Ghana College of Pharmacy developed 11 new curricula to strengthen the training of specialized Pharmacists and the Ghana College of Nurses and Midwives introduced a new faculty in Pediatric Nursing Education, which will be operationalized in 2022. Ghana College of Physicians and Surgeons has drafted a document on guidelines for postgraduate training and submitted it to the Hon. Minister for implementation in 2022.

Health Regulation

Health regulation is key to the attainment of health indicators, quality of care and the overall health improvement; and therefore, remains a major function of the Ministry. The Ministry's drive to integrate traditional medicine into the normal health care delivery has been given a booster by developing, publishing and launching the Recommended Herbal Medicines List (RHML), and Guidelines for evaluation of Herbal Medicines.

As part of search for traditional medicine for treatment of COVID-19, the Food and Drugs Authority (FDA) approved clinical trials for Nibima (*Cryptolepis Sanguinolenta*), the first herbal medicine submitted for the treatment of COVID-19. A Joint COVID-19 Vaccine Safety Review Committee (JCVSRC) was set up to assess adverse effects following COVID-19 vaccination.

The Food and Drugs Authority (FDA), in collaboration with the Food Agriculture Organization (FAO) and Korley Klotey Municipal Assembly has launched the Street Vended Food Licensing Scheme to improve safety of street vended food. As part of implementing the Good Manufacturing Practice (GMP) roadmap for pharmaceutical industries, three (3) manufacturing companies have successfully completed construction of new manufacturing facilities which will be commissioned in 2022. The FDA has expanded the scope of accredited tests for ISO 17025:2017 from 40 to 48 tests for medicines, medical devices, microbiology and cosmetics and household chemical substances. This is the largest scope under a single roof in Africa.

As part of improving and strengthening operations of regulatory Agencies, the Nurses and Midwives Council (N&MC) and Health Facilities Regulatory Agency (HeFRA) have digitized operations by going fully online. The Food and Drugs Authority has also deployed online, a software to increase efficiency in product evaluation and registration.

The Medical and Dental Council (MDC) has developed a policy on Practitioners Stamp, Name Tags and Professional Apparel that will go into full implementation in 2022. Health Facilities Regulatory Agency (HeFRA) has developed and launched Standards for 53 levels of care to enhance registration and monitoring of health facilities. In a similar vein, they have collaborated with key stakeholders to develop and launch regulatory standards for inspection in October 2021 to cover over 37 facility types including that of specialty care services to improve quality of regulatory practices for quality of care among health facilities.

Health Infrastructure

Addressing the infrastructure inequities in our health care service delivery remains a focus on the Ministry's agenda. So far, the Government's major infrastructure drive (Agenda 111) has been launched, the acquisition of sites and cadastral plans are ongoing and drawings for the facilities are completed.

Currently, cadastral plans have been received from 91 sites for the district hospitals. Award letters have also been issued to contractors for the district and psychiatric hospitals. For the Regional hospitals, mandate letters from the Ministry of Finance have been given to 3 regions (Western, Oti and Bono East) to enable them to raise funding for the construction of Agenda 111 facilities in 2022.

In addition to the ground breaking of the Agenda 111 project in 2021, the following on-going projects were also completed; Comprehensive Treatment and Quarantine facility at Dodowa, Construction of 4 District Hospitals at Sawla, Somanya, Buipe and a Polyclinic in Bamboi, Completion of 7 CHPS Compounds (Akaaso, Akaasu, Samproso, Koforidua (Near Offiso), Akyem Mampong, Tiawia, Ahankrasu)

The following COVID-19 projects are at different completion stages in 2021 will continue to be completed in 2022; Adakulu, Sewua, Zebilla, Pantang Dodowa, Asawinso, Goaso, Korlebu, Tarkoradi, Nalerigu, Aflao, Sunyani, Cape Coast Kumasi South, Keta and Elubo.

Drones

Zipline has begun the construction of two (2) new distribution centers and is scheduled to launch these centers by the end of 2021. The centers are at Anum in the Eastern Region and Abujuro in the Oti Region. When launched, the Anum center will cover 98% of Kwahu Afram Plains North, 70% of Kwahu Afram Plains South and 80% of Volta Region. The center will serve 366 health facilities, out of which 54% are hard to reach facilities located on islands, riverine communities, mountainous areas and areas geographically difficult to reach by roads. The Abujuro center will serve 95% of the Oti Region as well as the riverine parts of the Sene East, West and Pru East districts of the Bono East Region. Parts of the Northern and Savannah Regions will also be covered in the 80km radius. The center will cover 222 health facilities with 52% being hard to reach. Discussions are underway to set up centers at the Upper West, Savannah and the Bono Regions in 2022.

To support the Ministry in the distribution of COVID-19 vaccines requiring ultra-low storage temperatures, Zipline has procured three (3) 700L Ultra Low temperature freezers to aid the country

in the distribution of vaccines to hard-to-reach areas. Zipline currently has the capacity to store approximately 1 million Pfizer-Bio NTech doses, 468,000 Moderna doses, and 1.7 million doses of either AstraZeneca or Sputnik vaccines all at the same time. Zipline has delivered 273,034 doses of COVID-19 vaccines ranging from Astrazeneca, Janssen, Moderna and Pfizer. The Omenako and Mpanya Distribution Centres (DCs) continue to deliver HIV and Covid samples to testing sites.

COVID-19

Ghana recorded its first two cases on the 12th of March 2020. As of the 5th February, 2022, total confirmed cases of COVID-19 were 157,917 with an active case count of 527 and 1,426 unfortunate deaths. A total of 2,272,998 tests have been conducted with a positivity rate of 6.9.

To help curb the pandemic, the Ministry and its Agencies continued the implementation of National Strategic Response Plan outlined by H.E. The President at the onset of the pandemic with the following objectives:

1. Limit and stop the importation, detect, and contain the Virus;
2. Slow down and manage community spread;
3. Provide adequate medical care for COVID-19 cases;
4. Strengthen Governance, Coordination and Accountability of COVID-19 Response;
5. Minimize Impact of COVID-19 on Social and Economic Life; and
6. Increase Domestic Capacity and Self-Reliance

This has guided all activities carried out as part of the response to the pandemic in Ghana in a well-coordinated and organized manner in 2021.

Surveillance

In 2021, an enhanced contact tracing (multi-sectoral in nature) strategy was adopted to contain the spread of the virus earlier in the response. The Ministry and its Agencies carried out contact tracing across all regions with trained tracers. The Surveillance Outbreak Management Analysis and Response (SORMAS) has been the main e-surveillance tool nationwide to provide real time data across all the operational and strategic levels to inform response actions and policy decisions.

Laboratory testing

COVID-19 testing laboratories were expanded from two (2) at the inception of the pandemic in March, 2020 to 43 in July, 2021 (i.e., 43 COVID-19 PCR across the country including private laboratories. Greater Accra Region had 23 GeneXpert machines and the rest are spread across the country). The TB Control Program under the Global Fund provided GeneXpert cartridges to support COVID-19 testing. The Ministry developed Guidelines for both PCR and Antigen testing and is in use. Genomic sequencing has also started. Four mobile “BSL 3” Laboratories have been acquired, and are to be positioned at Ashanti, Greater Accra, Central and Volta regions. Currently about 13,000 PCR tests are done weekly.

Case management

Ghana confirmed cases of the Delta variant in 2021 leading to increasing case load for severe, critical and deaths. So far, the Ministry has provided 73 treatment centers nationwide with at least one treatment facility in each region including the Teaching Hospitals. The Ministry has ensured that emergency services and ambulances are readily available for referral, and transport of positive cases. Most treatment centers generally, are reasonably stocked with PPEs and logistics for patient care.

The WHO has supported Case Management with about 55 Oxygen Concentrators distributed to all Regions. In addition, the Ministry provided 49 Ventilators, 33 Patient monitors, 40 refurbished Tablets and distributed them to Treatment Facilities in all 16 regional hospitals, Teaching hospitals and some other major facilities in Greater Accra. Ventilators and patient monitors have also been installed in Western, Central, Bono East, Bono, Northern, UER, NER, Eastern to help set up High Dependency Units (HDUs) at regional levels for COVID-19 patients.

Regular training on infection prevention and control, critical and severe case management, and advanced life support have been part of efforts to build capacity of health workers in 2021, and all major treatment centres have a stockpile of PPEs and some supplementary medications for mild/moderate case.

COVID-19 update @ 5th February, 2022

Table 1: Positivity rate by Surveillance type for samples tested in Ghana Mar 2020- Feb. 2022

Surveillance Type	Total no. Tested	Total no. positive	Positivity rate
Routine Surveillance	476,86	58,06	12.2
Enhanced Contact Tracing	1,012,92	92,65	9.1
International travelers (KIA)	783,20	7,19	0.9
Total	2,272,99	157,91	6.9

Table 2: Confirmed cases of COVID-19 and Treatment Outcomes, Ghana as at 05 Feb. 2022

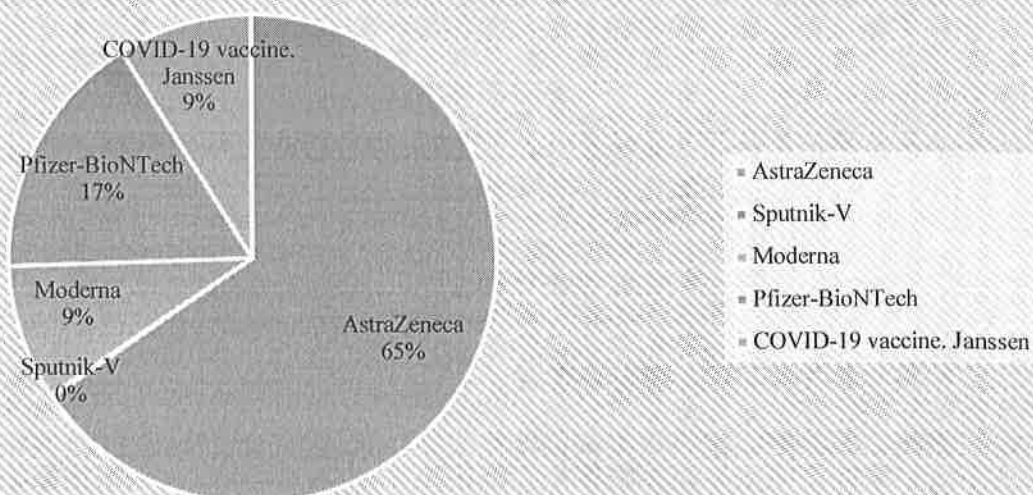
Category	Number of cases	Recovered/ Discharged	Severe	Critical	Dead	Active
Routine Surveillance	58,061	148,931	5	2	1,426	527
Enhanced Contact Tracing	92,658					
International travelers (KIA)	7,198	7,033	5	2	1,426	527
Total	157,917	155,964				

Vaccination

The Ministry has a vision of vaccinating the entire population. However, it has an initial target of 20m persons segmented by population groups and geography excluding children <16/18y and pregnant women. The vaccine delivery strategy includes static, outreach, mobile, campout or combination.

Total doses administered as at 7th February, 2022 is 11,835,359. The Pie chart below shows the various vaccines and total doses administered;

Distribution of Total Doses Administered by Vaccine type



Source: Expanded Programme on Immunization (EPI) – GHS

Update from Kotoka International Airport (KIA) (update as at 5th Feb. 2022)

The Kotoka International Airport (KIA), which was closed to international travel in March 2020, was re-opened on 1st September 2020.

Testing upon arrival was introduced at KIA as part of the surveillance measures and positive travelers are sent to designated isolation and treatment facilities. As at 5th February, 2022, a total of 783,205 Antigen tests had been conducted at KIA, with 7,198 passengers testing positive.

In 2022, the Ministry will aggressively pursue its vaccination campaign and implement all the proven interventions to stem down the pandemic. Systems will be put in place to ensure that you may need to be vaccinated to enter specific public places

National Health Insurance

In 2021, the National Health Insurance Authority (NHIA) improved its claims management processes with emphasis on e-claims and paperless systems at all four Claims Processing Centres. 60% of providers are expected to submit their claims electronically by Dec 2021. Eight regions (1,834 providers) have been trained in the electronic submission of claims. The Authority, as at September 2021, has achieved 83% (15,161,655) of its 2021 enrollment target of 55% (18,210,128) of the population of Ghana. As part of the tariff review processes, the Authority has carried out a health service costing which has gone through stakeholder validation. It has also revised credentialing tools to allow lower-level facilities (e.g., CHPS compounds, health centers etc) to be assessed and enrolled onto the scheme, and has also digitized credentialing application processes.

2.2 Budget Performance for 2021

Table 3: Expenditure Trends for the Medium Term 2019 - 2021

Source of Funds	2019		2020		2021	
	Approved Budget	Actual Expenditure	Approved Budget	Actual Expenditure	Approved Budget	Actual Expenditure
GoG	3,421.28	2,416.73	5,870.88	5,405.95	5,291.74	7,661.09
IGF	1,772.91	718.15	1,931.08	1,063.91	2,328.14	2,016.73
ABFA	47.5	43.58	57.4	41.61	32.43	10.59
Donor	795.82	548.85	992.97	859.62	881.29	1,137.22
Total	6,037.51	3,727.31	8,852.33	7,371.09	8,533.59	10,825.63

Source: 2019, 2020, 2021 MoH PBB Estimates. 2019, 2020, 2021 MoH Financial Reports

The Table 3 above shows budget allocations and expenditure trends from 2019, 2020 and 2021. The trend in health budget between 2019 and 2021 shows an increase in the overall health sector budget. The budget allocation to the health sector increased nominally by 46.6% between 2019 and 2020, but decreased by 3.6% between 2020 and 2021. The increase in 2020 was due to the release of additional funding to support COVID-19 activities. GoG remains the major financier to the sector with a share of 56.67%, 63.54% and 62.0% of the total annual budgets for 2019, 2020 and 2021 respectively. Compensation of Employees is the major spender of the GoG budget over the medium term constituting 97.86%, 92.45% and 99.1% respectively. IGF approved budget constituted 29.36%, 29.32% and 27.28% from 2019 to 2021 and has remained the second largest budget. The share of Donor funding has been oscillating from 13.38%, 14.87% and 10.3% in 2019, 2020 and 2021 respectively. ABFA which is primarily for capital investment takes up the least share of total health sector budget representing 0.79%, 0.87% and 0.38% in 2019, 2020 and 2021.

2.3 Challenges

The year 2021 was a difficult one for the sector because of the global COVID -19 pandemic. The following are some of the challenges that the sector encountered in the year under review:

- Inadequate essential health commodities to support routine and COVID-19 activities
- Delay in processing financial clearance onto the payroll system
- Poor health information management system
- Delays in submission of Agencies Budget Performance Reports
- Delays in payment of NHIS claims
- Inadequate e-learning facilities at various health training schools
- Inadequate resources – human, logistical and financial to enable the agencies execute their mandate.
- Inadequate capacity of Regulatory Agencies to monitor health professionals, facilities, and products.
- Increased number of quack professionals and fake products.
- Impact of COVID-19
 - Limited funds to support routine and COVID-19 activities
 - Pressure (increased workload, etc) on health facilities, equipment, and health workers due to the COVID-19 pandemic
 - Utilization of health facilities due to the COVID-19 pandemic
 - Disruptions in academic calendar of Health Training Institutions due to the COVID-19 pandemic

CHAPTER THREE

3.0 Priority Areas for 2022

The Ministry has developed a new 2022-2025 HSMTDP to replace the current 2018-2021 HSMTDP which expires in December 2021. With 2022 marking the first year of the implementation of the plan, the Ministry will focus on the following priority areas;

Essential services for the population

- Increase the availability of essential health service packages across the continuum of care at all levels
- Improve EPI coverage in urban centres
- Continue the implementation of the policy on HIV Test, Treat and Track (90 90 90), Prevention of Mother to Child Transmission (PMTCT) and OptionB plus, and reduction of Mother to Child Transmission (MTCT) of HIV Elimination of mother-to-child transmission of HIV
- Improve school health and nutrition services
- Establish the Ghana CDC
- Establish the National Vaccine Manufacturing Institute

Management of clinical and public health emergencies

- Strengthen institutions to deliver responsive pre-hospital and clinical emergency services
- Set up and strengthen institutions to deliver responsive public health emergency services

Improve quality of care and information management

- Institutionalize quality standards and practices in the delivery of health services
- Strengthen the management and quality assurance of national laboratories and infectious disease centers
- Set up and make functional health systems research and innovation framework
- Strengthen regulation to improve quality of care among health facilities

Enhance efficiency in human resource performance

- Ensure the production, equitable deployment and retention of health workforce
 - Increase the pre-service and in-service training of healthcare workers in management of NCDs
 - Increase the national capacity of delivery of mental health services
 - Enhance human resource capacity for public health emergencies and medical emergency services

Health policy, financing and system strengthening

- Increase GoG revenue collection and allocation to the health sector
- Increase population coverage and sustainability of health insurance
- Strengthen the capacity of MoH and its agencies to mobilize resources
- Increase active coverage of the NHIS, particularly indigent categories

Institutionalize reforms in sector effectiveness

- Establish sustainable programmes for prevention, screening and early detection of NCDs, including cancers
- Strengthen and ensure compliance with referral processes and procedures between all levels of care
- Increase partnerships for better access to health services through the One-Health approach
- Strengthen the Health Regulatory Agencies for improved efficiency

- Improving health infrastructure at Primary, Secondary and Tertiary facilities
- Continue the implementation of the Supply Chain Master Plan
- Improve and harmonize provider payment systems to increase the efficiency of spending

Capital Investment Output for 2022

Improving health infrastructure at the primary health care level including:

- Accelerate the construction of Primary, Secondary and Tertiary facilities

Ongoing infrastructure projects

- Kumawu, Fomena and Takoradi European Hospital Staff Housing under the Seven (7) District Hospitals Project, Construction of University of Ghana Medical Centre (Phase II)
- One (1) District Hospital and Five (5) Polyclinics in Western Region by Orio at Akontombra, Bogoso, Wassa Dunkwa, Mpohor, Elubo and Nsuaem
- Retooling and equipping of selected 4 Health facilities in the Eastern Region at Aburi, Kibi, Atibie and Mampong
- Phase I Construction of Koforidua Regional Hospital by JV Tyllium-Ellipse Project UK Ltd.

2022 COVID-19 Outlook

In 2022, the Ministry and its Agencies will continue to implement the proven interventions adopted since the outbreak of the COVID-19 pandemic i.e.

- Surveillance,
- Risk Communication,
- Containment and Case Management
- Testing and Laboratory Services
- Vaccination
- Address the problem of oxygen availability;
 - Develop a Medical Oxygen Policy and Strategy to make it mandatory for all health facilities with bed capacities above 20 to have oxygen production systems.
 - All the 17 new COVID-19 treatment centres under construction will have oxygen production systems
 - Establish a National Vaccine manufacturing Institute

Table 4: Vaccine pipeline

COVAX	Vaccine Type	No of Doses	Expected date of Delivery	Origin	Comments
US Gov't(via COVAX)	Pfizer	1,330,290	September	US	Definitive date of delivery to be confirmed
US Gov't(via COVAX)	Moderna	1,229,620	August/September	US	Definitive date of delivery to be confirmed
COVAX	AstraZeneca	249,600	September	UK	Definitive date of delivery to be confirmed
AU	*J&J	244,800	August/September	TBD	To be delivered monthly by AU-AVAT
AU	*J&J	16,822,400	3 rd through 4 th Qtr. 2021	TBD	To be delivered monthly by AU-AVAT
COVAX	AstraZeneca	95,600	From end of August 2021	UK and EU sites	Dose-sharing from Norway via COVAX

CHAPTER FOUR

4.0 Action Plan for 2022

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
Management & Administration	1.1	Strengthen Management and Administration of the Sector	12 Directors' meetings held	X	X	X	X	MOH General Administration Directorate and Mental Health Authority
			4 Inter-Agencies' meetings organized	X	X	X	X	
			No. of special day celebrated	X	X	X	X	
			29 performance contracts signed	X				
			4 staff durbars organized	X	X	X	X	
		Strengthen Legal framework of the Sector	22 health bills and LIs developed	X	X	X	X	
			Protocols for mental health care developed		X	X		
			Mental health guidelines incorporated into the criminal justice system	X	X	X	X	
			Mental health tribunal established	X	X	X	X	
		Strengthen Partnership	No. of Partnership meetings held	X	X	X	X	
			No. of International/Local committee meetings hosted	X	X	X	X	
			No. International/Local committee meetings Attended	X	X	X	X	
		Carry out Preventive maintenance activities	Quarterly Maintenance of MoH HQ building	X	X	X	X	
			Quarterly servicing of Vehicle	X	X	X	X	
			Quarterly Maintenance of equipment	X	X	X	X	
		Provide Public relations services	No. of Press briefing held	X	X	X	X	MOH Health Research Statistics & Information Management Directorate
	1.2	Strengthen Health Information Management System	Quarterly facility ICT maintenance visits conducted	X	X	X	X	
			Mental health data included in the national health information system		X	X		
			Quarterly updates of MoH website carried out	X	X	X	X	
			NCDs data included in the national health information system		X	X	X	
			NHIS information system linked to the District Health Information Management System (DHIMS2)	X	X	X	X	
			Research Policy developed		X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Develop Research Policy	E-health policy developed	X	X	X		
		Expand Health LMIS coverage E-and	Quarterly monitoring visits to Health Electronic Medical Records System project sites	X	X	X	X	
			No. of new Health Electronic Medical Records System sites established	X	X	X	X	
	1.3	Develop/Review of Policies	Health Financing Policy developed	X	X	X		MOH PPME, RSIM, Infrastructure, Technical Coordination, TAMD Directorate s and Mental Health Authority
			Policy on Integration of Herbal Medicine into the main health care system developed		X	X	X	
			Policy on Intellectual property rights on Traditional Medicine developed	X	X	X		
			Health Sector Infrastructure Strategy developed	X	X	X		
			National Policy on suicide developed	X	X			
			Medical oxygen policy and strategy developed	X	X	X		
			Referral Policy revised	X	X	X		
			Capital investment plan revised	X	X	X		
			Annual Programme of Work document developed	X				
			Annual Health Financing Implementation Plan developed	X	X	X		
			Number of Policies disseminated	X	X	X	X	
		Strengthen Budget development and management	2023 Sector Programme Based Budget developed			X	X	
			Annual/Quarterly Budget Performance Reports produced	X	X	X	X	
			Quarterly Budget Committee meetings held	X	X	X	X	
			Semi-annual budget monitoring conducted		X		X	
			Quarterly Parliamentary Select Committee Meetings held	X	X	X	X	
		Strengthen Sector Public Financial Management System	No. of PFM meetings held	X	X	X	X	
			PFM Plan developed		X	X		
			IGF Guideline developed	X	X	X		
			2021 National Health Account document developed			X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Monitor and evaluate the sectors Programmes and Projects	Holistic Assessment report produced	X	X			
			Joint Monitoring reports produced		X		X	
		Establish Ghana Vaccine Institute	National Vaccine Institute Policy developed.	X	X	X		
			Secretariat established	X	X	X		
			National Vaccine Institute Bill passed		X	X	X	
		Establish Ghana Centre for Disease Control	Ghana CDC secretariat established					
			CDC operational plan developed	X	X	X	X	
			CDC LI drafted					
		Mobilize Resources for the Sector	Mental health fund established		X	X		
			Resource mobilization plan developed	X				
			GAVI transition plan reviewed		X	X		
	1.4	Strengthen PFM activities/Strengthen Internal Audit Operations	Annual/Quarterly financial statements produced	X	X	X	X	MOH Finance & Audit Directorates
			Quarterly financial monitoring visits to agencies conducted	X	X	X	X	
			Train financial/non-financial managers on GIFMIS		X	X		
			Annual/Quarterly Audit reports produced	X	X	X	X	
			No. of Audit conferences arranged	X	X	X	X	
			Train financial/non-financial managers on PFM guidelines		X	X		
	1.5	Develop/Implement Sector-Wide Procurement Plan	Annual health sector procurement plan developed	X	X			MOH Procurement Directorate
			Percentage of essential health commodities procured	X	X	X	X	
			Procured COVID-19 vaccines	X	X	X	X	
			Procured COVID-19 commodities	X	X	X	X	
			No. of facilities implementing the LMIS	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			Quarterly visits to LMIS sites conducted	X	X	X	X	
			Percentage of procurement plan implemented	X	X	X	X	
			Quarterly National quantification activities conducted	X	X	X	X	
			Quarterly quality assurance monitoring visits undertaken	X	X	X	X	
			Quarterly Debt Recovering Monitoring visits undertaken	X	X	X	X	
			No. of Procurement Contract Agreements signed	X	X	X	X	
	1.6	Strengthen HR policy development	Policy on Attraction and Retention of Health Workers to deprived areas developed	X	X			MOH Human Resource Directorate
			Free Medical Care for all Health Workers explored		X	X		
			Scheme of Service for health professionals developed	X	X			
		Recruit, post and promote health staff	Annual Financial Clearance obtained		X	X	X	
			No. of health professionals allocated to Agencies		X	X	X	
			No. of staff placed on IPPD	X	X	X	X	
		Coordinate Staff management	Quarterly staff welfare meetings held	X	X	X	X	
			Quarterly Staff Audit reports developed	X	X	X	X	
		Strengthen training of health professionals	No. of Health Professionals sponsored for training		X	X	X	
			No. of Partnership training programmes held	X	X	X	X	
			No. of in-service training organized	X	X	X	X	
Health Service Delivery	2.1	Improve Primary and Secondary Health Service Indicators	Total outpatient visits	X	X	X	X	GHS, CHAG, Ahmadiyya Health Service,
			Total in-patient admissions	X	X	X	X	
			ANC attendance	X	X	X	X	
			Neonatal deaths per 1,000 institutional live births	X	X	X	X	
			skilled birth rate	X	X	X	X	
			Number of deaths due to malaria among children under 5	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			Proportion of children fully immunized by age 1 (using Penta3 as proxy)	X	X	X	X	
			Number of maternal deaths audited	X	X	X	X	
			Malaria prevalence rate	X	X	X	X	
			Percentage of children sleeping under ITNs	X	X	X	X	
			HIV infection rate	X	X	X	X	
			HIV infection rate among pregnant women	X	X	X	X	
			Stillbirth rate	X	X	X	X	
			Number of new TB cases detected	X	X	X	X	
			No. of TB defaulters	X	X	X	X	
			TB treatment success rate	X	X	X	X	
			*Percentage of stunted growth in children	X	X	X	X	
			Proportion of Under 5 years death per 1,000 live births	X	X	X	X	
			Proportion of under 1 death per 1,000 live births	X	X	X	X	
			Contraceptive acceptor rate	X	X	X	X	
			No. of health centers participating in the networks of practice	X	X	X	X	
			Percentage of essential medicine/commodities available	X	X	X	X	
			Specialist Outreach Services undertaken	X	X	X	X	
		Implement NCD policy and strategy	Collection, entry, analysis, and utilization of data on NCDs in Ghana improved	X	X	X	X	
			Registry for NCD disease e.g., cancer, hypertension etc. established	X	X	X	X	
			COVID-19 National action plan implemented	X	X	X	X	
		Implement the National Immunization Programme	No. of children immunized (penta 3 proxy)	X	X	X	X	
		Expand Traditional and Alternative medicine	No. of traditional medicine wings created in public facilities	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Implement the Last Mile Distribution Plan	No. of facilities implementing the LMIS	X	X	X	X	
		Implement the Essential Health Services Package	Essential Health package implemented in all facilities	X	X	X	X	
			Neglected tropical diseases integrated into the essential health services package	X	X	X	X	
		Strengthen Disease Surveillance and Control	No. of maternal death recorded and audited	X	X	X	X	
			No. of tablets procured (support SORMAS)	X	X	X	X	
			No. of port health points established at frontiers	X	X	X	X	
			No. of disease surveillance and control officers employed	X	X	X	X	
			No. of disease surveillance and control officers trained	X	X	X	X	
		Promote Health Education	No. of public education programmes conducted	X	X	X	X	
		Strengthen Disposal of medical waste	Percentage of medical waste disposed off properly	X	X	X	X	
			No. of incinerators constructed	X	X	X	X	
	2.2	Improve Tertiary and Specialised Health Service Indicators	Total outpatient visits	X	X	X	X	Teaching Hospitals and Psychiatric Hospitals
			Total in-patient admissions	X	X	X	X	
			ANC attendance	X	X	X	X	
			Neonatal deaths per 1,000 institutional live births	X	X	X	X	
			skilled birth rate	X	X	X	X	
			Under 5 malaria death	X	X	X	X	
			Number of maternal deaths audited	X	X	X	X	
			Malaria prevalence rate	X	X	X	X	
			HIV infection rate	X	X	X	X	
			HIV infection rate among pregnant women	X	X	X	X	
			Stillbirth rate	X	X	X	X	
			Number of new TB cases detected	X	X	X	X	
			No. of TB defaulters	X	X	X	X	
			TB treatment success rate	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			Proportion of Under 5 years death per 1,000 live births	X	X	X	X	
			Proportion of under 1 death per 1,000 live births	X	X	X	X	
			Contraceptive acceptor rate	X	X	X	X	
			Percentage of essential medicine/commodities available	X	X	X	X	
			No. of Specialist Outreach Services undertaken	X	X	X	X	
			COVID-19 National action plan implemented	X	X	X	X	
		Implement NCD policy and strategy	Collection, entry, analysis, and utilization of data on NCDs in Ghana improved	X	X	X	X	
			Registry for NCD disease eg cancer, hypertension etc established	X	X	X	X	
				X	X	X	X	
		Expand Traditional and Alternative medicine	No. of traditional medicine wings created in tertiary and specialized facilities	X	X	X	X	
		Strengthen Disease Surveillance and Control	No. of monitoring visits conducted	X	X	X	X	
		Promote Health Education	No. of public education programmes conducted	X	X	X	X	
		Strengthen Disposal of medical waste	Percentage of medical waste disposed off properly	X	X	X	X	
			No. of incinerators constructed	X	X	X	X	
		Provide mental health services	Total outpatient visits	X	X	X	X	
			Total in-patient admissions	X	X	X	X	
			Mental health screening integrated into school health programmes	X	X	X	X	
			No. of training workshops for general health workers General health care workers to detect and treat mental health conditions	X	X	X	X	
			No. of follow-up home visits carried out	X	X	X	X	
	2.3	Develop Herbal and	No. of Herbal medicines formulated	X	X	X	X	Centre For Plant

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Alternative medicine	No. of Herbalist products analyzed	X	X	X	X	Medicine Research (CPMR)
			Acres of Herbal farms cultivated	X	X	X	X	
		Conduct operational Health Research	Number of research publications produced	X	X	X	X	
			Number of Scientific Conferences, workshops and short courses	X	X	X	X	
			Number of research proposals reviewed	X	X	X	X	
			Collection, entry, analysis, and utilization of data on NCDs in Ghana improved	X	X	X	X	
			Disseminate research findings	X	X	X	X	
	2.4	Promote Pre-Healthcare Services	No. of Functional Ambulances	X	X	X	X	NBS, NAS, SJAB
			No. of ambulances procured	X	X	X	X	
			No. of Cases Handled	X	X	X	X	
			Average Response Time estimated	X	X	X	X	
			No. of trained EMT Drivers and Emergency Medical Dispatchers	X	X	X	X	
			Percentage of voluntary unpaid blood donations	X	X	X	X	
			Blood collection index (BCI) per 1000 population	X	X	X	X	
			Percentage of samples tested for all transfusion transmissible infections (TTIs)	X	X	X	X	
			Percentage of whole blood donations separated into components (FFP)	X	X	X	X	
			No. of BLSS activities carried out	X	X	X	X	
			No. of educational talks on blood donations organized	X	X	X	X	
			No. public education on basic life support systems (BLSS) for emergencies	X	X	X	X	
Human Resource for Health Development and Management	3.1	Admit and certify basic-level health professionals	No. of new students admitted			X	X	HTIs, HR
			No. of nurses trained	X	X	X	X	
			No. of midwives trained	X	X	X	X	
		Introduce new training programmes	Pre-service training curricula reviewed to include NCD programmes	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
	3.2		Training institutions upgraded to meet accreditation criteria	X	X	X	X	
			Pre-service training programme re-organized to focus on middle-level specialization	X	X	X	X	
			No. of new specialized programmes in Health Training Institutions introduced	X	X	X	X	
		Admit and certify middle-level health professionals	No. of new students admitted			X	X	
			No. of nurses trained	X	X	X	X	
			No. of midwives trained	X	X	X	X	
			No. of Allied health professionals trained	X	X	X	X	
		Introduce new training programmes	Training institutions upgraded to meet accreditation criteria	X	X	X	X	
			Post-basic training programme re-organized to focus on middle-level specialization	X	X	X	X	
			No. of new specialized programmes in Health Training Institutions introduced	X	X	X	X	
	3.3	Admit and certify Specialized Health Professional	No. of Resident Doctors admitted	X	X	X	X	GCPS, GCNM, GCPharm
			No. of Resident Pharmacists admitted	X	X	X	X	
			No. of Resident Nurses admitted	X	X	X	X	
			No. of Specialist doctors trained/graduated	X	X	X	X	
			No. of Specialist pharmacists trained/graduated	X	X	X	X	
			No. of Specialist Nurses trained/graduated	X	X	X	X	
		Conduct CPDs	Number of CPDs conducted (Doctors)	X	X	X	X	
			Number of CPDs conducted (Pharmacists)	X	X	X	X	
			Number of CPDs conducted (Nurses/Midwives)	X	X	X	X	
		Improve Specialist training	No. of new curricula introduced to strengthen the training of specialists	X	X	X	X	
			No. of new faculties established	X	X	X	X	
			No. of College Libraries upgraded	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			No. of new specialized programmes in Health Training Institutions introduced	X	X	X	X	
			Number of clinical sites engaged, monitored and supervised	X	X	X	X	
			Number of new programmemes developed	X	X	X	X	
Health Sector Regulation	4.1	Accredit and License health facilities	No. of new health facilities licensed	X	X	X	X	HeFRA
			No. of facilities licenses renewed	X	X	X	X	
			Number of facilities with valid licenses	X	X	X	X	
			No. of inspection visits conducted	X	X	X	X	
			Number of facilities monitored	X	X	X	X	
			Number facilities registered through Online Management Information System	X	X	X	X	
	4.2	Regulate health professionals (Doctors, Pharmacists and Nurses and Allied Health personnel)	No. of Doctors in good standing	X	X	X	X	MDC, GPC, PC, N&MC
			No. of Nurses in good standing	X	X	X	X	
			No. of Pharmacist in good standing	X	X	X	X	
			No. of Allied health personnel in good standing	X	X	X	X	
		Undertake Career development Programmes	No. of CPDs conducted	X	X	X	X	
			No. of licensure exams conducted	X	X	X	X	
			No of internship training programmes accredited	X	X	X	X	
			No. of Specialized Training Institutions accredited	X	X	X	X	
			Conduct research and evaluate standards of education, training and practice of health professionals	X	X	X	X	
			Implement policy on Practitioners Stamp, Name Tags and Professional Apparel	X	X	X	X	
	4.3	Licensing of medical products facilities	640 manufacturing facilities licensed	X	X	X	X	FDA
			24 storage facilities licensed	X	X	X	X	
		Safety monitoring of medical products	5,560 adverse effect reports received.	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Registration of medical products	10,484 products registered	X	X	X	X	
		Product quality monitoring	77% of products that passed testing.	X	X	X	X	
		Quality control testing of medical products	87% of products tested.	X	X	X	X	
		Market surveillance of medical products	16,648 outlets visited.	X	X	X	X	
	4.4	Licensing of food facilities.	1,900 manufacturing facilities licensed	X	X	X	X	
			444 storage facilities licensed	X	X	X	X	
		Registration of food products	9,276 products registered	X	X	X	X	
		Product quality monitoring	2% of products that passed testing.	X	X	X	X	
		Quality control testing of food products	95% products tested.	X	X	X	X	
		Market surveillance of food product.	15,532 outlets visited.	X	X	X	X	
		Permitting of food service establishment and street food vendors.	52 street food vendor permits issued.	X	X	X	X	
			684 food hygiene permits issued.	X	X	X	X	
		Monitoring of iodation of salt	200 permits issued	X	X	X	X	
		Enforcement of international code for marketing of breast milk substitutes LI1667.	2% of non-conforming products identified ¹ .	X	X	X	X	

¹ Antimalarials

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Implement food safety management systems in food manufacturing industries	70% of non-conforming facilities.	X	X	X	X	

CHAPTER FIVE

5.0 2022 Health Sector Programme Based Budget

The challenges of the COVID-19 pandemic continued to prevail through the year 2021 vis-à-vis the demand for quality health care by the population in the face of limited funding. This section looks at the available fiscal space for the sector in the year 2022.

Table 5: Breakdown Of 2022 Budget by Source of Funding

2022 BUDGET				
Source of Funds	Compensation of Employees	Goods and Services	Capex	Total
GoG	6,165,200,000	336,932,000	209,695,000	6,711,827,000
IGF	407,821,000	2,162,824,000	377,483,000	2,948,128,000
Donor	-	78,482,000	1,225,734,000	1,304,216,000
ABFA	-	-	32,424,000	32,424,000
TOTAL	6,573,021,000	2,578,238,000	1,845,336,000	10,996,595,000

The total approved health sector budget is GHC10.99billion out of which GoG (which is the main source of funding for 2022) contributes 61.04%, IGF 26.81%, Donor 11.86% and ABFA 0.29% respectively. Compensation of employees continues to remain the major consumer of the health budget taking up 59.77% of the total health budget. Goods & Services also takes up 23.45%, while Capex takes up 16.78% of the total health budget. Out of the total GoG budget of GHC6.71billion, Compensation of employees constitutes 91.86%, Goods & Services 5.02% and Capex 3.12%.

Table 6: Nominal Increase

NOMINAL INCREASE			
Source of Funds	2021	2022	Percentage change
GoG	5,291,740,123	6,711,827,000	26.84%
IGF	2,328,137,112	2,948,128,000	26.63%
Donor	881,287,988	1,304,216,000	47.99%
ABFA	32,425,000	32,424,000	-0.003%
TOTAL	8,533,590,223	10,996,595,000	28.86%

The table above shows the nominal change in the approved budget from 2021 to 2022. 2022 has seen an overall nominal increase in the Health Budget by 28.86%. This is as a result of an increase in GoG by 26.84%, IGF by 26.63% and Donor by 47.99%. ABFA however saw a marginal decrease of 0.003

Table 7: Breakdown of 2022 Budget by Budget Programs

Budget Program	Proposed Budget	Source of Fund				Total	% Allocation
		GOG	IGF	DONOR	ABFA		
Management & Administration	1,979.39	711.43	9.80	1,225.73	32.42	1,979.39	18%
Health Service Delivery	8,137.48	5,143.86	2,915.13	78.48	-	8,137.48	74%
Human Resource for Development	329.90	223.92	105.98	-	-	329.90	3%
Health Sector Regulation	549.83	137.66	412.17	-	-	549.83	5%
Total	10,996.60	6,216.87	3,443.09	1,304.22	32.42	10,996.60	100%

The budget program, Management and Administration provides strategic direction and administrative support for the entire sector, and it is mainly carried out by the MoH headquarters. This program constitutes 18% of the approved budget. Health Service Delivery consists of preventive, promotive, curative, palliative, emergency care, mental health and rehabilitative care at the primary, secondary and tertiary levels including pre-hospital services and health research. Majority of the service delivery activities are carried out under this program and therefore constitutes 74% of the total approved budget. The training of adequate and highly skilled health professionals is carried out by the health training institutions and specialized colleges under the Human Resource for Health Development program. This program constitutes 3% of the total budget. The Health Sector Regulation program regulates health facilities, professionals, pharmaceuticals and medicinal health products, as well as food and non-medicinal health products. This is carried out by Health Regulatory Agencies by ensuring that standards of health facilities, professionals, pharmaceuticals, food and food products are enforced. This program takes up 5% of the total budget.

The table below summarizes the various Programs and their share of budget by source of funding.

Table 8: Breakdown of 2022 Budgetary Needs

Item	GoG	IGF	Donor	Need
Compensation	7,495,285,123	380,736,389	-	7,876,021,512
Goods & Service	8,910,108,380	2,321,024,546	1,033,315,966	12,264,448,892
Capex	506,562,318	272,091,101	258,328,992	1,036,982,411
Total	16,911,955,821	2,973,852,036	1,291,644,958	21,177,452,815

Table 9: 2022 Gap Analysis

GAP ANALYSIS			
Item	Need	Provision	Gap
Compensation	7,876,021,512	6,573,021,000	1,303,000,512
Goods & Service	12,264,448,892	2,578,238,000	9,686,210,892
Capex	1,036,982,411	1,845,336,000	(808,353,589)
Total	21,177,452,815	10,996,595,000	10,180,857,815

Thus, the tables X and Y above summarizes the actual funding needs of the sector and the budgetary allocations provided by the Ministry of Finance for the fiscal year 2022. The sector need is 21.17 billion out of which 7.8 billion is for compensation, 12.2 billion for Goods & Services and 1 billion for Capex. The sector was allocated a budget of 10.99 billion which comprises 6.57 billion compensation, 2.58 billion Goods and Services and 1.85 billion Capex. This will result in a gap of 10.18 billion.

Table 10: Trends in Health Share of Total Government Expenditure, 2017 – 2021

	2018	2019	2020	2021	2022
MOH	4,422,348,243	6,037,506,718	6,587,092,478	8,533,590,233	10,996,595,000
TOTAL MDA	29,782,315,852	38,154,370,171	44,741,860,202	48,058,278,721	85,853,820,000
TOTAL GOVERNMENT BUDGET (TGB)	33,785,144,071	42,128,998,696	49,146,193,583	129,032,804,203	145,472,323,000
MOH share of total MDAs	14.80%	15.80%	14.70%	17.76%	12.81%
MOH share of TGB	13.10%	14.30%	13.40%	6.61%	7.56%
Abuja Target	15.00%	15.00%	15.00%	15.00%	15.00%

CHAPTER SIX

6.0 Performance Assessment Framework

6.1 Sector Monitoring and Evaluation

Monitoring and Evaluation remains a key component of assessing the performance of the sector. The assessment of the 2022 APOW will be based on agreed monitoring and evaluation tools of the Ministry and its stakeholders. The sector-wide assessment will be based on the Holistic Assessment tools. Bi-annual monitoring by the Ministry and Donors will be adopted as part of the monitoring processes of the sector. In addition, routine monitoring by the various Agencies will be an integral part of the monitoring of the 2022 APOW. The DHIMS will be the main source of information for monitoring and evaluation of the sector for the year 2022. The agreed 2022 milestones in the HSMTDP will be closely monitored as well.

The table below represents the Health Sector indicators and targets for the medium term:

Sector wide Indicators & Targets

Goal 1: Increased access to quality essential health care and population-based services for all by 2030										
Programme 1: Management and Administration										
Sub- Programme 1.1: General Management										
Indicators	Indicator Definition	Indicator Type ²	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of Planned Preventive maintenance activities implemented	Number of scheduled PPM (3 times servicing per year) implemented divided by the number of scheduled PPM for the period multiplied by 100	Process	N/A	50	60	70	80	1. Region	2	NAS
Percentage of ambulance service stations that are well-functioning (Ambulance, required number staff)	Number of ambulance stations that are well functioning divided by the total ambulance stations multiplied by 100	Outcome	100	100	100	100	100	1. Region 2. District	1	NAS
Programme 1: Management and Administration										
Sub- Programme 1.2: Health Research, Statistics, and Information Management										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Proportion of primary health facilities reporting no stock-out of tracer medicines	Number of primary health facilities reporting no stock out over the reporting period divided by the number of primary health facilities multiplied by 100	Outcome	Not readily available	70	80	90	95	1. Facility type 2. District 3. Region	2	MOH-PPME, GHS

² Indicator type refers to whether indicator is an input/process/output/outcome/impact indicator.

Percentage of health facilities using electronic medical records	Number of health facilities using electronic medical records divided by total number of health facilities multiplied by 100	Output	Not readily available	20	40	60	80	1. Facility type 2. District 3. Region	2	MOH-RSIM, GHS
Percentage of health facilities reporting service data to DHIM2 on time	Number of facilities reporting data to DHIMS2 on time divided by the total number of facilities required to report, multiplied by 100	Output	85	90	95	95	95	1. Facility type 2. District 3. Region	2	MOH-PPME/RSIM GHS-PPMED
Percentage of facilities reporting complete data to DHIMS2	Number of facilities reporting complete data to DHIMS2 divided by the total number of facilities required to report, multiplied by 100	Outcome	95	96	97	98	98	1. Facility type 2. Geographic region (district/region)	2	MOH-PPME/RSIM GHS-PPMED
Percentage of facilities births registered with CRVS (Civil Registration & Vital Statistics)	Number of facilities births registered with CRVS divided by total number of facilities required to register	Outcome	Not readily available	70	80	85	95	1. Facility type 2. Geographic location (district/region)	2	MOH-RSIM GHS-PPMED
Percentage of private health facilities reporting into the DHIMS2	Number of private health facilities reporting into DHIMS2 divided by total number of private health facilities, multiplied by 100	Outcome	14.5	20	40	60	80	1. Facility type 2. Geographic location (district/region)	2	MOH-RSIM GHS
Percentage of scheduled Data Validation Feedbacks sent to regions	Number of scheduled Data Validation Feedbacks sent to regions divided by total number of data validation, multiplied by 100	Output	N/A	70	80	90	100	1. Hospital type (district, region) 2. Geographic location (district/region)	1	GHS-PPME

Percentage of scheduled Quarterly Data Quality Audits conducted at Regional/District levels	Number of Quarterly Data Quality Audits conducted at Regional/District levels divided by number of scheduled Data Audits	Output	50	75	100	100	100		2	MOH-RSIM GHS-PPME
Programme 1: General Administration and Management										
Sub- Programme 1.3: Health Policy Formulation, Planning Budgeting Monitoring and Evaluation										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of planned interventions to address dietary deficient conditions implemented	Number of planned interventions implemented divided by number of planned interventions multiplied by 100	Process		40	60	70	80	1. Region 2. District	2	GHS Relevant stakeholders
Percentage of School based infirmaries established in all private and public basic schools	Number of Basic schools (Public and Private) with infirmaries divided by the total number of basic schools (Public and Private) multiplied by 100	Process	Not readily available	40	50	60	80	1. Region 2. District	2	GHS Relevant stakeholders
Percentage of facilities with quality improvement plans developed	Number of facilities with quality improvement plans developed divided by total number of facilities	Process	Not readily available	20	40	60	80	1. Facility type 2. Geographic location (district/region)	2	MOH-PPME GHS
Percentage availability of essential medicines	Number of available tracer medicines divided by defined list of tracer medicines (about 20) multiplied by 100	Outcome	N/A					1. Facility type 2. Geographic location (district/region)	2	MOH Procurement, TCD GHS
Percentage of Hospitals with Functional Drug and Therapeutic Committees	Number of hospitals with Functional Drug and Therapeutic Committees established divided by total number of hospitals	Output	Not readily available	40	60	80	100	1. Hospital type (district, regional) 2. Geographic location (district/region)	1	GHS

Percentage of Facilities with Telemedicine integrated into routine service delivery	Facilities with Telemedicine integrated into routine service delivery divided by total number of health facilities, multiplied by 100	Outcome	N/A					1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH-PPMED/TCD/R-SIM-GHS
Percentage of planned UHC interventions/activities implemented by the private sector	Number of planned interventions implemented divided by total number of planned interventions, multiplied by 100	Output	Not readily available	10	20	30	40	1. Types (infrastructure, logistic, training, advocacy, etc)	2	MOH-PPMED/R-SIM
Annual Holistic Assessment of the Health Sector conducted		Process	Holistic assessment conducted for 2020 and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMTDP and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMTDP and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMTDP and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMTDP and reported produced		1	MOH/PPMED
Percentage of action items in the aide memoire addressed/completed by the end of the year	Number of actions implemented	Output	Not readily available	80	90	95	100		2	MOH/PPMED
Develop common guideline to harmonize regulation of facilities, licensing, accreditation, and credentialing passed		Output	No existing harmonized guideline for regulating healthcare facilities	Common guideline developed harmonizing all existing tools for accreditation and credentialing					1	MOH/Legal Unit Relevant institutions
Percentage of current Health expenditure devoted to PHC		Outcome	83	85	87	90	92	1. Facility type 2. Location (district/region)	2	MOH/Finance/PPMED
Percentage of planned health policies developed	Number of policies developed divided by total number of planned policies, multiplied by 100	Process	No existing policies	40	60	80	100		2	MOH/PPMED Relevant agencies

Percentage of planned health policies reviewed	Number of policies reviewed divided by total number of planned policies to be reviewed, multiplied by 100	Process	Current health policies to be reviewed	40	60	80	100		2	MOH/PPME Relevant agencies
Government health expenditure as % of total government expenditure	Ratio of government health expenditure to total government expenditure multiplied by 100	Outcome	9	10	11	13	15		1	MOH/PPME
Out-of-pocket as % of Current Health Expenditure (CHE)	Put-of-pocket payments made for health services divided by total current health expenditure, multiplied by 100	Outcome	38 (WHO NHA database, 2018)	36	34	32	30		1	MOH/PPME/GSS
NHIS population coverage	No. of active NHIS members divided by estimated population, multiplied by 100	Output	52.6	57	62	67	70	1. Member category 2. Sex 3. Geographic location (district/region/national)	2	MOH/NHIA
Average time of claims settlement	No. of months taken to settle healthcare provider claims upon receipt	Output	3	2	2	1	1		2	MOH/NHIA
Percentage of claims expenditure (Medical cost ratio)	Ratio of medical claims paid to total expenditure for a given fiscal year	Output	73 (comprise 61% curative and 12% preventive services payments)	74	76	78	80		2	MOH/NHIA
Proportion of scheduled stakeholder engagements organized to review essential services	Number of meetings organized to review essential services in a year within the health sector	Process	Not readily available	60	100			1. Region 2. District	2	MOH Relevant Agencies
Percentage of regions with Emergency Command and Call Centres established		Process	N/A	55	70	85	100	1. Region	1	GHS

Percentage of districts with at least one operational Network of service providers established	Number of districts with at least one Operational Network of Practice established divided by the total number of districts multiplied by 100	Process	N/A					1. District	2	GHS/relevant stakeholders
Percentage of districts with network of service providers established		Output	Not readily available	10	20	30	40	1. Region 2. District	2	GHS/relevant stakeholders
Proportion of Regions with costed Epidemic Preparedness Plan	Number of regions with Epidemic Preparedness Plan divided by total number of regions multiplied by 100	Output	Not readily available	50	60	70	80	1. Region	1	NAS
Programme 1: Management and Administration										
Sub- Programme 1.4: Finance and Audit										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Programme 1: Management and Administration										
Sub- Programme 1.5: Procurement, Supply and Logistics										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of primary health care facilities restocked with essential tracer medicines	Number of primary health care facilities restocked with essential tracer medicines divided by number of primary health care facilities multiplied by 100	Process	Not readily available	20	40	60	100	1. Facility type 2. Geographic location (district/region)	2	MOH-PPME, GHS
Percentage of CHPS zones with functional community emergencies transport system or ambulance	Number of functional CHPS zones with community emergency transport system divided by total number of demarcated CHPS zones	Output	79.03	80	85	90	100	1. Region 2. District	2	GHS
Percentage of hospitals with ICU facilities	Number of Hospitals with Intensive care facilities divided by the total number of hospitals multiplied by 100	Output	Not readily available	10	25	64	80	1. Region 2. District	2	GHS/THs/Quasi
Ratio Ambulance population	Number of ambulances dedicated to serve the population (target is 1:50,000)	Input	1:111,331	1:95,000	1:85,000	1:75,000	1:50,000		1	NAS

Percentage of public hospitals with established functional A&E Unit		Output	42	50	55	60	65	1. Region District	2	GHS/THs
Percentage of facilities having GhILMIS installed and implemented	Number of facilities that have GhILMIS installed and implemented divided by the number of targeted facilities for onboarding multiplied by 100	Process	1508 facilities onboard	60	70	80	90	1. Facility types 2. Regional medical stores 2. Geographic location (district/region)	2	MOH-Procurement/RSIM GHS
Percentage of facilities reached by Last Mile Distribution (LMD)	Number of facilities reached by LMD divided by total number of facilities.	Output	378					1. Facility type 3. Geographic location (district/region)	2	MOH/GHS Procurement
Percentage of facilities with basic medical equipment	(Check definition for basic equipment). Number of facilities with basic medical equipment divided by total number of facilities, multiplied by 100	Output	Not readily available	65	70	75	80	1. Facility type 2. Geographic location (district/region)	2	GHS
Percentage of planned essential medical equipment procured and distributed	Number of essential medical equipment procured and distributed divided by number of essential medical equipment planned to be procured and distributed, divided by 100	Process	N/A					1. Facility type 2. Geographic location (district/region)	2	MOH Procurement GHS
Programme 1: Management and Administration										
Sub-Programme 1.6: Human Resources Management										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Number of staff per Ambulance service station		Input	10	10	12	15	25	1. Region 2. District	1	NAS
Doctor population ratio	Number of nurses divided by total population	Output	1:6,355 2020 target 1:5,000	1:5000	1:4000	1:3000	1:2,000	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH-RSIM GHS HR PPME

Nurses population to	Total number of nurses divided by total population	Outcome	1:701 2020 target 1:700	1:600	1:500	1:400	1:300	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH, GHS HR/PPME
Nurse to patient ratio	Total number of nurses divided by total number of OPD and IPD patients	Outcome						1. Hospital type (district, region) 1. Geographic location (district/region)		
Doctor population equity index (Geographical)	Doctor population ratio for the best endowed region divided by the doctor population ratio for the worst endowed region	Outcome	0.1	0.5	0.6	0.7	0.8	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH, GHS HR, PPME
Nurse Population equity index (Geographical)	Nurse population ratio for the best region divided by the Nurse population ratio for the worst region	Outcome	0.5	0.6	0.7	0.8	0.9	1. Hospital type (district, region) 3. Geographic location (district/region)	2	MOH, GHS HR, PPME
Midwife to WIFA ratio	The number of pregnant women per one midwife	Outcome	1:560	545	530	515	500	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH-HR, PPME, GHS
Ratio of midwife to deliveries	The average number of deliveries conducted by one midwife	Outcome						1. Hospital type (district, region) 3. Geographic location (district/region)	2	
Proportion of facilities with number of midwives as per staffing norms	Number of facilities with required numbers of midwives as per staffing norms divided by the number of facilities offering reproductive health services	Output	Not readily available					1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH-HR, PPME, GHS

Midwife to WIFA population equity index (Geographical)	Best performing region Midwife to WIFA ratio divided by Worse performing region Midwife to WIFA ratio	Outcome	0.6	0.7	0.8	0.9	1	1. Hospital type (district, region) 3. Geographic location (district/region)	2	MOH-HR, PPME, GHS
Percentage of Districts with Rapid Response Teams	Number of districts with RRTs divided by total number of districts multiplied by 100	Output	N/A	75	80	95	100		2	GHS
Programme 2: Health Service Delivery										
Sub- Programme 2.1: Primary and secondary health services										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
OPD per capita attendance	Number of outpatient department visits per person per year	Outcome	0.96	1.0	1.3	1.5	2	1. Region 2. Sex 3. Age	2	Service Delivery Agencies
Percentage of health centres offering essential basic package	Number of health facilities offering essential basic services divided by total number of operational health centres	Output	Not existing	20	40	60	80	1. Region 2. District 3. Level of health facilities (health centres/d ist. hosp./reg . hosp.)	1	MOH Relevant Service Delivery Agencies
Coverage of preventive chemotherapy for applicable Neglected Tropical Diseases (see NTD for specific disease)	Number of beneficiaries divided by the target group, multiplied by 100	Outcome	N/A					1. Individu al 2. Househo ld 3. District	1	GHS
Health Service resilience index	Number of key selected RMNCAH indicators for which targets were achieved divided by the number of key selected RMNCAH indicators	Output	N/A						1	MOH Relevant Agencies
Percentage of women in WIFA covered with Cervical cancer screening	Number of WIFA screened for cervical cancer divided by total WIFA (15-49 years), multiplied by 100	Outcome	N/A	20	30	50	70	1. Region 2. District	1	Service Delivery Agencies

Percentage of facilities conducting deliveries that are equipped to provide basic EmONC services	Number of facilities conducting deliveries that are equipped with basic EmONC services divided by total number of facilities conducting deliveries, multiplied by 100	Output	Not readily available	40	60	80	100	1. Region 3. District	1	Service Delivery Agencies
ANC 4+ (%)	Number of pregnant women who made at least 4 ANC visits during the pregnancy divided by the total ANC registrants multiplied by 100	Outcome	58.6	60	62	64	66	1. Region 2. District	2	Service Delivery Agencies
Institutional Neonatal Mortality Rate	Neonatal deaths per 1,000 institutional live births	Impact	7.43	7.10	6.80	6.50	6.30	1. Region 2. District	1	Service Delivery Agencies
Mother to child HIV transmission rate at 18 months	Number of children born to HIV + mothers who tested negative at 18 months divided by total number of children born to HIV + mothers who were tested multiplied by 100	Outcome	74.44	80	85	90	>95	1. Region 2. District	1	GHS/NACP
Stillbirth Rate	Number of babies born with no signs of life at or after 28 weeks of gestation per 1,000 live births	Impact	12.69	12.40	12.20	12.00	11.80	1. Region 2. District 3. Type of still birth (fresh/macerated)	2	Service Delivery Agencies
Skilled birth attendance coverage (%)	Number of births attended by skilled health professionals divided by total number expected deliveries	Outcome	58.67	60	62	64	66	1. Region 2. District	2	Service Delivery Agencies
No. of children fully immunized (Using Penta 3 as proxy (%))		Outcome	94.2	95	96.5	97	98	1. Region 2. District	1	GHS/THs
Coverage of children receiving Integrated Management of Newborn and Childhood Illness services (IMNCI)		Outcome	N/A					1. Region 2. District	1	GHS/TIIs

Percentage of Health facilities offering IMNCI services		Output	N/A	40	60	80	100	1. Region 2. District	1	GHS/THs
Proportion of disease outbreaks identified, and response actions started within 24-48 hours	Number of disease outbreaks for which response was within the 24-48 hours divided by total number of disease outbreaks multiplied by 100	Outcome	Not readily available	80	85	90	95	1. Region 2. District	1	GHS
Percentage of endemic communities with earmarked diseases covered by community distribution of medicines	Number of endemic communities with earmarked diseases covered by community distribution of medicines divided by the total number of endemic communities with ear marked disease multiplied by 100	Output	N/A	80	85	90	95	1. Region 2. District	2	GHS-NTDCP
Percentage of facility deaths that are medically certified	Number of facility deaths certified divided by total number of facility deaths, multiplied by 100	Outcome	59.6	80	90	95	100	1. Facility type 2. Geographic region (district/r egion)	2	GIS
Proportion of maternal deaths audited	Number of maternal deaths audited divided by total number of maternal deaths multiplied by 100.	Outcome	96.4	97	98	99	100	1. Facility type 2. Geographic location (district/r egion)	2	GHS
Proportion of perinatal death audited	Number of perinatal deaths audited divided by total number of perinatal deaths multiplied by 100.	Outcome	N/A					1. Facility type 2. Geographic location (district/r egion)	2	GHS
Percentage of facilities offering delivery services that have Magnesium Sulphate	Number of health facilities that have Magnesium Sulphate divided by total number of facilities offering delivery services.	Output	N/A					1. Facility type 2. Geographic location (district/r egion)	2	MOH Procurement, TCD, GHS

Percentage of facilities offering delivery services that have Oxytocin	Number of health facilities that have Oxytocin divided by total number of facilities offering delivery services.	Output	N/A					1. Facility type 2. Geographic location (district/region)	2	MOH Procurement, TCD, GHS
Programme 2: Health Service Delivery										
Sub- Programme 2.2: Tertiary Health Services										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Proportion of deaths attributed to Non-Communicable Diseases	Number of deaths due to non-communicable disease in a 100,000 population	Impact	43.5	40	38	35	30	1. Region 2. Sex 3. Age	2	Service Delivery Agencies
Mortality rates for (adult, elderly) 60+ years	Number of deaths among adults and elderly per 1,000 population	Impact	Not readily available	25	20	15	10	1. Region 2. Age 4. Sex	2	Service Delivery Agencies
Percentage of voluntary blood donations	Number of blood donations received from voluntary unpaid blood donors divided by total number of blood donors, multiplied by 100	Output	26	33	39	45	51	Zonal Blood Centres	2	NBS
Blood collection index (BCI) per 1000 population	Total number of blood donations divided by the population, multiplied by 1000	Output	5.7	6.2	6.8	7.3	7.8		2	NBS
Percentage of whole blood donations separated into components	Number of whole blood donations used to prepare blood components divided by all whole blood donations, multiplied by 100	Output	18	24	26	28	30	Zonal Blood Centres	2	NBS
Programme 2: Health Service Delivery										
Sub- Programme 2.3: Research										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Prevalence of Cancer	Total number of people screened who had the selected Cancer divided by the total number of people screened multiplied by 100	Impact	Not readily available					1. Region 2. District 3. Sex 4. Age	1	Service Delivery Agencies

Malaria Incidence per 1000 population	The number of confirmed cases of malaria in a year per 1,000 population at risk	Impact	192	219	228	219	210	1. Region 2. District 3. Sex 5. Age	1	GHS/NMCP
HIV Prevalence (15-49 years)	Percentage of people tested in the age group who were found to be infected with HIV	Impact	1.69	1.62	1.60	1.58	1.55	1. Region 2. District 3. Sex 6. Age	1	GHS/NACP
TB Incidence per 100,000 Population	Number of new TB cases that occur during a specified time period x 100,000 population at risk	Impact	143	126	119	112	110	1. Region 7. District	1	GHS/NTP
TB treatment success rate (%)	Number of new, registered TB cases that were cured or completed a full course of treatment divided by total number of new registered cases, multiplied by 100	Outcome	84	89	90	90	90	1. Region 2. District 3. Sex 2. Age	1	GHS/NTP
TB case detection rate	Number of all forms of TB cases (i.e., bacteriologically confirmed plus clinically diagnosed) new and relapse, reported in the past year divided by total population, multiplied by 100,000	Outcome	47.3	73.5	74.5	76	85.5	1. Region 2. District 3. Sex 3. Age	1	GHS/NTP
Prevalence of mental health disorders among women and young adults		Outcome	15.2	14.70	14.20	13	12.20	1. Region 2. District 3. Sex 4. Age	2	MHA/Psychiatric Hospitals

Prevalence of wasting among children under five (%)	Number of children with weight for height < -2 SD of the WHO Child Growth Standards median divided by the total number of children assessed multiplied	Outcome	7	6.8	6.5	6.2	6	1. Degree (moderate/severe) 2. Region 5. District	1	GHS
Prevalence of stunting among children under five years.	Number of children under one year who were given Penta 3 vaccine divided by the estimated target number of children in the cohort multiplied by 100	Outcome	18	16	14	12	10	1. Degree (moderate/severe) 2. Region 3. District	1	GHS
Total fertility Rate	Average number of children that would be born to a woman over her lifetime if: She was to live from birth until the end of her reproductive life	Impact	4	4	4	3	3	1. Region 2. District 3. Age	Survey years	GSS
Under-five mortality rate (per 1000lb)	Deaths occurring among children under 5 years per 1,000 live births	Impact	60	55	50	45	40	1. Region 4. District	2	GHS/THs
Infant Mortality Rate (per 1000lb)	Deaths among children under 1 per 1,000 live births	Impact	41	38	35	32	28	1. Region 2. District	2	GHS/THs
Prevalence of diabetes	Total number of people screened who had the selected diabetes divided by the total number of people screened multiplied by 100	Outcome	Not readily available					1. Region 2. District 3. Diabetes type 4. Sex 5. Age	1	GHS/THs/Quasi
Teenage pregnancy rate	Number of conceptions per hundred young women under 18 years of age, which may lead to a live birth or termination of pregnancy	Outcome	14	12	10	8	6	6. Geographic location (Region/District)	Survey Year	GHS Relevant stakeholders

Prevalence of anaemia among children of school going age (%)	Number of children of school going age with Hemoglobin concentration below the standard defined divided by the total number of children of school going age sampled and tested	Outcome	66	60	55	50	45	1. Region 2. District 7. Sex	1	GHS
Obesity in adult population ages 24-60years. (%)	Percentage of adults (24-60 years) who are obese (defined as having BMI >30kg/m ²)	Outcome	16	15	13	11	9	1. Region 2. District 3. Sex	1	Service delivery agencies
Prevalence of hypertension	Number of persons less than 60 years diagnosed with high blood pressure (recording at least 140mmHg systolic pressure and 90mmHg diastolic pressure) divided by total number of persons less than 60yrs	Impact	13	12	12	11	10	1. Region 2. District 4. Sex 5. Age	1	GHS
Prevalence of high blood glucose in the population	Proportion of population diagnosed with high blood sugar levels	Impact	N/A					1. Region 2. District 6. Sex	1	GHS
Ratio of injuries and deaths from road traffic accidents		Impact	N/A	500:1	400:1	350:1	200:1	1. Region 7. District	1	Service delivery agencies and relevant stakeholders
Institutional Under 5 Malaria Case Fatality Rate	Number of deaths due to malaria among children under 5 divided by total number of under 5 malaria cases multiplied by 100	Impact	0.12	0.06	0.04	0.02	0.01	1. Region 2. District	1	GHS
Prevalence of Yaws	Confirmed and suspected cases of yaws per 100,000 population	Impact	25	50	75	100	125	1. Region 2. District	1	GHS-NTDCP
Percentage of facilities with quality assessment of services conducted	Number of facilities with quality assessment of services conducted divided by total number of targeted facilities	Output	N/A	60	80	90	100	1. Facility type 3. Geographic region (district/region)	2	MOI-PPME, GHS

Prevalence of Anaemia among pregnant women	Percentage of pregnant women with a Haemoglobin less than 110 g/L adjusted for altitude and smoking.	Outcome	Baseline (50.8% DHS 2014) WHO target 5% or lower (align with GIFT target)				5%	1. Facility type 2. Geographic location (district/region)	2	GHS
IPT3 coverage	Number of pregnant women receiving IPT3 divided by total number of pregnant women attending the facility multiplied by 100	Outcome	44.4	64.1	69.4	74.7	80	1. Facility type 2. Geographic location (district/region)	2	GLIS, NMCP
Percentage of planned Operational Surveys (Outpatient Inpatient Satisfaction Surveys) conducted	Number of planned operational surveys conducted divided by total number of planned operational surveys multiplied by 100	Output	Not readily available	50	60	70	80	1. Facility type 2. Geographic location (district/region)	1	MOH-RSIM GHS PPME
Percentage of Hospitals conducting at least three rational use of medicines survey in a year	Number of hospitals conducting at least three rational use of medicines survey in a year divided by total number of hospitals, multiplied by 100	Output	Not readily available	50	60	70	80	1. Hospital type (district, region) 3. Geographic location (district/region)	1	MOH-PPME/RSIM GHS
Average percentage of clients satisfied with OPD/IPD services	Number of clients satisfied with OPD/IPD services divided by number of sampled clients attending OPD/IPD, multiplied by 100	Outcome	85	90	95	97	100	1. Hospital type (district, region) 4. Geographic location (district/region)	2	MOH-PPME GHS
Modern contraceptive prevalence rate	Proportion of women of reproductive age (15-49 years) who are using modern contraceptive methods (or whose partner is using) a contraceptive method at a given point in time	Outcome	20 (MHS 2017)	25	30	35	40	1. Region 2. District 1. Age	2	GHS/THs

Total estimated protection by contraceptive methods supplied (Couple Year Protection (CYP))		Outcome	1,479,064					2. Sex 5. Geograp hic location (district/r egion)	2	GHS CHAG THs
Overall life expectancy at birth		Impact	63	64.5	65	65.5	66	1. Sex 3.	1	GSS
Programme 2: Health Service Delivery										
Sub- Programme 2.4: Pre-hospital services										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Average ambulance engaged time	Number of hours ambulance is engaged	Outcome	4hours 34minutes	4hours	3hours 30minutes	3hours	2hours 30minutes	1. Region 1. District	1	NAS
Average response time to emergencies (target is 15 minutes)		Output	20	20	18	15	15	1. Region 2. District	2	NAS
Programme 3: Human Resource Development										
Sub- Programme 3.1: Pre-service training										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Average pass rate of Midwifery schools	Number of midwives passing the licensure examination divided by the total number of midwives who took the examination multiplied by 100	Outcome	Data not readily available					1. Hospital type (district, region) 2. Geographic location (district/region)	2	HTI MOH-HR GHS-HR
Programme 3: Human Resource Development										
Sub- Programme 3.2: Post- Basic training										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of regions with trained PHEMCs/RRTs	Number of regions with trained PHEMCs/RR Ts divided by total number of regions divided by 100	Process	not readily available	40	60	80	100	1. Region	2	GHS
Percentage of scheduled BLS and ALS organised in all the regions	Number of trainings on BLS and ALS organised in all the regions divided by number of scheduled trainings on BLS and ALS	Process	Not readily available	1	2	3	4	1. Region 2. District	2	GHS-ICD, NAS
Percentage of public hospitals with staff trained in providing Basic Life Support (BLS) & ALS	Number of hospitals with staff trained in providing BLS and ALS divided by the numbers of target hospitals divided by 100	Output	Not readily available	50	60	70	80	1. Region 2. District	2	GHS-FHD, NAS

Percentage of Persons trained in BLS that are Non-Health Professionals	Number of non-health professionals trained divided by the total number of staff multiplied by 100	Outcome	N/A	50	65	70	75	1. Region 2. District	2	GHS-FHD NAS
Percentage of scheduled trainings organised for all Hospital emergency teams	Number of public hospitals where emergency teams have been trained divided by total number of hospitals multiplied by 100	Input	N/A	60	70	80	100	1. Region 1. District	2	GHS/NAS
Percentage of hospitals with trained Emergency Management Teams (EMT)	Number of Public Hospitals with trained EMT divided by the total number of public hospitals	Output	N/A	50	75	85	100	1. Region 2. District	2	GHS/THs
Percentage of Hospitals with trained Quality Management Teams (including at least 1 Community Member) that meet quarterly	Number of Hospitals with trained Quality Management Teams (including at least 1 Community Member) that meet quarterly divided by total number of hospitals, multiplied by 100	Output	N/A	60	70	80	90	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH-PPME GHS

Programme 3: Human Resource Development

Sub- Programme 3.3: Specialized Training

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			

Programme 4: Human Sector Regulation

Sub- Programme 4.1: Regulation of Health Facilities

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of facilities requesting accreditation that are inspected by HeFRA		Output	Not readily available	50	60	80	95	1. Facility type 2. Geographic location (district/region)	2	MOH HEFRA
Percentage of facilities with entry point licenses	Number of facilities with entry point licenses divided by total number of facilities inspected, multiplied by 100	Outcome	Not readily available	50	60	70	80	3. Facility type 4. Geographic location (district/region)	2	HeFRA NHIA Pharmacy Council

Programme 4: Health Sector Regulation

Sub- Programme 4.2: Regulation of Health Professionals

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
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				2022	2023	2024	2025			
Average licensure pass rate for health professionals (Human Resource capacity development)	Number of students/trainees passed professional exams divided by the total number of students that sat for licensure exams, multiplied by 100	Outcome	82.9	85	87	90	95	1. Schools 2. Training type (pre-service, post-basic, specialized training) 3. Professionals 4. Geographic location (district/region)	2	MOH GHS HRHD
Percentage of nurses in good standing with their regulator	Number of nurses in good standing with regulators divided by total numbers of registered nurses multiplied by 100	Outcome	N/A					1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH, GHS NMC
Percentage of Doctors in good standing with their regulator	Number of Doctors in good standing with regulators divided by total numbers of registered Doctors multiplied by 100	Outcome	N/A					1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH GHS MDC
Programme 4: Human Sector Regulation										
Sub- Programme 4.3: Regulation of Pharmaceuticals and Medical Health Products										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Proportion of encounters with antibiotics prescribed	Number of patient encounters with antibiotics divided by total number of sampled prescriptions, multiplied by 100	Outcome	21	18	15	13	10	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH PPME TCD GHS
Average number of medicines per prescription	Average number of medicines prescribed divided by total patient encounters, multiplied by 100	Outcome	3	3	3	3	3	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH PPME TCD GHS

6.2 Milestones

Health Policy Objectives	2022 Milestones
HO1: Universal access to better and efficiently managed quality healthcare services	<ul style="list-style-type: none"> <input type="checkbox"/> Attain 100% health insurance coverage for primary level services <input type="checkbox"/> Improve financial risk protection, access to quality essential health-care services, and access to safe, effective, quality and affordable essential medicines and vaccines for all <input type="checkbox"/> Increase health financing and the recruitment, development, training and retention of the health workforce.
HO2: Reduced avoidable maternal, adolescent and child deaths and disabilities	<ul style="list-style-type: none"> <input type="checkbox"/> Reduce maternal mortality ratio by two-thirds over the 2017 figures <input type="checkbox"/> Reduce by three-quarters neonatal, child and adolescent disabilities
HO3: Increase access to responsive clinical and public health emergency services	<ul style="list-style-type: none"> <input type="checkbox"/> Functional clinical emergency centres in all health facilities <input type="checkbox"/> Reduce occurrence, morbidity and mortality associated with disease outbreaks

Annex 1 Capital Investment Plan

Annex 1 Capital Investment Plan								
ITE M	TITLE OF PROJECT	GHC209,695,000.00	GHC32,424,000.00	ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP		ON-GOING	NEW PROJECT
A. ARREARS ON CERTIFICATES UNPAID AS AT AUGUST 2019								
1.0	Provision for arrears from 2019-2021 in the sector	-	5,900,000.00	5,900,000.00	-			
2.0	Provision for payment of retention		32,266.03					
3.0	Provisions for payment for Consultancy on projects							
	Sub Total	-	5,932,266.03	5,932,266.03				
B. PROJECTS REQUIRING MATCHING FUNDS								
4.0	Rehabilitation of Bolgatanga Regional Hospital - SAUDI Projects Phase III	16,120,000.00	5,037,475.30	16,120,000.00	11,082,524.70		53,600,000.00	
5.0	Construction of Offices for Ministry of Health HQ /Regulatory Bodies		8,900,000.00	8,690,075.53	(209,924.47)			

ITEM	TITLE OF PROJECT	GH¢209,695,000.00	GH¢32,424,000.00	ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP		ON-GOING	NEW PROJECT
6.0	Completion of the remaining 4No. of Housing Component under the Major Rehabilitation and Upgrading of Tamale Teaching Hospital Housing Project Phase II	4,500,000.00		4,500,000.00	4,500,000.00			
	Sub Total	20,620,000.00	13,937,475.30	29,310,075.53				
C. TURNKEY PROJECTS WITH SECURED FUNDING								
7.0	Completion of Kumawu, Fomena and Takoradi European Hospital Staff Housing under the Seven (7) District Hospitals Project						53,550,000.00	
8.0	Construction of University of Ghana Medical Centre (Phase II)						62,100,000.00	

ITEM	TITLE OF PROJECT	GH¢209,695,000.00	GH¢32,424,000.00	ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP		ON-GOING	NEW PROJECT
9.0	Completion and Equipping of 2No. Regional Hospitals in Wa and Kumasi and 6No. District Hospitals with Staff Housing at Adenta/Madina, Twifo-Praso, Konongo-Odumasi, Nsawkaw, Tapa and Salaga						58,000,000.00	
10.0	Completion of Maternity and Childrens Block at Komfo Anokye Teaching Hospital in the Ashanti Region							55,000,000.00
11.0	Completion and Equipping of Bekwai District Hospital						53,140,000.00	
12.0	Construction of One (1) District Hospital and Five (5) Polyclinics in Western Region						60,748,608.08	

ITEM	TITLE OF PROJECT	GH¢209,695,000.00		GH¢32,424,000.00		ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP	ON-GOING	NEW PROJECT			
	by Orio at Akontombra, Bogoso, Wassa Dunkwa, Mpoho, Elubo and Nsuaem									
13.0	Construction, Retooling and Equipping of selected 4 Health facilities in the Eastern at Aburi, Kibi, Atibie and Mampong in Ghana - Phase I						15,952,900.98			
14.0	Construction of Koforidua Regional Hospital by JV Tyllium-Ellipse Project UK Ltd.								56,000,000.00	
15.0	Construction of Shama District Hospital by Poly International Changda								62,000,000.00	
16.0	Re-Construction of La General Polyclinics by Poly								60,000,000.00	

ITEM	TITLE OF PROJECT	GH¢209,695,000.00	GH¢32,424,000.00	ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP		ON-GOING	NEW PROJECT
	International Changda							
17.0	Construction of 11 No. 40-Bed and 1 No. 30-Bed Hospitals in Ashanti, Bono, Greater Accra and Eastern Regions at Suame, Twedie, Manso Nkwanta, Sabronum, Drobonso, Mim, Adukrom, Kpone Katamanso, Achiasse, Jumapo, Nkwatia						20,100,000.00	
18.0	Redevelopment of Tema General Hospital, Reconstruction of the Central Medical Stores - Accra, Construction of Accident & Emergency Complex at						32,000,000.00	

ITEM	TITLE OF PROJECT	GH¢209,695,000.00		GH¢32,424,000.00		ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP	ON-GOING	NEW PROJECT			
	Dormaa Hospital and Construction of District Hospital at Nkoranza in the Bono East Region									
19.0	Construction and equipping of 400 Bed Obs and Gynae Block at Korle-Bu Teaching Hospital - Accra								14,640,032.00	
20.0	Design, Construction and Equipping of Urology & Nephrology Centre of Excellence at Korle-Bu Teaching Hospital - Accra								16,800,000.00	
21.0	Construction of New Trauma Hospitals at Obuasi and Anyinam and Accident and Emergency Centre at								12,300,000.00	

ITEM	TITLE OF PROJECT	GH¢209,695,000.00		GH¢32,424,000.00		ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP	ON-GOING	NEW PROJECT			
	Enyiresi Hospital									
22.0	Rehabilitation of Effia Nkwanta Hospital and Construction of Western Regional Hospital at Agona Nkwanta								14,300,000.00	
23.0	Construct and equip five health facilities in the Republic of Ghana at Osiem, Assin Kuyeya, Dormaa Akwamu, Wamfie and Kutre								11,000,000.00	
24.0	Supply of Ambulances and Related Training and Maintenance Services								5,000,000.00	

ITEM	TITLE OF PROJECT	GH¢209,695,000.00		GH¢32,424,000.00	ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA		REQUIRED	GAP		ON-GOING	NEW PROJECT
25	Construction of 3 District Hospital at Ayensuano, Offinso and Effiduase and Completion of Maternity Blocks at Tafo Hospital & Kumasi South Hospital and Residential Facility at Abrepo for Kumasi South Hospital.								5,000,000.00
	Sub Total								
								357,091,509.06	364,140,032.00
D. ON GOING PROJECTS WITH HIGH SOCIAL PROTECTION IMPACT									
26.0	Completion of 15 ongoing CHPS Compounds in 2018	2,699,041.17			2,699,041.17	2,699,041.17			
27.0	Completion of 26 CHPS Compounds in 2019	30,381,115.31			28,381,115.31	28,381,115.31			

ITEM	TITLE OF PROJECT	GH¢209,695,000.00		GH¢32,424,000.00		ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP				ON-GOING	NEW PROJECT
28.0	Construction of Health Centre at Mempeasem in the Greater Accra Region	1,791,061.00		1,791,061.00	1,791,061.00					
29.0	Rehabilitation of Cape Coast Teaching Hospital Accident & Emergency Unit	2,013,166.76		1,600,000.00	(413,166.76)					
30.0	Completion of Hostel block and External Works at Cape Coast NTC		2,554,258.67	2,555,258.67	1,000.00					
31.0	Completion of Nsawora Health Centre in the Sefwi Akontombra District	1,000,000.00		500,000.00	500,000.00					
32.0	Rehabilitation of Diabetes Management, Research and Training Center at Korle-Bu Teaching Hospital	1,519,620.00	1,000,000.00	1,519,610.16	(1,000,009.84)					

ITEM	TITLE OF PROJECT	GH¢209,695,000.00		GH¢32,424,000.00	ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA		REQUIRED	GAP		ON-GOING	NEW PROJECT
33.0	Construction of Fencewall at Pantang Hospital	2,376,533.40	1,000,000.00		2,376,533.40	1,376,533.40			
34.0	Completion and equipping of Pankrono Health Centre	2,000,000.00							
35.0	Renovation of Korle-bu Ministry of Health SSNIT Flat Staff Accommodation - Court 7B and 9B	1,800,000.00	1,000,000.00		2,300,000.00	1,300,000.00			
36.0	Supply of Vehicles	4,000,000.00			2,000,000.00	(2,000,000.00)			
37.0	Supply of Office Furniture and Computers for MOH and GHS HQ	3,000,000.00			600,000.00	(2,400,000.00)			
38.0	Supply and Installation of Equipment for CHPS Compounds initiated in 2018/2019 and other specialised	10,000,000.00			2,000,000.00	(8,000,000.00)			

ITEM	TITLE OF PROJECT	GH¢209,695,000.00	GH¢32,424,000.00	ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP		ON-GOING	NEW PROJECT
	hospital facilities							
39.0	Supply and Installation of Equipment for Treatment Centre in selected facilities	60,000,000.00						
40.0	Maintenance and retooling of selected health facilities including Saltpond, Elimina, Bechem, cape coast metropolitan Hospital, etc	12,333,871.26						
41.0	Treatment and Holding Centre at Takoradi	7,913,021.10		7,913,021.10	-			
42.0	Treatment and Holding Centre at Nalerigu	10,500,000.00		10,500,000.00	-			
43.0	Treatment and Holding Centre at Sunyani	20,247,570.00		20,247,570.00	-			

ITEM	TITLE OF PROJECT	GH¢209,695,000.00	GH¢32,424,000.00	ABFA GAP		LOAN & MIXED CREDIT		
		GOG	ABFA	REQUIRED	GAP	NHIA	ON-GOING	NEW PROJECT
	Sub Total	173,575,000.00	5,554,258.67	86,983,210.81				
E. GHS ON- GOING PROJECTS WITH HIGH SUNK COST AND HIGH SOCIAL PROTECTION IMPACT								
44.0	Completion and Equipping of Nationwide CHPS Compound initiated in 2012 by GHS	10,000,000.00		7,000,000.00	7,000,000.00			
45.0	Construction and Completion of Greater Accra Regional Administration Block for Ghana Health Services	4,500,000.00		3,000,000.00	3,000,000.00			
46.0	Construction of Offices for Ghana Psychologic Council	1,000,000.00		600,000.00	(400,000.00)			
47.0	Renovation of Korle-bu GHS SSNIT Flat Staff Accommodation	800,000.00						
						15,000,000.00		
	Sub Total	15,500,000.00	-	15,500,000.00				
F. HEALTH INSURANCE FUNDED PROJECTS								

ITEM	TITLE OF PROJECT	GH¢209,695,000.00		GH¢32,424,000.00		ABFA GAP		NHIA	LOAN & MIXED CREDIT	
		GOG	ABFA	REQUIRED	GAP				ON-GOING	NEW PROJECT
48.0	Construction of Wards, CSSD & Laundry, Theatre, Mortuary and Block of flats for Akatsi District Hospital					15,000,000.00				
49.0	Construction of Selected Health Training Institutions: Kintampo, Bibiani, Sampa, Dormaa, etc					15,000,000.00				
50.0	E-health Project		7,000,000.00	308,414,400.00	308,414,400.00	10,000,000.00				
	Sub Total		7,000,000.00	7,000,000.00		40,000,000.00				
	Grand Total	209,695,000.00	32,424,000.00	242,119,000.00	355,622,574.51	40,000,000.00		357,091,509.06	364,140,032.00	

Annex 2 Procurement Plan

S/N	Description of Procurement Activity	Currency	Estimated Amount (Cedis)	Procurement Method	Source of Funding
1	Procurement of HIV test kits	USD\$	2,473,400.00	ICT	GoG
2	Procurement of HIV medicines	USD\$	4,251,005.70	ICT	GoG
3	Procurement of malaria medicines	GHS	16,578,828.00	ICT	GoG
4	Procurement of Long-Lasting Insecticide Nets (LLIN)	GHS	5,352,000.00	ICT	GoG
5	Procurement of Tuberculosis commodities	USD\$	1,601,790.00	ICT	GoG
6	Expanded Programme on Immunization (EPI) Vaccines	GHS	45,893,838.00	ICT	GoG
7	Procurement of Male Condoms (No Logo) (Co-financing)	GHS	7,900,000.00	ICT	GoG
8	Procurement of Contraceptives	GHS	1,200,000.00	ICT	GoG
9	Procurement of Rabies Vaccines	GHS	4,900,000.00	NCT	GoG
10	Procurement of Anti-Snake, (Polyvalent)	GHS	27,957,720.00	NCT	GoG
11	Procurement of Tetanus Immunoglobulin	GHS	2,500,000.00	NCT	GoG
12	Procurement of CSM Vaccines & Medicines	GHS	3,000,000.00	ICT	GoG
13	Procurement of TB Commodities	GHS	2,100,000.00	ICT	GoG
14	Procurement of Blood Collection Bags & Reagents for NBTS	GHS	1,050,000.00	ICT	GoG
15	Procurement of Anitmalaria Medicines (Artemether Lumefantrine)	GHS	16,578,828.00	ICT	GoG
16	Procurement of Long Lasting Insecticidal Treated Nets (LLINS)	GHS	5,000,000.00	ICT	GoG
17	Procurement of Psychotherapeutic Medicines	GHS	5,000,000.00	NCT	GoG

S/N	Description of Procurement Activity	Currency	Estimated Amount (Cedis)	Procurement Method	Source of Funding
18	Procurement of Essential Medicines for the Health Sector through Framework Contracting for 2022	GHS	197,000,000.00	NCT	IGF/NHIF Claims payment to facilities
19	Printed Materials, Stationery and Office Supplies	GHS	800,000.00	RFQ	GoG
20	Procurement of Office Equipment and Accessories	GHS	1,700,000.00	RFQ	GoG
21	Procurement of Vehicles	GHS	150,000.00	SS	GoG
22	Procurement of Office Furniture	GHS	400,000.00	RFQ	GoG
23	Supply of Office and Washroom Consumables for MOH	GHS	920,000.00	RT	GoG
24	Procurement of HIV Commodities	USD\$	6,724,405.70	ICT	GoG
25	Procurement of Contraceptives (Norigynon Pilules) Through International Competitive Tendering	Euros	114,888.00	ICT	WAHO
26	Procurement of Contraceptives (Implanon NXT) through International Competitive Tendering	Euros	148,119.00	ICT	WAHO
27	Procurement of Contraceptives (Jadelle) through International Competitive Tendering	Euros	309,511.00	ICT	WAHO
28	Procurement of Contraceptives (NO Logo Male Condoms)	Euros	391,004.00	ICT	WAHO
29	Procurement of Medical Equipment and accessories for Surgical Operation of the Conjoined Twins AT THE Head (Cranipagus)	GHS	11,978,050.00	SS	GoG
30	Procurement of Infection Preventive Control Supplies for the National AIDS/STI Control Programme	GHS	6,977,677.20	SS	GoG

S/N	Description of Procurement Activity	Currency	Estimated Amount (Cedis)	Procurement Method	Source of Funding
31	Procurement of Test kits and Non-Drug Medical Consumables for the National Network for Covid-19 Testing laboratories, Noguchi Memorial Institute of Medical Research	GHS	136,553,600.00	SS	GoG
32	Procurement of Vaccines, Syringes and Needles	USD	147,000,000.00	SS	Worldbank Allocation Formular
33	Supply of Ambulance with Mobile X-ray Wirelless Digital Equipment	USD	4,454,406.00	SS	Worldbank Allocation Formular
34	Supply, Installation and training for a dedicated Pressure Swing Absorbtion (PSA) Medical Oxygen Generation Plants	USD	3,000,000.00	SS	Worldbank Allocation Formular
35	Supply and Installation of ICU and complete Theatre Set Equipment	USD	4,558,430.80	RT	Worldbank Allocation Formular
36	Procurement of 5,000 sets of Furniture for Schools, Medical OPD and Laboratory	USD	2,300,000.00	RT	Worldbank Allocation Formular
37	Supply of Pipette Tips	USD	387,405.25	RT	Worldbank Allocation Formular
38	Procurement of Cross country vehicles for monitoring roll out	USD	1,500,000	SS	Worldbank Allocation Formular
39	Supply and Installation of Medical Equipments (Mobile X-ray, CT Scan, Oxygen Concentrators, ICU Patient Monitors, Pulse Oximeters, Sphygomanometer,Doppler, Deliberators etc.)	USD	3,641,739.20	RT	Worldbank Allocation Formular

S/N	Description of Procurement Activity	Currency	Estimated Amount (Cedis)	Procurement Method	Source of Funding
40	Procurement of Medical Equipment, Non-Drugs Medical Consumable, Furniture (3 Seater Link Chair) Computer Tablets and Vehicles (Customized Ambulance) for the Co-vid 19 Emergency Preparedness Response Plan	USD	23,259,885.13	RT	Worldbank Allocation Formular
41	Procurement of Male Condoms	GHS	7.9,000,000.00	ICT	GoG
42	Engagement of a firm to supply Hand Sanitizer for the MOH	GHS	145,600,007.28	SS	GoG