

# HEALTH

S E C T O R ■ 2 0 1 8 - 2 0 2 0

MEDIUM TERM SECTOR STRATEGY (MTSS)

OCTOBER 2017

# FOREWORD

**T**he Medium Term Sector Strategy (MTSS), a complementary component of the Medium-Term Expenditure Framework (MTEF), represents a vital link in the process of translating the long and medium-term health reform strategies of the Ondo State Government from 2018 to 2020 into the spending reality of the Annual Budgets. The Medium Term Sector Strategy of the Health Sector as presented in this document sets out the fully costed initiatives and expenditure plans through which the Sector seeks to contribute to the delivery of qualitative and accessible health care service delivery of government over the period 2018-2020 within the confines of limited scarce resources.

The Medium Term Sector Strategy of the Health Sector was developed by the MTSS Steering Committee and the Sector Planning Team (SPT); comprising, the Honourable Commissioner, the Permanent Secretary, Directors from the Ministry, Departments and Agencies, all key officers from the main Ministry and the Departments and Agencies; with the assistance of the Ministry of Economic Planning and Budget (MEPB) which acted as the coordinating Ministry over the MTSS process.

I wish to commend all stakeholders within the Health sector who tirelessly contributed to the development of the MTSS Document which will serve as an important instrument for guiding policy direction and delivering value for money, in addition to contributing adequately to the socio economic status, improved health care service delivery and expected health outcomes in Ondo State and Nigeria as a whole.



**Dr. E.T. Oni**

*Permanent Secretary (MOH)*  
October, 2017

# ACKNOWLEDGMENT

- The immense contribution(s) of the Ministry of Economic Planning & Budget for the sense of direction towards achieving and accomplishing this document is hereby acknowledged. Also worthy of note are the contributions of the World Bank and the following stakeholders to the success of this document:
- Honourable Commissioner for Health,
- Permanent Secretary of the Ministry of Health,
- Ag. Permanent Secretary of Hospitals Management Board (HMB),
- Executive Secretary of Ondo State Primary Health Care Development Board (OSPHCDB),
- Project Manager of Ondo State Agency for the Control of AIDS (ODSACA),
- Coordinator of Ondo State Emergency Medical Services Agency (ODEMSA),
- Directors and Staff of all MDAs in the Health Sector for developing the suite of programmes/activities to be implemented by the sector through the MTSS period and for drafting the MTSS document;;
- The Principals of the Schools of Nursing, Midwifery and Health Technology,
- The State House of Assembly for enacting relevant laws and approval of the State's annual budget;
- Central planning MDAs SMEPB and SMOF for providing guidance on the MTSS and resource envelopes available to each sector;
- Civil Society Organizations and the general public for providing feedback on the current gaps in service provision which necessitate the formulation of new strategies; and
- The Health Sector MTSS Planning Team.

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# TABLE OF ACRONYMS

ACRONYM	DEFINITION
ACT	Artemisinin-based Combination Therapy
AFENET-NSTOP	African Field Epidemiology Network National Stop Polio Transmission Programme
AIDS	Acquired Immune Deficiency Syndrome
ARV	Anti-Retroviral
CCFN	Catholic Cariters Foundation of Nigeria
CEMDOS	Confidential Enquiry into Maternal Deaths in Ondo State
CSO	Civil Society Organizations
DHIS	District Health Information System
DLI	Disbursement Linked Indicator
DST	Dental Surgery Technician
EHAi	Equitable Health Access Initiative
EMS	Emergency Medical Services
FAST	First Aid Support Team
GH	General Hospital
HDC	Health Development Committee
HDCC	Health Data Consultative Committee
HIV	Human Immuno-deficiency Virus
HMB	Hospitals' Management Board
HMIS	Health Management Information Systems
HR	Human Resource

ACRONYM	DEFINITION
HRH	Human Resources for Health
ICT	Information and Communication Technology
IEC	Information and Education Communication
IGR	Internally Generated Revenue
IHVN	Institute of Human Virology of Nigeria
KCC	Kidney Care Centre
LACA	Local Action Committee on AIDS
LGA	Local Government Area
LLIN	Long Lasting Insecticidal Nets
LM	Line Ministries
LMCU	Logistics Management and Coordinating Unit
MCH	Mother and Child Hospital
MDA	Ministry Department and Agency
MDCN	Medical and Dental Council of Nigeria
MEC	Millennium Eye Centre
MEPB	Ministry of Economic Planning and Budget
MICS	Multiple Indicators Cluster Survey
MPDSR	Maternal and Perinatal Deaths Surveillance and Response
MTSS	Medium Term Sector Strategy
MoH	Ministry of Health
NMCN	Nursing and Midwifery Council of Nigeria
NDHS	Nigeria Demographic and Health Survey
NHIS	National Health Insurance Scheme
NHMIS	National Health Management Information Systems

ACRONYM	DEFINITION
NISONMG	Nigeria Schools of Nursing and Midwifery Games
NPHCDA	National Primary Health Care Development Agency
ODEMSA	Ondo State Emergency Medical Services Agency
ODSACA	Ondo State Agency for the Control of AIDS
ORIREWA	Ondo Routine Immunization Reaching Every Ward Always
OSPHCDB	Ondo State Primary Health Care Development Board
PCR	Polymerase Chain Reaction
PPE	Personal Protective Equipment
PHC	Primary Health Care
PMR	Performance Management Review
PMTCT	Prevention of Mother to Child Transmission
RH	Reproductive Health
SACA	State Agency for the Control of AIDS
SHT	School of Health Technology
SMoH	State Ministry of Health
SoM	School of Midwifery
SoN	School of Nursing
SP	Sulfadoxine-Pyrimethamine
SPT	Sector Planning Team
SSH	State Specialist Hospital
SSHDP	State Strategic Health Development Plan
SURE-P	Subsidy Reinvestment Programme
TBA	Traditional Birth Attendants
TBL	Tuberculosis and Leprosy

# EXECUTIVE SUMMARY

**T**he Ondo State Government is currently preparing the 2018-2020 MTSS document. This is to plan and improve the performance of the Health Sector.

The Year 2016 Budget analysis showed that out of N14,574,154,540.27 allocated to the health sector, N7,080,615,505.83 was expended, meaning a performance of 48.58%. Additionally in the Year 2017 so far from the calendar year between January -June, there has been a budget release of N4,193,333,640.77 out of the budget allocation of N18,127,092,722.15. This gives a budget performance of 23.13% midyear (June) which is bound to increase as the year progresses.

Further review of the budget revealed that the MDAs would have performed better but due to the economic recession the country is experiencing. The preparation of the Health Sector 2018-2020 MTSS will set the pace for the 2018 budget and subsequent ones, as the 2017 budget for the State has been passed and approved. The budget for the year 2017 of Ondo State is N170,846,580,000.00 with a budget allocation of N18,127,092,722.15 (10.6%) of the total budget to the Health sector.

# CHAPTER 1

## INTRODUCTION

### 1.1. AIMS AND OBJECTIVES OF THE DOCUMENT

The Medium Term Sector Strategy (MTSS) takes a prominent role as one of the major milestones in the cyclical chain of the Medium Term Framework. The MTSS document for the Health Sector is therefore developed to facilitate better harmonization of government policies and strategies with the budgetary process. It is believed that this document when finalized will help inform the development of feasible health programs and projects.

The MTSS is aimed at ensuring that within the given resource envelope, sector resources are deployed in consonance with clearly defined and accountable policy objectives of government of Ondo State.

The process seeks to ensure the achievement of sector targets through feasible and responsive plans where resources are efficiently and effectively deployed.

### 1.2. SUMMARY OF THE PROCESS USED

The MTSS of the Health Sector as set out in this document was formulated by the Sector Planning Team (SPT) comprising, the Honourable Commissioner, the Permanent Secretary, Directors from the Ministry, Departments and Agencies (MDAs), with the assistance of the Ministry of Economic Planning and Budget (MEPB) which acted as the coordinating Ministry over the MTSS process.



The formulation of the MTSS for the Health Sector was designed to rely on the inputs and support from a range of relevant stakeholders within and outside government who participated actively in the process to ensure that the expenditure plans take effect. These stakeholders include:

- Honourable Commissioner,
- Permanent Secretary,
- Heads of Departments and Agencies,
- The Health Sector MTSS Planning Team,
- Civil Society Organizations (CSOs) and
- The key planning, budgeting and reform Agencies of the Ondo State Government.

The process involved the following steps:

1. Review of all existing high level policies of government as it relates to the Health sector in line with the government's strategies of ensuring improved health outcome;
2. Confirmation of the Sector's Goals and Programmes for 2018-2020 against the background of government's strategies;
3. Assessment of the existing budget commitments to the Health sector so as to determine the level at which these will accomplish the goals and programmes as well as the existing resource commitment reality of the sector;
4. Development of proposals of projects, existing and new, required to achieve the Goals and Programmes of the sector as defined or validated;
5. Use of the Scoring matrix to score projects, which is a veritable tool for planning programmes and projects that are existing, ongoing and completed;
6. Prioritization of initiatives and development of detailed costing of each project;
7. Identification of the phases of the cost of the prioritized projects over the period 2018-2020 and justification of projects based on their high priorities and importance;
8. Specification of Outputs, Outcomes and Key Performance Indicators for each project identified in line with

- the envelope i.e., the benefits of the projects to the good people of Ondo State; and
9. Finally, assessment of the Log frames of the projects in relation to the goals and programmes of the MDAs in the health sector of Ondo State.

Ondo State high-level policy documents that deal with the Health sector were also reviewed and they are;

- Ondo State Government State Strategic Health Development Plan 2010 - 2015;
- Ondo State Economic Empowerment and Development Strategy;
- Ondo State Vision 20:2020;
- Ondo State Operational Plan;
- Ondo State Blue-Print to Progress (Reports of Strategic Development & Policy Implementation committee).

The above-mentioned policy documents were appraised to obtain relevant strategic issues, policy thrust, high-level strategies, performance measures and targets that form the basis of the health sector MTSS for the period 2018 – 2020. Specifically, the review of the policy documents guided the development of the strategic goals, programmes, projects, performance measures, outputs, targets and outcomes for the 2018 – 2020 MTSS of the Health Sector. Highlights of the review are harmonized in the Ondo State Development Plan.

### **1.3. OUTLINE OF THE STRUCTURE OF THE DOCUMENT**

The document was prepared sequentially thus:

Chapter one states the aims and objectives of the document as well as the procedures used in developing the MTSS for the Health sector.

Chapter Two gives a brief background of Ondo State as well as discusses the Health Sector in the State by highlighting the institutional structure, current situation, the sector's vision & mission statements and core values. The sector policies, goals and programmes for MTSS were also discussed.

Chapter Three states major strategic direction of the sector, resource constraint, contributions from partners, programme connection between sector's MDAs, outline of key strategies, justification, result framework as well as responsibilities and operational plan.

Chapter Four discusses performance monitoring and evaluation as well as public involvement.

Chapter Five presents sources of data as against the result framework, annual sector review and organizational arrangement.

# CHAPTER 2

## THE SECTOR AND POLICY IN THE STATE

### 2.1 A BRIEF BACKGROUND OF THE STATE

#### Ondo State

Ondo State, generally referred to as the “Sunshine State”, was created from the defunct Western State on 3rd February, 1976. Before its creation, the State existed as the Ondo Province of the old Western State. The present Ondo State was formed when Ekiti State was carved out of it in October 1996. The State has a land area of approximately 15,317sq kilometers representing 1.66 percent of the total surface area of Nigeria. The population of the State in the 1991 census figures was 2,249,548 while year 2006 census puts the population at 3,441,024 made up of 1,745,058 males and 1,715,820 females representing 50.42% and 49.58%, respectively. Ondo State has the longest coastline in Nigeria with considerable territorial waters offshore, rich in aquatic and mineral resources of significant quantity.

#### 2.1.2. GEOGRAPHY

Ondo State is located within Latitude 50 45' and 70 52'N and Longitudes 4020' and 6005' E. The Administrative capital is Akure city while there are 18 Local Government Areas in the State. The State is bounded in the North by Ekiti and Kogi States, in the East by Edo State, on the West by Osun and Ogun States and in the South by the Atlantic Ocean. Ondo State is located entirely within the tropics.

The tropical climate of the State is broadly of two seasons: rainy season (April-October) and dry season (November-March). The temperature throughout the year ranges between 21°C to 29°C and humidity is relatively high. The annual rainfall varies from 2,000mm in the southern areas to 1,150mm in the northern areas. The State enjoys luxuriant vegetation with high forest zone (rain forest) in the south and sub-savannah forest in the northern fringe.

The geology of the State is made up of the basement complex. The basement complex is essentially non-porous and water can only be found in the crevices of the complex. The rock types include quartz, gneisses and schist. This basement complex primarily underlies the sedimentary layers which consist of cretaceous, tertiary and quaternary sediments deposited in the coastal basin.

### **2.1.3. ECONOMY**

The State's Economy is basically agrarian with large scale production of cocoa, palm produce and rubber. Other crops like maize, Kolanut, yam and cassava are produced in large quantities. 65% percent of the State's labour force is in the agriculture sub-sector.

The State is also blessed with very rich forest resources where some of the most exotic timber in Nigeria abound. Ondo State is equally blessed with extensive deposits of crude oil, bitumen, glass sand, kaolin, granites and limestone. Therefore, the State has great potentials for rapid industrial growth in view of its raw materials base. The tourism potentials of the State is also high as its historical sites, long coastline, lakes, forest and cultural events can be developed for tourism. The fact that Ondo State is arguably the most Peaceful State in the Oil Rich Niger-Delta region, made her the most viable investment destination of all times.

## **2.2 A BRIEF INTRODUCTION TO THE SECTOR**

The Health sector came into being in April 1976 as a consequence of the creation of Ondo State in February of the same year from the defunct Western State of Nigeria. Within the framework of the defunct Western State Health

Management Board System, which came into force by Edict 12 of 1975 on 1st July of the same year, the newly created geo political block inherited the Akure Health Zones.

At inception, the Ministry of Health was divided into 8 divisions namely:

- i. Administration & General,
- ii. Finance & Establishment
- iii. Curative
- iv. Preventive
- v. Dental
- vi. Pharmacy
- vii. Nursing
- viii. Training institutions.

The population of human resource in the sector is as follows:

Ministry of health	324
Hospitals' Management Board	3,894
Ondo State Primary Health Care Development Board	131
Primary Health Care (PHC) workers under Local government payroll	4,109

Source: Department of Planning Research and Statistics MoH, HMB, OSPHCDB October 2017

## 2.3 THE CURRENT SITUATION IN THE SECTOR

The Ministry of Health is the Supervising Ministry for the Health sector of Ondo State and is headed by the Honorable Commissioner for Health. It is one of the cardinal ministries of the Ondo State government. Apart from its oversight functions, it also provides policy directions for the overall health system development in the state. Its services are

provided by a broad spectrum of health care institutions, both public and private. These institutions offer technical and/or specialized services while some are saddled with the training of health care providers.

The Hospitals Management Board (HMB) is responsible for the management of all health workers of the secondary and tertiary health facilities, which include all General Hospitals, Specialist Hospitals, and seven (7) Mono-specialist Hospitals - Mother & Child Hospitals(Ondo and Akure); Trauma & Surgical Centre; Kidney Care Centre; Neuropsychiatric Hospital, Akure; Millennium Eye Centre; and Dental Headquarters .

The Ondo State Primary Health Care Development Board is responsible for management of all health workers in the primary health care domain of the health system and implements primary healthcare programs & interventions. The Ondo State Emergency Medical Services Agency provides prompt response and rescue of accident victims across the boundaries of the State to the nearest health facility where help and hope can be secured for the victims.

The Schools of Nursing, Midwifery and Health Technology are quasi-autonomous institutions of learning where skilled health workers are trained. The University of Medical Sciences is responsible for medical training.

The tables and figures below show the trend of key indicators in the health sector.

**Table 1: Health Indices of Ondo State**

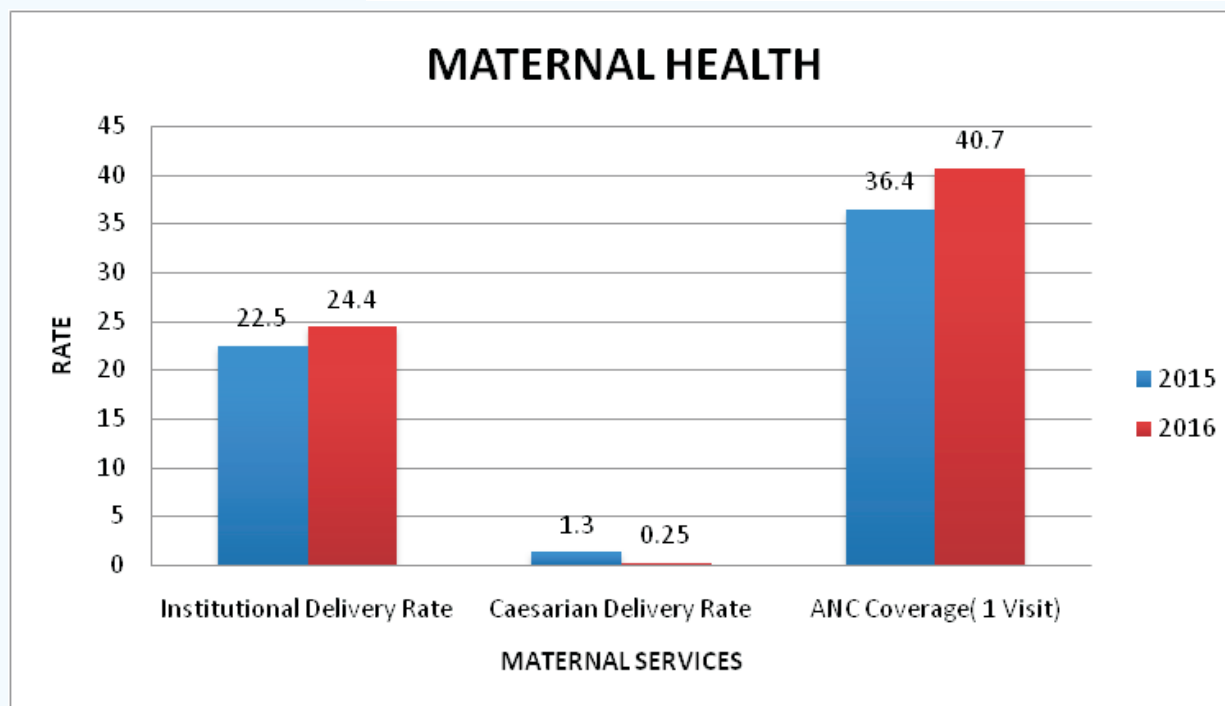
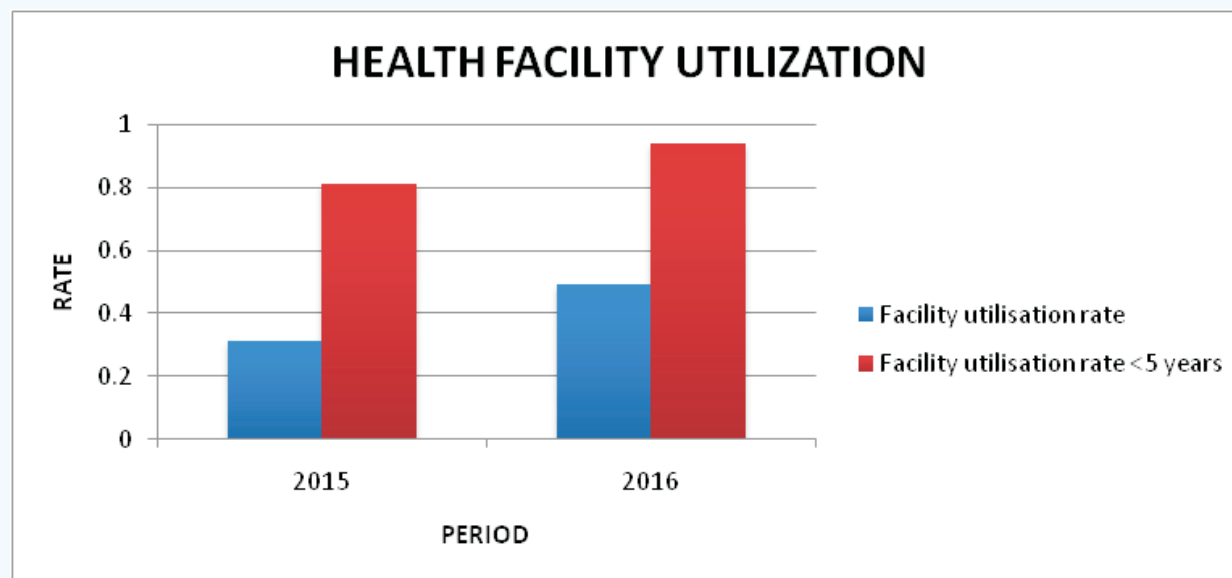
POPULATION	2006 CENSUS	2016 PROJECTED POPULATION
State total population	3,441,024	4,624,449
Female	1,715,820	1,679,761
Male	1,745,057	1,761,263
Under 1 year (4% of Total Pop)	137,641	184,978
Under 5 years (20% of Total Pop)	688,205	924,890

POPULATION	2006 CENSUS	2016 PROJECTED POPULATION
Adolescents (10 - 19 years)	1,151,477	1,387,335
Pregnant Women	172,051	231,222
Women of Child Bearing Age	757,025	1,017,379
INDICATORS	NDHS 2008	NDHS 2013/MICS 2011
Literacy rate (female)	75%	89.8 %
Literacy rate (male)	80%	NA
Total Fertility Rate	4.9	5.2
Use of FP modern method by married women 15 - 49	15%	31.10%
Ante Natal Care provided by skilled Health worker	70%	78.60%
Skilled attendants at birth	51%	67.20%
Delivery in Health Facility	47%	56.20%
Children 12-23 months with full immunization coverage	37%	47.20%
Wasting in Under 5 children	6%	13.40%
Diarrhea in children	6.6	6.7
ITN ownership	5%	36.60%
ITN utilization (children)	4%	35.50%
ITN utilization (pregnant women)	1%	41.50%
children under 5 with fever receiving malaria treatment	NA	38.50%
Pregnant women receiving IPT	5%	10.70%
Comprehensive knowledge of HIV (female)	20%	9.80%
Comprehensive knowledge of HIV (male)	33%	16.40%



**Figure 1**  
Rate of Health Facility utilization in the State

Source:  
DHIS 2.0 report  
for Ondo State

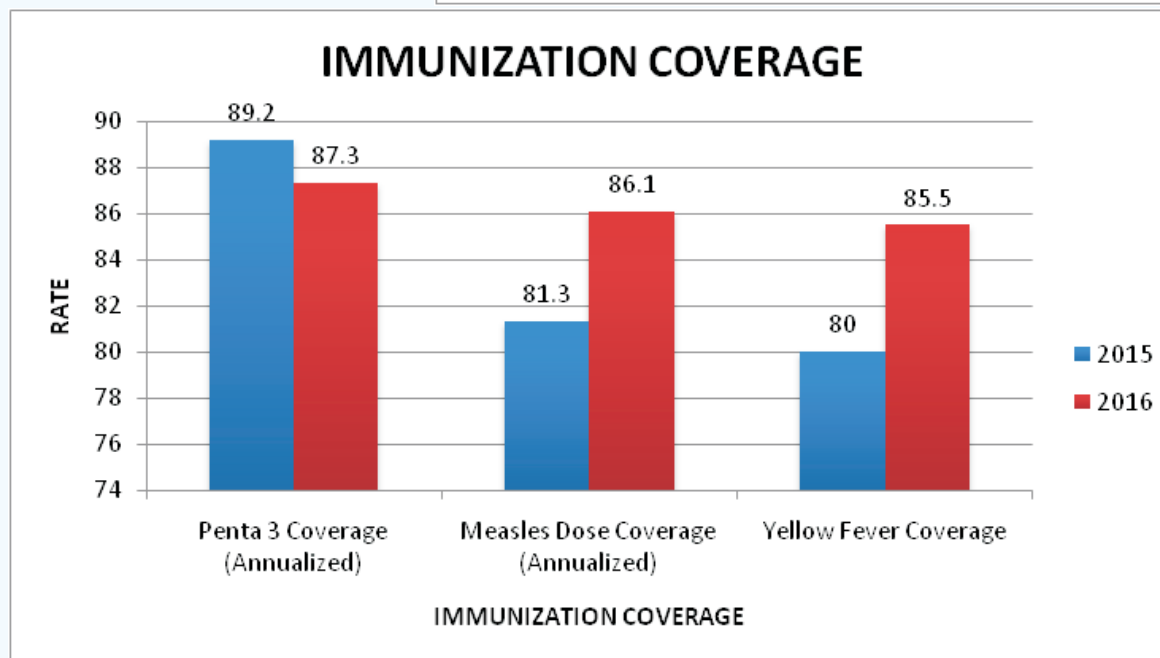
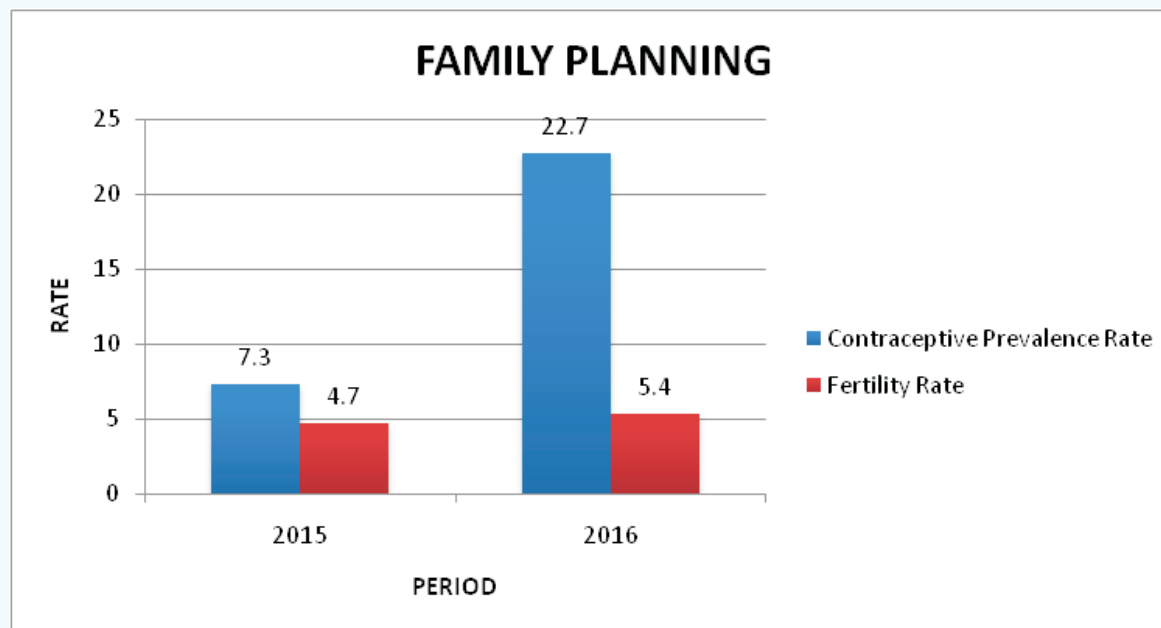


**Figure 2**  
Showing Maternal Health Coverage

Source:  
DHIS 2.0 report  
for Ondo State

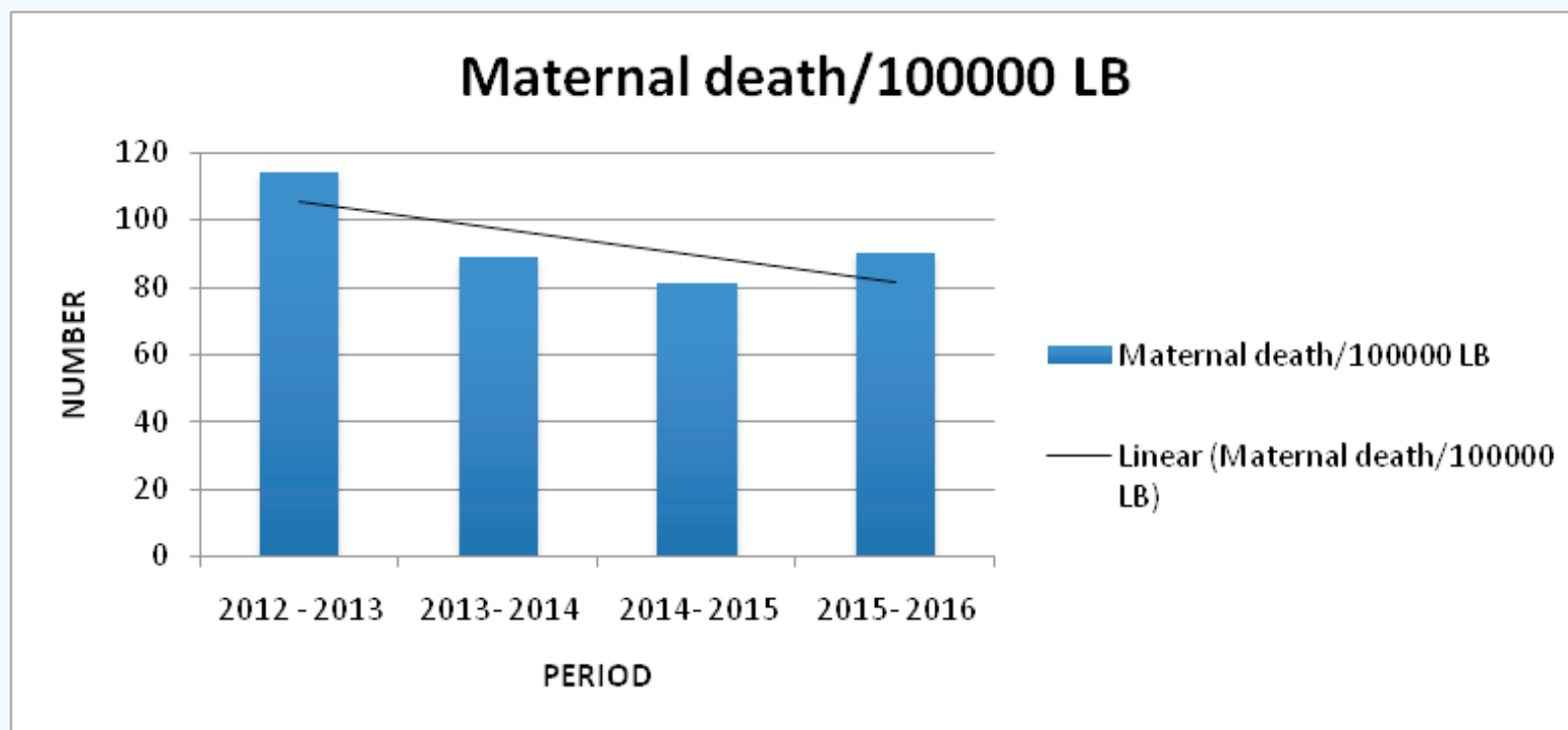
**Figure 3**  
Showing Family  
Planning Coverage

Source:  
DHIS 2.0 report  
for Ondo State



**Figure 4**  
Showing Immunization  
Coverage

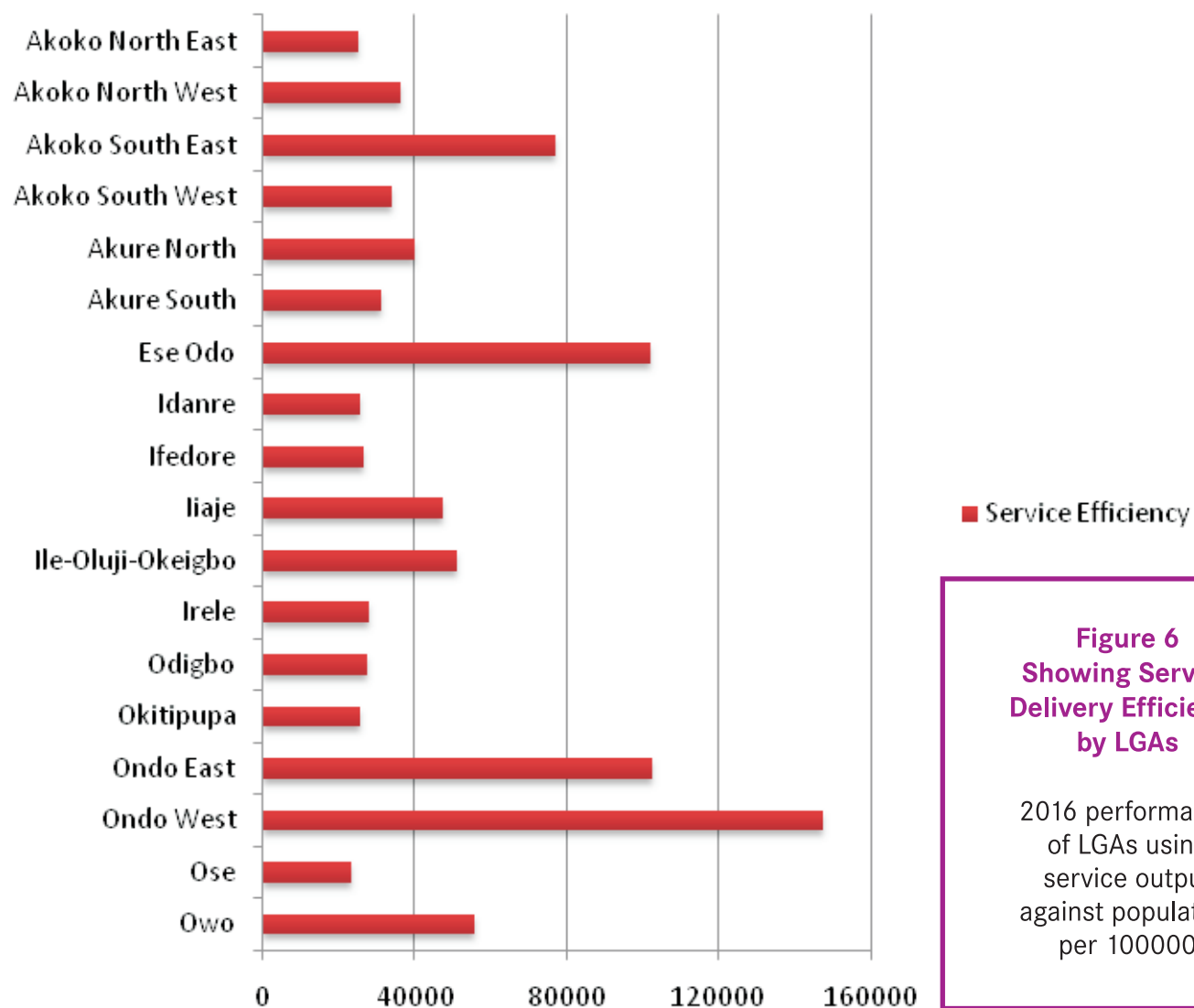
Source:  
DHIS 2.0 report  
for Ondo State



**Figure 5: Maternal death profile of the State**

Source: CEMDOS, 2017

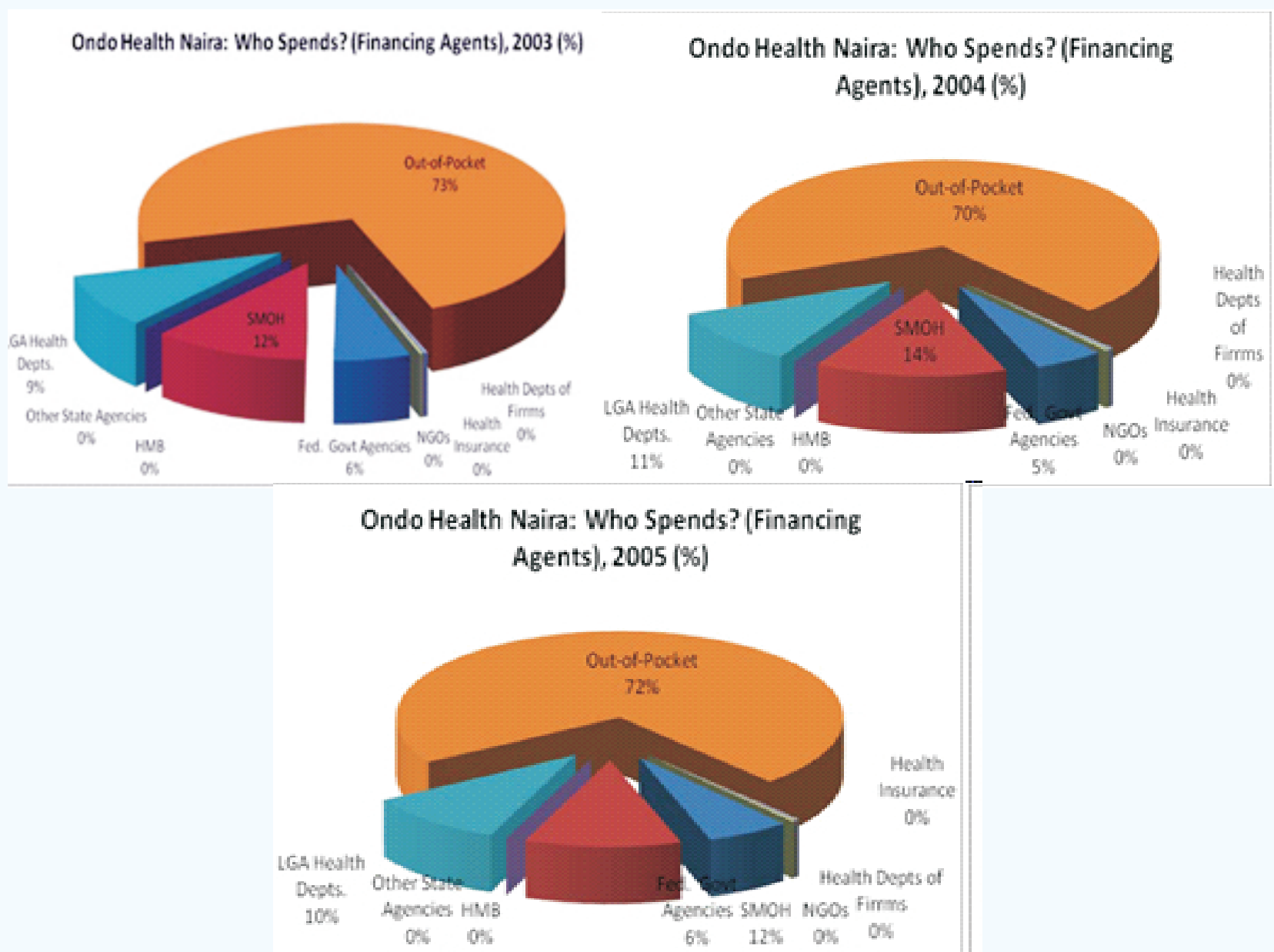
## Service delivery Efficiency by LGA



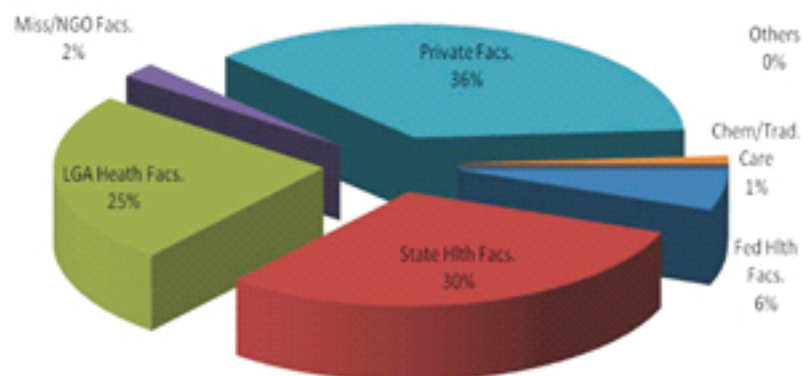
**Figure 6**  
Showing Service  
Delivery Efficiency  
by LGAs

2016 performance  
of LGAs using  
service output  
against population  
per 100000

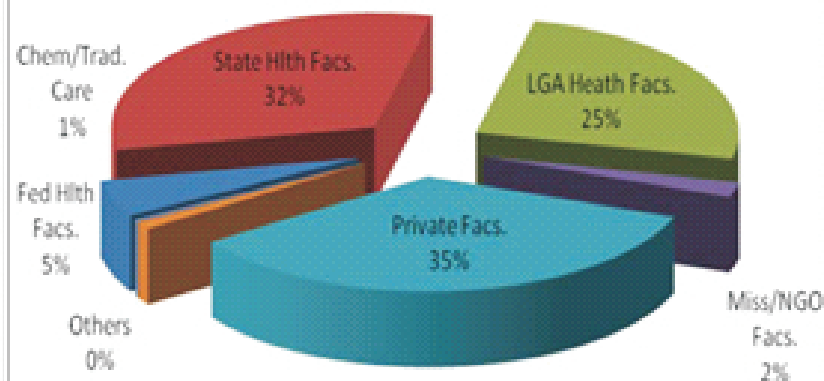
Figure 7: Trend in Ondo State Total Health expenditure



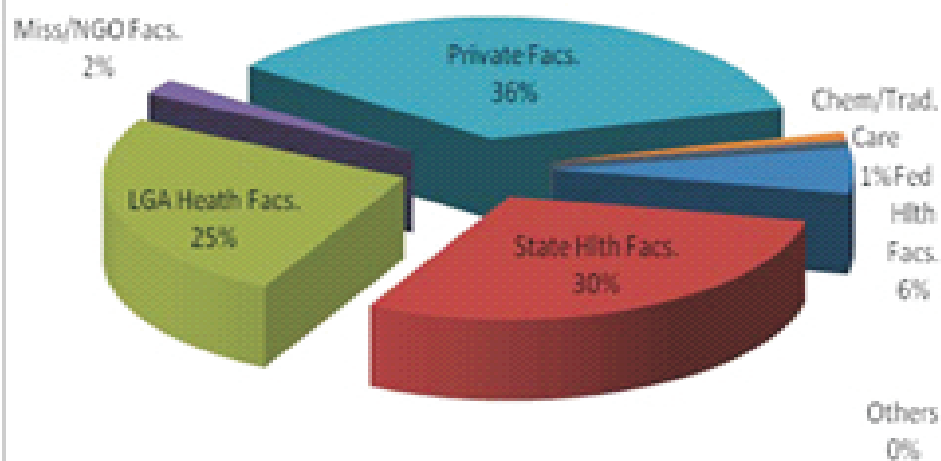
Ondo Health Naira: Who Receives? (Providers), 2003 (%)



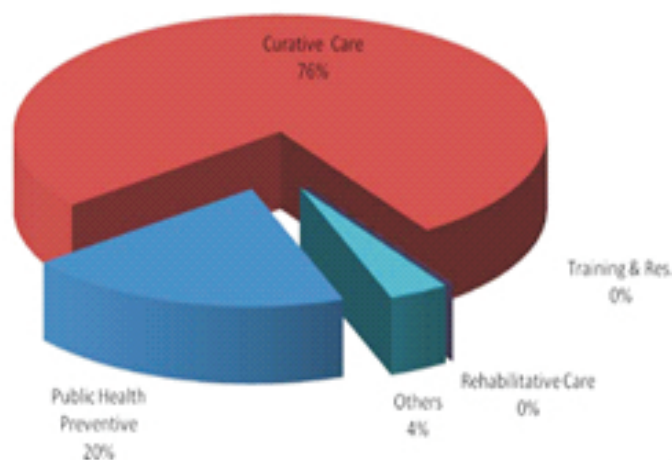
Ondo Health Naira: Who Receives? (Providers), 2004 (%)



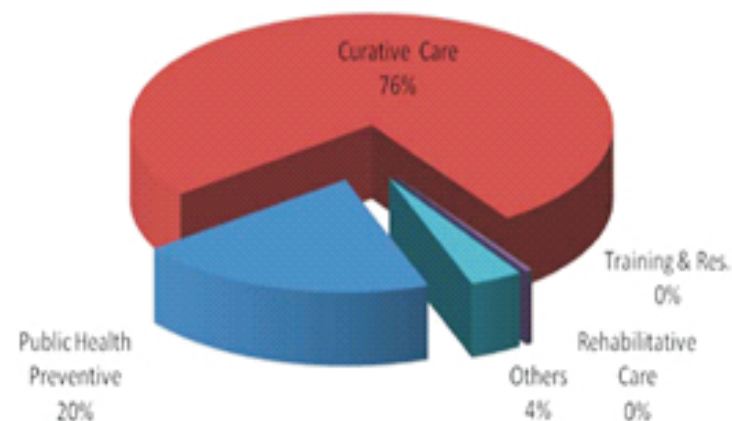
Ondo Health Naira: Who Receives? (Providers), 2005 (%)



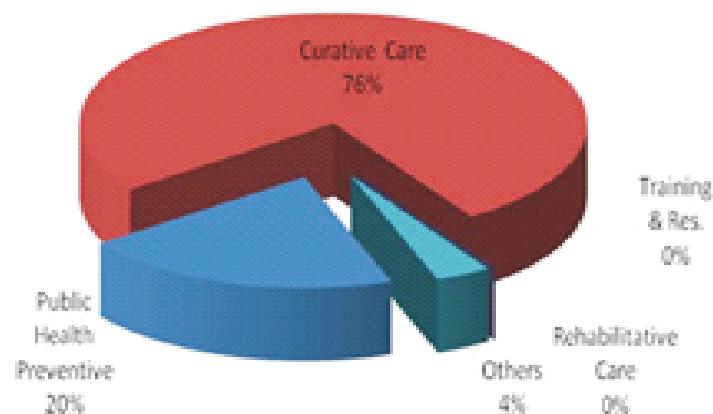
Ondo Health Naira: For Which Activities? (Functions), 2003 (%)



Ondo Health Naira: For Which Activities? (Functions), 2004 (%)



Ondo Health Naira: For Which Activities? (Functions), 2005 (%)



**Source:** National Health Account 2003 - 2005

**NB:** NHA 2006 - 2009 (not disaggregated)

## DISTRIBUTION OF PUBLIC EXPENDITURE ON HEALTH IN ONDO STATE 2010 - 2016

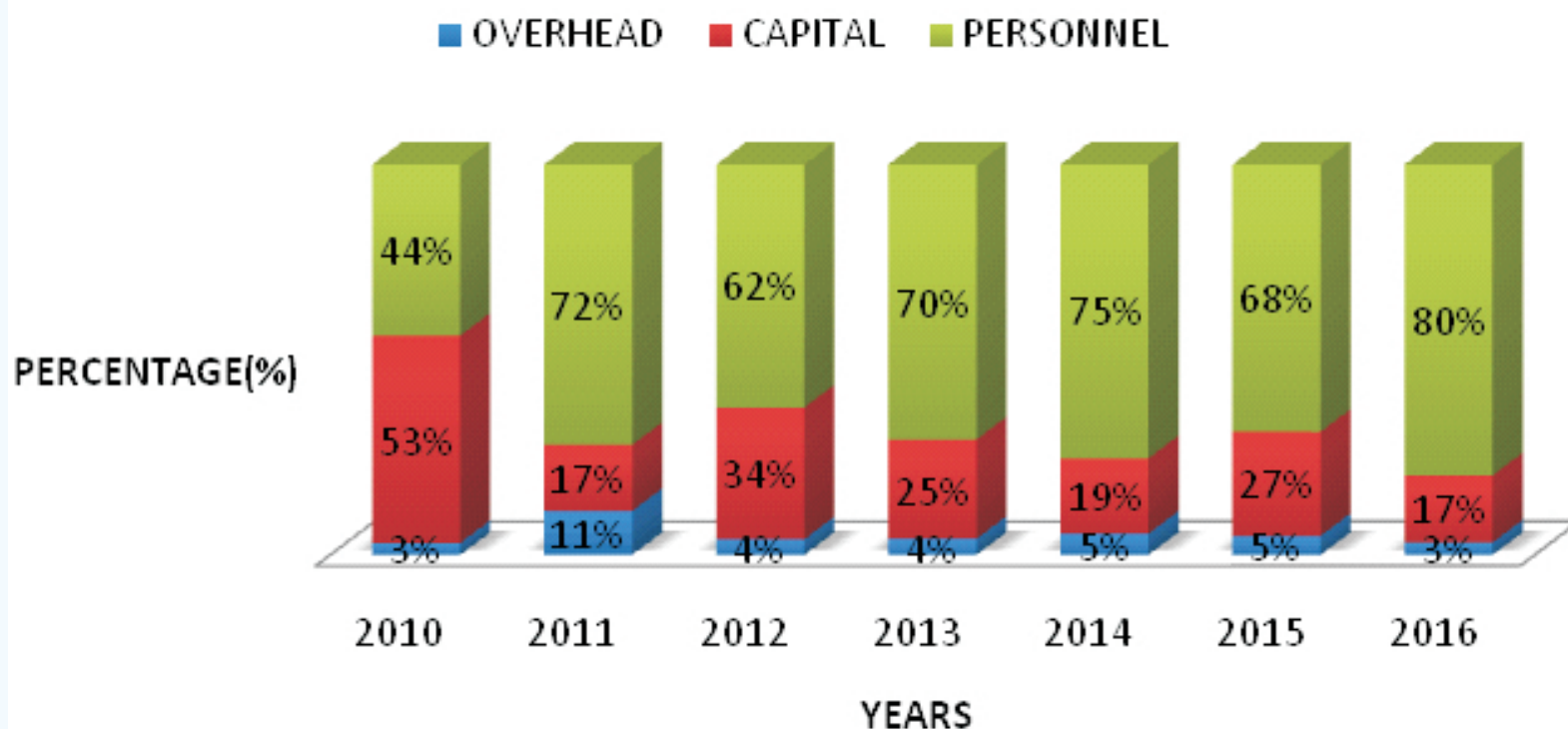


Figure 8: Showing Distribution of Public Expenditure on Health



## DISTRIBUTION OF TOTAL EXPENDITURE ON HEALTH 2010 - 2016

■ GOVT. EXP. ■ WORLD BANK ■ UNICEF ■ FEDERAL GOVT. (CGS+NHIS) ■ OTHERS

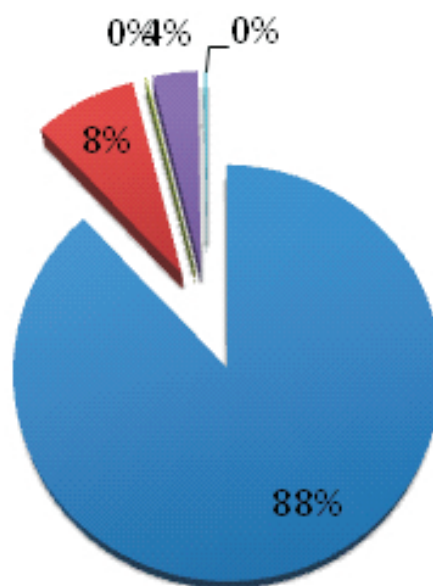


Figure 9: Showing Distribution of total Expenditure on Health

## TREND ANALYSIS OF TOTAL PUBLIC HEALTH EXPENDITURE IN ONDO STATE 2010 - 2016

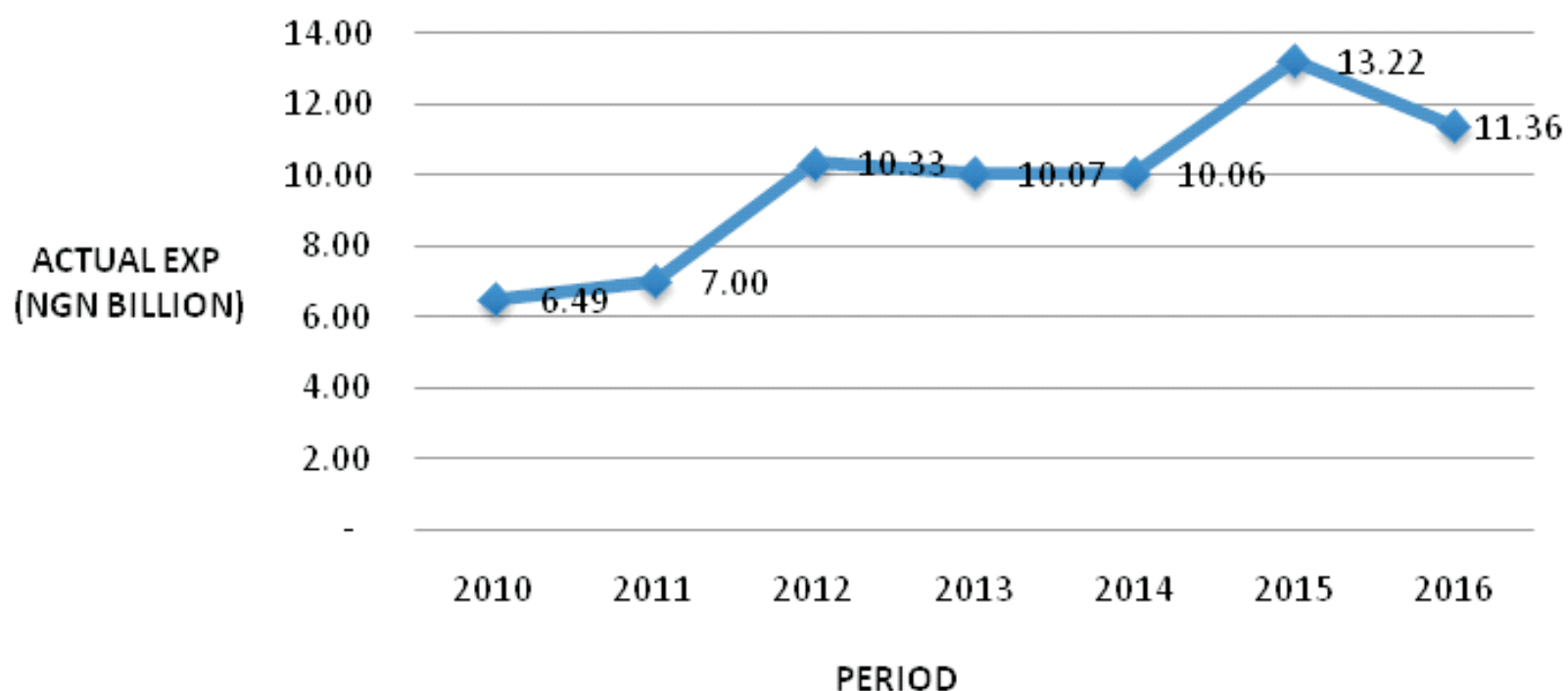


Figure 10: Showing Trend Analysis of total Public Health Expenditure

Despite the improvement in healthcare service delivery in Ondo State, there are some notable challenges which include:

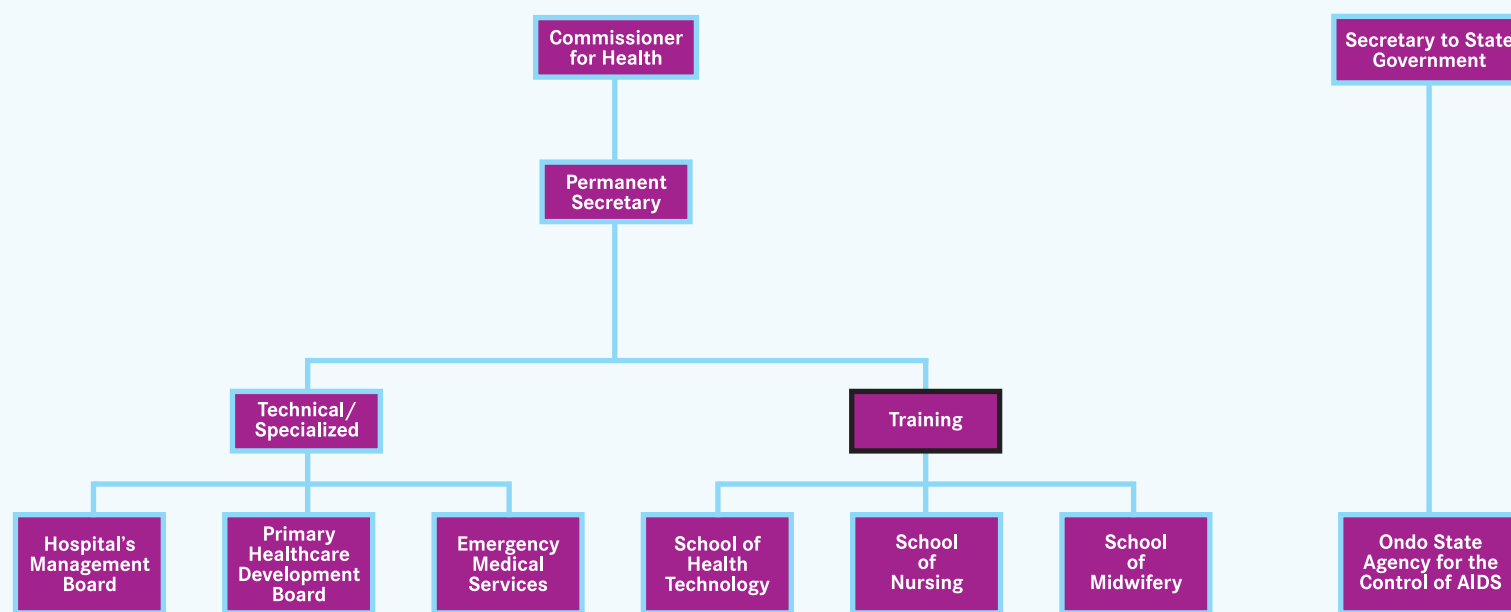
- Inadequate Budgetary allocation for Health, which is below the 15% Abuja Declaration by the African heads of government in April, 2001;
- Difficult terrains/hard-to-reach communities, which constitute almost 33% of total settlements in the state;
- Inadequate human resource for health;
- Lack of innovative financing for health;
- Over-dependence on donor funding;
- High Out-of-pocket Expenditure for health services; and
- Government involvement in tariff fixing for healthcare services.

## 2.4 OVERVIEW OF THE SECTOR'S INSTITUTIONAL STRUCTURE

As stated earlier, the Health sector is one of the cardinal and pivotal sectors of the state government and has the responsibility of providing policy direction for the health system development. It is an essential area of social service delivery to the populace. The sector comprises the Ministry of Health, 4 Agencies and 3 training schools.

- (a) The Ministry comprises of the following departments:
- i. Planning Research & Statistics
  - ii. Hospital Services
  - iii. Public Health
  - iv. Nursing Services
  - v. Pharmaceutical services
  - vi. Finance & Administration
  - vii. Accounts.

- (B) The agencies that are responsible for the execution of specific elements of the sector's projects and programmes in the State are:
- i. Hospitals Management Board
  - ii. Ondo State Primary Health Care Development Board
  - iii. Ondo State Agency for the Control of AIDS
  - iv. Ondo State Emergency Medical Services Agency
- (c) The training Institutions: Schools of Nursing and Midwifery are within the purview of the Department of Nursing Services while the School of Health Technology is under the Department of Public Health.



**Figure 11: Organogram of the Health Sector**

## 2.5 STATEMENT OF THE SECTOR'S MISSION, VISION AND CORE VALUES

### VISION

To reduce the burden of diseases on the people; to enable them live an economic and socially productive life; meet national targets on the elimination and eradication of diseases; and significantly increase the life expectancy and quality of life of the citizen.

### MISSION STATEMENT

To put in place appropriate policies and programmes under a transparent and honest leadership; to be able to strengthen the health system; to ensure affordable and qualitative health care for all citizen of Ondo State.

### CORE VALUES

- Professionalism
- Teamwork
- Transparency & accountability
- Fairness
- Responsiveness
- Excellence

**Table 2: Operational Definition of Sector's Core Values**

CORE VALUE	DEFINITION	EXAMPLES OF BEHAVIOUR	STRATEGY IMPLICATIONS
Professionalism	<p>Professional excellence through prompt innovative, responsive and efficient service delivery</p> <p>Exhibiting expertise, quality and professional ethics in the discharge of Assigned duties.</p>	<ul style="list-style-type: none"> <li>* Skillfulness, competence and proficiency.</li> <li>* Attention to details in all dealings.</li> <li>* Constant strive for optimum effectiveness And efficiency.</li> <li>* Quality service delivery</li> </ul>	<ul style="list-style-type: none"> <li>* Capacity building and effective training.</li> <li>* Provision of relevant and quality working tools as well as conducive work environment.</li> <li>* Effective manpower deployment (i.e. allocating appropriate personnel to jobs).</li> <li>* Effectively apply a Results-based performance evaluation system.</li> </ul>
Teamwork	<p>The act of a group of people working effectively and efficiently together towards a common goal through collaboration, information sharing and productive Interactions.</p> <p>Teamwork promotes</p>	<ul style="list-style-type: none"> <li>* Collaboration and cooperation.</li> <li>* Spontaneous sharing of information and best practices</li> <li>* Productive interaction of members of a team to Achieve common end.</li> <li>* Interconnectedness.</li> </ul>	<ul style="list-style-type: none"> <li>* Promote teamwork in the Health Sector through appropriate application of a reward and sanction system.</li> <li>* Entrench teamwork as part of the staff code of Conduct booklet.</li> <li>* Open door policy to</li> </ul>

CORE VALUE	DEFINITION	EXAMPLES OF BEHAVIOUR	STRATEGY IMPLICATIONS
	synergy which enhances Productivity.	<ul style="list-style-type: none"> <li>* Interdependence.</li> <li>* Mutual respect.</li> </ul>	<p>encourage information sharing</p> <ul style="list-style-type: none"> <li>* Encouraging group tasks as against individual tasks.</li> </ul>
Transparency & Accountability	<p>Accountable and open in all activities.</p> <p>As an organization that is critically dependent on taxpayers' money, integrity is essential in the management of the resources entrusted to us.</p>	<ul style="list-style-type: none"> <li>* Open door policy to encourage openness and transparency.</li> <li>* Frankness in a constructive manner in dealing with others.</li> <li>* Honesty in all dealings with everyone.</li> <li>* Doing what you say and saying what you mean and Feel.</li> <li>* Transparency and openness</li> </ul>	<ul style="list-style-type: none"> <li>* Institute best management practices and systems in the Health Sector (financial, HR, facilities) to facilitate the demonstration of integrity.</li> <li>* Demonstrate zero tolerance to lapses relating to lack of integrity on the part of any member of staff through appropriate use of rewards and sanctions in relation to integrity.</li> </ul>
Fairness	Ensuring Gender Equity (i.e. being fair to women and men according to their respective needs);	<ul style="list-style-type: none"> <li>* Accountability to all Constituent parts of Ondo State's population.</li> <li>* Ensuring equity and</li> </ul>	<ul style="list-style-type: none"> <li>* Explicitly publicize that Ondo State Health Sector is an equal opportunity organization and act</li> </ul>

CORE VALUE	DEFINITION	EXAMPLES OF BEHAVIOUR	STRATEGY IMPLICATIONS
	<p>and Gender Equality (i.e. equally valuing the similarities and differences of men and women, and the roles they play as partners in their homes, communities and societies)</p> <p>Practical demonstration of gender equity and equality manifests in equality under the law, equal opportunity and equal access to human, financial and other productive resources</p>	equality in the treatment of men and women in service delivery in the Health sector.	<p>accordingly always.</p> <p>* Avoid discrimination in service delivery to men and women.</p>
Responsiveness	Responsive to our environment and technologically driven	<p>* Reacting quickly and in a positive manner</p> <p>* Reacting with interest</p> <p>And enthusiasm</p>	Organization have to be responsive to citizens needs

**Source: Ministry of Health**



## 2.6 SECTOR POLICY

The sectoral aim is to reduce the burden of diseases on the people to enable them live an economic and socially productive life; meet national targets on the elimination and eradication of diseases; and significantly increase the life expectancy and quality of life of the citizen.

Specifically, the review provided bases for the following elements of the MTSS:

- Goals and programmes setting;
- Projects specification;
- Key performance measures; and
- Targets, Outputs and Outcomes.

## 2.7 THE SECTOR'S GOALS AND PROGRAMMES FOR THE MTSS PERIOD

This section presents brief description of the respective goals and programmes of Health sector. These will be done under the 8 Thematic strategic priority areas itemized below:

- Leadership & Governance
- Health Service Delivery
- Human Resources for Health
- Financing for Health
- Health Information System
- Community Participation
- Partnerships for Health
- Research for Health

**Table 3: Summary of State Level Goals, Sector Level Goals, Programmes and Outcomes**

STATE LEVEL GOAL	SECTOR LEVEL GOAL	PROGRAMME	OUTCOME
To reduce the burden of diseases on the people to enable them live an economic and socially productive life; meet national targets on the elimination and eradication of diseases; and significantly increase the life expectancy and quality of life of the citizen.	GOAL 1: To create and sustain an enabling environment for the delivery of quality health care and development in Ondo State	Health Policy planning	Improved policy direction for the health development
		Health legislation and regulation	Strengthened Legislative and Regulatory Functions of Government for Health Development
		Accountability, transparency and responsiveness of the health system	Strengthened accountability, transparency and responsiveness of the State Health system
		State health system performance improvement	Improved the performance of the State Health System implemented by the State health sector
	GOAL 2: To revitalize integrated service delivery towards a quality, equitable and sustainable Healthcare	Universal access to essential package of care	Ensured universal access to an essential package of care
		Access to health care services	Increased access to health care services
		Quality of health care services	Improved the quality of health care service
		Demand for health care services	Increased demand for health care services

STATE LEVEL GOAL	SECTOR LEVEL GOAL	PROGRAMME	OUTCOME
		Financial access for vulnerable groups	Provided financial access especially for the vulnerable groups
	GOAL 3: To plan and implement strategies to address the human resources for health needs in order to enhance its availability as well as ensure equity and quality of health care	<p>Comprehensive policies and plans for HRH for health development</p> <p>Framework for objective analysis, implementation and monitoring of HRH performance</p> <p>Institutional framework for human resources management practices (in the health sector)</p> <p>Capacity of training institutions to scale up the production of a critical mass of quality, multipurpose, multi-skilled, gender sensitive And mid-level health workers</p> <p>Organizational and performance based systems for HRH</p>	<p>Formulated comprehensive policies and plans for HRH for health development</p> <p>Provided a framework for objective analysis, implementation and monitoring of HRH performance</p> <p>Strengthened institutional framework for human resources management practices in the health sector</p> <p>Strengthened the capacity of training institutions to scale up the production of a critical mass of quality, multipurpose, multi skilled, gender sensitive and mid-level health workers</p> <p>Improved organizational and performance based management systems for human resources for</p>

STATE LEVEL GOAL	SECTOR LEVEL GOAL	PROGRAMME	OUTCOME
	GOAL 4: To ensure that adequate and sustainable funds are available and allocated for accessible, affordable, efficient and equitable health care provision and consumption at local and State levels	Partnerships and networks to harness contributions for HRH agenda	health  Fostered partnerships and networks of stakeholders to harness contributions for human resource for health agenda
		Implementing Health Financing strategies	Improved Health financing strategies implemented at State and Local levels consistent with the State Health Financing Policy
		Protection from medical financial catastrophe and impoverishment	Protection of people from financial catastrophe and impoverishment as a result of using health services
		Sustainable funding of healthcare goals and objectives at all levels	Secured level of funding needed to achieve desired health development goals and objectives at all levels in a sustainable manner
		Efficiency and equity in the allocation and use of health sector resources at all levels	Efficient and equitable allocation and use of health sector resources at all levels
	GOAL 5: To contribute to an effective	Data collection and	Improved data collection and

STATE LEVEL GOAL	SECTOR LEVEL GOAL	PROGRAMME	OUTCOME
	National Health Management Information System (NHMIS) to be used as a management tool for informed decision making at all levels for improved health care	transmission	Transmission
		Infrastructure support and ICT for health databases	Provision of infrastructural support and ICT of health databases and staff training
		Sub-Systems in Health Information System	Strengthened sub-systems in the Health Information System
		NHMIS Monitoring and Evaluation	Good monitoring and Evaluation of the NHMIS
		Health Information Data Analysis and Dissemination	Strengthened analysis of data and dissemination of health information
	GOAL 6: To attain effective community participation in health development and management, as well as community ownership of sustainable health outcomes	Community participation in health development	Strengthened community participation in health development
		Community "ownership" of health services	Empowered communities with skills for positive health actions
		Community health services Linkages	Strengthened community - health services linkages
	GOAL 7: To enhance harmonized implementation of essential health	Introduction of collaborative mechanisms for involving all	Collaborative mechanisms are put in place for involving all

STATE LEVEL GOAL	SECTOR LEVEL GOAL	PROGRAMME	OUTCOME
	services in line with national health policy goals	partners in the development and sustenance of the health sector	partners in the development and sustenance of the health sector
	GOAL 8: To utilize research to inform policy, programming, improve health, achieve nationally and internationally health related development goals and contribute to the global knowledge platform	Research and knowledge management systems at all levels of government	Strengthened stewardship role of governments at all levels for research and knowledge management systems
		Institutional capacities to promote, undertake and utilize research for evidence based policy making in health at all levels	Institutional capacities to promote, undertake and utilise research for evidence based policy making in health at all levels strengthened
		Comprehensive repository for health research at all levels (including public and non-public sectors)	Developed comprehensive repository for health research at all levels (including both public and non-public sectors)

**Table 4: Goals, Programmes and outcome deliverables**

GOAL	PROGRAMME	OUTCOME DELIVERY	PERFORMANCE INDICATOR	BASE-LINE	ANNUAL ACTUAL	MID-TERM TARGET	TERMINAL TARGET
				2016	2018	2019	2020
PRIORITY AREA 1: LEADERSHIP AND GOVERNANCE FOR HEALTH							
GOAL 1: To create and sustain an enabling environment for the delivery of quality health care and development in Ondo State	Health Policy planning Health legislation and regulation	Improved policy direction for the health development	Percentage of stakeholders in Ondo State Health sector that are informed regarding the health development policy directives and whose programmes are derived from the SSHDP	50%	60%	70%	75%
	Accountability, transparency and responsiveness of the health system	Strengthened Legislative and Regulatory Functions of Government for Health Development	Percentage of health service providers that are operating within their respective regulatory health laws % of annual facility utilization	50%	60%	70%	80%
	State health system Performance Improvement	To strengthen accountability, transparency and responsiveness of the State health system	% of recommendations from annual programme reviews	0%			

GOAL	PROGRAMME	OUTCOME DELIVERY	PERFORMANCE INDICATOR	BASE-LINE	ANNUAL ACTUAL	MID-TERM TARGET	TERMI-NAL TARGET
				2016	2018	2019	2020
PRIORITY AREA 2: HEALTH SERVICES DELIVERY							
GOAL 2: To revitalize integrated service delivery towards a quality, equitable and sustainable healthcare	Universal access to essential package of care	To ensure universal access to an essential package of care	Percentage of wards with a functional PHC facility providing minimum essential health care package		80%	90%	100%
	Access to health care Services	To increase access to health care services	% of the population within 30mins walk or 5km of a health service				
	Quality of health care services	To improve the quality of health care service	Proportion of registered TB cases cured under DOTS		69%	75%	80%
	Demand for health care services	To increase demand for health care services	Annual total outpatient attendance in secondary and tertiary health facilities in the State (5% annual Increase)				
	Financial access for vulnerable groups	To provide financial access especially for the vulnerable groups	% of identified vulnerable people given access to health services free of charge	TBD	TBD	100%	100%



GOAL	PROGRAMME	OUTCOME DELIVERY	PERFORMANCE INDICATOR	BASE-LINE	ANNUAL ACTUAL	MID-TERM TARGET	TERMI-NAL TARGET
				2016	2018	2019	2020
PRIORITY AREA 3: HUMAN RESOURCES FOR HEALTH							
GOAL 3: To plan and implement strategies to address the human resources for health needs in order to enhance its availability as well as ensure equity and quality of health care	Comprehensive policies and plans for HRH for health Development	To formulate comprehensive policies and plans for HRH for health development	Ratio of Health Professionals per population		TBD		
	Framework for objective analysis, Implementation and monitoring of HRH Performance	To provide a framework for objective analysis, implementation and monitoring of HRH performance	% of all Department & Agencies utilizing a standardized monitoring tool for HRH performance	0%	0%	100%	100%
	Institutional framework for human resources management Practices (in the health sector)	Strengthen the institutional framework for human resources management practices in the health sector	% of State health facilities with recommended HRH complement as per service delivery demands	TBD			
	Capacity of training institutions to scale up the production of a critical mass of quality, multipurpose, multi-skilled, gender sensitive and mid-	To strengthen the capacity of training institutions to scale up the production of a critical mass of quality, multipurpose, multi skilled, gender	No. of Mid-level health workers trained per Health training institution per year	TBD			

GOAL	PROGRAMME	OUTCOME DELIVERY	PERFORMANCE INDICATOR	BASE-LINE	ANNUAL ACTUAL	MID-TERM TARGET	TERMI-NAL TARGET
				2016	2018	2019	2020
	level health workers	sensitive and mid-level health workers					
	Organizational and performance based systems for HRH	To improve organizational and performance based management systems for human resources for Health	% of Departments and Agencies that have implemented performance-based management systems		100%	100%	100%
	Partnerships and networks to harness contributions for HRH Agenda	To foster partnerships and networks of stakeholders to harness contributions for human resource for health agenda					
<b>PRIORITY AREA 4: FINANCING FOR HEALTH</b>							
GOAL 4: To ensure that adequate and sustainable funds are available and allocated for accessible, affordable, efficient and equitable health care provision and consumption at local and State levels	Implementing Health Financing strategies	Improve Health financing strategies implemented at State and Local levels consistent with the State Health Financing Policy	% of the State's budget allocated to the Health Sector.	3.20%	7.00%	12%	15%
	Protection from medical financial Catastrophe and	To ensure that people are protected from financial catastrophe	% of Ondo State Indigenes covered by any financial protection	TBD			

GOAL	PROGRAMME	OUTCOME DELIVERY	PERFORMANCE INDICATOR	BASE-LINE	ANNUAL ACTUAL	MID-TERM TARGET	TERMI-NAL TARGET
				2016	2018	2019	2020
	impoverishment	and impoverishment as a result of using health services	mechanism	TBD			
	Sustainable funding of healthcare goals and objectives at all levels	To secure a level of funding needed to achieve desired health development goals and objectives at all levels in a sustainable manner	% of total required/ needed funds actually allocated to Health at State level is increased by 10% yearly				
	Efficiency and equity in the allocation and use of health sector resources at all levels	To ensure efficiency and equity in the allocation and use of health sector resources at all levels	Health Budget performance at the State level is improved	38%	40%	50%	60%
<b>PRIORITY AREA 5: NATIONAL HEALTH INFORMATION SYSTEM</b>							
GOAL 5: To contribute to an effective National Health Management Information System (NHMIS) to be used as a management tool for informed decision making at all levels for	Data collection and Transmission	To improve data collection and Transmission	Percentage of health facilities making routine, timely and complete monthly NHMIS returns to the State level				
	Infrastructure support and ICT for	To provide Infrastructural	Proportion of LGAs using customized data	0%			

GOAL	PROGRAMME	OUTCOME DELIVERY	PERFORMANCE INDICATOR	BASE-LINE	ANNUAL ACTUAL	MID-TERM TARGET	TERMI-NAL TARGET
				2016	2018	2019	2020
improved health care	health databases	support and ICT of health databases and staff training	management software (DHIS)				
	Sub-Systems in Health Information System	To strengthen sub-systems in the Health Information System	Availability Annual HMIS Data Audit Review Report	none			
	NHMIS Monitoring and Evaluation	To monitor and evaluate the NHMIS	% of programmes due for outcome/impact evaluation that had evaluation conducted using NHMIS data	0%			
	Health Information Data Analysis and Dissemination	To strengthen analysis of data and dissemination of health information	Departments and Agencies that Disseminate statistical progress reports Periodically	TBD			
<b>PRIORITY AREA 6: COMMUNITY PARTICIPATION AND OWNERSHIP</b>							
GOAL 6: To attain effective community participation in health development and management, as well as community ownership of sustainable	Community participation in health development	To strengthen community participation in health Development	Number of quarterly/ annual State level fora to engage community leaders and CBOs				
	Community "ownership" of health Services	To empower communities with skills for positive	% of CSOs and community leaders trained and engaging	0%		5%	20%

GOAL	PROGRAMME	OUTCOME DELIVERY	PERFORMANCE INDICATOR	BASE-LINE	ANNUAL ACTUAL	MID-TERM TARGET	TERMI-NAL TARGET
				2016	2018	2019	2020
health outcomes		health actions	With the government health system				
	Community health services linkages	To strengthen the community - health services linkages					
<b>PRIORITY AREA 7: PARTNERSHIPS FOR HEALTH</b>							
GOAL 7: To enhance harmonized implementation of essential health services in line with national health policy goals	Introduction of collaborative mechanisms for involving all partners in the development and sustenance of the health sector	To ensure that collaborative mechanisms are put in place for involving all partners in the development and sustenance of the health sector	Existence of a joint / integrated operational workplan	None		Yes	Yes
<b>PRIORITY AREA 8: RESEARCH FOR HEALTH</b>							
GOAL 8: To utilize research to inform policy, programming, improve health, achieve nationally and internationally health related development goals and contribute to the global knowledge platform	Research and knowledge management systems at all levels of government	To strengthen the stewardship role of governments at all levels for research and knowledge management systems	% of health budget spent on health research and evaluation at State Level	TBD			
	Institutional capacities to promote, undertake and utilize	To build institutional capacities to promote, undertake	Percentage of government policies and plans that are	0	0%	20%	30%

GOAL	PROGRAMME	OUTCOME DELIVERY	PERFORMANCE INDICATOR	BASE-LINE	ANNUAL ACTUAL	MID-TERM TARGET	TERMI-NAL TARGET
				2016	2018	2019	2020
	research for evidence based policy making in health at all levels	and utilize research for evidence based policy making in Health at all levels	produced based on results of research and evaluation conducted				
	Comprehensive repository for health Research at all levels (including public and non-public sectors	To develop a comprehensive repository for health research at all levels (including both public and nonpublic sectors):	% of State Department and Agencies implementing the National Health Research communication Strategy				

# CHAPTER 3

## THE DEVELOPMENT OF STRATEGIC CHALLENGES

### 3.1 MAJOR STRATEGIC CHALLENGES

In the development of the sector strategy, some challenges were encountered and these include;

- Non-availability and poor quality of relevant data;
- Inadequate logistics provision;
- Limited time frame to prepare the document.

### 3.2 RESOURCE CONSTRAINTS

Resource constraints are notable inhibitory factors to the capacity of the sector to implement its financial obligations. The actual budgetary release, as a percentage of the budgetary allocation to the health sector, reflects the resource constraints.

The following are the highlights of the 2016 budget data presented in tables 5 and 6. The challenges encountered in implementing the 2016 budget are as listed below:

- Drastic reduction in the budget of MDAs e,g (sectoral budget comparison for 2016 and 2017)
- Reduction in the federal allocation due to fall in price of crude oil in the international market
- Inability to access budgeted fund when needed.

**Table 6: Summary of 2016 Budget Data**

ITEM	APPROVED BUDGET (N) IN 2015	AMOUNT RELEASED (N) IN 2015	ACTUAL EXPENDITURE (N) IN 2015	ACTUAL EXPENDITURE AS % OF RELEASES	ACTUAL EXPENDITURE AS % OF RELEASES
<b>Personnel</b>	9,048,342,518.69	7,445,340,005.86	7,445,340,005.86	82%	100%
<b>Overhead</b>	72,710,000.00	46,237,996.00	46,237,996.00	64%	100%
<b>Capital</b>	3,495,000,000.00	1,494,021,436.04	1,494,021,436.04	43%	100%
<b>Special Programmes</b>	564,000,000.00	485,671,778.61	1,944,858,887.87	86%	100%
<b>Total</b>	<b>13,184,692,518.69</b>	<b>9,471,271,216.51</b>	<b>10,932,458,325.77</b>	<b>72%</b>	<b>100%</b>

**Table 7: Summary of 2017 Budget Data**

ITEM	APPROVED BUDGET (N) IN 2015	AMOUNT RELEASED (N) IN 2015	ACTUAL EXPENDITURE (N) IN 2015	ACTUAL EXPENDITURE AS % OF RELEASES	ACTUAL EXPENDITURE AS % OF RELEASES
<b>Personnel</b>	7,866,772,911.65	4,121,724,003.59	3,872,210,140.77	52%	100%
<b>Overhead</b>	65,400,000.00	14,286,350.00	14,286,350.00	22%	100%
<b>Capital</b>	9,786,919,810.50	71,654,000.00	52,534,000.00	1%	100%
<b>Special Programmes</b>	408,000,000.00	242,902,000.00	242,902,000.00	60%	100%
<b>Total</b>	<b>18,127,092,722.15</b>	<b>4,450,566,353.59</b>	<b>4,181,932,490.77</b>	<b>23%</b>	<b>100%</b>



**Table 8: Summary of the Review of Ongoing and Existing Projects Scorecard (Ranked by Average score for Ongoing and Existing Projects and by FinalScore for New Projects)**

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
<b>Ongoing and Existing Projects</b>									
1	Trauma Centre (Infrastructure & Others)	4	4	4	3	3	3.6	2	To cope with influx of referrals
2	Nigeria State Health Investment Project Credit (World Bank Assisted)	4	4	4	3	3	3.6	2	To improve quantity and quality of health service delivery
3	Human Resources (Capacity Building)	4	4	3	4	3	3.6	2	Some staff have retired. New and old staff should be trained on current updates.
4	Accreditation of School of Midwifery and other activities of N&MCN (SoM)	4	4	2	4	4	3.6	2	To lift embargo on students admission
5	Festival of Surgery; Eye Camp at the MEC	4	4	4	2	3	3.4	6	To assist the indigent patients
6	Nigeria State Health Investment Programme DLI Re-imbursement	4	4	4	2	3	3.4	6	To enhance effective service delivery
7	Neonatal Intensive Nursing Training Programme	4	4	4	2	3	3.4	6	To improve Neonatal service

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
8	Free Health Drugs	4	4	4	2	3	3.4	6	To enhance drug accessibility
9	Procurement of anatomical models for demonstration rooms of the school	4	4	3	3	3	3.4	6	To enhance teaching/ learning process
10	Construction and Upgrading of Secondary Health Facilities	4	4	4	2	3	3.4	6	To enhance service delivery
11	Medical Board of Enquiry and Medical Assistance (Meetings and Investigation)	4	4	4	2	3	3.4	6	To give support to indigents
12	Maintenance, Renovation, Furnishing of Hospitals & Other Health Facilities	4	2	4	4	2	3.2	13	To improve capacity to manage inpatient cases
13	Basic Laboratory Equipment; and other Medical Equipment	4	4	3	2	3	3.2	13	To improve medical service
14	Purchase of Office Equipment (MOH)	4	4	3	2	2	3	15	To improve health care administration
15	Renovation of existing Facilities (SOM)/Procurement of Consumables	3	4	2	3	3	3	15	To enhance learning
16	Landscaping and Beautification of the Schools of Nursing and	2	4	3	3	3	3	15	Adds Aesthetic value to school environment

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
	Midwifery								
17	Public Health Laboratory	2	4	3	2	3	2.8	18	To improve the diagnostic capacity for diseases of public health importance
18	Construction of the sick-bay for SoN	4	4	2	2	2	2.8	18	Prompt health care services to students
19	Purchase of library text books (SoM)	4	3	2	3	2	2.8	18	Updating of Students Knowledge on New Trends
20	Central Blood Transfusion Services	3	4	2	2	3	2.8	18	To promote safe blood transfusion
21	Construction and Equipping of Mother and Child Hospital (Ikare And Okitipupa)	2	4	1	3	4	2.8	18	To reduce Maternal Mortality in the Northern and Southern Senatorial Districts
22	Establishment of Health Insurance Agency	2	1	1	4	4	2.4	27	To ensure Universal Health Coverage
23	Reconstruction of Cold Chain Store, Okitipupa	1	1	1	2	3	1.6	46	To ensure the availability of potent Vaccines
24	Renovation of HMB headquarter	1	2	1	4	4	2.4	27	To ensure conducive environment for increased productivity and efficiency

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
25	Purchase of Branded HP Desktop Computer Set for HMB Quarters 10 Nos @ N0.55 each with Printer	4	4	4	4	4	4	1	For efficient Data Management and better work output
26	Purchase of Beds & Mattresses, Nurse and Patient Dresses for all SSH & Ghs	1	1	2	4	4	2.4	27	For qualitative and quantitative Healthcare Services
27	Training and Manpower Development (HMB)	1	2	2	4	3	2.4	27	To enhance service delivery
28	Establishment of Herbal Garden (Alternative Medicine)	2	3	2	4	2	2.6	23	For research purpose
29	Procurement of Office Equipment (Alternative Medicine)	2	3	2	4	2	2.6	23	Conducive environment for increased productivity and efficiency
30	Construction of Matrons Quarters for SoN	1	1	1	3	4	2	41	Requirement for accreditation
31	Provision of sporting facilities & NISONMG (SoN)	2	2	3	4	2	2.6	23	For recreation and fitness
32	Re-Roofing of Classrooms (SoN)	1	1	1	2	3	1.6	46	Conducive environment for learning
33	Procurement of reagents/ consumables (SoN)	2	2	2	4	2	2.4	27	To enhance learning

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
34	Purchase of Office Equipment for SoN	1	2	1	4	2	2	41	Conducive environment for increased productivity and efficiency
35	Provision of Office Furniture (SoN)	1	2	1	4	2	2	41	Conducive environment for increased productivity and efficiency
36	Provision of Internet facility for SoN	1	2	1	4	2	2	41	To improve efficiency and communication
37	Procurement of Equipment for the Demonstration Room (SoN)	1	2	1	4	3	2.2	33	To enhance learning
38	Re-Roofing of Administrative Block (SoN)	1	2	1	4	3	2.2	33	Conducive environment for increased productivity and efficiency
39	Re-roofing of 3 hostel buildings (SoM)	1	2	1	4	3	2.2	33	Conducive environment for learning
40	Re-roofing of administrative block (SoM)	1	2	1	4	3	2.2	33	Conducive environment for increased productivity and efficiency
41	Procurement of clinical Laboratory Equipment (SHT)	2	3	1	4	3	2.6	23	To enhance learning
42	Construction of Students Chairs and Lockers (SHT)	2	2	1	4	3	2.4	27	Conducive environment for learning

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
43	Procurement of School Bus (SHT)	1	2	1	4	3	2.2	33	Logistic support to aid learning
44	Procurement of Equipment for Environmental Demonstration Ground (SHT)	1	2	1	4	3	2.2	33	To enhance learning
45	Acquisition of bandwidth, subscription and Toll-free lines (ODEMSA)	1	2	1	4	2	2	41	For prompt emergency response
46	Computerised web based EMS Management System (Inventory management system, Trauma Registry and Personnel Public Key Infrastructure Management System) (ODEMSA)	1	2	1	4	3	2.2	33	For effective Data management
47	Renovation of Offices and Wards (Neuro-psychiatric Hospital)	1	1	1	4	4	2.2	33	Conducive environment for workers and patients
New Projects									
1	Construction of 250-Room Hostel for SoN/SoM	NA	NA	NA	NA	3	3	7	Requirement for accreditation and student welfare
2	Construction of 50-Room Administrative Building for SoN/SoM	NA	NA	NA	NA	3	3	7	Conducive environment for increased productivity and efficiency

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
3	Construction of a New Midwifery Laboratory (SoM)	NA	NA	NA	NA	4	4	1	To enhance learning
4	Construction of 500-capacity Auditorium (SoN/SoM)	NA	NA	NA	NA	2	2	10	Conducive environment for learning
5	Purchase of Utility Vehicle (SoN)	NA	NA	NA	NA	2	2	10	Logistic support to aid learning
6	3 Nos of Incinerators (OSPHCDB)	NA	NA	NA	NA	4	4	1	For effective medical waste management
7	50 Nos of Cold chain Equipment (OSPHCDB)	NA	NA	NA	NA	4	4	1	To ensure availability of potent Vaccine
8	Construction of New Office Accommodation (OSPHCDB)	NA	NA	NA	NA	3	3	7	Conducive working environment to increase productivity and efficiency
9	3 Nos of Hilux Vehicle (OSPHCDB)	NA	NA	NA	NA	2	2	10	Logistic support for supervision
10	Purchase of 4 Advance Life Support Ambulance (ODEMSA)	NA	NA	NA	NA	4	4	1	For prompt emergency response
11	Construction of 4 EMS Stations at Igbado, Okeagbe, Okitipupa and Akure (ODEMSA)	NA	NA	NA	NA	4	4	1	To expand the coverage of emergency medical services
12	Rooming of 4 EMS station at,	NA	NA	NA	NA	4	4	1	To expand the coverage of

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
	Igbado, Okeagbe, Okitipupa and Akure (ODEMSA)								emergency medical services
13	Purchase and Equipping 4 Extricating Vehicles (ODEMSA)	NA	NA	NA	NA	4	4	1	To expand the coverage of emergency medical services
14	Construction and Equipment of Oncology Centre for Cancer Prevention, Treatment and Research in Owo (MOH)	NA	NA	NA	NA	4	4	1	To reduce morbidity and mortality due to cancer
15	Construction of standard Mortuaries in each SSH (MOH)	NA	NA	NA	NA	4	4	1	For availability of standard mortuary services
16	Construction of well-equipped Intensive Care Unit in Okitipupa, Ikare and Akure (MOH)	NA	NA	NA	NA	4	4	1	To enhance intensive care management of patients
17	Completion of Central Medical Store (MOH)	NA	NA	NA	NA	2	2	10	For effective logistics management of medical commodities
18	Procurement of Books and Journals-Medical Library for 4 SSH(HMB)	NA	NA	NA	NA	4	4	1	To aid learning and research
19	Supply of Furniture for 4 SSH (HMB)	NA	NA	NA	NA	3	3	7	Conducive working environment



S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
20	Computerization of Medical Records Department in 4 SSH and General Hospitals (HMB)	NA	NA	NA	NA	3	3	7	For effective Data management
21	Purchase of 10KVA Generator for the GH Igbotako (HMB)	NA	NA	NA	NA	4	4	1	For improved alternative power supply for better in-patient care
22	Procurement and Installation of 2 Nos PCR Machine and its Accessories for the Northern and Southern Senatorial Districts (ODSACA)	NA	NA	NA	NA	4	4	1	To improve diagnostic accuracy of HIV
23	Procurement of 3 Viral-load Machines for 3 New Viral-load Testing Laboratory at Mother&ChildOndo, SSH Okitipupa and SSH Ikare (ODSACA)	NA	NA	NA	NA	3	3	7	For better management of HIV/AIDS patients.
24	Procurement of 1000 sets of PPE (ODSACA)	NA	NA	NA	NA	3	3	7	To ensure universal precautions
25	Procurement and Installation of 17 Genexpert Machine in 17 ART Sites (ODSACA)	NA	NA	NA	NA	2	2	10	To improve diagnostic accuracy of Tuberculosis

S/N	PROJECT TITLE	CRITERION 1	CRITERION 2	CRITERION 3	CRITERION 4	CRITERION 5	AVERAGE / FINAL SCORE	RANK	JUSTIFICATION
26	Renovation and Re-roofing of Old Classroom Block (SHT)	NA	NA	NA	NA	2	2	10	Conducive learning environment
27	Construction and Procurement of Office Furniture for New Administrative Block (SHT)	NA	NA	NA	NA	3	3	7	Conducive working environment
28	Purchase of 100 Nos of Double Bunk Beds (SHT)	NA	NA	NA	NA	3	3	7	To improve the welfare of students
29	Procurement and Installation of X-ray Laboratory Equipment (SHT)	NA	NA	NA	NA	2	2	10	To enhance learning
<b>NOTE:</b>									
<b>NA</b> = Not Applicable <b>Criterion 1</b> = Evidence that the Existing Projects are indeed Ongoing <b>Criterion 2</b> = Clarity of Current Justification for Budget Commitment <b>Criterion 3</b> = Current Impact of Budget Commitment <b>Criterion 4</b> = Likelihood of Completion in 2017 – 2019 Timeframe. <b>Criterion 5</b> = Relation to the Sector's goals									

**Table 9: Capital Costs Commitments**

S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
<b>Ongoing and Existing Projects</b>					
1	Trauma Centre (Infrastructure & Others)	Ongoing	750,000,000.00		750,000,000.00
2	Nigeria State Health Investment Project Credit (World Bank Assisted)	Ongoing	7,567,919,810,000.01		7,567,919,810,000.01
3	Human Resources (Capacity Building)	Yet to commence	10,000,000.00	—	10,000,000.00
4	Accreditation of School of Midwifery and other activities of N&MCN (SoM)	Yet to commence	3,000,000.00	—	3,000,000.00
5	Festival of Surgery; Eye Camp at the MEC	Yet to commence	10,000,000.00	—	10,000,000.00
6	Nigeria State Health Investment Programme DLI Re-imbursement	Ongoing	200,000,000.00		200,000,000.00
7	Neonatal Intensive Nursing Training Programme	Ongoing	1,000,000.00		1,000,000.00
8	Free Health Drugs	Ongoing	100,000,000.00		100,000,000.00
9	Procurement of anatomical	Yet to commence	950,000.00	—	950,000.00

S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
	models for demonstration rooms of the school				
10	Construction and Upgrading of Secondary Health Facilities	Yet to commence	250,000,000.00	—	250,000,000.00
11	Medical Board of Enquiry and Medical Assistance (Meetings and Investigation)	Ongoing	1,000,000.00		1,000,000.00
12	Maintenance, Renovation, Furnishing of Hospitals & Other Health Facilities	Yet to commence	150,000,000.00	—	150,000,000.00
13	Basic Laboratory Equipment; and other Medical Equipment	Ongoing	100,000,000.00		100,000,000.00
14	Purchase of Office Equipment (MOH)	Yet to commence	40,000,000.00	—	40,000,000.00
15	Renovation of existing Facilities (SOM)/Procurement of Consumables	Yet to commence	9,000,000.00	—	9,000,000.00
16	Landscaping and Beautification of the Schools of Nursing and Midwifery	Yet to commence	17,000,000.00	—	17,000,000.00
17	Public Health Laboratory	Ongoing	50,000,000.00		50,000,000.00

S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
18	Construction of the sick-bay for SoN	Yet to commence	6,500,000.00	—	6,500,000.00
19	Purchase of library text books (SoM)	Yet to commence	3,000,000.00	—	3,000,000.00
20	Central Blood Transfusion Services	Yet to commence	3,000,000.00	—	3,000,000.00
21	Construction and Equipping of Mother and Child Hospital (Ikare And Okitipupa)	Yet to commence	200,000,000.00	—	200,000,000.00
22	Establishment of Health Insurance Agency	Yet to commence	5,000,000.00	—	5,000,000.00
23	Reconstruction of Cold Chain Store, Okitipupa	Yet to commence	2,000,000.00	—	2,000,000.00
24	Renovation of HMB headquarter	Yet to commence	4,950,000.00	—	4,950,000.00
25	Purchase of Branded HP Desktop Computer Set for HMB Quarters 10 Nos @ N0.55 each with Printer	Ongoing	1,050,000.00		1,050,000.00
26	Purchase of Beds & Mattresses, Nurse and Patient Dresses for all SSH & GHs	Yet to commence	2,000,000.00	—	2,000,000.00

S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
27	Training and Manpower Development(HMB)	Yet to commence	2,000,000.00	—	2,000,000.00
28	Establishment of Herbal Garden (Alternative Medicine)	Yet to commence	1,200,000.00	—	1,200,000.00
29	Procurement of Office Equipment (Alternative Medicine)	Yet to commence	800,000.00	—	800,000.00
30	Construction of Matrons Quarters for SoN	Yet to commence	8,000,000.00	—	8,000,000.00
31	Provision of sporting facilities & NISONMG (SoN)	Ongoing	950,000.00		950,000.00
32	Re-Roofing of Classrooms (SoN)	Yet to commence	4,500,000.00	—	4,500,000.00
33	Procurement of reagents/ consumables (SoN)	Ongoing	950,000.00		950,000.00
34	Purchase of Office Equipment for SoN	Yet to commence	950,000.00	—	950,000.00
35	Provision of Office Furniture (SoN)	Yet to commence	1,670,000.00	—	1,670,000.00
36	Provision of Internet facility for SoN	Ongoing	—		—

S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
37	Procurement of Equipment for the Demonstration Room (SoN)	Yet to commence	950,000.00	—	950,000.00
38	Re-Roofing of Administrative Block (SoN)	Yet to commence	4,000,000.00	—	4,000,000.00
39	Re-roofing of 3 hostel buildings (SoM)	Yet to commence	10,000,000.00	—	10,000,000.00
40	Re-roofing of administrative block (SoM)	Yet to commence	3,000,000.00	—	3,000,000.00
41	Procurement of clinical Laboratory Equipment (SHT)	Yet to commence	5,000,000.00	—	5,000,000.00
42	Construction of Students Chairs and Lockers (SHT)	Yet to commence	2,000,000.00	—	2,000,000.00
43	Procurement of School Bus (SHT)	Yet to commence	50,000,000.00	—	50,000,000.00
44	Procurement of Equipment for Environmental Demonstration Ground (SHT)	Yet to commence	3,000,000.00	—	3,000,000.00
45	Acquisition of bandwidth, subscription and Toll-free lines (ODEMSA)	Yet to commence	3,000,000.00	—	3,000,000.00
46	Computerised web based EMS	Yet to commence	3,000,000.00	—	3,000,000.00

S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
	Management System(Inventory management system, Trauma Registry and Personnel Public Key Infrastructure Management System) (ODEMSA)				
47	Renovation of Offices and Wards (Neuro-psychiatric Hospital)	Ongoing	5,000,000.00	—	5,000,000.00
<b>Ongoing and Existing Projects</b>					
1	Construction of 250-Room Hostel for SoN/SoM	Yet to commence	250,000,000.00	—	250,000,000.00
2	Construction of 50-Room Administrative Building for SoN/SoM	Yet to commence	50,000,000.00	—	50,000,000.00
3	Construction of a New Midwifery Laboratory (SoM)	Yet to commence	22,000,000.00	—	22,000,000.00
4	Construction of 500-capacity Auditorium (SoN/SoM)	Yet to commence	100,000,000.00	—	100,000,000.00
5	Purchase of Utility Vehicle (SoN)	Yet to commence	20,000,000.00	—	20,000,000.00
6	3 Nos of Incinerators (OSPHCDB)	Yet to commence	100,000,000.00	—	100,000,000.00



S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
7	50 Nos of Cold chain Equipment (OSPHCDB)	Yet to commence	220,000,000.00	—	220,000,000.00
8	Construction of New Office Accommodation (OSPHCDB)	Yet to commence	100,000,000.00	—	100,000,000.00
9	3 Nos of Hilux Vehicle (OSPHCDB)	Yet to commence	60,000,000.00	—	60,000,000.00
10	Purchase of 4 Advance Life Support Ambulance (ODEMSA)	Yet to commence	100,000,000.00	—	100,000,000.00
11	Construction of 4 EMS Stations at Igbado, Okeagbe, Okitipupa and Akure (ODEMSA)	Yet to commence	60,000,000.00	—	60,000,000.00
12	Rooming of 4 EMS station at, Igbado, Okeagbe, Okitipupa and Akure (ODEMSA)	Yet to commence	20,000,000.00	—	20,000,000.00
13	Purchase and Equipping 4 Extricating Vehicles (ODEMSA)	Yet to commence	80,000,000.00	—	80,000,000.00
14	Construction and Equipment of Oncology Centre for Cancer Prevention, Treatment and Research in Owo (MOH)	Yet to commence	1,000,000,000.00	—	1,000,000,000.00
15	Construction of standard Mortuaries in each SSH (MOH)	Yet to commence	125,122,082.24	—	125,122,082.24

S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
16	Construction of well-equipped Intensive Care Unit in Okitipupa, Ikare and Akure (MOH)	Yet to commence	75,000,000.00	—	75,000,000.00
17	Completion of Central Medical Store (MOH)	Yet to commence		—	
18	Procurement of Books and Journals-Medical Library for 4 SSH(HMB)	Yet to commence	10,000,000.00	—	10,000,000.00
19	Supply of Furniture for 4 SSH (HMB)	Yet to commence	30,000,000.00	—	30,000,000.00
20	Computerization of Medical Records Department in Secondary Health Facilities (HMB)	Yet to commence	60,000,000.00	—	60,000,000.00
21	Purchase of 10KVA Generator for the GH Igbotako (HMB)	Yet to commence	8,000,000.00	—	8,000,000.00
22	Procurement and Installation of 2 Nos PCR Machine and its Accessories for the Northern and Southern Senatorial Districts (ODSACA)	Yet to commence	20,000,000.00	—	20,000,000.00
23	Procurement of 3 ViraHoad Machines for 3 New ViraHoad	Yet to commence		—	

S/N	PROJECT TITLE	STATUS OF COMPLETION	CONTRACT SUM	AMOUNT PAID TO DATE	OUTSTANDING COMMITMENT
	Testing Laboratory at Mother & Child Ondo, SSH Okitipupa and SSH Ikare (ODSACA)				
24	Procurement of 1000 sets of PPE (ODSACA)	Yet to commence	5,000,000.00	—	5,000,000.00
25	Procurement and Installation of 17 Genexpert Machine in 17 ART Sites (ODSACA)	Yet to commence	92,000,000.00	—	92,000,000.00
26	Renovation and Re-roofing of Old Classroom Block (SHT)	Yet to commence	15,000,000.00	—	15,000,000.00
27	Construction and Procurement of Office Furniture for New Administrative Block (SHT)	Yet to commence	50,000,000.00	—	50,000,000.00
28	Purchase of 100 Nos of Double Bunk Beds (SHT)	Yet to commence	2,000,000.00	—	2,000,000.00
29	Procurement and Installation of X-ray Laboratory Equipment (SHT)	Yet to commence	20,000,000.00	—	20,000,000.00
<b>Note:</b> NA = Not Applicable					

**Table 10: Personnel Costs Existing and Projected**

Number of Staff				
Items of Personnel Costs	2017	2018	2019	2020
Basic Salary				
Acting Allowance				
Professional Duty Allowance				
Transport Allowance				
Medical Allowance				
Rent Supplement				
Leave Grant				
Domestic Staff Allowance				
Furniture Allowance				
Meal Allowance				
Utility Allowance				
Overtime Allowance				
Contributory Pension				
Other Allowance				
<b>Total Cost (N)</b>	<b>7,866,772,911.65</b>	<b>8,496,114,744.58</b>	<b>9,175,803,924.15</b>	<b>9,909,868,238.08</b>

**Note:** Consolidated personnel emoluments are put under the Total Cost row.

**Table 11: Overhead Costs Existing and Projected**

ITEM OF OVERHEADS	2017 APPROVED	2017 ACTUAL (JAN – JUN)	2018	2019	2020
Travel & Transport	18,883,150.00	4,282,330.00	20,393,802.00	22,025,306.16	23,787,330.65
Utility Services	5,212,470.00	1,357,279.33	5,629,467.60	6,079,825.01	6,566,211.01
Information & Communication Services			0.00	0.00	0.00
Stationery	4,617,110.00	982,323.33	4,986,478.80	5,385,397.10	5,816,228.87
Other Materials & Supplies			0.00	0.00	0.00
Printing	2,990,695.00	762,625.00	3,229,950.60	3,488,346.65	3,767,414.38
Maintenance Costs	11,322,895.00	2,582,453.42	12,228,726.60	13,207,024.73	14,263,586.71
Training & Staff Development	8,853,150.00	1,430,025.00	9,561,402.00	10,326,314.16	11,152,419.29
Operating Costs			0.00	0.00	0.00
Staff Welfare Services	2,110,880.00	495,081.33	2,279,750.40	2,462,130.43	2,659,100.87
Professional Services			0.00	0.00	0.00
Grants, Contributions & Subsidy.			0.00	0.00	0.00

ITEM OF OVERHEADS	2017 APPROVED	2017 ACTUAL (JAN – JUN)	2018	2019	2020
Entertainment & Hospitality	2,999,850.00	666,118.33	3,239,838.00	3,499,025.04	3,778,947.04
Outstanding Liabilities	613,800.00	127,500.00	662,904.00	715,936.32	773,211.23
Bank Charges	46,000.00	614.25	49,680.00	53,654.40	57,946.75
Hotels Expenses			0.00	0.00	0.00
Staff Loans & Advances			0.00	0.00	0.00
Pension & Gratuity			0.00	0.00	0.00
Advertisement & Publication			0.00	0.00	0.00
Other Overhead			0.00	0.00	0.00
<b>Total Cost (N)</b>	<b>57,650,000.00</b>	<b>12,686,350.00</b>	<b>62,262,000.00</b>	<b>67,242,960.00</b>	<b>72,622,396.80</b>

**N.B** The overhead costs of School of Midwifery and School of Nursing is missing from the table above.

**Table 12: Summary of Special Programmes and Projections**

MDAS	2017 Budget	2017 Actual (January-June)	2018 Budget	2019 Budget	2020 Budget
MOH	330,000,000.00	224,402,000.00	356400000	384912000	415704960
HMB	28,000,000.00	0.00	30240000	32659200	35271936
OSPHCDB	0.00	0.00	0	0	0
ODEMSA	50,000,000	18,500,000	54000000	58320000	62985600
<b>TOTAL</b>	408,000,000.00	242,902,000.00	440640000	475891200	513962496

**Table 13: Summary of Cancelled/Shut Down Projects**

PROJECT NAME	JUSTIFICATION FOR CANCELLATION/SHUT DOWN
Nil	All projects are relevant to sector's goal.

**Note:** If no project was cancelled in the course of scoring, leave the table blank and explain why no project was cancelled.

### 3.3 CONTRIBUTIONS FROM PARTNERS

**Table 14: Grants and Donor Funding**

Source / Description of Grant	Amount Drawn (N)	Amount Expected (N)		Counterpart Funding Requirements (N)		
	2017 (Jan-Jun)	2018	2019	2018	2019	2020
UNICEF	96,237,040.00					
UNFPA	9,597,500.00					
World Bank						
National Blood Transfusion Services(NBTS)						
Saving One Million Lives Programme for Results	76,887,727.50					
NSHIP - Credit	1,872,628,613.27					
NSHIP- Disbursement Linked Indicator (NSHIP-DLI)	\$1,120,000	\$1, 400,000	\$ 1, 400,000	Meeting Certain requirements	Meeting Certain requirements	Meeting Certain requirements



**Table 15: Donors' Technical Support - Others**

SOURCE OF GRANT/ SUPPORT	DESCRIPTION OF SUPPORT				
	2018	2018	2018	2019	2020
Global Fund-Catholic Relief Service	LLINs, ACTs, RDTs, SPs, Capacity Building	LLINs, ACTs, RDTs, SPs, Capacity Building	Nil	Nil	Nil
Damien Foundation of Belgium (DFB)	Technical and Logistic support, Equipment, Drugs and Consumables	Technical and Logistic support, Equipment, Drugs and Consumables	Technical and Logistic support, Equipment, Drugs and Consumables	Technical and Logistic support, Equipment, Drugs and Consumables	Technical and Logistic support, Equipment, Drugs and Consumables
MITOSATH	Technical and Logistic support, Drugs and consumables	Technical and Logistic support, Drugs and Consumables	Technical and Logistic support, Drugs and Consumables	Technical and Logistic support, Drugs and Consumables	Technical and Logistic support, Drugs and Consumables
MARIE STOPES					
Vitamin Angels	Vitamin A Supplement, Deworming tablets	Vitamin A Supplement, Deworming tablets	Vitamin A Supplement, Deworming tablets	Nil	Nil
WHO	Technical & Logistics Support	Technical & Logistics Support	Technical & Logistics Support	Technical & Logistics Support	Technical & Logistics Support
Healthymagination Mother & Child Initiative	Nil	Capacity Building, Ultrasound Machine & Social Protection	Capacity Building, Ultrasound Machine & Social Protection	Capacity Building, Ultrasound Machine & Social Protection	Capacity Building, Ultrasound Machine & Social Protection
Prime Health Initiative	Nil	Technical, HIV Logistics	Technical, HIV Logistics	Technical, HIV Logistics	Technical, HIV Logistics

SOURCE OF GRANT/ SUPPORT	DESCRIPTION OF SUPPORT				
	2018	2018	2018	2019	2020
		Management Supports & Capacity Building	Management Supports & Capacity Building	Management Supports & Capacity Building	Management Supports & Capacity Building
Rotary International	Equipment, Reproductive Health Commodities, Vaccines, data Management, Medical outreach, Capacity building, LLIN	Equipment, Reproductive Health Commodities, Vaccines, data Management, Capacity building, Medical outreach, LLIN	Equipment, Reproductive Health Commodities, Vaccines, data Management, Capacity building	Equipment, Reproductive Health Commodities, Vaccines, data Management, Capacity building	Equipment, Reproductive Health Commodities, Vaccines, data Management, Capacity building
World Diabetes Foundation/ Gestational Diabetes Society of Nigeria	Capacity building, Equipment & Consumables, Logistics	Capacity building, Equipment & Consumables, Logistics	Capacity building, Equipment & Consumables, Logistics	Nil	Nil
Niger Delta Development Commission (NDDC)	Infrastructural support, Medical Consumables, Drugs, Medical Outreach	Infrastructural support, Medical Consumables, Vaccines	Nil	Nil	Nil
Chevron Nig. Ltd		Drugs	Nil	Nil	Nil
Catholic Cariters Foundation of Nigeria	Technical support, HIV consumables, ARV Drugs	Technical support, HIV consumables, ARV Drugs	Technical support, HIV consumables, ARV Drugs	Technical support, HIV consumables, ARV Drugs	Technical support, HIV consumables, ARV Drugs
GAVI					

SOURCE OF GRANT/ SUPPORT	DESCRIPTION OF SUPPORT				
	2018	2018	2018	2019	2020
Instrat Global Health Solution	Technical support, ICT Data tools	Technical support, ICT Data tools	Technical support, ICT Data tools	Technical support, ICT Data tools	Technical support, ICT Data tools
AFENET-NSTOP	Nil	Technical & Logistics support, ICT Data tools	Technical & Logistics support	Technical & Logistics support	Technical & Logistics support
Equitable Health Access Initiative(EHAI)	Technical Support, HIV consumables & Equipment, ARV Drugs	Technical Support, HIV consumables, ARV drugs	Technical Support, HIV consumables, ARV drugs	Technical Support, HIV consumables, ARV drugs	Technical Support, HIV consumables, ARV drugs
Institute of Human Virology of Nigeria (IHVN)	Technical, HIV Logistics Management Supports & Capacity Building	Nil	Nil	Nil	Nil
Society For Family Health	Drugs, Consumables, Technical support, Data tools and LLIN for private Facilities	Drugs, Consumables, Technical support, Data tools and LLIN for private Facilities	Drugs, Consumables, Technical support, Data tools and LLIN for private Facilities	Drugs, Consumables, Technical support, Data tools and LLIN for private Facilities	Drugs, Consumables, Technical support, Data tools and LLIN for private Facilities

### 3.4 PROGRAM CONNECTIONS BETWEEN SECTOR MDAS

The MDAs in the health sector work synergistically to achieve the sector goals through their programs, projects and other activities. To achieve these goals, the state Ministry of Health initiates requisite policies as well as domesticates national policies regarding different programs and also provides oversight functions. The OSPHCDB

implements PHC programs and also provides supervisory roles to the PHC facilities while HMB provides integrated supportive supervision to the secondary health facilities that offer clinical services. ODEMSA helps to respond and rescue accident victims across the State. Furthermore, the training institutions within the sector are responsible for training the various personnel who help to implement the numerous programs within the sector.

The following programs cut across the MDAs:

- Clinical services
- Tuberculosis & Leprosy Control
- HIV/AIDS Control
- Malaria Control
- Neglected Tropical Diseases (Onchocerciasis/Schistosomiasis) control
- Epidemiology, Diseases Surveillance & notification
- Immunization (ORIREWA)
- Emergency Preparedness & Response
- Non-Communicable Diseases Control
- Nutrition
- Sexual and Reproductive Health which includes the Safe Motherhood program, Adolescent & Family planning services
- School health services
- Emergency Medical Services
- Oral, Eye & Mental health
- Health Management Information System

The Nigerian State Health Investment Project (NSHIP) is a health project within the state and the Saving One Million Lives (SOML) program for result is another cross-cutting intervention within the sector. Other activities that also contribute to the realization of sector goals include routine capacity building sessions, medical outreaches etc.

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
Health Financing	Financial Resources		10,000,000	9,000,000	8,100,000	Financial needs assessment conducted	Number of financial needs assessment report available in the Ministry of Health	0	4	6	8		MOH
							Number of sources of fund identified						
						Sources of fund identified	Number of department/ agencies with release of approved funds	16	20	24	28		
							Fund Release	8	12	16	20		
	IGR Tracking		950,000	855,000	769,500	IGR Tracking tools reviewed	Reviewed IGR Tracking tools available for the health sector	1	2	2	2		MOH
	Counterpart Fund			0	0	Counterpart fund released	Number of departments/agencies with counterpart fund released	1	8	12	14		MOH
	Health Insurance for Primary School Pupils Counterpart Contribution		25,000,000	22,500,000	20,250,000	Health Insurance for Primary School Pupils Counterpart Contribution released	Number of Primary School Pupils with counterpart contribution released	0	1,000	1,500	1,500		MOH
Sub-Total			35,950,000	32,355,000	29,119,500								
Health Information Management System	Printing of Health Management Information System data tools			0	0	Health Management Information System data tools printed	Number of Health Management Information System data tools printed	3					MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	District Health Management Information System		1,000,000	900,000	810,000	District Health Management Information System capacity strengthened	Number of capacity building conducted	0	4	8	8		MOH
	Ondo State Health Statistics bulletin		3,000,000	2,700,000	2,430,000	Ondo State Health Statistics bulletin produced	Number of Ondo State Health Statistics bulletin produced	0	4	4	4		MOH
	Facility based Records (Data Mop-up)		1,200,000	1,080,000	972,000	Facility based Records (Data Mop-up) carried out	Number of Facility based Records (Data Mop-up) carried out	10	12	12	12		MOH/ PHCDB
<b>Sub-Total</b>			<b>5,200,000</b>	<b>4,680,000</b>	<b>4,212,000</b>								
Health Research	Library (Journals)		950,000	855,000	769,500	Library (Journals) produced	Number of Library (Journals) produced	0	4	8	12		MOH
	Monitoring and Evaluation, Research and Knowledge Management		3,000,000	2,700,000	2,430,000	Monitoring and Evaluation, Research and Knowledge Management carried out	Number of Monitoring and Evaluation, Research and Knowledge Management carried out	10	12	12	12		MOH
<b>Sub-Total</b>			<b>3,950,000</b>	<b>3,555,000</b>	<b>3,199,500</b>								
Health Service Delivery	Confidential Enquiry into Maternal Death		25,000,000	22,500,000	20,250,000	Confidential Enquiry into Maternal Death carried out	Number of Confidential Enquiry into Maternal Death carried	1	4	4	4		MOH
							Number of Confidential Enquiry into Maternal Death report produced						

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Monitoring and Evaluation of Nursing Services			0	0	Monitoring and Evaluation of Nursing Services carried out	Number of Monitoring and Evaluation of Nursing Services carried out	3	4	4	4		MOH
	Neonatal Intensive Nursing Training Programme		950,000	855,000	769,500	Neonatal Intensive Nursing Training Programme conducted	Number of Neonatal Intensive Nursing Training Programme conducted	1	4	4	4		MOH
	Purchase of office equipment			0	0	Office equipment purchased	Number of Office equipment purchased	100	200	300	400		MOH
	Payment of allowance for guest lecturers (SoM)		4,000,000	3,600,000	3,240,000	Allowances for guest lecturers paid	Number of allowances for guest lecturers paid	24	30	36	40		MOH
	Care and Support of People Infected and Affected by HIV/AIDS		514,741,451	463,267,306	416,940,575	People Infected and Affected by HIV/AIDS received care and support	Number of People Infected and Affected by HIV/AIDS received care and support	5,000	6,000	7,000	8,000		ODSACA
	Medical Assistance to Federal Medical Centre ,Owo			0	0	Medical Assistance to Federal Medical Centre, Owo received	Percentage of Medical Assistance to Federal Medical Centre, Owo received	0%	50%	60%	70%		MOH
	HIV Counseling and Testing		950,000	855,000	769,500	Mobile HIV Counseling and Testing conducted	Number of mobile HIV Counseling and Testing conducted	50	60	80	90		ODSACA
	Condom Promotion		6,500,000	5,850,000	5,265,000	Condom use promoted	Number of condom use promoted	3,000,000	6,000,000	8,000,000	8,000,000		ODSACA

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Women and men in need of HIV treatment receive treatment		6,500,000	5,850,000	5,265,000	Women and men in need of HIV treatment received treatment	Percentage of Women and men in need of HIV treatment that received treatment	60%	70%	80%	90%		ODSACA
	External works at Mother and Child Hospital, Ondo (Completed but not paid)	554,685,494.84	630,809,995.07	567,728,996	510,956,096	External works at Mother and Child Hospital, Ondo (Completed but not paid) carried out	Percentage of External works at Mother and Child Hospital, Ondo (Completed but not paid) carried out	50%	60%	70%	90%		MOH
	Construction of Medical Ward at Trauma and Surgical Centre Ondo	302,127,634.87	514,741,450.57	463,267,306	416,940,575	Construction of Medical Ward at Trauma and Surgical Centre Ondo completed	Percentage of work on construction of Medical ward at Trauma and Surgical Centre Ondo carried out	65%	100%				MOH
	Upgrading of Comprehensive Health Centre, Araromi-Obu To General Hospital			0	0	Comprehensive Health Centre, Araromi-Obu to General Hospital upgraded	Percentage of work at c Comprehensive Health Centre, Araromi-Obu to General Hospital carried out	15%	60%	100%			MOH
	Construction of Science Laboratory for the Schools of Nursing and Midwifery	0		0	0	Science Laboratory for the Schools of Nursing and Midwifery constructed	Percentage of completion of Science Laboratory for the Schools of Nursing and Midwifery	100%					MOH
	Nursing and Midwifery Council of Nigeria		250,000	225,000	202,500	Nursing and Midwifery Council of Nigeria Activities carried out	Number of Nursing and Midwifery Council of Nigeria Activities carried out	3	12	12	12		MOH



PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Activities												
	Communications		2,000,000	1,800,000	1,620,000	Communications activities carried out	Number of Communications carried out	2	3	3	3		MOH
	Procurement of laboratory Chemicals, reagents & consumables School of Health Tech		6,750,000	6,075,000	5,467,500	Laboratory Chemicals, reagents & consumables School of health Tech procured	Number of laboratory Chemicals, reagents& consumables School of health Tech procured						MOH
	Additional jobs on the construction of Accident and Emergency Hospital Complex at Trauma Centre Ondo			0	0	Additional jobs on the construction of Accident and Emergency Hospital Complex at Trauma Centre Ondo carried out	Number of Additional jobs on the construction of Accident and Emergency Hospital Complex at Trauma Centre Ondo carried out	0	4				MOH
	Accreditation Visit N and MC	1,000,000.00	1,000,000.00	900,000	810,000	Accreditation Visit N and MC carried out	Percentage of Accreditation Visit N and MC carried out	90%		100%			MOH
	Procurement of anatomical models for demonstration rooms of the school		750,000	675,000	607,500	Anatomical models for demonstration rooms of the school procured	Number of anatomical models for demonstration rooms of the school procured	54	70	70	70		MOH
	Management & Maintenance of Mother and Child Hospital and Other	—	950,000	855,000	769,500	Management and Maintenance of Mother and Child Hospital and Other Health Facilities carried out	Number of Management and Maintenance of Mother and Child Hospital and Other Health Facilities carried out	3	3	3	3		MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Health Facilities												
	Maintenance of inmate of Ago-Ireti	0	1,000,000	900,000	810,000	Maintenance of inmate of Ago-Ireti carried out	Number of Maintenance of inmate of Ago-Ireti carried out	10	12	12	12		MOH
	Assistance towards Medical Treatment	0	10,000,000	9,000,000	8,100,000	Assistance towards Medical Treatment carried out	Percentage of Medical Assistance on Treatment achieved	95%	100%	100%	100%		MOH
	Landscaping and beautification of Laje Road Ondo (Access road to Medical Village)	0		#VALUE!	#VALUE!	Landscaping and beautification of Laje Road Ondo (Access road to Medical Village) carried out	Percentage of Landscaping and beautification of Laje Road Ondo (Access road to Medical Village) achieved	75%	100%				MOH
	Construction of Surgical Ward extension and Physiotherapy Unit at Trauma Centre Ondo		20,000,000.00	18,000,000	16,200,000	Construction of Surgical Ward extension and Physiotherapy Unit at Trauma Centre Ondo carried out	Percentage of Construction of Surgical Ward extension and Physiotherapy Unit at Trauma Centre Ondo achieved	80%	100%				MOH
	Construction of Alaanu Hostel, Medical Village Ondo	0	1,000,000.00	900,000	810,000	Construction of Alaanu Hostel, Medical Village Ondo carried out	Percentage of Construction of Alaanu Hostel, Medical Village Ondo achieved	20%	80%	100%			MOH
	Renovation of block 11 at GH, Idanre		1,000,000.00	900,000	810,000	Renovation of block 11 at GH, Idanre carried out	Percentage of Renovation of block 11 at GH, Idanre achieved	70%	100%				HMB
	Health		0	0	0	Health Education and Social	Number of Health	50%	100%	100%	100%		ODSACA

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Education and Social Mobilisation					Mobilisation carried out	Education and Social Mobilisation carried out						
	Maternal, Newborn and Child Health week	0	1,000,000	900,000	810,000	Maternal, Newborn and Child Health week carried out	Number of Maternal, Newborn and Child Health week carried out	1	1	1	1		ODSACA
	Non-communicable diseases (Guinea worm)			0	0	Non-communicable diseases (Guinea worm) activities carried out	Number of Non-communicable diseases (Guinea worm) activities carried out	0	1	1	1		PHCDB
	HIV/AIDS		1,000,000	900,000	810,000	HIV/AIDS activities carried out	Number of HIV/AIDS activities carried out	4	4	4			ODSACA/PHCDB
	Onchocerciasis		4,000,000	3,600,000	3,240,000	Onchocerciasis activities carried out	Number of Onchocerciasis activities carried out quarterly	4	4	4	4		PHCDB
	Midwifery service scheme/ SURE-P		2,500,000	2,250,000	2,025,000	Midwifery service scheme/ SURE-P carried out	Number of Midwifery service scheme/ SURE-P carried out	1	1	1	1		PHCDB
	National programme for Immunization (ORIREWA)		150,000,000	135,000,000	121,500,000	National programme for Immunization (ORIREWA) carried out	Number of National programme for Immunization (ORIREWA) carried out	4	4	4	4		PHCDB
	Schistosomiasis		1,000,000	900,000	810,000	Schistosomiasis activities carried out	Number Schistosomiasis activities carried out	4	4	4	4		PHCDB
	Institutional Arrangement & Coordination Mechanism		10,000,000	9,000,000	8,100,000	Institutional Arrangement and Coordination Mechanism carried out	Number of Institutional Arrangement and Coordination Mechanism carried out	4	4	4	4		MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Procurement & logistics supply		2,000,000	1,800,000	1,620,000	Procurement & logistics supply carried out	Number of Procurement & logistics supply carried out	1	1	1	1		MOH
	Printing of Free Health Cards		500,000	450,000	405,000	Free Health Cards printed	Number of Free Health Cards printed	1	1	1	1		MOH
	Upgrading of facilities for the School of Nursing and Midwifery		100,000,000.00	90,000,000	81,000,000	Upgrading of facilities for the School of Nursing and Midwifery carried out	Number of facilities upgraded for the Schools of Nursing and Midwifery	3	2	1	1		MOH
	Completion of Igbotako General Hospital			0	0	Completion of Igbotako General Hospital carried out	Percentage of work at Igbotako GH carried out	50%	50%				MOH
	Renovation of children ward, SSHO		280,000,000.00	252,000,000	226,800,000	Renovation of children ward, SSHO carried out	Percentage of renovation work carried out at children ward SSH Ondo	65%	100%				HMB
	School Health service	11,970,000	20,000,000	18,000,000	16,200,000	School health services carried out	Number of school health services carried out	2	4	4	4		HMB
	Procurement and equipment of the sick-bay			0	0	Procurement and equipment of the sick-bay carried out	Number of Procurement and equipment of the sick bay carried out	0	20	10	5		MOH
	Procurement of reagents/ consumables		10,000,000.00	9,000,000	8,100,000	Procurement of reagents/ consumables carried out	Number of Procurement of reagents/ consumables carried out	30	30	30	30		MOH
	Central Blood Transfusion Services		0	0	0	Central Blood Transfusion Services carried out	Number of Blood Transfusion Services available	4	4	4	4		MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
							Number of pints of blood dispensed to facilities	0	400	400	400		
							Percentage increase in number of voluntary non remunerated blood donors	0%	10%	20%	30%		
	International Travel Control Unit		1,017,688 ,682	915,919,8 14	824,327,8 32	International Travel Control Unit services carried out	Number of International Travel Control Unit services carried out	0	1	1	1		MOH
	General services			0	0	General services carried out	Number of General services carried out						
	Annual World Health Day		1,000,00 0	900,000	810,000	Annual World Health Day carried out	Number of Annual World Health Day carried out	0	1	1	1		MOH
	Procurement of Dental Chair for School of health Tech			0	0	Procurement of Dental Chair for School of health Tech carried out	Number of Dental Chairs for School of health Tech procured	1	1				MOH
	Construction of Hostels for Schools of Nursing	0	1,000,00 0.00	900,000	810,000	Construction of Hostels for Schools of Nursing carried out	Number of Hostels for School of Nursing constructed.	2	1	1	1		MOH
	Provision of Office Furniture & Internet Services for SON		280,000, 000.00	252,000, 000	226,800, 000	Provision of Office Furniture & Internet Services for SON carried out	Number of Office Furniture & Internet Services for SON provided	0	5	5	5		MOH
	Medical Board of Enquiry and		1,017,688 ,682	915,919,8 14	824,327,8 32	Medical Board of Enquiry and Medical Assistance carried out	Number of Medical Board of Enquiry and	0	6	8	12		MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Medical Assistance						Medical Assistance carried out						
	Nigeria State Health Investment Programme DLI Re-imbursement		327,356,517	294,620,865	265,158,779	Nigeria State Health Investment Programme DLI Re-imbursement carried out	Number of Nigeria State Health Investment Programme DLI Re-imbursement carried out	4	4	4	4		MOH
	Prevention of Mother to Child Transmission of HIV (PMTCT)		2,000,000	1,800,000	1,620,000	Prevention of Mother to Child Transmission of HIV(PMTCT) carried out	Percentage of Prevention of Mother to Child Transmission of HIV(PMTCT) carried out	60%	70%	80%	90%		ODSACA
	Construction of hostels for School of Midwifery		500,000	450,000	405,000	Construction of Hostels for Schools of Midwifery carried out	Number of Hostels for School of Midwifery constructed.	1	1				MOH
	Reproductive Health/Family Planning		10,000,000	9,000,000	8,100,000	Reproductive Health/Family Planning activities carried out	Number of Reproductive Health/Family Planning carried out	2	6	6	6		PHCDB
	Public Health Laboratory		2,500,000	2,250,000	2,025,000	Public Health Laboratory activities carried out	Number of Public Health Laboratory activities carried out	2	4	4	4		MOH
	Procurement of library books School of health Tech			0	0	Library books for School of Health Tech procured	Number of library books for School of Health Tech procured	0	100	100	100		MOH
	Construction and Expansion of Equipment Stores and Traditional			0	0	Construction and Expansion of Equipment Stores and Traditional Medicine Board Offices, Oke-Eda carried out	Number of Construction and Expansion of Equipment Stores and Traditional Medicine Board Offices, Oke-Eda	0	1				MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Medicine Board Offices, Oke-Eda						carried out						
	Trauma and surgical Centre		0	0	0	Trauma and surgical services carried out	Number of Trauma and surgical services carried out	0	1	1	1		MOH
	Prevention of Biomedical Transmission of HIV		10,500,000	9,450,000	8,505,000	Prevention of Biomedical Transmission of HIV carried out	Percentage of Prevention of Biomedical Transmission of HIV carried out	60%	70%	80%	90%		MOH
	Festival of Surgery; Eye Camp at the MEC		2,500,000	2,250,000	2,025,000	Festival of Surgery; Eye Camp at the MEC carried out	Number of Festival of Surgery; Eye Camp at the MEC carried out	0	3	3	3		MOH
	HIV/AIDS Prevention and control/rehabilitation programme for people living with HIV/AIDS			0	0	HIV/AIDS Prevention and control/rehabilitation programme for people living with HIV/AIDS carried out	Number of HIV/AIDS Prevention and control/rehabilitation programme for people living with HIV/AIDS carried out						ODSACA
	Safe motherhood project-scaling up of Abiye		0	0	0	Safe motherhood project-scaling up of Abiye carried out	Number of Safe motherhood project-scaling up of Abiye						PHCDB
	Basic Laboratory Equipment; and other Medical Equipment		500,000	450,000	405,000	Basic Laboratory Equipment; and other Medical Equipment procured	Number of Basic Laboratory Equipment; and other Medical Equipment procured	0	10	8	8		MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Renovation of existing facilities / Procurement of consumables (SoM)		250,000	225,000	202,500	Renovation of existing facilities / Procurement of consumables (SoM) carried out	Number of Renovation of existing facilities / Procurement of consumables (SoM) carried out	30	30	30	30		MOH
	Emergency Preparedness and Disease Surveillance		0	0	0	Emergency Preparedness and Disease Surveillance carried out	Number of Emergency Preparedness and Disease Surveillance carried out	2	4	4	4		MOH
	Nigeria State Health Investment Project Credit (World Bank Assisted)		500,000	450,000	405,000	Nigeria State Health Investment Project Credit (World Bank Assisted) carried out	Number of Nigeria State Health Investment Project Credit (World Bank Assisted) carried out	4	4	4	4		MOH
	Community Medicine		250,000	225,000	202,500	Community Medicine activities carried out	Number of Community Medicine activities carried out	4	4	4	4		MOH
	Free Health Drugs		7,500,000	6,750,000	6,075,000	Free Health Drugs procured	Percentage of Free Health Drugs procured	25%	75%	80%	90%		MOH
	Non-communicable Diseases			0	0	Non-communicable Disease activities carried out	Number of Non-communicable Disease activities carried out	1	4	4	4		PHCDB
	Nutrition		0	0	0	Nutrition activities carried out Health Rangers activities carried out	Number of Nutrition activities carried out	2	2	2	2		PHCDB
	Health Rangers			0	0		Number of Health Rangers activities carried out	4	4	4	4		PHCDB



PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Roll back malaria		50,000,000.00	45,000,000	40,500,000	Roll back Malaria activities carried out	Number of Roll back Malaria activities carried out	20	25	30	30		PHCDB
	TBL Control Programme		0	0	0	TBL Control Programme activities carried out	Number of TBL Control Programme activities carried out	4	4	4	4		MOH
Sub-Total			5,062,626,777.19	4,556,364,099	4,100,727,690								
Human resources	Payment of Allowance for Guest Lecturers (SoN)		250,000.00	225,000	202,500	Allowance to guest lecturers (SoN) paid	Number of Allowance to guest lecturers (SoN) paid						MOH
	Human resources (capacity building)		10,000,000	0	0	Human resources (capacity building) activities carried out	Number of Human resources (capacity building)activities carried out.						MOH
	Completion of Modern Laboratory		50,000,000	9,000,000	8,100,000	Completion of Modern Laboratory carried out	Percentage Completion of Modern Laboratory carried out						MOH
	Procurement of Reagents/ Consumables		0	45,000,000	40,500,000	Procurement of reagents/ consumables carried out	Number of Procurement of reagents/ consumables carried out						MOH
	Provision for 1 year mandatory community experience for 50 basic students			0	0	Provision for 1 year mandatory community experience for 50 basic students midwives for maternal & child care carried out	Number of Provision for 1 year mandatory community experience for 50 basic students midwives for maternal & child care carried out						MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	midwives for maternal & child care												
	Population Activities			0	0	Population Activities carried out	Number of Population Activities carried out						MOH
	Updating of Teachers by Nursing & Midwifery Council		0	0	0	Updating of Teachers by Nursing & Midwifery Council	Number of Teachers updated by Nursing & Midwifery Council						MOH
	Florence Nightingale Speech Contest		950,000.00	855,000	769,500	Florence Nightingale Speech Contest carried out	Number of Florence Nightingale Speech Contest carried out						MOH
	Staff Training		10,000,000.00	9,000,000	8,100,000								
Sub-Total			71,200,000.00	64,080,000	57,672,000								
Leadership and Governance	National Council on Health		0			National Council on Health activities carried out	Number of National Council on Health activities carried out						MOH
	Updating of teachers by N&MCN			0	0								
	Integrated supportive supervision		0	0	0	Integrated supportive supervision carried out	Number of Integrated supportive supervision carried out						MOH

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Accreditation exercises for School of health Tech		72,000,000.00	64,800,000	58,320,000	Accreditation exercises for School of health Tech carried out	Number of Accreditation exercises for School of health Tech carried out						MOH
	Task force on Counterfeit and Fake drugs		10,000,000	9,000,000	8,100,000	Task force on Counterfeit and Fake drugs activities carried out	Number of task force on Counterfeit and Fake drugs carried out						MOH
	Policy, Advocacy, Human Rights, and Legal Issues		9,943,753	8,949,378	8,054,440	Policy, Advocacy, Human Rights, and Legal Issues carried out	Number of Policy, Advocacy, Human Rights, and Legal Issues carried out						MOH
	Accreditation of School of Midwifery and other activities of N&MCN		0	0	0	Accreditation of School of Midwifery and other activities of N&MCN carried out	Number of Accreditation of School of Midwifery and other activities of N&MCN carried out						MOH
	Inspection of Pharmaceutical premises and patient Medicine shops		950,000	855,000	769,500	Inspection of Pharmaceutical premises and patient Medicine shops carried out	Number of Inspection of Pharmaceutical premises and patient Medicine shops carried out						MOH
	Publicity		0	0	0	Publicity carried out	Number of Publicity carried out						MOH
	Coordination meeting platforms (SACA-LACA, SACA-CSO, SACA-LM, Biannual meeting)		2,000,000	1,800,000	1,620,000	Coordination meeting platforms( SACA-LACA, SACA-CSO, SACA-LM, Biannual meeting) conducted	Number of Coordination meeting platforms( SACA-LACA, SACA-CSO, SACA-LM, Biannual meeting) conducted						PHCDB/ ODSACA

PRIORITY AREAS	PROJECT ACTIVITY TITLE	AMOUNT SPENT ON THE PROJECT SO FAR	BUDGETED EXPENDITURE/ COST (N)			OUTPUT	OUTPUT KPI	BASELINE (I.E. OUTPUT VALUE IN 2016)	OUTPUT TARGET			MTSS ACTIVITY CODE	MDA RESPONSIBLE
			2017	2018	2019				2017	2018	2019		
	Pharmacists Council of Nig. Activities		0	0	0	Pharmacists Council of Nig. Activities carried out	Number of Pharmacists Council of Nig. Activities carried out						MOH
	Meetings of State/ National Council on Health		200,000,000	180,000,000	162,000,000	Meetings of State/ National Council on Health conducted	Number of Meetings of State/ National Council on Health conducted						MOH
	Monitoring/ Quarterly Board Meetings/ Monthly Technical Review meetings		0	0	0	Monitoring/Quarterly Board Meetings/ Monthly Technical Review meetings carried out.	Number of Monitoring/ Quarterly Board Meetings/ Monthly Technical Review meetings carried out						MOH
	Provision of Sporting Facilities & NISONMG		0	0	0	Provision of Sporting Facilities & NISONMG carried out	Number of Sporting Facilities & NISONMG Provided						
	Activities of the Medical and Dental Council of Nigeria		10,000,000	9,000,000	8,100,000	Activities of the Medical and Dental Council of Nigeria carried out	Number of Activities of the Medical and Dental Council of Nigeria carried out						MOH
	Accreditation and Registration of Private Health Facilities		0	0	0	Accreditation and Registration of Private Health Facilities carried out	Number of Accreditation and Registration of Private Health Facilities carried out						MOH
Sub-Total			105,093,753	94,584,378	85,125,940								
TOTAL			5,284,020,531	4,755,618,477	4,280,056,630								

**Table 16: Summary of Projects' Expenditures and Output Measures**

### 3.6 JUSTIFICATION

The strategies chosen are in consonance with the sector's broader policies to provide quality, equitable and accessible health care services to the citizens. The strategies are tailored towards reducing the morbidity and mortality pattern of diseases in the state. In other words, the programs and projects adopted have beneficial effects on the health status of the citizens and have been scrutinized to ensure compliance with the regulations of the State Project Price Monitoring Unit.

### 3.7 RESULT FRAMEWORK

The successful implementation of the MTSS document is essential to the achievement of the set objectives of programmes and projects of the health sector. The active participation of all key stakeholders in the health sector in the monitoring and evaluation will contribute to the successful implementation.

The use of the Multi Year Budget Framework (MYBF), Annual Budget, Annual Budget Performance Report, political-will, effective governance structure, Civil Society Organization (CSO) involvement, development partners, adherence to due process will ensure effective and efficient implementation of the sector strategies.

The use of the Key Performance Indicators are veritable tools to measure the successes and failure of the sector's strategies and goals. There are monitoring and evaluation personnel in the different MDAs of the health sector. Every month, these personnels come together with the data from their facilities to submit copies to the state coordinator. There are two electronic platforms (National Health Management Information System, NHMIS and District Health Information System, DHIS) where data generated at these facilities could be viewed and analysed. NHMIS platform encompasses all diseases while DHIS covers HIV data. Personnel were trained to handle these platforms as well as the tools which serve as the sources of the data. The analysis of these data are carried out monthly, quarterly and annually in some cases. In addition, national HIV data is collated biannually on zonal bases.

### 3.3 ROLES AND RESPONSIBILITIES OF THE HEALTH SECTOR

The Health Sector being coordinated by the Ministry of Health has the following roles and responsibilities;

- Health Policy/Plan formulation and legislation
- Regulatory functions, including quality assurance (setting of standards for personnel, infrastructure and services for registration of both public and private health institutions operating in the State), monitoring and evaluation.
- Development and implementation of strategies for Health Sector Reform, including promotion of public-private partnership in health.
- Development of capacity for generation and utilization of evidence-based data and information gathering for health policy formulation, strategy development and planning as well as logistic forecasting.
- Health manpower development.
- Health Education and Promotion.
- Disease Prevention and Control.
- Regulate Health Researches and their applications in the development of global knowledge.
- Liaise with the Federal Ministry of Health and other relevant stakeholders on policy formulation, dissemination and implementation.
- Coordination of Development Partners and their activities in the Health Sector.

# CHAPTER 4

## THREE YEARS EXPENDITURE PROJECTIONS

### 4.1 BUDGETING PROCESS IN THE HEALTH SECTOR

In the last quarter of every year, each MDA in the health sector reviews its annual budget plan implementation and prepares another plan for the succeeding year which goes through the government budget defence and approval processes. During the budget implementation review, performance of the previous year as well as other emerging health issues, usually determines the area of focus in budget preparation for the succeeding year. These processes are preceded by Pre-Treasury Board Meeting at Ministry of Economic Planning and Budget (MEP&B). It is worthy of note that the State government operates e-budgeting with all the MDAs represented on the portal.

The year 2016 is used as the baseline for calculation with a projected inflation rate of 12.42%. Subsequently the inflation rate can be reviewed based on economic realities. Some of the key assumptions in preparing the budget estimate for the succeeding year are:

- Inflation rate in the price of commodities except where such item is fixed and not controlled directly by the MDA (such as registration fees etc.);
- Another assumption is that partners will continue to work with government in those areas of competence because no cost was attached to those areas to avoid duplication of effort as well as waste of funds; and
- Community needs assessment.



## 4.2 PUBLIC INVOLVEMENT

Wide consultation with community based organisations, opinion leaders, NGOs as well as traditional leaders in the community were employed to assess the critical needs of the community in developing the MTSS document.

# CHAPTER 5

## MONITORING & EVALUATION

### 5.1 IDENTIFYING SOURCES OF DATA AGAINST THE RESULTS FRAMEWORK

**Table 17: Data Sources for Outcome and Output KPIs**

OUTCOME KPIs		POSSIBLE DATA SOURCES
1a	Percentage of LGAs with operational plans consistent with the SSHDP and priorities	LGAs Operational Plans
1b.	% of Stakeholders constituencies playing their assigned roles in the SSHDP( disaggregated by stakeholders constituencies)	SSHDP Annual review report
1c.	% of LGAs implementing their peer review recommendations	LGA/SSHDP Annual Review Report
2a.	%of LGAs with functioning public health facility providing minimum health care package according to quality of care standards	NPHCDA Survey Report
2b.	% of health facilities with implementing the complete package of essential care package	NPHCDA Survey Report

2c.	% of the population having access to an essential care package	MICS/NDHS
2d.	Proportion of tuberculosis cases detected and cured under directly observed treatment short course	SMOH
<b>OUTPUT KPIs</b>		<b>POSSIBLE DATA SOURCES</b>
2e.	% of health institutions with basic medical equipment and functional logistic system appropriate to their levels	Facility Survey Report
2f.	Proportion of the population utilizing essential services package	MICS
3a.	% of wards that have appropriate HRH complement as per service delivery norm	Facility survey Report
3b.	% of LGAs actively using adaptations of National/State HRH policy and plans	HR Survey Report
3c.	Increased number of trained staff based on approved staffing norms by qualification	HR Survey
3d.	% of LGAs implementing performance based management systems	HR Survey
4a.	% of LGAs implementing state specific safety nets.	SSHDP Review report
4b.	LGAs allocating health funding increased by average of 5% every year.	Attendance register
4c.	LGAs health budgets fully aligned to support state health goals and policies	State and LGA Budgets
4d.	% of LGA budget allocated to the health sector	State and LGA Budgets National Health Accounts
5a.	% of LGAs making routine NHMIS returns to states. Proportion of	NHMIS Report

OUTPUT KPIs	POSSIBLE DATA SOURCES
<p>facilities given the reporting format</p> <p>5b. % of health facility staff trained to use the NHMIS infrastructure</p> <p>5c. % of HMIS operators at the LGA level trained in analysis of data using the operational manual</p> <p>5d. % of LGA PHC Coordinator trained in data dissemination</p>	<p>State HMIS</p> <p>State HMIS</p> <p>Training reports</p>
<p>6a. Proportion of public health facilities having active committees that include community representatives (with meeting reports and actions recommended)</p> <p>6b. % of Health development committees whose members have had training in community mobilization</p> <p>6c. % of health actions jointly implemented with HDCs and other related committees</p>	<p>SMOH</p> <p>HDC Reports</p> <p>HDC Reports</p>
<p>7a. % of LGAs holding annual multi-sectoral development partners meetings</p>	<p>SSHDP Reports</p>
<p>8a. % of State health budget spent on health research and evaluation</p> <p>8b. % of health research in LGAs available in the state health research depository</p> <p>8c. % LGAs aware of state health research communication strategy</p>	<p>State Budget</p> <p>State Health Research Depository</p> <p>Health Research Communication Strategy</p>

## **5.1 CONDUCTING ANNUAL SECTOR REVIEW**

The Health sector plans to carry out yearly Performance Management Review (PMR) of the Budget in the Ministries, Department and Agencies. Thereafter, the Sector Planning Team will review the MTSS and come up with recommendations to improve on future performance. Consequently, gaps identified will now be addressed with new strategy in order to meet the expected outcome. With the review of the projects baselines, targets and key performance indicators, the sector will be able to attain excellence in health care service delivery in Ondo State

## **5.2 ORGANISATIONAL ARRANGEMENTS**

The responsibilities for monitoring will be done quarterly at the Planning Research and Statistics department of the Ministry of Health, OSPHCDB, HMB and other key stakeholders. This will afford close monitoring of the Budget and necessary corrections or conclusions be derived. The Health Management Information System and M & E unit of the MDAs will be involved in the collection, collation, analysis and dissemination of findings. The report will be presented to the MTSS Steering committee to review which will be headed by the Permanent Secretary. This will assist in the preparation of Annual Budget, implementation and preparation of the Health Sector Performance Report.