

Ref. No. AD. 5539/81 Ondo State Ministry of Health, Alagbaka, Akure.

September, 2024.

CIRCULAR LETTER TO:

Permanent Secretary, Ministry of Health Permanent Secretary, Hospitals Management Board, Permanent Secretary, Ondo State Primary Healthcare Development Agency, Director General, Ondo State Contributory Health Commission, Executive Secretary, Ondo State Drugs and Health Commodities Management Agency, Administrative Secretary, Ondo State Alternative Medicine Board, Head, Ondo State Emergency Medical Service Agency.

ONDO STATE GOVERNMENT HEALTH BUDGET AND SECTOR-WIDE ANNUAL OPERATIONAL PLAN (AOP) 2025 DEVELOPMENT AND IMPLEMENTATION GUIDELINE

Annual Operational Plan (AOP) is a short-term plan, formulated by programme managers and or institutions, that translates strategies into detailed activities. It should provide a roadmap for achieving strategic objectives, improve implementation, facilitate timely responses to changing epidemiology and environment, reinforce the linkage of the Strategic Plan to government budget cycles, and improve accountability for results and resources.

- 2. The 2025 AOP is a significant milestone in the operationalization of the health sector renewal investment framework and an enabler for the State to participate in the World Bank's Human Capital Opportunities for Prosperity and Equity (HOPE) Health and Governance. For the HOPE Project, having the AOP and its priorities reflected in the state health budget are the eligibility criteria for the two financing tools, respectively.
- 3. The Health Sector Strategic Blueprint (HSSB) 2023-2027, approved by Mr. President and adopted by the National Council on Health (NCH) in 2023, is the central strategic health development framework to inform AOP for 2025. The HSSB, which has been finalized by stakeholders in the health sector, outlines the eighteen (18) Strategic Objectives, twenty-seven (27) Priority Initiatives framed along four (4) pillars, and three (3) enablers of the Health Sector Renewal Investment Framework.
- 4. In compliance with the National Health Act (2014), which states that "National Health Plans shall always form the basis for annual budget proposal as required by the Federal Ministry of

Ministry of Health
2nd Floor, Block B, State Secretariat Complex, Akure, Ondo State, Nigeria. www.ondostate.gov.ng

Finance, Budget and National Planning and other governmental planning exercises", MDAs at all levels are required to at least ensure the alignment of their budget proposals with the HSSB 2023-2027 while going ahead to fully develop their AOPs.

5. This Circular sets out the steps and timeline that will be followed in the preparation of health budgets and development of AOP by health MDAs. Thus, all MDAs and officers responsible for planning are advised to be guided by the following instructions on the Annual Operational Plan Development Steps, Schedule, and Recommendations:

i. Process and Guidelines: The process of formulating the AOP and health budget requires health MDAs in the State to develop operational activities to implement the HSSB 2023-2027, as well as other subsector and state-specific priorities. The 2025 State budget should align with the State Annual Operational Plan (AOP) and reflect all programs/projects related to the healthcare sector in the State.

ii. Guiding Principles for the 2025 AOP: The 2025 AOP should be primarily guided by HSSB Objectives, Priority Initiatives, and Interventions and secondarily by the other mandates of various MDAs. The AOP tool for the 2025 planning season has two parts:

- Part One: Populating HSSB activities
- Part Two: Non-HSSB activities (other Mandates of MDAs outside HSSB)

The projected funding envelope/ceiling for the healthcare sector should be clearly outlined in the AOP to ensure resource alignment with strategic priorities.

iii. Strategic Interventions and Support: The FMOH&SW will provide suggestions on strategic interventions that will support the State to improve health outcomes and meet the HOPE Project Disbursement Linked Indicators (additional financing instrument from the World Bank).

iv. Role of Heads of Agencies: Heads of Agencies, in addition to considering the FMOH&SW suggestions, should review the Priority Initiatives and Interventions outlined in the HSSB document to identify the relevant priorities for the 2025 fiscal year. The AOP should also include the mandates of various MDAs outside the HSSB in the State that are essential to meet health aspirations and goals in 2025. MDAs must ensure alignment with the chart of accounts expenditure classifications and program segments to facilitate accurate financial tracking and accountability.

v. Focus on High-Impact Interventions: MDAs are advised to focus on high-impact Priority Initiatives and Interventions that are achievable for the year 2025. Additionally, the AOP should reflect recurrent costs associated with frontline workers, including salaries, benefits, and recruitment, while noting which funding source (LG or State) will cover these costs.

vi. Sign-Off and Circulation of Priorities: Heads of Health Agencies are advised to sign off on the priorities and circulate them to all MDAs as the health sector agenda for the 2025 fiscal year.

vii. Budget Formulation and Resource Alignment: Pending the completion of the AOP development process, identified priorities from the HSSB and other mandates of the MDAs should be used for the 2025 health sector budget formulation, ensuring alignment with the State's fiscal resources and capacity. The capital component should include prioritization criteria, investment management guidelines, geotagging, adherence to costing standards, and physical and fiscal reporting.

viii. Partner Collaboration and Resource Allocation: Heads of MDAs are advised to have a session with all their supporting partners to align on key areas of support from the priorities set and clearly define scopes between government and partners.

ix. AOP Development Roadmap Implementation: The AOP development process should continue and be completed based on the attached AOP development roadmap.

x. Timeline for Completion: In line with the roadmap, the State is expected to complete its 2025 AOP development process by November. Additionally, State planning cells are expected to work with program officers from the HMB and OSPHCDA to drive the planning process at the LGA and selected health facility levels (BEmONC and CEmONC facilities). The facility planning tool is expected to be uploaded by BHCPF facilities as contained in the roadmap.

xi. Quality Assurance Measures: To ensure quality assurance, the Department of Health Planning, Research and Statistics (DHPRS), in collaboration with the FMOH&SW and Development Partners, will provide technical assistance and enhance the States' technical capacity to develop high-quality plans that improve health outcomes.

6. Please do not hesitate to reach out to the Department of Health Planning, Research and Statistics for further guidance.

7. Thank you.

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Honourable Commissioner for Health

$ONDO\ STATE\ ROADMAP\ FOR\ 2025\ ANNUAL\ OPERATIONAL\ PLAN\ AND\ ANNUAL\ HEALTH\ FACILITY\ PLAN\ DEVELOPMENT$

S/N	ACTIVITY	OBJECTIVE	RESPONSIBLE PERSON	TIMELINE	Partner Responsible
1	Planning Meeting	 To present an overview of SWAp To introduce key Stakeholders to the HSSB To present implementation plans for AOP 2025 	HCH, State TA, SMOH	30 th September, 2024	SMoH
2	Conduct of a 2- day residential meeting with Top management in health sector	To set sector specific priorities at all level of care To align the State priorities with HSSB	HCH, State TA, SMOH	7 th – 8 th October,2024	CHAI
3	Conduct 1 day meeting of Top management with Development Partners	To engage DPs to align their priorities with the State priorities	DPRS SMOH, State TA,	9 th October, 2025	СНАІ

4	Conduct a day workshop on the engagement of DPs in MDAs	 To define the scope of the DPs implementation in the State at MDAs level To signed off the aligned areas of implementation by head of MDAs 	State TA, Head of MDAs (PS SMOH, PS OSPHCDA, PS HMB, DG ODCHC, ES ODHCMA, AS OSAMB, Head ODEMSA, Provost CHT, PM ODSACA)	10 th or 11 th October ,2024	CHAI
5	Conduct 3 day capacity building workshop for key program Officers of MDAs on operational planning Conduct of 2- day	To build capacity of program Officers on operational Planning	State TA, SMOH	14th – 16th October 2024	СНАІ
	residential training of PHCC/MOH of the 18 LGAs on AOP process and LGA facility level planning	To build capacity of the 18 LGAs PHCC/MOH on AOP 2025 development process	State TA, SMOH & OSPHCDA DPRS	14th – 15th October, 2024	CHAI

7	Conduct of 3 – day workshop at LGA level (18 LGA PHCA)	 To conduct situation analysis and identify facility needs To develop 2025 annual business/improvement plan To link the develop plan with AOP priorities 	LGA Team, State TA, SMoH & OSPHCDA	16th–18TH October, 2024	
8	Conduct 1 day meeting of Top management with Development Partners	To engage DPs to align their priorities with the State priorities	DPRS SMOH, State TA,	17th October, 2025	
9	Collation and validation of the developed 2025 LGAs Health facility plans	To collate and harmonize the 18 LGAs plan To align the plans to the State 2025 AOP	State TA, OSPHCDA DPRS	21st October 2024	
10	Conduct of a 2 day AOP 2025 operational planning	To preload the State 2025 health priorities including OSPHCDA developed plan on the 2025 AOP template	State TA, SMOH	22nd – 23rd October, 2024	CHAI

11	Conduct a 5 day	• To harmonize/Guelle of O. I.				3
	residential AOP 2025 development workshop	• To harmonize/finalize the Ondo State 2025 AOP	State TA, SMOH	11th- 15tht November, 2024	APIN	
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12	Conduct of a 2 day residential AOP 2025 validation workshop	To Validate and approve the 2025 AOP document	State TA, SMOH	th – 12th November, 2024		,
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13	Printing and Dissemination of the finalized AOP 2025	To print and disseminate the finalized AOP 2025	State TA, SMOH	27th November, 2025		