



Primary Health Care Investment Program (P173168)

WESTERN AND CENTRAL AFRICA | Ghana | Health, Nutrition & Population Global Practice | Requesting Unit: AWCW1 | Responsible Unit: HAWH3
IBRD/IDA | Program-for-Results Financing | FY 2022 | Team Leader(s): Dorothee Chen, Elisha Kipkemoi Ngetich

Seq No: 4 | DRAFT | ISR59077 | Created by: Monica Moura Porcidonio Silva on 30-Nov-2023 | Modified by: Monica Moura Porcidonio Silva on 04-Dec-2023

Program Development Objectives

Program Development Objective (from Program Appraisal Document)

To improve the quality, utilization and equity of primary health care services.

Overall Ratings

| Name | Previous Rating | Current Rating |
|--------------------------------------|---|---|
| Progress towards achievement of PDO | □ Satisfactory | □ Satisfactory |
| Overall Implementation Progress (IP) | □ Satisfactory | □ Satisfactory |

Implementation Status and Key Decisions

The Ghana Primary Health Care Investment Program (the Program) was approved by the Government of Ghana's Cabinet and subsequently by the Parliament on May 2, 2023. The Financing Agreement (FA) and the two Global Financing Facility (GFF) Grant Agreements (GAs) were signed on May 22, 2023. The development and adoption of the Program Operation Manual (POM), which was an effectiveness condition of the Program, has been met, and the Program was declared effective on June 6, 2023.

The implementing agencies have made some progress towards the achievement of disbursement-linked results (DLRs) such as the development of preparatory documents (standards, mapping) towards the establishment of NoPs and MoHCs and the completion of ten health Policies, Plans and Standards. There is however a need to both improve reporting systems (DHIMS2 and GILMIS) and address stockouts at lower-level facilities to achieve expected improvements in the availability of essential drugs. A comprehensive action plan to address both above challenges will be shared with the World Bank by January 31, 2024. Additionally, GHS reported that most health centers do not have electricity backup systems, and it was agreed that these will be included in the design of new and rehabilitated MoHCs by April 30, 2024.

The approval of an Additional Financing (AF) of US\$ 14.815 million is being finalized to accommodate available resources from the GAC, the Gavi Alliance and FCDO. The first tranche of these funds amounting to US\$ 5.48 million has been received by the World Bank. The signing and effectiveness of an AF to absorb these funds and an accompanying restructuring of the Program are expected before December 31, 2023.

Data on Financial Performance

Disbursements (by loan)

| Project | Loan/Credit/TF | Status | Currency | Original | Revised | Cancelled | Disbursed | Undisbursed | % Disbursed |
|---------|----------------|-----------|----------|----------|---------|-----------|-----------|-------------|-------------|
| P173168 | IDA-71450 | Effective | USD | 150.00 | 150.00 | 0.00 | 21.64 | 128.36 | 14% |
| P173168 | TF-B8557 | Effective | USD | 15.00 | 15.00 | 0.00 | 0.72 | 14.28 | 4.8% |
| P173168 | TF-B8558 | Effective | USD | 16.00 | 16.00 | 0.00 | 2.31 | 13.69 | 14% |

Key Dates (by loan)



| Project | Loan/Credit/TF | Status | Approval Date | Signing Date | Effectiveness Date | Orig. Closing Date | Rev. Closing Date |
|---------|----------------|-----------|---------------|--------------|--------------------|--------------------|-------------------|
| P173168 | IDA-71450 | Effective | 10-Jun-2022 | 22-May-2023 | 06-Jun-2023 | 30-Jun-2026 | 30-Jun-2026 |
| P173168 | TF-B8557 | Effective | 10-Jun-2022 | 22-May-2023 | 06-Jun-2023 | 30-Jun-2026 | 30-Jun-2026 |
| P173168 | TF-B8558 | Effective | 10-Jun-2022 | 22-May-2023 | 06-Jun-2023 | 30-Jun-2026 | 30-Jun-2026 |

DLI Disbursement

| DLI ID | DLI Type | Description | Coc | DLI Amount | Achievement Status | Disbursed amount in Coc | Disbursement % for DLI |
|--------------------------|----------|---|-----|--------------|--------------------|-------------------------|------------------------|
| Loan: TFB8558-001 | | | | | | | |
| 3 | Regular | Health policies, stds & Plans are dvlpd and | USD | 2,050,000.00 | Not Achieved | 0.00 | |
| 4 | Regular | Nat H. Insurance sch. cov. is expded & fin | USD | 2,990,000.00 | Not Achieved | 0.00 | |
| 5 | Regular | Public Fin. Mgt for PHCS is improved | USD | 722,000.00 | Not Achieved | 0.00 | |
| 6 | Regular | imprv. Utilization of selected. Prim health | USD | 7,810,000.00 | Not Achieved | 0.00 | |
| 2 | Regular | capacities, accountability & quality of net | USD | 2,428,000.00 | Not Achieved | 0.00 | |

Program Action Plan

| | | | | | |
|----------------------------------|---|-----------------------|---------------|--|---------------|
| Action Description | MoH shall develop an Environmental and Social Management and Monitoring Framework for Primary Health Care at the Sub-District level in accordance with the relevant national environmental and social policies, laws and regulations. | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Environmental and Social Systems | | MoH, GHS | Other | At the end of the first year of program implementation | Not Yet Due |
| Completion Measurement | A comprehensive Environmental and Social Management and Monitoring Framework prepared (content is described in Annex 5 of the PAD) | | | | |
| Comments | The MoH has shortlisted four E&S assessors. The completion of the recruitment process is expected by December 31, 2023, the delivery of the ESMMF is expected by June 7, 2024. | | | | |

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|----------------------------------|--|-----------------------|---------------|--|---------------|
| Action Description | Ministry of Health shall conduct annual E&S audit in accordance with Government of Ghana's laws, rules and policies. | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Environmental and Social Systems | | MoH, GHS | Other | Every year throughout the Program implementation | Not Yet Due |
| Completion Measurement | E&S Audit Report (the scope is described in Annex 5 of the PAD) | | | | |



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|--|--|-----------------------|---------------|--|---------------|
| Comments | | | | | |
| MoH shall assign and train Focal Persons at regional level to be responsible for environment and social safeguards | | | | | |
| Action Description | DLI# | Responsibility | Timing | Timing Value | Status |
| Environmental and Social Systems | | MoH, GHS | Other | Assign Focal Personnel during Program inception and maintain these positions throughout Program implementation. Train implementing agencies commencing first year of implementation and periodically throughout Program implementation | Not Yet Due |
| Completion Measurement | E&S Focal Persons assigned and positions maintained throughout Program Implementation. Training report to show completion of E&S training. | | | | |
| Comments | Existing government staff will be appointed as regional focal points instead of appointing new staff. Focal persons will be appointed by January 31, 2024. Completion of training of focal persons is expected by February 28, 2024. | | | | |

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|---|--|-----------------------|---------------|---|---------------|
| Ministry of Health shall review the Health Sector Gender Policy, prepare an Action Plan to implement the Policy | | | | | |
| Action Description | DLI# | Responsibility | Timing | Timing Value | Status |
| Environmental and Social Systems | | MoH, GHS | Other | Review and prepare the Action Plan within the first 18 months of the Program and implement throughout the Program | Not Yet Due |
| Completion Measurement | Revised Health Sector Gender Policy and Action Plan approved. | | | | |
| Comments | The policy has been completed with technical support from UNICEF. Outstanding activities include the preparation of an action plan, an M&E plan, stakeholder engagement. The completion of outstanding activities is expected by March 31, 2024. | | | | |

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|---|---------------------------|-----------------------|---------------|-----------------------------------|---------------|
| Develop/improve on the Procurement Complaint Management Mechanism as stipulated in Act 663 as amended to ensure timely follow ups on tracking and handling procurement complaints/disputes. | | | | | |
| Action Description | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH, GHS, NHIA | Other | Throughout Program implementation | Not Yet Due |
| Completion Measurement | Annual procurement report | | | | |



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|-----------------|---|--|--|--|--|
| Comments | Standard Operating Procedures have been finalized and will be submitted to Chief Director of the MoH for signing immediately. The next annual procurement report is expected to have an annex on the log of complaints and how they were redressed. | | | | |
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| Action Description | Annual Procurement audit to be conducted on procurements undertaken under the Program in accordance with the Audit Service Act and Regulations, including (when necessary) hire a firm to carry out annual Independent Procurement Audit. | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH, GHS | Other | Each year throughout Program implementation | Not Yet Due |
| Completion Measurement | Annual Procurement Audit report | | | | |
| Comments | MoH's Finance Department has drafted a letter, which is expected to be signed by the Chief Director of the MoH immediately after the mission. The MoH will clarify by December 31, 2023 if an independent consultant will be required. | | | | |

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|-------------------------------|---|-----------------------|---------------|-----------------------------------|---------------|
| Action Description | Develop a Procurement Management information System to track and monitor Procurement. | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH, GHS | Other | Throughout Program implementation | Not Yet Due |
| Completion Measurement | Annual Procurement Implementation Plans | | | | |
| Comments | The TORs for the development of the procurement management information system will be finalized by December 15, 2023. | | | | |

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|-------------------------------|--|-----------------------|---------------|-----------------------------------|---------------|
| Action Description | The staff of Budget Management Centres (BMCs) at the sub-district level will receive training in planning, budgeting, financial management and reporting including training on GIFMIS | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH, GHS | Other | Throughout Program implementation | Not Yet Due |
| Completion Measurement | Training reports | | | | |
| Comments | A training of trainers has just been completed and downstream training is yet to be conducted. Again, MoH and GHS need to ensure complementarity between their respective training activities. | | | | |

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|---------------------------|--|-----------------------|---------------|-----------------------------------|---------------|
| Action Description | The role of the financial monitoring units at the regional level is strengthened to do periodic validation of Internally-Generated Funds and other revenues collected by sub-district BMCs | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH,GHS | Other | Throughout Program implementation | Not Yet Due |



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| Completion Measurement | Ministry of Health annual financial report |
| Comments | MoH and GHS need to ensure complementarity between their respective training activities. MoH's revised workplan is expected to include FM-related activities to support the achievement of this action. |

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|-------------------------------|---|-----------------------|---------------|---|---------------|
| Action Description | Increase information technology training for internal auditors at Budget Management Centres | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH, GHS | Other | Within the first year of program implementation | Not Yet Due |
| Completion Measurement | Training report | | | | |
| Comments | The completion of training of internal auditors is expected by March 31, 2023. This may be included in the MoH's revised workplan under the IPF component, or alternative sources of funds may be used (advance and or disbursement against results). | | | | |

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|-------------------------------|--|-----------------------------|---------------|-----------------------------------|---------------|
| Action Description | Strengthen Audit Committees, including training on IT at all levels of implementation, particularly at the district and sub-district levels. | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH, GHS and NHIA, and BMCs | Other | Throughout Program implementation | Not Yet Due |
| Completion Measurement | Training report | | | | |
| Comments | The MoH is expected to submit a training plan by December 31, 2023. | | | | |

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|-------------------------------|--|-----------------------|---------------|-----------------------------------|---------------|
| Action Description | The periodic financial report of the implementing agencies should reflect the Program's IDA, GFF and MDTF funds. | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH, GHS | Other | Throughout Program implementation | Not Yet Due |
| Completion Measurement | Half-year financial report separately indicates the Program funds | | | | |
| Comments | | | | | |

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|-------------------------------|---|-----------------------|---------------|---------------------|---------------|
| Action Description | The Commission on Human Rights and Administrative Justice (CHRAJ) to sign a Memorandum of Understanding (MoU) with MoH and provide annual reports on corruption and fraud allegations | | | | |
| Source | DLI# | Responsibility | Timing | Timing Value | Status |
| Fiduciary Systems | | MoH | Recurrent | Yearly | Not Yet Due |
| Completion Measurement | Submission of annual reports on corruption and fraud allegations | | | | |



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| Comments | This is a new action, which was added through the AF. The MoH will provide clarifications about the way forward and the agreement with CHRAJ by December 31, 2023. |
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Risks

Systematic Operations Risk-rating Tool

| Risk Category | Rating at Approval | Previous Rating | Current Rating |
|--|--------------------|-----------------|----------------|
| Political and Governance | Low | Low | Moderate |
| Macroeconomic | Substantial | Substantial | Substantial |
| Sector Strategies and Policies | Moderate | Moderate | Moderate |
| Technical Design of Project or Program | Substantial | Substantial | Substantial |
| Institutional Capacity for Implementation and Sustainability | Moderate | Moderate | Moderate |
| Fiduciary | Moderate | Moderate | Moderate |
| Environment and Social | Moderate | Moderate | Moderate |
| Stakeholders | Low | Low | Low |
| Other | -- | -- | -- |
| Overall | Moderate | Moderate | Moderate |

Comments

The Political and Governance Risk Rating was changed to Moderate as per recommendation by the Country Director and Chair during the Concept Review Meeting of Additional Financing of the Ghana Primary Health Care Investment Program held on September 12, 2023.

Results

PDO Indicators by Objectives / Outcomes

| Quality | | | | |
|---|--|-------------------|------------------|-------------|
| ► Networks of Practice functioning according to the Standards for Networks of Practice (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 350.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Approved Standards are the Standards for Networks of Practice referenced by DLR 1.1. Networks of Practice will be assessed and categorized into 5 maturity levels according to the maturity model specified as part of Standards for Networks of Practice. Networks of Practice meeting at least maturity level 3 will be considered functioning according to standards. | | | |



| ► Number of Model Health Centers functioning according to the Standards for Model Health Centers (Number, Custom) | | | | |
|--|---|-------------------|------------------|--------------|
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 400.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Approved Standards are the Standards for Model Health Centres referenced by DLR 1.1. Model Health Centres will be assessed and categorized into 5 maturity levels according to the maturity model specified as part of DLR 1.1. Model Health Centres meeting at least maturity level 3 will be considered functioning according to standards. | | | |
| Utilization | | | | |
| ► Annual increase in mother/newborn pairs receiving care in facilities providing Quality BEmONC services at the Sub-District level (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 50,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Each year, this is the increase from the previous year in the number of mother/newborn pairs that are cared for in facilities that meet the standards for quality BEmONC (designated by the Ghana Health Service as BEmONC-ready), including assessment, stabilization, referral and transport for mother/newborn pairs with complications. | | | |
| ► Annual increase in hypertensive patients diagnosed and referred at health services at the Sub-District and community levels (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 120,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Each year, this is the increase from the previous year in the number of hypertensive patients diagnosed and referred at health services at the Sub-District and community levels. | | | |
| □ Annual increase in the number of hypertensive patients diagnosed and referred at health services at the Sub-District and community levels - female (cumulative) (Number, Custom Breakdown) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 60,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Equity | | | | |
| ► Increase in Indigent Persons who are active members of the National Health Insurance Scheme (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 1,200,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | This is the increase over the 2021 baseline in the number of people categorized as indigent by the government who are active National Health Insurance Scheme members. | | | |



| □ Increase in Indigent Persons who are active members of the National Health Insurance Scheme - female (Number, Custom Breakdown) | | | | |
|---|-------------|-------------------|------------------|-------------|
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 600,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |

Intermediate Results Indicators by Results Areas

| 1. Development of Networks of Practice and Model Health Centres | | | | |
|---|--|-------------------|------------------|-------------|
| ▶ Model Health Centres with a solar and/or battery electricity backup system (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 100.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | On the basis of a needs assessment, appropriate electricity back-up systems will be installed to ensure 24-hour electricity supply for Health Centres (including solar energy and battery systems, but excluding diesel/petrol). | | | |
| ▶ Annual increase in health centers and Model Health Centers that have available selected Essential Medicines at least six (6) months of the Year (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 400.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Each year, this is the increase from the previous year in the annual number of Health Centres/Model Health Centers for which monthly reporting does not show any stock-out of essential tracer medicines in at least six months of the previous year. The target is the cumulative increase over the full implementation period. | | | |
| ▶ Increase in Physician Assistants at post in Health Centres and Polyclinics (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 680.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | This is the increase from the 2021 baseline in the number of Physician Assistants at post in Health Centres and Polyclinics. | | | |
| ▶ Annual increase in Networks of Practice that score Green on the Community Scorecard for at least one quarter (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 150.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Each year, this is the increase from the previous year in the number of Networks of Practice that have an overall score of Green for at least one quarter. Each quarter, Community Scorecards will grade the performance of Networks of Practice on a 3-level scale (Red, Yellow, Green) across different dimensions of | | | |



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|---|---|-------------------|------------------|-------------|
| | performance, from which an overall grading (of Red, Yellow or Green) will be calculated. The target is the cumulative increase over the full implementation period. | | | |
| ► Annual increase in Networks of Practice that received at least one clinical support visit in each quarter from the District Hospital level (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 150.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Each year, this is the increase from the previous year in the number of Networks of Practice receiving at least one clinical support visit at least once every quarter by staff of a District Hospital or of a facility at the level of the District Hospital. The target is the cumulative increase over the full implementation period. | | | |

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|---|---|-------------------|------------------|--------------|
| 2. Primary health care policy and financing | | | | |
| ► Health Policies, Plans and Standards are approved (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 29.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Key health sector Policies and Plans are described in the Verification Protocol for DLR 3.1. | | | |
| ► Annual expenditures from the national budget on capital investments and operational costs of health services at the Sub-District and community levels (Ghana Cedis millions) (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 60.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | The annual Financial Report of the Ghana Health Service will provide expenditures from the national budget on capital investments and operational costs made at the Sub-District and community levels (denominated in GHC millions). The target is the cumulative increase over the full implementation period. | | | |
| ► Increase in people who are active members of the National Health Insurance Scheme (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 7,600,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | This is the increase from the 2021 baseline in the number of people who are active National Health Insurance Scheme members. | | | |
| □ Increase in people who are active members of the National Health Insurance Scheme - female (Number, Custom Breakdown) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 3,800,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |



| ▶ Annual increase in the percentage of insurance claims for Primary Health Care Services paid by the National Health Insurance Authority within 90 days of receipt (percentage points) (cumulative) (Number, Custom) | | | | |
|--|--|-------------------|------------------|-------------|
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 77.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Each year, this is the increase from the previous year in the percentage of insurance claims submitted by providers at the Sub-District and community levels that are paid within 90 days of receipt by the National Health Insurance Authority. The target is the cumulative percentage point increase over the full implementation period. | | | |
| ▶ Annual Ministry of Health Financial Reports (AMoHFR) including information on PHCS is completed by the Planned Deadline (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 4.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | The consolidated, unaudited Ministry of Health Financial Report for the previous government FY, disaggregated to the Sub-District level, is published online annually by the Planned Deadline: June 2022 for FY21, April 2023 for FY22, February 2024 for FY23, February 2025 for FY24. The target is the cumulative number of reports that meet the deadline over the full implementation period. | | | |
| ▶ District Health Administrations (DHAs) with GIFMIS Capacity (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 261.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | This is the number of District Health Administrations with the required human resources, training, equipment, software, and procedures, to make use of GIFMIS for public financial management, including for primary health care services at the Sub-District level. Detailed requirements for readiness to implement GIFMIS will be documented in the Verification Manual. | | | |

3. Primary health care service improvements

| ▶ Annual increase in new family planning acceptors utilizing services at the Sub-District and community levels (cumulative) (Number, Custom) | | | | |
|--|---|-------------------|------------------|-------------|
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 10,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Each year, this is the increase from the previous year in the number of new family planning acceptors utilizing family planning services (modern methods) at the Sub-District and community levels (not including District Hospitals). The target is the cumulative increase over the full implementation period. | | | |
| ▶ Annual increase in adolescents utilizing health services at the Sub-District and community levels (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 17,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |



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|--|--|-------------------|------------------|---------------|
| Comments | Each year, this is the increase from the previous year in the number of adolescents (ages 15-19 years) utilizing health services at the Sub-District and community levels (not including District Hospitals). The target is the cumulative increase over the full implementation period. | | | |
| <input type="checkbox"/> Annual increase in adolescents utilizing health services at the Sub-District and community levels – female (cumulative) (Number, Custom Breakdown) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 8,500.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| ► Annual increase in children aged 0-23 months in Selected Districts who received Penta1 Vaccination (cumulative) (Number, Custom) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 25,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | Each year, this is the increase from the previous year in the annual number of children aged 0-23 months who received Penta1 vaccination in Selected Districts. The target is the cumulative increase over the full implementation period. | | | |
| <input type="checkbox"/> Annual increase in children aged 0-23 months in Selected Districts who received Penta1 Vaccination – female (cumulative) (Number, Custom Breakdown) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 12,500.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| ► People who have received essential health, nutrition, and population (HNP) services (Number, Corporate) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 10,822,000.00 |
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
| Comments | | | | |
| <input type="checkbox"/> People who have received essential health, nutrition, and population (HNP) services - Female (RMS requirement) (Number, Corporate Supplement) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 5,436,000.00 |
| <input type="checkbox"/> Number of deliveries attended by skilled health personnel (Number, Corporate Breakdown) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | End Target |
| Value | 0.00 | 0.00 | 0.00 | 50,000.00 |



| | | | | |
|------|-------------|-------------|-------------|-------------|
| Date | 31-Dec-2021 | 30-Jun-2023 | 30-Jun-2023 | 31-Dec-2025 |
|------|-------------|-------------|-------------|-------------|

Disbursement Linked Indicators

| | | | | |
|---|----------|-------------------|------------------|---------|
| ► DLI 1 Primary Health Care Networks of Practice and Model Health Centers are Developed (Output, 56,320,000.00, 0%) | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
| Value | - | 0.00 | 0.00 | -- |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |
| <input type="checkbox"/> DLI 1.1 Number of Networks of Practice functioning according to the Standards for Networks of Practice (Intermediate Outcome, 38,500,000.00, 0%) Unit of Measure: Text Indicator Type: | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
| Value | 0.00 | 0.00 | 0.00 | 350.00 |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |
| <input type="checkbox"/> DLI 1.2 Number of Model Health Centers functioning according to the Standards for Model Health Centers (Intermediate Outcome, 13,820,000.00, 0%) Unit of Measure: Text Indicator Type: | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
| Value | 0.00 | 0.00 | 0.00 | 400.00 |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |
| <input type="checkbox"/> DLI 1.3 Number of Model Health Centers with a solar and/or battery electricity backup system (Output, 4,000,000.00, 0%) Unit of Measure: Text Indicator Type: | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
| Value | 0.00 | 0.00 | 0.00 | 100.00 |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |



Comments

► DLI 2 Capacities, Accountability and Quality of Networks of Practice are Improved (Intermediate Outcome, 18,800,000.00, 0%)

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---------|
| Value | - | 0.00 | 0.00 | - |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

□ DLI 2.1 Annual increase in the number of health centers and Model Health Centers that have available selected Essential Medicines at least six (6) months of the Year (Intermediate Outcome, 6,000,000.00, 0%)
Unit of Measure: Text
Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---------------------------|
| Value | 0.00 | 0.00 | 0.00 | 400 (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

□ DLI 2.2 Increase in the number of Physician Assistants at post in health centers and Polyclinics (Output, 6,800,000.00, 0%)
Unit of Measure: Text
Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---------|
| Value | 0.00 | 0.00 | 0.00 | 680.00 |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

□ DLI 2.3 Annual increase in the number of Networks of Practice that score Green on the Community Scorecard for at least one quarter (Intermediate Outcome, 3,000,000.00, 0%)
Unit of Measure: Text
Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---------------------------|
| Value | 0.00 | 0.00 | 0.00 | 150 (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments



DLI 2.4 Annual increase in the number of Networks of Practice that have received at least one clinical support visit in each quarter from the District Hospital level (Output, 3,000,000.00, 0%)
Unit of Measure: Text
Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-----------------|----------|-------------------|------------------|---------------------------|
| Value | 0.00 | 0.00 | 0.00 | 150 (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |

DLI 3 Health Policies, Standards and Plans are Developed and Financing for Primary Health care is Improved (Intermediate Outcome, 29,950,000.00, 0%)

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-----------------|----------|-------------------|------------------|---------|
| Value | - | 0.00 | 0.00 | - |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |

DLI 3.1 Health Policies, Plans and Standards are approved (Process, 18,850,000.00, 0%)
Unit of Measure: Text
Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-----------------|----------|-------------------|------------------|---------|
| Value | 0.00 | 0.00 | 0.00 | 29.00 |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |

DLI 3.2 Annual expenditures from the national budget on capital investments and operational costs of health services at the Sub-District and community levels (Process, 11,100,000.00, 0%)
Unit of Measure: Text
Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-----------------|----------|-------------------|------------------|--------------------------------------|
| Value | 0.00 | 0.00 | 0.00 | 60 million Cedis (cumulative amount) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |



► DLI 4 National Health Insurance Scheme Coverage is expanded and Financing of Primary Health Care Services is prioritized (Output, 27,700,000.00, 0%)

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---------|
| Value | - | 0.00 | 0.00 | - |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

□ DLI 4.1 Increase in number of people who are active members of the National Health Insurance Scheme (Output, 15,200,000.00, 0%)

Unit of Measure: Text

Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|-----------|
| Value | 0.00 | 0.00 | 0.00 | 7,600,000 |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

□ DLI 4.2 Increase in the number of Indigent Persons who are active members of the National Health Insurance Scheme (Output, 4,800,000.00, 0%)

Unit of Measure: Text

Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|-----------|
| Value | 0.00 | 0.00 | 0.00 | 1,200,000 |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

□ DLI 4.3 Annual increase in the percentage of insurance claims for Primary Health Care Services paid by the National Health Insurance Authority within 90 days of receipt (Output, 7,700,000.00, 0%)

Unit of Measure: Text

Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|--|
| Value | 0.00 | 0.00 | 0.00 | 77 percentage points (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments



► DLI 5 Public Financial Management for Primary Health Care Services is improved (Output, 6,220,000.00, 0%)

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---------|
| Value | - | 0.00 | 0.00 | - |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

DLI 5.1 Annual Ministry of Health Financial Reports (AMoHFR) including information on PHCS is completed by the Planned Deadline (Process, 1,000,000.00, 0%)
Unit of Measure: Text
Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---|
| Value | 0.00 | 0.00 | 0.00 | 4 annual Financial Reports meeting Planned Deadline |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

DLI 5.2 Number of District Health Administrations (DHAs) with GIFMIS Capacity (Process, 5,220,000.00, 0%)
Unit of Measure: Text
Indicator Type:

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---------|
| Value | 0.00 | 0.00 | 0.00 | 261.00 |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

► DLI 6 Improved Utilization of Selected Primary Health Care Services (Outcome, 11,010,000.00, 0%)

| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|-------|----------|-------------------|------------------|---------|
| Value | - | 0.00 | 0.00 | - |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |

Comments

DLI 6.1 Annual increase in the number of mother/newborn pairs receiving care in facilities providing Quality BEmONC services at the Sub-District level (Outcome, 3,500,000.00, 0%)
Unit of Measure: Text
Indicator Type:



| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
|--|----------|-------------------|------------------|------------------------------|
| Value | 0.00 | 0.00 | 0.00 | 50,000 (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |
| <p><input type="checkbox"/> DLI 6.2 Annual increase in the number of new family planning acceptors utilizing services at the Sub-District and community levels (Outcome, 500,000.00, 0%) Unit of Measure: Text Indicator Type:</p> | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
| Value | 0.00 | 0.00 | 0.00 | 10,000 (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |
| <p><input type="checkbox"/> DLI 6.3 Annual increase in the number of adolescents utilizing health services at the Sub-District and community levels (Outcome, 510,000.00, 0%) Unit of Measure: Text Indicator Type:</p> | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
| Value | 0.00 | 0.00 | 0.00 | 17,000 (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |
| <p><input type="checkbox"/> DLI 6.4 Annual increase in the number of children aged 0-23 months in Selected Districts who received Penta1 Vaccination (Outcome, 500,000.00, 0%) Unit of Measure: Text Indicator Type:</p> | | | | |
| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
| Value | 0.00 | 0.00 | 0.00 | 25,000 (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |
| <p><input type="checkbox"/> DLI 6.5 Annual increase in the number of hypertensive patients diagnosed and referred at health services at the Sub-District and community levels (Outcome, 6,000,000.00, 0%) Unit of Measure: Text</p> | | | | |



| Indicator Type: | | | | |
|-----------------|----------|-------------------|------------------|-------------------------------|
| | Baseline | Actual (Previous) | Actual (Current) | 2022-25 |
| Value | 0.00 | 0.00 | 0.00 | 120,000 (cumulative increase) |
| Date | -- | 30-Jun-2023 | 30-Jun-2023 | -- |
| Comments | | | | |