Kaduna State Government

Ministry of Health

Corporate Plan

January 2023

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Acronyms and Glossary of Terms

ACPN	Association of Community Pharmacists of Nigeria
ACSM	Advocacy Communication & Social Mobilisation
AHAPN	Association of Hospital and Administrative Pharmacists of Nigeria
APER	Annual Performance Evaluation Report
AOP	Annual Operational Plan
ARC	Accountable, Responsive and Capable Government
BHCPF	Basic Health Care Provision Fund
CPs	Community Pharmacies
CPTC	Corporate Planning Technical Committee
CPTTs	Corporate Planning Task Teams
DHIS	District Health Information System
DRF	Drugs Revolving Fund
DQA	Data Quality Assurance
EOC	Emergency Operation Centre
SEC	State Executive Council
FCDO	United Kingdom's Foreign, Commonwealth, and Development Office
FMCH	Free Maternal and Child Health
GBV	Gender Based Violence
HIV	Human Immunodeficiency Virus
HMIS	Health Management Information System
HREC	Health Research Ethical Committee
HR	Human Resources
HRH	Human Resources for Health
ICT	Information and Communication Technology
IMSVs	Integrated Monitoring Supervisory Visits
ISS	Integrated Supportive Supervision
KADBUSA	Kaduna State Bureau for Substance Abuse Prevention and Treatment
KADCHMA	Kaduna State Contributory Health Management Authority
KADHSMA	Kaduna State Health Supplies Management Agency
KADSACA	Kaduna State Agency for the Control of AIDS
KDSG	Kaduna State Government
KEPA	Kaduna Environment Protection Agency
KPI	Key Performance Indicator
LMCU	Logistic Management Coordinating Unit
M&E	Monitoring and Evaluation
MCPDP	Mandatory Continuing Professional Development Programme
MDAs	Ministries Departments and Agencies
MOU	Memorandum of Understanding
NAFDAC	National Agency for Food and Drugs Administration and Control
NHMIS	National Health Management Information System
NTDs	Neglected Tropical Diseases
OHoS	Office of the Head of Service
ORAC	Operational Research Advisory Committee
PCN	Pharmacists Council of Nigeria

PERL	Partnership to Engage, Reform and Learn
PHC	Primary Healthcare
PHEs	Private Health Establishments
PLWHA	People Living With HIV/AIDS
PPMVs	Proprietary Patent Medicines Vendors
PSM	Procurement and Supply Management
PSN	Pharmaceutical Society of Nigeria
QA	Quality Assurance
RMNCAEH	Reproductive Maternal New-born, Child, Adolescent and Elderly Health
SDP	State Development Plan
SMoH	Kaduna State Ministry of Health
SPHCB	State Primary Health Care Board
SSHDP	State Strategic Health Development Plan
TB	Tuberculosis
TWG	Technical Working Group
UHC	Universal Health Coverage
VVF	Vesicovaginal Fistula

Section 1: Introduction

1.1   Background

Kaduna State is situated in the North-West of Nigeria with Kaduna as its capital. Kaduna became the "North Central State" in 1967 and Kaduna State was formally created in 1975 by

the then military leader General Yakubu Gowon (rtd). In 1987, Katsina State was carved out of the then Kaduna State. The Kaduna State is politically classified as belonging to the now 'North - West' zone of the current six Geo - political zones of Nigeria. The State has Coordinates of 10°20'N 7°45'E, a total of 46,053 km2 (17,781 sq. mi) and is ranked 4th out of the 36 states in size. Its population is about 6.3 million people (Nigerian census figure, 2006) and ranked 33rd out of 36 states with a density of 130/km2 (340/sq. mi). Kaduna State has three senatorial districts and 23 LGAs

Figure 1: Map of Kaduna State with 3 Senatorial Districts

The Kaduna State Government (KDSG) identifies access to essential health services as an important aspect of State development. For KDSG, a healthy populace is critical to socioeconomic development and the establishment of a knowledge-based economy in the State. KDSG's commitment to health is demonstrated by its resolve to promote the delivery of quality health care services across Kaduna State and evidenced by increased budgetary allocations and noticeable improvements in the delivery of quality health care. As the Kaduna State Ministry of Health (SMoH) coordinates the State's health sector policy, plans and strategies, having a focused and strategically aligned corporate plan would position it to effectively deliver on its mandates and contribute to the attainment of universal health coverage (UHC) for the people of Kaduna State.

1.2   Objectives and tasks

The primary objective of the corporate planning process of the Ministry is to review and improve the organizational, institutional and human resources capacities and capabilities to ensure effective delivery of health care services. These will be achieved through the development and implementation of Corporate Plan and Service Charter.

1.3   Methodology

1.3.1 General Approach

Using the corporate planning process, the Ministry looks at itself and ask:
I.   Why it exists – its core mandates
II.   What it is meant to be doing – its goals and objectives
III.   How it can best organise itself to deliver on its objectives – i.e., its structure
IV.   How it plans to achieve its goals and objectives – i.e., its key strategies
V.   Who it needs to fit its structure and best deliver its aligned services – i.e., its workforce.

1.3.2 Key Steps Adopted

The following five main steps were adopted in the process of preparing the SMoH corporate plan:
I.   Establishment of SMoH Corporate Planning and Service Charter teams which consisted of an ad-hoc Corporate Planning Technical Committee (CPTC) and Departmental Corporate Planning Task Teams (CPTTs).
II.   Organisation of 2-day assignment inception roundtable that utilized Zoom platform for representative senior staff of the SMoH on corporate planning scope, approach, and using relevant corporate planning and service charter templates prepared by the consultants.
III.   Data collection and completion of corporate planning and service charter templates by the CPTC and CPTTs was carried out using field/virtual platform which was facilitated by the consultants.
IV.   Draft SMoH corporate plan was developed.
V.   SMoH corporate plan validation roundtable was conducted.

Section 2:   Corporate Planning

2.1   Corporate Planning Concept

Corporate planning is a multifaceted process which can be understood in different ways. But primarily, it is a systematic process, using a structured approach, to agree on, and develop how the Ministry wants to achieve its core mandates. The scope of corporate planning varies with the circumstances of a Ministry and the resource commitment to drive the corporate plan, among other factors. A corporate plan does not document everything on what and how a Ministry functions.

Essentially, a corporate plan helps the Ministry focus on how it wants to operate to achieve its goals and objectives. It gives a high-level focus on key areas regarding the Ministry's core mandates, key functions, strategic direction, and the staffing disposition and performance focus , further details can be obtained from relevant departments or covered in other more specific documents (e.g., health sector strategic plans). The corporate plan guides the management and staff of the Ministry in her cohesive effort to carry out her core mandates. The concepts and fundamental issues in the corporate plan process were examined by the CPTC using the corporate plan framework in figure 2 below and also considers the linkages among Policy and Strategy, Public Financial Management, and Public Service Management.
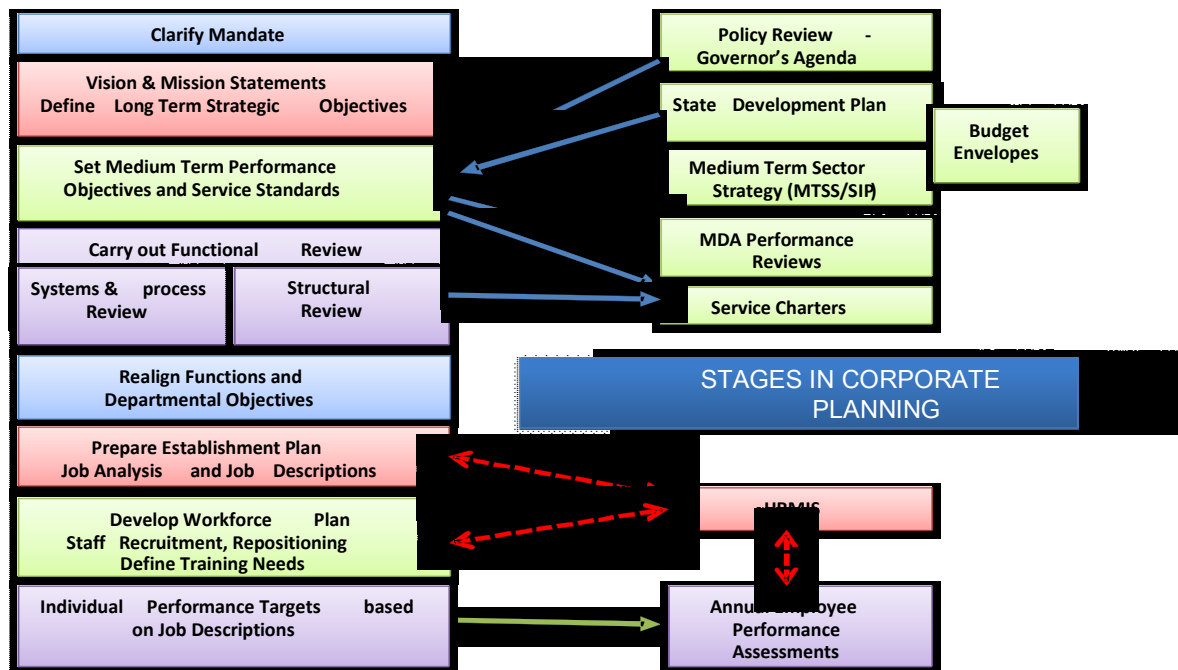
Figure 2 Corporate Plan Framework

2.2   Basis for Corporate Planning

Corporate planning is a review and re-organisation process usually undertaken in response to some sort of change. Such a change could be:
   I.   A changing environment – political, economic, or financial resulting in a changed level of public funds available,

II. New technologies which radically affect the way work is done, e.g., ICT.
III. New mandates, priorities or services required,
IV. Aging workforce, redundant skills, or other human resource constraints,
V. New social / cultural norms e.g., public expectations, gender equity, diversity requirements, etc.

Like a medium-term development plan, the corporate plan should be periodically reviewed to address changes that occur over time. It is likely, however, that a major review will be required every five years or thereabout.

Section 3: Mandates

An organisation's mandate is usually confirmed by the highest level of government for example, by the Constitution, a Law, an Executive order or any other legal instrument. A mandate is therefore an authoritative command which forms the basis for developing the organization's Vision, Mission and Core Value statements. The "State Ministry of Health Corporate Plan Zero Draft, 2013" contained ten (10) mandates which were agreed upon but considered inadequate as these mandates did not cover mandates related to the internal efficiency of the Ministry.

3.1   Core Mandates

The Ministry of health was established to support the KDSG in the formulation and implementation of health policies, plans, programmes, and strategies.

The core mandates of the SMoH are, to:
   I.   Translate and formulate State government policies and plans on all health matters.
   II.   Initiate legislation on health service delivery in the State.
   III. Provide preventive, curative, promotive and rehabilitative health care services in line with government policies and plans.
   IV.   Ensure the availability of essential medicines and medical supplies in the State.
   V.   Develop and maintain infrastructure for health in the State.
   VI.   Ensure the provision and equitable distribution of adequate human resources for health.
   VII. Oversee the State's health training institutions and human resource for health development.
   VIII. Coordinate development partners' activities on all health matters to achieve aid effectiveness.
   IX.   Regulate all private health establishments in line with the State and National policies.
   X.   Promote the conduct and utilisation of operational research for effective healthcare delivery.

3.2   Internally Linked Mandates for Organisational Effectiveness, Efficiency, and Improvement

The adopted Ministry's powers and responsibilities in the legal notice that originally established it and subsequent related executive conclusions or decisions primarily focus on the public-facing core mandates. Yet, there are internal mandates that are critical to its organisational, administrative, and operational effectiveness, efficiency, performance and improvement. The three adopted internal mandates are:
   I.   Provision of infrastructure and physical resources to make the Ministry operate optimally.
   II.   Judicious management of human, financial, and other resources of the Ministry.
   III. Building the institutional capacity of the Ministry to optimally perform its mandates based on global best practices.

Section 4:   Vision, Mission, and Core-Values Statements

The core mandates define the vision, mission and core values of the Ministry. The core values speak directly to the behavioural dispositions of the management and staff of the Ministry and reflects its character. The vision, mission and core value statements are shown in Figure 3 below.

Vision
To be a leading State Ministry in the provision of equitable, affordable, accessible, and sustainable quality health care services.

Mission
To ensure the delivery of quality health care services to all people in Kaduna State by providing clear policy directions and implementing all necessary health plans with the participation of relevant stakeholders.

Core Values
1. **Professionalism:** Employ various health professionals who discharge their duties competently in an ethical manner.
2. **Motivation:** Continuously build the capacity of staff and empower them for improved performance.
3. **Efficiency:** Uphold timeliness, responsiveness, and the optimal utilization of the resources available in delivering services.
4. **Client Focus:** Deliver health services tailored to satisfying current and future clients' needs through a holistic approach.
5. **Integrity:** Engage in consistent actions, methods, and practices which ensure accountability and transparency in service delivery.
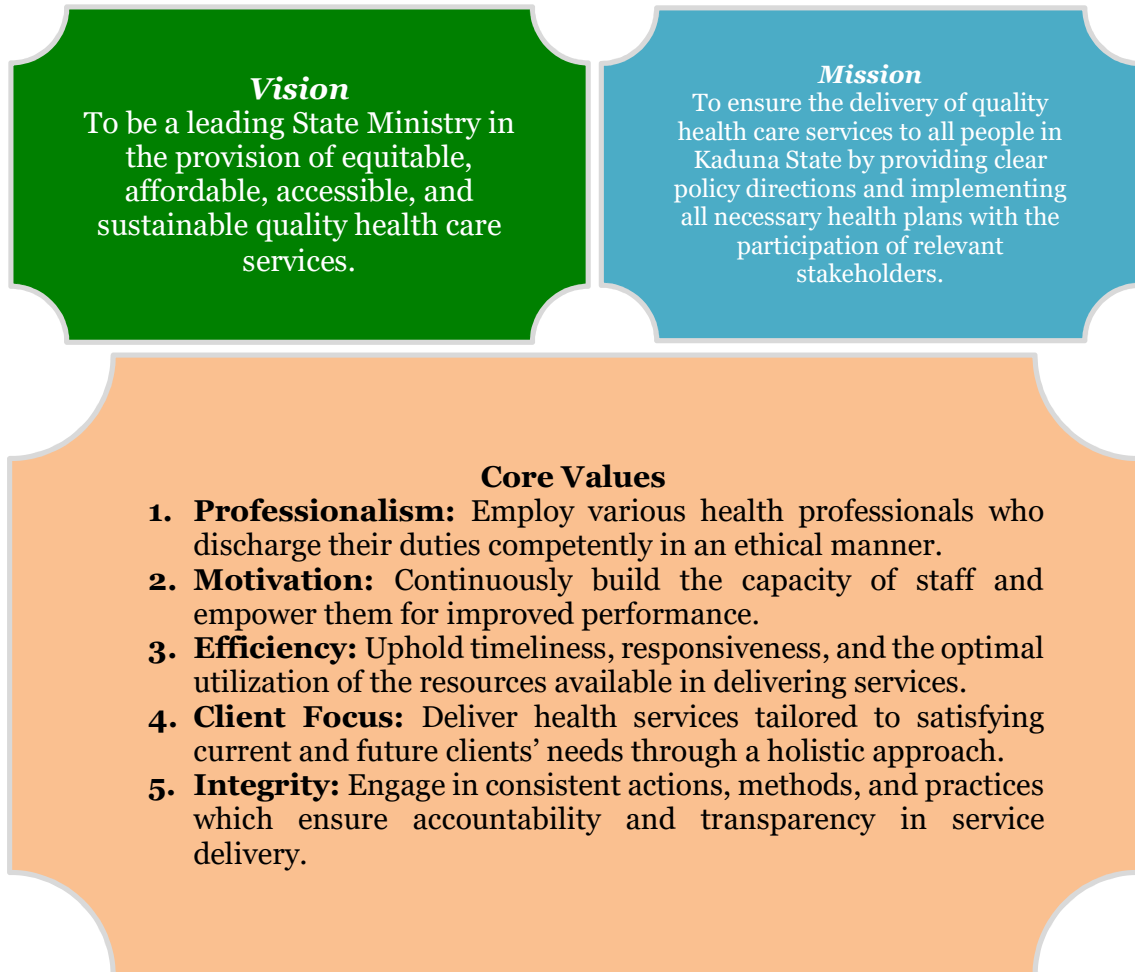
Figure 3 Statement of Vision, Mission and Core Values

Section 5: Long-Term Goals, Medium-Term Objectives and Strategies

5.1 Strategy Focus

The strategic direction of the Ministry is influenced by the Kaduna State Health Policy and broadly expressed in such documents as the Kaduna State Health Sector Implementation Plan (SIP). Hence, the strategic direction of the Ministry is 'to build a resilient health system that is responsive to the yearning and aspiration of the health needs of the people in a sustainable manner in response to the overall goal of achieving universal health coverage.' **(Source: Kaduna State Health Policy, 2021)**

5.2 Key Strategies, Long-Term Goals, and Medium-Term Objectives

The Kaduna State 2022-2024 Sector Implementation Plan comprises of fifteen (15) strategic objectives, and fifteen (15) strategic priorities which the Health Sector is determined to implement in the next three years. The SIP sets out realistic and achievable goals and objectives that are the focal point for driving the actions and activities of the health sector over the next three years.

The following are the strategies as contained in the **Health Sector Implementation Plan (2022-2024).**
I. To strengthen leadership and governance for sustainable development of Kaduna State health system.
II. To enhance reproductive, maternal, new-born, child, and adolescent health and nutrition.
III. To increase and optimise human resources for health.
IV. To improve health financing.
V. To improve prevention of, and coordinated response to, communicable diseases (malaria, TB, leprosy, HIV/AIDS) and neglected tropical diseases (NTDs).
VI. To assure availability of quality medicines, vaccines and other health technologies and supplies.
VII. To sustain public health emergencies preparedness and response.

The long-term goals and medium-term objectives associated with the above-listed strategies are shown in Table 3.

Table 1: Long-Term Goals and Medium-Term Objectives

S/N	Long-Term Goals	Medium-Term Objectives
Strategy #1: Strengthen leadership and governance for sustainable development of Kaduna state health system.		
1.	Effective leadership and an enabling policy environment that ensures adequate oversight and accountability for the delivery of quality health care for sustainable development of Kaduna state health system provided.	I. Provide clear policy, plans, legislative and regulatory framework for the health sector in Kaduna State. II. Strengthen transparency and accountability in planning, budgeting, and procurement process. III. Improve health sector performance through regular integrated reviews and reports
Strategy #2: Enhance reproductive, maternal, new-born, child, and adolescent health + nutrition.		

2.	Universal access to comprehensive quality sexual and reproductive health services throughout life cycle and reduce maternal, neonatal, child and adolescent morbidity and mortality among in Kaduna State promoted.	I.	Reduce maternal morbidity and mortality through the provision of timely, safe, appropriate, and effective healthcare services before, during and after childbirth.
		II.	Strengthen prevention, treatment, and rehabilitation services for fistula care in Kaduna State.
		III.	Improve the nutritional status of the people of Kaduna State throughout their lifecycle, with a particular focus on vulnerable groups especially women of reproductive age and children under five years of age.
		IV.	Increase demand for, and increase access to, sexual and reproductive health services (family planning and post abortion care).
Strategy #3: Increase and optimise human resources for health.			
3.	Right number and skill mix of competent, motivated, productive, and equitably distributed health workforce provided for optimal and quality health care services.	I.	Effective coordination and partnership for aligning investment of current and future needs and institutional strengthening for human resources for health (HRH) agenda.
		II.	Increase availability of adequate numbers of qualified health workers.
		III.	Develop monitoring and evaluation systems for HRH, including systems for HRH-IS and Registry.
Strategy #4: Improve health financing.			
4.	Access to health services without any financial barriers or impediments at the point of accessing care ensured for all residents of Kaduna State.	I.	Strengthen governance and coordination for actualizing stewardship and ownership of Health Financing reforms.
		II.	Increase sustainable and predictable revenue for health.
		III.	Enhance transparency and accountability in strategic purchasing of Health Services.
		IV.	Enhance financial risk protection through pooled funds in Kaduna State.
Strategy #5: Improve prevention of, and coordinated response to, communicable diseases (malaria, TB, leprosy, HIV/AIDS) and neglected tropical diseases.			
5.	Prevention, case detection and coordinated response for the prevention, control, and management of communicable diseases and NTDs in the State improved.	I.	Significantly reduce morbidity and mortality due to Malaria and move towards pre-elimination levels.
		II.	Increase universal access to high quality, client-centred TB/Leprosy diagnosis and treatment services for the reduction in the incidence and prevalence of tuberculosis/leprosy in Kaduna State.
		III.	Significantly reduce the incidence and prevalence of HIV/AIDS in Kaduna State.
Strategy #6: Assure availability of quality medicines, vaccines and other health technologies and supplies.			

6.	Quality medicines, vaccines, and other health commodities and technologies made available, affordable, and accessible to all the people of Kaduna State.	I.	Strengthen availability and use of affordable, accessible, and quality medicines, vaccines, and other health commodities and technologies at all levels.
Strategy #7: Sustain public health emergencies preparedness and response.			
7.	Public health emergencies preparedness and response sustained.	I.	Significantly reduce the incidence and impact of public health emergencies.

Section 6:   Functional Review

6.1   Key Functions of SMoH Departments

Making the Ministry fit-for-purpose requires that the key functions of its departments align with its core mandates. Departmental functions should flow from the core mandates to deliver specific outputs or services that are central to the attainment of its mission. Some functions of the departments of the Ministry are shown below.

Mapping key functions of departments to the Ministry's core mandates focus the departments on what is important to the Ministry and optimises resource utilisation. Based on mapped functions, departments can identify and plan for deliverables that help attain the mission and goals of the Ministry.

Table 2: Departmental Mandates and Functions

Mandate	Function	Outputs
Department of Administration and Finance		
Ensure the provision and equitable distribution of adequate human resources for health.	Coordinating the recruitment, promotion, transfers/ postings, discipline, and retirement of all staff.	List of successful applicants/ List of concerned staff.
Build the institutional capacity of the Ministry to effectively perform its mandates based on relevant best practices.	Coordinating the training and retraining of all staff of the Ministry.	Training Needs Assessments.
	Coordinating between the SMoH, MoF and other financial and economic planning institutions.	Discussion reports and Meeting notes.
Manage the human, financial and other resources of the Ministry efficiently and effectively.	Undertaking maintenance of the Ministry's vehicles and machineries.	Asset register and Maintenance reports.
	Managing the Ministry's public image.	Columns in Newsletters, Jingles and Social media presence.
	Coordinating oversight and guiding the Ministry on financial expenditure, treasury circulars, and adequate control on collection and disbursement of public funds.	Relevant reports and memos, Minutes of meetings and Routine Oversight Reports.
Provide infrastructure and physical resources to ensure the Ministry operate effectively and efficiently.	Coordinating the procurement of office supplies and managing/maintaining all office furniture and equipment.	Vouchers, Assets resisters and Requisition forms.
Department of Medical Services		

Oversee the State's health training institutions and health workforce development	Coordinating and supervise the provision of effective service delivery at secondary health care facilities (i.e., general hospitals).	Routine Spot-checks/ Visit Report.
	Mentoring service providers at the secondary health care facilities.	Mentoring/ Training Reports.
Regulate all private health establishments in line with the State and National policies.	Registering, supervising, and regulating private health establishments' practice.	Private Health Establishments Register.
	Setting optimal standards (quality) of health care services and ensuring their implementation at both public and private health facilities.	Routine Spot-checks/ Visit Report.
Ensure the availability of essential medicines and medical supplies in the State.	Undertaking distribution of health care commodities and supplies to public hospitals.	Health Supplies and Commodities Inventory.
Department of Health Planning, Research & Statistics		
Ensure the provision of human resources for health Information.	Developing, updating, and maintaining Human Resource for Health database	Human Resource for Health Database.
Develop and maintain ICT infrastructure for health in the State.	Planning and initiation of ICT training and procurement of ICT equipment and infrastructure for the ministry of health.	Training Reports, ICT Requisition Forms and Asset Register.
Translate and formulate State government policies and plans on all health matters	Undertaking preparation and periodic reviews of annual, medium, and long-term health sector plans.	Health Sector Plans and Policies.
Initiate legislation on health service delivery in the State.	Initiating the review/ development of sector laws.	New and Updated Sector Laws.
Coordinate development partners' activities to achieve aid effectiveness.	Coordinating the activities of all donors and partners in the health sector.	Quarterly Donor/ Partners Coordination Meeting Minutes.
Promote the conduct and utilisation of operational research for effective healthcare delivery.	Undertaking health data collection, collation, analysis, and dissemination.	Health Data and Statistics.
Build the institutional capacity of the Ministry to effectively perform its	Developing M&E workplans, sector scorecards and key performance indicators (KPI) for the health sector.	M&E Workplans and Sector KPIs.

mandates based on relevant best practices.		
Department of Public Health		
Provide, preventive, curative, promotive and rehabilitative health care services in line with government policies and plans.	Coordinating and implementing disease prevention and control programs e.g., malaria, tuberculosis, leprosy, onchocerciasis, neglected tropical diseases, HIV/AIDS, and eye care programs.	Programme Reports and Meeting Minutes.
	Coordinating and supervising reproductive health programs, such as VVF prevention and control, prevention of reproductive health cancers and adolescent sexual reproductive health.	Programme Reports and Meeting Minutes.
	Responding to public health emergencies such as disasters, epidemics, in collaboration with other MDAs.	Programme Reports and Meeting Minutes.
	Disseminating health promotion information to the public on arising public health issues such as epidemics, disasters etc.	Reports, Jingles and Leaflets.
	Coordinating nutrition activities at secondary health care level e.g., nutritional rehabilitation, dietary counselling to pregnant women, people with non-communicable diseases (diabetes mellitus) and PLWHA.	Reports and Leaflets.
	Coordinating health education (involving developing, disseminating, and communicating) on various health issues in the State.	Reports, Jingles and Leaflets.
Ensure the provision and equitable distribution of adequate human resources for health.	Undertaking capacity building of health care providers on public health programs and initiatives.	Training Reports.
Department of Pharmaceutical Services		

Provide, preventive, curative, promotive and rehabilitative health care services in line with government policies and plans.	Coordinating the implementation of pharmaceutical care in all public health facilities in the State.	Health facilities Reports and Meeting Minutes.
	Coordinating and evaluating the procurement, supply chain and Logistics management of programs such as DRF, FMCH, TB/HIV, Malaria, Family planning, Nutrition and vaccines for immunization in both state public and private facilities.	LMCU Reports and Coordination Meeting Minutes.
Oversee the State's health training institutions and health workforce development	Coordinating Intern Pharmacists training in collaboration with the Pharmacist Council of Nigeria (PCN).	Training Reports
Ensure the availability of essential medicines and medical supplies in the State.	Coordinating the State Task Force on Counterfeit and Fake drugs and Unwholesome Processed Foods in collaboration with Federal Regulatory Agencies like NAFDAC.	Reports and Coordination Meeting Minutes.
	Coordinating the activities and practice of herbal/ traditional medicine and other related drug control committees.	Reports and Coordination Meeting Minutes.
	Coordinating the Logistics activities of Public Health Programmes across Supply Chain functions.	LMCU and PSM-TWG Reports and Coordination Meeting Minutes.
Regulate all private health establishments in line with the State and National policies.	Coordinating the registration and regulation of pharmacists, pharmacy technicians, pharmaceutical premises, and patent proprietary medicines shops in conjunction with the PCN.	Registration Database
Department of Nursing Services		
	Coordinating and supervising effective provision of	

Provide, preventive, curative, promotive and rehabilitative health care services in line with *Nursing and Midwifery Council of Nigeria Standard*	Coordinating Nursing and Midwifery activities across all public healthcare facilities in the state.	Routine Spot-checks/ Visit Reports.
Ensure the provision and equitable distribution of adequate human resources for health.	Coordinating posting of newly recruited and existing staff for effective service delivery across all secondary health facilities in the state.	Posting List.
Oversee the State's Nursing & Midwifery health training institutions and health workforce development.	Coordinating maintenance of standards of Nursing practice and education in all Health facilities and Training Institutions in the state.	Routine Spot-checks/ Visit Report.
	Supervising Nursing and Midwifery Council of Nigeria final qualifying examination in the State.	Reports.
	Planning, organising, and implementing Mandatory Continuing Professional Development Programme for Nurses & Midwives.	Number of Nurses & Midwives that participated in the programme

6.2 Mapping of Selected Functions and Processes for Mandates Attainment

Key processes associated with delivering specific outputs or results in the departments are also aligned to foster a 'fit-for-purpose' Ministry. When such processes are aligned with specific deliverables that foster attainment of objectives, further efforts can be made by the departments and the leadership to re-engineer key processes for optimal efficiency.

Appendix 1 shows examples of departmental processes mapped to the core mandates.

Section 7:   Structural Review

7.1   Basis of a Fit-for-Purpose Organisation Design

This section leverages on the functional and process reviews and comes up with an optimal and fit-for-purpose organisation structure. This is not limited to the physical abstraction displayed in an organogram but also the collaborative mechanisms to sustain a fit-for-purpose Ministry.

7.2   Top-Level Organogram of SMoH

The core mandates define the mission of the Ministry and its organisational structure which shows the hierarchical relationships of its top tier leadership and dictates how the core mandates are distributed across its key departments.

The core mandates are organised and performed under the following departments:
  I.   Administration & Finance
 II.   Medical Services
III.   Public Health
IV.   Nursing Services
 V.   Pharmaceutical Services
VI.   Health Planning, Research & Statistics

Furthermore, the Ministry supervises the following agencies and health training institutions:
  I.   State Primary Health Care Board (SPHCB)
 II.   Kaduna State Health Supplies Management Agency (KADHSMA)
III.   Kaduna State Agency for the Control of AIDS (KADSACA)
IV.   Kaduna State Bureau for Substance Abuse Prevention and Treatment (KADBUSA)
 V.   Kaduna State Contributory Health Management Authority (KADCHMA)
VI.   Barau Dikko Teaching Hospital
VII.   College of Nursing & Midwifery.

The organogram of SMoH is shown in Figure 4.

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                              │  Executive Governor │
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│   DG KADCHMA     │   │  Permanent Secretary │
│   DG KADBUSA     │   └──────────────────────┘
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│   PROVOST CN&MW  │
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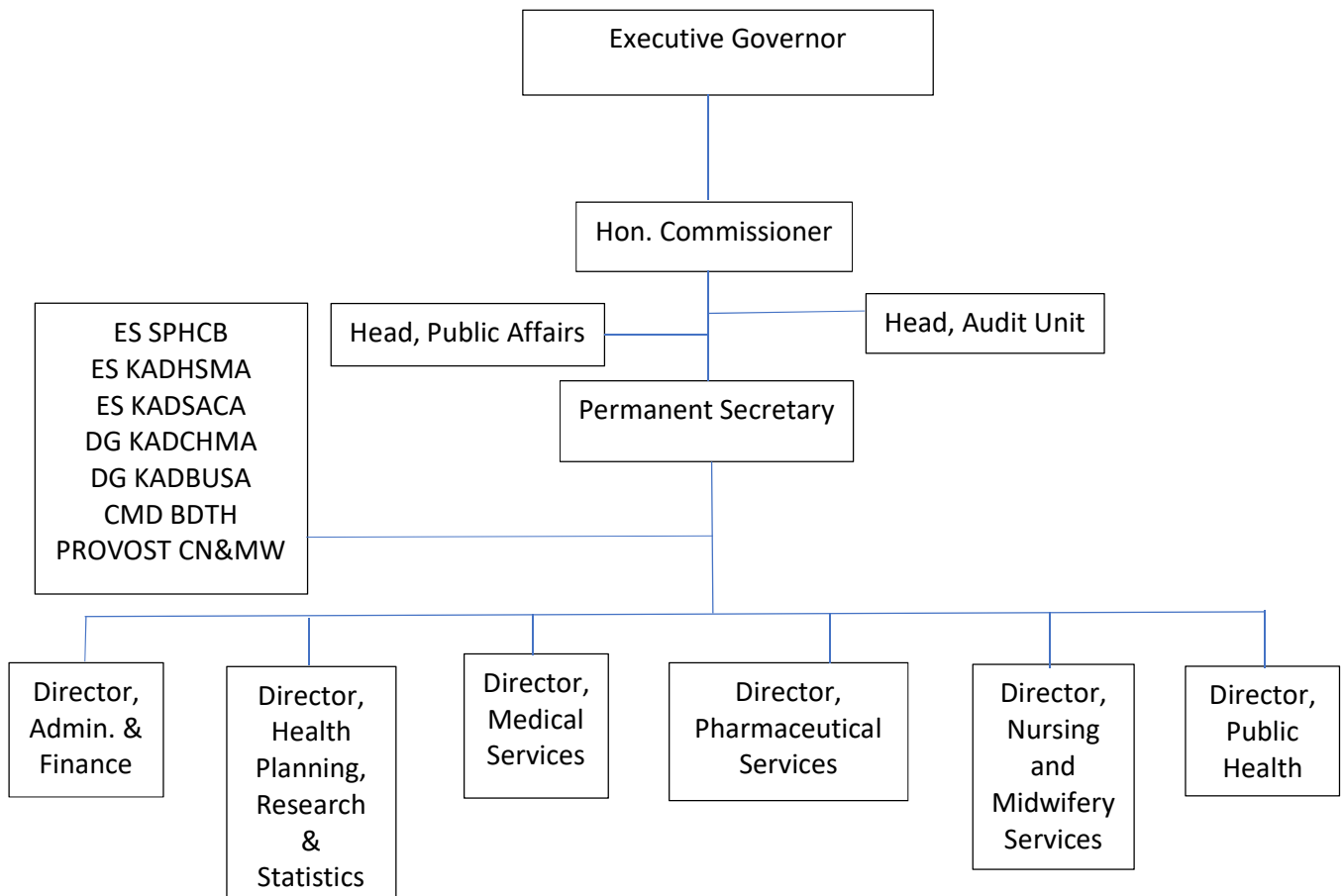| Director, Admin. & Finance | Director, Health Planning, Research & Statistics | Director, Medical Services | Director, Pharmaceutical Services | Director, Nursing and Midwifery Services | Director, Public Health |

Figure 4: Organogram of SMoH

Each department maintains a departmental organogram which shows the functional relationships of their units, project groups, or task teams, and the roles associated with key departmental functions.

7.3   Corporate Performance Management Committee

The leadership and management staff of the Ministry meet periodically for corporate performance planning, monitoring, and reporting, and to share knowledge, information, skills, and experience to maintain an integrated, agile organisation and a high-performance culture in the Ministry. this help the Ministry to understand and focus on what makes for successful delivery of services to our stakeholders. This mechanism also ensures effective review and evaluation of performance standards to take corrective actions as appropriate where deviations from desired results and standards are seen.

Section 8:   Staffing and Staff Positioning for High Performance

8.1   Staffing Structure

The effective staffing of SMoH would be facilitated by having experienced, competent, and well-motivated staff members in key positions. In this regard, the staffing structure matters, particularly for a 'specialist' Ministry like the SMoH. The senior staff members and middle level management (i.e., equivalent to staff members on GL 7 – 13) are the engine room of such a Ministry and they drive the operational and service delivery processes of the Ministry; they form the bulk of the staff population. Table 3 shows the distribution of SMoH staff members by salary grade levels (equivalent to staff categories) as at May 20, 2022.

Table 3: SMoH Staff Distribution by Grade Levels

S/N	Grade Levels	Number of Staff	Percentage (%)
1.	GL 01-06	10	6.90
2.	GL 07- 13	102	70.34
3.	GL 14 - 17	33	22.76
Total		**145**	**100**

 Table 3:   shows that 70.34% of the SMoH staff members are on GL 7 – 13 and 22.76% are those on GL 14 and above. The staffing structure is positioned to drive service delivery in the health sector. However, it should be noted that this does not mean that Ministry has adequate number of staffs for its core mandates. this is something that would require a systematic and structured process to determine the appropriate establishment levels in all departments.

8.2   Diversity and Gender Positioning

Table 4 shows the distribution of Staff members by gender.

Table 4: Distribution of Staff by Gender in SMoH

S/N	Gender	Number of Staff	Grade Levels		
		Total No. of Staff (%)	*GL 01-06*	*GL 07-13*	*GL 14 – 17*
1.	Male Staff	89 (61.38%)	10	54 (52.94%)	25 (75.76%)
2.	Female Staff	56 (38.62%)	-	48 (47.06%)	8 (24.24%)
	Total	*145 (100%)*	*10*	*102*	*33*

According to Table 4, 61.38% of Staff members are male while 38.62% are female. Although there is a wide gap between the percentages of male and female in the general staff population, this reduced among staff members on GL 07 – 13. Of the 102 staff members on GL 07 – 13, 54(52.94%) are male while 48 (47.06%) are female. This proportion bodes well for career advancement of female staff members in the SMoH. However, there is a marked disparity when it comes to senior management stall level (equivalent to GL 14 and above), where 22 (75.76%) of the 33 staff members are male while 8 (24.24%) are female.

While no single Ministry or Agency of the KDSG can decide on the male-to-female ratio of its workforce, the Ministry will work towards optimising diversity and gender positioning in health sector workforce in line with the relevant Nigerian Federal and State policies.

Some of the actions towards facilitating improvement of employment opportunities and career advancement for women and other socially excluded groups in the health sector are:

I. **Collection and analysis of data:** A first step will be to collect and analyse data in relation to the current workforce at all grades and locations that will allow an analysis of where there are gaps (such as in the gender balance or numbers of people with disability). This process would involve collaboration with the Office of the Head of Service (OHoS).

II. **Setting of targets:** The Ministry shall collaborate with other organizations on recommending to the OHoS the minimum percentage of health-care workforce to be made up of qualified women, people with physical disability, etc.

III. **Review of recruitment and promotion processes:** Where applicable and feasible, there may be a review of the recruitment and promotion procedures in the health sector to facilitate the recruitment and promotion of individuals from underrepresented groups.

IV. **Review of progress being made:** There shall be a regular review of progress being made (as part of wider health sector workforce planning review) in relation to targets (recruitment, access to training, promotion, etc.).

8.3 Positioning Staff for High Performance

8.3.1 Using Functional Job Descriptions

Effective staff performance management begins with planning. A key staff performance planning tool is using functional job descriptions. A job description states the purpose or essence of a job or position, specifies key duties and responsibilities involved, map the Key Results Areas (KRAs), and indicate the required skills and competencies for success on the position or job.

Job descriptions should be prepared for all key positions and staff performance shall be assessed based on their Job description. To start this process, and to give practical examples for subsequent preparation of job descriptions for key positions in the Ministry, job descriptions were prepared for the following six positions:

I.   Director Admin & Finance
II. Director Medical Services
III. Director Pharmaceutical Services
IV. Director Public Health
V.   Director Nursing Services
VI. Director Health Planning, Research & Statistics

Details of the prepared job descriptions are contained in Appendix 2.

8.3.2 Work Planning and Target Setting

Work planning is seen as the medium through which jobs are actualised. Duties and responsibilities defined in job descriptions need to be mapped with timelines and targets set on the expected milestones or key performance indicators (KPIs). Agreeing specific performance targets with key staff members is critical to achieving the mandates of the Ministry and getting enhanced performance from its departments. The process of preparing

such performance targets would be through using a target setting format such as the one in Appendix 3.

The target setting template is to be used in conjunction with the job description to effectively focus each job holder on priority duties and performance milestones attached to their positions. Such a template should be completed by each key staff member in collaboration with his or her immediate superior and in line with the departmental key functions and expected deliverables. Targets can be set within the Ministry's performance management review cycle (e.g., quarterly, half-yearly, or yearly), and monitored on an ongoing basis using e.g., departmental and management progress meetings and individual performance feedback.

8.3.3 Evidence-Linked Staff Performance Evaluation

The work planning and target setting process indicated in *sub-section 5.3.2* would enhance the staff performance evaluation reporting system. This is because staff performance appraisal is purposeful and effective when it is linked with clear, understandable, and agreeable evidence. Staff performance on set targets may serve the purpose of quarterly and half-yearly performance monitoring inputs to the performance ratings and records on any key staff member in Annual Performance Appraisal.

Section 9:   Service Standards and Service Performance Targets

9.1   Basis for Sustaining a Sound Service Delivery Culture

At the heart of the Ministry's service charter is the effective and efficient delivery on service standards and service performance targets. This will be facilitated through capacity building of service delivery teams and using mechanisms that help focus on, and improve service delivery processes.

9.2   Mechanisms for Improving Service Performance

Mechanisms for tracking and improving performance on service standards and performance goals and targets include the following.

9.2.1 Departmental Service Improvement Plans

Departmental service improvement plans, which document what the departments will do and how they will meet specific service performance targets, including necessary resource implications, are central to formalising and creating an enabling environment for service improvement.

9.2.2 Service Delivery Process Meetings

Service delivery process meetings may be in form of regular departmental service delivery team review meetings to exchange ideas, information, knowledge, and experience on specific service standards and service performance targets, and on improving their service delivery processes. There may also be quarterly service delivery joint team (inter-team) meetings where representative members of service delivery teams in the Ministry meet to interrogate their service delivery processes and share ideas and experience on improving such processes.

9.2.3 Service Targets Calendaring

Service target performance should be ongoing but with milestones and timelines (calendar) for specific aspects or progress to be monitored and attained. This would mean producing service charter performance reports periodically. Doing this would incorporate the use of service performance targets monitoring form like the one shown in Appendix 4. This would benefit from half-yearly stakeholders' forum/roundtable, incorporating the administration of service standards performance appraisal questionnaire, like the one shown in Appendix 5.

9.2.4 Service Performance Scorecards

Using quarterly service performance scorecard for the departments may include other aspects of ministerial performance such as strategic/operational targets (for mission attainment), internal processes (for ministerial efficiency), and staff development/growth would align well with sustaining a sound service-delivery culture in the Ministry.

9.2.5 Ministerial Service-Performance Traffic-Light System

Ministerial service-performance 'traffic-light system' could be employed for tracking progress on performance targets. In this system, performance issues are colour coded like a 'traffic light system' (RAG: Red-Amber-Green) to help quickly identify problem areas. Areas that are 'green' indicate that progress is according to plan; 'Red' means progress is off plan and intervention is required; 'Amber alerts the Ministry that progress is off plan but not to the point where an intervention is urgently required.

Section 10: Action Points

This section highlights some action points that are expected to guide the implementation process of the CP.

Table 5: Action points

S/N	Action
1.	Present the draft CP, SC and JDs to the Honourable Commissioner, Ministry of Health for inputs and approval.
2.	Base on the approved JDs, Directors of each department shall develop JDs for all key positions in their respective departments
3.	Present the draft CP and SC to the Institutional Development Council for further consideration and approval.
4.	Disseminate to relevant internal and external stakeholders, to gather support for effective implementation of the CP.
5.	Set-up a committee to oversee the implementation of the approved CP and SC.
6.	Update the Ministry's mini website (under the www.kdsg.gov.ng domain), to enhance its engagement with stakeholders and promote its operations.
7.	Collect gender disaggregated data for all levels and increase focus on ensuring gender balance in the staff recruitment and training.
8.	Mobilise resources for the realisation of the strategic priorities of the Ministry.

Appendix 1: Examples of Departmental Processes Mapped to Core Mandates of SMoH

	Core Mandates of SMoH												
	External/ Public-Facing Mandates										Internal /Ministerial Optimisation Mandates		
	1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**	**13**
	Provide, preventive, curative, promotive and rehabilitative health care services in line with government policies and plans.	Ensure the provision and equitable distribution of adequate human resources for health.	Oversee the State's health training institutions and health workforce development	Ensure the availability of essential medicines and medical supplies in the State.	Develop and maintain infrastructure for health in the State.	Translate and formulate State government policies and plans on all health matters	Initiate legislation on health service delivery in the State.	Coordinate development partners' activities to achieve aid effectiveness.	Regulate all private health establishments in line with the State and National policies.	Promote the conduct and utilisation of operational research for effective healthcare delivery.	Provide infrastructure and physical resources to ensure the Ministry operate effectively and efficiently	Manage the human, financial and other resources of the Ministry efficiently and effectively.	Build the institutional capacity of the Ministry to effectively perform its mandates based on relevant best practices.
Selected Departmental Processes													
Admin. & Finance													
		Recruiting for the health sector.											Identifying relevant trainings to be carried out and staff and to be trained
Health Planning, Research & Statistics													
						Facilitating		Organising quarterly		Provide ethical			

						developm ent of health sector policies and plans.		donor/ partners coordinatio n meetings.		approval for health researches and utilize relevant research finding			
						Monitor and Evaluate the implemen tation of health policies, plans and interventi ons to guide strategic decision							

Medical Services

			Carrying out routine spot- checks in general hospitals.						Registering of Private Health Establishme nts in the state.				

Pharmaceutical Services

									Regulating the activities of pharmacies and patent				

									proprietary medicines shops.			
									Coordinating the registration of qualified pharmacists in the state.			
Nursing Services												
	Conducting routine spot checks at healthcare facilities to quality assure nursing services.	Posting of recruited nurses and midwives to healthcare facilities in the state.										
Public Health												
	Conducting public health awareness campaigns.											Ensuring linkages required for inter-ministry collaborations for implementation are established between MOH and other relevant MDAs such as MOJ, MENR, MOE,

												MHSSD, MOA etc
Coordinating disease control programs and responses to public health emergencies.					Ensuring an enabling policy environment for the implementation of public health interventions through ensuring availability of relevant policies and strategic plans.	Initiating review of all laws pertaining public health and health security						

Appendix 2: Prepared Job Descriptions for SMoH Directors

2.1   Director of Admin & Finance

Job Title/Position:	Director of Admin. & Finance	Department:	Administration and Finance
Cadre:	Administrative Officer	Grade Level:	16
Name of Job Holder:			
Responsible to:	Permanent Secretary	Staff Managed:	Director (Finance and Accounts), Deputy Director (Administration and Finance), Staff Officer, Chief Hospital Secretary, Principal Hospital Secretary, Stores Officer, ICT Officer, Desk Officer (Legal), Personal Assistant
Key Relationships on the job	Honourable Commissioner (SMoH), all staff of the Department, all directors in SMoH departments, Deputy Directors in SMoH Departments, Programme Officers, Head of agencies and parastatals in the health sector, Public Health Facilities, Office of the Head of Service, Civil Service Commission, Heads/Commissioners of relevant MDAs, Kaduna State House of Assembly, Local Government officials, Federal Ministry of Health, Health Management Boards, Ward Development Committees and Facility Health Committee of Kaduna State Health Facilities, Private Health Facilities, Development Partners, Non-Governmental Organisations, Civil Society Organisations, relevant Professional Bodies, Trade Unions, Contractors, and the public.		
Job Purpose:	To assist the Ministry achieve its mandates and goals through effectively and efficiently coordinating the management of its human, financial, and other resources, and facilitating its internal systems for optimal performance.		

Key Functions and Responsibilities and Performance Indicators

S/N	Key Functions & Responsibilities	Performance Indicators
1.	Coordinating and leading the Department to effectively support the Ministry to achieve desired results.	I. Annual work/operational plans developed for the Department. II. Job descriptions prepared for key staff members of the department III. Performance targets set for key staff members of the department and staff members offered technical support and guidance to meet set targets IV. Departmental performance, progress, and review meetings held, minutes of meetings kept and action points of meetings followed-through

		V.	Periodic departmental performance reports produced and submitted to the SMoH's Permanent Secretary, and feedback acted upon.
2.	Supporting and advising the management in the general administration of the Ministry	I. II. III.	Ministry effectively and efficiently managed Relevant reports and memos produced and channelled appropriately Minutes of meetings kept and action points followed-through
3.	Coordinating the provision of adequate and motivated workforce for the Ministry.	I. II. III. IV.	Adequate HR provided for the Ministry; functional job descriptions prepared for key staff members of the Ministry Highly motivated workforce employed; staff performance records maintained. Relevant reports and memos produced and channelled appropriately Minutes of meetings kept and action points followed-through
4.	Facilitating provision of financial and material resources to all the Departments / units of the Ministry.	I. II. III. IV.	Financial and material resources provided. Asset registers maintained Relevant reports and memos produced and channelled appropriately Minutes of meetings kept and action points followed-through
5.	Coordinating effective transport management for the Ministry.	I. II. III. IV.	Effective fleet management undertaken per annum; relevant records kept Enhanced Ministerial logistics through efficient transport system Relevant reports and memos produced and channelled appropriately Minutes of meetings kept and action points followed-through

Qualifications, Working Experience and Competences

Minimum Academic/ Professional Qualifications Required:	First degree or equivalent
Minimum Working Experience Required:	20 years post-qualification cognate experience.
Essential Technical Competences and Behavioural Attributes	I. Sound knowledge, experience, and skills in Kaduna State public service statutes and rules, and general administration, including adept management and coordination skills.

	II.	Extensive knowledge, experience, and skills in administrative procedures and financial regulations in the Kaduna State public service.
	III.	Strategic decision-making skills and strategic expertise in policy formulation, interpretations, and adoption.
	IV.	Leadership, people management and communication skills
	V.	Social and emotional intelligence, including core ethical values and standards including integrity and good professional judgement.
	VI.	Team building skills

Signature of Job Holder: **Date:**

2.2   Director of Medical Services

Job Title/Position:	Director of Medical Services	**Department:**	Medical Services
Cadre:	Medical Officer	**Grade Level:**	16
Name of Job Holder:			
Responsible to:	Permanent Secretary	**Staff Managed:**	DDMS (Clinical), DDMS (Diagnostic), DDMS (Private Health Establishments), ADMS (Diagnostic), ADMS (Emergency Medical Services), Head Biomedical Engineers
Key Relationships on the job	Honourable Commissioner (SMoH), all staff of the Department, all directors in SMoH departments, Medical Directors of Hospitals, Head of agencies and parastatals in the health sector, Office of the Head of Service, Civil Service Commission, Heads/Commissioners of relevant MDAs (e.g., Planning and Budget Commission, Ministry of Finance, Ministry of Education), Private Health Facilities, Federal Ministry of Health, Medical and Dental Council of Nigeria, Development Partners, Civil Society Organisations, relevant Professional Associations, Regulatory bodies, and the public.		
Job Purpose:	To assist the Ministry, achieve its mandates and goals through effectively coordinating and supervising Health Care Service Delivery at Public Secondary Health Care Facilities (Hospitals).		

Key Functions and Responsibilities and Performance Indicators

S/N	Key Functions & Responsibilities	Performance Indicators

1.	Coordinating and leading the Department to effectively support the Ministry to achieve desired results.	I. Annual work/operational plans developed for the Department. II. Job descriptions prepared for key staff members of the department III. Performance targets set for key staff members of the department and staff members offered technical support and guidance to meet set targets IV. Departmental performance, progress, and review meetings held, minutes of meetings kept, and action points of meetings followed through V. Periodic departmental performance reports produced and submitted to the Permanent Secretary SMoH, and feedback acted upon.
2.	Developing service delivery requirements for secondary health care (SHC) facilities.	I. Needs Assessment Document II. Equipment gap analysis report III. Reports of Integrated Supportive Supervision (ISS) and Quality Assurance (QA). IV. Minutes of meetings kept, and action points followed through
3.	Coordinating provision of quality care services at all the State SHC facilities.	I. Quarterly quality assessments of Secondary health Care facilities conducted, documented, and actions followed up. II. Relevant reports maintained
4.	Coordinating registration and regulation of private health establishment as contained in Kaduna state private health establishments, Registration and Regulation Edit of 1990 Committee.	I. Private Health Establishments (PHEs) registered, relevant reports produced Registered PHEs monitored, monitoring reports produced, maintained, and actions followed up. II. Reports on registered PHEs that renewed their license prepared and maintained. III. Minutes of meetings kept, and action points followed through
5.	Overseeing the activities of Hospital Management Board and Committees.	I. Health Management Board/committee meetings conducted, minutes of meetings kept, reports documented, and action points followed up
6.	Coordinating emergency ambulance services.	I. Reports on lives saved from emergency conditions prepared and channelled appropriately II. Lesson-learning and progress meetings/forums held, and action points followed through
7.	Domesticating standard treatment guidelines in collaboration with Department of pharmaceutical services.	I. Reports on hospitals adapting standard treatment guidelines produced II. Record of service delivery points (i.e., hospitals) having treatment guidelines maintained and periodically updated. III. Relevant reports produced and channelled appropriately IV. Minutes of meetings kept, and action points followed through

Qualifications, Working Experience and Competences

Minimum Academic/ Professional Qualifications Required:	MB, BS degree with master's degree in health sciences (e.g., MPH) or management
Minimum Working Experience Required:	20 years post-qualification cognate experience.
Essential Technical Competences and Behavioural Attributes	I. Solid experience and skill in provision of hospital services II. Extensive technical knowledge and experience of the health sector. III. Strategic decision-making skills and strategic expertise in policy formulation, interpretations, and adoption. IV. Leadership, people management and communication skills V. Social and emotional intelligence, including core ethical values and standards including integrity and good professional judgement. VI. Team building skills

Signature of Job Holder: **Date:**

2.3   Director of Pharmaceutical Services

Job Title/Position:	Director of Pharmaceutical Services	**Department:**	Pharmaceutical Services
Cadre:	Pharmacist	**Grade Level:**	16
Name of Job Holder:			
Responsible to:	Permanent Secretary	**Staff Managed:**	DDPS (HR), DDPS (SCM), DDPS (A&C), DDPS (Private Health), LMCU Coordinator
Key Relationships on the job	Honourable Commissioner (SMoH), all staff of the Department, all directors in SMoH departments, Medical Directors of Hospitals, Head of agencies and parastatals in the health sector, Office of the Head of Service, Civil Service Commission, Heads/Commissioners of relevant MDAs, Kaduna State House of Assembly, Local Governments, Public Health Facilities, Attorney General of the State, Chairman Kaduna State Establishment, Dean of Faculty of Pharmaceutical Services, ABU Zaria, Dean of Faculty of Pharmaceutical Services, Kaduna State University, Dean Department of Procurement and Supply Chain Management, Provost Shehu Idris School of Health and Technology, Makarfi, Federal Ministry of Health, Pharmacists Council of Nigeria, Health Management Boards of States, Ward Development Committees and Facility Health Committee, Private Health Facilities including private health training institutions, Development Partners, Non-		

	Governmental Organisations, Civil Society Organisations, Professional bodies and Associations (Pharmacy Society of Nigeria, Guild of Medical Doctors etc.), Patent and Proprietary Medicines Vendors, Traditional Complementary and Alternative Medicines Practitioners, relevant Trade Unions, Contractors/Suppliers, and the public.
Job Purpose:	To assist the Ministry, achieve its mandates and goals through effectively coordinating the Department and provide safe, high quality pharmaceutical care in a conducive and professional atmosphere, while coordinating the registration of pharmacy professionals and monitoring rational drug use and pharmacovigilance reporting in private and public health facilities.

Key Functions and Responsibilities and Performance Indicators

S/N	Key Functions & Responsibilities	Performance Indicators
1.	Coordinating and leading the Department to effectively support the Ministry to achieve desired results.	I. Annual work/operational plans developed for the Department. II. Job descriptions prepared for key staff members of the department III. Performance targets set for key staff members of the department and staff members offered technical support and guidance to meet set targets IV. Departmental performance, progress, and review meetings held, minutes of meetings kept and action points of meetings followed-through V. Periodic departmental performance reports produced and submitted to the SMoH's Permanent Secretary, and feedback acted upon.
2.	Coordinating the implementation of pharmaceutical care in all public health facilities in the State.	I. % of public health facilities that adhered to pharmaceutical care in the State II. % of health facilities with functional Therapeutic Committee. III. Facility Assessment reports produced
3.	Coordinating the State Procurement and Supply Management Technical Working Group (PSM-TWG).	I. Number of monthly PSM-TWG meetings conducted/held in a year II. Minutes of meetings kept, and action points followed through. III. Routine LMCU assessment/analysis reports developed, and action points followed up on.
4.	Overseeing the activities of the State Logistic Management Coordinating Unit (LMCU).	I. % of logistics of public health programs integrated in the State. II. % of health facilities where integrated Monitoring Supervisory Visits (IMSVs) conducted in a quarter. III. % of Last Mild Deliveries to facilities supervised in a quarter. IV. % of reduction in expiries achieved in a quarter. V. % of stock wasted due to expiries or damages.

		VI.	% of health facilities having lifesaving/tracer commodities in stock in a given quarter.
		VII.	% of Reporting Rate in a given quarter.
		VIII.	% of health facilities that experienced stock out in a given month.
		IX.	Minutes of routine meetings kept, and action points followed through.
		X.	Routine LMCU assessment/analysis reports developed, and action points followed up.
5.	Reviewing and publishing the State Essential Medicines List	I.	Reviewed list of essential medicines every two years or whenever the National Essential Medicines List is being reviewed.
		II.	Updated list of essential medicines.
6.	Coordinating the registration and regulation of pharmacists, pharmacy technicians, pharmaceutical premises, and patent and proprietary medicine shops in conjunction with the Pharmacists Council of Nigeria (PCN).	I.	% of pharmacists that registered in conjunction with PCN in the State within the Year.
		II.	% of pharmacy technicians that registered in conjunction with PCN in the State within the Year.
		III.	% of pharmaceutical premises that registered in conjunction with PCN in the State within the Year.
		IV.	% of patent and proprietary medicine shops that registered in conjunction with PCN in the State within the Year.
		V.	No. of inspection of pharmaceutical premises and patent proprietary medicine shops conducted in a year.
		VI.	Minutes of routine meetings kept, and action points followed through.
7.	Coordinating adaptation and adoption for implementation, PCN's Policies and Guidelines in the State.	I.	Records and reports on Policy and Guidelines of PCN adapted and deployed in the State.
		II.	Minutes of meetings and associated documents (attendance, follow up action etc.) from policy engagements
8.	Coordinating the activities and practice of Traditional Complementary and Alternative Medicines Practitioners other related Drug control committees.	I.	Established State Edict on Traditional Complementary and Alternative Medicines Practitioners other related Drug control committees.
		II.	No. of quarterly meetings held/conducted with Traditional Complementary and Alternative Medicines Practitioners other related Drug control committees in a year.
		III.	No. of quarterly Task Force outings and or Supervisions conducted on Traditional Complementary and Alternative Medicines Practitioners in a year.
		IV.	Minutes of relevant meetings kept, and action points followed through.
		V.	Quarterly task force reports

Qualifications, Working Experience and Competences

Minimum Academic/ Professional Qualifications Required:	Bachelor of Pharmacy (B. Pharm)
Minimum Working Experience Required:	20 years post-qualification cognate experience.
Essential Technical Competences and Behavioural Attributes	I. Sound knowledge, experience, and skills in pharmaceutical practice. II. Extensive knowledge of the health sector (practice, policies, inter-disciplinary dependency etc.) III. Strategic decision-making skills and strategic expertise in policy formulation, interpretations, and adoption. IV. Leadership, people management and communication skills V. Social and emotional intelligence, including core ethical values and standards including integrity and good professional judgement. VI. Team building skills

Signature of Job Holder: **Date:**

2.4   Director of Public Health

Job Title/Position:	Director of Public Health	Department:	Public Health
Cadre:	Medical Officer	Grade Level:	16
Name of Job Holder:			
Responsible to:	Permanent Secretary	Staff Managed:	Deputy Director Disease Control/State Epidemiologist, Deputy Director Disease Prevention/ Reproductive Maternal New-born, Child, Adolescent and Elderly Health (RMNCAEH) Manager, Assistant Director Public Health, Program Manager State Tuberculosis, Leprosy Control Program, Program Manager State Malaria Elimination Program, Program Manager State Neglected Disease Control Program, Program Manager State Eye Care Program
	Honourable Commissioner (SMoH), all staff of the Department, all directors in SMoH departments, Executive Secretary, Kaduna State Primary Healthcare		

	Board (KSPHCB), Director of Family & Community Health Services (PHCB), Executive Secretary Kaduna State Contributory Health Management Agency (KADCHMA), Executive Secretary Kaduna State Health Supplies Management Agency (KADHSMA), Executive Secretary Kaduna State Bureau for Substance Abuse (KADBUSA), Executive Secretary Kaduna State Aids Control Agency (KADSACA), Director of Environment (Ministry of Environment), Director of Environment Kaduna Environment Protection Agency (KEPA), Director of Veterinary Services (Ministry of Agriculture), Director of Partner Coordination (Planning and Budget Commission), Director of Women Affairs (Ministry of Human Affairs & Social Development), Director of Planning (Ministry of Education), Office of the Head of Service, Civil Service Commission, Multilateral Aid Agencies (UN agencies such as UNICEF, UNFPA, UNDP; WHO), Bilateral Aid Agencies (e.g., FCDO), Implementing Partners (FHI 360 – formerly Family Health International, Clinton Health Access Initiative, Centre for Integrated Health Programs, KNCV Tuberculosis Foundation, Sight Savers etc.), Civil Society Organisations, Community-Based Organisations, Faith Based organisations, and the public.
Key Relationships on the job	
Job Purpose:	To assist the Ministry, achieve its mandates and goals through effectively safeguarding the residents of Kaduna State from all public health issues.

Key Functions and Responsibilities and Performance Indicators

S/N	Key Functions & Responsibilities	Performance Indicators
1.	Coordinating and leading the Department to effectively support the Ministry to achieve desired results.	I. Annual work/operational plans developed for the Department. II. Job descriptions prepared for key staff members of the department III. Performance targets set for key staff members of the department and staff members offered technical support and guidance to meet set targets IV. Departmental performance, progress, and review meetings held, minutes of meetings kept, and action points of meetings followed through V. Periodic departmental performance reports produced and submitted to the SMoH's Permanent Secretary, and feedback acted upon.
2.	Coordinating the development of public health legislation and policies.	I. Public health policies developed and documented II. Minutes of meetings kept, and action points followed through.
3.	Coordinating all health education and communication activities in the State.	I. Advocacy Communication Social Mobilisation (ACSM) meetings held annually II. Minutes of meetings kept, and action points followed through.
4.	Providing technical guidance and direction for all public health programs	I. Protocols and guidelines for use at all levels produced; copies kept

	implemented in the State across all levels through development and dissemination of guidelines and protocols.	II. Minutes of meetings kept, and action points followed through.
5.	Facilitating effective collaboration between the department and other relevant MDAs in all matters relating to public health.	I. Inter-ministerial committee meetings/Technical Working Groups, collaborations held, e.g., Gender based violence (GBV) TWG meetings annually, reports documented, actions taken and followed up. II. Minutes of meetings kept, and action points followed through.
6.	Coordinating response to public health emergencies.	I. Emergencies successfully responded to and documented; functionality of Emergency Operation Centre (EOC) II. Relevant reports produced III. Minutes of meetings kept, and action points followed through.
7.	Coordinating capacity building of health care providers on public health programs and initiatives	I. Health workers trained; annual percentage of training performance compared to planned training documented II. Relevant training documents/presentations produced and maintained III. Relevant reports produced IV. Minutes of meetings kept, and action points followed through.
8.	Coordinating the conduct of public health surveys and operations research for implementation of public health programs.	I. Public health surveys conducted per annum and reports produced II. Relevant papers/presentations made /published by the department III. Minutes of meetings kept, and action points followed through.

Qualifications, Working Experience and Competences

Minimum Academic/ Professional Qualifications Required:	MB, BS degree with master's degree in public health.
Minimum Working Experience Required:	20 years post-qualification cognate experience.
Essential Technical Competences and Behavioural Attributes	I. Sound technical knowledge and experience on all public health issues II. Extensive technical knowledge and experience of the health sector. III. Strategic decision-making skills and strategic expertise in policy formulation, interpretations, and adoption, incorporating ability to apply principles of leadership, management, and

		mediation/negotiation to address organisational and community challenges.
	IV.	Leadership, people management and communication skills
	V.	Social and emotional intelligence, including core ethical values and standards including integrity and good professional judgement.
	VI.	Team building skills

Signature of Job Holder: **Date:**

2.5   Director of Nursing Services

Job Title/Position:	Director of Nursing Services	Department:	Nursing Services
Cadre:	Nursing Officer	Grade Level:	16
Name of Job Holder:			
Responsible to:	Permanent Secretary	Staff Managed:	Deputy Director Nursing and Midwifery Services, Deputy Director Nursing Education, Assistant Director Nursing and Midwifery Services, Assistant Director Nursing Education, Chief Nursing Officer - Nursing Education
Key Relationships on the job	Honourable Commissioner (SMoH), all staff of the Department, all directors in SMoH departments, Medical Directors of Hospitals, Head of agencies and parastatals in the health sector, Office of the Head of Service, Civil Service Commission, Heads/Commissioners of relevant MDAs, Kaduna State House of Assembly, Local Governments, Private Health Facilities, Federal Ministry of Health, Development Partners, Non-Governmental Organisations, Civil Society Organisations, Nursing and Midwifery Council of Nigeria, Federal Nursing training institutions, Airforce Nursing training institution, Faith based Nursing training institution Professional bodies, and the public.		
Job Purpose:	To assist the Ministry achieve its mandates and goals through effectively coordinating the Department and provide compassionate and quality health care services to every patient/client and family.		

Key Functions and Responsibilities and Performance Indicators

S/N	Key Functions & Responsibilities	Performance Indicators	
1.	Coordinating and leading the Department to effectively support the	I.	Annual work/operational plans developed for the Department.

	Ministry to achieve desired results.	II. Job descriptions prepared for key staff members of the department III. Performance targets set for key staff members of the department and staff members offered technical support and guidance to meet set targets IV. Departmental performance, progress, and review meetings held, minutes of meetings kept, and action points of meetings followed through V. Posting of Nurses and Health attendants done periodically, and performance reports produced VI. Practicing license verified annually, report documented, and actions followed up. VII. Periodic departmental performance reports produced and submitted to the SMoH's Permanent Secretary, and feedback acted upon.
2.	Coordinating continuing education program for nurses.	I. Sessions of Mandatory Continuing Professional Development Programme (MCPDP) conducted annually, reports documented, and action followed up; Presentation materials maintained. II. Nurses/ midwives identified and trained; relevant reports prepared and channelled appropriately III. Minutes of meetings kept, and action points followed through.
3.	Liaising with Nursing and Midwifery council of Nigeria on nursing education, practice, and regulation.	I. Final qualifying examination coordinated and supervised; relevant reports produced; actions followed through II. Illegal training institutions identified, and action taken, and relevant reports produced. III. Records of nurses with valid practicing license maintained and periodically updated IV. Minutes of meetings kept, and action points followed through.
4.	Coordinating the monitoring and supervision of nurses in Secondary Health Facilities.	I. Quarterly supervision and monitoring conducted in Secondary Health facilities, reports documented, and II. action points followed through III. Minutes of meetings kept, and action points followed through.
5.	Advising the State Government, through the PS of SMoH, on formulation, execution, and review of nursing matters.	I. Proposals/memos on nursing matters produced and channelled appropriately II. Minutes of meetings kept, and action points followed through.
6.	Facilitating quality assurance in the Public Health Facilities.	I. Quality assurance conducted annually, reports documented, and action followed up. II. Minutes of meetings kept, and action points followed through.

Qualifications, Working Experience and Competences

Minimum Academic/ Professional Qualifications Required:	Bachelor of Nursing Science
Minimum Working Experience Required:	20 years post-qualification cognate experience.
Essential Technical Competences and Behavioural Attributes	I. Extensive understanding of skills required to provide patient-centered care. II. Sound knowledge and skills in nursing and midwifery activities, including extensive technical knowledge and experience of the health sector. III. Strategic decision-making skills, strategic expertise in policy formulation, interpretations, and adoption, and strategic expertise to improve nursing and midwifery quality. IV. Leadership, people management and communication skills V. Social and emotional intelligence, including core ethical values and standards including integrity and good professional judgement. VI. Team building skills

Signature of Job Holder: **Date:**

2.6   Director of Health Planning, Research and Statistics

Job Title/Position:	Director of Health Planning Research & Statistics	**Department:**	Health Planning Research & Statistics
Cadre:	Planning Officer	**Grade Level:**	16
Name of Job Holder:			
Responsible to:	Permanent Secretary	**Staff Managed:**	Deputy Director Health Planning Research and Statistics, Assistant Director Health Planning Research and Statistics, Assistant Director Health Management Information System, Strategic Planning Officer, Monitoring and Evaluation Officer, Results Delivery Officer, Information and Communications Technology Officer, Health Research Coordinator, Health Financing/Budget Officer, Council on Health Focal Person, Partners

				Coordinator, Human Resource for Health Officer.
Key Relationships on the job	Honourable Commissioner (SMoH), all staff of the Department, all directors in SMoH departments, Deputy Directors in SMoH Departments, Programme Officers, Head of agencies and parastatals in the health sector, Public Health Facilities, Office of the Head of Service, Civil Service Commission, Heads/Commissioners of relevant MDAs, Kaduna State House of Assembly, Local Government officials, Federal Ministry of Health, Health Management Boards, Ward Development Committees and Facility Health Committee of Kaduna State Health Facilities, Private Health Facilities, Development Partners, Non-Governmental Organisations, Civil Society Organisations, relevant Professional Bodies, Trade Unions, Contractors, and the public.			
Job Purpose:	To assist the Ministry achieve its mandates and goals through effectively coordinating the Health Planning Research & Statistics department, planning and budgeting, health policy formulation and adoption, and preparation for conducting State Council on Health, among others.			

Key Functions and Responsibilities and Performance Indicators

S/N	Key Functions & Responsibilities	Performance Indicators
1.	Coordinating and leading the Department to effectively support the Ministry to achieve desired results.	I. Annual work/operational plans developed for the Department. II. Job descriptions prepared for key staff members of the department III. Performance targets set for key staff members of the department and staff members offered technical support and guidance to meet set targets IV. Departmental performance, progress, and review meetings held, minutes of meetings kept, and action points of meetings followed through V. Periodic departmental performance reports produced and submitted to the SMoH's Permanent Secretary, and feedback acted upon.
2.	Coordinating the development of annual, medium, and long-term plans	I. Health Sector Annual Operational Plan (AOP) developed. II. State strategic health development plan developed III. Sector Implementation plan developed IV. Minutes of meetings kept, and action points followed through
3.	Coordinating the development or domestication of health policies for SMoH.	I. Health policies domesticated II. Relevant memos and reports produced III. Minutes of meetings kept, and action points followed through

4.	Coordinating effective data/information management for SMoH.	I.	District Health Information System platform maintained and updated monthly with health facilities reports and routine health data
		II.	Quarterly Data Quality Assurance (DQA) conducted, and relevant reports produced
		III.	Health Management Information System (HMIS) and LGA Monitoring & Evaluation Officers trained on data collection and reporting; training materials produced and maintained, relevant reports prepared
		IV.	Relevant reports and memos produced and channelled appropriately
		V.	Minutes of meetings kept, and action points followed through
5.	Coordinating effective monitoring of the implementation of planned activities in the health sector.	I.	M&E workplan developed
		II.	M&E workplan review meetings conducted
		III.	Bi-annual AOP reviews conducted, and relevant reports produced
		IV.	Monthly Technical Working Groups meetings held
		V.	M&E framework reviewed
		VI.	Monitoring reports kept, and action points followed through.
		VII.	Minutes of meetings kept, and action points followed through
6.	Coordinating periodic Review of Health sector policies and plans (State Strategic Health Development Plan, Annual Operational Plan, Primary Health Care Memorandum of understanding, Basic Health Care Provision Fund, State Development Plan).	I.	State strategic health development plan reviewed and documented.
		II.	Health policies reviewed and documented
		III.	Relevant reports and memos produced and channelled appropriately
		IV.	Minutes of meetings kept, and action points followed through
7.	Coordinating health research activities in the State.	I.	Health Research Ethical Committee (HREC) and Operational Research Advisory Committee (ORAC) quarterly meetings conducted every year; relevant reports produced
		II.	Health research protocols and health policies document inventory developed.
		III.	Health research protocols produced and documented
		IV.	Health policies document inventory updates conducted, and relevant reports produced.

8.	Coordinating budget preparation for the Ministry.	I.	Health sector annual budget prepared in August every year
		II.	Quarterly budget performance reported and disseminated
		III.	Sub-national/state health account developed
		IV.	Minutes of meetings kept, and action points followed through

Qualifications, Working Experience and Competences

Minimum Academic/ Professional Qualifications Required:	First degree or equivalent
Minimum Working Experience Required:	20 years post-qualification cognate experience.
Essential Technical Competences and Behavioural Attributes	I. Sound knowledge, experience, and technical skills in health planning, research, and statistics. II. Extensive knowledge of the health sector. III. Strategic decision-making skills and strategic expertise in policy formulation, interpretations, and adoption. IV. Leadership, people management and communication skills V. Social and emotional intelligence, including core ethical values and standards including integrity and good professional judgement. VI. Team building skills

Signature of Job Holder: **Date:**

Appendix 3: A Target Setting Format for Staff Performance Management

Name of Department: **Job Title/Position:**

Name of Employee: **Performance Review Period/Year:**

S/N	Function	Key Activity/Tasks	Expected Outputs/ Performance Indicators	Deadline/ Review Period/Date	Remark regarding attainment of set target (To be completed upon end of performance management cycle, i.e., at the review date)
1.					
2.					
3.					
4.					
5.					
6.					
7.					

Signature of Staff Member: **Date:**

Appendix 4: Service Performance Targets Monitoring Form

Note: This form is for the internal use of SMoH and its departments.

The prevailing, respective service performance targets should be reviewed/updated and included in the form before it is used for the monitoring exercise.

Services may be monitored and assessed through such methods as mini client satisfaction survey, peer review, feedback from a suggestion-box scheme, and stakeholders' forum discussions and feedback.

S/N	Service Areas	Service Performance Targets	Department (s) Responsible	Rating of attainments on service performance targets & standards based on e.g., quarterly milestones or progress markers: 5 – Good; operating to standard 3 – Average; needs to improve 1 – Poor; below average and requires service overhaul	Remarks/Observations/ Suggestions
1.	Providing quality clinical/diagnostic services in the State.		Medical Services		
2.	Registering, regulating, and licensing private health		Medical Services		

	establishments in the State.			
3.	Reducing infant and maternal mortality rate in the State.		Nursing Services	
4.	Implementing Nursing and Midwifery Council of Nigeria regulations on training and other policies in the State		Nursing Services	
5.	Eliminating Polio transmission in the State.		Public Health	
6.	Coordinating disease control coverage in the State.		Public Health	
7.	Registering pharmacies and patent medicine shops.		Pharmaceutical Services	
8.	Establishing pharmacovigilance units.		Pharmaceutical Services	
9.	Facilitating equitable access to SMoH's services.	Ongoing; reviewed for necessary optimisation twice-yearly	All departments coordinated by Department of Admin & Finance	

10.	Making SMoH service charter accessible.	Ongoing	Department of Admin & Finance	
11.	Translating SMOH service charter to other local languages.	Ongoing	Department of Admin & Finance	
12.	Maintaining a system of dealing with complaints.	Ongoing; reviewed for necessary optimisation twice-yearly	All departments coordinated by Department of Admin & Finance	
13.	Recording, analysing, and reporting complaints/feedback on service standards.	Quarterly	All departments coordinated by Department of Admin & Finance in collaboration with Department of Health Planning, Research & Statistics	
14.	Acknowledging complaints/feedback.		All departments coordinated by Department of Admin & Finance	
15.	Responding to complaints.		All departments coordinated by	

			Department of Admin & Finance		
16.	Undertaking periodic consultations with stakeholders for service improvement.	Twice yearly	All departments coordinated by Department of Admin & Finance		
17.	Publishing performance on service targets.	Quarterly	Department of Health Planning, Research & Statistics		

Analysis and Reporting

The completed form should be analysed, and a brief report produced, by the Department of Health Planning, Research & Statistics in collaboration with the Department of Admin & Finance.

Appendix 5: Service Standards Performance Appraisal Questionnaire for Clients/Stakeholders of Kaduna State Ministry of Health

Note: This form should be administered at a healthcare-services stakeholders' roundtable or forum. Such a roundtable or forum should be organised periodically, say, twice yearly, and different service areas may be selected for rating at different forums.

Introduction:
The Kaduna State Ministry of Health is committed to providing quality healthcare services to its clients. Your input will be useful to help identify some of the key areas in which to improve our services.

Section 1:   Specific Service Rating
Please, help complete the form below by addressing each area of service: rating how the Kaduna State Ministry of Health currently performs and indicating your remarks/suggestions for action as appropriate.

For any service with which you have no direct contact with the Kaduna State Ministry of Health, please indicate 'Not Applicable or N/A' under the 'Rating' column.

S/N	Service Areas	Rating, 1-3; where 1 is 'Poor' and 3 is 'Good'	Remarks / Actions required
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Section 2:   General Assessment

1. Please rate your assessment of the overall quality of the services provided by the Kaduna State Ministry of Health. Choose one of the following options:
   a) Good: operating to standard
   b) Average: needs to improve
   c) Poor: below average and requires service overhaul

2. What do you like the most about the Kaduna Ministry of Health and aspects of its services?

3. What do you like the least about the Kaduna State Ministry of Health and aspects of its services?

4. What do you think the Kaduna State Ministry of Health should improve on?

5. Have you, or your organisation, ever had a cause to complain about the Kaduna State Ministry of Health? Yes/No

If yes, were your complaints dealt with to your satisfaction?

Thank you.

Submission of Completed Form:

Please submit your completed form at the service standards stakeholders' roundtable to….

or

send it to the Director of Admin and Finance,
Kaduna State Ministry of Health,
Kaduna

Note on Analysis and Reporting

The completed forms should be analysed, and a report produced, by the Department of Health Planning, Research & Statistics in collaboration with the Department of Admin & Finance.

Kaduna State Government