

**IN THE SECOND SESSION OF THE SIXTH  
PARLIAMENT OF THE FOURTH REPUBLIC  
OF GHANA**

**REPORT OF THE COMMITTEE ON HEALTH**

**ON THE**

**2015 ANNUAL BUDGET ESTIMATES OF  
THE MINISTRY OF HEALTH**



## 1. **INTRODUCTION**

In accordance with article 179 of the 1992 Constitution of Ghana, the Minister of Finance Mr. Seth Tekper, on Wednesday, 19<sup>th</sup> November, 2014 presented to the House, the Budget Statement and Economic Policy of the Government of Ghana for the 2015 financial year.

Pursuant to Standing Orders 140(4) and 159 of the House, Mr. Speaker referred the Annual Estimates of the Ministry of Health for the year 2015 to the Committee on Health for consideration and report.

In considering the Annual Estimates, the Committee met with the Hon. Minister of Health, Hon. Dr. Kwaku Agyeman-Mensah, and the technical team from the Ministry and its agencies. The Committee reports as follows:

## 2. **REFERENCE DOCUMENTS**

The Committee in its deliberations referred to the following:-

1. The 1992 Constitution of the Republic of Ghana.
2. The Standing Orders of the House.
3. The 2015 Budget Statement and Economic Policy
4. The 2015 Annual Estimates of the Ministry of Health
5. The 2014 Budget Statement and Economic Policy
6. The 2014 Annual Estimates of the Ministry of Health

## 3. **MISSION STATEMENT OF THE MINISTRY**

The Mission Statement of the Ministry is to continue to improve the health status of all people living in Ghana through the development and promotion of proactive policies for good health and longevity as well as the provision of universal access to basic health services.

The Mission Statement is in line with the achievements of the Health related MDGs by 2015, with concentration on improving health outcomes targeting resources towards the health of women and children, prevention and control of communicable and non-communicable diseases



## 5. PERFORMANCE FOR 2014

For the financial year 2014, the Ministry was allocated GH¢ **3,320.84 million as revised**. Budget outturn as at 31<sup>st</sup> October, 2014 for the Ministry to undertake its program of activities amounted to **GH¢2,550.69 million**. The breakdown is as follows:

Source of Fund	Approved Budget	Revised Budget	Releases	Execution (%)
<b>GoG</b>	<b>1,208.82</b>	<b>1,175.95</b>	<b>1,157.83</b>	<b>98.46</b>
Compensation of employees	1,122.79	1,122.79	1,130.94	100.73
Goods & Services	70.59	42.35	23.45	55.37
Assets	15.44	10.81	3.44	31.82
<b>IGF</b>	<b>1,363.63</b>	<b>1,363.63</b>	<b>837.82</b>	<b>61.44</b>
Goods & Services	1,204.38	1,204.38	837.82	69.56
Assets	159.25	159.25	N/A	0
<b>Donor</b>	<b>781.26</b>	<b>781.26</b>	<b>555.04</b>	<b>71.04</b>
Goods & Services	156.25	156.25	73.45	47.01
Assets	625.01	625.01	481.59	77.05
<b>Total</b>	<b>3,353.71</b>	<b>3,320.84</b>	<b>2,550.69</b>	<b>76.81</b>



## 6.0 BUDGETARY ALLOCATIONS FOR 2015

A sum of **GH¢ 3,068.24 million** has been allocated to the Ministry and its agencies for the implementation of its programmes and policies in the 2015 fiscal year.

The breakdown for this allocation is as follows:

	GOG	IGF	ABFA	DONOR		TOTAL	%
				GRANTS	LOANS		
Compensation of Employees	1,271.84	261.02	-	-	-	1,532.86	49.96
Goods & Services	35.29	659.75	-	142.56	-	837.6	27.3
Assets	1	83.01	43.55	-	570.22	697.78	22.74
Total Discretionary Funding	1,308.13	1003.78	43.55	142.56	570.22	3,068.24	100

## B. DEPARTMENTAL ALLOCATIONS

The breakdown of the Estimates to the various departments under the Ministry is as follows:

EXPENDITURE BY BUDGET PROGRAM		2015	SHARE%
<b>Management and Administration</b>		619.48	20.19
<b>Health Service Delivery</b>		2,257.73	73.59
Primary and Secondary Services	1,659.82		
Tertiary and Specialised Services	597.91		
<b>Human Resource Development and Management</b>		87.49	2.85
<b>Health Sector Regulation</b>		103.54	3.37
<b>Total Expenditure</b>		<b>3,068.24</b>	<b>100.00</b>

### **C. Agencies under the Ministry**

The Agencies under the Ministry to implement the program based budget for 2015 are as follows:-

1. Management and Administration
  - MoH Health Headquarters
  - Subvented Organizations
2. Health Service Delivery
  - Ghana Health Service
  - Christian Health Association of Ghana
3. Tertiary and Specialized Service
  - MoH Health Headquarters
  - Psychiatric Hospitals
  - Teaching Hospitals
  - Subvented Organization
4. Human Resource Development and Management
  - Training Institutions
  - Subvented Organization
5. Health Sector Regulation
  - Regulatory Agencies

### **7.0 OUTLOOK OF THE MINISTRY FOR 2015**

For the year 2015, the Ministry proposed the following activities under the two priority program areas namely programs and investment areas.

Under the **Program area**, a number of programs have been lined up which include:-

- Review and roll out the sector research agenda
- Develop and implement health sector Nutrition Strategic Plan
- Intensify the implementation of the National Epidemic Preparedness and Response Plans: Ebola, Cholera, and other emerging diseases
- Scale up the implementation of NCD Strategy and Plan
- Implement the Health Promotion Strategy

- Strengthen regulatory environment to enforce compliance and maintenance of agreed standards
- Finalize the health sector response to national decentralization agenda
- Continue the scale up of the Community-based Health Planning and Services (CHPS)
- Expand the coverage of the National Ambulance Service
- Implement the staffing norms for optimal human resource deployment
- Accelerate the implementation of the Maternal, Newborn and Adolescent health Interventions
- Implement the Health Financing Strategy and Implementation Plan
- Expand access to safe blood and blood products
- Strengthen and improve quality of institutional base and outreach services
- Improve coverage of EPI and ensure its financial sustainability
- Strengthen and scale up interventions for HIV/AIDS, Malaria, Tuberculosis including drug resistance

Under **Investments/Projects area**, the following projects have been earmarked:-

- Upgrade of the Ridge Hospital into a Regional Hospital for the Greater Accra Region
- Complete the new Teaching Hospital for the University of Ghana, Legon
- Deliver Twelve (12) new District Hospitals, including those at Dodowa, Sekondi, Fomena and Garu-Tempane
- Construct at least four hundred (400) new CHPS compounds across the country
- Construction of Office Complex and Training Centre for National Ambulance and St. John Ambulance
- Rehabilitation and Construction of Offices for the Ghana National Drugs Programme and Procurement Unit
- Construction of New Maternity Facility at Tema General Hospital
- Health Service Project III - Component 1 Completion of Bekwai District Hospital



- Undertake the expansion of the Health Training facilities, including Nursing, Midwifery and Physician Assistant training institutions
- Fully implement the National Medical Equipment Replacement Programme at the following Hospital: Ridge Hospital, Tema General Hospital, 37 Military Hospital, Princess Marie-Louise Children's Hospital, Maamobi General Hospital, Komfo Anokye Teaching Hospital, Tamale Teaching Hospital
- Complete Phase II of the upgrade of Tamale Teaching Hospital
- Complete work on the Upper West Regional Hospital at Wa

## **8.0 OBSERVATIONS**

### **8.1 Completion of legislative instruments**

The Committee noted that by the following Legislative Instruments were completed and submitted to the Attorney-General's Department:

- Health Institutions and Facilities Act, Act 829, 2011
- Health Professions and Regulatory Act, Act 857, 2013, Part 1 - 4
- The draft Bill for decentralizing the health service is also completed and currently being disseminated amongst stakeholders
- The tobacco control part of the Public Health Act, Act 851, 2012

### **8.2 Preparedness on Ebola Outbreak**

The Committee was informed that the Ministry had successfully developed a comprehensive preparedness and response plan for the Ebola Virus Disease. There are also Inter-Ministerial and Technical Committees in place to review strategies on preventing the entry of the deadly virus into the country and a possible outbreak.

All hospitals have designated isolation units. The Tema treatment center was completed and equipped whilst Kumasi and Tamale centers are at various stages of completion

Government procured and distributed 10,000 Personal Protective Equipment (PPE) to all 4 teaching hospitals, 10 regional hospitals who will in turn distribute to the lower level clinics across the country and also

maintained a strategic stock at the national level. Other quasi government hospitals including Christian Health Association of Ghana, Port Health, 37 Military, Police and SSNIT Hospitals also benefited from the PPEs.

A Walk through, non-contact infra-red thermometer was installed at Kotoka International Airport as part of Ghana's preparedness and response for any possible Ebola outbreak. Staff training in case management and other preventive activities are also ongoing.

10 regional hospitals, 4 Teaching hospitals and 65 District hospitals received assorted medical equipment under the national medical equipment replacement project

### **8.3 Other health performance for 2014**

The Committee further noted that OPD per capita increased marginally above the 2013 level of 0.51 percent to 0.58 percent; Penta 3 vaccination coverage increased slightly from 41.2 percent to 41.6 percent; Skilled delivery increased from 28.7 percent to 30 percent; Family planning coverage increased from 13.9 percent in 2013 to 16.6 percent as at September 2014. Four new ambulance stations were established at Kasoa, Atomic Junction in Accra, Tarkwa and Axim bringing the total to 126. A total of 14,322 cases were also recorded comprising of 8,232 inter-hospital transfers and 6,090 emergencies

The Ministry also conducted an aggressive biometric registration exercise under the NHIS which brought active membership to 10.14 million. The NHIA also began a process to scale up capitation to Volta, Upper West and Upper East Regions

### **8.4 Funds for prevention and controlling the outbreak of Ebola**

The technical team informed the Committee that the funds allocated for the tackling Ebola and its prevention from donor partners has not been released to the Ministry of Health. Rather the funds are earmarked to be released to the Assemblies.

## **8.5 ABFA Allocations to the Ministry**

The Committee enquired about the 2013 ABFA allocation of GH¢29.9 million and whether it has been released to the Ministry.

The technical team informed the Committee that as at date an amount of GH¢6.5 million had been released to the Ministry to take care of outstanding payments in relation to works undertaken at the Komfo Anokye Hospital.

The technical team from the Ministry of Finance explained to the Committee that the funding under the ABFA was tied to projects and it was only when the project had been executed that the funds were released. So far GH¢6.5 million, meant for construction works at Komfo Anokye had been released. The challenge was acquiring commencement certificate to undertake the other works.

The Committee wanted an assurance that in view of the current decline in the world market price for oil, the 2015 ABFA allocation would not be affected.

The technical team from the Ministry of Finance assured the Committee that the Stabilization Fund, as part of its role, would be used to augment any shortfall experienced as a result of the declining oil prices.

## **8.6 Functional CHPS ZONES**

The Committee enquired from the Ministry whether, as part of its commitment, the minimum of the 400 CHPS compounds had been constructed in 2014. These constructions are part of the Government Agenda to extend primary health care to the rural areas.

It was explained to the Committee that since 2013, the Ministry has been implementing a 'functional' CHPS zone policy. The policy aims at providing the needed services to the communities. The CHPS compounds would be constructed at a later date when funds are available.

For 2014, a total of 724 CHPS zones were made functional. The Ministry received assistance from the community to enable them to implement the policy.



For the year 2015, the Ministry plans to implement another four hundred functional CHPS zones.

### **8.7 Financial clearance to employ new personnel**

During the consideration of the budget, the Committee observed that the Ministry and its agencies had difficulty in employing new staff to augment their numbers. Critical among this challenge is the recruitment of nurses. This challenge had led to unpaid salaries and the need to pay salaries of these key personnel with their IGF on some occasions.

The technical team explained that the challenge had been the non-granting of financial clearance by Ministry of Finance to MoH to employ.

The Committee indicated to the Minister that the Ministry of Health is part of the critical Ministries of the Government and as such are exempted from the ban on recruitment. This exemption is to ensure that provision of health delivery is not interrupted. The MOH must therefore pursue this matter more aggressively.

### **8.8 Budget allocation for the National Ambulance Service**

The Committee observed that last year the National Ambulance Service was allocated GH¢1,721,030. This was woefully inadequate leaving the service with an outstanding expenditure of GH¢1,125,000.

The Committee was informed that the Service requested GH¢21, 976,826 but only GH¢97,000 was approved.

The Committee holds the view that this amount is inadequate to ensure that the Service operate as expected.

The Committee is of the view that the cost for the services of the NAS should be 'CLAIMABLE' under the NHIS and classified as IGF.

### **8.9 Replacement policy for Vehicles**

The Committee observed that the cost of fuel and maintaining the ambulance vehicles continues to rise.

The technical team informed the committee that in 2014, a total of GH¢1,069,352 was expended on the vehicles (fuel – GH¢550,000 and GH¢ 519,352). For 2015, a total amount of GH¢3, 606,400 has been requested to enable the Service run and maintain their vehicles.

The Committee holds the view that this amount is woefully inadequate.

### **8.10 Inclusion of National Ambulance Service (NAS) under NHIS**

The Committee observed that as part of the health delivery, the NAS plays a vital role in the transport of patients from one point to another. However, these services rendered are not paid for. In order to ensure that the services are sustained, there is the need to put a charge on these services as an IGF for the NAS.

The Committee holds the view that these charges should be claimable under the NHIS and be paid to NAS instead of the patients having to pay for the service.

### **8.11 Retention of IGF by the Food and Drugs Authority**

The Committee was informed that there is the need for the Authority to be granted 100% retention of its IGF.

The technical team informed the Committee that the Authority is currently undertaking a number of capital projects necessary for the expansion and improving upon their services. Currently the Authority has only 50% retention and this is woefully inadequate.

The Committee agreed with the Authority and endorses the request.

### **8.12 Non-establishment of Boards for colleges and authorities under the Ministry**

The Committee noted that apart from the Boards of Mental Health Authority, Ghana Health Service, Korle-Bu Teaching Hospital and Komfo Anokye Teaching Hospital, all the other agencies that require Boards for their operations did not have one.

The technical team informed the Committee that whilst some of the organizations are new and are yet to have a Board, the Boards of the old organizations are yet to be reconstituted.

As a result of the non-appointment of the Boards, these organizations are unable to function effectively including the consideration of their budgets for inclusion in the Budget Statement.

The Committee is of the view that if these organizations are to perform these important functions assigned to them, then there is the need to have their Boards appointed and made functional.

## **9.0 RECOMMENDATIONS**

After careful consideration of the Annual Estimates, the Committee made the following recommendations.

### **Issue of Recruitment of Staff**

The Committee is of the view that on the issue of recruitment of staff to augment the staff of the Ministry, the Ministry should take up the matter of delays in the release of financial clearance to the appropriate authority to ensure that the needed financial clearance are obtained to pay these health personnel who have been engaged and are rendering important services to the nation.

### **Additional funding for National Ambulance Service**

The Committee recognizes the role played by the National Ambulance Service and the need to charge for the services they render to patients. The Committee also notes that the allocation to the NAS is woefully insignificant and dependency on that would adversely affect the



operations of the Service. The Committee therefore urges the Minister of Health to liaise with the NHIA to work out the modalities to value NAS Services as a charge to be included in the NHIA package.

The Committee cognizance of Section 198 of the National Insurance Act and the role of the Ambulance Services in times of emergencies, further recommends that the Minister meets with the National Insurance Commission and NHIA to allocate a percentage of the National Health Insurance Fund by motor insurer to cover the cost of transporting for emergency treatment of road accident victims.

### **Vehicle Maintenance and Replacement Policy for NAS**

The Committee further observed that the NAS currently has a fleet of vehicles and there is therefore the urgent need for the Ministry to develop vehicle maintenance and replacement policy to replace the vehicles as the need arises.

### **Budget Preparation aligned to the MDGS**

The Committee noted that the budget as prepared is done taking cognizance of the Mission Statement of the MoH in line with the Ghana Shared Growth Development Agenda (GSGDA) which also takes into consideration the Millennium Development Goals. There however was no clarity with respect to the alignment of the Budget to the attainment of MDG goals 4 and 5.

The Committee therefore recommends that subsequent budgets should be clearly aligned to these indicators in order to ensure that targets recognized in these policy documents are achieved.

### **100% Retention of IGF by the Food and Drugs Authority**

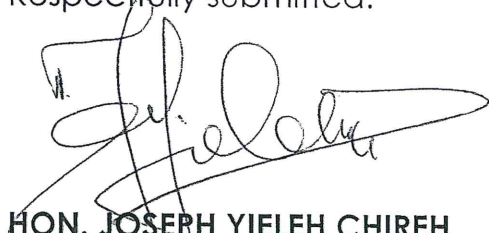
The Committee endorses the request from the Authority and recommends to the House to urge the Minister for Finance to take the necessary steps to ensure that this request to granted to the Authority.

## **10.0 CONCLUSION**

After critically considering the Annual Budget Estimates of the Ministry of Health, the Committee holds the view that the Health sector is key in of improving the lives of Ghanaians.

The Committee therefore recommends to the House to adopt this report and approve the sum of **three billion, sixty eight million, two hundred and forty-four thousand, six hundred and twenty eight Ghana Cedi (GH¢3,068,244,628)** for the activities of the Ministry of Health for the 2015 fiscal year.

Respectfully submitted.



**HON. JOSEPH YIELEH CHIREH**  
**CHAIRMAN**



**MR. ASANTE AMOAKO ATTA**  
**CLERK TO THE COMMITTEE**

**16 December 2014**

