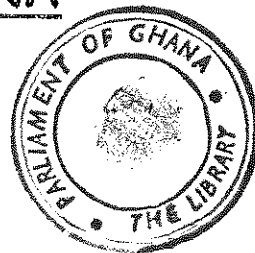


IN THE SECOND SESSION OF THE  
FOURTH PARLIAMENT OF THE FOURTH  
REPUBLIC OF GHANA



REPORT OF THE SELECT COMMITTEE ON  
HEALTH ON THE 2007 BUDGET  
ESTIMATES OF THE MINISTRY OF  
HEALTH

8<sup>TH</sup> DECEMBER, 2006

## 1.0 INTRODUCTION

In accordance with Article 179 of the 1992 Constitution, the Honourable Minister of Finance and Economic Planning, Mr. Kwadwo Baah-Wiredu presented the Budget Statement and Economic Policy of the Government for 2007 Financial Year to the House on Thursday, 16<sup>th</sup> November, 2006.

Pursuant to Standing Orders 140(4) and 178 of the House, the draft Annual Budget Estimates of the Ministry of Health was referred to the Select Committee on Health for consideration and report.

A meeting was held to consider the draft Annual Budget Estimates with the Hon. Minister of Health, Hon. Deputy Ministers of Health, Directors of the Sector Ministry and the Schedule Officer of the Ministry of Finance and Economic Planning (MOFEP). The Committee commends them for their assistance

## 2.0 REFERENCE DOCUMENTS

In considering the draft Annual Estimates for the Sector Ministry, the under listed documents were used as reference materials:

- i. The 1992 Constitution of Ghana,

- ii. The Budget Statement and Economic Policy of the Government of Ghana for 2007 Financial Year,
- iii. The Medium Term Expenditure Framework (MTEF) for 2007-2009 and the Annual Estimates for 2007 (Volume 29) of the Ministry of Health,
- iv. The Annual Estimates of the Ministry of Health for 2006 and
- v. The Standing Orders of Parliament of Ghana.

### 3.0 MISSION STATEMENT OF THE MINISTRY OF HEALTH

The Ministry of Health has the following as its Mission Statement:

- i. The development and promotion of proactive policies for good health and longevity,
- ii. The provision of universal access to basic health services.

### 4.0 OBJECTIVES

The Ministry operates by the objectives cited below in pursuance of its Mission Statement and policy within the Medium Term Expenditure Framework (MTEF):

- i. To ensure that people live long, healthy and productive lives and reproduce without risks of injuries or death,

- ii. To reduce the excess risk and burden of morbidity, mortality and disability, especially in the poor and marginalized groups and
- iii. To reduce inequalities in access to health, populations and nutrition services and health outcomes.

## 5.0 REVIEW OF THE MINISTRY'S PERFORMANCE IN 2006

### 5.1 Funds Allocated

An amount of Four Trillion, Seven Hundred and Eighty-Six Billion, Five Hundred and Forty-Eight Million Cedis (¢4,786,548,000,000.00) was approved by the House under Heads 160-165 for the operational expenditure of the Ministry of Health for the 2006 fiscal year.

During the period, the Ministry of Finance and Economic Planning made regular releases of Personnel Emoluments (Item 1) to the Ministry of Health.

Under Administration (Item 2), a total of Seventy-Five Billion Cedis (¢75,000,000,000.00) was released out of the allocated sum of Ninety Billion Cedis (¢90,000,000,000.00).

Out of the Two Hundred and Sixty-Four Billion, Three Hundred and Twenty-One Million Cedis that was allocated to Service

(Item 3), about fifty per cent (50%) has been released as at the time of reporting.

For Investment (Item 4), the total GOG component of Fifty Three Billion, Five Hundred and Seventy-Seven Million Cedis (¢53,577,000,000.00) has been released to the Ministry of Health.

Out of the appropriated Donor Fund of Five Hundred and Forty-Two Billion, Eight Hundred and Fifty Three Million Cedis (¢542,853,000,000.00), Two Hundred and Forty-One Billion, Eight Hundred and Ninety Million Cedis (¢241,890,000,000.00) has been released as at the time of reporting.

An amount of One Hundred and Ninety Billion Cedis (¢190,000,000,000.00) from HIPC funds was released out of the allocated sum of Two Hundred Billion Cedis (¢200,000,000,000.00).

## 5.2 Programme of Work for 2006.

The main focus of the health sector in 2006 was on:

- Promoting health and collaborating with other sectors to reduce risks factors associated with diseases,
- Scaling-up delivery of high impact health interventions for achieving the Millennium Development Goals (MDGs),

- Expanding access to emergency and ambulance services,
- Producing, retaining and distributing human resources equitably and
- Improving coverage of the National Health Insurance Scheme (NHIS).

### 5.3 Some Achievements of the Ministry in 2006.

#### 5.3.1 Reduction in Prevalence Rate of HIV

The target of reducing the prevalence rate of HIV to 3.1 per cent was achieved. During the period under review the HIV prevalence rate dropped to 2.7 per cent. Twenty Anti-Retroviral Therapy (ART) sites became operational and are currently providing services to 6,000 HIV patients nationwide.

#### 5.3.2 Malaria

Malaria control programme received a major boost during the year. Insecticide Treated Nets (ITNs) were procured and distributed throughout the Country to pregnant women and children under two years. Further more, all district health facilities were able to implement the Intermittent Preventive Treatment (IPT) policy. Over 100,000 pregnant women received Sulphadoxine Pyremthamine anti-malaria tablets.

### **5.3.3 Expanded Programme on Immunization**

Major progress in the eradication of Measles and Polio was made during the year. A non- Polio annual rate of 1.4 per 100,000 children under 15 years was achieved at the end of September, 2006. One hundred per cent (100%) coverage for Measles immunization in children and one hundred per cent (100%) of villages targeted (2,167) were under active surveillance. Seventy-eight per cent (78%) of children have also been immunized with Penta 3 vaccine.

### **5.3.4 Human Resource Development**

The Additional Duty Hour Allowance (ADHA) was abolished and was replaced with a more rational remuneration for health workers. A number of health training institutions were also expanded to increase the intake of trainees.

### **5.3.5 National Health Insurance Scheme (NHIS)**

Eleven (11) additional District Mutual Health Insurance Schemes (DMHIS) were established to bring the total number of functional schemes to 134.

Subsidies amounting to One Hundred and Fifty-Seven billion Cedis (¢157,000,000,000.00) were disbursed to cover the payment of claims for health care services provided to

indigents and other exempt categories between January and August 2006.

A data processing centre was established to process the back log of ID cards for those registered but who have not yet received their cards to enable them access health facilities under the Scheme.

#### 6.0 PROGRAMME FOR 2007.

For the 2007 fiscal year, the Ministry of Health will sustain the gains made in 2006 and scale up priority health interventions as follows:

##### 6.1 **Promoting Healthy Lifestyles and Healthy Environment**

The Ministry of Health would be implementing a regenerative health and nutrition programme that emphasizes on health promotion and disease prevention. The programme will aim at helping Ghanaians to adopt healthy lifestyles such as healthy eating habits, regular exercises and personal hygiene. The Ministry of Health would also collaborate with other sectors to promote environmental sanitation.



## **6.2 Improving Access to Quality Health, Reproduction and Nutrition Services**

In pursuance of the above mentioned, conscious efforts would be made by the Sector Ministry to combat the menace of communicable diseases such as HIV/AIDS, Malaria, Tuberculosis, epidemic prone diseases and diseases that almost exclusively affect the poor such as Buruli Ulcer, Guinea worm, Leishmaniasis, Lymphatic Filariasis and Schistosomiasis.

Interventions such as increments in the coverage of supervised delivery and the promotion of ITNs and nutrition to ensure healthier mothers and children would also be scaled up.

## **6.3 Capacity Development for Health Delivery**

The training of more middle-level health personnel (Medical Assistants, Midwives and Health Assistants) would be embarked upon. Increment in access to health facilities with emphasis on the construction of Community Health Planning Schemes (CHPS), health centres and district hospitals would continue in 2007. Rehabilitation of Tamale Teaching Hospital (TTH) would commence.

## **6.4 National Health Insurance Scheme**

The Ministry of Health in conjunction with its agencies would ensure the sustenance of the National Health Insurance Scheme (NHIS). Efforts would be made to expand the NHIS

to cover about fifty-five per cent (55%) of the population of Ghana through continuous public education; improvement in the system for registration and claims management; establishment of zonal offices; deployment of an integrated information system (that would allow for efficient management of the NHIS) and provision of adequate funding to support services for exempt groups such as indigents, pensioners and children under 18 years.

#### 7.0 TOTAL BUDGETARY ALLOCATION FOR THE MINISTRY OF HEALTH FOR 2007.

For the implementation of the activities of the Ministry of Health and its agencies, an amount of Five Trillion, Six Hundred and Thirty-Seven Billion, Five Hundred and Sixty-Four Million Cedis (¢5,637,564,000,000.00) has been allocated. Details of the components have been indicated in the Appendix.

#### 8.0 OBSERVATIONS AND RECOMMENDATIONS

8.1 Allocation for Personnel Emoluments (Item 1) of the 2007 Budget was found to be inadequate. The amount of Two Trillion One Hundred and Seventy-Five Billion, Five Hundred and Fifty Million Cedis (¢2,175,550,000,000.00) would not be able to cater for the recruitment of new personnel to the Health Sector and the promotion of existing personnel on contract. In view of the special role played by the Ministry of Health and

its agencies in national development, the dire situation should be rectified before activities come to grind at the Ministry of Health. As a matter of urgency, the Committee is recommending for a supplementary budget to be made to cater for the deficits.

8.2 The Health Sector has been allocated Two Hundred and Seventy-One Billion, Eight Hundred and Twenty-Nine Million (¢271,829,000,000.00) under Administration (Item 2). However, the Ministry of Health is initiating a programme to enhance efficiency within the Sector. Under this programme, the Ministry of Health projects to make an efficiency gain of Thirteen Billion, Three Hundred Million Cedis (¢13,300,000,000.00). The Committee commends the Ministry of Health for the initiative.

8.3 Under Service Expenditure (Item 3) of the 2007 Budget, the Committee observed that the Ministry of Health needed One Trillion, One Hundred and Fifty Billion Cedis (¢1,150,000,000,000.00) for optimal running of services but Seven Hundred and Twenty-Five Billion, Six Hundred Million Cedis (¢725,600,000,000.00) excluding NHIS has been allocated, leaving a gap of Four Hundred and Twenty-Five Billion, Two Hundred Million Cedis (¢425,200,000,000.00). The Committee recommends that the House approves the transfer

of Thirteen Billion, Three Hundred and Eighty Million Cedis (¢13,380,000,000.00) from the allocation under Administration (Item 2) to close part of the gap.

8.4 The future of every nation depends on its younger generation. Immunization against certain childhood killer diseases is a critical determinant of this assertion. It is against this background that the government of Ghana has continued to place high premium on immunizing the children of Ghana. During the consideration of the annual budget estimates for the Sector Ministry, the Committee noted that a whopping sum of Three Hundred and Twenty-Three Billion, One Million Cedis (¢323,100,000,000.00) is needed for immunization. Out of this, an amount of Hundred and Eight Billion, One Hundred Million (¢108,100,000,000.00) is being sourced from donors and the difference is to be provided by the government of Ghana. The Committee wishes to recommend that the House approves a sum of Sixty Billion (¢60,000,000,000.00) from the National Health Insurance Fund (NHIF) to support the National Immunization Programme.

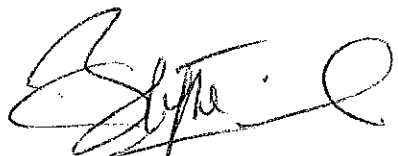
8.5 Under Investment (Item 4), the Ministry of Health submitted to the Ministry of Finance and Economic Planning, a request for One Trillion, Three Hundred and Seventy Billion (¢1,370,000,000,000.00) but Four Hundred and Forty-Eighty

Billion, Four Hundred and Fifty Two Million Cedis (¢448,452,000,000.00) has been allocated, the amount of which the Committee noted to be inadequate for counterpart funds and on-going projects. With the allocated sum, projects that have been initiated would have to be abandoned. The Committee recommends that supplementary budget should be made to sustain the capital projects.

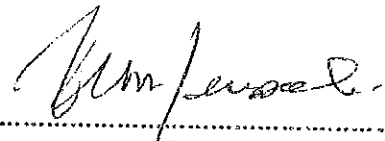
#### 9.0 CONCLUSION

The Committee recommends to the House for approval, the sum of Five Trillion, Seven Hundred and Thirty-Seven Billion, Five Hundred and Sixty-Four Million Cedis (¢5,637,564,000,000), under Heads 160-165 for the operational expenditure of the Ministry of Health for the fiscal year ending 31<sup>st</sup> December, 2007.

Respectfully submitted.



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KWAKU ABREFA TAWIAH  
CLERK TO THE COMMITTEE



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HON. DR. F. OSAFO- MENSAH  
CHAIRMAN TO THE COMMITTEE

8<sup>th</sup> December, 2006.

**APPENDIX**

	PERSONNEL EMOLUMENTS(₱)	ADMINISTRATION(₱)	SERVICE(₱)	INVESTMENT(₱)	TOTAL(₱)
GOG	2,175,550,000,000	102,676,000,000	100,389,000,000	103,289,000,000	2,481,904,000,000
IGF		169,153,000,000	318,909,000,000	32,938,000,000	521,000,000,000
DONOR			468,338,000,000	312,225,000,000	780,563,000,000
TOTAL	2,175,550,000,000	271,829,000,000	887,636,000,000	448,452,000,000	3,783,467,000,000
STATUTORY FUNDS					1,854,097,000,000
GRAND TOTAL					5,637,564,000,000

STATUTORY FUNDS	
NHIS	1,759,097,000,000
HIPC	95,000,000,000
TOTAL	1,854,097,000,000

**A HISTOGRAM SHOWING BUDGET ALLOCATIONS**

