

Development of Annual Operational plan for the Health intervention programme in Ogun State: A key step in Health governance and health system strengthening

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Introduction

One of the key building blocks of the health system according to the World Health Organization (WHO) is **'governance'**. The role of governance in the health system is very crucial as all other building blocks rely on its effectiveness. The policy makers/governing body of the Ministry of Health, Ogun State, Nigeria, decided to take the giant step of developing its **first Annual Operational plan** for the Health intervention programmes in Ogun State. This was part of the strategy to strengthen the health system to be able to effectively deliver the required health care services to the inhabitants of the State.

The development of the 2021 Annual Operational Plan (AOP) of the Ogun State Strategic Health Development Plan (SSHDP) II is a follow-on to the operationalization of the [National Strategic Health Development Plan \(NSHDP\) II](#), which involved all of the State health entities responsible for the overall stewardship of the health sector, providing Primary, secondary and Tertiary health care services, training of health workers and research development. By developing an Ogun state specific operational plan, the State Ministry of Health can track performance of planned and implemented health intervention activities, improve coordination, integrate partners' activities to avoid duplication and harness dwindling health resources.

The National and State strategic health development plans consist of 15 priority areas (see figure 2 on next page). Each of the 15 priority areas has a goal, a strategic objective, key interventions, and actions needed to achieve a set of defined targets.

Method/Approach

The development of Ogun State Health 2021 AOP for the operationalization of the second State Strategic Health Development Plan (SSHDP II 2018-2022) was coordinated by the Department of Health Planning, Research and Statistics of the Ogun State Ministry of Health in collaboration with other departments, agencies, and parastatals of the Ministry.

A 5-day stakeholder workshop was held between 5th and 9th October 2020 to deliberate on the content of the AOP and complete the AOP template which was shared by the Federal Ministry of Health (FMoH). However, due to it being

the first time Ogun State was creating the AOP, 5 days was insufficient for the finalization of the plan. Two personnel from the department of Planning Research and Statistics at the Federal Ministry of Health facilitated the process of developing the AOP.

The development of the AOP used a participatory approach. Participants were divided into groups based on Strategic Pillar and key priority areas. For example, participants working with the Malaria Control Unit and NTDs Control Unit were grouped together as they fall under Strategic Pillar 2 and health priority 5 which focuses on communicable diseases. The partners supporting the health intervention programme, including COUNTDOWN and Evidence Action joined the group working on communicable diseases.



Figure 1: Attendees at the Ogun State '5-day Workshop on Development of Health Annual Operational Plan'

1.2 Overview of NSHDP II

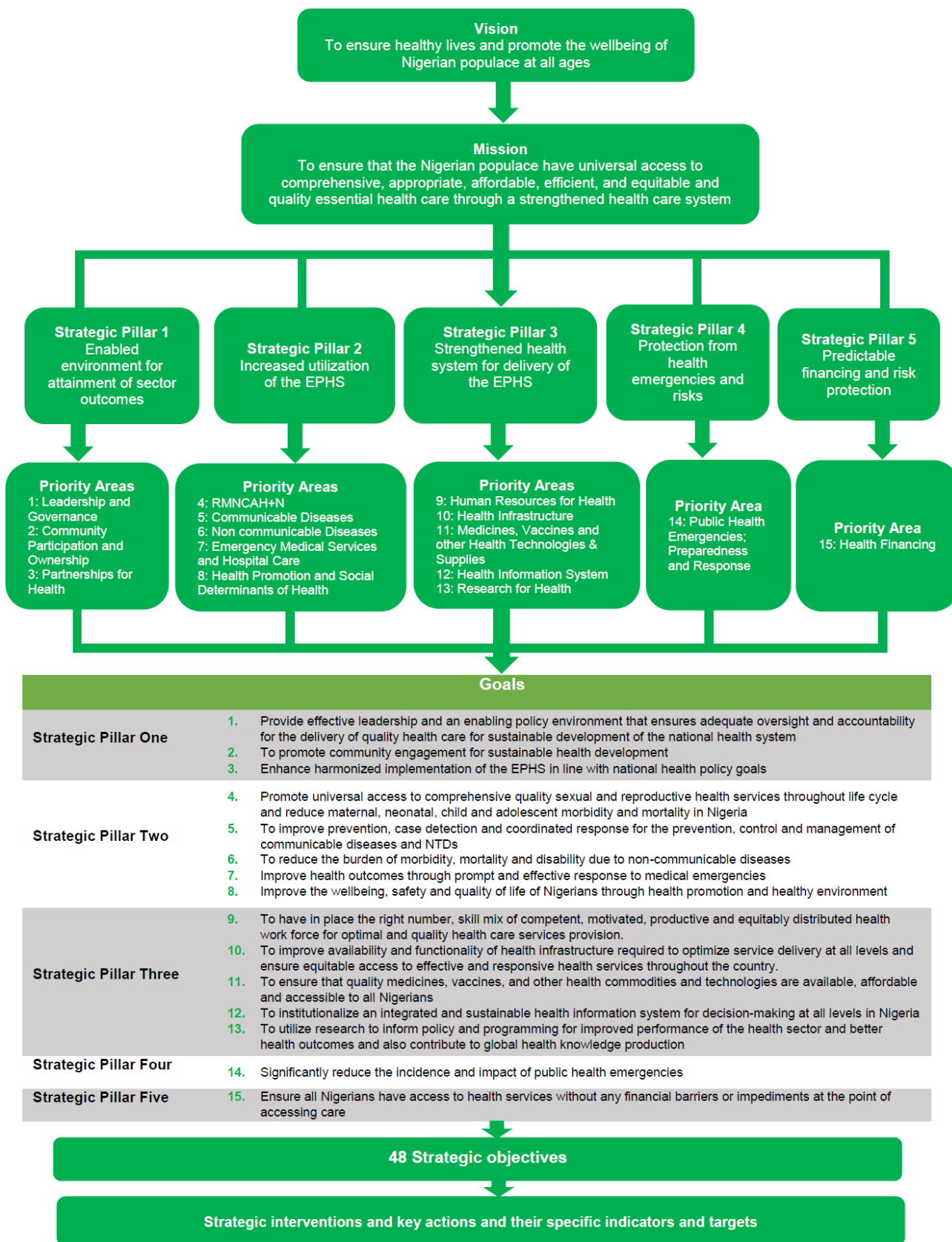


Figure 2: Overview of NSHDP II. Source: M&E Plan for the National Strategic Health Development Plan II (2018-2022) for Nigeria.

There are key steps involved in the development of the AOP as shown in the figure below.

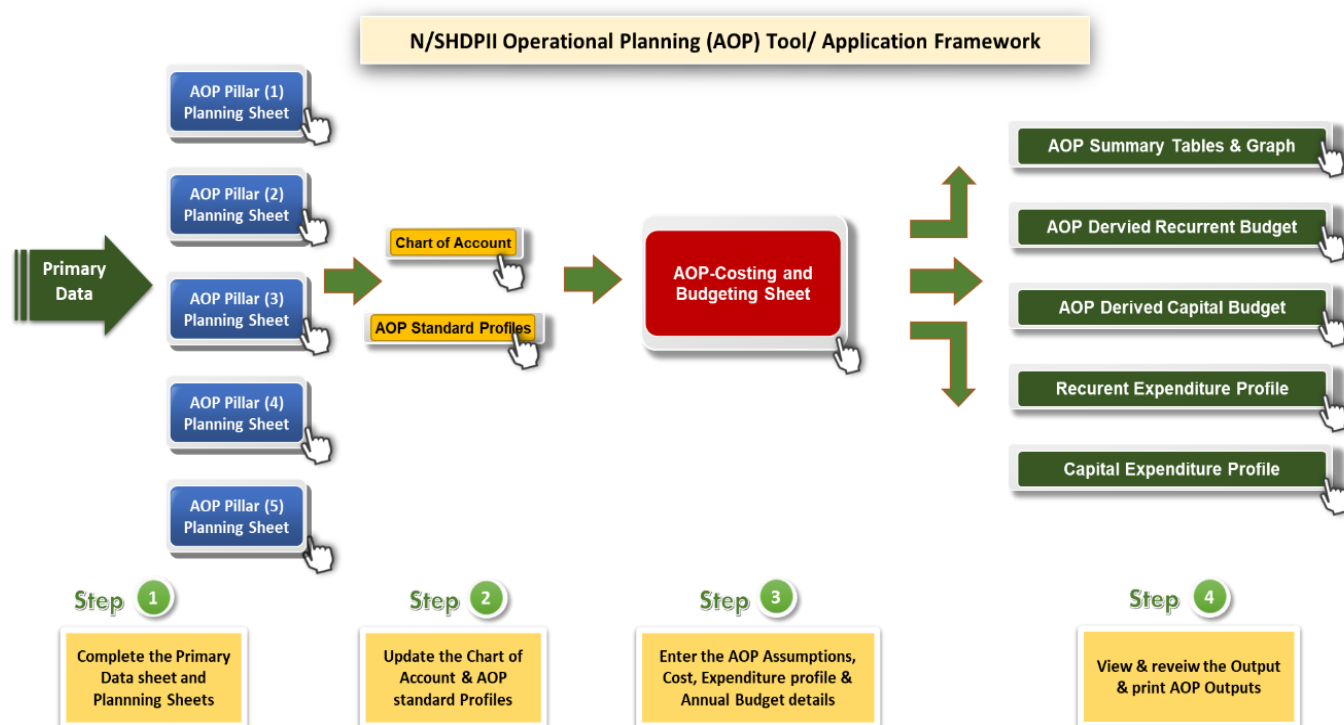


Figure 3: N/SHDP II Operational Planning Tool/Application Framework. Source: NSDPH II AOP Development process for Nigeria.

A major activity carried out before the completion of the Step 1- ‘Complete the primary Data Sheet and planning sheets’ was the conduction of a Strength Weakness, Opportunity and Strength (SWOT) analysis, which was completed by each unit, department or parastatal of the Ministry of Health. A good and comprehensive AOP is dependent on a well conducted SWOT analysis.

Step 1- ‘Complete the Primary Data Sheet and Planning Sheets’- this is where the vision and goal of each unit or department was recorded, with details of the activities proposed to be carried out in order to actualize said visions and goals. Estimated budget was also noted.

Step 2- ‘Update the of Chart of Account & AOP Standard Profiles’- this is when the chart of account is updated, it is an automated template that will be populated based on what was filled out in step 1.

Step 3- ‘Enter the AOP Assumptions, Cost, Expenditure Profile & Annual Budget Details’- this is where an estimated cost is attached to every proposed activity highlighted in step 1.

Step 4- ‘View & Review the Output & Print AOP Outputs’ -this is the step where the expected output is reviewed against every planned activity.



Figure 4: Dr Akinola Oluwole and Honourable Commissioner for Health Dr Tomi Coker.

The COUNTDOWN research output titled '[Participatory guide for planning Mass Administration of Medicines \(MAM\)](#)' (also called the PGP) was adopted during this workshop as a tool to be used for planning of MAM for the NTD programme. Findings from it were used to plan activities for the NTD programme highlighted in the 2021 AOP for NTD activities.

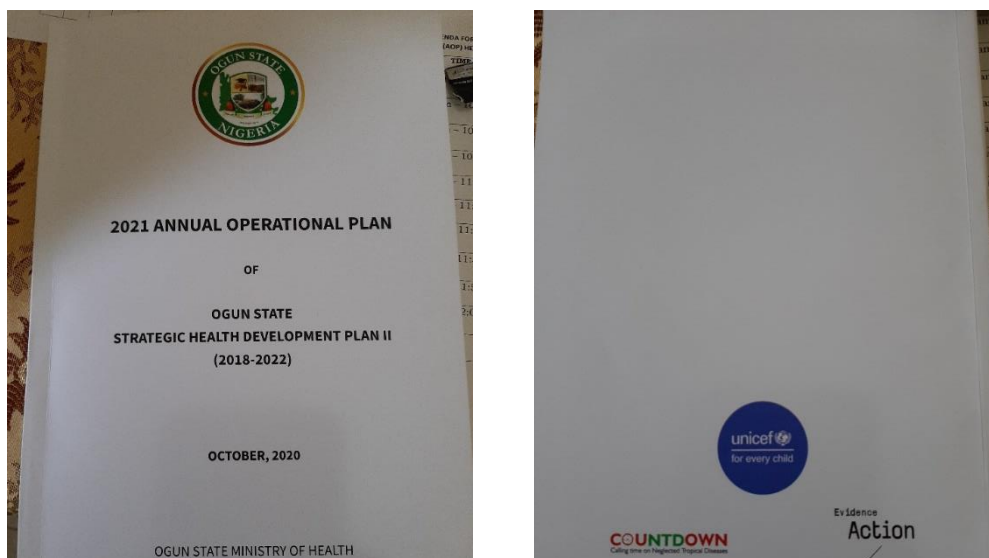
The Director of Public Health, Dr Festus Olukayode Soyinka, said about COUNTDOWN's PGP:

"The document being referred to is not just for planning NTD programme alone, but it is useful for NTD community-based programming."

After all the steps of AOP development were completed for each unit, department and parastatal in the Ministry of Health, the information from each group was collated by the Department of Planning Research and Statistics into one document and printed. In addition, a monitoring and evaluation plan for the AOP developed was also drawn out and printed.

Key learnings

1. A good and comprehensive AOP is dependent on a well conducted SWOT analysis since information needed to fill the AOP template is drawn from the result of the SWOT Analysis.
2. A participatory approach used for the development of the AOP gives opportunity for cross-cutting learning and feedback from other participants
3. The presence of top government officials such as the Commissioner for Health, Permanent Secretary and Head of Department throughout the 5-day workshop boosted the morale of the participants and ensured that all hands were on deck to achieve the goals of the workshop.
4. Selection of a venue outside the Ministry of health environment ensures the commitment of all participants and reduced distractions from other Ministry work.
5. Availability of implementing partners e.g. WHO, UNICEF, EVIDENCE Action etc. at the workshop facilitated budget forecasting and estimation for proposed activities.
6. The AOP is the avenue to present any research findings or any recommendation that is useful for decision and policy making for programme implementation.



Figures 5 and 6: The 2021 Annual Operational Plan of Ogun State Strategic Health Development Plan II