

## **PRESS RELEASE**

## CABINET SECRETARIAT AND MINISTRY OF HEALTH HOLD STAKEHOLDER FORUM ON COMMUNITY-BASED HEALTH PLANNING SERVICES (CHPS)

Accra, Ghana, June 16th, 2015. The Cabinet Secretariat and the Ministry of Health, as part of the Reconstructing Government for Delivery Programme, held a one-day Stakeholder Forum at the La Palm Royal Beach Hotel, with support from the Department for International Development (DfID), UK.

The Reconstructing Government for Delivery programme is a Presidential initiative to restructure government for greater efficiency, with technical and financial assistance from DfID, through its implementation partner, the UK-based National School of Government International (NSGI).

As part of this, the Cabinet Secretariat, which directs the programme, will be exemplifying the tracking of the implementation of key policy priority decisions, one of which is the Community-Based Health Planning and Services (CHPS).

In his welcome address, the Secretary to the Cabinet, Roger K. Angsomwine, underscored the decision to improve maternal and child health outcomes through the scaling up of functional CHPS zones, as a key Presidential priority.

The President, he said, "demonstrated his commitment to this when he urged all his appointees to contribute 10 per cent of their monthly salaries to support the CHPS initiative."

For his part, the Minister of Health, Alexander Segbefia, said the CHPS concept was started based on lessons learned from Bangladesh, with the aim of providing universal health coverage in Ghana.

He said CHPS was initially conceived to deliver community services that would aid the treatment of malaria, acute respiratory infections, diarrhoea, and other childhood illnesses, as well as to provide family planning services.

The Reconstructing Government for Delivery Programme, the Minister noted, was therefore, a timely intervention on CHPS.

"It is my hope that this event will, with the blessings of Cabinet, adopt the Ministry's draft policy on CHPS and the roadmap for its implementation," he said.

"This will strengthen the efforts of the Ministry and its service delivery agencies to coordinate the implementation of the policy"

At the Forum, participants highlighted gaps in the draft policy on the CHPS, and reached consensus on a number of issues:

 That the draft policy and roadmap for implementation on CHPS would be adopted as the working document for

- the scale-up process, while incorporating some of the issues that emerged from the Forum;
- ii. That the Ministry of Health (MOH) and the Ghana Health Service(GHS) should set up a committee to work on an action plan, with clear timelines for the implementation of the CHPS scale-up process;
- iii. That the MOH would engage the Centre for Scientific and Industrial Research (CSIR) on the costing of the standard structure of a CHPS compound, to achieve value for money;
- iv. That coordination, resource mobilisation and leadership on the CHPS scale-up process would be the direct responsibility of the MOH, in line with its traditional stewardship function;
- That development partners would work together to support the Ministry to effectively coordinate the CHPS scale-up process;
- vi. That the GHS is the lead agency on the implementation of the CHPS scale-up process;
- vii. That Cabinet, in order to understand the challenges of the CHPS scale-up process, would conduct a quick review of the CHPS implementation process through a Service Review exercise;
- viii. That the Service Review Team would be made up of representatives of MOH, GHS, and the Cabinet Secretariat; and
- ix. That the findings, recommendations and action plan of the Service Review would feed into the draft CHPS policy and its roadmap, after which a final document on CHPS would be launched and implemented.

The Stakeholder Forum, held under the theme: "How to Accelerate the Scale Up and Service Delivery Improvement of CHPS Towards Universal Health Coverage," was also attended by key officials of the Ministry of Health, the Ghana Health Service, District and Metropolitan Chief Executives, the Donor Community, Chiefs, and Civil Society Organizations.