

BELIZE MINISTRY OF HEALTH AND WELLNESS OPERATIONAL PLAN 2022-2023



FOREWORD

The Government of Belize and its Ministry of Health and Wellness are committed in strengthening the Belize Health System in order to provide quality health services to all, without prejudice to race, gender or age. This Operational Plan is a product of the alignment of the Belize Health Sector Strategic Plan 2014-2024, the Government's Plan Belize Manifesto, the Belize Human Resources for Universal Health Strategic Plan, Horizon 2030, and the Sustainable Development Goals. This Operational Plan, 2022-2023, of the Ministry of Health and Wellness is a comprehensive guiding document that integrates activities and achievable targets of all departments. The overall objective is to provide the best health care possible with an emphasis on achieving universal health coverage.



This Operational Plan also aligns all technical areas of the Ministry of Health and Wellness so as to improve the organization and management of health services. In addition, it will ensure the timely and efficient delivery of health services through the accomplishment of the objectives and targets set forth within the document.

The Covid-19 pandemic has highlighted the gaps within the health system and so, this Operational Plan will also emphasize on rebuilding a health system that is resilient and that will be able to adapt to a changing environment, to natural disasters and the emergence of infectious diseases.

A handwritten signature in black ink, appearing to read 'Kevin Bernard', written over a horizontal line.

Hon Kevin Bernard
Minister of Health & Wellness

ACKNOWLEDGEMENTS

The Ministry of Health and Wellness would like to thank all persons that contributed to the preparation of this Operational Plan. The plan was prepared in a consultative process inclusive of all departments of the Ministry of Health and Wellness and we are grateful that a unified effort was implemented in executing this process involving the following technical areas and their senior staff.

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ACRONYMS

AIDS	Acquired immunodeficiency syndrome
ART	Antiretroviral therapy
BFLA	Belize Family Life Association
BHIS	Belize Health Information System
CARPHA	Caribbean Public Health Agency
CDC	Centers for Disease Control and Prevention
CHW	Community Health Worker
CICAD/OAS States	Inter-American Drug Abuse Control Commission/ Organization of American States
CME	Continuing Medical Education
CML	Central Medical Laboratory
COPOLAD	Cooperation Programme between Latin America, the Caribbean and the European Union on Drugs Policies
COVID-19	Coronavirus disease 2019
CSO	Civil society organization
DHS	Department of Health Services
EU	European Union
GDP	Gross domestic product
HECOPAB	Health Education and Community Participation Bureau
HIV	Human Immunodeficiency Virus
HRH	Human Resources for Health
HSSP	Health Sector Strategic Plan
IADB	Inter-American Development Bank
IHSDN	Integrated Health Service Delivery Network
IPC	Infection Prevention and Control
KPI	Key performance indicator

MCH	Maternal and Child Health
MOHW	Ministry of Health and Wellness
MPS	Ministry of Public Service
NCD	non-communicable disease
NDACC	National Drug Abuse Control Council
NGO	Non-governmental organization
NHI	National Health Insurance
nPEP	non-occupational Post Exposure Prophylaxis
PAHO	Pan American Health Organization
PAPU	Policy and Planning Units
PNP	Psychiatric Nurse Practitioner
PPE	Personal Protective Equipment
PPPMU	Policy, Planning and Project Management Unit
PrEP	pre-exposure prophylaxis
PUP	People's United Party
SE-COMSICA	Secretaría Ejecutiva del Consejo de Ministros de Salud de Centroamérica
SOP	Standard operating procedure
STI	Sexually Transmitted Infections
TB	Tuberculosis
UNICEF	United Nations Children's Fund
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization

EXECUTIVE SUMMARY

Introduction

The Belize Health Sector Strategic Plan (HSSP) for the years 2014-2024 was developed using the WHO Systems Thinking Approach and the Social Determinants of Health Model as a framework and it served to outline a vision and mission for the health sector and a new strategic direction for Belize health system. The process involved collaboration and participation from social partners and stakeholders, including but not limited to Government Ministries, Professional Organizations, United Nations Agencies, NGOs and the private sector.

Methodology

In this regard, it has become necessary to develop a National Annual Operational Plan for the MOHW aligning the Belize Health Sector Strategic Plan 2014-2024 and the Plan Belize Manifesto with the inclusion of the component for Wellness. The operational plan will serve to set achievable targets for the biennium 2022-2023 in order to achieve universal health coverage and the sustainable development goals as well as improve overall organization and management of MOHW. It will not only increase the capacity to contain and manage COVID-19 but will also ensure the continuity of essential health services.

Situational Analysis

Since the development of the HSSP, much progress has been made to increase the coordination in health service delivery among providers and stakeholders, increase accessibility to health services in an equitable manner, improve quality of care according to defined standards and to increase efficiency and productivity in the management of health services. However, gaps and challenges were identified in the health system and many of the targets identified in the HSSP were not met or partially met.

Implementation Plan 2022-2023

The consultative workshop of high level technical persons from the MOHW have developed a very comprehensive Operational Plan to implement the Strategic Objectives outlined in the HSSP in 2022 and 2023. Some of the key activity areas involve:

- Filling of vacant post and creation of new post; training & retraining of staff
- Develop & reactivated key committees and councils
- Health education, and BCC to reduce risk and improve health and wellness
- Development, revision and monitoring of policies/standards/guidelines, cooperation, agreements
- Strengthen partnerships: international, regional and national partners, including private sector.
- Development of cost effective healthcare packages to enhance universal healthcare coverage and equity
- Infrastructure review, upgrades, new buildings, equipment and maintenance
- Improved case management, integration of services and decentralization as necessary
- Provision/access to BHIS, training, upgrades, decentralization etc.
- Accountability, Monitoring & Evaluation

CHAPTER 1 -Introduction

The Belize Health Sector Strategic Plan (HSSP) for the years 2014-2024 was developed using the WHO Systems Thinking Approach and the Social Determinants of Health Model as a framework and it served to outline a vision and mission for the health sector and a new strategic direction for MOHW and Belize health system. The process involved collaboration and participation from social partners and stakeholders, including but not limited to Government Ministries, Professional Organizations, United Nations Agencies, NGOs and the private sector. The plan focus was developed from an enhanced primary health care approach towards universal health and it identified the following strategic goals for the health sector:

- Strengthen inter-sectorial participation for effective and efficient delivery of preventative, promotive, curative, rehabilitative services to the communities taking into consideration their cultural and social characteristics.
- Ensure strong leadership and governance at all levels.
- Development of innovative strategies to promote inter-sectoral partnerships to improve the wellness of the population.
- Advocacy for universal health coverage as a guiding principle for socio-economic development.
- Adoption of appropriate technology to increase efficiency and effectiveness in health care delivery.
- Public sector, private sector, civil society and communities working together to protect and improve the health and well-being of the population of Belize.
- Building strong partnerships with communities and involving them in planning, implementation and evaluation of plans and programs geared towards social development.
- Human Resources for national development to ensure well trained customer friendly and committed individuals to meet the health and wellness needs of the communities.

In order to achieve these goals, the following seven strategic objectives were formulated to provide a blueprint with measurable targets and indicators which would allow tracking of progress in implementation of the plan.

1. Integrated Health Services Based on Primary Health Care for improved Health outcomes
2. Strengthening the Organization and Management of Health Services
3. Achieving Greater Equity, Cost Effectiveness and Efficiency in the Allocation and Use of Health Resources (Improved Health financing to achieve Universal Health Coverage)
4. Strengthen Capacity for Human Resources for Health Planning to meet present and future Health sector needs
5. Strengthening of the Belize Health Information System to Support Evidence based Planning in the provision and delivery of Health Care

6. Development of Quality Improvement framework to ensure stakeholder accountability
7. Efficient and Effective Health Infrastructure Development

Success requires a plan, adequate resources, and implementation. Over the first seven years of the plan period, much work has been done allowing for partial achievement of these objectives. However, progress in some areas has been stymied with the emergence of the COVID-19 pandemic, which has taken a serious toll on the health of many Belizeans and dealt a devastating blow to the Belizean economy. After success in the 2020 Belizean general election, the PUP led government has made a commitment to seek to balance the competing interests of health and the economy in a way which realizes optimal benefits for the majority of Belizeans.

In this regard, it has become necessary to develop a National Annual Operational Plan for the MOHW aligning the Belize Health Sector Strategic Plan 2014-2024 and the Plan Belize Manifesto with the inclusion of the component for Wellness. The operational plan will serve to set achievable targets for the biennium 2022-2023 in order to achieve universal health coverage and the sustainable development goals as well as improve overall organization and management of MOHW. It will not only increase the capacity to contain and manage COVID-19 but will also ensure the continuity of essential health services.

Operational planning is the link between the strategic objectives of the HSSP and the implementation of activities. It is an important tool for translating government policy into day-to-day management activities, and harmonizing planning and budgeting across the health sector. This operational plan includes the expected areas:

1. A description of activities linked to the overarching strategic objectives (normally contained in the strategic plan);
2. The timing and sequencing of those activities;
3. A quantity of activity;
4. The person(s) responsible for the activity;
5. The resources required, including financial resources, and the origin of those resources;
6. A method of measuring progress (monitoring).

New Vision and Mission

VISION
**QUALITY HEALTH CARE AND WELLBEING
FOR ALL NOW AND BEYOND**



MISSION
**THE MINISTRY OF HEALTH AND WELLNESS AIMS TO PROVIDE
QUALITY, AFFORDABLE, COMPREHENSIVE HEALTH SERVICES;
WITHIN A RESILIENT ENVIRONMENT THAT PROMOTES EQUAL
HEALTH AND WELLBEING FOR ALL**

CHAPTER 2-Situation Analysis

Objective 1 Integrated health services based on primary health care for improved health outcomes

An Integrated Health Service Delivery Network is defined as “a network of organizations that provides, or makes arrangements to provide, equitable, comprehensive, integrated, and continuous health services to a defined population and is willing to be held accountable for its clinical and economic outcomes and the health status of the population served.”

Since the development of the HSSP, much progress has been made to increase the coordination in health service delivery among providers and stakeholders, increase accessibility to health services in an equitable manner, improve quality of care according to defined standards and to increase efficiency and productivity in the management of health services. Activities and achievements of the various stakeholders involved can be found in the MOHW.

Key areas of concern

1. The COVID-19 pandemic has affected the delivery of services since 2020 in many ways. COVID –19 became a leading cause of death, second only to diseases of the heart. The priority and focus of the PPPMU was shifted to assist in the procurement of medical supplies and equipment for all health facilities. This public health emergency took precedence over all other activities and put a strain on financial and human resources as well as the availability of supplies for general health service delivery. Services were reorganized to establish a COVID-19 Screening Clinic to prevent cross contamination. There has been distraction from execution of IPC at the facility level as ICNs are delegated into other areas. Certain specific programs (NDACC, Dental, HECOPAB) only run during the school period and schools have been closed. However, in 2021 through online services and the slow reintroduction of face-to-face services programs are resuming gradually. The Dental Outreach Clinic conducted to the Department of Correction (DOC) has been curtailed to prevent the spread of COVID-19.
2. There is need for the strengthening of Infection Control, development of training plans to address capacity building, assessment of health sector reform project and the establishment of the National Social Council.
3. Belize has achieved 35 months without indigenous (local) malaria transmission. However, the passive surveillance for malaria at most health facilities is inadequate and most regions failed to meet targets with respect to reducing aedes infestation indicators and malariometric indicators such as ABER (annual blood examination rate). Influx of immigrant workers from

possibly endemic areas is cause for concern as re-introduction of malaria is a strong possibility. Therefore, systems must be put in place to identify imported cases before local transmission occurs. The highest record of Dengue fever cases occurred in 2019, with numbers subsequently falling by 86% in 2020. Outbreaks tend to occur every 2-3 years, suggesting a possible increase in cases may occur in 2022. Socio-economic conditions remain the driving force behind Dengue and Zika with poverty, poor sanitation, lack of access to potable water, and poor infrastructure (e.g. drainage issues) playing a contributing role in transmission. Furthermore, due to rural expansion, there has been a high level of transmission to many rural communities over recent years.

4. There is need for improved laboratory services. It would be ideal to establish a clinical laboratory in Belize City as well as a true reference public health laboratory in the country. Further advanced testing should be implemented in Belize as there is increasing difficulty in receiving support from external facilities. The National Blood Transfusion Service should be established as a separate service to improve availability of blood products.
5. In order to improve efficiency and combat fragmentation of healthcare, effective communication strategies must be implemented. Within the health regions there has been reduced communication at all levels, in particular with Technical Advisors and Regional Managers regarding planning and implementation of health services. Limited planning causing pressure on ground staff and management to standardize health services in a timely and effectively manner, which may lead to errors. There is also lack of ongoing communication with CML, CMS and NEMC. International collaboration, communication and recruitment processes need to be strengthened.
6. High maternal deaths, 246.4 maternal deaths per 100,000 women of reproductive age in 2021 (17 deaths in 2021 with 8 due to COVID-19) , this was a marked increase from 2020 which was 58/100,000– There is need to take an urgent look at transferring of patients and review of critical cases.

Objective 2: Strengthening the organization and management of health services.

The short-term indicator targets were not achieved for this objective, namely: establishment of the national social council; the assessment of the health sector reform project was done with support

from PAHO and EU and the final report is pending; and functional district and village development teams.

Key areas of concern

1. With limited competency in policy development of the health planners, it has been difficult to progress in the development and updating the required protocols to improve the services delivery.
2. Development of a Communication Strategy, revision and sensitization of care protocols and referral policy.
3. There is need for improvement in the turn-around time process of requests submitted to HQ. Prompt feedback should be provided and records management needs to be improved – structured management of file and incoming information shared to appropriate officers for timely action
4. Management training is needed for mid-level managers with an emphasis on results-based management and the use of evidence-based data for health planning
5. Orientation Manual Needs update
6. Awaiting Approval: Referral Policy and Guidelines, Emergency Room Protocols, National Emergency Medical Services Policy, Drug Inspectorate Standards and Guidelines, Registration of Drug Standards and Guidelines, Guidelines for Policy Implementation

Objective 3: Achieving greater equity, cost effectiveness and efficiency in the allocation and use of health resources (Improved health financing to achieve universal health coverage)

With respect to this objective, some indicator targets were met. Financial Regulations to govern the NHI Scheme were developed and implemented. However, much room for improvement has been identified.

Key areas of concern

1. The annual health expenditure remains below 6% of GDP
2. There is need for implementation of a performance-based budgeting approach to allocation of health resources
3. An external auditing mechanism also needs to be established for the tendering process.
4. There is a lack of a cost effective secondary health care package to enhance universal health care coverage & equity, quality improvement work plans are missing at district level to improve response and care

5. Need to increase allocation in health budget for operational expenditure since new services have been added to each health district (e.g isolation areas)

Objective 4: Strengthen capacity for human resources for health planning to meet present and future health sector needs

The Ministry of Health has developed and implemented the Belize Human Resources for Universal Health Strategic plan 2019-2024 as well as an HRH database to help address the HR needs of the country. The PPPMU also completed assessments of HR during the COVID-19 pandemic and of vacancies within the health regions.

Key areas of concern

1. The recruitment and retention plan remains pending
2. There is no succession plan for replacement of HRHs.
3. There is a need to standardize the distribution of HRH across all levels of the health system. This could be assisted by assessment of each health region structure and reorganization based on population, epidemiological and environmental profile, providing HRH based on service delivery and HRH standards.
4. Circular restriction in overtime limits, late payment and poor introduction of new overtime mechanism have led to increase staff frustration and reluctance to do overtime. There is need to advocate for removal of Overtime Cap for Healthcare workers.
5. Need for improvement in incentives to health staff e.g., promotions, recognition etc. Salary cuts have resulted in increased resignation of nursing staff and overall reduced morale.
6. Various HR needs were identified in the stakeholder meetings, namely: Psychiatrists, Psychologist, Anesthesiologist, Internist, OB/GYN, Nurse Specialists (PNPs, CRNA, midwives, ORN, PHN, RHN) nursing supervisor, project manager, secretary, Dentists and Dental Assistants, Nutritionist, National biostatistician, Trained surveillance officer, Laboratory staff, Pharmacist, Public Health Personnel, Assistant Procurement Manager, Biomedical technician staff, A/C technician staff, Field Officers, trained Environmental Health Officers, District Health Educators, Health planners.

Objective 5: Strengthening of the Belize Health Information System to support evidence-based planning in the provision and delivery of health care

The BHIS is the MOHW's clinical system of record which supports clinicians in the delivery of well-informed care by providing a sustainable health information system that is secure, confidential, reliable, precise, and accurate. The BHIS supports the Ministry's regulatory and stewardship responsibilities by providing the primary source of clinical and operational data.

The BHIS has been introduced to 4 new sites (Bullet Tree Health Center, San Antonio Health Center, Valley of Peace Health Center, Placencia Health Center) with the aim of eventually having it implemented in 100% of Health Facilities. The PPMU supports with the procurement of IT equipment.

Features of latest BHIS Upgrade

- Enhanced Security
- Functionality of multiple Nodes on 1 server (hardware)
- Appointments Calendar
- Program/Form Builder
- Linkage of Mother's to Child
- Cumulative Patient Profile (CPP)
- MCH – worksheets, Antenatal measurements, GA recording (ultrasound, Antenatal Measurements)
- SOAP Note style (Outpatient encounter only)
- Enhancements of clinical notes, allergies, diagnoses, referral, and update of diagnoses
- Attachment

Key areas of concern

1. Limited finances and staff and problems with internet services for remote areas.
2. The upgrading of BHIS is not compatible with all computers and there is lack of training regarding using upgrades.
3. There needs to be development of a preventative maintenance plan for all facilities or offices with IT equipment as well as monitoring of data quality at the facility level.
4. Need for training in ICD-10 and data recording for clinical care personnel.
5. No database system exists for the storage of Environmental Health data and the Food Handlers Data Base System needs to be upgraded.
6. NDACC Outreach Services should be integrated into the BHIS System to capture substance misuse data that can be used for better monitoring and planning of prevention and outreach services.

Objective 6: Development of quality improvement framework to ensure stakeholder accountability

All short-term indicator targets for this objective outlined in the HSSP were achieved:

- Quality Improvement Assessment team established by 2014.
- Monitoring of Health Facilities bi annually

- Key facility performance indicators with monitoring and evaluation tools developed for all levels of health facilities with collaboration from the private sector.
- Standardized patient/client and employee survey mechanism developed and functional at all health facilities.
- Quality improvement standards developed.

Key areas of concern

1. There is need for National Committees to be reestablished (e.g. IRB/ Ethics committee, National Surveillance Committee, NCD Committee etc.). Also lacking functional quality committees at district level and strengthening of L&A Unit to execute quality reviews etc.
2. The Quality Improvement Framework for MOHW and the National Quality Commission and lack of a national procurement policy for MOHW.
3. The Vector Control Unit reports poor use and application of the public service job performance appraisal whereby targets are not met (in many instances not set) and disciplinary problems prevail in some regions and yet officers continue to pass their appraisal and receive increments - this is demoralizing to hard working officers.

Objective 7: Efficient and effective health infrastructure development

The PPPMU of the MOHW coordinates construction and renovation of health facilities (e.g health centers, polyclinics, hospitals, CML partial renovation) as well as retrofitting with SMART standards and procurement of medical equipment. Infrastructure monitoring is done frequently and upon request and support was given for the development of the National Maintenance Plan. The National Engineering and Maintenance Center (NEMC) is responsible for maintenance planning and scheduling and conducts planned/preventative as well as corrective maintenance.

Key areas of concern

1. Preventative maintenance plans are not available for all health facilities.
2. Availability of funding for renovation of health facilities continues to be an issue
3. There is need for more timely reporting of infrastructure issues at the regional level.
4. Infrastructural deficiencies identified by stakeholders include:
 - Need to establish a Health Facility Infrastructure Committee (to review, plan etc. and make changes with the infrastructure
 - Lack of computers, office space and transportation for Public Health Inspectors
 - Laptop and projector needed for dental education
 - Ensuring dental clinics are equipped with a dental chair
 - Improvement of dietary unit and kitchen infrastructure in all regions

- Suboptimal warehouse capacity
- No Acute Unit for admission of acute mental health cases
- Capacity building needed for regular maintenance of laboratory equipment
- Need for generators in all health regions
- CHR management building/WHR-dilapidated and costly to maintain
- DORPCII/ PGCH/ CCHC: new location is necessary due to growing population and growing health needs
- Limitation in bed capacity at Emergency and Observation: NHR
- Lack of an imaging center in Southern Belize (transportation and transfers required for select cases who are at a secondary level service and require diagnostic support for optimal management)
- Limitation in number of vehicles and drivers for the various health regions

CHAPTER 3-Implementation of the Health Sector Strategic Plan 2022-2023

STRATEGIC OBJECTIVE 1: Integrated Health Services Based on Primary Health Care for improved Health outcomes							
EXPECTED OUTCOME: Increased coordination in health service delivery among providers and stakeholders to ensure continuity of care							
UNIT: Licensing Authority, Policy and Planning Units, Foreign Service Office							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Strengthen the monitoring of IPC activities nationally to ensure adherence to standards	X	X	Director L&A	% of IPC activities monitored	Monitoring tools in place by Q1 2022	\$4,000	WHO/PAHO ICN
2. Development of international, national & health region training plans to address training needs for clinical & non clinical staff	X		L&A Director PAPU Director FSO	% of training plans developed to address training needs for clinical & non clinical staff	Q1 2022 National training plans developed 100% all Plans by Nov 2022	\$15,000	Regional, UN partners, local counterparts (MOE, UB, BAHA)
3. Strengthen international collaboration, communication and recruitment process	X		FSO	# of MOUs developed with International Partners	1 st Q 2022 100% by Dec 2022	No cost center	International cooperation
4. Development & reactivation of key committee and councils (quality committee & national social council)	X	X	L&A Director PAPU Director	# of ToRs developed 2. Functional Quality Committee & Council in place	100% of Committees & Council in place by 2022	\$1,500	Existing guidelines, regional, CARICOM, PAHO/WHO
5. Assessment of the health sector reform project	X	X	Director PAPU/PMU	Report of Assessment of Health Sector Reform Assessment	1 st Q 2022	\$40,000	PAHO/WHO
UNIT: Vector Control							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Support strengthening of passive surveillance system for malaria	5%	7%	Regional management teams	Annual blood examination rate	7% ABER	Vector control recurrent budget	
2. Support the annual updating and implementation of district malaria micro plans	50%	50%	Regional management teams	% of districts with malaria micro plan being implemented	100% districts implementing district malaria micro plans by 2023	\$175,000/Y RMEI Project funds	
3. Preparation of and submission for malaria free certification to WHO	X		Vector control technical advisor	Malaria elimination report completed & submitted to WHO	Report submitted to WHO by 1 st Q 2022	Vector control recurrent budget	

4.Prevent reintroduction of malaria a)through surveillance at entry points and as requirement for issuance of work permits b) through delivery of service package to target groups which include bi-annual indoor residual spraying, distribution of long lasting insecticide treated nets, free malaria testing and supervised treatment	0	X 0	Immigration and nationality department MOHW	Malaria testing policy - requirement for work permit # Local malaria cases	Malaria screening policy set in place by immigration and nationality department by 2023 0 % of local malaria cases	XX \$350,000/Y	MOHW
5. Implement vector control actions to reduce the incidence of dengue to < 3 per 1000 population through an integrated management strategy	X	X	Vector control district Heads	Incidence of dengue per 1000 population	< 3 dengue cases per 1000 population	\$500,000/Year	
UNIT: Health Education and Community Participation Bureau (HECOPAB) NDACC, Nutrition, Dental, Mental Health, EPI Unit							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1.Strengthen the Community Platform Strategy-piloting in pending communities in Northern, Western, and Southern Districts (SMI)	X	X	HECOPAB, CHW, RHNs	# Communities participating in platform strategies # volunteers forming platforms	70% of the selected communities fully functional and participating by 2023 10 Volunteers/community	Funds from IADB	Village leaders IADB
2. Observance of the regional & International Health Days	X	X	Community Units & Tas	# Health days commemorated	90% listed health days commemorated annually	\$30,000 MH \$10,500	
3. Development of Communication/Marketing Plan with a focus on NCDs and the Risk Factors	X	X	NCD Coordinator	1.Education/Communication campaign developed 2.# persons reached with NCD messages 3.Monthly reports	Communication manual in place by 2022 Communication Plan implemented in 2022 & 2023	\$70,000 (Nutrition, HE COPAB, MH, NDACC-\$5,000	PAHO
4. Development, updating and revision of health education material and job aid tools (prints, videos, etc	X	X	Communications Unit, TAs, HECOPAB	# promotional materials distributed in 6 districts, # video messages aired # persons reached	100% units have updated materials by 2023	\$30,000 MH \$13,600 NDACC \$5,000	
5. Conduct nutrition consultations based on MOHW referral system	X	X	Nutritionist HQ	# of persons reached for consultations from referral system	100% of clients referred are offered nutrition consultations	Nutrition budget HQ	
6. Conduct nutrition training based on guidelines for management	X	X	Nutritionist HQ	# persons trained based on nutrition guidelines	95% of relevant officers trained in nutrition guidelines by 2023	Nutrition budget HQ	

and prevention of under nutrition, (stunting, wasting, underweight)							
7. Communication Activities/Health Promotion : Coordinate Media Appearances for observance of Regional and Intl Days, particularly for COVID-19; Provide Health Education/trainings; Printing of Health Education Materials ; Airing of Ads and PSAs	X	X	Communicatio ns unit, TAs	% of persons reached with health promotion messages	Manual of Health promotion activities produced and implemented 90% of activities implemented by 2023	Communicati on plan budget	
8. Provide continued capacity building of healthcare staff and police officers in the following areas: Management of mental disorders; mhGap; Psychological First Aid; Stress Management; Workplace wellness; Recognizing Mental Illness, Intervention of high risk situation and current MH situation.	X	X	MH Coordinator Psychiatrist PNP's	# Persons trained (Medical Officers, CHW, Rural health nurses, Police Officers) on MH topics	30% staff trained in MH-2022 40% staff trained in MH-2023 100% All training completed by 2023	\$7,000	PAHO
9. Training of teachers on mental health topics.	X	X	MOHW, MOE	Mental health literacy available in High school curriculum % High school teachers trained in MH	100% Teachers trained in MH component by 2023.	\$5,000	PAHO
10. Provide dental outpatient care to the general population through ten dental clinics	150/D/Y	150/D /Y	Dentist-10 dental clinics	1. Provide oral exam for dental diseases to the general population. 2. Provide extraction of all teeth which are irremediable.	100% patients visiting clinic with dental disease examined and received necessary care	\$50,000	
11. Dental Education program implemented in 80% of all rural and urban schools in children 5-14 years old.	120 schools	120 school s	Dentist at 10 clinics	%of children 5-14 yrs receiving dental education	80% of children ages 5-14yrs requiring dental education are able to access it in 6 districts	\$104,760	
12. Develop the integrated Dental/MCH services framework	X	X	Dentist at 10 clinics Attached MCH Clinic	1.Dental health Educational sessions provided to all pregnant women attending Prenatal clinics	100% of pregnant women referred for dental screening receive services	\$56,000	

				2. Dental screening to all pregnant women referred from MCH clinic.			
13. Increase Mobile Dental Services to the Rural Communities	X	X	Dentist at 10 clinics	1. # mobile outreach clinics provided to the rural schools (children 5-14 years). 2. # Dental Health Education sessions conducted in rural schools.	1. Two mobile outreach clinics per month conducted to the rural schools per clinic (=18). 2. 4 Dental Health Educational sessions conducted per month in schools by a Dentist and a dental assistant (=36).	\$74,280.00	
14. Dental Outreach Clinic conducted to the Department of Correction by Central Health Region	12 clinics	12 clinics	Dentist-3 Central region Dental clinics	% inmates from the department of correction receiving dental health education and care	100% inmates visiting the clinic receive dental health education on a one to one basis (12 clinics/yr)	\$20,000	
15. National Annual Dental Workshop conducted	X	X	Dentist-10 Dental clinics	% of dentist attended the annual workshop	100% MOHW dental staff attend workshop	\$20,000	
16. Continued implementation of Substance Abuse Prevention Programs: Insight Program, Student Assistance Program, School Drug Week Program, and One Step@ a Time.	X	X	NDACC	% Substance Abuse programs provided at all school levels via all viable platforms, ensuring monitoring and evaluation.	85% of all schools at all levels, urban and rural benefit from programs	\$5,000	OAS/CICAD, PAHO, CARICOM, UNODC, COPOLAD III
17. Continued participation in community and educational fairs.	X	X	NDACC, HECOPAB, MH, Nutrition	# Community and educational fairs participated in countrywide to provide information on substance misuse, outreach, mental health, and nutrition	Participation in 80% of Community and Educational Fairs	\$35,000 NDACC \$8,000	PAHO
18. Development of a cost analysis for the drafted legislations	X	X	NACC, Planning Unit,	Cost Analysis completed for drafted legislation	Cost analysis report submitted by the end of 2022	NDACC \$20,000	PAHO, OAS/CICAD, UNODC, CARICOM, COPOLAD 111

UNIT: ALLIED HEALTH							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget/yr	Support
1. Quality Improvement- revision of current SOPs and development of new SOPs	X	X	CML (MOHW)	# of SOPs revised # of new SOPs developed	New SOPs developed by June 2022 Current SOPs revised by December 2023	NIL	
2. Ensure Core Drugs availability	X	X	Chief Pharmacist	% of core drugs available and monitored	100% Core Drugs available by 2023 and monitored monthly	NIL	
UNIT: HIV/TB							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Strengthen partnership with the private medical sector to improve referral protocols BMA, BFLA, CSO-hub,	X	X	DHS/CEO M&E	# of referral protocols received from private sector	75% increase in referral protocols received from BMA, BFLA, CSO-hub and other private sector agencies in 2022 and 2023.	Travel allowances Transportation	BMA, BFLA, CSO-hub
2. Strengthen provision of HIV/STI/TB case management	X	X	Regional managers and ToT personnel, adherence counselors	Increased provision of HIV/STI/TB case management	By 2023 90 % patients know HIV status; 90% known HIV patients receive sustained ARVs; 90% on ARVs have viral suppression	Availability of external funding for the HIV/TB/STI/VH programs	International partners
3. Intensified and well-monitored anti-stigma and discrimination in the health and allied health sectors	X	X	HIV Coordinator CHW, Social workers	% HCW and community practicing anti-Stigma and non-Discrimination measures	75% HCW and community reached by S&D messages by 2023		Regional/International partners
4. Strengthen the test-and-treat approaches for special groups such as KP, discordant couple, vulnerable populations	X	X	Counsellors, CSO-hub	% Increase in key populations and vulnerable groups benefiting from test-and treat approaches	75% increase in KP, discordant couples, and vulnerable populations accessing test-and-treat approaches	Transportation available	
5. Scale up integration of ART and TPT initiation in relevant clinics e.g TB, STI, OPD, KP service provider	X	X	VCT counsellors, Pharmacy	% of clinics integrating ART and TPT as part of their services by 2023	100% of TB, OPD, KP service providers include ART and TPT initiation		
6. Scale up and strengthen community support system for	X	X	HECOPAB and VCT/counselors, M&E	% of clients adhering to treatment and remaining in care	75% increase in community support system for monitoring		

monitoring adherence and retention of clients					adherence and retention of clients by 2023		
7. Strengthen the monitor and support to ART adherence and client follow up	X	X	MOHW - TB/HIV program officials	Increase the monitoring and support to ART adherence and client follow-up	100% of patients on ART documented and followed up in the community.		
8. Pilot innovative treatment modalities of HIV/STI among KPs and other high-risk groups	X	X	VCT/adherence counselors/ M&E	# of KPs and other high risk groups accessing innovative treatment modalities of HIV/STI annually	100% of KPs and High risk groups identified receive innovative treatment modalities		
UNIT: Maternal and Child Health							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Early Childhood Commission established	X		MOHW MOECST MHDFIPA	ECD Commission established	ECD Commission established in 2022	P. Emoluments 375,000 / year Van – 90,000 Fuel – 12,000 / year	
2. Home visiting program for pregnant women and young children established	50% PW & C reached	95% PW & C	MOHW MCH	# of home visits for pregnant women and young children annually	95% of pregnant women and children in need are followed up as per guidelines 300 ECD officers	P. Emoluments 2.5 million BZD/year Operational cost 500,000/year	
3. Women 30 years and older screened for HPV	5%	15%	MOHW Women groups	% of women 30 years and older screened for cervical cancer	15% of women 30 years and older screened for cervical cancer	HPV testing machine 46,000 BZD HPV test consumables 44,000 BZD Education campaign 30,000	
4. Thermocoagulators available for treatment of precancerous lesions	10 TC	X	MOHW OBYGYN's	% of women treated for precancerous lesions # Districts equipped for treating precancerous lesions	95% of women with precancerous lesions that met criteria to be treated with thermocoagulation are treated 10 TC IN 6 Districts	30,000 BZD – equipment 10,000 BZD training	
5. COVID 19 vaccination campaign implemented	60%	70%	MOHW	% of the eligible population vaccinated against COVID-19	70% of the eligible population vaccinated against COVID-19	300,000 / year	

6. Routine vaccination coverage increased	95%	95%	MOHW Communities	% increase of vaccination coverage achieved and maintained	95% of vaccination coverage achieved and maintained	1.2 million BZD / year for procurement of biologicals and materials and supplies 2 million – COVID 19 vaccines 2 walk in coolers 200,000 Refrigerators 150,000	
7. Micronutrients supplementation provided to women and children	50%	75%	MOHW families	% target population receive micronutrients	75% target population receive micronutrients	100,000 BZD / year	
8. Mother to child transmission of HIV and Syphilis reduced to zero	2%	0%	MOHW Pregnant Women with HIV / Syphilis	% MTCT of HIV and Syphilis	0% MTCT of HIV and Syphilis	70,000 BZD / year for supplements, shipping and processing of HIV DNA PCR samples	
9. Pregnant women received prenatal care early and complete	60%	75%	MOHW CHW Communities	% of pregnant women with early prenatal care	75% of pregnant women with early prenatal care	200,000 forms 5,000 pregnancy test 8,000 urine test strip	
10. Adolescent health strategy implemented	5%	15%	MOHW MOECST MHDFIPA	% of adolescents report receiving services	15% of adolescents report receiving services	50,000 Training 50,000 publication manuals	
11. Contraceptive use prevalence rate increased	54%	60%	MOHW Women Communities	% contraceptive use prevalence rate	60% contraceptive use prevalence rate	450,000 BZD / year	

UNIT: Regions and Nursing

ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Improve malaria passive surveillance by 30% in each health district. Develop target by units/health facility.	X	X	Regional Manager	% of health regions increase malaria passive surveillance by 30% of 2021 baseline, by the end of 2022.	100% of health regions increase malaria passive surveillance by 30% of 2021 baseline, by the end of 2022.		MOHW HQ
2. NHI primary care services should include malaria passive surveillance as a KPI.	X	X	Primary care coordinator,	% NHI primary care facilities instituting malaria surveillance KPI for 2022	100% NHI primary care facilities institute malaria surveillance	Funds for passive surveillance available	

			Chief Medical Officers	and 2023 performance mechanism.	KPI for 2022 and 2023 performance mechanism.		
3.Integrated risk communication plan implemented for NCDs, and community environmental health .	X	X	Health Educator	% Health districts with integrated risk Communication Plan developed and implemented for NCDs and community environmental health.	By the end of the second quarter of 2022 communication plan developed and by the end of 2022 training and implementation of the plan in all health districts.	\$5,000	
4.Integrate COVID-19 vaccine campaign into regular vaccine program	X	X	Public Health Nurse	% Covid-19 vaccine campaign integrated into regular vaccine program		\$14,000	
5.Sensitization of the education department/ schools on infection control, WASH, COVID-19 prevention measures	X	X	Communication Unit	% of persons sensitized on infection control, wash and COVID-19 prevention measures	Four refresher sessions conducted with each school over the 2 year period.	\$5,000	
6.National Campaign for early prenatal care and promotion of family planning	X	X	MCH TA	National Campaign developed by the end of 2 nd quarter of 2022 and implementation at all regions by third quarter of 2022 and sustained into 2023.			

STRATEGIC OBJECTIVE 2: Strengthening the Organization and Management of Health Services

EXPECTED OUTCOME: Effective governance structures for community and provider institutions implemented

UNIT: Licensing Authority, Policy and Planning Units, Foreign Service Office

ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1.Development, revision & monitoring of policies, standards, guidelines, cooperation agreements etc. (orientation manual, referral policy, care protocols, pharmacy standards, bilateral agreements)	X	X	L&A Director, PAPU Director, FSO	# of Policy, standards, guidelines, audit completed	5 Policy documents completed by Oct 2022	\$12,000	Existing bilateral agreements and cooperations
2.Develop & execute national & local orientation guidelines and plans	X	X	L&A Director, PAPU Director	1.# Revised orientation guidelines	100% new employees trained with	\$12,000	international

				2. # new employees trained with orientation guidelines	orientation guidelines annually		counterparts
3. Enhance collaboration, and develop communication strategies to enhance the effectiveness of health care service	X	X	PAPU Director, Communication Unit, HODs	# communication strategies developed	Communication strategies completed by Oct 1 st 2022	NIL	
UNIT: ALLIED HEALTH, Regions & Nurses, MCH							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
Filling of vacancies	X		MOHW HQ	% of vacant post filled by end of 2022	100% vacant post filled by December 2022	\$216,608	GOB
Chief medical staff is a full time post	6 CMS		CEO	% of hospitals – public sector has a full time post for Chief medical staff	100% of Public Sector hospitals have a full time post for Chief medical staff 3 Community and 3 regional hospitals	\$55,000 / year (specialist)	
Creation of additional post for key health personnel for existing and new programs. - 74 new nurses - specialist and EMTs. - Primary Care Coordinator, epidemiologist, AO, FO and Nutritionist , for 100% of health Districts. -Quality Improvement Coordinator	75%	100%	AO, CEO Regional Managers DDHS Nursing	Develop proposal for creation of new post for key health personnel and submit to MPS by the end of third quarter of 2022. % of new post created, approved and filled	100% of new post approved and filled by 2023 74 new nursing post approved and filled 75% specialist post by 2 nd Q 2022, 100% by 2023	Quality Improvement Coordinator Pay scale 16-23	
Every clinical unit have an updated operational manual	40%	90%	RHM, Head of units Consultant	% of clinical units with an updated operational manual	90% of clinical units have an updated OM by the end of 2023	Consultancy 30,000 BZD / year	
UNIT: Vector Control							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Full implementation of malaria microscopy QA network	X	X	Malaria reference lab; vector control TA	Malaria reference lab fully implementing QA program as per guidelines	Malaria QA manual completed and distributed by 2022 Malaria microscopy QA program full operational by 2023	\$15,000/Y RMEI Project funds	

UNIT: Health Education and Community Participation Bureau (HECOPAB) NDACC, Nutrition Unit, Mental Health Unit and Dental Unit							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1.Approval and Implementation of the restructuring of NDACC	X		PAPU Director	NDACC restructured and communicated to stakeholders	NDACC restricted by 2 nd Q 2022	\$10,000	
2. Strengthening of the Mental Health Program by filling available posts and advocating for the creation of new posts	X	X	MOHW HQ MPS	% of vacant post filled # of new post created	100% of vacant post filled (4 in 2022 & 1 in 2023) 1 new post in 2022 & 2 new post in 2023 created	Salaries available under MHP Cost Center	
3. Strengthening of the CHW Program by training and certifying new cadre of CHWs Integration of the CHW Program into the MOHW as permanent staff	X	X	MOHW HQ Regions	% of districts with trained CHW # of CHWs employed as permanent staff, MOHW	130 (80 in 2022 and 50 in 2023) new CHW trained to work in districts CHWs integrated as staff of the MOHW	Training-\$65,000 Stipend CHWs-Regions budgets GOB (\$2,268,000.00 as proposed in Draft Cabinet Paper)	
4. Strengthening of the HECOPAB unit by filling available posts	X	X	MOHW HQ Regions	% of available post filled	100% post filled (3-2022 & 1-2023)	Salaries in current budget	
UNIT: Environmental Health							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
National implementation of new norms and standards by public Health Inspectorate for: Bottled Water Operations; Fish Vending; Food Stalls; Drinking Water	50%	100%	Senior Environmental Health Officer	% of norms and standards utilized in establishments annually.	100% use of Standards in establishments (all food facilities) inspected by 2023	MOHW	
UNIT: HIV/TB							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1.Improved collaborative efforts between the MOHW and the Regional team to strengthen the delivery of the programs targets in line with the NSP	X	X	RMT and MOHW	% of program targets reached, identification of collaborative efforts between the MOHW and the regional team	100% of program targets in NSP met		

2. Collaborate and support for the creation of District surveillance team to include the key actors (Infection control team, PHN, lab, etc.)	X	X	IC team, PHN, lab, surveillance officer	District surveillance team created	District surveillance team created (inclusive of infection control, PHN, Lab) by 2022		
3. Strengthen the autonomy of the RMT in resolving and implementing the necessary interventions to redress issues directly related to the provision of services at their local and regional level	X	X	RM	Revision of ToR for RMT to function efficiently			
STRATEGIC OBJECTIVE 3: Achieving Greater Equity, Cost Effectiveness and Efficiency in the Allocation and Use of Health Resources (Improved Health financing to achieve Universal Health Coverage)							
EXPECTED OUTCOME: Equity, Effectiveness and Efficiency in the Allocation and use of Funds Improved							
UNIT: Licensing Authority, Policy and Planning Units, Foreign Service Office							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget/yr	Support
1. To develop a cost effective secondary health care package to enhance universal health care coverage & equity	X	X	PAPU Director	% of support service items included in a package available at all times by level of care annually	95% of service items included in package 2022	\$30,000	Regional & International Partners
2. Strengthen the monitoring of patient bill of rights, referral system, complaint systems, peer review, incidents, occupational safety, etc. (local level lack of QI Response workplan	X	X	L&A Director	# of systems in place to monitor patients' bill of rights	95% of systems in place by Dec 2022	\$4,000	International Counterparts
3. Strengthen the administrative processes & human resources within the health regions to improve administrative processes	X	X	FSO PAPU Director	# SOPs developed for Administrative processes	100% of SOPs developed by 2Q 2022	XX	Foreign human resources
UNIT: Vector Control							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Streaming operational and RME project execution plans to ensure efficient expenditure of recurrent budget and grant funds	75%	100%	RMEI Project coordinator	% of RMEI Project activities implemented	100% execution of RMEI funds and completion of activities by 2023	NIL RMEI Project funds	PAHO, IDB
2. Collaborate with IDB/PAHO on the development of C19RM work plan to fill financial gaps for malaria	50%	100%	MOHW	C19RM work plan developed	100% execution of C19RM funds by 2023	NIL	IDB, PAHO

to ensure the prevention of transmission and reintroduction							
UNIT: Regions and Nursing							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Submit for approval an increase in operational budget allocation based on services.	X	X	CEO, FO HQ	% Increased operational budget allocation based on services	15% Increase for line item operational expenditure, for fiscal year 2022-2023 in each region	\$60,00	
Submit for review a compendium of allowances	X		DDHS Nursing	Proposal for update of compendium of allowances submitted to Joint Staff MPS.	By the end of the second quarter of 2022 proposal for update of compendium of allowances submitted and approval received from MPS.	To be identified	
Advocate for removal of overtime cap for healthcare workers	X		CEO, Minister of Health	overtime cap for nurses removed	By 2 nd Q of 2022 overtime cap for nurses removed		
2. Regions with a budget to respond to COVID-19	X	X	Regional Managers	# Covid -19 activities implemented annually	Regional Budgets for Covid-19 utilised efficiently in 2022 and 2023	Regional budget	MOHW HQ
UNIT: Dental Unit							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
Include and continue to consult with the Dental Department when procuring Pharmaceutical and material	X	X	MOHW tendering committee, Dental department	# of meetings held to consult on procurement	Quarterly meetings with tendering committee and dental department to procure pharmaceuticals and materials for 2022 and 2023.	\$5,000	
STRATEGIC OBJECTIVE 4: Strengthen Capacity for Human Resources for Health Planning to Meet Present and Future Health Sector Needs							
EXPECTED OUTCOME: The Availability of a Cadre of Well Trained and Competent Health Workers with the Capacity to Deliver Quality Health Services							
UNIT: Licensing Authority, Policy and Planning Units, Foreign Service Office							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Develop human resource succession plan	X		L&A Director FSO PAPU Director	HRH database that supports succession planning developed	2 nd Q 2022		local & international personnel
2. Continued execution of indicators outline on the Belize Human Resources for Universal Health Strategic Plan for 2022	X	X	PAPU Director AO	% of Indicators outlined in plan by 2022	90% of indicators by Dec 2022	\$5,000	

UNIT: Vector Control							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1.Supporting CME and CNE through the updating of training modules, and coordination of trainings	X	X	Vector control TA and DDHS office	% of target audience trained in dengue & malaria matters	100% targeted audience receive training at least 1 training in dengue & malaria By 2023	\$12,000/Y RMEI Project funds	
2. Develop training program for vector control	X		Vector control TA	# of training modules developed	Updated malaria & dengue training modules by 2022	Vector control reccurent budget	
UNIT: Health Education and Community Participation Bureau (HECOPAB), NDACC, Nutrition Unit, Mental Health Unit, Regions							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1.Develop the training plan	X		Regional Managers	Training plan developed	Training plan developed by 1 st Q, 2022		
2.Conduct Customer service training for staff.	50%	100%	Regional Managers	% of the frontline workers received customer service training.	100% of the frontline workers received customer service training by the end of 20223		
3.Field Epidemiology Training Program	5	10	MOHW	% of Field epidemiologist trained	100% of field epidemiologist trained (5 in 2022 & 10 in 2023)	\$108,725	COMISCA MOHW
4. Intermediate to Advanced query building training for health data analysis	10	10	MOHW, Senior Biostatistician	% of persons trained in Intermediate to Advanced health data analysis by end of November 2023	100% persons trained in health data analysis (10 in 2022 & 10 2023)	\$11,000	
5. Training for a cohort of Rural Health Nurses	X	X	DDHS Nursing	# of rural health nurses trained	Training for a cohort of Rural Health Nurses initiated by August 2022.	\$350,000	
6. Provide continued capacity building in the following areas: substance misuse programs; outreach services, monitoring and evaluation; research and information;COVID-19 & Surveillance; Mental Health; Wellness ; Prevention & Management of NCDs Infectious Diseases (HIV/AIDS); WASH	X	X	MOHW, Regions, DHEs, and TAs from the various units	% of staff receiving ongoing training annually	100% MOHW implementing staff at regional level receiving ongoing. training	\$25,800 NDACC \$8,000	

7. Psychosocial support programs for staff	X	X	RM, Mental Health Unit, Primary Care Coordinators	% of staff benefiting from psychosocial program annually	Structured psychosocial support program established by the end of the first quarter of 2022		
8. Restructuring of the processing of HR request and restructure the Records Management Unit	X		Records Management	Records management Unit restructured	By the end of the 3 rd Q, 2022 IT unit develop a digital platform for records management and restructuring of the management unit at HQ.		
9. Digitalize the HRH portal for improved management, recruitment processes	X		Director IT	Increased management and recruitment	HRH Portal digitalized by 4 th Q 2022		
10. Review and amend the Circular 6 of 2021	X				By the end of the second quarter proposal for the amendment of the circular 6 of 2021		

UNIT: HIV/TB

ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Facilitate training of counselors in partner notification			HIV Coordinator	% HIV of counselors trained in partner notification annually	100% of HIV counsellors trained in partner notification by 2023		consultant, PAHO technical support
2. Facilitate training of healthcare providers to improve retention to care and adherence to ART treatment			HIV Coordinator	% of healthcare providers trained to improve retention to care and adherence to ART treatment	100% of healthcare providers trained to improve retention to care and adherence to ART treatment		consultant, PAHO technical support
3. Train Staff in quantification, ordering of ARVs and laboratory reagents, and monitoring of stock status to avoid stock outs			HIV Coordinator	% of staff trained in quantification, ordering of ARVs and laboratory reagents, and monitoring of stock status to avoid stock outs	100 % of staff trained in quantification, ordering of ARVs and laboratory reagents, and monitoring of stock status to avoid stock outs by 2023		consultant, PAHO technical support
4. Diversity training for HCP and Exchange program (user of service and provider of service)			HECOPAB, FSO	% Staff and clients involved in HCP and exchange program receive diversity training	100% staff and clients from HCP and Exchange program receive diversity training		

5. Train and conduct refresher training on Quality assurance protocols and standard of operating procedures	X	X	L&A Director	# of persons receiving refresher training on Quality assurance protocols and standard of operating procedures	100% of relevant persons trained/retrained in Quality assurance protocols and standard of operating procedures		
UNIT: Maternal and Child Health							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1.Two cohort of Rural Health Nurses Trained	One cohort	One cohort	MOHW, MOF UB	# of rural health Nurses trained by 2023	40 RHNs trained by the end of 2023 (20 each year)	2 million BZD	
2.Scholarships for basic specialties secured	50%	50%	MOHW MOECST	# basic specialists of each at regional hospitals	4 basic specialists of each at regional hospitals		
STRATEGIC OBJECTIVE 5: Strengthening of the Belize Health Information System to Support Evidence based Planning in the Provision and Delivery of Health Care							
EXPECTED OUTCOME: The Health Status of the Population Accurately Described and Monitored							
UNIT: Licensing Authority, Policy and Planning Units, Foreign Service Office							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget/yr	Support
Support provided to the IT Unit to roll out the BHIS to four rural health facilities	X	X	BHIS Director, PAPU Director, L&A Director, FSO	# of BHIS introduced into rural health facilities	BHIS in 4 rural health facilities by 2 Q 2022	\$150,000	
UNIT: Vector Control							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget/yr	Support
Provision of access to BHIS and training for vector control supervisors - supply chain management and basic patient information to support case investigation	X	X	Vector control & BHIS Heads	% of vector control district offices with BHIS installed	100% BHIS Access installed in all 8 vector control offices countrywide by 2023	Vector control recurrent budget	
UNIT: Health Education and Community Participation Bureau (HECOPAB) Nutrition, Epi Unit, Dental							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1.Training & Support Public/Private Sector in COVID Response, Data Collection, Data Reporting (Go.Data, POE app)	X	X	EPI UNIT- Biostatistician	% Public/Private sector supported and trained in COVID response, data collection & reporting by 2023. Testing on the use of GO.DATA	100% Public/Private sector supported and trained in COVID response, data collection & reporting by 2023.	MOHW \$3,800	

2. Improve use of BHIS for Surveillance, data collection and reporting for a) nutrition indicators b) NCD Surveillance & Communicable c) Mortality	X	X	Nutrition Officers, Data entry clerks, Biostatistician Epidemiologist	% of related data collected and entered in BHIS , for Surveillance strengthened	100% of related data collected and entered within BHIS, surveillance strengthened	MOHW \$27,800	CARPHA
3. Conduct refresher trainings for data collection and anthropometric measurements, dental	X	X	IT, Nutrition Officers, Data entry clerks dentist	All relevant staff trained in use of BHIS and proper data collection and measurement	100% relevant persons trained and refresher trainings completed by 2023 (2/yr) Lovell denture 2 days course conducted	MOHW Dental \$10,000	

UNIT: ALLIED HEALTH, MCH

ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Creation of a BHIS Steering Committee	X		MOHW NHI, KMHM	BHIS Steering Committee in place and functioning	BHIS Steering Committee in place by 1 st Q 2022		CITO, Private
2. Strengthening of the existing BHIS and Completion of the modules	X	X	IT, EPI, DHSA, DPHW	% of BHIS areas strengthened including new modules	100% of facilities including NGOs BHIS updated with necessary information and new modules by 2023	\$75,000	
3. Expansion of BHIS	X	X	IT, FSO, DHS, PMU	# of institutions benefiting from the BHIS expansion	BHIS expanded to 6 new institutions by March 2022	\$200,000	
4. Health facilities with access to internet use the BHIS	80%	95%	MCH IT Unit RHM	% of health facilities with access to internet utilizes the BHIS	95% of health facilities with access to internet utilizes the BHIS	New /replace hardware/ Software	

UNIT: Environmental Health

ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Improve national capacity of Health Response Team to conduct rapid detection, assessment, and response to health emergencies.	50%	50%	MOHW HQ Regions	% of Regional Health Response Teams trained on DRR. % of EAP Plans updated annually	100 % of Regional Health Response Teams trained on DRR.(reports produced) by 2023 100% of EAP Plans updated annually (reports -preparedness index for health; Emergencies & Disaster)	\$10,000	PAHO Govt Ministries- One Health

2. Application of STAR Tool in Regions			HDC/Regional Managers	# of trainings conducted	100% of assessment conducted in districts by December 2022	MOHW PAHO	PAHO
3. Establish Data base system for the collection of data to inform decision making: National Data base system installed for collection of Environmental Health data for the following technical areas: Food Safety; Water Quality; Rabies; Public Health Investigations	50%	50%	BHIS PHI	% of database system installed and operational	100% of PHI knowledgeable and using the data bases. FS & Water Quality data base operational by end of December 2022 Rabies and Public Health Investigation data base operational by end of 2023.	MOHW	

UNIT: HIV/TB

ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Complete the review of the BHIS for comprehensive monitoring and reporting for HIV/STI/VH and TB	X	X	IT, MOHW	% of review of the BHIS for comprehensive monitoring and reporting for HIV/STI/VH and TB completed	100% of review of the BHIS for comprehensive monitoring and reporting for HIV/STI/VH and TB completed by 2022		
2. Review the integrated patient monitoring system to ensuring that all data variables are captured and incorporated into the BHIS for comprehensive reporting for HIV/STI/VH and TB	X	X	M&E Officer	% Review of the integrated patient monitoring system to ensuring that all data variables are captured and incorporated into the BHIS for comprehensive reporting for HIV/STI/VH and TB completed	100% review completed by 2022		
3. Conduct training on site specific data analysis for service delivery improvement by the CSO hubs	X		M&E Officer	% of CSOs trained in site specific data analysis for service delivery improvement	100% of CSOs trained in site specific data analysis for service delivery improvement by 2 nd Q 2022		
4. Develop tools, to collect data and monitor the PrEP pilot initiative	X		M&E Officer	Monitoring tool developed to collect PrEP data			
5. Generate data on the socio-economic factors and other social determinants that correlates with	X	X	Biostatistician, M&E officer	% of socio-economic indicators correlating with	Socio-economic and risk assessment study conducted by 1 st Q 2023		

risk for HIV/STI/VH and TB and use data for policy development to strengthen implementation across sectors and disciplines.				increased risk for HIV/STI/VH/TB			
6. Generate cascades for different populations (KP, general population, PrEP user, TB)	X	X	HIV Director M&E Officer	# Cascades developed for different populations			
7. Conduct ongoing quarterly supportive supervision for data quality			M&E Officer	Quarterly monitoring tools in place	Quarterly supervision documents		
STRATEGIC OBJECTIVE 6: Development of Quality Improvement Framework to Ensure Stakeholder Accountability							
EXPECTED OUTCOME: Quality Improvement Framework for all Levels of the Health System Designed and Implemented							
UNIT: Licensing Authority, Policy and Planning Units, Foreign Service Office, Regions & Nurses, Vector Control							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
Develop an integrated quality improvement framework and monitoring tool to ensure quality use of protocols	X	X	L & A Director Regional Managers CMO Nursing Administrator	Approved quality framework	Draft completed by 1 ST Q 2022	600,000 BZD year 1 450,000 BZD/year	
Reactivation and full function of quality committee at facility level	X	X	L & A Director	1.% Quality Committees functional (evidence of minutes of meetings) 2. % of quality committee reports submitted to L&A Unit	Quarterly Meetings 100% Reports	NIL	
Develop SLAs/KPIs and Conduct quarterly performance measurement of all sites - HTS, TB and STI services at both private and public -vector control	X	X	PAPU Director HIV Director Vector control	% of sites offering HTS, TB and STI , vector control services monitored quarterly (private and public)	100% of public and private sites offering HTS, TB and STI , Vector control services monitored quarterly	NIL	
Weekly evaluation of critical maternal admissions. (Establish a core team for	X	X	MCH TA Hospital Directors	% of critical maternal admissions reviewed and managed efficiently	100% of critical maternal cases reviewed and managed		

evaluation of the critical maternal cases)					efficiently at the three regional hospitals		
Standardize performance agreement for each category of staff	X	X	AO, PPMU	Performance agreement developed for each category of staff.	100% of staff receive and agree to a standardized performance		
Implement infection prevention measures including safe disposal of HTS supplies and waste products at all HTS outlets including expired medication	X	X	Infection Control Officer	% of infection prevention measures implemented in 2020 and 2023.	100% of relevant infection prevention measures are implemented- including safe disposal of HTS supplies and waste products at all HTS outlets including expired medication		
UNIT: Environmental Health							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
Development of M &E tool for Restaurant Certification Program	50%	100%	BHIS Chief Environmental Health Officer	% of EHOs trained to assess restaurants for certification % of public sensitized about the restaurant certification program.	100% EHOs trained by 2022 National Sensitization Campaign Conducted. Public Health certifying at least 100% of restaurants nationally by 2023	MOHW	
STRATEGIC OBJECTIVE 7: Efficient and Effective Health Infrastructure							
EXPECTED OUTCOME: Physical Health Environment for Health Care Delivery to Clients Improved							
UNIT: Licensing Authority, Policy and Planning Units, Foreign Service Office							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Develop a health infrastructure review committee	X		L& A Director, PAPU Director	Health Infrastructure Review Committee developed and functional	Dec 2022	NIL	
2. Develop a national procurement policy for MOHW	X	X	L& A Director, PAPU Director, NEMC Director,	National procurement policy in place	By March 2023	\$70,000	CMS Director, Pharmacy TA, CML Director, MOF
UNIT: Vector Control							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget/yr	Support
1.Support improvement of office space and storage facilities for vector control supplies in all districts	50%	50%	Vector control & PMU	% of district offices with adequate storage facilities	100% of all vector control district offices with adequate storage facilities by 2023	\$100,000 EMMIE funds	

2. Procurement of office building and vector control office equipment to improve efficiency, data capturing and reporting countrywide	75%	100%	Vector control TA & PMU	% of adequately equipped vector control offices	100% of all vector control district offices adequately equipped by 2023	\$129,000 RMEI/C19R M Project budgets	
3. Updating of equipment, maintenance and servicing guidelines	X	X	Vector control TA	Malaria maintenance guide updated	100% Updated vector control equipment maintenance guidance by 2023	\$2,000	
UNIT: ALLIED HEALTH							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Creation of procurement committee for mission critical assets	X		DHS, TA,	Procurement Committee for mission critical assets created and functioning	ToR for Procurement Committee completed and Committee meetings convened by 1 st Q in 2022	\$15,000	
2. CMS for management of mission critical assets	X	X	NEMC, TA, MS, MM	% of mission critical assets managed	Mission critical inventory including history completed by June 2022	\$234,000	
3. Construction of a CMS Warehouse	X	X	PPMU	CMS Warehouse constructed and handed over	Construction of CMS Warehouse completed in 12 months and handed over by 1 st Q 2023	\$2,670,600	
4. Procurement of a Heavy Duty Cold Storage Cargo Truck	X	X	NEMC	Heavy duty cold storage cargo truck ordered and delivered	Heavy duty cold storage cargo truck received by 1 st Q 2023	\$130,000	
5. Procurement of Computers for Technical Staff (3) and support staff (6) along with 2 Network printers	X			# of computers and printers received and functioning by 2022	9 computers and 2 printers ordered and received within 6 months, by 2022.	\$37,500	
6. Provide necessary equipment and supplies for DHEs and CHWs	50%	50%	MOHW HECOPAB	% CHW with full equipment	100% CHWs fully equipped	\$90,000	Partners
UNIT: Regions and Nursing							
ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
1. Improve infrastructure for emergency rooms in all health facilities.	X	X	FO, CEO	# of Emergency rooms with improved infrastructure	By the end of 2023 at least three of the emergency rooms upgraded.	Funds required	
2. Upgrade the capacity of NRH maternity unit	X	X	Regional Managers	% Increase capacity of NRH maternity unit	By the end of the 2023 NRH maternity unit upgraded.	MOHW HQ	
3. Increase the line item for operational cost for all health districts. (Maintenance).	X	X	Regional Managers	% Increase budget for maintenance for health regions	100% of health regions have an increased budget for maintenance in 2022 and 2023		

4. Timely delivery of supplies and reduce stock out by 50% of essential supplies	X	X	CMS	% Reduction in stock outs annually % increase in delivery time	Stock out of medical supplies and pharmaceuticals reduced by 65% within the fiscal year 2022-2023		
5. Optimize infrastructure and equipment maintenance to ensure operational safety	X	X	M&E EPI Unit head	% of equipment & hardware maintained	100% equipment & hardware maintained	\$8,350	
6. Hospitals have access to medical equipment and supplies	80%	90%	RHM, CMS CML, PPPMU	% of medical equipment and supplies available	90% of medical equipment and supplies available	5 million in medical equipment / year Medical supplies ?	

UNIT: Dental Unit

ACTIVITY	2022	2023	Responsible	Indicator	Target	Budget	Support
Upgrade Belmopan dental Clinic	X	X	CIF, MOHW Headquarters	Belmopan dental Clinic upgraded by 2022	Installation of Drainage, Electrical, Air pressure and running water -Install all commodities at Belmopan dental Clinic by 2022 - Servicing Dental Clinics	\$50,000	
4 Dental Chairs purchased , installed and maintained	X		MOHW HQ, NHI, Dental Dept, Maintenance	# Dental chairs purchased and installed # maintenance personnel trained to install and maintain chairs	Dental Chairs installed in San Pedro, Orange walk, San Ignacio and Punta Gorda by 2022	\$7784.42 x 4= \$31,137.68 plus tax handling, costs. M-\$3,000	



CHAPTER 4-References:

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3. World Health Organization. *Operational Planning: Transforming plans into action*. Strategizing national health in the 21st century: a handbook. Chapter 6. Available from: <https://apps.who.int/iris/bitstream/handle/10665/250221/9789241549745-chapter6-eng.pdf;sequence=20>
4. Pan American Health Organization. *Integrated Health Service Delivery Networks: Concepts, Policy Options and a Road Map for Implementation in the Americas*. Washington, D.C, 2011 (SERIES: Renewing Primary Health Care in the Americas No.4)
5. The People's United Party. *BLU #Plan Belize manifesto 2020 – 2025*. Belize, Central America, November 2020
6. The Government of Belize. *#Plan Belize - "Leading for Sustained Growth and Prosperity for All Belizeans"*. Belize, 2020

APPENDICES

Appendix 1: Monitoring and Evaluation Implementation Framework for Operational Plan 2022-2023

Monitoring and Evaluation (M&E) are effective tools to enhance the quality of planning and management. Monitoring assist managers in understanding whether the implementation is progressing as scheduled and ensure that inputs, activities, outputs, and external factors are proceeding as planned. Evaluation is a tool to help managers assess to what extent the activities have achieved the strategic objectives set forth in the Operational Plan 2022-2023.

The development of indicators is not an end in itself but merely to observe and document the spatial distribution of the thing being measured. The reason indicators are used in public health is to navigate decision-making for health. The ultimate goal is to improve the health of the Belizean population and reduce unjust and preventable inequities.

The main objectives are:

- To promote accountability to government and the community;
- To ensure the national health priorities, services, outputs and outcomes are achieved;
- To articulate the agreed activity requirements and measure their status of completion.

The following monitoring & evaluation framework will be a key component of the Operational Plan 2022-2023. It will monitor efforts aimed at the prevention of disease and promotion of wellness, along with the care and support of all people including key populations. The M&E framework will facilitate reporting on a wide cross section of indicators and targets from various departments/component areas of the MOHW.

Where possible the core set of indicators will also be utilized to fulfil regional and international reporting requirements such as the Sustainable Development Goals (SDGs), International Health Regulations (IHR), the Joint External Evaluation tool (JEE), Caribbean Regional Strategic Framework for 2019 – 2025, PAHO/WHO hepatitis B and C, malaria elimination initiative, PAHO elimination of mother to child transmission initiative, UNAIDS Global AIDS Monitoring (GAM) including the fast track commitments of 90-90-90 and 95-95-95 among others.

INDICATOR MATRIX TABLE

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
STRATEGIC OBJECTIVE 1: <i>Integrated Health Services Based on Primary Health Care for improved Health outcomes</i>						
EXPECTED OUTCOME: Increased coordination in health service delivery among providers and stakeholders to ensure continuity of care						
Legislation/Policy/Development						
1. Development & reactivation of key committee and councils (quality committee & national social council)	# of ToRs developed 2.Functional Quality Committee & Council in place	ToR developed and Quality, National Social Council and other relevant Committees are developed, dormant Committees reactivated with key persons and functioning.	100% of Committees & Councils in place by 2022	End of 2022	Committees and councils monthly reports	L&A Director PAPU Director
2. Development of a cost analysis for the drafted legislations	Cost Analysis completed for drafted legislation	A cost analysis is conducted for the drafted legislations in the MHW	Cost analysis report submitted by the end of 2022	End of 2022	Cost analysis report	NACC, Planning Unit,
3..Quality Improvement- revision of current SOPs and development of new SOPs	% of current and new SOPs revised or developed	Numerator: # current SOPs revised and relevant new SOPs developed Denominator: All SOPs required	100% of current SOPs revised and new SOPs developed by 2023	Annually	Manual of SOPs	
4. Early Childhood Commission established	ECD Commission established	ToR for ECD developed and the Commission is established with key persons	ECD Commission established in 2022	End 2022	Reports from the ECD	MOHW MOECST MHDFIPA
Communication/Campaigns						
1. Strengthen international collaboration, communication and recruitment process	# of MOUs developed with International Partners	Memorandum of Understanding is developed with international partners to strengthen collaboration in relevant areas of Health and Wellness	1 st Q 2022 100% by Dec 2022	Annually	Signed MOUs	FSO
2. Preparation of and submission for malaria free certification to WHO	Malaria elimination report completed & submitted to WHO	Local transmission of all human malaria parasites has been interrupted	Report submitted to WHO by 1 st Q 2022	2 ND Q 2022	WHO acknowledge	CMO

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
		nationwide for at least 3 consecutive years, surveillance and response system in place			receipt of Malaria elimination report	
3. Strengthen the Community Platform Strategy- piloting in pending communities in Northern, Western, and Southern Districts (SMI)	# Communities participating in platform strategies # volunteers forming platforms	Communities have a platform strategy engaging at least 10 volunteers from each community	70% of the selected communities fully functional and participating by 2023 10 Volunteers/community	Annually	Community Platform Report	HECOPAB, CHW, RHNS
4. Observance of the regional & International Health Days Communication Activities/Health Promotion : Coordinate Media Appearances for observance of Regional and Intl Days, particularly for COVID-19; Provide Health Education/trainings; Printing of Health Education Materials ; Airing of Ads and PSAs	# Health days commemorated % of persons reached with health promotion messages	The MHW observe and commemorate a number of regional and International Health Days Numerator: # of persons reached with health messages Denominator: Total # of population targeted X100	Manual of Health promotion activities produced and implemented 90% of health activities implemented by 2023	Annually	List of Health days observed	Community Units & Tas
5. Development of Communication/Marketing Plan implemented with a focus on NCDs and the Risk Factors; community environmental health	% Health districts with integrated risk Communication Plan developed and implemented for NCDs and community environmental health.	Communication/Marketing Plan clearly define all prominent NCDs, environmental health and their risk factors, and campaign implemented in all health districts	Communication manual in place by 2022 Communication Plan implemented in 2022 & 2023	Annually	Survey Report	NCD Coordinator Health Educator

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
6.National Campaign for early prenatal care and promotion of family planning Pregnant women received prenatal care early and complete	National Campaign developed, implemented at all regions and sustained into 2023. % of pregnant women with early prenatal care	Pregnant women receive early prenatal care and important information on family planning (spacing of children, contraceptive use etc)	National Campaign developed by the end of 2 nd quarter of 2022 and implementation at all regions by third quarter of 2022 and sustained into 2023. 75% of pregnant women with early prenatal care	Annually	MHW HQ, Regional anti-natal report	MCH TA MOHW CHW
7.Strengthen partnership with the private medical sector to improve referral protocols (BMA, BFLA, CSO-hub),	# of referral protocols received from private sector	MHW partner with private medical sectors, shared referral forms to improve the number of persons in need of specialist care referred	75% increase in referral protocols received from BMA, BFLA, CSO-hub and other private sector agencies in 2022 and 2023.	Annually	Documentation of all referrals	DHS/CEO M&E
8.Intensify and monitor anti-stigma and discrimination in the health and allied health sectors	% HCW and community practicing anti-Stigma and non-Discrimination measures	Anti stigma & discrimination campaign promoted in the health, allied health sectors and communities Numerator: # persons who received Anti-S&D messages and practice them Denominator: # of persons in population targeted X100	75% HCW and community reached by S&D messages by 2023	Annually	Stigma & Discrimination campaign evaluation report	HIV Coordinator CHW, Social workers
Training/Sensitization/Education/BCC						
1.Development of international, national & health region training plans to address training needs for clinical & non clinical staff	% of training plans developed to address training needs for clinical & non clinical staff	Numerator:# Of training plans developed to address training needs for clinical & non clinical staff Denominator: Total # training plans required to	Q1 2022 National training plans developed 100% all Plans by Nov 2022	Quarterly	Training database	L&A Director PAPU Director FSO

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
		meet training needs for clinical & non clinical staff				
2.Development, updating and revision of health education material and job aid tools (prints, videos, etc	# promotional materials distributed in 6 districts, # video messages aired # persons reached	Health educational/promotional materials developed or updated and distributed in 6 districts to reach persons in the community.	100% units have updated materials distributed by 2023	December 2023	Telephone Survey	Communications Unit, TAs, HECOPAB
3.Conduct nutrition training based on guidelines for management and prevention of under nutrition, (stunting, wasting, underweight)	# persons trained based on nutrition guidelines	Nutrition training is conducted with relevant officers using the guidelines for management and prevention of under nutrition, stunting, wasting, underweight etc.	95% of relevant officers trained in nutrition guidelines by 2023	Annually	Training database	Nutritionist HQ
4.Provide continued capacity building of healthcare staff and police officers in the following areas: Management of mental disorders; mhGap; Psychological First Aid; Stress Management; Workplace wellness; Recognizing Mental Illness, Intervention of high risk situation and current MH situation.	# Persons trained (Medical Officers, CHW, Rural health nurses, Police Officers) on MH topics	Medical Officers, CHW, Rural health nurses, Police Officers are trained in Mental Health topics such as but not limited to: Management of mental disorders; mhGap; Psychological First Aid; Stress Management; Workplace wellness; Recognizing Mental Illness, Intervention of high risk situation and current MH situation.	30% staff trained in MH-2022 40% staff trained in MH-2023 100% All training completed by 2023	Annually	Training database	MH Coordinator Psychiatrist PNPs
5.Training of teachers on mental health topics.	Mental health literacy available in High school curriculum	High school curriculum has a mental health module which teachers are trained to deliver.	100% Teachers trained in MH component by 2023.	Annually	Training database	MH Coordinator MOE focal point

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
	% High school teachers trained in MH	Numerator: # High school teachers trained in mental health Denominator: Total # high school teachers X100				
6.Dental Education program implemented in 80% of all rural and urban schools in children 5-14 years old.	%of children 5-14 yrs in 6 districts receiving dental education	Numerator: # of children 5-14 yrs receiving dental education Denominator: Total # children 5-14 yrs in 6 districts X100	80% of children ages 5-14yrs requiring dental education are able to access it in 6 districts	Annually	Dental records	Dentists at 10 clinics
7.National Annual Dental Workshop conducted	% of dentist that attended the annual dental workshop	Numerator: # of dentist that attended the annual dental workshop (private and MOHW) Denominator: Total # dentist private and MOHW X100	100% MOHW dental staff attend workshop	Annually	Workshop Report	Dentist MOHW
8.Continued implementation of Substance Abuse Prevention Programs: Insight Program, Student Assistance Program, School Drug Week Program, and One Step@ a Time.	% Substance Abuse programs provided at all school levels via all viable platforms, ensuring monitoring and evaluation.	Numerator: # of schools with a substance abuse program at all levels ensuring M&E Denominator: Total # of schools X100	85% of all schools at all levels, urban and rural benefit from programs	Annually	Annual Report	NDACC
9.Continued participation in community and educational fairs.	# Community and educational fairs participated in countrywide to provide information on substance misuse, mental health, and nutrition	Information on substance abuse; mental health; nutrition are included in community and educational fairs.	Participation in 80% of Community and Educational Fairs	Annually	Annual Reports	NDACC, HECOPAB, MH, Nutrition
10.Sensitization of the education department/schools on infection control, wash and COVID-19 prevention measures	% of persons sensitized on infection control, wash and COVID-19 prevention measures	Numerator: # of persons in the educational department and schools sensitized on infection	Four refresher sessions conducted with each school over the 2 year period.	Annually	Evaluation form at end of year	Communication Unit

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
WASH, COVID-19 prevention measures		control, WASH, and COVID-19 prevention measures Denominator: Total # of persons in education department/schools X100				
Surveillance, Monitoring and Evaluation						
1.Strengthen the monitoring of IPC activities nationally to ensure adherence to standards	% of IPC activities monitored	Numerator: # of IPC activities monitored Denominator: Total # of IPC activities x100	Monitoring tools in place by Q1 2022	Annually	Annual report	Director L&A
2.Support strengthening of passive surveillance system for malaria	Annual blood examination rate (ABER)	Number of fever cases in the community monitored through laboratory blood examination and documentation of confirmed malaria cases	7% ABER Increase surveillance by 30% in health regions	Annually	Documented lab information	Regional management teams
3.NHI primary care services should include malaria passive surveillance as a KPI.	% NHI primary care facilities instituting malaria surveillance KPI for 2022 and 2023 performance mechanism.	Numerator: # of NHI primary care facilities instituting malaria surveillance KPI Denominator: Total # of NHI Primary care facilities X100	100% NHI primary care facilities institute malaria surveillance KPI for 2022 and 2023 performance mechanism.	Annually	Surveillance report	CMO Primary care coordinator
4.Assessment of the health sector reform project	Health Sector Reform project Assessment	Health sector reform project is evaluated	Assessment Report completed by 1 ST Q 2022	1 st Q 2022	Assessment Report	Director L&A
5. Strengthen the monitoring and support to ART adherence and client follow up	Increase the monitoring and support to ART adherence and client follow-up	All Patients on ART are monitored and followed up to avoid resistance and drop outs	100% of patients on ART documented and followed up in the community.	Quarterly	HIV surveillance report	MOHW - TB/HIV program officials
Care and Treatment						
1. Prevent reintroduction of malaria a)through surveillance at entry points and as requirement for issuance of work permits	Malaria testing policy - requirement for work permit	All persons require a work permit are screened for malaria	Malaria screening policy set in place by immigration and nationality department by 2023	Annual	Surveillance report BHIS	Immigration and nationality department MOHW

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
b) through delivery of service package to target groups, which include bi-annual indoor residual spraying, distribution of long lasting insecticide treated nets, free malaria testing and supervised treatment	# Local malaria cases	Public health measures include a delivery of service packages (bi-annual indoor residual spraying, distribution of long lasting insecticide treated nets, free malaria testing and supervised treatment) to targetted groups to reduce cases to zero	0 % of local malaria cases			
2.Implement vector control actions to reduce the incidence of dengue to < 3 per 1000 population through an integrated management strategy	Dengue Incident Rate	# of laboratory confirm cases of classical and hemorrhagic cases. Numerator: # new cases in a specific time period. Denominator: Population at risk during that same period of time X 10,000.	< 3 dengue cases per 1000 population	Annually	BHIS	Chief Medical Officer, Vector Control Program, HECOPAB
3. Conduct nutrition consultations based on MOHW referral system	# of persons reached for consultations from referral system	Nutrition consultations are conducted on all clients referred	100% of clients referred are offered nutrition consultations	Annually	Nutrition Records	Nutritionist HQ
4. Develop the integrated Dental/MCH services framework	1.Dental health Educational sessions provided to all pregnant women attending Prenatal clinics 2. Dental screening to all pregnant women referred from MCH clinic.	Dental health education and screening services provided to all women attending the prenatal clinic or referred from MCH clinics	100% of pregnant women referred for dental screening receive services	Annually	Dental records	Dentist at 10 clinics Attached MCH Clinic
5.Increase Mobile Dental Services to the Rural Communities	1. # mobile outreach clinics provided to the	Children 5-14yrs in rural communities benefit	1. Two mobile outreach clinics per month conducted to	Annually	Dental Records	Dentist at 10 clinics

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
	rural schools (children 5-14 years). 2. # Dental Health Education sessions conducted in rural schools	from dental education and care	the rural schools per clinic (=18). 2. 4 Dental Health Educational sessions conducted per month in schools by a Dentist and a dental assistant (=36).			
6. Dental Outreach Clinic conducted to the Department of Correction by Central Health Region	% inmates from the department of correction receiving dental health education and care	Numerator:# inmates from the department of correction receiving dental health education and care Denominator: Total # inmates in the department of correction	100% inmates visiting the clinic receive dental health education and care on a one to one basis (12 clinics/yr)	Annually	Dental Records	Dentist-3 Central region Dental clinics
7. Ensure Core Drugs availability	% of core drugs available and monitored	Numerator: # of core drugs available and monitored Denominator: Total # of core drugs required	100% Core Drugs available by 2023 and monitored monthly	Monthly	Pharmaceutical Records	Chief Pharmacist
8. Strengthen provision of HIV/STI/TB case management	Increased provision of HIV/STI/TB case management	HIV/STI/TB patients have improved case management	By 2023 90 % patients know HIV status; 90% known HIV patients receive sustained ARVs; 90% on ARVs have viral suppression	Annually	HIV/STI database	Regional managers
9. Strengthen the test-and-treat approaches for special groups such as KP, discordant couple, vulnerable populations	% Increase in key populations and vulnerable groups benefiting from test-and treat approaches	Numerator:# of key populations and vulnerable groups benefiting from test and treat approaches Denominator: All identified key populations and vulnerable groups X100	75% increase in KP, discordant couples, and vulnerable populations accessing test-and-treat approaches	Annually	HIV /STI database	Counsellors, CSO-hub
10. Scale up integration of ART and TPT initiation in relevant	% of relevant clinics integrating ART and TPT	Numerator: # of relevant clinics integrating current Antiretroviral Therapy	100% of TB, OPD, KP service providers	Annually	HIV/STI database	VCT counsellors, Pharmacy

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
clinics e.g TB, STI, OPD, KP service provider	as part of their services by 2023	and TB preventive therapy as part of their services by 2023 Denominator: Total # of relevant clinics X100	include ART and TPT initiation			
11. Scale up and strengthen community support system for monitoring adherence and retention of clients	% of clients adhering to treatment and remaining in care	Numerator: # of HIV positive clients adhering to treatment and remaining in care Denominator: # of HIV positive clients on treatment X100	75% increase in community support system for monitoring adherence and retention of clients by 2023	Annually	BHIS HIV annual Report	HECOPAB and VCT/counselors, M&E
12. . Pilot innovative treatment modalities of HIV/STI among KPs and other high-risk groups	% of KPs and other high risk groups accessing innovative treatment modalities of HIV/STI annually	Numerator: # of KPs and other high risk groups accessing innovative treatment modalities of HIV/STI Denominator: Total # of identified KPs and other high risk groups X100	100% of KPs and High risk groups identified receive innovative treatment modalities	Annually	HIV/STI database	VCT/adherence counselors/ M&E
13. Home visiting program for pregnant women and young children established	% of home visits for pregnant women and young children made according to guidelines by ECD officers	Numerator: # of home visits for pregnant women and children made according to guidelines by ECD officers Denominator: Total # of pregnant women and children requiring home visits	95% of pregnant women and children in need are followed up as per guidelines 300 ECD officers	Annually	ANC records	MOHW MCH
14. Women 30 years and older screened for HPV	% of women 30 years and older screened for cervical cancer	Numerator: # of women \geq 30yrs screened for cervical cancer Denominator: # of women \geq 30yrs in the population X100	15% of women 30 years and older screened for cervical cancer	Annually	Cancer registry	MOHW
15. Thermocoagulators available for treatment of precancerous lesions	% of women treated for precancerous lesions	Numerator: # of women treated for precancerous lesions using thermocoagulators	95% of women with precancerous lesions that met criteria to be treated with	Annually	Cancer registry	MOHW OBGYN's

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
	# Districts equipped for treating precancerous lesions	Denominator: # of women with precancerous lesions X100	thermocoagulation are treated 10 TC in 6 Districts			
16.COVID 19 vaccination campaign implemented	% of the eligible population vaccinated against COVID 19	Immunization of required doses of vaccine in persons 12yrs and older Numerator: Dose(s) administered to persons ≥ 12 yrs Denominator: Total eligible population X100	70% of the eligible population vaccinated against COVID-19	Daily	BHIS	MOHW
17. Routine vaccination coverage increased	% increase of vaccination coverage achieved and maintained	Immunization for the 10 routine vaccines in children under 5 years of age. Numerator: Dose(s) administered to children Denominator: Total number of children <1 year in a period X 100	95% of vaccination coverage achieved and maintained	Annually	BHIS	MOHW Family & Community Health Program
18.Integrate COVID-19 vaccine campaign into regular vaccine program	Covid-19 vaccine campaign integrated into regular vaccine program	Immunization schedule include Covid-19 vaccine	By 2023 Immunization schedule include covid-19 vaccines	Annually	Vaccine schedule	Public Health Nurse
19. Micronutrients supplementation provided to women and children	% women and children receiving micronutrients	Numerator: # women and children receiving micronutrients Denominator: # women and children requiring micronutrients	75% target population receive micronutrients annually	Annually	ANC Records	MOHW
20.Mother to child transmission of HIV and Syphilis reduced to zero	% MTCT of HIV and Syphilis	Numerator: # MTCT HIV/Syphilis Denominator: # HIV Positive mothers/Syphilis positive X100 (calculate separately)	0% MTCT of HIV and Syphilis	Annually	ANC Records	MOHW

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
22. Adolescent health strategy implemented	% of adolescents report receiving services	Numerator: # of adolescents report receiving services Denominator: # adolescent services identified in the strategy	15% of adolescents report receiving services	3-5yrs	Youth Survey	MOHW MOECST MHDFIPA
23. Contraceptive use prevalence increased	% contraceptive use prevalence	Numerator: # of women 15-49yrs in a union who are currently using, at least one method of contraception Denominator: # of women 15-49yrs who are in a union X 100	60% contraceptive use prevalence	Annually	Contraceptive use survey	MOHW
STRATEGIC OBJECTIVE 2: Strengthening the Organization and Management of Health Services						
EXPECTED OUTCOME: Effective governance structures for community and provider institutions implemented						
Development/Improvement, collaboration and Monitoring						
1. Development, revision & monitoring of policies, standards, guidelines, cooperation agreements etc. (orientation manual, referral policy, care protocols, pharmacy standards, bilateral agreements)	# of Policy, standards, guidelines, audit completed	Existing Policy documents, standards and guidelines are revised to be made current and new ones to cover other areas are developed	5 Policy documents completed by Oct 2022	Annually	Documents completed	L&A Director, PAPU Director, FSO
2. National implementation of new norms and standards by public Health Inspectorate for: Bottled Water Operations; Fish Vending; Food Stalls; Drinking Water	% of norms and standards utilised in establishments annually.	Numerator: # of norms and standards utilised in establishments (including Bottled Water Operations; Fish Vending; Food Stalls; Drinking Water) Denominator: # of norms and standards in place	100% use of Standards in establishments (all food facilities) inspected by 2023	Annually	Environmental health annual report	Senior Environmental Health Officer
3. Develop & execute national & local orientation guidelines and plans	1. # Revised orientation guidelines 2. # new employees trained with orientation guidelines	Number of new staff that has received a complete orientation according to facility orientation manual. Orientation must	100% new employees trained with orientation guidelines annually	Annually	Personnel files, Onsite inspection	L&A Director, PAPU Director, RM

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
		include: hospital policies, human resource regulations, and professional competency overview Numerator: # of new staff who received a complete orientation according to facility orientation manual Denominator: Total number of new staff employed X 100				
4. Enhance collaboration, and develop communication strategies to enhance the effectiveness of health care service	# communication strategies developed	Communication strategies are developed for different segments of health and wellness to enhance the effectiveness of health care services	Communication strategies completed by Oct 1 st 2022	Annually	Communication strategy document completed and shared	PAPU Director, Communication Unit, HODs
5. Approval and Implementation of the restructuring of NDACC	NDACC restructured and communicated to stakeholders	The National Drug Abuse Control Council is restructured to become a unit in the MOHW	NDACC restructured by 2 nd Q 2022	Quarterly	NDCC listed as a department of MOHW	PAPU Director
6. Improved collaborative efforts between the MOHW and the Regional team to strengthen the delivery of the programs targets in line with the NSP	% of program targets reached, identification of collaborative efforts between the MOHW and the regional team	Numerator:# of targets for 2022 & 2023 from the NSP reached Denominator: All targets in NSP for 2022 and 2023	100% of program targets in NSP met	Annually	Evaluation Report	RMT and MOHW
7. Every clinical unit have an updated operational manual	% of clinical units with an updated operational manual	Numerator:# of clinical units with an updated operational manual Denominator: # of clinical units	90% of clinical units have an updated OM by the end of 2023	Annually	Updated Operational Plan Manual printed	RHM, Head of units Consultant

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
Staffing						
<p>Creation of additional post for key health personnel for existing and new programs.</p> <ul style="list-style-type: none"> -74 new nurses - creation of District surveillance team to include the key actors (Infection control team, PHN, lab, etc.) -Chief medical staff as a full time post 	<p># of new health personnel employed in the MOHW</p> <p>District surveillance team created</p> <p>% of hospitals – public sector has a full time post for Chief medical staff</p>	<p>New post created and filled (74 nurses, district surveillance team, infection control team, PHN, Lab, Chief medical staff etc.)</p>	<p>Proposal developed for creation of new post for key health personnel and submitted to MPS by the end of 1st quarter of 2022.</p> <p>District surveillance team created (inclusive of infection control, PHN, Lab) by 2022</p> <p>100% of Public Sector hospitals have a full time post for Chief medical staff (3 Community and 3 regional hospitals)</p>	<p>Annually</p>	<p>Proposal submitted</p> <p>New staff employed</p> <p>Monthly reports from the District Surveillance Team</p>	<p>MPS</p> <p>IC team, PHN, lab, surveillance officer</p> <p>CEO-hospitals</p>
<p>Strengthening of the CHW Program by training and certifying new cadre of CHWs</p> <p>Integration of the CHW Program into the MOHW as permanent staff</p>	<p>% of districts with trained CHW</p> <p># of CHWs employed as permanent staff, MOHW</p>	<p>Numerator: # of districts with trained CHW</p> <p>Denominator: # of districts</p> <p>Community Health Workers are employed as permanent staff in the Ministry of Health and Wellness</p>	<p>130 (80 in 2022 and 50 in 2023) new CHW trained to work in districts</p> <p>CHWs integrated as staff of the MOHW</p>	<p>Annually</p>	<p>List of CHWs trained, certified, on permanent staff list</p>	<p>GOB, MOHW HQ</p> <p>Regional Managers</p>
<p>Strengthening of all health departments by filling available posts</p> <ul style="list-style-type: none"> -specialist and EMTs. - Primary Care Coordinator, epidemiologist, AO, FO and Nutritionist , for 100% of health Districts. -Mental Health 	<p>% of available post filled</p>	<p>Numerator: # of post filled</p> <p>Denominator: # of available post</p>	<p>100% post filled</p> <p>Mental Health (4 in 2022 & 1 in 2023; 1 new post in 2022 & 2 new post in 2023 created)</p>	<p>Annually</p>	<p>Staff list of filled post and salaries paid</p>	<p>MOHW HQ</p> <p>Regional Managers</p>

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
Strengthen the autonomy of the RMT in resolving and implementing the necessary interventions to redress issues directly related to the provision of services at their local and regional level	Revision of ToR for RMT to function efficiently	The RMT role is revised to provide more autonomy to function efficiently in providing services at the local and regional level	ToR for RMT revised by 3 rd Q 2022	End of 3 rd Q 2022	Job description approved and documented	RM
STRATEGIC OBJECTIVE 3: Achieving Greater Equity, Cost Effectiveness and Efficiency in the Allocation and Use of Health Resources (Improved Health financing to achieve Universal Health Coverage)						
EXPECTED OUTCOME: Equity, Effectiveness and Efficiency in the Allocation and use of Funds Improved						
1. Strengthen the monitoring of patient bill of rights, referral system, complaint systems, peer review, incidents, occupational safety, etc. (local level lack of QI Response workplan	% of systems in place to monitor patients' bill of rights	Numerator: # of systems in place to monitor patients' bill of rights Denominator: Total # of relevant systems to ensure patient satisfaction X100	95% of systems in place by Dec 2022	Monitored Quarterly	Documented systems and complaints mechanism accessible	L&A Director
2. To develop a cost effective secondary health care package to enhance universal health care coverage & equity	% of support service items included in a healthcare package available at all times by level of care annually	Numerator: # of support service items included in a healthcare package Denominator: Total # of support service items required to enhance universal healthcare coverage & equity	95% of systems in place by Dec 2022	Annually	Health care package documented	PAPU Director
3. Streaming operational and RME project execution plans to ensure efficient expenditure of recurrent budget and grant funds	% of RMEI Project activities implemented	Numerator: # of RMEI Project activities implemented Denominator: Total # of RMEI Project activities	100% execution of RMEI funds and completion of activities by 2023	Annually	RMEI Project evaluation report	RMEI Project coordinator
4. Collaborate with IDB/PAHO on the development of C19RM work plan to fill financial gaps for malaria to ensure the prevention of transmission and reintroduction	C19RM work plan developed	MOHW collaborate with international partners (IDB/PAHO) to develop the C19RM workplan	100% execution of C19RM funds and implementation of activities by 2023	Annually	Annual Report	MOHW

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
5. Submit for approval an increase in operational budget allocation based on services.	% Increased operational budget allocation based on services	Numerator: funds allocated based on services Denominator: Previous budget allocation based on services	15% Increase for line item operational expenditure, for fiscal year 2022-2023 in each region 100% of health regions have an increased budget for maintenance in 2022 and 2023	Annually	Expenditure sheet 2022-2023	CEO, FO HQ
6. Regions with a budget to respond to COVID-19	# Covid -19 activities implemented annually	Regions with an allocated budget implement Covid-19 activities	Regional Budgets for Covid-19 utilised efficiently in 2022 and 2023	Annually	Regional reports on Covid-19	Regional Managers
7. Include and continue to consult with the Dental Department when procuring Pharmaceutical and material	# of meetings held to consult on procurement	The dental department consult with relevant persons/departments in the procurement of pharmaceuticals and materials	Quarterly meetings with tendering committee and dental department to procure pharmaceuticals and materials for 2022 and 2023.			MOHW tendering committee, Dental department
STRATEGIC OBJECTIVE 4: Strengthen Capacity for Human Resources for Health Planning to Meet Present and Future Health Sector Needs						
EXPECTED OUTCOME: The Availability of a Cadre of Well Trained and Competent Health Workers with the Capacity to Deliver Quality Health Services						
Develop human resource succession plan	HRH database that supports succession planning developed	MOHW ensure that a Human Resource succession plan is in place	2 nd Q 2022	End of 2 nd Q	Human resource succession plan manual	L&A Director FSO PAPU Director
Continued execution of indicators outline on the Belize Human Resources for Universal Health Strategic Plan for 2022	% of Indicators outlined in HR plan executed by 2022	Numerator: # of Indicators outlined in HR plan executed Denominator: Total # of Indicators outlined in HR plan	90% of indicators met by Dec 2022	Annually	Indicator list	PAPU Director AO

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
Develop the training plan	Training plan developed	MOHW ensure that a training plan is developed to meet the training needs of all staff	Training plan developed by 1 st Q, 2022	End of 1 st Q	Training Plan manual	Regional Managers
Develop training program for vector control	# of vector training modules developed	Vector control unit ensure that a training program is developed including malaria and dengue	Malaria & dengue training modules in place by 2022	December 2022	Vector training manual	Vector control TA
Supporting CME and CNE through the updating of training modules, and coordination of trainings	% of target audience trained in dengue & malaria matters	Numerator: # of targeted persons trained in specific area Denominator: Total # targeted persons	100% targeted audience receive training (at least 1 training) in dengue & malaria By 2023	Annually	Training list	Vector control TA and DDHS office
Conduct Customer service training for staff.	% of the frontline workers received customer service training.		100% of the frontline workers received customer service training by the end of 2023	Annually	Training list	Regional Managers
Field Epidemiology Training Program	% of Field epidemiologist trained		100% of field epidemiologist trained (5 in 2022 & 10 in 2023)	Annually	Training records	MOHW
Intermediate to Advanced query building training for health data analysis	% of persons trained in Intermediate to Advanced health data analysis by end of November 2023		100% persons trained in health data analysis (10 in 2022 & 10 in 2023)	Annually	Training records	MOHW, Senior Biostatistician
Provide continued capacity building in the following areas: substance misuse programs; outreach services, monitoring and evaluation; research and information; COVID-19 & Surveillance; Mental Health; Wellness ;	% of staff receiving ongoing training annually		100% MOHW implementing staff at regional level receiving ongoing training	Annually	Training records	MOHW, Regions, DHEs, and TAs from the various units

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
Prevention & Management of NCDs Infectious Diseases (HIV/AIDS); WASH						
Psychosocial support programs for staff	% of staff benefiting from psychosocial program annually	Numerator: # of staff benefiting from psychosocial program Denominator: # of staff referred for psychosocial support	Structured psychosocial support program established by the end of the first quarter of 2022	Annually	List of staff receiving psychosocial support	RM, Mental Health Unit, Primary Care Coordinators
Restructuring of the processing of HR request and restructure the Records Management Unit	Records management Unit restructured	MOHW restructure the records management unit ; HRH Portal to a digital platform	By the end of the 3 rd Q, 2022 IT unit develop a digital platform for records management and restructuring of the management unit at HQ.	4 th Q, 2022	Digital platform in use	Records Management
Digitalize the HRH portal for improved management, recruitment processes	Increased management and recruitment		HRH Portal digitalized by 4 th Q 2022	Annually		MOHW
Facilitate training of HIV counselors in partner notification	% of HIV counselors trained in partner notification annually	Numerator: # of HIV counselors trained in partner notification Denominator: # of HIV counselors X100	100% of HIV counsellors trained in partner notification by 2023	Annually	Training records	HIV Coordinator
Facilitate training of healthcare providers to improve retention to care and adherence to ART treatment	% of healthcare providers trained to improve retention to care and adherence to ART treatment	Numerator: # of healthcare providers trained to improve retention to care and adherence to ART treatment Denominator: # of HIV healthcare providers	100% of HIV healthcare providers trained to improve retention to care and adherence to ART treatment	Annually	Training records	HIV Coordinator
Train Staff in quantification, ordering of ARVs and laboratory reagents, and monitoring of stock status to avoid stock outs	% of staff trained in quantification, ordering of ARVs and laboratory reagents, and monitoring of stock	Numerator: # of staff trained in quantification, ordering of ARVs and laboratory reagents, and monitoring of stock status	100 % of staff trained in quantification, ordering of ARVs and laboratory reagents, and monitoring of stock	Annually	Training records	HIV Coordinator

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
	status to avoid stock outs	Denominator: # of relevant staff	status to avoid stock outs by 2023			
Diversity training for HCP and Exchange program (user of service and provider of service)	% Staff and clients involved in HCP and exchange program receive diversity training	Numerator: # Staff and clients involved in HCP and exchange program receive diversity training Denominator: : # Staff and clients involved in HCP and exchange program	100% staff and clients from HCP and Exchange program receive diversity training	Annually	Training records	HECOPAB, FSO
Two cohort of Rural Health Nurses Trained	# of rural health Nurses trained by 2023	MOHW ensure that rural health nurses are adequately trained	40 RHNS trained by the end of 2023 (20 each year)	Annually	Rural Health Nurses registered	MOHW, MOF UB
Scholarships for basic specialties secured	# Of scholarships distributed	MOHW secure scholarships for basic specialties and distribute fairly	100% of scholarships secured distributed fairly	Annually	Criteria for scholarship distribution	MOHW HQ
STRATEGIC OBJECTIVE 5: Strengthening of the Belize Health Information System to Support Evidence based Planning in the Provision and Delivery of Health Care						
EXPECTED OUTCOME: The Health Status of the Population Accurately Described and Monitored						
Creation of a BHIS Steering Committee	BHIS Steering Committee in place and functioning	MOHW create a BHIS committee to coordinate and oversee the proper expansion and functioning	BHIS Steering Committee in place by 1 st Q 2022	2 nd Q 2022	Regular meeting reports	MOHW NHI, KMHM
Strengthening and expansion of the existing BHIS and Completion of the modules	% of BHIS areas strengthened and/or expanded including new modules	Numerator: # of BHIS areas strengthened and/or expanded including new modules Denominator: Total # of BHIS areas requirig strengthening	100% of facilities including NGOs BHIS updated with necessary information and new modules by 2023 BHIS expanded to 6 new institutions by March 2022	Annually	BHIS annual report	IT,EPI, DHSA, DPHW
Health facilities with access to internet use the BHIS	% of health facilities with access to internet utilizes the BHIS	Numerator: # of health facilities with access to internet utilising the BHIS	95% of health facilities with access	Annually	BHIS in use	BHIS Director, PAPU Director, IT

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
Support provided to the IT Unit to roll out the BHIS to four rural health facilities		Denominator: # of health facilities with access to the internet	to internet utilizes the BHIS by 2023 BHIS in 4 rural health facilities by 2nd Q 2022			
Conduct Training, refresher trainings & Support: - Public/Private Sector in COVID Response, Data Collection, Data Reporting (Go.Data, POE app) - anthropometric measurements -CSO Hubs -vector control -dental Application of STAR Tool in Regions	% Public/Private sectors supported and trained in data collection & reporting by 2023.	Numerator: # Public/Private sectors supported and trained in data collection & reporting Denominator: # Public/Private sectors	100% Public/Private sector supported and trained in COVID response, data collection & reporting by 2023. Testing on the use of GO.DATA 100% BHIS Access installed in all 8 vector control offices countrywide by 2023	Annually	List of persons from sectors trained & supported in Data collection and reporting	EPI UNIT- Biostatistician Vector control Chief dentist
Improve use of BHIS for Surveillance, data collection and reporting for a) nutrition indicators b) NCD & Communicable Surveillance c) Mortality d) Environmental Health e) HIV/TB/STI/VH	% of related data collected and entered in BHIS for surveillance and reporting	Numerator: # of related data collected and entered in BHIS for surveillance and reporting Denominator: # of related data identified for collection	100% of related data collected and entered within BHIS surveillance strengthened Socio-economic and risk assessment study conducted by 1 st Q 2023	Quarterly	Data sheets generated SES Report	Nutrition Officers, Data entry clerks, Biostatistician Epidemiologist Environmental Health
Improve national capacity of Health Response Team to conduct rapid detection, assessment, and response to health emergencies.	% of Regional Health Response Teams trained on DRR. % of EAP Plans updated annually	Numerator: # of EAP plans updated and Regional Health Response Teams trained on DRR. Denominator: # of Regional Health Response Teams	100 % of Regional Health Response Teams trained on DRR, by 2023 100% of EAP Plans updated annually	Annually	reports produced by 2023 reports - preparedness index for health; Emergencies & Disaster	MOHW HQ Regions

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
Review the integrated patient monitoring system to ensuring that all data variables are captured and incorporated into the BHIS for comprehensive reporting for HIV/STI/VH and TB	% Review of the integrated patient monitoring system to ensure that all data variables are captured and incorporated into the BHIS for comprehensive reporting for HIV/STI/VH and TB completed	Numerator: # of data variables captured and incorporated into the BHIS for comprehensive reporting for HIV/STI/VH and TB Denominator: # of data variables required	100% review completed by 2022 Monitoring tool developed to collect PrEP data Cascades developed for different populations (KP, general population, PrEP user, TB)	Quarterly	List of data variables and cascades developed	M&E Officer
STRATEGIC OBJECTIVE 6: Development of Quality Improvement Framework to Ensure Stakeholder Accountability						
EXPECTED OUTCOME: Quality Improvement Framework for all Levels of the Health System Designed and Implemented						
Reactivation and full function of quality committee at facility level	% Quality Committees functional	Numerator: # Quality Committees functional Denominator: Total # of quality committees	Quarterly Meetings 100% Reports submitted	Quarterly	Minutes of meetings 2. committee reports submitted to L&A Unit	L & A Director
Development, Review and approval of quality improvement framework	Approved quality framework completed	MOHW develop and approve a quality improvement framework	Draft quality improvement framework completed by 1 st Q 2022	Quarterly	Draft report	L & A Director
Develop SLAs/KPIs and conduct quarterly performance measurement of all sites - HTS,TB and STI services at both private and public -vector control	% of sites offering HTS,TB and STI , vector control services monitored quarterly (private and public)	Numerator: # of sites offering HTS,TB and STI , vector control services monitored quarterly Denominator: Total # of sites offering HTS,TB and STI , vector control services	100% of public and private sites offering HTS,TB and STI , Vector control services monitored quarterly	Quarterly	Quarterly reports	PAPU Director HIV Director Vector control
Weekly evaluation of critical maternal admissions. (Establish a core team for evaluation of the critical maternal cases)	% of critical maternal admissions reviewed and managed efficiently	Revision of clinical cases within the hospital and outpatient services (10 outpatient records, and 10 hospital admissions). Numerator: # of clinical cases within the hospital	100% of critical maternal cases reviewed and managed efficiently at the three regional hospitals	Annually	Weekly reports	MCH TA Hospital Directors

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
		and outpatient services that were reviewed. Denominator: Total # of clinical cases within the hospital and outpatient services X 100.				
Implement infection prevention measures including safe disposal of HTS supplies and waste products at all HTS outlets including expired medication	% of infection prevention measures implemented in 2022 and 2023.	Numerator: # of infection prevention measures implemented at HTS outlets Denominator: # of infection prevention measures identified	100% of relevant infection prevention measures are implemented- including safe disposal of HTS supplies and waste products at all HTS outlets including expired medication	Quarterly	Quarterly reports	Infection Control Officer
Standardize performance agreement for each category of staff	Performance agreement developed for each category of staff.	Standardise and develop performance agreements for each category of staff	100% of staff receive and agree to a standardized performance	Annually	Standardized performance agreement documented	AO, PPMU
Development of M&E tool for Restaurant Certification Program	% of EHO trained to assess restaurants for certification % of public sensitized about the restaurant certification program.	Numerator: # of Environmental Health Officers trained to assess restaurants for certification Denominator: # of Environmental Health Officers Numerator: # of persons sensitized about the restaurant certification program Denominator: # of persons targeted	100% EHOs trained by 2022 National Sensitization Campaign Conducted. Public Health certifying at least 100% of restaurants nationally by 2023	Quarterly	Quarterly report of restaurants certified	BHIS Chief Environmental Health Officer

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
STRATEGIC OBJECTIVE 7: Efficient and Effective Health Infrastructure						
EXPECTED OUTCOME: Physical Health Environment for Health Care Delivery to Clients Improved						
Create a health infrastructure review committee	Health Infrastructure Review Committee developed and functional	MOHW creates a health infrastructure review committee and ensures it is functional	Health Infrastructure Review Committee developed and functional by Dec 2022	Monthly	Minutes of monthly meetings	L& A Director, PAPU Director
Develop a national procurement policy for MOHW	National procurement policy in place	MOHW develops a national procurement policy	National procurement policy in place by March 2023	Annually	Policy document	L& A Director, PAPU Director, NEMC Director,
Creation of procurement committee for mission critical assets	Procurement Committee for mission critical assets created and functioning	MOHW creates a Procurement Committee for mission critical assets	ToR for Procurement Committee completed and Committee meetings convened by 1 st Q in 2022			DHS, TA,
Procurement of : 1.office building and vector control office equipment to improve efficiency, data capturing and reporting countrywide 2. a Heavy Duty Cold Storage Cargo Truck 3.Computers for Technical Staff (3) and support staff (6) along with 2 Network printers	% of facilities with adequate and functional equipment to improve efficiency	# of health facilities in each district with adequate and functional equipment as per listing Numerator: # of health facilities with adequate and functional equipment Denominator: Total # health facilities x100	100% of all vector control district offices adequately equipped by 2023 Heavy duty cold storage cargo truck received by 1 st Q 2023 9 computers and 2 printers ordered and received within 6 months, by 2022.	Annually	Inventory of equipment	Vector control TA &PMU
Improve infrastructure for : 1.emergency rooms in all health facilities. 2.NRH maternity unit 3.DHEs & CHWs	# of Emergency rooms with improved infrastructure % Increase capacity of NRH maternity unit		By the end of 2023 at least three of the emergency rooms upgraded and NRH maternity unit upgraded.	Annually	Buildings completed and handed over	FO, CEO, RM
Optimize infrastructure and equipment maintenance to ensure operational safety	% of equipment & hardware maintained	Numerator: # of pieces of equipment & hardware maintained	100% equipment & hardware maintained	Monthly	Certificate of completion	M&E EPI Unit head

Activities	Indicator	Definition	Target	Reporting	Means of Verification	Responsibility
		Denominator: # of pieces of equipment & hardware identified				
Hospitals have access to medical equipment and supplies Timely delivery of supplies and reduce stock out by 50% of essential supplies	% of medical equipment and supplies available for hospital use	Numerator: # of medical equipment and supplies available for hospital use Denominator: Total # of medical equipment and supplies needed for hospital use	90% of medical equipment and supplies available	Annually	Inventory of equipment and supplies	RHM, CMS CML, PPPMU
Full implementation of malaria microscopy QA network	Malaria reference lab fully implementing QA program as per guidelines	Malaria reference laboratory fully implement the Quality Assurance program as outlined in the guidelines	Malaria QA manual completed and distributed by 2022 Malaria microscopy QA program full operational by 2023	Annually	Malaria QA Manual distributed Annual report on Malaria microscopy QA program	Director Malaria reference lab; vector control TA



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