

NURSING AND MIDWIFERY STRATEGIC PLAN AND SERVICES FRAMEWORK 2024 - 2028

THEME

SUSTAINING THE GAINS TO ACCELERATE THE ACHIEVEMENT OF UNIVERSAL HEALTH COVERAGE





MINISTRY OF HEALTH

NURSING AND MIDWIFERY STRATEGIC PLAN AND SERVICES FRAMEWORK

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We are very grateful to UNFPA and especially the Country Representative for giving much attention to Midwifery and Nursing advancement in Ghana and for the unflinching support in terms of fully funding the revision of the old plan and the development of this new plan. The Office of the Director of Nursing and Midwifery at the MoH is also grateful to all Nursing and Midwifery leaders and managers and indeed the Technical Working Group members for their contribution towards the implementation and evaluation of the plan respectively.

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FOREWORD



As we navigate the complexities of the ever-evolving healthcare landscape, it is imperative that we continually refine and enhance our strategies to ensure the highest quality of care for our patients.

The Nursing and Midwifery Strategic Plan serves as a framework to guide and support the vital roles of nurses and midwives in delivering exceptional healthcare services. This comprehensive strategic plan developed collaboratively with input from stakeholders across the nursing and midwifery professions, emphasises the importance of employment, education, leadership, research/innovations, service delivery, data governance, partnerships and professional development to meet the evolving needs of our patients. The Strategic Plan encapsulates the collective vision, goals, and actions required to address these challenges and capitalise on the opportunities that lie ahead. This plan aims to empower nurses and midwives by providing a clear roadmap for their professional growth and development. It outlines strategies that promote interdisciplinary collaboration, leadership, and evidence-based practice, enabling our nursing and midwifery workforce to thrive in their roles. By investing in these strategies, we reaffirm our commitment to providing safe, efficient, and high-quality healthcare that meets the unique needs of every patient.

The nursing and midwifery professions have witnessed remarkable advancements and transformations in recent years in the implementation previous 2019-2023 strategic plan. To ensure we continue to deliver patient-centred care, we must adapt to technological advancements, changes in healthcare policies, and an increasingly diverse patient population.

I am grateful to all the passionate and dedicated individuals who contributed their expertise and insights in shaping this 2024-2028 strategic plan. Their commitment to excellence, patient-centred care, and advocacy for the nursing and midwifery professions is truly inspiring. This plan is a testament to their unwavering dedication, and I am confident that its successful implementation will lead to transformative outcomes for our patients, our workforce, and our healthcare system as a whole. I invite all nurses, midwives, and stakeholders to fully embrace this Nursing and Midwifery Strategic Plan. Let us unite in our shared mission to improve patient health and well-being, inspire excellence in our professions, and contribute to the long-term sustainability and success of our healthcare system. Together, we can shape a future where nursing and midwifery are at the forefront of healthcare innovation and impact.

HON DE BERNARD OKOE -BOYE MINISTER FOR HEALTH

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EXECUTIVE SUMMARY

The Nursing and Midwifery Strategic Plan and Services Framework for 2024-2028 is a comprehensive plan initiated by the Nursing and Midwifery Office of the Ministry of Health with funding support from UNFPA with extensive stakeholders across nursing input from and midwiferv professions. It is the third plan in succession and aligned with the Health Sector Medium-Term Development Plan, the Universal Health Coverage (UHC) Roadmap for Ghana, the Global Sustainable Development Goals (SDGs) and the World Health Organisation (WHO) Global Strategic Directions for Nursing and Midwifery, 2021-2025. It aims to provide a clear roadmap for the professional growth and development of nurses and midwives and outlines strategies that promote interdisciplinary collaboration, leadership, and evidence-based practice to provide quality nursing and midwifery services to the people living in Ghana and beyond.

The process of development of the plan was extensive with a Technical Working Group (TWG) constituted by the MoH which started working from July until September 2023. The TWG members were drawn from Policy, Academia, Regulation, Practice, Associations and Partners. All agencies of the MoH in relation to Nursing and Midwifery were duly represented on the TWG. Three different levels of meetings were conducted. The process started with an implementation update meeting of all agencies for the old plan. The aim was to have agencies provide the status of implementation for the year five of the 2019-2023 plan. This was followed by the first TWG meeting to review the implementation of the old strategic plan and services framework. The process and approach for the evaluation process and tools for field reports were discussed and validated at this meeting.

The second TWG meeting reviewed findings of the field report and then reprioritised for the next plan.

The meeting did further situational analysis coupled with findings of the finding of the field visits, which culminated into the prioritisation for the next five-year plan.

The plan, which has seven strategic objectives and several key interventions, focuses on Jobs, Education, Leadership, Research/Innovations, Service Delivery, Data Governance Partnerships and Collaboration, for professional development to meet the evolving needs of patients. It also prioritises patient well-being by providing compassionate and respectful care and aims at delivering high-quality and safe healthcare services while fostering a culture of innovation and evidence-based practices. Teamwork and ethical behaviour among healthcare professionals are also prioritised to ensure the best possible patient outcomes.

The structure of this strategic plan is arranged in five chapters. Chapter one which is the Introduction, provides information about the background and relevance of nurses in the healthcare landscape and the importance of investing in nurses and midwives. It also gives brief information on the strategic framework on vision, mission, and goals of the of the new plan. The second chapter talks about the Situational Analysis. The third chapter talks about the Strategic Directions and Interventions. The chapter four talks about the Implementation Framework and the last chapter talks about the Monitoring and Evaluation framework. The rest are appendixes.

ACRONYMS

CCTH Cape Coast Teaching Hospital CNMO Chief Nursing and Midwifery Officer DHIMS District Health Information Management System GCNM Ghana College of Nurses and Midwives Ghana Health Service GHS GIFMIS Ghana Integrated Financial Management Information System GRMA Ghana's Registered Midwives Association GRNMA Ghana Registered Nurses and Midwives Association GTEC Ghana Tertiary Education Commission HeFRA Health Facilities Regulatory Agency Healthcare Network Quality Improvement System HNOIS Human Resource Information Management System HRIMS ISS **Institutional Support System** Japan International Cooperation Agency JICA KATH Komfo Anokye Teaching Hospital Korle-Bu Teaching Hospital KBTH Kwame Nkrumah University of Science and KNUST Technology LHIMS Lightwave Health Information Management System MoH Ministry of Health NMTC Nursing and Midwifery Training College N&MC Nursing and Midwifery Council RHA Regional Health Administration SDG Sustainable Development Goals Tamale Teaching Hospital TTH

University of Cape Coast

UCC

UGMC University of Ghana Medical Centre

UHC Universal Health Coverage

UNFPA United Nations Population Fund

UNICEF United Nations Children's Emergency Fund

WHO World Health Organisation

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CHAPTER 1 INTRODUCTION

1.1 Background

Nurses and midwives play a critical role in achieving universal coverage of healthcare services. They are on the front lines of healthcare delivery, providing essential care to individuals, families, and communities.

One of the key contributions nurses and midwives make is in the area of primary healthcare. They are often the first point of contact for patients seeking healthcare services, especially in rural and remote areas where access to doctors may be limited. Nurses and midwives can provide a wide range of preventive and curative services, including health promotion, disease prevention, diagnosis, treatment, and rehabilitation. Moreover, nurses and midwives are crucial in improving access to maternal and child healthcare. Midwives, in particular, have specialized knowledge and skills in managing pregnancy, childbirth, and the immediate postnatal period.

Nurses and midwives play a vital role in ensuring safe deliveries and reducing maternal and infant mortality rates. Additionally, midwives provide essential prenatal postnatal care, monitoring the health of the mother and child and offering guidance and support. Nurses also have a significant impact on the management of chronic conditions and non-communicable diseases. With their expertise in monitoring vital signs, administering medications, providing education, counselling and providing specialized care, they play a vital role in preventing complications and improving outcomes for patients with chronic illnesses. They also promote self-management and empower patients to take control of their health.

In addition to their direct patient care responsibilities, nurses and midwives are invaluable in strengthening health systems. They contribute to health system resilience by working collaboratively with other healthcare professionals, such as doctors, pharmacists, and community health workers. They provide leadership and expert guidance in healthcare planning, policy development, and quality improvement initiatives. Furthermore, nurses and midwives are essential in addressing health disparities and reducing inequities. They have a unique understanding of the communities they serve and are often trusted sources of healthcare information. They can advocate for vulnerable populations and ensure that services are tailored to meet their specific needs.

Overall, nurses and midwives are integral to achieving universal coverage of healthcare services. Their expertise, compassion, and tireless efforts are essential in delivering quality healthcare to all individuals, regardless of their socioeconomic status or geographical location. Investing in nurses and midwives is not only crucial for achieving universal health coverage but also for strengthening health systems and improving health outcomes for all.

It is in light of the above that the MoH places premium on nursing systems, structures and processes to improve the health care delivery system in Ghana knowing that they form about 60% of the health workforce. The second strategic plan, which was developed in 2019, aimed to build on the successes of the first strategic plan to inspire and align with the vision, mission, and goals of the MOH, GHS, and health sector, as well as the medium-term development plan, UHC, and SDGs and the WHO global Strategic Direction for Nursing and Midwifery.

To guarantee a healthy population for national development, the strategic plan's aim was to offer sustainable, high-quality nursing and midwifery services that are available, comprehensible and implementable.

To achieve UHC in Ghana, the 2019-2023 strategic plan set out to reposition the nursing and midwifery systems as a driving force. The goal was to contribute to the achievement of UHC and SDGs through the provision of quality and equitable nursing and midwifery services to the general population with a special focus on reproductive maternal child, adolescent newborn. and health. Stakeholders identified key issues in areas such as Education and Research, Organization of Services and Package of Care, Regulation and Practice, Leadership and Governance, Nursing and Midwifery Workforce affecting nursing and midwifery practice in Ghana. This strategic thematic area emerged because of the major concerns facing nursing and midwifery and the strategic implementation efforts at the time but was ultimately targeted at the vulnerable population.

The plan elapsed in October 2023 after five years of its implementation. The process to review the degree and outcome of the implementation was initiated by the Nursing and Midwifery Office of the Ministry of Health with funding support from UNFPA. We had the same technical working group that reviewed the old strategic plan and also saw to the development of the new one(2024-2028).

Some key findings from the evaluation of the old plan with regards to the five thematic areas of Education and Research; Regulation and Practice; Package of Care and Organization of Services; Leadership and Governance and Workforce Strengthening revealed the following: General improvement in governance and leadership interventions for nursing and midwifery practice such as Institutionalization of the Annual

Nursing and Midwifery Leaders and Managers Conference; Institutionalization of the Annual National Nursing and Midwiferv Excellence and Hall ofFame Improvement in infrastructure at the Health Training Institutions; Improvement in the scope and quality of Nursing and midwifery training and practice such as Strengthening of preceptorship system with a total of 518 benefiting from training in the last five years from facilities visited during the field assessment, increased production of nurses and midwives from the training schools, the introduction of 13 new specialist programs by GCNM with over 2022 graduands at membership and associates and levels improvement in regulation and supervision. The plan however suffered from low implementation due to low awareness at all levels.

The TWG did a situational analysis in a number areas including the 2020 WHO/ICN/ICM Global Strategic Direction for Nursing and Midwifery (SDNM) which serves as the framework for all Member States of WHO to align country strategic plans. At the time, Ghana had already developed and started the implementation of its strategic plan in 2019. Fortunately, all the four thematic areas of the WHO were aligned to Ghana's plan. In view of this, it was seamless for us to go along with the WHO plan.

The findings of the field reports and current WHO plan and other national priorities were discussed and recommendations given during the second TWG meeting. The TWG members agreed to adopt the WHO four strategic directions for nursing and midwifery and also added three more areas. Consequently, the new plan has seven strategic directions namely: Education, Jobs, Leadership, Service Delivery, Research and Innovation, Data Governance and Partnerships.

1.2 Strategic Framework

1.2.1 Scope of the Strategy

This document shall be applicable for both public and private health institutions and agencies from national to sub-national levels for use by nurses, midwives and other paramedics to enhance nursing and midwifery systems, services processes to improve the quality of life of Ghanaians. It is the framework that will guide the strategic directions of the and midwifery profession to accelerate achievement of health outcomes in Ghana for the next five years. All healthcare institutions are to support their nurses and midwives in implementing the strategic framework. It should however, be contextualised within the agency levels down to the facility levels.

1.2.2 Vision

A healthy population for national development

1.2.3 Mission

Maintain excellence and high standards of nursing and midwifery systems at all levels for national development.

1.2.4 Goal and Theme

Accelerate the achievement of UHC through a welleducated and empowered nursing and midwifery workforce for national development.

Theme: Sustaining the gains to accelerate the achievement of Universal Health Coverage

1.3. Core Values and Guiding Principles

The 2024-2028 strategic plan will be implemented with the following five (5) core values and guiding principles;

Patient-Centred Care: The strategic plan prioritizes the well-being and needs of patients, ensuring that their care is personalized, compassionate, and respectful.

Quality and Safety: The plan emphasizes the delivery of high-quality and safe healthcare services, aiming to improve patient outcomes and prevent harm.

Professionalism and Ethics: The strategic plan promotes a culture of professionalism, integrity, and ethical behaviour among nurses and midwives, ensuring that they uphold the highest standards of practice.

Collaboration and Teamwork: The plan encourages collaboration and interdisciplinary teamwork among healthcare professionals, recognizing the importance of effective communication and coordination for optimal patient care.

Continuous Professional Competences Development and Innovation: The strategic plan supports opportunities for professional development, lifelong learning, and research, fostering a culture of innovation, improvement, and evidence-based practice in nursing and midwifery.

1.4 Global and National Context

The development of the strategic plan took into consideration global and national issues that affect the entire healthcare and in particular nursing and midwifery systems.

1.4.1 Global Context

The strategic plan derives its inspiration from the following global agendas:

- ✓ The United Nations Sustainable Development Goals (SDGs),
- ✓ WHO Resolutions,
- ✓ WHO Global strategic directions for Nursing and Midwifery (2021-2025)
- ✓ International Health Regulations (IHR 2005),
- ✓ Astana Declaration on Primary Health Care (PHC),
- ✓ African Union (AU) Vision 2063: "The Africa We Want",
- ✓ ECOWAS Vision 2020,
- ✓ African Health Strategy (2016 2030) and
- ✓ Africa Health Transformation Agenda (2015-2020)
- ✓ UNFPA Global Strategic Plan for Midwifery

1.4.2 National Context

The national context for the development of the plan is also driven by the following:

- ✓ Directive Principles of State Policy in Article 34 (2) of the 1992 Constitution.
- ✓ National Health Policy (2020)
- ✓ UHC Road Map (2020-2030)
- ✓ The National Medium-Term Policy Development Framework by NDPC,
- ✓ The Coordinated Programme of Economic and Social Development Policies (2017-2024). National Covid-19 Strategic Plan
- ✓ NCD Policy
- ✓ Health Technology Assessment Policy and Strategy
- ✓ Network of Practice (NoP) Guidelines
- ✓ Policy and Regulations of the Ghana Nurses and Midwifery Council.

CHAPTER 2 SITUATIONAL ANALYSIS

Nursing and midwifery system in Ghana faces a range of challenges and opportunities. A situational analysis, considering both the internal and external factors, provides a comprehensive view of the current state of these systems. This chapter describes key areas that are relevant to nursing and midwifery in the overall achievement of health outcomes in line with the strategic directions of the plan.

2.1 Workforce and Jobs

The nursing and midwifery workforce has grown in the last five years with about 67% being employed by the public sector alone. It is estimated that, the total nursing and midwifery population as at 2022 is about 218,000(MoH-N&MC, 2022). The population of midwives has seen significant increase in the last five years due to the establishment of midwifery schools at both direct entry level and post-basic levels. These numbers have also contributed to a significant improvement of the nurse-patient ratio in the last five years. For instance, the Nurse to population ratio in 2018 was 1.20. This increased to 1.99 in 2022, higher than the WHO threshold of 1 to a 1000 Population (MoH Holistic Assessment Report, 2022) indicating that the country has excess nurses although the issue of inequitable distribution still remains. Most nurses do not accept posting to rural areas due to poor social amenities including schools. accommodation. water. communication, security and road networks. The situation has affected access to professional nurses and midwifery services in rural communities. However, in the last three years, government is unable to give financial clearance to nurses and midwives and the entire health workers as a whole due to current economic challenges. As a result of this, there is a back log of over 60,000 nurses and midwives who are unemployed.

2.2 Education and Training

Over the last five years, the quality and availability of nursing and midwifery training programs across the country has seen a lot of growth and expansion of infrastructure and increased enrolment. Annually, an average of 30,000 nurses and midwives graduate from diploma, degree and certificate levels programmes. This phenomenon may be due to the ever increasing number of senior high school graduates occurring as a result of the free senior high school policy. There are growing opportunities for the youth to gain admission into the nursing and midwifery training schools.

As part of the processes to improve nursing and midwifery education, the MoH with collaboration and funding support from UNFPA have streamlined the preceptorship system to ensure quality training. The field visits revealed that for the institutions visited, Over 518 preceptors have been trained across the country since 2019 where some were under the funding support of UNFPA and others were funded by the institutions themselves. Out of the preceptorship training, 25 nurses and midwives have also been trained as National Resource persons to support the training of preceptors. Unfortunately, the tutor to student ratio is still very low and as a result, affects the quality training of students.

Over the last five years, there has been increased enrolment and induction of nurse/midwife specialists coupled with introduction of 13 new programmes by the Ghana College of Nurses and Midwives. There is therefore the need for ongoing professional development and upskilling to improve the overall competency of the workforce. There is the need to further invest in specialisation of nurses and midwives in order to meet the demands of the population.

2.3 Migration

The migration of nurses and midwives from Ghana has been a thorny issue in recent years. The country has experienced a large outflow of these health professionals, leading to critical shortages in the healthcare workforce and negative impacts on the health system. One of the main reasons for this migration is the sub-optimal working conditions and limited opportunities for career advancement in Ghana. Many nurses and midwives seek better pay, improved working conditions, and professional growth in other countries, particularly in developed nations such as the United States, Canada, the United Kingdom, and Australia.

Another factor contributing to the migration is the limited availability of resources in the Ghanaian healthcare system. Insufficient medical equipment, inadequate infrastructure, and a shortage of essential supplies put a strain on healthcare workers and impede their ability to provide quality care. This, coupled with the heavy workload, often pushes nurses and midwives to seek opportunities elsewhere. The consequences of this migration are severe for Ghana's healthcare system. The country faces significant gaps in healthcare delivery, leading to increased patient loads and the deterioration of service quality. The situation is especially dire in rural areas where shortages are more pronounced, making it difficult for individuals to access essential healthcare services.

To mitigate this issue, the Ghanaian government has taken several measures. Efforts have been made to improve working conditions, increase salaries, and provide opportunities for professional development. Furthermore, stricter regulations and policies have been implemented to curb illegal recruitment and encourage professionals to stay in the country.

Efforts have also been made to increase the number of nursing and midwifery training institutions to meet the demand for healthcare professionals. The hope is that by offering more training opportunities, the healthcare system can retain more nurses and midwives. However, despite these efforts, the migration of nurses and midwives from Ghana remains a complex problem that requires sustained attention.

Further investment in the healthcare system and the implementation of long-term strategies to improve working conditions and incentive packages are essential to address the root causes of migration and retain these valuable healthcare professionals.

2.4 Work Environment

Nurses and midwives often work in challenging conditions, including inadequate facilities, limited resources, and high patient volumes. This negatively impacts job satisfaction and the quality of care provided. Nurses and midwives often face poor working conditions, including long hours, inadequate remuneration, and a lack of supportive supervision. These factors contribute to job dissatisfaction and can lead to healthcare workers seeking employment opportunities abroad.

2.5 Demographic Changes

Ghana's population is growing rapidly, and the healthcare needs of the population are evolving. The aging population and the increase in non-communicable diseases pose new challenges that require specialized nursing and midwifery services in the country.

2.6 Health Infrastructure

The availability and quality of healthcare facilities and services vary across different regions of Ghana. Rural areas often lack adequate healthcare infrastructure, making it difficult for nurses and midwives to provide quality care. Some nurses and midwives posted to such rural places had to work in deplorable health facilities that are very dangerous to their health and safety. The conditions of these health facilities do not meet the standards expected of a healthcare facility, yet nurses and midwives are required to work in such locations. The Government of Ghana over the last decade has however invested hugely in health care infrastructure across the country with state-of-the-art standards. The infrastructure development ranges from construction of new district and regional hospitals, polyclinics, health centres and CHPS compounds. Some of the clinical structures are accompanied with non-clinical structures such as accommodation for nurses and midwives. The accommodations are however not adequate to meet the number of employed nurses and midwives.

2.7 Health Policies and Regulations

Government policies and regulations play a crucial role in shaping the nursing and midwifery services in Ghana. Ensuring alignment between policies, regulations, practice and the needs of the population is essential. The compliance to professional regulation and practice is very crucial to safeguard the quality of life of the population. In recent times, there has been increased medico-legal cases involving both public and private institutions. The N&MC for instance has sanctioned about 5 nurses and midwives in the private sector in the last five years. These trends if allowed to fester will create disaffection of the population to nurses and midwives. It is therefore important to adopt high level quality improvement and best practices in nursing and midwifery care.

2.8 Service Delivery

Service delivery is pivotal in any outcome of a healthcare organization. Currently, healthcare service delivery in Ghana varies significantly across the regions. Different cadres of and Midwifery health professionals available in providing care and support for clients. The national implementation of NHIS is promoting access to health care services across all levels of care. The health system has a structured referral system for continuity of care across the levels but with poor coordination mainly between the levels. The existence of regulatory bodies for regulating healthcare institutions are a strong base for ensuring adherence to standards of care and professional practice, although regulatory monitoring is not as effective as expected. The finalization of the essential package of health services for all the levels of care is good intervention to support nursing and midwifery services.

The Nursing and Midwifery Council's redefinition of the scope of practice for all cadres of nurses and midwives is a positive development. This will help in reducing ambiguities in the practice of nurses and midwives. There are still a number of challenges affecting service delivery particularly at the Primary Health Care level. All the health facility capacity assessments conducted indicate severe shortages in basic supplies, medicines and equipment. The CHPS verification exercise conducted in 2018 revealed that only about a third of CHPS were considered to have basic equipment. The 2020 EMoNC survey showed that the proportion of facilities able to provide BEMoNC was low and declining; and there were persistent stock-outs of supplies and medicines.

Sexual, Reproductive, Maternal, Newborn and Child Health and Nutrition services are very critical to the achievement of UHC in Ghana.

Well empowered midwives and other nurses have a key role in improving the existing indicators. Maternal Mortality rate of 310 per 100,000 live births (MHS, 2017) still remains high; the availability of skilled birth attendants is still limited though skilled delivery has improved from 76% in 2014 to 88% in 2022. Under 5 mortality has also improved from 60 per 1000 live births in 2014 to 40 per 1000 live births in 2022 (GDHS, 2022).

However, there remain serious challenges especially in rural areas when it comes to access to such services. This may hamper efforts to reduce maternal and child deaths and achieve the Sustainable Development Goals. It is therefore very relevant for nurses and midwives to work more closely together and chat the pathway for the health sector.

2.9 Implementation of Network of Practice (NoP)

Ghana has opted to use a 'Hub and Spokes' model for the design of the NoPs because it aligns most closely with its district health structure. This new care model has significant implications for nursing and midwifery services at the primary healthcare level, as the Networks of Practice will provide comprehensive, patient-centred networks that deliver equitably distributed, high-quality continuous primary conditions. including common care Communicable Diseases (NCDs), Reproductive, Maternal, Neonatal, Child Health, Adolescent Health, and Nutrition (RMNCAH-N). This strategic plan duly recognises the NoP as a vital and an integral part of the service delivery architecture and part of nursing and midwifery practice.

2.1.0 Data Governance

Data governance in nursing and midwifery ultimately aims to promote the effective and ethical use of healthcare data, ensuring that it is accurate, secure, and accessible for quality patient care and research purposes. There are several contemporary issues of data governance in nursing and midwifery practice that are relevant today. These include:

Privacy and confidentiality: With the increasing digitization of patient health records and the use of electronic health systems, ensuring privacy and confidentiality of patient data has become a significant issue. Healthcare organizations need to implement robust data governance policies and procedures to protect patient information from unauthorized access and breaches.

Data quality and integrity: Maintaining the accuracy and integrity of data is crucial for effective healthcare decision-making. However, issues related to data entry errors, incomplete documentation, and inconsistent data standards can compromise the quality of healthcare data. Data governance practices should focus on ensuring data accuracy, validity, and completeness.

Interoperability and data sharing: Nursing and midwifery practice involves collaboration and communication among various healthcare providers and organizations. However, different electronic health record systems and incompatible data standards can hinder effective data sharing and exchange. Data governance efforts should address interoperability challenges to enable seamless sharing of patient information across different healthcare settings.

Ethical considerations: The collection and use of health data raise ethical concerns, especially related to informed consent, data ownership, and potential misuse of sensitive information.

Data governance strategies should incorporate ethical frameworks, guidelines, and policies to ensure the ethical use of patient data in nursing and midwifery practice.

Security and cyber-security: As healthcare systems become increasingly dependent on technology, the risk of security breaches and cyber-attacks also increases. Protecting patient data from unauthorized access, hacking, and ransomware attacks requires robust cybersecurity measures and strong data governance practices.

Data analytics and decision support: Utilizing data analytics and decision support tools can enhance nursing and midwifery practice by providing evidence-based insights for clinical decision-making. However, challenges related to data analytics infrastructure, data analytics skills of practitioners, and interpretability of analytics results need to be addressed through effective data governance practices.

Overall, contemporary issues of data governance in nursing and midwifery practice revolve around privacy, data quality, interoperability, ethics, security, and leveraging data analytics for improved patient outcomes. Developing comprehensive data governance frameworks is essential to address these issues and ensure the effective and responsible use of data in healthcare.

2.1.1 Opportunities

The following opportunities have been identified to support the achievement of the plan

Collaboration and Partnerships

Strengthening collaboration among different stakeholders, such as the government, healthcare organizations, the private sector and academic institutions, can lead to improved training, resource allocation, and service delivery.

Partnerships with international organizations can also provide opportunities for knowledge exchange and capacity building.

Technology and Innovation

inadequate are health facilities in terms of equipment availability. In infrastructure and addition, available facilities and equipment are often inefficiently and sub-optimally utilized. Digital health technologies have become an essential resource in primary care, and with the emergence of COVID- 19, health systems are seeing rapid integration of technology such as telemedicine that supports primary care and essential public health functions in many ways. The adoption of digital health technologies, telehealth services, and electronic health records can enhance the efficiency and effectiveness of nursing and midwifery services. Utilizing mobile health applications can also help in training and engaging with healthcare professionals in remote areas. The MoH has already rolled out the national agenda to digitize all institutions under the e-health project in line with the government digitization agenda.

Community Engagement and Empowerment

Involving and educating the community about the role of nurses and midwives can increase awareness of the services available and promote trust in the healthcare system. Empowering communities to take an active role in their healthcare can improve health outcomes and relieve some of on healthcare professionals. Overall, burden situational analysis highlights the need for addressing challenges, improving education and training workforce programs, and enhancing the healthcare infrastructure in Ghana. By leveraging opportunities for collaboration, technology adoption, and community engagement, nursing and midwifery services can be strengthened to meet the evolving healthcare needs of the population

CHAPTER 3 STRATEGIC DIRECTIONS AND INTERVENTIONS

The following Seven Strategic Directions have been agreed upon for the implementation of the next strategic plan:

- > EDUCATION
- > JOBS
- > LEADERSHIP
- SERVICE DELIVERY
- DATA GOVERNANCE
- > RESEARCH AND INNOVATIONS
- > PARTNERSHIPS AND COLLABORATION

3.1 Strategic Objectives and Interventions

Strategic Objective 1: Education

Ensure high quality nursing and midwifery education in line with global standards.

Strategic Interventions

- 1. Standardize nursing and midwifery curricula for all programmes in line with WHO/ICN/ICM competency-based system.
- 2. Invest and expand equipment and infrastructure of nursing and midwifery training institutions including establishment of simulation centres.
- 3. Develop faculty plans for higher academic qualifications.
- 4. Rationalize annual admission of nursing and midwifery students.
- 5. Review and develop National Preceptorship Policy.

- 6. Scale-up implementation of National Nursing and Midwifery Professional Mentorship Programmes.
- 7. Introduce modern pedagogical and new technologies in teaching and learning.
- 8. Intensify regulatory monitoring and supervision of both public and private institutions.
- 9. Streamline clinical placement and supervision of student trainees.
- 10. Increase the training of nurse/midwife specialists for population needs.
- 11. Identify and accredit health training institutions and facilities for clinical practice.
- 12. Upgrade nursing and midwifery training colleges to degree awarding institutions.
- 13. Establish Nursing & Midwifery Education and Practice Centres of Excellence (MEPCEP)

3.2 Strategic Objective 2 : Jobs

Strengthen mechanisms for the training, employment, deployment, retention and management of migration of nursing and midwifery workforce

Strategic Interventions

- 1. Increase public sector employment of nurses and midwives.
- 2. Develop mechanisms to leverage employment opportunities for nurses and midwives in the private sector.

- 3. Introduce mechanisms and systems for equitable distribution and streamlining of transfer processes of nursing and midwifery workforce.
- 4. Advocate and influence mechanisms for the improvement of salary structure and conditions of service for nurses and midwives.
- 5. Streamline mechanisms to ensure clear career pathways for nursing and midwifery workforce.
- 6. Develop a policy framework on nursing and midwifery migration and reintegration.
- 7. Develop mechanisms to streamline human resource and management processes of nurses and midwives in all agencies of the Ministry.
- 8. Institutionalise employee assistance programmes and staff support systems in all agencies.
- 9. Enhance the development and training of nursing and midwifery workforce.
- 10. Institutionalise clinical mentoring programme at all levels of care.
- 11. Expand study leave opportunities for nurses and midwives.

3.3 Strategic Objective 3: Service Delivery

Ensure universal access to responsive, and efficiently managed quality nursing and midwifery services across all agencies and levels.

- 1. Ensure equitable supply and distribution of modern equipment for health facilities at all levels.
- 2. Develop national policy guidelines on domiciliary midwifery and home-care nursing.
- 3. Develop and implement mechanisms to enhance quality improvement and safety methods in nursing and midwifery at all levels.
- 4. Introduce health technology assessment mechanisms in nursing and midwifery practice.
- 5. Ensure the participation of nurses and midwives in the national roll out of Network of Practice (NoP).
- 6. Intensify regulatory monitoring of public and private healthcare institutions.
- 7. Ensure national adoption and implementation of WHO labour care guide.
- 8. Develop mechanisms to strengthen onsite clinical supportive supervision and monitoring
- 9. Institute and implement mechanisms for patient and workplace safety for nursing and midwifery care.

3.4 Strategic Objective 4 : Leadership

Strengthen leadership and governance systems for nursing and midwifery at all levels.

- 1. Establish leadership development programmes for senior nursing and midwifery leaders and managers across agencies.
- 2. Roll out the implementation of nursing and midwifery mentorship programmes at all levels.
- 3. Institutionalise the coordination of the nursing and midwifery quadriad body.
- 4. Institutionalise the orientation and training of newly appointed or promoted nurses and midwives into leadership positions.
- Advocate for the establishment of a Directorate of Nursing & Midwifery at Mental Health Authority & CHAG.
- 6. Develop Scheme & Conditions of Service for Health Training Institutions.
- 7. Institutionalise accountability systems for nursing and midwifery (ie. Nursing audit, patient satisfaction surveys).
- 8. Institutionalise nursing and midwifery performance management systems at all levels (mid-year and annual performance reviews).
- 9. Conduct a national nursing and midwifery harmonised, integrated, supportive supervision, monitoring and evaluation for both public and private institutions.

3.5 Strategic Objective 5 : Data Governance

Strengthen nursing and midwifery data governance and information systems for clinical and management decisions.

Strategic Interventions

- 1. Develop a mechanism for harmonisation of agency specific data systems for nursing and midwifery.
- 2. Leverage on existing national intra-operability architecture for nursing and midwifery data governance systems.
- 3. Undertake a national roll out and integration of NURSMID documentation for nursing and midwifery services.
- 4. Invest in IT infrastructure for nursing and midwifery data management systems.
- 5. Develop national regulatory guidelines for mobile phones and social media use by nurses and midwives.

3.6 Strategic Objective 6: Research & Innovations

Strengthen nursing and midwifery research and innovations for evidenced-based care.

- 1. Develop mechanisms to increase interest in nursing and midwifery research in clinical and academic settings.
- 2. Institutionalize an annual national nursing and midwifery research agenda.
- 3. Institutionalize annual nursing and midwifery research forums.

- 4. Institute a national nursing and midwifery research fund and grant management systems to enhance evidenced-based research.
- 5. Conduct Regional and Global Exchange programmes on best practices

3.7 Strategic Objective 7: Partnerships and Collaboration

Strengthen partnership and collaboration for nursing and midwifery systems.

- 1. Establish a framework for knowledge management and transfer for nursing and midwifery services.
- 2. Establish sustainable financing mechanisms for nursing and midwifery systems.
- 3. Collaborate with other cadre of staff for quality nursing and midwifery practices.
- 4. Establish regular engagement of partners to support the implementation of the Strategic Plan at national and agency levels.

CHAPTER 4 IMPLEMENTATION FRAMEWORK

4.1 Implementation Strategy

The MoH shall have an oversight responsibility over the full implementation of the Strategic plan. The Ministry shall ensure that all relevant institutions (both public and private) work within the strategic framework to provide high-quality patient-centred care for better health outcomes for all people in Ghana. Specifically, the MoH shall among other functions:

- 1. Coordinate the efforts of all relevant stakeholders to ensure full implementation of the plan.
- 2. Collaborate with relevant stakeholders to undertake periodic performance monitoring and evaluation of the Plan.
- 3. Establish mechanisms and partnerships with relevant stakeholders for continuous collaboration in nursing and midwifery practice.
- 4. Ensure sustainable funding for nursing and midwifery practices within the health system

4.1.1 Oversight

The Ministry of Health led by the Director of Nursing and Midwifery will provide oversight in the implementation of this strategic plan and services. The Office will work through all the agencies under the existing structures and processes. The office shall serve as the coordination point for the implementation of the plan by all agencies.

4.1.2 Implementation Processes

- Agency Annual Work plan development
- Agency specific targets and indicators
- Agency specific Monitoring and Evaluation plans
- National and Agency Level Review and improvement
- Performance reporting

4.1.3 Engagement of Key Stakeholders

The plan shall be implemented in a collaborative manner. In this regard, all stakeholder and partners shall be continually engaged.

4.1.4 Resource Mobilization

The following resources are needed to ensure a full implementation of the plan

- Funding
- Technical support
- Logistics and other material resources

4.2 Communication & Dissemination

The plan will be launched and disseminated at all levels of the health system to create awareness and promote ownership among stakeholders towards smooth implementation.

4.2.1 Agency & facility level

Agencies of the Ministry of health shall ensure that the plan is well disseminated within their set ups using exiting communication and reporting lines.

4.2.2 New Lines of Communication

- 1. Set special meeting times with different levels of managers and staff for the dissemination
- 2. National, regional, and district seminars and workshops to disseminate the document (MoH/HTIU, GHS): ensuring that alone is the subject for the activity

CHAPTER 5 MONITORING AND EVALUATION FRAMEWORK

The strategic plan will be implemented through a well-structured monitoring and evaluation system to ensure that the strategic interventions are tracked and reported accordingly.

At national level, mid-year and end of year review meetings will be conducted to discuss progress in the implementation of the plan.

Agencies would also be expected to hold similar meetings to review progress of implementation of their respective plans.

All agencies will submit their respective targets in line with the strategic directions and interventions to the Ministry for compilation and national reporting.

The following matrix of indicators would be tracked in line with the seven strategic directions:

STRATEGIC INTERVENTIONS	OUTPUT /OUTCOME INDICATORS	MEANS OF VERIFICATION	SOURCE
Strategic Objective 1: Ensure high	h-quality Nursing and Mid	wifery education in	line with
global standards			
Standardise Nursing and	Nursing and Midwifery	Report	N&MC
Midwifery Curricula for all	Curricula Standardized		HTI
programmes in line with			Training
WHO/ICN/ICM competency-			Schools
based system.			20110015
Invest and expand equipment and infrastructure of nursing and midwifery training institutions including establishment of simulation centres.	Number of nursing and midwifery institutions with expanded infrastructure Number of Schools with simulation centres	Survey reports Reports by Institutions	HTIs and Universities
Develop faculty plans for higher	Number of institutions	Reports	HTIs and
academic qualifications	that have developed		Universities
	faculty plans for higher		
	academic qualification		

Rationalize annual admission of nursing and midwifery students	Annual number of students enrolled in the training schools versus number of graduates employed by government	Annual Reports	МоН
Review and develop National Preceptorship Policy	National Preceptorship Policy developed	Reports/policy document	МоН
Scale-up implementation of National Nursing and Midwifery Professional Mentorship Programmes.	Number of facilities and agencies implementing the Professional Mentorship Programme	Annual Reports	MoH Agencies
Introduce modern pedagogical and new technologies in teaching and learning.	Number of academic faculty members trained in pedagogy	Training Reports	HTIs
Intensify regulatory monitoring and supervision of both public and private institutions.	Number of monitoring visits conducted per year	Monitoring reports	N & MC

Streamline Clinical placement and supervision of student trainees	Clinical placement and supervision streamlined	Framework of Clinical Placement and Supervision available	HTIs
Increase the training of nurse/ midwife to meet population needs.	Number of nurses/midwives specialists trained annually	Reports	GCNM
Identify and accredit Health Training Institutions and facilities for clinical practice.	Number of Health Training institutions accredited	Reports	N&MC GTEC
Upgrade Nursing and Midwifery Training Colleges to degree- awarding institutions.	Proportion of Nursing and Midwifery Training institutions granted degree awarding status	Reports	GTEC N&MC
Establish Nursing & Midwifery Education and Practice Centres of Excellence (MEPCEP).	Number of Nursing and Midwifery Schools designated as Centres of Excellence	Reports	МоН

Strategic Objective 2: Strengthen mechanisms for training, employment, deployment, retention and management of migration for nursing and midwifery health workforce Number of nurses and Increase public sector employment **HR** Reports MoH. GHS. of nurses and midwives. midwives employed CHAG etc annually Develop mechanisms to leverage Framework for leveraging Report MoH employment opportunities for mechanisms for private Framework nurses and midwives in the private sector employment Document sector. available Framework for equitable Introduce mechanisms and systems Framework MoH for equitable distribution and distribution and transfer Available streamlining of transfer processes of nurses and midwives is of nursing and midwifery available workforce. Advocate and influence mechanisms C&AG **Reports** Conditions of Service of for the improvement of the Surveys MoH Nurses of salary structure and conditions and Midwives improved of service for nurses and midwives.

Streamline mechanisms to ensure clear career pathways for nursing and midwifery workforce.	Framework for clear career pathway for nurses and midwives implemented	Reports, Framework document	MoH, GHS, N&MC
Develop a policy framework on nursing and midwifery migration and reintegration.	Migration policy developed	Policy Document	МоН
Develop mechanisms to streamline human resource management processes of nurses and midwives in all agencies of the Ministry.	Human Resource Management Framework for managing nurses and midwives available	Human Resource Management Framework developed	MoH, GHS HTI, THs CHAG
Institutionalize employee assistance programmes and staff support systems in all agencies.	1.Employee Assistance Programme(EAP)inst itutionalized by Agencies 2.Number of employees assisted under the EAP	Desk Offices for EAP established	All Agencies

Enhance the development and training of nursing and midwifery workforce	Number of training and development programmes conducted by institutions and facilities across agencies	Annual Reports	All Agencies
Institutionalize Clinical Mentoring Programmes at all levels of care	Number of agencies and facilities implementing a Clinical Mentoring Programme	Annual Reports	All Agencies
Strategic Objective 3: Ensure un	iversal access to responsiv rvices across all agencies ar		nanaged
quality nursing and midwijery ser	Trees across an agenetes ar	ia ieveis.	
Enhance and accelerate a system for the supply and equitable distribution of modern equipment and accessories for nursing and midwifery care.	Proportion of Institutions who have received supply of equipment based on their needs	Annual Reports	All Service Delivery Agencies

Enhance mechanisms to ensure quality improvement and safety methods in nursing and midwifery at all levels of care.	Number of quality improvements and safety processes/initiatives enhanced by agencies/facilities	Annual Reports	All Agencies including training institutions
Introduce Health Technology Assessment mechanisms in nursing and midwifery practice.	Number of Health Technology Assessments conducted on nursing and midwifery care	Assessment Reports	МоН
Support and participate in the national roll out of Network of Practice (NoP).	Number of Nurses and Midwives involved in the roll out of the NoP at agency level	Survey Reports	Service delivery Agencies
Intensify regulatory monitoring of public and private practice	Recommendations on strategies to improve regulation of public and private sector health practice is available	Report	N&MC

Ensure national adoption and implementation of WHO labour care guide	WHO Labour care guide adopted nationally Number of midwives trained in WHO Labour care guide	Training and Dissemination Reports	N&MC Service Delivery Agencies
Develop mechanisms to strengthen onsite clinical supportive supervision and monitoring	Guidelines on onsite clinical supervision and monitoring available	Annual Reports	All service Delivery Agencies
Institute and implement mechanisms for patient and workplace safety for nursing and midwifery care	Number of patient and workplace safety mechanisms instituted and implemented by facilities	Annual Reports	All service delivery agencies
Strategic Objective 4: Strengthen midwifery at all levels	leadership and governance	systems for nursing	g and
Establish leadership development programmes for senior nursing and midwifery leaders and managers across agencies.	Leadership development programme for nursing and midwifery leaders established	Training Reports	MoH All Agencies

Enhance the implementation of the nursing and midwifery mentorship programmes at all agency levels.	Number of mentors and mentees enrolled in the mentorship programmes	Annual report of agencies	MoH All agencies
Institutionalize the coordination of the nursing and midwifery quadriad body.	Quadriad coordination body institutionalized	Minutes of meetings	МоН
Institutionalize the orientation and training of newly appointed or promoted nurses and midwives into leadership positions.	Number of senior nurses and midwives appointed and orientated on their new positions	Annual Reports	All Agencies
Advocate for the establishment of a Directorate of Nursing & Midwifery at Mental Health Authority & CHAG	1.Directorate of Mental Health Nursing established at the Head Office of the Mental Health Authority(MHA) 2. Directorate of Nursing and Midwifery at CHAG Secretariat established	Report and Appointment Letter of Director	МНА

Develop Scheme & Conditions of Service for Health Training Institutions (HTIs)	Scheme and Condition of Service for Health Training Institutions developed	Scheme and condition of service document	MoH-HTI
Institutionalize accountability systems for nursing and midwifery(i.e. Nursing audit, patient satisfaction surveys)	Number of nursing and midwifery audits carried out by institutions annually Number of patient satisfaction surveys conducted by institutions annually	Annual reports	All Agencies
Institutionalize nursing and midwifery performance management systems at all levels (mid-year and annual performance reviews).	Number of performance review meetings organized annually at national and agency levels	Annual Reports	MoH and All Agencies

Conduct a national harmonized, integrated, supportive supervision, monitoring and evaluation for both public and private institutions.	Number of supportive supervision and monitoring visits conducted at national level	Monitoring Reports	МоН
Strategic Objective 5: Strengthen systems for clinical and managem		uta governance and	information
Develop a mechanism for harmonization of agency specific data systems for nursing and midwifery.	Data system for Nursing and Midwifery Harmonized	Annual Data Collection Reports	МоН
Undertake a national roll out and integration of NURSMID documentation for nursing and midwifery services.	Nursmid documentation roll out and integrated nationally	Annual Reports	GHS
Invest in IT infrastructure and for nursing and midwifery data management systems	Number of facilities with IT solutions for Nursing and Midwifery Care	Annual Reports	All Agencies

Develop national regulatory guidelines for mobile phones and social media use by nurses and midwives.	National regulatory guidelines for mobile phones and social media use by nurses and midwives developed	Policy guidelines available	N&MC
Strategic Objective 6: Strengthen evidenced-based care.	nursing and midwifery res	earch and innovatio	onsfor
Develop mechanisms to increase interest in nursing and midwifery research in clinical and academic settings.	Framework to promote nursing and midwifery research developed	Framework Available	МоН
Institutionalize an annual national nursing and midwifery research agenda	Annual nursing and midwifery research agenda institutionalized	Reports Publications	МоН
Institutionalize annual nursing and midwifery research forums	One research forum conducted annually	Reports	МоН

Institute a national nursing and midwifery research fund and grant management systems to enhance evidenced-based research.	Nursing and Midwifery Research Fund instituted Constituted	Research Funds available Research proposals received. Reports	MoH Beneficiaries
Conduct Regional and Global Exchange programmes on best practices	1.Number of Regional and Global exchange programmes conducted annually	Reports	MoH Agencies
Strategic Objective 7: Strengthen p systems.	artnership and collaboration	n for nursing and mi	dwifery
Conduct Stakeholder Mapping of partners with interest in Nursing and Midwifery systems	Stakeholder mapping of Partners conducted	Report	MoH and Agencies
Establish regular engagement of partners to support the implementation of the Strategic Plan at national and agency levels.	Proportion of funds mobilised as a percentage of total strategic plan budget	Reports	MoH Agencies

Develop a framework for mobilizing funding and other resources	Number of proposals submitted for funding of Annual Programme of Work	Proposals available	MoH Agencies

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APPENDIX 1

SWOT ANALYSIS

THEMATIC	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
AREA				
EDUCATION	Structured Regulatory bodies (GTEC/NMC)	1. Continuous training of auxiliary nurses	1. Partner support for infrastructure and logistics	1. Non- adherence to laid down procedures in establishment/ management of training institutions
	Well defined education structure/system	2. Current entry point is diploma	Individual career development	2. Inadequate funding from central government for training institutions
	Structured curricula	3. Inadequate Faculty (Tutor)/ student (resident) ratio	Higher academic qualifications and programmes in some universities	3. Faculty burnout

THEMATIC	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
AREA				
	Career pathway for nursing and midwifery educators/ faculty	4. Low preceptor-student ratio	Non- implementation of policies	4. Less patronage of post-basic specialist programs
	Structured accreditation process for training institutions	5. Inadequate clinical training sites, skills and simulation labs	Alignment of GCNM and Post- basic programmes	5. Brain Drain/ Migration
	6. Availability of Specialist training programmes	6. Theory - practice gap	Opportunity to nursing and midwifery entry point from the Bachelors level	6. Poor conditions of service

THEMATIC	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
AREA				
	7. Availability of Clinical sites	7. Absence of MOUs between training institutions and health facilities	Collaboration between clinical areas and academic institutions for research	7. Existence of unaccredited training institutions
		8. Inadequate infrastructure for adequate specialist training.	7. Availability of CPD programmes to enable nurses and midwives upgrade themselves	8. Continuous training of certificate programmes
		9. Lack of sponsorship for specialist training at GCNM	Directions for	9. High intake of students 10.Political interference in the management of NMTCs

THEMATIC AREA	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
			National Health Policy	
SERVICE DELIVERY	1. Wider levels of service delivery	1.Inadequate modern infrastructure	international and	1.Poor implementation or operationalization of the Referral System
	2. Different cadres of Nursing and Midwifery health professionals	2.Inadequate logistics (IT/ Computers)	2.Technology adoption	2. Medico-legal issues

THEMATIC AREA	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
	3. Care organized at different levels	3. Inequitable distribution of human resources	3. Internet connectivity	3. Political Influence in the deployment of nurses & midwives
	4. NHIS promoting access to healthcare	4. Inadequate skill mix	4.Nursing & Midwifery entrepreneurship	4 Poor conditions of service (salary, workplace environment, insurance)
	5. Digitalization of care (EMR, Zip Line, Telemedicine)	5.Inadequate regulatory monitoring and supervision	5. Pro-activeness of nurses and midwives	5. Migration opportunities
	6. Networks of practice & Structured Referral system	6. Theory-practice gap	6. Rural incentive packages	

THEMATIC AREA	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
	policy guidelines	7.Limited number of specialized nurses and midwives.	7. Tele - Health	
	8. Well-defined organizational structure in many institutions	8. Lack of enforcement of workplace policies	8. National implementation of NursMid documentation (pre- & in service)	
	10. Existence of the regulatory bodies/ systems	8. Quaity variability	9. Implementation of WHO labour care guide	
	11. Competent nurses and midwives	9.Poor nursing and midwifery documentation		
	12. Professional scope of practice			

THEMATIC	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
AREA				
	13.Existence of essential package of health services			
LEADERSHIP	1. NM	1. Informal	1.NM	1. Unstructured
	Directorate at	training into	representation at	organogram
	the policy level.	leadership	various decision	(Regional and
		positions	making levels.	District levels)
	2.Higher	2. No formal	2. Individual	2. Restricted
	leadership set	training on	professional	directorship
	up (Regulation,	leadership and	development	positions
	Policy.	management in		reserved for
	Practice,	curriculum.		some particular
	Association)			professions
	3. Highly trained	3. Unstructured	3. Mentorship	3. Divided front
	nurses and	succession planning	programmes	and lack of
	midwives to			collaboration
	occupy			among nurses
	leadership			and midwives
	positions/ for			

THEMATIC	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
AREA				
	policy making			
	4. Mentorship programme being implemented in many institutions	4.Weak leadership engagement and coordination/communication (Regulation, Practice, Association, Policy)	4. Availability of leadership development/ training programmes	4. Political appointments/ interference/ alliance
	5.Availability of brilliant young nurses & midwives	5. Lack of Nursing leadership position (Director) at Mental Health Authority & CHAG	5. Utility of research	5. Weak leaders without requisite skills to perform
	6. Availability of experienced & senior nurses and midwives	6.Inadequate political strength to push nursing and midwifery agenda	6.Awards & recognition	

THEMATIC	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
AREA				
	7. Well-defined organisational structures	7. Inadequate leadership competencies		
	9. Diverse career pathways	8. Tendency for suppression by leaders 9. Absence of policy on succession planning		
		10.Absence of nurses and midwives in policy-making positions		
		11.Apathy in young leaders		

THEMATIC	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
AREA				
		12.Absence of CoS for nursing & midwifery leadership positions		
JOBS	1.Availability of N/M professionals at all levels	1.Ineffective planning, forecasting budgeting students/ and for service engagement	1. HR policies for professional development	1.Poor conditions of service
	2. Adequate health facilities for employment// job market outlets (public, private, quasi, CHAG)	2. Absence of financial clearance to employ graduates of nursing schools	2. Availability of nursing and midwifery graduates waiting for employment	2. Institutional lack of control about job placements

THEMATIC AREA	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
	3. Clear line of progression.	3. Inadequate equipment and limited resources	3. Tele-health and technology	3. Migration of experienced nurses of midwives
	4.Some experienced nurses and midwives still at post	4. Inadequate monitoring and supervision by the Regulator	4. Existing stakeholders for partnerships	4. Graduates staying home for a long time before employment
	5.Opportunities for advancement	5. Inequitable distribution	5. Global demand for Ghanaian nurses	5. Low Remuneration
				6.International labour market
	6. Policy guidelines for Practice	6. Inadequate skill mix	6. Enterprising opportunities for nurses/midwives	7.Unemployment

THEMATIC AREA	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
			entrepreneurshi p	
	7. Regulation for practice (certification, PIN, Monitoring)	7. Refusal to accept postings to remote areas.	7. Need for Specialization	8.Retrenchment/ Permanent injury/ Retirement
	8. Strong Associations	8. Delays in getting clearance for employment	8. Partner support for infrastructure and logistics	9. Drug Addiction
			9. Individual career development	10. Effects of Brain Drain (Nurse-Patient Ratio)
			10. Higher academic qualifications in some	

THEMATIC AREA	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
			universities	
PARTNERSHIPS AND COLLABORATIONS	nursing	Inadequate advocacy skills	Availability of technical and financial assistance from development partners & other agencies	1. Conflicts of interest
	2.Inter-agency collaborations 3.Vibrant Nursing and Midwifery Associations			
RESEARCH AND INNOVATION	Availability of clinical and	1.Lack of skills and confidence to initiate		Limited country- specific evidence-

THEMATIC AREA	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
	educational sites for research		midwifery researchers	based practices
		research findings	2. Data available through nursing and midwifery practice/ LHIMS	
		3.Inadequate linkage between research and policy		
DATA GOVERNANCE	1. Data integration	1. Resource intensive	1. Research and innovation	1. Data breaches
	2.Enhanced decision making	2. Confidentiality issues	2. National agenda for digitization	2. Legal consequences
	3.Existence of Data Protection Act	synchronized and		
		robust data on nursing and midwifery workforce		

THEMATIC AREA	STRENGTH	WEAKNESS	OPPORTUNITY	THREATS
		4.Inadequate data infrastructure		

APPENDIX 2: STAKEHOLDER MATRIX

Strategic Objective 1: Strategic		Responsibility		
Intervention	Lead Agency/Organisation	EXTERNAL	Collaborators LOCAL	
Ensure high quality nm education in line with global standards	MOH N&MC CHAG GHS GCNM	Development Partners (DPs) WHO, UNFPA, JHPIEGO, USAID, JICA MMDAS Ghanaian Nurses in the Diaspora	 GTEC Service consumers Nursing and Midwifery Associations Traditional Council Quasi Government Institutions Private Health Facilities COHETTI Universities offering nursing and midwifery programmes 	

Strengthen mechanisms for training, employment, deployment, retention, and management of migration for nursing and midwifery health workforce	MOH (HRHD) GHS (HRDD) GCNM CHAG Quasi-Government Institutions Mental Health Authority	WHO, ICN, ICM, Ghanaian Nurses in the Diaspora, DPs	 Nurse-Educators Groups Student Mental Health Authority All Nursing & Midwifery Association Nurses and Midwives Trainee Nurses & Midwives N & MC HTIs
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Ensure universal access to responsive better and efficiently managed quality nursing and midwifery services across all agencies and levels	MOH NHIA GHS HEFRA CHAG Mental Health Authority Teaching Hospitals Private Hospitals/ Maternity Homes	JICA Jhpiego UNFPA USAID WHO FCDO DPs	 National Information Technology Agency Trainee nurses and midwives FDA Ghana Standards Authority Environmental Protection Agency Service Consumers
Strengthen leadership and governance systems for nursing & midwifery	MOH, CHAG, GHS GCNM, Teaching Hospitals Quasi Facilities Private Mental Health Authority	JICA Jhpiego UNFPA USAID WHO FCDO DPs	 GCNM HEFRA Nursing/ Midwifery Associations

Strengthen nursing and midwifery data governance and information systems for clinical management decisions	MOH (RSIM CHAG GHS (PPMED) Teaching Hospital Mental Health Authority Private Quasi	JICA Jhpiego UNFPA USAID WHO FCDO DPs	 NITA Data Protection Agency
Strengthen nursing and midwifery research and innovations for evidenced-based care	MOH CHAG GHS GCNM NMC Teaching Hospitals Mental Health Authority Academic Institutions (Universities, HTIs)	JICA Jhpiego UNFPA USAID WHO FCDO Ghanaian nurses in the Diaspora	 Service Consumers Research Institutions (Noguchi, KCCR, CSIR) Associations

Strengthen	МОН	Ghanaian	• MOH (RSIM
partnerships and		nurses in the	• CHAG
collaboration for		Diaspora,	• GHS (PPMED)
nursing and		DPs	• Teaching Hospital
midwifery systems			Mental Health Authority
			• Private
			• Quasi

SUPPORTERS























