

MOH INTERIM CORPORATE PLAN

FY2023/24-FY2024/25



MINISTRY OF HEALTH



Hon. Valasi Luapitofanua T. Selesele MINISTER OF HEALTH

FOREWORD BY THE MINISTER OF HEALTH

It is with great pleasure to present the Ministry of Health Interim Corporate Plan for the period of July 2023 till June 2025.

This two-financial year plan has been formulated to reflect the Ministry of Health's commitment to the achievement of the health related Sustainable Development Goals, national health priorities and strategic outcomes articulated in the Pathway for the

Development of Samoa FY2021/22-FY2025/26 and the Health Sector Plan FY2019/20 – FY2029/30.

Through this Interim Corporate Plan, the Ministry of Health will continue to implement its Vision for "Accelerating Health and Wellbeing for a Healthy Samoa". It will also continue to fulfil its mission: "To provide comprehensive people-centred health care services through delivering preventative, promotive, curative and rehabilitation services; and continue to empower people of Samoa to take ownership of their health" in order to achieve its vision.

Furthermore, this Corporate Plan sets out the direction of the Ministry of Health will take over in the next two financial years, as we work on completing the merger of the two former entities i.e. Ministry of Health and National Health Service which became effective on 1st February 2019.

There have been achievements in the implementation of the previous MOH Corporate Plan FY2020/21-FY2022/23, and we must continue to sustain and build on our core values of safety, equity and fairness, integrity, respect for dignity, responsiveness, people-centred and confidentiality.

As the Minister of Health, I am confident that the works of the Ministry presented in this Corporate Plan, will meet the challenges that we encounter and to deliver safe and quality health services for better health outcomes of our people.

Ma le fa'aaloalo lava.

Hon. Valasi Luapitofanua To'ogamaga Selesele

MINISTER OF HEALTH



Aiono Dr. Alec Ekeroma

DIRECTOR GENERAL OF HEALTH

MESSAGE FROM THE DIRECTOR GENERAL OF HEALTH

The first two financial years (FY2020/21 & FY2021/22) of our existing MOH Corporate Plan FY2020/21-FY2022/23 had been a most challenging years for Samoa population living in and coping with the COVID-19 global pandemic. It has also been the most challenging of times for Samoa government and the Ministry of Health due to COVID-19 global pandemic and measles epidemic.

These and other challenges had provided an opportunity for the Ministry of Health to pause and reflect on our existing Corporate Plan. We know, there are some key areas we need to progress which will best support the health and wellbeing of the population, but we could not do due to shift of health priorities to implementation of epidemic and pandemic preparedness and responses.

As a result, this Interim Corporate Plan for the Ministry of Health for the next two financial years (FY2023/24 & FY2024/25) focuses on recovery and reprioritization of our identified objectives in the existing Corporate Plan FY2020/21-FY2022/23. It takes account of lessons learnt from the measles epidemic and COVID-19 global pandemic and informal feedback provided from both the Ministry of Health Staff and wide range of health sector partners.

We have an ambitious vision in our existing Corporate Plan (FY2020/21-FY2022/23), and this Interim Plan sets out where the Ministry of Health want to be by the end of financial year 2024/25.

The Ministry will build on many reasons to invest in health such as quality of life, promoting health and wellbeing of our people, and our population will see an enhanced people-centred and community engagement with achievable benefits.

Ma le fa'aaloalo lava.

Aiono Dr. Alec Ekeroma

DIRECTOR GENERAL OF HEALTH

TABLE OF CONTENT

Contents	Page No.
FOREWORD BY THE MINISTER OF HEALTH	1
MESSAGE FROM THE DIRECTOR GENERAL OF HEALTH	2
TABLE OF CONTENT	3
INTRODUCTION	4
MINISTRY OF HEALTH'S PLANNING FRAMEWORK	5
CORPORATE PROFILE FOR FINANCIAL YEARS 2023/24 -2024/25 DIRECTION	6
Vision:	6
Mission:	6
Core Values:	6
OUR STRATEGIC PRIORITIES & KEY OUTCOMES	7
Strategic Priorities	7
7 Strategic Key Outcomes	7
MINISTRY OF HEALTH KEY PERFORMANCE INDICATORS	8
MONITORING AND EVALUATION	78
RISKS AND RISK MANAGEMENT	78

INTRODUCTION

The Ministry of Health Interim Corporate Plan FY2023/24 – FY2024/25 is a temporary replacement for the existing Corporate Plan (FY2020/21-FY2022/23) whilst the Ministry develops a new five-year plan which will coincide with the completion of the Health Sector Plan FY2019/20-FY2029/30 in 2030.

This plan sets out how the Ministry aim to progress over the next two financial years against the Seven Key Outcomes set out in the MOH Corporate Plan FY2020/21-FY2022/23 and Health Sector Plan FY2019/20-FY2029/30.

KEY OUTCOMES	STRATEGIC GOALS				
Key Outcome 1: Improved health systems, governance and administration	Strengthen health system governance for Universal Health Coverage				
Key Outcome 2: Improved prevention, control and management of Communicable and Neglected Tropical Diseases	End the epidemics of Neglected Tropical Diseases and combat Communicable Diseases				
Key Outcome 3: Improved prevention, control and Management of Non-Communicable Diseases	Combat Non-Communicable Diseases and their risk factors and minimize NCD preventable deaths.				
Key Outcome 4: Improved Sexual and Reproductive Health	Promote Universal Access to Reproductive Health Related Services				
Key Outcome 5: Improved maternal and Child Health	Reduce maternal and perinatal mortality, and reduce child morbidity and mortality				
Key Outcome 6: Improved Healthy Living through Health Promotion and Primordial Prevention	Improve and strengthen people-centred health promotion and primordial prevention				
Key Outcome 7: Improved risk management and response to disasters, public health emergencies and climate change.	Strengthen resilience and adaptive capacity, capacity building and integrating climate change measures into health policies and plans, and raise awareness on climate adaptation and early warning.				

MINISTRY OF HEALTH'S PLANNING FRAMEWORK

The Ministry of Health follows the Samoa National Planning Framework to guide efforts in achieving the vision and mission of this Interim Corporate Plan. This is illustrated in Figure 1 below.

Figure 1: National Planning Framework

Samoa National Planning Framework **PATHWAY FOR** HEALTH SECTOR PLAN DIVISIONAL MINISTRY OF HEALTH CORPORATE PLAN FY2020/21 - FY2022/23 DEVELOPMENT OF SAMOA ANNUAL PERFORMANCE FY2019/20 - FY2029/30 FY2021/22-FY2025/26 The Health Sector Plan Pathway for The MOH Corporate Plan Divisional the Annual Development of Samoa is the provides overall direction for outlines the key strategies and Performance Plans are the the Ministry over a ten year national strategy that guide performance indicators of the primary operational frameworks the development of all sector period, including a situation Ministry of Health to guide and guiding the work of each analysis of key health issues plans. monitor progress toward Ministry's division, including and needs, high level goals achievement of the Health departments, programs, describing desired changes, Sector Plan objectives. hospitals, divisions key strategic approaches for sections/units. achieving those goals, and specific, measurable objectives that will help us determine whether we are actually moving in the right direction

CORPORATE PROFILE FOR FINANCIAL YEARS 2023/24 - 2024/25 DIRECTION

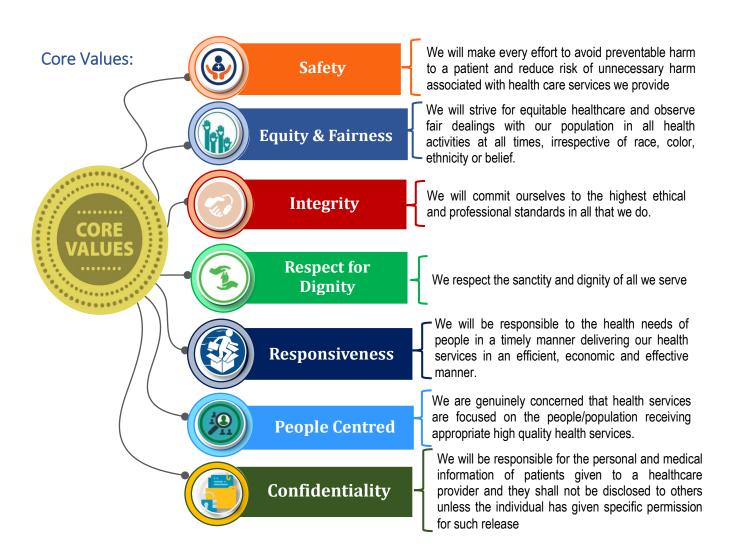
The Corporate Profile of the existing Corporate Plan (FY2020/21-FY2022/23) remains for this Interim plan and is in line with the Pathway for the Development of Samoa FY2021/22-FY2025/26 and the Health Sector Plan FY2019/20 – FY2029/30.



Accelerating Health and Well-being for a Healthy Samoa



To provide comprehensive people-centred health care services through delivering preventative, promotive, curative and rehabilitation services; and continue to empower people of Samoa to take ownership of their health



OUR STRATEGIC PRIORITIES & KEY OUTCOMES

The Ministry of Health strategic priorities remains the same from the past three years, as these are also the priorities of Samoa's health sector highlighted in the Health Sector Plan FY2019/20-2029/30. These strategic priorities are linked to the seven key outcomes of the health sector.



Source: HSP FY2019/20-FY2029/30

7 STRATEGIC KEY OUTCOMES



MINISTRY OF HEALTH KEY PERFORMANCE INDICATORS

The Ministry of Health's Key Performance Indicators in this Interim Corporate Plan will be implemented within two financial years (FY2023/24 & FY2024/25). All divisions are responsible for ensuring the successful implementation of these Key Performance Indicators, which are categorized under the Seven Key Outcomes of the Ministry and the Health Sector.

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	OMINISTRATION			
Strategic Goal:	To str	engthen health sys	tem governance for Univers	al Health Coverage			
OUTPUT	BASELINE	TARGET	KEY PERFORMANCE	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE
INDICATOR	DATA		INDICATORS				DIVISION
Existence of up-to-date health legislations, strategies and policies to address national health needs and priorities	New indicator	All new health legislations, strategies and policies are developed and implemented	Development of new health legislations, strategies and policies	Development of new health policies and Strategies: - National Mental Health Policy - National Cervical Cancer Elimination Strategy - Rural and Urban Services Plans - Samoa National Surgical Obstetric Anesthesia Plan - Smoking Cessation Manual for Trainers - Samoa National Guidelines on Protection of Public Policies Commercial and other vested interests of the Tobacco Industry - Social and Behavior change Communication Strategy for the Prevention and Control of Tobacco Smoking in Samoa 2021-2023	FY2023/24 FY2023/24 FY2024/25 FY2024/25 FY2024/25 FY2024/25	 MOH Annual Reports MOH Corporate Plan Implementation Status Report National Health Policies/Plans Registers 	 Strategic Planning, Policy and Research Hospital and Clinical Services/Surgery, Obstetric and Anesthesia/Labora tory/Dental Health Protection and Enforcement Division National Heath Programs, Wellness, Health Education and Health Promotion

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AI	DMINISTRATION			
Strategic Goal:	To str	engthen health syst	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				 National Healthcare Waste Management Policy Burial Ordinance review School Health Promotion Manual/SOP PEN FaaSamoa Village Community Health Promotion Protocol Infant & Young Child Feeding Regulation 2020 Food & Nutrition Guideline for Samoa 2022 New Emergency medical assistance team protocols (SEMAT) Blood donation strategy Dental Practitioner Regulation 2022 	FY2023/24 FY2023/24 FY2023/24 FY2023/24 FY2023/24		
		All existing health legislations, strategies and policies are reviewed and updated	Review and update of existing health legislations, strategies and policies	Review and update of: Existing Health Legislations, Strategies and Policies: - Samoa Allied Health Professionals Act 2014 - Mental Health Act 2007 - National Mental Health Policy 2006 - National Infection Control Policy 2011 - 2016 - National NCD Revised Policy 2018-2023	FY2024/25 FY2024/25 FY2023/24 FY2024/25 FY2023/24	 MOH Annual Reports MOH Corporate Plan Implementation Status Report National Health Policies/Plans Registers 	 Strategic Planning, Policy and Research Hospital and Clinical Services Laboratory Dental Quality Assurance & Infection Control Health Professional

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	OMINISTRATION			
Strategic Goal:	To str	engthen health sys	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				 National Laboratory Policy Dental and Oral Health Services Clinical Guideline National Healthcare Waste Management Strategy 2020-2025 School Health Manual/SOP PEN Faa-Samoa Village Community Health Promotion Protocol 	FY2023/24 FY2023/24 To be reviewed every 5 years Every two years		Development & Registrar • Health Protection and Enforcement Division
Existence of clinical guidelines, protocols and Standard of Operating Procedures to guide the performance of health professionals	New indicator	All clinical guidelines, protocols and Standard of Operating Procedures for Clinical Services are developed and updated	Development, review and update of clinical guidelines, protocols and Standard of Operating Procedures for Clinical Services	- Clinical Handbook Development and/or Review and Publication of: - Clinical Governance Framework - Clinical Guidelines/Protocols - ICU Admission Criteria Protocol/Policy - Emergency Standard Treatment Guidelines/Protocols - Hospital Referral System Protocols/Guidelines	FY2023/24 FY2024/25 FY2023/24 FY2023/24 FY2023/24	 MOH Annual Reports MOH Corporate Plan Implementation Status Reports National Health Policies/Plans Registers 	 Strategic Planning, Policy and Research Hospital and Clinical Services
Compliance of healthcare professionals with Clinical Protocols improved	New indicator	Clinical management and treatment errors reduced	Proportion of healthcare professionals who are 100% complied with clinical protocols and guidelines	Effectively monitor the healthcare professionals and their compliance with clinical protocols and guidelines that guide their performance	Quarterly	 Quality Assurance Reports MOH Annual Reviews MOH Annual Reports 	 Quality Assurance and Infection Control Health Professionals Development &

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	OMINISTRATION			
Strategic Goal:	To str	engthen health syst	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
							Registrar
Compliance of healthcare professionals with registration procedures	93% average for all healthcare professionals are complied with registration procedures and professional	100% of healthcare professionals are complied with registration procedures	Registration Procedures and Professional Standards for all health professionals are in place and strengthened	Ensure the health professional registration procedures are adhered to by all health professionals	Ongoing	 Quality Assurance Monitoring Reports MOH Annual Reports MOH Corporate Plan Implementation Status Reports 	 Registrar and Health Professional Development Hospital & Clinical Services Integrated Nursing Division
Compliance of healthcare professionals with professional standards	standards (HSP 2008- 2018 Full Review Report)	100% of healthcare professionals are complied with professional standards	All health professionals are informed, understand and comply with their Professionals Standards and Registration Procedures	Conduct induction programs and Information Sessions for all health professionals on their Professional Standards & Registration Procedures Ensure professional standards are reviewed and strengthened: - Medical - Nursing & Midwifery - Dental - Pharmacist Allied Health Professionals Effectively monitor the implementation of Health Professionals Standards	Financial Yearly Basis Ongoing Ongoing	 Quality Assurance Monitoring Reports MOH Annual Reports MOH Corporate Plan Implementation Status Reports 	Registrar & Health Professional Development Quality Assurance & Infection Control
				Conduct regular clinical audits for all clinical areas	Ongoing	Clinical Audit Reports	Quality Assurance & Infection

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AI	OMINISTRATION			
Strategic Goal:	To str	engthen health sys	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				both in Urban and Rural Health Facilities			Control
			Proportion of healthcare professionals and allied health professionals who are currently practicing with: - Annual Practicing Certificates and - Temporary Practicing Certificates	Ensure the issuance of Annual Practicing Certificates and Temporary Practicing Certificates to healthcare professionals and allied health professionals follows the health professional registration procedures	Ongoing	Healthcare Professional and Allied Health Professionals Register	 Registrar and Health Professional Development
				Ensure healthcare professional and allied health professionals registry is available online	FY2023/24	MOH Annual Review Reports	 Registrar & Health Professional Development Health Information and Technology Communication Services
Effective Monitoring of the MOH Workforce Condition	New indicator	Effective MOH Human Resources Management System in place	Evidence of mechanisms in place to effectively manage and monitor the Ministry of Health workforce performance and build their capacity on their specific areas of work	Effectively implement and strengthen MOH Performance Appraisal system	Ongoing	 Human Resources Progress Reports MOH Annual Reports MOH Corporate Plan Implementation Status 	 Human Resource and Administration ALL DIVISIONS
				Implement Digital Archive/s of MOH Staff personnel records	Ongoing	MOH Annual Reports MOH Corporate Plan	 Human Resources and Administration Health Information

KEY OUTCOME 1:			EMS, GOVERNANCE AND A				
Strategic Goal:			tem governance for Univers				
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
						Implementation Status Report	and Technology Communication Services
				Compulsory of signing and effective monitoring of all health staff compliance with their oaths and other mandated obligations	Ongoing	 Human Resources Progress Reports MOH Annual Reports MOH Annual Performance Reviews 	 Legal Consultant Human Resources and Administration ALL DIVISIONS
				Develop/update career pathways for all health professionals including allied health professionals	FY2023/24	MOH Annual Performance reviews MOH Annual Reports MOH Corporate Plan Implementation Status Reports	° Registrar and Health Professional Development ° Human Resources and Administration ° Hospital and Clinical Services ° District and Community Health Services
				Ensure the establishment of multi-disciplinary teams in district hospitals and community health centres to enhance public health service delivery	Ongoing	 MOH Annual Reports Health Sector Annual Reviews MOH Corporate Plan Implementation Status Reports 	 Human Resources and Administration Health Sector Coordination, Resourcing and Monitoring District and

KEY OUTCOME 1:	IMPRO	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	OMINISTRATION			
Strategic Goal:	To str	engthen health sys	tem governance for Univers	al Health Coverage			
OUTPUT	BASELINE	TARGET	KEY PERFORMANCE	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE
INDICATOR	DATA		INDICATORS				DIVISION
							Community Health Services
Number of health professionals and Other Allied Health Professionals increased	Doctors= 121 Nurses = 445 Dentists= 13 Pharmacists= 13 Other Allied Health Professionals= 74 (MOH Annual Report Financial Year 2018/2019)	Trained and qualified workforce in all areas of health increased (clinical, specialists, allied health professionals and support services) by 5%	Proportion/Numbers of required qualified skilled staff recruited in specialized areas of clinical services increased	Recruit specialized doctors and nurses in each specialist clinic: 1. Eye Clinic 2. Medical Clinic 3. ICU Unit 4. Anesthesia 5. Operating Theater 6. Surgeon 7. Dental Orthodontic Unit 8. Dental Prosthodontics Unit 9. Dental Paediatric Unit 10. Oral Surgery Unit	Ongoing	Human Resources Progress Reports MOH Annual Reports	 Human Resources and Administration Hospital and Clinical Services/ TTM and MTII Dental Health Services

KEY OUTCOME 1:	IMPRO	OVED HEALTH SYST	TEMS, GOVERNANCE AND AL	DMINISTRATION			
Strategic Goal:	To stre	engthen health sys	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
			Proportion/Numbers of required Other Allied Health professionals qualified skilled staff recruited increased	Ensure specific professional development programs for clinicians working in every specialist clinic are conducted, evaluated and reported: Vacute care Intensive care Endoscopy Echo EST (Treadmill) Renal medicine Rheumatic Heart Disease prevention Peri-Operative Ultrasound Urology Plastic Surgery Ear, Nose and Throat Radiographer Sonographer	Ongoing	 Human Resources Progress Reports MOH Annual Reports MOH Annual Performance Reviews 	 Hospital & Clinical Services/ENT Human Resources & Administration Registration & Health Professional Development Health Sector Coordination, Resourcing and Monitoring
			Proportion of MOH staff (clinical, specialists, allied health professionals and	Conduct Annual Training Needs Analysis/Assessment for all MOH Staff based on	Financial yearly basis	Human Resources Progress Reports MOH Annual	Human Resource and Administration
			support services) with professional development	gaps identified in their Performance Appraisals		Reports	Health Professional

KEY OUTCOME 1:			STEMS, GOVERNANCE AND A				
Strategic Goal:	To stre	engthen health sy	ystem governance for Univer	rsal Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
			needs being addressed				Development & Registrar • ALL DIVISIONS
				Implement the Samoa Health Workforce Development Plan 2021- 2026	Ongoing	MOH Annual ReportsMOH Workforce Plan Reviews	Human Resource and AdministrationALL DIVISIONS
				Implement the National Human Resources for Health Strategy 2021-2026	Ongoing	MOH Annual Reports	 Human Resource and Administration Policy, Planning and Research ALL DIVISIONS
				Strengthen the active participation of health professionals to international obligations they are affiliated to (International/Regional Health Professional Conferences	Ongoing	MOH Annual Reports	Hospital & Clinic ServicesPublic Health Services
				Ensure the provision of short-term professional development programs for clinicians to upgrade their required skills	Ongoing	 Human Resources Progress Reports MOH Annual Reports 	 Human Resources & Administratio Hospital & Clinic Services

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	DMINISTRATION			
Strategic Goal:	To str	engthen health sys	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
	New indicator	All newly recruited healthcare professionals and allied health professionals should attend and complete induction/orienta tion programs	Proportion of nursing students officially completed Annual Nursing Orientation Program	Effective monitoring of the Annual Nursing Orientation Program implementation	Annually	 Annual Nursing Orientation Program Reports MOH Annual Reports 	 Registrar and Health Professional Development Integrated Nursing Services
			Proportion/numbers of MOH newly recruits attending and completing induction/orientation programs	Conduct induction programs for all newly recruited health workers including healthcare professionals and allied health professionals	Annually	MOH Annual Reports MOH Annual Reviews	 Human Resources and Administration Registrar and Health Professional Development ALL DIVISIONS
Effective management of Samoa Overseas Treatment Medical Scheme	No. of Patient Sent Overseas for Medical Treatment = 167 patients (OVT Report FY2015/16)	Patient sent overseas for treatment reduced by 2% every financial year	Evidence of effective management of OVT Scheme	Effectively monitor the implementation of the Samoa Overseas Medical Treatment Scheme Revised Policy 2023	Financial yearly basis	 OVT Progress Reports MOH Annual Reports 	 Hospital and Clinical Services/OVT Unit Finance & Procurement Strategic Planning, Policy & Research

KEY OUTCOME 1:			EMS, GOVERNANCE AND AL				
Strategic Goal:	To st	rengthen health syst	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Implement public awareness program on OVT processes	Ongoing	 OVT Progress Reports MOH Annual Reports 	 Hospital and Clinical Services/OVT Unit Health Promotion Unit
Effective monitoring & coordination of	New indicator	All health research proposals are	Number of health research proposals received and registered	Regularly update Health Research Register	Ongoing	Health Research Progress ReportsMOH Annual	Strategic Planning, Policy and Research
health research		fully complied with Health Research	Number of Health Research Committee Meetings conducted	Regularize Health Research Committee Meetings	Every 2 months	Reports	
		Guideline	Number of Health Research MoUs signed	Ensure Health Research MoUs are in line with Health Research Guidelines Requirement	Ongoing		
Effective provision of quality and safe healthcare services strengthened	 ≤1hour= at least 5.6% ≥1hour = at least 57.1% 	Waiting time reduced in all areas where healthcare service is delivered: < 30 mins = 60% ≥ 30 mins = 40% ≥ 1 hr = at least 10%	Number of patients per doctor/ per nurse/ per dentist/ per therapist/ per hygienist in: - Emergency Department at TTM Hospital - TTM & MTII General Outpatients - Triaging areas in all health facilities - Oral Emergency/ Urgent Care unit (UCU) TTM Hospital	Implement effective interventions that would assist in provision of more staff to work at: ✓ TTM Hospital Emergency Department ✓ MTII & TTM Hospitals triaging areas ✓ General Outpatients and ✓ Specialist clinics ✓ Public Health Facilities (District Hospitals and Health Centres) ✓ Main Dental Clinic —	Ongoing	 MOH Annual Reports Health Facilities Utilization Assessment Reports 	 Human Resources and Administration Hospital and Clinical Services Dental Health Services District and Community Health Services

KEY OUTCOME 1:			EMS, GOVERNANCE AND AI				
Strategic Goal: OUTPUT INDICATOR	BASELINE DATA	TARGET	tem governance for Univers KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Emergency/ UCU TTM Hospital			
				Conduct Health Services and Facility Utilization Assessment	Financial yearly basis	 MOH Annual Reports Health Facilities Utilization Assessment Reports 	Quality Assurance & Infection Control
	New Indicator	Number of patients triage within an hour increased in all clinical areas	Number of patients triage within an hour	Improve and strengthen triaging system in all clinical areas	Ongoing	 Reports MOH Annual Performance Reviews MOH Annual Reports 	 Hospital and Clinical Services District and Community Health Services
				Increase number of staff providing triaging services in all clinical areas	Ongoing	Health Facilities Utilization Assessment Reports	 Quality Assurance and Infection Control Integrated Nursing Service
	New Indicator	Mortality and Morbidity rate reduced by at least 5%	Number of deaths/ admissions per 100,000 population	Strengthen the implementation of mortality and morbidity meetings in TTM and MTII Hospitals	Ongoing	 Quality Assurance Monitoring Reports MOH annual reports 	 Hospital and Clinical Services (TTM, MTII) Quality Assurance & Infection Control

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AI	OMINISTRATION			
Strategic Goal:	To st	rengthen health sys	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
	New Indicator	100% of Hospital Discharges with complete discharge summary	Percentage of hospital discharges receiving complete discharge summary	Every inpatient is discharged with a complete discharge summary	Ongoing	 Quality Assurance Monitoring Reports MOH annual reports 	 Hospital and Clinical Services Rural and District Health Services Quality Assurance & Infection Control
				Ensure Patients Charts at all Admission Wards are up to date	Ongoing	Quality Assurance Monitoring Reports	 Hospital and Clinical Services Quality Assurance & Infection Control
	New indicator	Hospital admission rate reduced	Percentage of acutely ill admissions properly reviewed within 1 hour admission	Effectively conduct, evaluate and report acutely ill admissions reviews	Ongoing	MOH annual reports	Hospital and Clinical Services
	New Indicator	Unplanned readmission rate within 1 week reduced	Number of unplanned readmission within 1 week	Implement and Strengthen the effective and efficient provision of safe and quality patient care in all clinical units	Ongoing	 Quality Assurance Monitoring Reports MOH annual reports 	 Hospital and Clinical Services District and Community Health Services Quality Assurance and Infection Control
		Number of deaths within first 24hours of admission reduced	Number of deaths within 24 hours of admission	Strengthen the implementation of Morbidity and Mortality reviews for all clinical areas	Ongoing	 Quality Assurance Monitoring Reports MOH annual reports 	 Hospitals and Clinical Services Quality Assurance and Infection Control

(EY OUTCOME 1:			EMS, GOVERNANCE AND AL					
Strategic Goal:		To strengthen health system governance for Universal Health Coverage						
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION	
	NII	Incidence and impact of pressure ulcers minimized	Percentage of people developing new ulcer in hospital	Develop and update Pressure Ulcer Prevention and Management Strategy Conduct professional development for healthcare professionals on pressure ulcer prevention and management	FY2024/25 Ongoing	MOH annual reports	 Hospital and Clinical Service Policy, Plannin and Research Registrar and Health Professional Development Hospital and Clinical Service 	
	NIL	National Surgical Obstetric Anaesthesia Plan (SOAP) in place	National Surgical Obstetric Anaesthesia Plan (SOAP) developed, implemented and updated	Procure a Technical Assistant to develop the National Surgical Obstetric Anaesthesia Plan (SOAP)	FY2024/25	MOH Annual Reports	 Hospital and Clinical Service Strategic Planning, Police and Research 	
	New indicator	Bed occupancy rate reduced	Hospital beds per 10,000 population	Enhance and strengthen multi-disciplinary teams in Hospitals and disbursement of medical officers in rural health facilities	Ongoing	 Health Services and Facilities Utilization Assessment Report MOH Annual 	 Hospitals and Clinical Service District and Community Health Service 	

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	OMINISTRATION			
Strategic Goal:	To str	rengthen health sys	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
		Number of unnecessary referral reduced	Patients Referral System improved	Improve and strengthen patients care at the community level by community health services providers	Ongoing	Reports	District and Community Health Services
				Improve and strengthen the referral of patients from rural health facilities to referral hospitals	Ongoing	 Health Services and Facilities Utilization Assessment Report MOH Annual Reports 	 Hospital and Clinical Services District and Community Health Services
				Improve and strengthen the compliance of Doctors and Nurses with the Hospital Referral Systems protocols and guidelines	Ongoing	 Reports Health Services and Facilities Utilization Assessment Report 	 Hospitals and Clinical Services District and Community Health Services
		Proportion of population utilizing health services in rural health facilities increased	Rural health facilities utilization rate	Conduct community awareness programs to increase their knowledge of health services provided in rural health facilities	Ongoing	MOH Annual Reports	 District and Community Health Services National Health Programs, Wellness, Health Education and Health Promotion
Surgical Volume	New Indicator	At least 80% cases operated and recover per	Number of patients operated by surgeons with high recovery rate	Ensure the provision of effective, efficient, quality and safe surgical services are	Ongoing	MOH Annual Reports	 Hospital and Clinical services/ Surgical,

KEY OUTCOME 1:	IMPF	ROVED HEALTH SYST	EMS, GOVERNANCE AND AL	OMINISTRATION			
Strategic Goal:	To st	rengthen health syst	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
		year		in line with surgical procedures/protocols Implement ongoing consultations conducted in general and orthopaedic clinics	Ongoing	 MOH Annual Performance Reviews MOH Corporate Plan Implementation 	Obstetric and Anesthetist Hospital and Clinical services/ENT
				Surgical outreach visits to MTII hospitals	Ongoing	Status Report	 Hospital and Clinical services/Surgical
Perioperative Mortality and Morbidity rate (PORM) reduced	New indicator	Hospital length of stay for post-operative patients without	Number of post-operative patients without complications stay in the hospital for 3 days	Develop/update Enhance Recovery After Surgery (ERAS) and effectively implement	Ongoing	 MOH Annual Reports MOH Annual Performance 	 Hospital and Clinical Services/Surgical , Orthopaedics,
		complications should be 3 days		Ensure regular clinical visits for post-operative patients on daily basis	Ongoing	Reviews MOH Corporate Plan Implementation Status Report MOH Annual Reports	Obstetrics and Gynaecology Anesthesia
		Hospital length of stay for post-operative patients with complications should be 6 days	Number of post-operative patients with complications stay in the hospital for 6 days	Develop/update Enhance Recovery After Surgery (ERAS) and effectively implement Ensure regular clinical visits for post-operative patients on daily basis	Ongoing		
		100% of post- operative patients are free of wound	Percentage of surgical site infections	Develop/update and implement surgical infection prevention protocol and policies	Ongoing		 Hospital and Clinical Services/Surgical , Obstetric and
		infections		Establish prevention strategies for post-operative adverse event	Ongoing		Anesthesia • Strategic

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	OMINISTRATION			
Strategic Goal:	To str	engthen health syst	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Closely monitor traffic air handling and operating room set up	Ongoing		Planning, Policy and Research
Effective prevention and control of Hospital associated infections	New indicator	Hospital acquired infection and MROs rate reduced	Proportion of patients with hospital associated infection between the pre-intervention and post-intervention periods	Improve and strengthen the compliance of healthcare professionals and Other Allied Health professionals with Infection Control guidelines	Ongoing	 Health Services and Facilities Utilization Assessment Report MOH Annual 	 Quality Assurance and Infection Control Hospital and Clinical Services District and
				Implement ongoing professional development for all health staff on infection control	Ongoing	• MOH Annual Reports	Community Health Services
Pharmaceutical services enhanced and strengthened	New Indicator	Pharmaceutical procurement system in place and implemented	M-Supply implemented and maintained	Effectively implement and maintain M-Supply	Ongoing	MOH Annual Reports	 Pharmaceutical Warehouse Pharmacy Health Information Technology and Communication Services
Health information system implemented and strengthened	PaTIS system implemented	e-Health system officially launched, implemented and tangible evidence that it is being used to inform	e-Health Strategy officially implemented	Review and Implement the National e-Health Policy and Strategy	Ongoing	 e-health strategy review reports MOH Annual Report 	 Health Information Communication Technology Health Information System and

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	OMINISTRATION			
Strategic Goal:	To str	engthen health syst	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
		policy and programming decisions and increased learning of "what"					Monitoring and Evaluation Strategic Planning, Policy and Research
		works, when, why, for whom and at what cost"	e-health system officially installed and utilized	Effectively implement e- Health system	Ongoing	e-health strategy review reportsMOH Annual Report	 Health Information Communication Technology
				Develop the digital architecture and HIS model	FY2024/25	Report	resimology
			HIS Data on maternal health supported and strengthened	Enhance and strengthen maternal health data recording and reporting through digitization	Ongoing	MOH Annual Report	 Health Information Technology and Communication Services Health Information System and Monitoring and Evaluation
			EPI registry system strengthened	Update the EPI registry system and strengthen the implementation	Ongoing	 National EPI Records/Reports MOH Annual Report 	• EPI Unit
			Radiology and Imaging Information system enhanced	Integration of digital x-ray and PACS system to Tamanu HIS	FY2024/25	MOH Annual Report	Health Information Technology and Communication

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND AL	DMINISTRATION			
Strategic Goal:	To str	engthen health syst	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
							ServicesMedical Imaging & Radiology
			Laboratory Information System developed and implemented	Continuously maintain and implement digital x-ray PACS system	FY2024/25	MOH Annual Report	 Hospital and Clinical Services/ Laboratory Health Information Technology and Communication Services
			Integrated Public Health Information System developed and implemented	Install and operate Integrated Public Health Information System including syndromic surveillance	FY2025/26	MOH Annual Report	 Health Information Technology and Communication Services National Health Surveillance and IHR
			Effective monitoring and maintenance of MOH ICT equipment	Strengthen the monitoring and preventative maintenance of ICT equipment in all health facilities and MOH Headquarters	Quarterly basis	•	 Health Information Technology and Communication Assets Management and Maintenance
Births and deaths registration and certification	New indicator	At least 90% of births and deaths are registered	Percentage of births and deaths that are registered and certified with age and	Conduct and evaluate professional development for healthcare professionals	Every two Financial years	MOH Annual Report	Health Information System and

KEY OUTCOME 1: Strategic Goal:			STEMS, GOVERNANCE AND A ystem governance for University				
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
enhanced and strengthened		and certified	sex in a given period	on births and deaths registration and certification			Monitoring & Evaluation Health Information Technology an Communicatio Health Professional Development Registrar
				Conduct and evaluate Civil Registration and Vital Statistics (CRVS) trainings for relevant stakeholders	Ongoing	MOH Annual Report	 Heath Information System and Monitoring & Evaluation Health Information Technology an Communication
				Effectively monitor and strengthen Vital and Civil Registration Systems to improve medical cause of death in reporting	Ongoing	MOH Annual Report	 Heath Information System and Monitoring & Evaluation Health
				Conduct and evaluate stakeholder consultation on births and deaths certification	Ongoing		Information Technology ar Communication

KEY OUTCOME 1:	IMPR	OVED HEALTH SYST	EMS, GOVERNANCE AND A	OMINISTRATION			
Strategic Goal:	To str	engthen health syst	tem governance for Univers	al Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
Effective management of the Blood Bank	New indicator	At least 10% increase of blood donate at every year and Strengthen the implementation of the World Blood Donor Day	Proportion of blood donation for patient treatment Effective mechanism in place to strengthen the blood donation with the community	Effectively monitor the storage of the blood donate in unit for patient treatment Strengthen the implementation of the Multimedia Awareness and commemoration of the World Blood Day on blood donation with the community	Ongoing Financial yearly	 MOH Annual Report MOH Annual Performance Review MOH Corporate Plan Implementation Status Report 	 Hospital and Clinical Services/ Laboratory National Health Programs, Wellness, Education and Health Promotion
Corporate Governance and management of MOH improved	New indicator	Evidence/s of good corporate governance and financial management	Regular corporate governance and financial management implemented and strengthened	Compile and submit MOH quarterly and annual financial and performance reports on regular basis Conduct and report regular comprehensive audit on monthly/quarterly/ annually basis	Ongoing	 MOH Financial and Audit Reports MOH Annual Report 	 Finance and Procurement Internal Audit Finance and Procurement
				Submit MOH Mid and Full Year Review of each financial year budget Review on time	Biannually and Annually	 MOH Financial and Audit Reports MOH Annual Report 	Finance and Procurement
				Continuously update MOH Assets Register	Ongoing	MOH Annual Report	 Assets Management and Maintenance
				Maintain and repair MOH facilities, equipment and vehicles on regular basis	Ongoing	MOH Annual Report	 Assets Management and

KEY OUTCOME 1:	IMPRO	OVED HEALTH SYST	TEMS, GOVERNANCE AND A	ADMINISTRATION			
Strategic Goal:	To stre	engthen health sys	tem governance for Univer	sal Health Coverage			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Effectively manage and audit MOH assets and facilities	Bi-annually	MOH Financial and Audit Reports MOH Annual	Maintenance Health Information and Communication Technology Biomedical Engineering Unit Human Resources & Administration Assets Management and
						Report	Maintenance Internal Audit
				Conduct spot checks and site visits to all health facilities both in Upolu and Savaii on regular basis	ongoing		Internal Audit
				Conduct monthly internal auditing of MOH Financial Reports and report in compliance with International Accounting Standards and Public Finance Management Act 2001 and other related regulations	Ongoing		Internal Audit
				Implement stock count of MOH fixed assets and Pharmaceutical supplies	Financial yearly	MOH Audit Report	 Assets Management and

KEY OUTCOME 1:	IMPROVED HEALTH SYSTEMS, GOVERNANCE AND ADMINISTRATION									
Strategic Goal:	To strengthen health system governance for Universal Health Coverage									
OUTPUT	BASELINE	TARGET	KEY PERFORMANCE	ACTIVITIES		TIMEFRAME	DATA SOURCES	RESPONSIBLE		
INDICATOR	DATA		INDICATORS					DIVISION		
								Maintenance		
								Internal Audit		
				Implement	MOH	Ongoing		Internal Audit		
				Performance Audit						
				Effectively monitor	the	Ongoing	 MOH Annual 	Health Sector		
				implementation	and		Reports	Coordination,		
				resource utilization of h	nealth		 Projects Progress 	Resourcing and		
				programs and projects			Reports	Monitoring		

KEY OUTCOME 2:		IMPROVED PREVENTION, CONTROL AND MANAGEMENT OF COMMUNICABLE AND NEGLECTED TROPICAL DISEASES							
Strategic Goal:		To end the epidemics of Neglected Tropical Disease and combat Communicable Diseases							
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION		
Female adolescent (aged 13 – 15 years) who have had three doses of HPV vaccine	New indicator	Evidence of number of female adolescent receiving course of HPV	Number of female adolescent (13-15 years) completing three doses of HPV Vaccine	Continuously implement HPV immunization for female adolescent 13-15 years	Ongoing	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion District and Community Health 		
Incidence of Sexually	100,000	Incidence of sexually	Proportion of population infected by Sexually Transmitted Infection	Conduct STI screening for most at risk groups	Financial yearly	Monitoring Reports MOH Annual Reports	 District and Community Health National Health Programs, Wellness, Health Education and Health Promotion Hospital and Clinical Services/Laboratory 		
Transmitted Infection	il	infection reduced	(STI)	Conduct and evaluate STI Control Education Programs	Ongoing				
				Conduct professional development for STI Clinic staff on STI diagnosis, treatment and prevention	Ongoing				
				Effectively monitor and evaluate STI programs implementation on regular basis	Bi-annually				
				Conduct compulsory chlamydia testing for all antenatal mothers (urine and/or PV swabs)	Ongoing				
Morbidity rate attributed to	Typhoid= 50 cases per	30% reduction of	Proportion of population infected by typhoid	Continuously conduct community awareness	Ongoing	MOH Annual	National Disease		

KEY OUTCOME 2:		IMPROVED PREVENTION, CONTROL AND MANAGEMENT OF COMMUNICABLE AND NEGLECTED TROPICAL DISEASES								
Strategic Goal:		To end the epidemics of Neglected Tropical Disease and combat Communicable Diseases								
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
exposure to unsafe water, unsafe	100,000 population	typhoid cases	every financial year	campaign on typhoid		Reports	Surveillance and IHR			
sanitation and lack of hygiene				Conduct WASH awareness and prevention programs implemented during the commemoration of the World Hand Hygiene Day	Annually	MOH Annual Reports	 National Health Surveillance and IHR National Health Programs, Wellness, Health Education and Health Promotion 			
				Implement and evaluate Sanitation Awareness and Educational Programs during commemoration of World Toilet Day			 National Health Surveillance and IHR National Health Programs, Wellness, Health Education and Health Promotion 			
				Strengthen typhoid surveillance and microbiological laboratory capacity in Samoa and Public Health response	Ongoing	MOH Annual Reports	National Health Surveillance and IHR			
				Implement and strengthen professional development for health professional on syndromic surveillance	Ongoing		 National Health Surveillance and IHR Hospital and Clinical Services 			
				Strengthen collection of blood culture and specimens and reporting	Ongoing					

KEY OUTCOME 2:		IMPROVED PREVE	NTION, CONTROL AND MA	ANAGEMENT OF COMMUNIC	CABLE AND NEGL	ECTED TROPICAL DI	SEASES		
Strategic Goal:		To end the epidemics of Neglected Tropical Disease and combat Communicable Diseases							
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION		
				for cases with prolong fever					
				Strengthen detection and treatment of healthy typhoid carriers	Ongoing				
				Strengthen reporting of syndromic surveillance from all health facilities	Ongoing				
	Diarrhoea syndrome = 2,990 cases per 100,000	25% reduction of diarrhoea syndrome	Diarrhoea syndrome per 100,000 population	Implement and strengthen community awareness programs on WASH related diseases.	Ongoing	MOH Annual Reports	National Health Surveillance and IHR		
	population New cases = 0 Relapse cases			Provide trainings for vaccinators on rotavirus vaccine administration	FY2023/24	MOH Annual Reports			
	= 0			Continuously implement rotavirus vaccination	Ongoing		EPI Unit		
Number of new and relapse Tuberculosis cases arising in a given year, expressed as a rate		Total new cases identified	Number of Tuberculosis new cases	Improve and strengthen TB detection and treatment through updating and implementing TB strategy/guideline	Ongoing	MOH Annual Reports	CD Clinic		

KEY OUTCOME 2:		IMPROVED PREVE	NTION, CONTROL AND M	ANAGEMENT OF COMMUNIC	CABLE AND NEGL	ECTED TROPICAL DI	SEASES		
Strategic Goal:		To end the epidemics of Neglected Tropical Disease and combat Communicable Diseases							
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION		
per 100,000 population		Total new and relapse identified	Number of new and relapse Tuberculosis cases	Strengthen community engagement in TB prevention through community education and awareness programs	Ongoing		CD Clinic Health Promotion Unit		
		Tuberculosis treatment coverage increased	Tuberculosis treatment coverage	Implement TB screening in all health facilities	Ongoing		CD ClinicDistrict and Community Health Services		
Effective control and management of vector borne diseases (lymphatic filariasis)	AUA &ROU = 1.43% NWU = 6.79%	Lymphatic Filariasis (<1% prevalence of	all Evaluation Units	Conduct Lymphatic Filariasis mass Drug administration and compile report	FY2023/24	Lymphatic Filarisis MDA reportMOH Annual	 National Health Programs, Wellness, Health Education and Health Promotion 		
	Savaii = 5.25% (TAS Survey, 2017)	Filarial antigenia) by 2023	(AUA, NWU, ROU, SAVAII)	Conduct Lymphatic Filariasis transmission assessment Survey (TAS) and compile report	FY2024/25	- Reports	National Disease Surveillance & IHR		
		Reduction of vector borne diseases	Number of people diagnose with vector borne diseases	Strengthen implementation of vector surveillance programs	Ongoing	MOH Annual Reports	National Health Surveillance and IHR		
				Strengthen community engagement on vector control through community awareness programs and stakeholder	Ongoing				

KEY OUTCOME 2:		IMPROVED PREVENTION, CONTROL AND MANAGEMENT OF COMMUNICABLE AND NEGLECTED TROPICAL DISEASES								
Strategic Goal:		To end the epidemics of Neglected Tropical Disease and combat Communicable Diseases								
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
				consultations and commemoration of World Mosquito Day						
among adults 15-49	2 new cases (<i>MOH</i> , 2018)	Number of HIV infection reduced by 10% by 2023	Numbers of new HIV infections	Conduct and evaluate educational workshops for key affected population and compile report	Ongoing	MOH Annual Reports	National Health Programs, Wellness, Health Education and Health Promotion/CD Clinic			
				Conduct and evaluate Wellness capacity building sessions for people living with HIV/AIDS	Ongoing					
				Finalize National HIV/AIDS Policy 2023-2028	FY2023/24		 Health Sector Coordination, Resourcing and Monitoring Strategic Planning, Policy and Research 			
Effective provision and management of Antiretroviral Treatment for people living with HIV	100% of all people living with HIV receiving ARV treatment	All people living with HIV/AIDS being detected and receive ARV Treatment	Proportion of people living with HIV receive Antiretroviral Treatment	Conduct monitoring visits and data collection on HIV patients and treatment to all health facilities and compile reports	Bi-annually	 HIV/STI Monitoring Reports MOH Annual Reports MOH Corporate Plan 	 National Health Program, Wellness, Health Education and Health Programs/CD Clinic 			
				Conduct and evaluate community awareness	Ongoing	Implementation	Health Sector, Coordination,			

KEY OUTCOME 2:		IMPROVED PREVE	IMPROVED PREVENTION, CONTROL AND MANAGEMENT OF COMMUNICABLE AND NEGLECTED TROPICAL DISEASES								
Strategic Goal:		To end the epidemics of Neglected Tropical Disease and combat Communicable Diseases									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION				
				campaign on HIV/AIDS		Status Report MOH Annual Performance Reviews	Resourcing and Monitoring National Health Programs, Wellness, Health Education and Health Promotion				
				Implement HIV/AIDS prevention, promotion and educational services through commemoration of World AIDS Day	Financial yearly		 Health Sector, Coordination, Resourcing and Monitoring National Health Programs, Wellness, Health Education and Health Promotion 				
AIDS related mortality rate	1 death (<i>MOH, 2017</i>)	At least 100% of people living with HIV/AIDS suppressed viral load	Number of AIDS related deaths	Revive and sustain National AIDS Coordination Committee and regularize meetings Develop and implement Sexually Transmitted Infection guidelines	FY2023/24 FY2023/24	 HIV/STI Monitoring Reports MOH Annual Reports MOH Corporate Plan Implementation Status Report MOH Annual 	 Health Sector Coordination, Resourcing and Monitoring National Health Programs, Wellness, Health Education and Health Promotion 				
						Performance Reviews					

KEY OUTCOME 3:	IMPROVED PI	REVENTION CONTRO	OL AND MANAGEMENT O	F NON COMMUNICABLE DIS	EASES		
Strategic Goal:	To combat No	on Communicable D	iseases and their risk fact	ors and minimize NCD preve	entable deaths		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
Percentage of obese among adolescents aged 13-15 years	Obesity = 19.2% Overweight =	Overweight and obesity prevalence for adolescents aged	Proportion of adolescents aged 13-15 years who are obese/overweight	Implement Adolescent Health Survey focusing on NCD Risk factors	FY2024/25	National Adolescent Health Survey Report	National Health Programs, Wellness, Health Education and Health Promotion
,	51.7% (STEP Survey, 2017)	13-15 years reduced by 25%		Strengthen the implementation of the "Eat the Rainbow and Go Local" campaign in schools at all levels	Ongoing	MOH Annual Reports	
			Compliance of schools with Nutrition Standards and Obesity rate	Effectively monitor the implementation and compliance of all schools with the Nutrition Standards and the Obesity rate	Ongoing		
				Effectively monitor the implementation targeting obese and overweight students through health promotion program in Schools			
Percentage of obese among 0-5 years	5% of children aged 0-5 years overweight	Overweight and obesity prevalence for children aged 0-5 years reduced by	Proportion of children aged 0-5 years who are obese/overweight	Strengthen the weighing of children aged 0-5 years during immunization administration and update Weight Measurement in	Ongoing	MOH Annual Reports	District and Community Health Services

KEY OUTCOME 3:	IMPROVED P	REVENTION CONTR	OL AND MANAGEMENT O	F NON COMMUNICABLE DIS	SEASES					
Strategic Goal:	To combat Non Communicable Diseases and their risk factors and minimize NCD preventable deaths									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
	(DHS, 2014)	25%		the Child Health Book						
				Strengthen the implementation of the Young Child Feeding Guidelines and Regulations 2017	Ongoing		Nutrition Centre			
				Integrate Health components to assess health status of children aged 0-5 years in the MICS Survey	Ongoing	DHS/MICS Reports	•			
NCD Premature Death Rate	New indicator	Premature mortality from CVD, Cancer, Diabetes and CPD reduced by 33% through prevention and treatment	Proportion of 30 year old people who would die before their aged 65 th birthday from CVD, RHD, Cancer, Diabetes and CRD	Strengthen the monitoring and review of the National NCD Policy 2018-2023 implementation	Ongoing	 National NCD Policy 2018-2023 Review Report MOH Annual Reports 	 Strategic Planning, Policy and Research Health Sector Coordination, Resourcing and Monitoring National Health Programs, Wellness, Health Education and Health Promotion 			

Strategic Goal:	To combat Non Communicable Diseases and their risk factors and minimize NCD preventable deaths									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
			INR reviews in medical SOPD reduced	Strengthen the implementation of INR management and reviews in rural health facilities	Ongoing	 MOH annual report MOH annual performance review MOH Corporate Plan Implementation Status Report 	 District and Community Health Services Hospital and Clinical Services 			
			National Diabetes Database in place	Establish and effectively maintain the National Register for all people diagnosed with diabetes	FY2024/25	MOH annual report	 District and Community Health Services Hospital and Clinical Services 			
			National Hypertension register in place	Establish National Hypertension Register through the implementation of the PEN Fa'a-Samoa Program	FY2024/25	MOH annual report	 District and Community Health Services Hospital and Clinical Services Public Health 			
	New Indicator	Increase new diabetic cases screened by 25%	Number of new diabetic cases screened	Implement, strengthen and expand National Diabetic Retinopathy Screening Program	Financial Yearly	MOH annual report	 District and Community Health Services Hospital and Clinical Services 			
Amputation rate for diabetic foot sepsis	New Indicator	Amputation for diabetic foot sepsis reduced by	Number of amputation for diabetic foot sepsis	Strengthen the implementation and evaluation of diabetic	Ongoing	MOH annual report	Hospital and Clinical ServicesDistrict and			

KEY OUTCOME 3:	IMPROVED P	REVENTION CONTR	OL AND MANAGEMENT O	F NON COMMUNICABLE DIS	SEASES						
Strategic Goal:	To combat No	To combat Non Communicable Diseases and their risk factors and minimize NCD preventable deaths									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION				
		at least 10%		prevention interventions/programs and compile reports			Community Health Services National Health Programs, Wellness, Health Education and Health Promotion				
		Referral pathways for diabetic patients strengthened	Effective mechanisms in place to strengthen referral pathways for diabetic patients	Review protocols for comprehensive care of diabetic patients and disseminate to relevant stakeholders	FY2023/24	MOH annual report	 Hospital and Clinical Services District and Community Health Services 				
Cancer incidence by 4 common types of cancer per 100,000 population	Lung = 13.3/100,000 Breast = 9.7/100,000 Stomach = 8.7/100,000	Cancer incidence by type of cancer per 100,000 population reduced	Number of new cancer cases by 4 common types detected, diagnosed and treated	Implement and evaluate Breast Cancer Screening for women and Prostate Cancer Screening for men and compile reports	FY2024/25	 National Cancer Registry National Cancer Screenings Reports MOH Annual Reports 	 Hospital and Clinical Services District and Community Health Services Medical Imaging & Radiology Department 				
	Prostate = 7.1/100,000			Implement Cancer Prevention and Advocacy programs during the commemoration of World Cancer Day in collaboration with relevant stakeholders	Annually	 MOH Annual Reports Health Statistical Bulletins MOH Annual Performance Reviews 	 National Health Programs, Wellness, Health Education and Health Promotion Hospital and Clinical Services District and Community Health 				

KEY OUTCOME 3:	IMPROVED P	REVENTION CONTR	OL AND MANAGEMENT O	F NON COMMUNICABLE DIS	SEASES		
Strategic Goal:	To combat No	on Communicable D	iseases and their risk fact	ors and minimize NCD preve	entable deaths		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
							Services
				Continue to implement community awareness programs on cancer prevention	Ongoing	 MOH Annual Reports Health Statistical Bulletins MOH Annual Performance Reviews 	 National Health Programs, Wellness, Health Education and Health Promotion Hospital and Clinical Services District and Community Health Services
				Provide professional developments for radiologists to specialize on mammographic diagnosis	Ongoing	MOH Annual Reports	 Registrar and Health Professional Development Human Resources and Administration Hospital and Clinical Services
Absolute number of deaths due to suicide among the adults (aged 18 years and older) population in a specified time	Deaths = 19 (MOH, 2017)	Number of deaths due to suicide reduced by 5% by 2023	Number of deaths associated to suicide recorded and reported	Enhance and strengthen the recording and reporting of all deaths associated to suicide in all health facilities	Ongoing	 MOH Annual Reports Health Statistical Bulletins MOH Annual Performance Reviews 	 Hospital and Clinical Services – Medical Record District and Community Health Services Health Information Services and M&E

Strategic Goal:	To combat Non Communicable Diseases and their risk factors and minimize NCD preventable deaths									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
				Implement community awareness programs on suicide prevention through multi-sectoral approach	Ongoing	 MOH Annual Reports Health Statistical Bulletins MOH Annual Performance Reviews 	National Health Programs, Wellness, Health Education and Health Promotion			
Population (aged 20 years and above screened for early NCDs detection and diagnosed	1,033 people screened in 2017 (MOH, 2017)	At least 90% of those identified with NCD or at high risk of acquiring NCD are referred within one month to a health centre for appropriate counseling and treatment including where necessary medication	Percentage of patients aged 20 years and above who are diagnosed with NCD or at high risk of acquiring NCDs	Strengthen and expand the implementation of the PEN Faa-Samoa Program	Ongoing	 PEN Faa-Samoa Reports MOH Annual Reports 	 National Health Programs, Wellness, Health Education and Health Promotion Health Sector Coordination, Resourcing and Monitoring District and Community Health Services 			
Estimated road traffic fatal injury deaths per 100,000 population	17 deaths (ACC, FY2015/16)	Half the number of deaths (including children 0-15 years) from	Number of children aged 0-15 years died from road traffic accidents	Implement and evaluate the effectiveness of community awareness and advocacy programs on injury prevention	Ongoing	 MOH Annual Reports MOH Annual Performance Reviews 	 National Health Programs, Wellness, Health Education and Health Promotion Hospital and Clinical Services 			

Strategic Goal:	To combat No	To combat Non Communicable Diseases and their risk factors and minimize NCD preventable deaths										
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION					
		traffic accidents					District and Community Health Services					
Percentage of school children with sports injuries presented to physiotherapy	new indicator	100% of school children receiving physiotherapy treatment for sport injuries	number of schools registered for sports injury prevention and management program	Effectively monitor and implement school sport injuries prevention and management programs in association with School Health Programs	Ongoing	 MOH Annual Reports MOH Corporate Plan Implementation status report 	National Health Programs, Wellness, Health Education and Health Promotion					
Essential NCD drugs in the critical items list available and accessible in public health sector primary health care facilities	New indicator	80% availability of the affordable basic technologies and essential basic technologies and essential medicines	Evidence of essential NCD drugs in critical items list available and accessible in all health facilities including rural health facilities	Continuously review and update the National Essential List of Drugs including generics required to treat NCDs	Mid-term review	 Clinical Audit Reports MOH Annual Reports 	 Pharmacy Pharmaceutical Warehouse District and Community Health Services Hospital and Clinical Services 					
		including generics, required to treat major non-communicable diseases in all health facilities by 2023		Effectively implement and sustain provision of essential medicines in rural health facilities	Mid-term review	 Clinical Audit Reports MOH Annual Reports MOH Annual Performance Reviews MOH Corporate Plan Implementation 	 Quality Assurance and Infection Control Pharmacy Pharmaceutical Warehouse District and Community Health Services Hospital and Clinical Services 					

trategic Goal:	To combat Nor	n Communicable	Diseases and their risk fac	tors and minimize NCD preven	entable deaths		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Conduct stakeholders' consultations to continuously update the Essential Medicines List	FY2023/24	Status Reports Clinical Audit Reports MOH Annual Reports	 Pharmacy District and Community Health Services
				including NCD drugs concentrating on diabetes and hypertension and compile reports.		Reports	Hospital and Clinica Services
				Continue to conduct annual clinical audit and health facilities assessments and provide reports	Financially yearly basis	 Clinical Audit Reports MOH Annual Reports MOH Annual Performance Reviews MOH Corporate Plan Implementation Status Reports 	 Quality Assurance and Infection Control Pharmacy Pharmaceutical Warehouse District and Community Health Services Hospital and Clinica Services
				Effectively implement the National Antimicrobial Resistance Action Plan	Ongoing	 MOH Annual Reports MOH Annual Performance Reviews 	 Laboratory Quality Assurance and Infection Contr Pharmacy Pharmaceutical Warehouse

KEY OUTCOME 3:	IMPROVED PI	REVENTION CONTR	OL AND MANAGEMENT O	F NON COMMUNICABLE DIS	SEASES					
Strategic Goal:	To combat Non Communicable Diseases and their risk factors and minimize NCD preventable deaths									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
				Effectively design and implement community awareness programs on antimicrobial resistance during the National Antimicrobial Resistance Week	Financial Yearly	 Clinical Audit Reports MOH Annual Reports MOH Annual Performance Reviews MOH Corporate Plan 	Community Health Services Hospital and Clinical Services Laboratory Pharmacy Pharmaceutical Warehouse Quality Assurance and Infection Control District and Community Health Services			
Effective management and provision of mental health services for people with severe mental health disorders	Number of mental health patients receiving treatment at Mental Health Unit = 774	100% of patients with severe mental health disorder visiting and being treated at mental health unit and	Percentage of people with severe mental health disorders who are treated at: 1. Mental Health Unit 2. Community	Enhance and strengthen the implementation of mental health services in both health facilities and community	Ongoing	Implementation Status Reports • MOH Annual Reports • MOH Annual Performance Reviews	 Hospital and Clinical Services Hospital and Clinical Services Quality Assurance and Infection Control District and Community Health Services 			
	Number of health patients	community		Provide required professional developments for mental health staff on mental health areas of specialties	Ongoing	 MOH Annual Reports MOH Annual Performance Reviews 	 Hospital and Clinical Services Quality Assurance and Infection Control District and Community Health 			

KEY OUTCOME 3:	IMPROVED PI	REVENTION CONTR	OL AND MANAGEMENT O	F NON COMMUNICABLE DIS	SEASES		
Strategic Goal:	To combat No	on Communicable D	Diseases and their risk fact	ors and minimize NCD preven	entable deaths		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
	receiving treatment in the community =						Services
	532 (NHS, 2017)			Recruit more clinical staff specialized with mental health technical skills for TTM Hospital Mental Health Unit	Ongoing	 MOH Annual Reports MOH Annual Performance Reviews 	 Hospital and Clinical Services Quality Assurance and Infection Control District and Community Health Services
Effective provision of health services for people with disabilities	New inddevelop icator	At least 2 health outreach programs conducted on yearly basis	Number of people with disabilities who received health services through health outreach programs	Implement and sustain health outreach programs targeting people with disabilities	Financial yearly	 MOH Annual Reports MOH Annual Performance Reviews 	 Other Allied Health Professionals Clinical Services Public Health Services
		At least 85% of eligible patients with disabilities receive assistive devices	Percentage of eligible patients with disabilities that receive assistive devices	Procure sufficient supplies of assistive devices for NCD patients with disabilities such as amputees and stroke	Ongoing	 MOH Annual Reports MOH Annual Performance Reviews MOH Corporate Plan Implementation Status Reports 	 Other Allied Health Professionals Clinical Services National Health Programs, Wellness, Health Education and Health Promotion District and Community Health Services

KEY OUTCOME 3: Strategic Goal:		IMPROVED PREVENTION CONTROL AND MANAGEMENT OF NON COMMUNICABLE DISEASES To combat Non Communicable Diseases and their risk factors and minimize NCD preventable deaths								
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
Hearing loss	New indicator	Number of people being screen for hearing loss increase and treated	Number of people being screened for hearing assessment	Conduct hearing assessment screening in all health facilities	Ongoing	 MOH Annual Reports MOH Annual Performance Reviews 	 Hospital and Clinical Services/ENT National Health Programs, Wellness, Health Education and Health Promotion 			
Effective and efficient of Dental Health services through conducting oral examination for all health facilities	New indicator/Scre ening of dental health status	Number of people being seen and treated for oral diseases	Evidence of dental health services through screening conduct for all health facilities	Strengthen ongoing dental health screening for all TTM, MTII and districts hospitals for both Upolu and Savaii and compile report	Ongoing	 Dental Health Report MOH Annual Reports MOH Annual Performance Reviews 	Hospital and Clinical Services/Dental Health Services			

KEY OUTCOME 4:	IMPROVED SE	XUAL AND REPRO	OUCTIVE HEALTH				
Strategic Goal:	To promote u	niversal access to re	eproductive health relate	d services			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
Satisfaction Rate for Utilization of Modern Family Planning Methods	Injectable = 10% Female Sterilization = 7% Pills = 6% Implant = 0% (DHS, 2014)	At least 30% of women at the reproductive age who are currently on family planning satisfied with modern methods by 2023	Percentage of women of reproductive age (15-49 who are currently on family planning satisfied with modern methods (injectable, female, sterilization, implant, pills)	Strengthen the implementation of community awareness programs on promoting the use of Modern Family Planning Methods for family planning Conduct training of health workers on the family on the Family Planning Guidelines implementation Conduct capacity building programs for nurses and pharmacists on family planning counseling, commodity supply chain management and LIMS Implement family planning outreach advocacy programs for Upolu and Savai'i targeting faith based organizations, teen mothers and school	Ongoing Ongoing Ongoing Ongoing	 MICS survey reports Sexual Reproductive Health Monitoring visits reports MOH Annual Reports Sexual Reproductive Health Monitoring visits reports MOH Annual Reports Sexual Reproductive Health Monitoring visits reports MOH Annual Reports Sexual Reproductive Health Monitoring visits reports MOH Annual Reports Sexual Reproductive Health Monitoring visits reports MOH Annual Reports MOH Annual Reports 	 National Health Programs, Wellness, Health Education and Health Promotion District and Community Health Services National Health Programs, Wellness, Health Education and Health Promotion District and Community Health Services Sexual Reproductive Health Unit Integrated Nursing Services District and Community Health Services District and Community Health Services Sexual Reproductive Health Unit Hospital and Clinical Services District and Community Health

KEY OUTCOME 4:	IMPROVED SE	EXUAL AND REPROD	DUCTIVE HEALTH				
Strategic Goal:	To promote u	niversal access to re	eproductive health relate	d services			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				leavers			Services
Adolescent birth rate aged 10-14 and 15-19 per 1,000 women in these age groups	56 per 1,000 women (DHS, 2014)	Reduce adolescent birth rate to 5% for all age groups	At least 1% of adolescents aged 10-14 years and 15-19 years reported giving birth atall health facilities and in the community	Continuously conduct community awareness campaign on Youth Friendly Services available at all service delivery points targeting the adolescents aged 15-24 years, evaluate the effectiveness of the program and compile reports	Ongoing	 Sexual Reproductive Health Monitoring visits reports MOH Annual Reports 	 Sexual Reproductive Health Unit District and Community Health Services
				Conduct trainings and education programs for health workers and peer educators on Youth Friendly Services Standards	Ongoing	 Sexual Reproductive Health Monitoring visits reports MOH Annual Reports 	Sexual Reproductive Health Unit
			Compliance of Youth Friendly Centres with the Minimum Youth Friendly Services Standards	Effectively monitor the implementation of Minimum Youth Friendly Health Services Standards by Youth Friendly Centres	Ongoing	 Sexual Reproductive Health Monitoring visits reports MOH Annual Reports 	Sexual Reproductive Health Unit

KEY OUTCOME 4:	IMPROVED SI	EXUAL AND REPRO	DUCTIVE HEALTH				
Strategic Goal:	To promote u	iniversal access to r	eproductive health relate	d services			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Conduct ongoing monitoring visits to monitor and evaluate the performance of Youth Friendly Health Centres against Minimum Youth Friendly Health Services Standards	Ongoing	 Sexual Reproductive Health Monitoring visits reports MOH Annual Reports 	Sexual Reproductive Health Unit
				Strengthen the implementation and reviewing of the National Sexual Reproductive Health Policy 2019-2024 implementation	Ongoing	 MOH Annual Reports MOH Annual Performance Reviews 	 Sexual Reproductive Health Unit Strategic Planning, Policy and Research
				Conduct trainings and educational programs for health in responding effectively and managing Gender Based Violence in emergencies and compile reports	Ongoing	 Sexual Reproductive Health Monitoring visits reports MOH Annual Reports 	 Sexual Reproductive Health Unit
Contraception Utilization Rate	27% (DHS, 2014)	Increase contraceptive prevalence rate to at least 80% by 2023	Percentage of women aged 15-49 years who are sexually active/childbearing age, who are currently using	Integrate sexual reproductive questions addressing contraception utilization by women aged 15-49 years and integrate	FY2020/21	DHS/MICS Reports	 Sexual Reproductive Health Unit

KEY OUTCOME 4:	IMPROVED SI	IMPROVED SEXUAL AND REPRODUCTIVE HEALTH								
Strategic Goal:	To promote u	niversal access to re	eproductive health related	d services						
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
			or whose sexual partners is using at least one method of contraception regardless of method used	in the National DHS/MICS Survey						
Coverage of National Cervical Cancer Screening Programs	1,814 women being screened for cervical cancer (NHS, 2012)	Increase the coverage by 26% depending on their age	Numbers of women screened for cervical cancer, detected, diagnosed and referred for treatment/s	Implement National Cervical Cancer Screening through multi-sectoral approach, evaluate its effectiveness and provide outcomes report	FY2024/25	MOH Annual Reports	 Sexual Reproductive Health Unit District and Community Health Services Hospital and Clinical Services 			

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILI	O HEALTH									
Strategic Goal:	To reduce mate	To reduce maternal and perinatal mortality and reduce child morbidity and mortality										
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION					
Women aged 15-49 years with a live birth received antenatal care four times or more	(DHS, 2014) antena mother receivir times	antenatal mothers with live births receiving four time or times or more antenatal care in all health facilities antenatal serior to utilize antenatal serior more antenatal serior to utilize antenatal serior more antenatal serior to utilize antenatal serior mothers with live births receiving four time or community award programs to encount to utilize antenatal serior mothers with live births implementation community award programs to encount times or more antenatal care in to utilize antenatal serior mothers with live births receiving four time or programs to encount times or more antenatal care in to utilize antenatal serior mothers with live births receiving four time or programs to encount times or more antenatal care in to utilize antenatal serior with live births receiving four time or programs to encount times or more antenatal care in to utilize antenatal serior with live births receiving four time or programs to encount times or more antenatal care in to utilize antenatal serior with live births receiving four time or programs to encount times or more antenatal care in to utilize antenatal serior with live births receiving four time or programs to encount times or more antenatal care in to utilize antenatal serior with live births receiving four times or more antenatal care in the serior with live births receiving four times or more antenatal care in the serior with live births receiving four times or more antenatal care in the serior with live births receiving four times or more antenatal care in the serior with live births received and the serior with live bir	community awareness programs to encourage women 15 – 49 years old to utilize antenatal services available in all health	Ongoing	 MICS survey reports Sexual Reproductive Health Monitoring visits reports MOH Annual Reports 	 Sexual Reproductive Health Unit Hospital and Clinical Services District and Community Health Services 						
				Build the capacity of healthcare workers in rural health facilities on using mobile ultrasounds	Ongoing	MOH Annual Reports	 Medical Imaging and Radiology Hospital and Clinical Services 					
				Procure mobile ultrasounds for rural health facilities	FY2023/24	MOH Annual Reports	 Hospital and Clinical Services District and Community Health Services 					
				Conduct community awareness programs on maternal health including the importance of 1,000 days and antenatal care	Ongoing	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion Hospital and Clinical Services District and Community Health Services 					

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILE	HEALTH								
Strategic Goal:	To reduce mate	To reduce maternal and perinatal mortality and reduce child morbidity and mortality									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION				
				Review and update the Antenatal Care Guidelines to integrate the new WHO Antenatal Care recommendations for young pregnant mothers aged 15-35 years	FY2023/24	MOH Annual Reports	 Hospital and Clinical Services District and Community Health Services Strategic Planning, Policy and Research 				
				Strengthen the implementation of antenatal screening in rural health facilities	Ongoing	MOH Annual Reports	District and Community Health Services				
				Strengthen the implementation of education programs for antenatal mothers and their partners on newborn/child care	Ongoing	 MOH Annual Reports MOH Annual Performance Reviews MOH Corporate Plans Implementation Status Reports 	 National Health Programs, Wellness, Health Education and Health Promotion Hospital and Clinical Services District and Community Health Services 				
Incidence of pregnant mothers with diabetes receiving eye exams	New indicator	50% of pregnant mothers with diabetes referred undergo screening and managed	Percentage of pregnant mothers with diabetes receiving eye exams	Strengthened the implementation of eye exams for all pregnant mothers with diabetes	Ongoing	MOH Annual Reports	 Hospital and Clinical Services District and Community Health Services 				

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILI	O HEALTH				
Strategic Goal:	To reduce mate	ernal and perinatal	mortality and reduce chi	ild morbidity and mortality			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
		properly					
Maternal Mortality Ration per 100,000 live births	51 per 100,000 live births (Census, 2016)	Continued reduction in Maternal Mortality Ration over the coming decade	Percentage/Numbers of maternal mortality deaths per 1,000 live births	Strengthen and enhance the provision of quality and safe maternal health services	Ongoing	MOH Annual Reports	 Hospital and Clinical Services District and Community Health Services Integrated Nursing Services
				Effectively monitor the implementation Tetanus Doses for childbearing mothers to ensure they receive the total of 6 doses in a lifetime for protection at birth	Ongoing	MOH Annual Reports	 Expanded Program for Immunization Unit Hospital and Clinical Services District and Community Health Services
				Update/Review the National Safe Motherhood policy and/or protocols implementation	FY2024/25	MOH Annual Reports	 Sexual Reproductive Health Unit Hospital and Clinical Services District and Community Health Services Integrated nursing
Maternal deaths related to	2 maternal deaths	Less than 2 deaths per year	Number of maternal deaths recorded and	Ensure sufficient supplies of qualified/skilled	Ongoing	Clinical Audit Reports	Quality Assurance and Infection Control

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILE	D HEALTH				
Strategic Goal:	To reduce mate	ernal and perinatal	mortality and reduce chi	ld morbidity and mortality			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
childbearing in a given period of time		reported by health facility by causes	midwives working at maternity wards both in TTM and MTII hospitals		MOH Annual Reports	 Hospital and Clinical Services District and Community Health Services 	
				Implement clinical audit and spot checks on maternal deaths on regular basis	Ongoing	Clinical Audit ReportsMOH Annual Reports	 Quality Assurance and Infection Control Hospital and Clinical Services District and Community Health Services
				Conduct capacity building for midwives on maternal health	Ongoing	Clinical Audit ReportsMOH Annual Reports	 Integrated Nursing Services Hospital and Clinical Services District and Community Health Services
				Strengthen the implementation of credentialing programs for acute care midwives	Ongoing	Clinical Audit ReportsMOH Annual Reports	 Registrar and Health Professional Development Integrated Nursing Services
				Strengthen the implementation of maternal and child health	Ongoing	MOH Annual Reports	National Health Programs, Wellness, Health Education and

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHIL	D HEALTH								
Strategic Goal:	To reduce mate	To reduce maternal and perinatal mortality and reduce child morbidity and mortality									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION				
				community awareness programs			Health Promotion • Integrated Nursing Services				
Surgical site infection rate for caesarian section in main hospitals (TTM & MTII hospitals)	New indicator	Infections among women undergoing caesarian section reduced by at least 10% from its current status	Percentage/Numbers of antenatal mothers undergoing caesarian being infected with surgical site infection/s (SSIs)	Strengthen and enhance the provision of surgical service for antenatal mothers undergoing caesarian sections	Ongoing	 Clinical Audit Reports MOH Annual Reports 	Hospital and Clinical ServicesIntegrated Nursing				
Under five mortality rate (per 1,000 live births)	20 per 1,000 live births (MOH, 2017)	Continued reduction in under-five mortality rate over the coming decade	Percentage of children aged under-five years died per 1,000 live births	Strengthen the implementation of quality and safe healthcare services for children under five years old	Ongoing	 Clinical Audit Reports MOH Annual Reports EPI Progress Reports 	 Expanded Program for Immunization Unit Hospital and Clinical Services District and Community Health Services 				
				Conduct pediatric specialized professional developments for all nurses in the Pediatric Unit	Ongoing	Clinical Audit ReportsMOH Annual Reports	Integrated Nursing ServicesHospital and Clinical Services				
				Establish a Pediatric ICU Unit	FY2024/25	MOH Annual Reports	 Hospital and Clinical Services Health Sector Coordination, Resourcing and 				

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILI	D HEALTH							
Strategic Goal:	To reduce mate	To reduce maternal and perinatal mortality and reduce child morbidity and mortality								
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
							Monitoring			
				Review/Update the National Child and Adolescent Health Policy 2013-2018	FY2023/24	 MOH Annual Reports MOH Annual Performance Reviews 	 Strategic Planning, Policy and Research Hospital and Clinical Services District and Community Health Services 			
				Strengthen the implementation of quality assurance monitoring visits and spot checks for both Upolu and Savai'i	Ongoing	 Quality Assurance Monitoring Reports MOH Annual Reports 	Quality Assurance and Infection Control			
Neonatal Mortality Rate per 1,000 live births	7 per 1,000 live births (DHS, 2014)	Continued reduction in neonatal mortality rate over the coming decade	Facility neonatal mortality rate disaggregated by weight: - ≥4,000 g	Strengthen the implementation of quality and safe healthcare services for antenatal in hospitals/health facilities	Ongoing	 Quality Assurance Monitoring Reports MOH Annual Reports 	 Hospital and Clinical Services District and Community Health Services 			
		decade	- ≥3,000 g - ≥2,000 g - ≤1,000 g	Strengthen the implementation of POINT Trainings for all Neonatal Unit Staff	Ongoing	MOH Annual Reports	 Registrar and Health Professional Development Hospital and Clinical Services 			

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILI	D HEALTH							
Strategic Goal:	To reduce maternal and perinatal mortality and reduce child morbidity and mortality									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
				Regularize peri-natal meetings to improve maternal, perinatal and childcare services	Ongoing	Quality Assurance Monitoring ReportsMOH Annual	 Hospital and Clinical Services Integrated Nursing Services 			
				Strengthen the implementation of antenatal, obstetric and Gynae clinics services	Ongoing	Reports				
Estimated level of coverage of birth registration	New indicator	At least 90% of births are registered within 3 months after birth	Number of births recorded and reported by: - Health facilities - Community by Sui o Nu'u &	Conduct education sessions with healthcare workers, Sui o Nu'u and Sui Tama'ita'i o Nu'u on birth registration, recording and reporting	Ongoing	MOH Annual Reports	Health Information System and M&E			
			Sui Tama'ita'i o Nu'u	Integrate CRVS as one of integral part of e-Health System	Ongoing	MOH Annual Reports	Health Information and Communication Technology			
			Proportion of registered birth delivered by: - Professional Midwives - Traditional Birth Attendants	Continue to implement professional development for Traditional Birth Attendants on delivering safe delivery practices and effectively monitor their performance	Ongoing	MOH Annual Reports	Integrated Nursing Services			

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILI	D HEALTH							
Strategic Goal:	To reduce maternal and perinatal mortality and reduce child morbidity and mortality									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
Effective management of National Expanded Program for Immunization (EPI) Program	84.4% (DHS, 2014)	95% of infants receive three doses of Hepatitis B vaccine	Proportion of infants receiving doses of Hepatitis B vaccines within 24 hours after birth	Ensure all infants receive doses of Hepatitis B vaccines within 24 hours after birth.	Ongoing	 EPI Program Progress Reports MOH Annual Audits 	 Hospital and Clinical Services District and Community Health Services Expanded Program for Immunization 			
	53.7% (DHS, 2014)	At least 90% of infants receive DTP3 doses of Hepatitis Vaccines	Proportion of infants receiving DTP3	Strengthen the implementation of immunization program for infants 0 – 5 years	Ongoing	 EPI Program Progress Reports MOH Annual Reports 	 Expanded Program for Immunization Unit Hospital and Clinical Services District and 			
	MMR1 = 88% MMR2 = 66% (NHS EPI 2016)	At least 95% of 1 year old children immunized against measles every year	Proportion of 1 year old children immunized against measles				Community Health Services			
	86% coverage (NHS FY2015/16)	At least 95% coverage	Percentage of fully immunized children at 5 years	Strengthen the implementation of EPI outreach programs in primary schools and community	Ongoing	 EPI Program Progress Reports MOH Annual Reports 	 Expanded Program for Immunization Unit Hospital and Clinical Services District and 			

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILI	D HEALTH				
Strategic Goal:	To reduce mate	ernal and perinatal	mortality and reduce chi	ild morbidity and mortality			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Develop and implement effective interventions on immunization during the commemoration of the World Immunization Week	Financial Yearly basis		Community Health Services
Introduction of new vaccines	New indicator	The Public is fully aware of the new vaccines that will be added to the EPI	Proportion of population who are informed and aware of new vaccines introduced in the EPI	Implement community awareness campaign on new vaccines	Ongoing	MOH Annual Repots EPI Progress Reports	 Expanded Program for Immunization Unit District and Community Health Services
		Schedule	Program	Implement trainings for vaccinators to ensure the safe administration of the new vaccines	Ongoing	MOH Annual RepotsEPI Progress Reports	 Expanded Program for Immunization Unit Hospital and Clinical Services
				Implementation and administration of new vaccines	Ongoing		District and Community Health Services
Exclusively breastfeeding from 0 – 6 months	70% (DHS, 2014)	At least 70% of infants 0-6 months are exclusively	Percentage/Numbers of infants aged 0-6 months who are fed exclusively with breast	Strengthen the implementation of the Hospital Breastfeeding Policy	Ongoing	MOH Annual Reports	National Health Programs, Wellness, Health Education and Health Promotion

KEY OUTCOME 5:	IMPROVED MA	ATERNAL AND CHILI	O HEALTH				
Strategic Goal:	To reduce mat	ernal and perinatal	mortality and reduce chi	ld morbidity and mortality			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
		breastfed	milk	Continue to implement effective community awareness programs on the importance of breastfeeding during the commemoration of the World Breastfeeding Week on annual basis	Ongoing		 Hospital and Clinical Services District and Community Health Services
				Implement 20 Hour Breastfeeding Counseling training for health workers (clinical and non-clinical) for both Upolu and Savai'i	Ongoing	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion Hospital and Clinical
				Effectively monitor the compliance of supermarkets with the Code of Marketing Breast Milk Substitutes	Ongoing		Services • District and Community Health Services
Pregnant women tested and with results for HIV and STI	NIL	At least 30% of pregnant women are tested and know HIV and STI status	Numbers of women aged 15-24 years who are tested for HIV and STI during antenatal care visits and are treated if they have positive test results	Strengthen the implementation of HIV testing for pregnant women during antenatal care including presumptive treatment	Ongoing	MOH Annual Reports	 Hospital and Clinical Services District and Community Health Services Health Sector Coordination,
			positive test results	Effectively monitor and	Ongoing		Resourcing and

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILI	O HEALTH				
Strategic Goal:	To reduce mate	ernal and perinatal	mortality and reduce chi	ld morbidity and mortality			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				review the implementation of the Integrated Community Health Approach Program (ICHAP)			Monitoring
Reducing stunting in children aged 0-5 years	5% of children are in moderate to severe stunting (DHS, 2014)	3% reduction in the number of children aged 0 – 5 years who are stunted by 2023	Percentage of stunted children aged 0 – 5 years	Integrate health questions on stunted children in the National DHS/MICS survey	Ongoing	 DHS/MICS Survey Report MOH Annual Reports 	National Health Programs, Wellness, Health Education and Health Promotion
Effective management of children's oral health	New indicator	At least 50% of all primary school students are screened for oral health on annual basis	Number of primary school students screened for oral health	Implement oral health education and treatment programs in all primary schools including public, private and church schools	Financial yearly	 Oral Health Screening for Children Reports MOH Annual Reports 	Oral and Dental Health Services
Effective management of children's oral Health.	New indicator	At least 50% of children aged 3 – 15 years are screened and examined for non-symptomatic oral diseases	Proportion of children aged 3 – 15 years screened and examined at least once for early detected, diagnosis and treatment of nonsymptomatic oral diseases	Implement periodic screening and preventive strategies in school integrated oral health care programs	Ongoing		

KEY OUTCOME 5:	IMPROVED MA	TERNAL AND CHILI	D HEALTH								
Strategic Goal:	To reduce mate	To reduce maternal and perinatal mortality and reduce child morbidity and mortality									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION				
Assessment of children for visual impairment	New indicator	80% of 4-5 year old children in all Primary Schools are screened for visual impairment	Proportion of children aged 4-5 years screened for visual impairment	Implement Visual Impairment Screening Program targeting children aged 4-5 years	Ongoing	 Visual Impairment Screening Reports MOH Annual Reports 	Hospital & Clinical Services/Eye Clinic/Ophthalmology				
Coverage of health tracer interventions for persons with disabilities	New indicator	100% of children and young people with disabilities are well supported through the delivery of needed health services	Percentage of children and young people with disabilities receiving needed health services	Develop and implement health initiatives, policies and processes to support smooth transitions for children and young people with disabilities	Ongoing	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion Hospital and Clinical Services Rural District Hospitals and Community Health Services Strategic Planning, Policy and Research 				
Compliance of Hospitals with the Baby Friendly Hospital Initiative Standards	New indicator	100% compliance of main hospitals and rural district hospitals	Number/Percentage of hospitals fully complied with Baby Friendly Hospital Initiative Standards and certified as meeting these standards	Effectively monitor the compliance of main hospitals and rural district hospitals with Baby Friendly Hospital Initiative Standards	Ongoing	MOH Annual Reports	National Health Programs, Wellness, Health Education and Health Promotion				
Rheumatic heart disease	New indicator	At least 95% of students in Year	Percentage of students in Year 1 & Year 2 levels	Strengthen the implementation of	Ongoing	Rheumatic Heart Disease Screening	Hospital and Clinical Services/Paediatric				

KEY OUTCOME 5:	IMPROVED MA	MPROVED MATERNAL AND CHILD HEALTH										
Strategic Goal:	To reduce mate	To reduce maternal and perinatal mortality and reduce child morbidity and mortality										
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION					
management and prevention among children		1 and Year 2 levels are screened for rheumatic heart diseases, detected, diagnosed and treated	detected for rheumatic heart diseases and referred for treatment	rheumatic heart disease screening for all Year 1 and Year 2 students in all primary schools		Reports • MOH Annual Reports	Unit					

KEY OUTCOME 6: Strategic Goal:				TION AND PRIMORDIAL PRE			
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
Prevalence of alcohol drinkers	16.9% (DHS, 2014)	Reduce the prevalence of dangerous and harmful	Percentage of alcohol drinkers (both adults and young people) who regularly drink alcohol	Include questions on alcohol consumption in National DHS/MICS Surveys	Ongoing	DHS/MICS survey reportsMOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion
		consumption of alcohol by 5% by 2023	shows reduction over 6 year period from baseline	Effectively monitor the production of alcohol products including hygiene standards of liquor and their contents	Ongoing	MOH Annual Reports	Health Protection and Enforcement
				Strengthen the implementation of community awareness campaign on the NCD risk factors including alcohol and provide reports on the implementation progress	Ongoing		 National Health Programs, Wellness, Health Education and Health Promotion Health Protection and Enforcement
Prevalence of Current Smokers	5% of excise tax increase on tobacco products from SAT221.60 per 1,000	Increase the excise duty to at least 25% of the retail price of the cigarettes by 2023	Evidence of legislation to reduce affordability of tobacco products by increasing tobacco excise tax	Advocate for strengthening tobacco control in other intersecting legislation on tobacco control measures	FY2024/25 Ongoing	 MOH Annual Reports MOH Annual Reports 	 Office of the CEO- Legal Consultant Health Protection and Enforcement
	sticks to SAT232.68			Effectively monitor and evaluate the implementation of the	Ongoing	MOH Annual ReportsNational Tobacco	Health Information Services and M&EStrategic Planning,

KEY OUTCOME 6:	IMPROVED	HEALTHY LIVING T	HROUGH HEALTH PROMOT	TION AND PRIMORDIAL PRE	EVENTION		
Strategic Goal:	To improve	e and strengthen pe	ople-centred health promo	otion and primordial prever	ntion		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
	(MFR, 2017)			National Tobacco Control Policy 2019-2024 implementation		Control Policy 2019-2024 M&E Reports	 Policy and Research Health Protection and Enforcement National Health Programs, Wellness, Health Education and Health Promotion
				Enforce the monitoring and regulation of the Tobacco Control Act 2008 and Regulations 2013 implementation	Ongoing	MOH Annual Reports	Health Protection and Enforcement
Prevalence of tobacco smoking among persons 15 years and over (female & male)	35.9% (DHS, 2014)	Reduce prevalence of tobacco smoking among persons 15 years and over by 5% in 2023	Percentage of smokers aged 15 years and over (female & male) who regularly smoke shows reduction over 6 year period from baseline	Implement Global Youth Tobacco Survey for Samoa	FY2023/24	Global Youth Tobacco Survey Report	 National Health Programs, Wellness, Health Education and Health Promotion Health Protection and Enforcement

Strategic Goal:	To improve	e and strengthen pe	ople-centred health promo	otion and primordial prever	ntion		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Conduct National Tobacco Control Committee meetings on regular basis	Ongoing	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion Health Protection and Enforcement
				Develop Tobacco Control Manual of Operations	FY2024/25	MOH Annual Reports	 Health Protection and Enforcement National Health Programs, Wellness, Health Education and Health Promotion
Current levels of Physical Activity	61.1% (DHS, 2014)	Increase numbers of physically active people by at least 1% each year	Number of Physically active people recorded and reported	Enhance and strengthen the implementation of Physical Activity Programs across the country	Ongoing	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion
				Continue to conduct Physical Activity and Nutrition EXPO during National Health Week every year	Financial Yearly	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion
				Strengthen the implementation of school monitoring on physical activity programs	Ongoing	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion

KEY OUTCOME 6:	IMPROVED	HEALTHY LIVING TI	HROUGH HEALTH PROMOT	TION AND PRIMORDIAL PRE	EVENTION		
Strategic Goal:	To improve	and strengthen pe	ople-centred health promo	tion and primordial prever	ntion		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
				Continue to implement Wellness is Beauty Program during Teuila Festival Celebration every year	Financial Yearly	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion
				Facilitate and coordinate the National Physical Activity Committee meetings on regular basis	Ongoing	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion
				Review/update the National Physical Activity Guideline	FY2023/24	MOH Annual Reports	 National Health Programs, Wellness, Health Education and Health Promotion
Monitoring the health and wellbeing of MOH staff	New indicator	At least 95% of MOH staff are physically active	Percentage of MOH Staff who are physically active	Implement Physical Activity Programs in all health facilities both in Upolu and Savai'i, and effectively monitor the health status of MOH Staff	Ongoing	 Physical Activity Program Monitoring Reports MOH Annual Reports 	 National Health Programs, Wellness, Health Education and Health Promotion ALL DIVISIONS
				Procure PA system for rural health facilities and MTII hospital to assist with the implementation of Physical Activity Programs	FY2023/24	 Physical Activity Program Monitoring Reports MOH Annual Reports 	 National Health Programs, Wellness, Health Education and Health Promotion Finance and Procurement

KEY OUTCOME 6:	IMPROVED	HEALTHY LIVING TI	HROUGH HEALTH PROMOT	TION AND PRIMORDIAL PRE	EVENTION		
Strategic Goal:	To improve	and strengthen pe	ople-centred health promo	otion and primordial prever	ntion		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
							 Health Sector Coordination, Resourcing and Monitoring
Excise duties levied on imported and/or locally produced sugary sweetened beverages	3% increase from 51 cents to 52.5 cents on Sugary Sweetened Beverages in 2018 (MfR, 2018)	10% increase of excise duties on Sugary Sweetened Beverages both local and imported by 2023	Evidence of excise duties levied on imported and locally produced Sugary Sweetened Beverages	Prepare and submit evidence-based case proposal to Ministry of Finance/relevant government agencies for increase of excise duties on Sugary Sweetened Beverages	FY2023/24	MOH Annual Reports	Health Protection and Enforcement
Existence of endorsed policies/guidelines /strategies relating to the provision and promotion of healthy food choices in schools	National Food and Nutrition Policy 2013- 2018 National Health Promotion Policy 2020- 2015	Effective implementation of endorsed policies in place relating to the provision and promotion of healthy food choices in schools	Evidence of nationally endorsed policies related to the provision and promotion healthy food choices in schools	Review, develop and update: - National Health Prevention Policy 2013-2018 - National Cancer Control Policy - School Nutrition Standards	FY2024/25 FY2023/24	 MOH Annual Reports MOH Annual Performance Reviews 	 Strategic Planning, Policy and Research Division National Health Programs, Wellness, Health Education and Health Promotion.
	School Nutrition			- National Infection Control Policy 2011-			

KEY OUTCOME 6:	IMPROVED	HEALTHY LIVING TI	HROUGH HEALTH PROMOT	TION AND PRIMORDIAL PRE	EVENTION		
Strategic Goal:	To improve	e and strengthen pe	ople-centred health promo	tion and primordial prever	ntion		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
	Standards 2012			2016 - Samoa National Tobacco Control Policy 2019 – 2024	FY2023/24		
				- National Food and Nutrition Policy 2021- 2026	FY2023/24		
				- Samoa School Nutrition Standards			
					FY2023/24		
				Strengthen the implementation of the School Health Program through the implementation of the PEN Fa'a-Samoa Program	Ongoing		
Effective management of health promoting schools program	New indicator	At least 60% of Early Childhood, Primary and Secondary Schools are certified as Health Promoting	Percentage of Early Childhood, Primary and Secondary Schools classified as Health Promoting Schools	Effectively monitor the implementation of Health Promoting Schools Program and Standards	Ongoing	 Health Promoting Schools Monitoring Reports MOH Annual Reports 	 National Health Programs, Wellness, Health Education and Health Promotion

Strategic Goal:	To improve	and strengthen pe	ople-centred health promo	tion and primordial preven	ition		
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION
		Schools					
	New indicator	Effective and efficient of ENT services through primary assessment screening conduct for Early Childhood, Primary and Secondary Schools	Evidence of services provided through primary assessment screening conducted for Early Childhood, Primary and Secondary schools	Implement ENT services provided at TTM and MTII hospital Conduct the ENT screening for Early Childhood, Primary and Secondary Schools for both Upolu and Savaii	Bi-annually	MOH Annual Reports	Hospital and Clinical Services/ENT Clinic
Compliance of food premises with Food Safety Legislations, Regulations and Standards	99% of 120 inspected food premises (MOH, 2019)	All food premises should be fully complied with food safety legislations, regulations and standards	Percentage of food premises fully complied with food safety legislations, regulations and standards	Effective monitoring of implementation of Food Act 2015 and Food Regulation 2017	Ongoing	MOH Annual Reports	Health Protection and Enforcement

KEY OUTCOME 7:	IMPROVED R	ISK MANAGEMEN	T AND RESPONSE TO DISAS	TERS, PUBLIC HEALTH EMER	GENCIES AND CLI	MATE CHANGE	
Strategic Goal:				uilding and integrating clim	ate change meas	ures into public healt	h policies and plans, and
	raise awaren		ptation and early warning				
OUTPUT	BASELINE	TARGET	KEY PERFORMANCE	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE
INDICATOR	DATA		INDICATORS				DIVISION
Average of 13 IHR 2005 core capacities score	90% compliance with IHR 2005 13 core capacities	Increase the compliance with 13 IHR core capacities to 95%	Percentage of attributes of 13 core capacities that have been attained at specific point in time	Build the capacity of health staff and relevant stakeholders on International Health Regulations implementation to enhance the preparedness and response during disease outbreaks and	Ongoing	MOH Annual Reports	National Health Surveillance & IHR
				public health emergencies Implement professional development for staff on the application of APSED III and JEET	Ongoing		
				Domesticate the International Health Regulations 2005 in line with the MOH Amendment Act 2019 and implement	Ongoing		
Provision of safe, effective and efficient quality health services during public health emergencies	New indicator	Effective and efficient health emergency services systems in place for main hospitals	Evidence of effective and efficient provision of health services during public health emergencies and disasters	Review and update Standard Operating Procedures for all health facilities	Ongoing	MOH Annual Reports	 National Health Surveillance & IHR Rural District Hospitals and Community Health Services
and disaster				Conduct simulation of exercises/drills and evaluate the effectiveness	Every two financial years	MOH Annual Reports	National Health Surveillance & IHR

KEY OUTCOME 7:	IMPROVED I	RISK MANAGEMEN	T AND RESPONSE TO DISA	STERS, PUBLIC HEALTH EMER	GENCIES AND CL	IMATE CHANGE				
Strategic Goal:	To strengthen resilience and adaptive capacity, capacity building and integrating climate change measures into public health policies and plans, and raise awareness on climate adaptation and early warning system									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
				Provide trainings for MOH staff on emergency radio network	Ongoing	MOH Annual Reports	 Health Information Technology and Communication 			
				Ensure all Information and Communication systems are accessible during disasters and emergencies	Ongoing	MOH Annual Reports	 Health Information Technology and Communication 			
				Implement regular spot checks and physical siting of all health donations during public health emergencies and disasters	Ongoing	Internal Audit ReportsMOH Annual Reports	Internal AuditAssets Management and Maintenance			
				Ensure sufficient stockpiling of medical supplies in the pharmaceutical warehouse and all health facilities in response to public health emergencies and disasters	Ongoing	MOH Annual Reports	Pharmaceutical WarehousePharmacyMT2 Savaii			
		Public Health Emergencies and Disasters Preparedness and Response	Development: - Health Emergency Services Preparedness	Develop and strengthen the implementation of Health Emergency Services Preparedness and Response Guidelines	FY2024/25	MOH Annual Reports	 National Health Surveillance and IHR/Climate Change & Health Unit 			

Strategic Goal:		To strengthen resilience and adaptive capacity, capacity building and integrating climate change measures into public health policies and plans, and raise awareness on climate adaptation and early warning system								
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
		Plans in Place	and Response Guidelines - Disaster Response Plan for the Health Sector	Develop and implement the Disaster Response Plan for the Health Sector	FY2023/24		Strategic Planning, Policy and Research			
Population access to improved sanitation	95.6% (DHS, 2014)	99% of the population access to improved sanitation by 2023	Proportion of the population access to improved sanitation	Integrate health question on population access to improved sanitation in the MICS survey Conduct monitoring visits for sanitation for schools and public lavatories	Ongoing	MOH Annual Reports	National Health Programs, Wellness, Health Education and Health Promotion			
to improved p drinking water a ir d	99% of population accessing improved drinking water	population access to improved	ation using improved drinking water sources in specific time period	Integrate health question on population access to improved drinking water in the DHS/MICS survey	Ongoing	 MOH Annual Reports DHS/MICS Reports 	National Health Surveillance and IHR			
	(Census, 2016)	by: - Samoa Water Authority - Bottled		Strengthen the implementation of monitoring visits and lab tests for water quality	Ongoing					
		Water Companies and 10% by Independent		Strengthen the monitoring of Water Safety Plans implementation for all water service providers	Ongoing					
		Water Scheme		Implement annual consultations for Bottles Water Companies and community on water	Ongoing					

Strategic Goal:	raise awareness on climate adaptation and early warning system									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION			
				quality						
Compliance of Water Service Providers with National Drinking Water Standards	SWA Treatment Plants = 100% Boreholes = 34% IWS = 3% (MOH, 2019)	All Water Service Providers should be 100% complied with the National Drinking Water Standards	Percentage/Numbers of water service providers complied with National Drinking Water Standards	Effectively monitor the compliance of water service providers with the National Drinking Water Standards 2016	Ongoing	•	National Health Surveillance and IHR			
compliance of Food Premises with Food Safety Legislations, Standards and Guidelines Food and	98% compliance of food premises and food handlers with Food Act 2015 and Food Regulations	At least 1% increase every year of food premises, food handlers, food importers and food manufacturers	Percentage/Numbers of food premises, food handlers, food importers and food manufactures complied with: - Food Act 2015 - Food Regulations 2017	Enforce the monitoring and regulation the implementation of: - Food Act 2015 - Food (Safety and Quality) Regulations 2017	Ongoing	MOH Annual Reports	Health Protection and Enforcement			
	Food Act 2015, Standar Food Regulations 2017 and Food	- Food Safety Standards	Continue the work of National Food and Nutrition Committee as per Food Act 2015	Ongoing						
		Safety related guidelines and standards		Enforce the implementation of Food Labeling Standards	Ongoing					
			Develop and implement inspection system for imported food at point of entries	Ongoing						

Strategic Goal:		To strengthen resilience and adaptive capacity, capacity building and integrating climate change measures into public health policies and plans, an raise awareness on climate adaptation and early warning system									
OUTPUT INDICATOR	BASELINE DATA	TARGET	KEY PERFORMANCE INDICATORS	ACTIVITIES	TIMEFRAME	DATA SOURCES	RESPONSIBLE DIVISION				
				Conduct risk assessment and awareness on donated food during disasters	Ad hoc Basis						
Effective implementation of National Disaster Risk Management	Disaster Risk Management and Climate Adaptation	At least 30% of health sector partners with Disaster Risk	of Number of health sector partners that adopt and implement National Risk Management Strategy and line	Strengthen community preparedness and resilience of communities	Ongoing	MOH Annual Reports	National Health Surveillance and IHRALL DIVISIONS				
Strategies	Strategy for Management Health in Strategies and place Climate Adaptation Response Plan developed, reviewed and updated, and	Management Strategies and Climate Adaptation Response Plans developed, reviewed and		Continue to implement Climate Adaptation Response Plans in line with the Health Sector Disaster Risk Management Strategy and Climate Adaptation Strategy for Health Provide trainings for	Ongoing	MOH Annual Reports	National Health Surveillance and IHR				
		with the Health Sector DRM and CASH strategies		health professionals on flood related emergencies risk management and response	Gilgoliig						
			Implement awareness programs among health professionals and village councils about flood related Early Warning System (EWS) Effectively monitor the	Ongoing							

KEY OUTCOME 7:	IMPROVED R	IMPROVED RISK MANAGEMENT AND RESPONSE TO DISASTERS, PUBLIC HEALTH EMERGENCIES AND CLIMATE CHANGE							
Strategic Goal:	To strengthen resilience and adaptive capacity, capacity building and integrating climate change measures into public health policies and plans, and raise awareness on climate adaptation and early warning system								
OUTPUT	BASELINE	BASELINE TARGET KEY PERFORMANCE ACTIVITIES TIMEFRAME DATA SOURCES RESPONSIBLE							
INDICATOR	DATA		INDICATORS				DIVISION		
				compliance of all health					
				facilities with the Disaster					
				Preparedness and					
				Response Plans					

MONITORING AND EVALUATION

The Ministry will monitor and evaluate the implementation of this Interim Corporate Plan through the following performance reporting mechanisms:

- (i) Pathway for the Development of Samoa reviews
- (ii) Health Sector Plan FY2019/20-FY2029/30 Monitoring and Evaluation reports and Midterm review
- (iii) Annual Key Performance Indicators and Budget reviews
- (iv) MOH Staff Performance Appraisals and
- (v) Any other relevant reviews.

RISKS AND RISK MANAGEMENT

strategic direction and is a high risk in completing the implementation of the plan.

The table below summarizes key risks that the Ministry of Health believes will influence the ability of the Ministry to implement and achieve its Key Performance Indicators for the next two financial years. This was based on the experience in the past three years.

RISK MANAGEMENT INTERVENTION RISKS Environmental Uncertainty: (i) Further strengthen of emergency and Disasters, Natural Disease Outbreaks, disaster preparedness and response interventions that lead to shift in current (ii) Update National Disaster Risk situation. Management & National Epidemic and Pandemic Preparedness Plan on regularly basis (iii) Strengthen disease surveillance **Workforce Shift and Migration:** (i) Encourage and enforce appropriate Shift of health workforce from the MOH to other retention mechanisms such as capacity part of the sector or other sectors, and migration building, professional development and of skilled health professionals through NZ quota career pathways based on performance scheme and seasonal workers. appraisals. (ii) Monitor the implementation of the **Human Resources for Health Strategy** and Samoa Health Workforce **Development Plan** (iii) Strengthen MOH Internal Bonding System for sponsored health students Possible Change in Leadership: (i) Stringent and regular alignment of The Director General of Health, Deputy Director management plans with the Interim General of Health and Executive Management Corporate Plan and Health Sector Plan only have 3 year contracts, and this can be a (ii) Contract officers to proactively perform barrier in realizing and achieving the Interim and meet their performance measures Corporate Plan Strategic Goals and Outcomes. within 3 -year contract time. The change in leadership can also change

(iii) Mentor operational staff and delegate

responsibilities.

Commitment and Ownership:

Lack of staff and stakeholders commitment and ownership can be a high risk in achieving the planned targets and outcomes

- (i) Continue and strengthen staff and stakeholders involvement in planning process, implementation and strengthen follow-up and monitoring system for performance.
- (ii) Formal arrangements/service agreements between MOH and other health entities to provide for open sectoral dialogue and sharing of information.

Financial management risks:

Change in priorities can lead to change in resource allocation for the implementation of the plan.

- (i) Use/retain or build capacity for financial management
- (ii) Financial management assessment and capacity building action plan
- (iii) MOH to urgently update Medium Term Expenditure Framework (MTEF)