

GOVERNMENT OF ENUGU STATE OF NIGERIA ENUGU STATE PRIMARY HEALTHCARE DEVELOPMENT AGENCY



House No. 30, Coal City Garden Estate, G.R.A., Enugu

2024 Annual Human Resources for Health (HRH) Report: Enugu State Primary Health Care Development Agency

1. Introduction

The Enugu State Primary Health Care Development Agency (ENSPHCDA) is dedicated to delivering accessible and high-quality primary health care (PHC) services across the state. This report presents the 2024 assessment of Human Resources for Health (HRH) within Enugu State's PHC system. While the state possesses a diverse health workforce, including medical officers, pharmacists, laboratory scientists, nutritionists, and others, this analysis focuses on the core clinical personnel essential for effective PHC service delivery. These key cadres are:

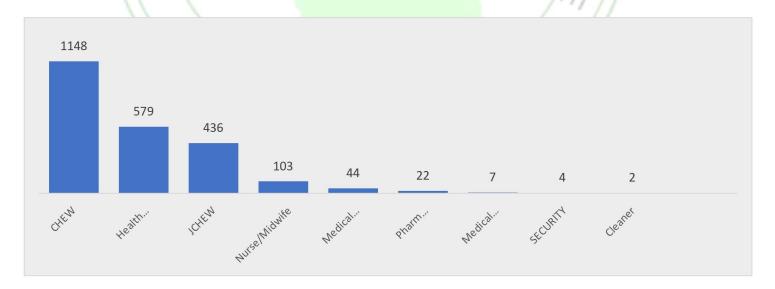
- Nurses/Midwives
- Community Health Extension Workers (CHEWs)
- Junior Community Health Extension Workers (JCHEWs)
- Pharmacy Technicians
- Medical Laboratory Technicians
- Medical Records Officers
- Health Attendants
- Security Personnel
- Cleaners

To ensure data accuracy, a comprehensive biometric verification of all PHC staff was conducted in 2024, utilizing Bank Verification Numbers (BVN), National Identification Numbers (NIN), and telephone numbers. It is important to note that this data represents a point-in-time assessment and may not fully reflect the current situation due to ongoing staff attrition (deaths, retirements, and resignations). This report provides insights into current HRH gaps and outlines a five-year recruitment plan to address these needs.

2. Current HRH Profile

Table 1: Overall HRH Distribution by Cadre

	No			
Cadre	Available Cadre		Cadre	Available
Medical Officer	31		Health Educator	2
Nurse/Midwife	103		ЕНО	174
Pharmacist	3		Pharm Technician	22
Medical Lab Scientist	9		Medical Lab Technician	45
Radiographer	1		EHT	36
Public Heath Officer	5		Medical Records	7
PHYSIOTHERAPIST	2		Health Attendant	279
CHEW	1148		JCHEW	436
Dentist	第二次 第二次 1		SECURITY	4
Food Scientific	41		Cleaner	2
Nutritionist	1		Others	495
Total				2847



[Figure 1 here, depicting the distribution of personnel across listed cadres]

Figure 2: Distribution of HRH by Local Government Area (LGA) of Assignment

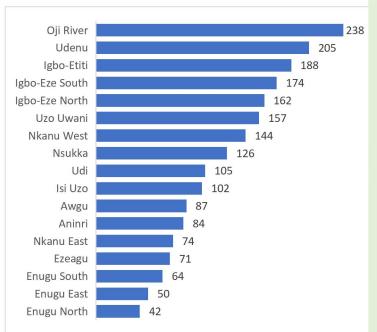


Figure 2: Shows the distribution of PHC health workers by Local Government Area. The obvious inequitable distribution across LGAs underscores the impact of LGA-based recruitment in the past. For instance, most LGAs have not recruited in the past 10 years, while others have conducted skeletal recruitment in the last 5 years. A good number of health workers have also left the system by attrition due to death, retirement, resignation etc.

[Figure 2, showing the distribution of HRH across the various LGAs.]



Total PHC centers that meet the standard HRH requirements were up to 50% only for CHEWs. However, targeted recruitment strategy as outlined in Table 3 below shows that we will have more that 60% of our PHCs meeting the minimum standard for staff requirement per PHC.

We took into account a total of 566 PHCs which were all comprehensively assessed, validated and geotagged in 2024.

Figure 3 here, illustrating the percentage of PHCs that meet the established standard requirements for each core cadre.

3. HRH Gap Analysis

This section details the current HRH gaps, focusing on core clinical staff. It compares the number of personnel available to the standard staffing requirements for PHCs and estimates the financial implications of addressing these gaps.

Table 2: HRH Gap Analysis and Financial Implications

Cadre	Availabl e	Required per PHC (Standard	Total Require d	Gap	Salary per person*	Total Monthly Salary for required HRH	Total Monthly Salary for Gap
Nurse/Midwife	103	2	1,132	1,029	73,411	83,101,252	75,539,919
CHEW	1,148	4	2,264	1,116	63,483	143,725,512	70,847,028
Medical Lab		1				10011	
Technician	44	1	566	522	65,576	37,116,016	34,230,672
Medical Records	7	2	1,132	1,125	51,100	57,845,200	57,487,500
Pharm Technician	22	1	566	544	65,576	37,116,016	35,673,344
Health Attendant	579	2	1,132	553	51,100	57,845,200	28,258,300
JCHEW	436	2	1,132	696	51,100	57,845,200	35,565,600
Cleaner	2	2	1,132	1,130	34,540	39,099,280	39,030,200
SECURITY	4	2	1,132	1,128	34,540	39,099,280	38,961,120
Total	2,729	16	9,056	6,814	417,015	469,691,704	340,053,76 4

Note: Salary values represent entry-level scales as of January 2024.

4. Five-Year Costed Recruitment Plan (2025-2029)

To address the identified HRH gaps, His Excellency, Barr. Dr. Peter Ndubuisi Mbah, Governor of Enugu State, has approved the recruitment of 2,200 PHC workers. This recruitment will be conducted in phases to ensure effective onboarding and integration of new personnel. The first phase of 450 personnel has been completed.

Table 3: Five-Year Costed Recruitment Plan

Cadre	Salary per person	2025	Total Monthly Salary to reach 55% of required HRH	2027	Total Monthly Salary to reach 70% of required HRH	2029	Total Monthly Salary to reach 100% of required HRH
Nurse/Midwife	73,411	520	38,144,356	170	12,465,188	340	24,930,376
CHEW	63,483	97	6,170,548	340	21,558,827	679	43,117,654
Medical Lab			0.0				
Technician	65,576	267	17,528,465	85	5,567,402	170	11,134,805
Medical Records	51,100	616	31,457,160	170	8,676,780	340	17,353,560
Pharm Technician	65,576	289	18,971,137	85	5,567,402	170	11,134,805
Health Attendant	51,100	44	2,227,960	170	8,676,780	340	17,353,560
JCHEW	51,100	187	9,535,260	170	8,676,780	340	17,353,560
Cleaner	34,540	621	21,435,524	170	5,864,892	340	11,729,784
SECURITY	34,540	619	21,366,444	170	5,864,892	340	11,729,784
Total	417,015	2,739	128,692,497	1,358	70,453,756	2,717	140,907,511

5. Key Findings

- Significant HRH gaps exist across core clinical cadres, particularly for Nurses/Midwives and Medical Records Officers.
- The approved recruitment of 2,200 PHC workers demonstrates the Enugu State Government's commitment to strengthening the PHC system.
- Strategic, phased recruitment over the next five years is planned to progressively address the identified gaps.

6. Recommendations

To ensure the sustainable development of Enugu State's PHC workforce, the following recommendations are made:

- **Prioritized Recruitment:** Focus recruitment efforts on addressing the most critical gaps, especially for Nurses/Midwives and Medical Records Officers, to ensure the delivery of essential services.
- Targeted Retention Strategies: Develop and implement strategies to improve staff retention, including:
 - o Competitive compensation and benefits packages.
 - o Opportunities for professional development and career advancement.
 - o Improved working conditions and supportive supervision.

- Continuous Data Management: Establish a robust system for ongoing data collection and analysis to ensure that HRH data remains current and accurately reflects the evolving needs of the PHC system.
- Strategic Deployment: Develop a detailed plan for the deployment of newly recruited personnel across LGAs, ensuring equitable distribution based on need and service demand.
- Capacity Building: Invest in training programs to enhance the skills and competencies of both existing and new PHC staff, ensuring the delivery of high-quality care.
- **Detailed "Others" Category:** Future reports would provide a more detailed breakdown of the "Others" category in Table 1 to offer a more granular understanding of the entire health workforce composition.

7. Conclusion

This report highlights the critical importance of a well-supported and adequately staffed health workforce for the effective functioning of Enugu State's PHC system. By strategically addressing the identified HRH gaps through targeted recruitment, retention strategies, and ongoing data management, ENSPHCDA can make substantial progress towards its goal of providing accessible, equitable, and high-quality primary health care services to all residents of Enugu State.

Dr. Ifeyinwa Ani-Osheku

Executive Secretary/CEO

ENSPHCDA



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