



# Strategy & Implementation Plan

## 2023 - 2027

***Vision to Action***



## **Strategy and Implementation Plan 2023 - 2027**

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## Abbreviations

|                |  |
|----------------|--|
| <b>A4EPR</b>   | Alliance for Epidemic Preparedness and Response              |
| <b>AAR</b>     | After Action Review  |
| <b>ACDC</b>    | Africa Centres for Disease Control and Prevention            |
| <b>AI</b>      | Avian Influenza  |
| <b>AMR</b>     | Antimicrobial Resistance                                     |
| <b>APHIDS</b>  | Assuring Public Health International and Domestic Security   |
| <b>AVADAR</b>  | Auto Visual Alert Detection and Reporting                    |
| <b>BHCPF</b>   | Basic Healthcare Provision Fund                              |
| <b>BME</b>     | Biomedical Engineering                                       |
| <b>BRM</b>     | Bio Risk Management  |
| <b>CBS</b>     | Community-Based Surveillance                                 |
| <b>CPHL</b>    | Central Public Health Laboratory                             |
| <b>CSOs</b>    | Civil Society Organisations                                  |
| <b>DHIS-2</b>  | District Health Information System 2                         |
| <b>DPRS</b>    | Department of Planning, Research, & Statistics               |
| <b>EBS</b>     | Event-Based Surveillance                                     |
| <b>EIDs</b>    | Emerging and Re-Emerging Infectious Diseases                 |
| <b>ELISA</b>   | Enzyme Linked Immunosorbent Assay                            |
| <b>EMS</b>     | Emergency Medical Services                                   |
| <b>EOC</b>     | Emergency Operations Centre                                  |
| <b>EQA</b>     | External Quality Assessment                                  |
| <b>ESA</b>     | Enhanced Situational Awareness                               |
| <b>FCT</b>     | Federal Capital Territory                                    |
| <b>FmEnv</b>   | Federal Ministry of Environment                              |
| <b>FMAFS</b>   | Federal Ministry of Agriculture and Food Security            |
| <b>FMoH</b>    | Federal Ministry of Health and Social Welfare                |
| <b>GHSS</b>    | Global Health Sector Strategy                                |
| <b>GS</b>      | Genomic Surveillance   |
| <b>HEPR</b>    | Health Emergency Preparedness & Response                     |
| <b>HF</b>      | Health Facility  |
| <b>HR</b>      | Human Resources  |
| <b>ICC</b>     | Incident Coordination Centre                                 |
| <b>ICT</b>     | Information and Communications Technology                    |
| <b>IDSR</b>    | Integrated Disease Surveillance and Response                 |
| <b>IHR</b>     | International Health Regulations                             |
| <b>INEHSS</b>  | Integrated National Environmental Health Surveillance System |
| <b>IPC</b>     | Infection Prevention & Control                               |
| <b>IOS</b>     | International Organization for Standardization               |
| <b>JEE</b>     | Joint External Evaluation                                    |
| <b>LGAs</b>    | Local Government Areas                                       |
| <b>LIMS</b>    | Logistics Integrated Management Systems                      |
| <b>M&amp;E</b> | Monitoring & Evaluation                                      |
| <b>MCM</b>     | Medical Counter Measure                                      |
| <b>MDAs</b>    | Ministries, Departments, & Agencies                          |
| <b>MEL</b>     | Monitoring, Evaluation, and Learning                         |
| <b>MoU</b>     | Memorandum of Understanding                                  |
| <b>NADIS</b>   | National Disease Surveillance System                         |
| <b>NAPHS</b>   | National Action Plan for Health Security                     |
| <b>NCDC</b>    | Nigeria Centre for Disease Control and Prevention            |
| <b>NFELTP</b>  | Nigeria Field Epidemiology and Laboratory Training Program   |
| <b>NRL</b>     | National Reference Laboratory                                |
| <b>OH</b>      | One Health   |
| <b>Ops</b>     | Operational Procedures                                       |

|                 |   |
|-----------------|---|
| <b>PCR</b>      | Polymerase Chain Reaction                                     |
| <b>PH</b>       | Public Health   |
| <b>PHDMT</b>    | Public Health Disaster Management Teams                       |
| <b>PHEOC</b>    | Public Health Emergency Operations Centre                     |
| <b>PHL</b>      | Public Health Laboratories                                    |
| <b>PIP</b>      | Pandemic Influenza Preparedness                               |
| <b>PIU</b>      | Project Implementation Unit                                   |
| <b>POCT</b>     | Point of Care Testing   |
| <b>POE</b>      | Point of Entry  |
| <b>PPM</b>      | Planned Preventive Maintenance                                |
| <b>PVS</b>      | Performance of Veterinary Service                             |
| <b>QMS</b>      | Quality Management Systems                                    |
| <b>RRT</b>      | Rapid Response Team   |
| <b>SAPHS</b>    | State Action Plan on Health Security                          |
| <b>SBC</b>      | Social and Behaviour Change                                   |
| <b>SDGs</b>     | Sustainable Development Goals                                 |
| <b>SimEx</b>    | Simulation Exercise   |
| <b>SitAware</b> | Situational Awareness   |
| <b>SOP</b>      | Standard Operating Procedures                                 |
| <b>SORMAS</b>   | Surveillance Outbreak Response Management and Analysis System |
| <b>TBI</b>      | Tony Blair Institute for Global Change                        |
| <b>ToR</b>      | Terms of Reference  |
| <b>TOT</b>      | Training of Trainers  |
| <b>TWG</b>      | Technical Working Group                                       |
| <b>VLAN</b>     | Virtual Local Area Network                                    |
| <b>VPDs</b>     | Vaccine Preventable Diseases                                  |
| <b>WAHO</b>     | West Africa Health Organization                               |
| <b>ZRL</b>      | Zonal Reference Laboratories                                  |

## **Foreword**

The Nigeria Centre for Disease Control and Prevention is Nigeria's national public health institute with the mandate to lead the prevention of, preparedness for, detection and response to infectious disease outbreaks and public health emergencies.

It is my vision to lead the NCDC team to drive our national health security aspirations closer to the desired resilience to public health threats, whilst armed with robust surveillance and early warning systems, deploying innovative solutions for subnational strengthening, leading, and participating in cutting-edge research, and contributing to a skilled workforce that together produces a proactive public health system that safeguards the health of all citizens.

It has been a privilege to superintend the development of the 2023-2027 NCDC Strategy. In 2021, the Tony Blair Institute for Global Change (TBI) handed over the NCDC strategic plan portfolio to the Special Duties Unit under the Office of the Director General. With in-house leadership, the strategy was developed through a collaborative process that included an end-term evaluation of the 2017-2022 NCDC Strategy. This participatory process included NCDC staff, partners, and representatives from MDAs.

As we contend with national, regional, and global health security threats, this plan captures our collective vision and commitment to safeguarding the health of our nation and meeting our national obligations. Aligned with global and regional health security goals, the agency reaffirms its dedication to proactive, multisectoral, and evidence-based strategies. Using NCDC's first strategic plan as a baseline, we are now able to build on our strengths, further close identified gaps, and embrace innovation to achieve our overarching goals and objectives.

As we are only as strong as our weakest link, it is essential to intervene to strengthen subnational health security in partnership with state and local government-level actors. It is in alignment to this strategic direction that we created a Subnational Support Department to bring our activities closer to and ensure better coordination at the subnational level.

This plan reflects our commitment to the application of digital technologies and tools to improve and transform the delivery of our essential public health functions. This is in concordance with the presidential and ministerial agenda for health and this is why the 2023-2027 strategy includes a digital transformation agenda complemented by aspirations for high-quality crosscutting public health informatics. This strategic plan is a manifesto of our firm stand against emerging public health threats and evolving challenges. After months of review and deliberation, the new 5-year strategic plan identified 7 goals, 41 objectives, and 225 activities.

As we embark on NCDC Strategy 2.0, we extend our deepest gratitude to the NCDC team, our partners, and all stakeholders who have contributed to this strategy. It is a testament to our shared commitment to building a healthier, more resilient nation. We are grateful to TBI who supervised the 2017-2022 strategy implementation and guided the development of the 2023-2027 strategy.

Together, we can transform our **VISION INTO ACTION** and assure a healthier Nigeria.

**DR IFEDAYO ADETIFA**  
Director-General  
Nigeria Centre for Disease Control and Prevention

## Acknowledgement

The Nigeria Centre for Disease Control and Prevention (NCDC) would like to thank the President of the Federal Republic of Nigeria; the Honourable Coordinating Minister of Health and Social Welfare; the Honourable Minister of State for Health and Social Welfare; The Permanent Secretary; Directors and colleagues at the Federal Ministry of Health and Social Welfare for their support.

We are also grateful to past Ministers of Health, the pioneer Chief Executive Officer of the NCDC, Professor Abdulsalami Nasidi, and the first Director-General of NCDC, Dr Chikwe Ihekweazu, for their visionary leadership that established a platform for us to build on.

We also recognise the multisectoral support of the Ministries, Departments, and Agencies whose mandate and resources we have leveraged to achieve our goals. We acknowledge the efforts of the subnational authorities and communities and appreciate their cooperation. We thank the management and staff of the NCDC, and our international and local partners for their contribution to the development of this strategy.

We would like to express a special appreciation to the NCDC Special Duties Unit led through most of the process by the now-retired Dr Priscilla Ibekwe, who, along with her team took ownership and led us all through a successful process.

## About NCDC

The Nigeria Centre for Disease Control and Prevention (NCDC) is the national public health institute with the mandate to lead the preparedness, detection and response to infectious disease outbreaks and public health emergencies. The first formal step to establish the NCDC took place in 2011 when some departments in the Ministry of Health, including the Epidemiology Division, the Avian Influenza Project and its laboratories; and the Nigeria Field Epidemiology and Laboratory Training Programme (NFELTP) were moved to form the nucleus of the agency. The Bill for an Act to establish NCDC was signed into law in November 2018, by President Muhammadu Buhari.

### Vision

A healthier and safe Nigeria through the prevention and control of diseases of public health importance.

### Mission

To protect the health of Nigerians through evidence-based prevention, integrated disease surveillance and response activities, using a one health approach, guided by research and led by a skilled workforce.

### Core Functions

- Prevent, detect, and control diseases of public health importance.
- Coordinate surveillance systems to collect, analyse and interpret data on diseases of public health importance.
- Support states in responding to small outbreaks and lead the response to large disease outbreaks.
- Develop and maintain a network of reference and specialised laboratories.
- Conduct, collate, synthesise, and disseminate public health research to inform policy.
- Lead Nigeria's engagement with the international community on diseases of public health relevance
- Organisation of the Nigeria Centre for Disease Control and Prevention

The NCDC under the leadership of the Director General has a staff size of about 500. At the national level, this comprises staff working across three sites - the Headquarters and National Reference Laboratory (NRL), located in Abuja as well as the Central Public Health Laboratory (CPHL) in Lagos State, a campus of the NRL. At the subnational level, there are State Surveillance Officers across the 36 States of the federation and the Federal Capital Territory (FCT).

The NCDC currently operates through seven departments. These include:

- Public Health Laboratory Services
- Health Emergency Preparedness and Response
- Planning, Research and Statistics
- Surveillance and Epidemiology
- Administration and Human Resources
- Finance and Accounts
- Subnational Support Department



# **Overview of the Strategy Development Process**

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## Background and Context

- Nigeria is **Africa's most populous country, with a population of ~200 million, including about 31 million children**. Nigeria has **challenging health indices**, with **communicable diseases** and **vaccine preventable diseases** remaining major contributors to mortality and morbidity
- **The Nigeria Centre for Disease Control and Prevention was established in 2011 as an agency of the Federal Ministry of Health with the mandate to coordinate the public health response to communicable diseases, specifically, and to include environmental hazards, health emergencies and other diseases of public health significance**. Five-year strategic plans for NCDC were developed in 2013 and 2014 but were not supported by implementation and delivery plans and no evaluation of performance
- **NCDC was proposed as a full parastatal** of the Federal government in 2016, and in 2017, **NCDC formally launched its 2017-2021 strategy plan**, the implementation of this plan brought about **significant changes in the internal and external environment** of the organisation
- In 2018, **NCDC received its establishment act** giving the agency an expanded mandate **to contribute to national, regional and global health security**
- Half-way through implementation of the 2017-2021 strategy, **NCDC reviewed its strategy plan to align with internal and external changes**, as well as other strategies in the health sector which led to an extension of its **timeline to 2022**
- In 2022, **NCDC conducted an end-term review of** the implementation of the 2017-2022 strategy, **to identify successes, challenges and learnings** which were built on to develop the new 5-year strategy (2023 – 2027)

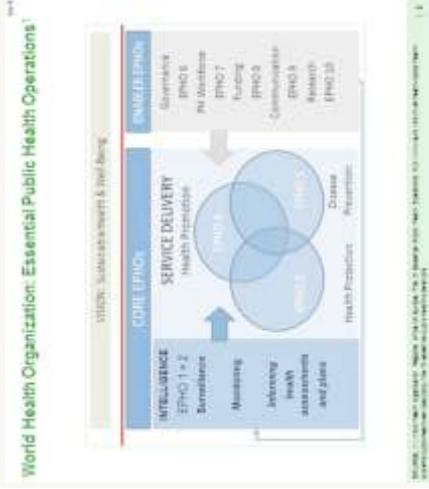


# The strategy framework is anchored on 3 key principles...

## Re-aligned priorities that ...

... build on global best practices while ...

... Taking into consideration ✓ the challenging environment

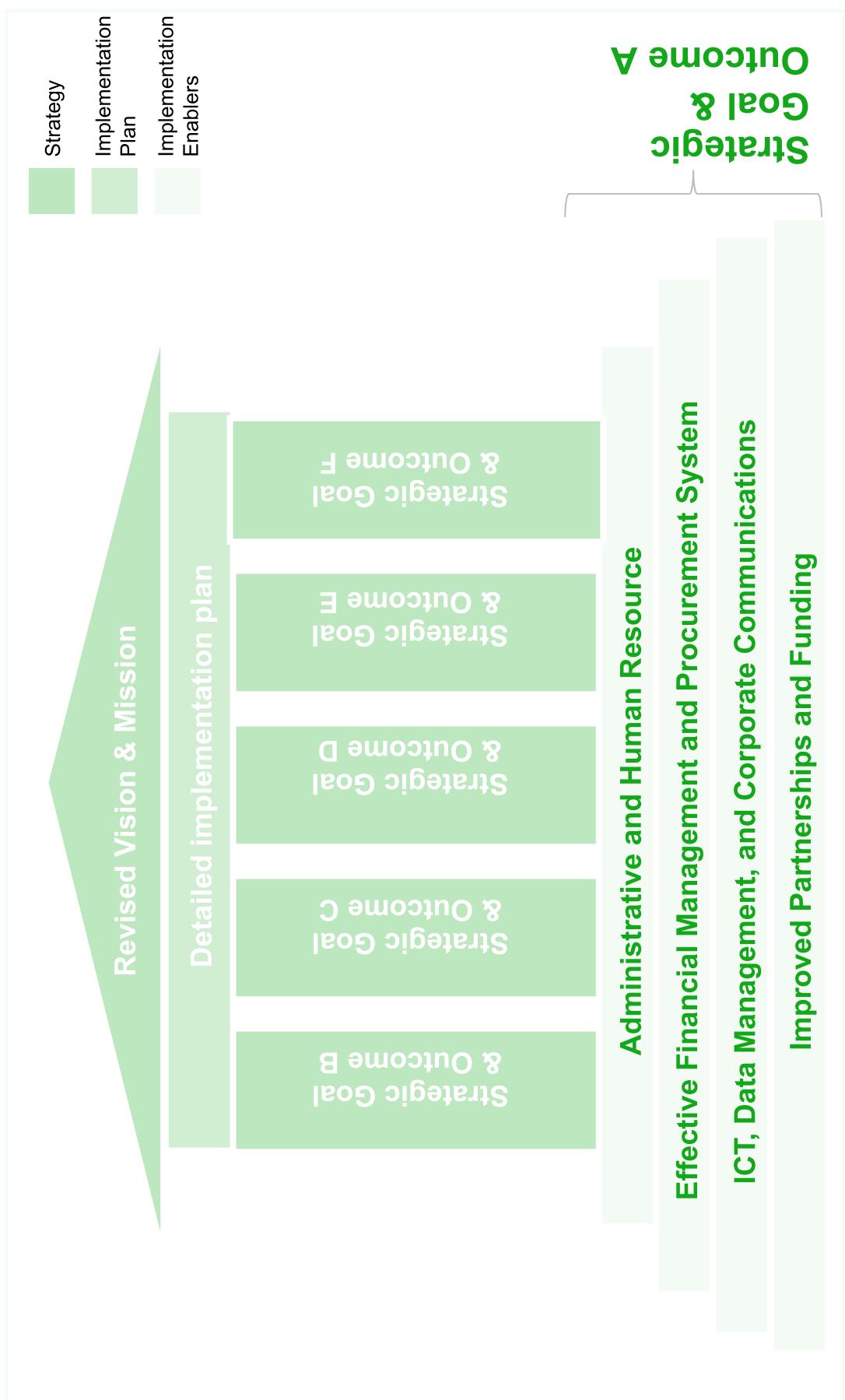


- A strong focus on communicable diseases
- Key objectives centred around strengthening the existing systems for critical CDC functions

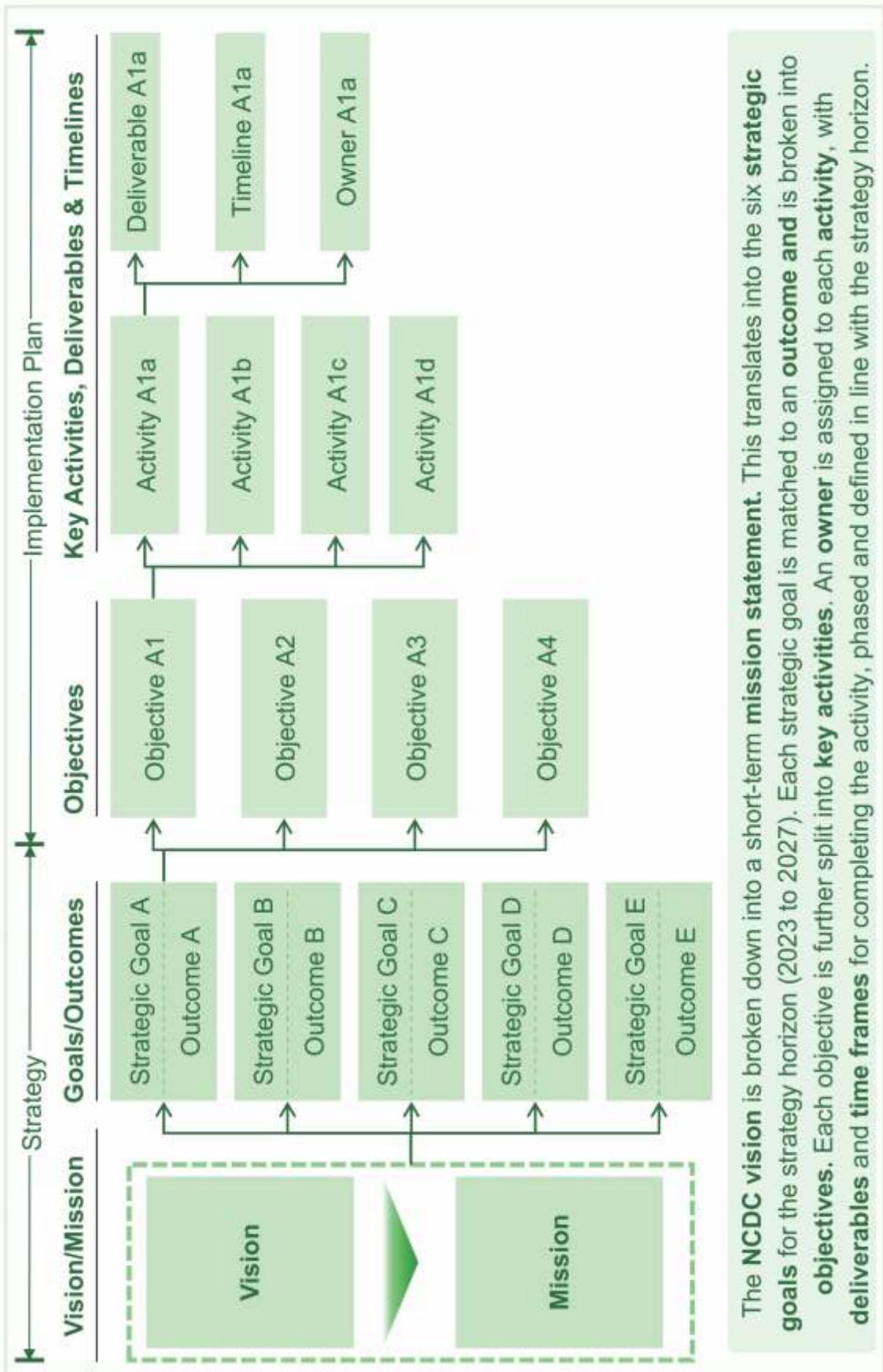
- The road-map anchored on the World Health Organization's Essential Public Health Operations

- Extensive evaluation of the external operating environment to identify constraints and opportunities
- Focus of the road-map is to leverage the NCDC strengths to take advantage of the opportunities

**...using a 'sum of parts' approach, focused on integrating implementation plans with execution enablers**



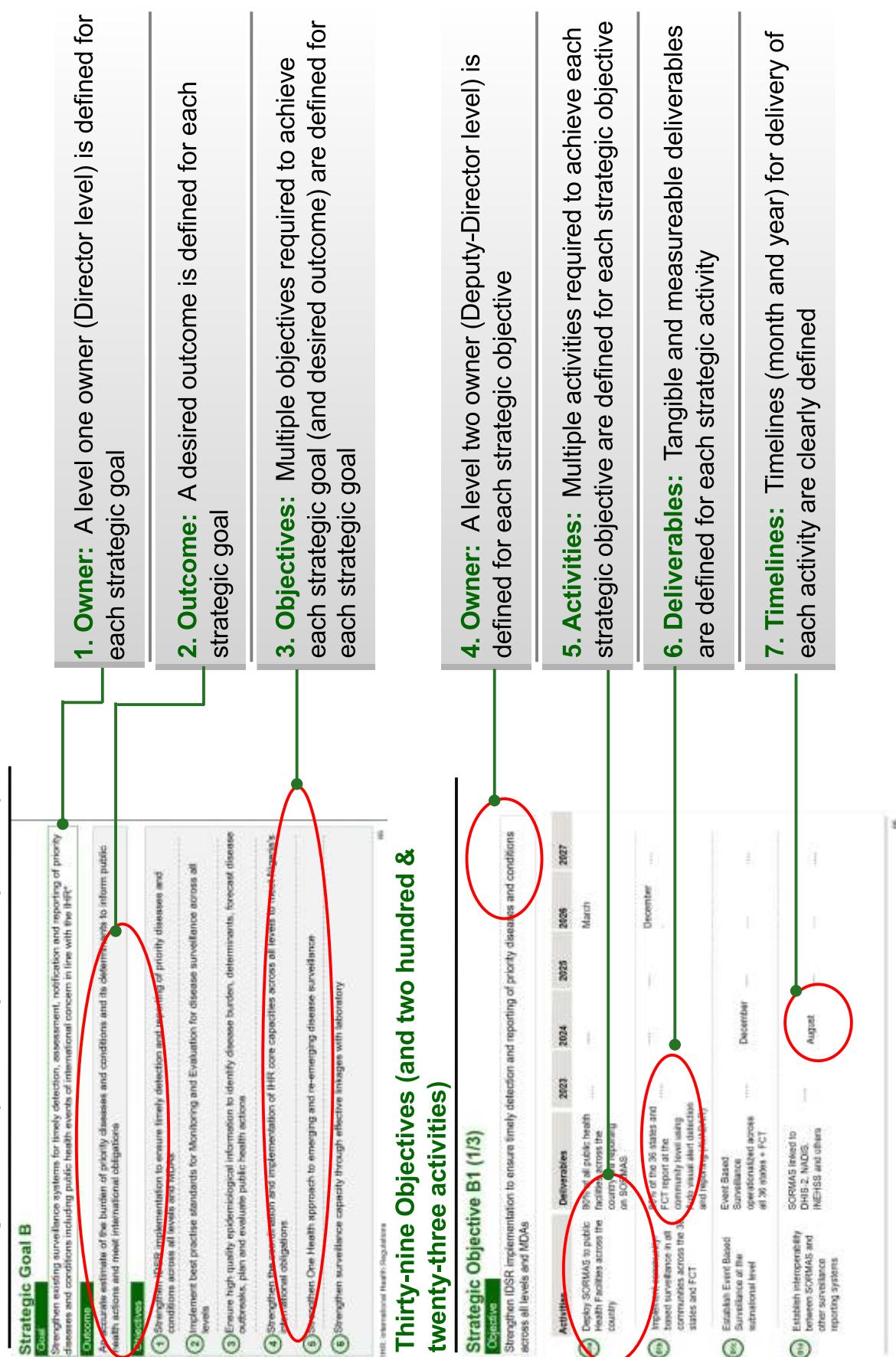
## The vision & mission cascades down to the strategic framework and implementation plan activities



The NCDC vision is broken down into a short-term **mission statement**. This translates into the six **strategic goals** for the strategy horizon (2023 to 2027). Each strategic goal is matched to an **outcome** and is broken into **objectives**. Each objective is further split into **key activities**. An **owner** is assigned to each activity, with **deliverables** and **time frames** for completing the activity, phased and defined in line with the strategy horizon.

# For the 6 strategic goals, we defined objectives, and activities, including deliverables, timelines and owners

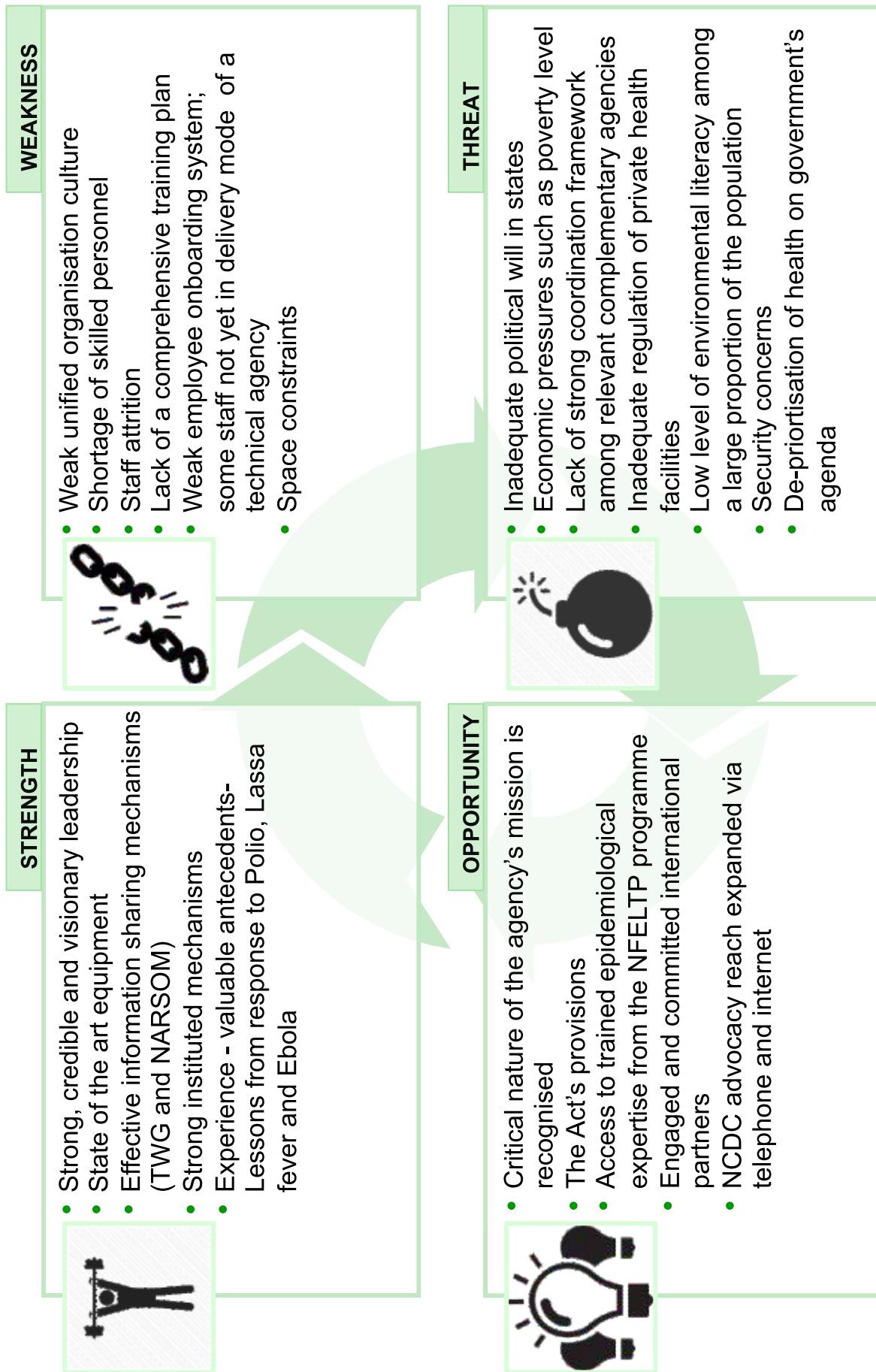
## Six Strategic Goals (and thirty-nine objectives)



# **Situation Analysis: SWOT and PESTEL Analysis**

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## SWOT Analysis





# PESTEL Analysis



## PESTEL Analysis: Political Factors

- WHO health systems ranking place Nigeria as 163 of 191 member states in the world. The Nigerian health system has improved overtime from the last 5 years, however it is still underperforming  
The healthcare system is **underfunded, inefficient and poorly regulated**. While complex processes exist for health policy development in Nigeria, **implementation of policy is poorly monitored, and accountability remains a challenge**.
- The **private sector is still the primary provider of health services** in Nigeria. Responsible for as much as **62% of the health care facilities** in the country. The sector is **poorly regulated, and its true size is unknown as many facilities are unregistered**. In addition, medical tourism and migration of health professionals continues to present a significant challenge to the health system.
- Government's push to expand primary health care system has the potential to expand capacity but will still not suffice because the system remains **severely under-resourced**.
- Considerable **reliance on international donor funding and NGOs** for the delivery of majority of the public health programme in the country. This suggests that a shift in their priorities away from Nigeria's puts the country at risk
- The **states are not yet taking ownership** of public health issues in their domains
- Potential misalignment of priorities between executive and legislative arms or government

## PESTEL Analysis: Impact of Political Factors

- Without sufficient political will, Nigeria's public health goals and milestones remain threatened. However, **partnerships with statutory and voluntary sector partners as well as international organisations remains essential for NCDC to address disease prevention** priorities in the country and beyond. The agency's advocacy skills also become imperative.
- Engagement with the private sector must be a priority** to support accurate measurement of disease burdens and monitoring the impact of control interventions

## PESTEL Analysis: Economic Factors

- The **health system grossly under-funded; budgetary allocation still under 5%** despite a 2001 pledge of 15% by the heads of governments of the African Union
- Softer than anticipated economic growth is under **-1.92%; Inflation at 22.2%** compared to 15.37% in 2017 and **a growing income inequality** within Nigeria's population which has **about 40% living in poverty**, leading into a **national security challenge boom**
- It is estimated that about **two-third of health expenditure in Nigeria is from private expenditure (largely out of pocket - over 70%)**. This is counter intuitive, given the high rate of poverty
- 1% of consolidated revenue and donor funding appropriated in 2018 – the Basic Health Care Provision Fund (BHCDF)

## PESTEL Analysis: Impact of Economic Factors

- These suggest high susceptibility to common illnesses and low level of resistance in the event of an outbreak, given the strain on already limited financial resources out-of-pocket healthcare expenditure. In addition, many Nigerians are reported to not use the orthodox healthcare facilities (private or public)
- The precarious financial position of the federal government and the reduction in funds from global health partners and donors, means that in order to ensure sustainability and to build the infrastructure and human resource needed to develop a world class centre for disease control, **NCDC should limit its dependence on any one sector for funding by developing a diverse funding base and exploring new sources of income such as the private sector**
- NCDC needs to **ensure that diagnostic capacities for diseases of public health importance are available** to ensure that disease detection (and therefore the opportunity for control) are not inhibited by delays in diagnosis due to cost barriers

## PESTEL Analysis: Social Factors

- **Demography:** By 2050, Nigeria will be the 5th most populous country in the world, with a very young population due to the high fertility rates; turning into demographic liability without deliberate efforts to harness its dividends. Due to low life expectancy, the 64+ age group will not experience significant growth over the next 20 years.
- **Life expectancy:** Life expectancy in Nigeria remains low at 55 years compared to the world average of about 73 years and this is directly correlated to the poor health care system, nutrition, and water availability.
- **Causes of mortality and morbidity:** Nigeria has amongst the highest maternal and infant mortality rates worldwide and progress towards the SDGs for good health and well-being (SDG3) remain stagnant indicating limited progress. The major contributors to infant mortality are birth trauma and infectious diseases, many of which are avoidable by public health interventions. Nigeria has achieved considerable progress in reducing the rate of morbidity and mortality of historically leading causes of death like diarrheal diseases, malaria, and lower respiratory infections. However, the burden of communicable diseases remain high, including recurrent outbreaks of cholera, meningitis, Lassa fever, and monkey pox. In 2015, noncommunicable diseases, particularly cardiovascular diseases, surpassed communicable diseases, as well as maternal, neonatal, and nutritional diseases, becoming the leading cause of mortality in Nigeria.
- However, data related to non-communicable diseases in Nigeria is unreliable as diagnostic capacity is poor and causes of death under-reported. The true burden of non-communicable diseases is probably higher than current data suggests. In addition, deaths due to accidental poisoning and exposure to environmental hazards are hardly recorded or measured.
- **Access to health care:** In rural areas, distance from health facilities presents a challenge for accessing health care and thus, health facility-based surveillance will remain an underestimation of the true burden of disease. The high proportional cost of health care also reduces access to health care by the population; less than 5% of the population are under any form of health insurance coverage.
- **Urbanisation:** Nigeria is rapidly becoming a more urban nation, with an urban population of 51.2%.
- **Education and literacy:** Basic education system is overburdened by strong population growth; Illiteracy rates remain significantly high, particularly in the rural areas, amongst girls and in some geographical regions.
- **Security:** Ongoing security challenges across different regions of the country presents a challenge to health intervention and surveillance.
- Religious and cultural beliefs around public health remain limiting.

## PESTEL Analysis: Impact of Social Factors

- NCDC needs to **develop surveillance and response systems that can address the current burden of infectious diseases but are adaptable to monitor and respond to the evolving epidemiological transition.**
- **Innovative systems** will be required to deliver public health messages to **non-literate citizens** and to access populations that are **remote from health facilities** or where **security challenges limit access**.

## PESTEL Analysis: Technological Factors

- Nigeria is the **largest telecommunication market in Africa** - and has one of the fastest growing telecommunications industries in the world
- ICT sector is the third largest contributor to the country's GDP and second fastest growing sector
- Nigeria has an estimated **122 million internet users, about 193.9 million mobile subscribers and about 33% broadband penetration rate (NCC)**
- Infrastructure, including **electricity supply, roads, portable water**, remains a challenge in Nigeria, **restricting opportunities for economic development and directly impacting on health**
- Digital literacy on the rise, however, concentrated only in selected cities

## PESTEL Analysis: Impact of Technological Factors

- The extensive and expanding access to mobile technology and the internet **presents an opportunity for NCDC to further advocate around disease surveillance and to detect and respond to outbreaks of communicable diseases and environmental disasters**
- NCDC's **communication strategy** needs to consider the use of **mobile technology for public health messages** and include **non-text based approaches** to reach the population they serve
- **Infrastructure limitations** present a challenge for disease prevention and emergency response and needs to be **factored into an evolving emergency preparedness and response plans** at all tiers of health response

## PESTEL Analysis: Environmental Factors

**Climate change:** Environmental consequences of climate change, such as extreme heat waves, changes in precipitation resulting in flooding and droughts, and degraded air quality, directly and indirectly affect the health of humans. Climate change may affect currently stable ecosystems such as the Sahel Savanna. The Sahel Savanna may become vulnerable because warming will reinforce existing patterns of water scarcity and increasing the risk of drought in Nigeria.

**Water Availability:** Reduced water volume in streams and rivers, arising from different scales of water diversion for rudimentary irrigation activities, siltation of stream beds due to deposition of materials by water run-off, as well as evapotranspiration. Drying up of water sources due to increased evapotranspiration, and loss of vegetation in head waters. Deficiencies in freshwater availability will worsen the already poor sanitary and health conditions in these areas. In addition, uncontrolled disposal of wastewater and human wastes will result in a deterioration in water quality leading to high organic levels in surface and ground water thereby increasing epidemics of water-borne diseases such as cholera, hepatitis and typhoid.

**Energy security and environmental contamination:** Oil spills are common in Nigeria, causing environmental degradation and loss of ecosystems in the oil rich regions.

**Vector Borne and Zoonotic diseases:** As temperatures increase, vectors density may increase and spread into new areas leading to increases in diseases such as Malaria. Environmental degradation leading to disruption and movement of human populations can expand distribution of pathogens and increase exposure routes.

**The Sendai Framework for Disaster Risk Reduction:** The Sendai Framework for Disaster Risk Reduction 2015–2030 was adopted at the 3rd UN World Conference on Disaster Risk Reduction in 2015 and articulates the need for:

- Improved understanding of disaster risk;
- Strengthening disaster risk governance;
- Preparedness to “Build Back Better”;
- Recognition of stakeholders and their roles;
- Mobilisation of risk-sensitive investment to avoid the creation of new risk;
- Resilience of health infrastructure, cultural heritage and work-places;
- Strengthening of international cooperation and global partnership, and risk-informed donor policies and programs.

The framework aims to achieve a substantial reduction of disaster risk and losses in lives, livelihoods and health and in the economic, physical, social, cultural and environmental assets of persons, businesses, communities and countries.

## PESTEL Analysis: Impact of Environmental Factors

- Strategies for **mitigating and adapting to climate change** can **prevent illness and death in people now**, while also **protecting the environment and health of future generations**.
- NCDC will have a role in **developing and implementing systems to reduce exposure to environmental hazards and limit susceptibility** in exposed populations. **NCDC surveillance systems will need to be adaptable** to respond to new, emerging or re-emerging diseases resulting from the impact of climate change.
- As the **lead agency for the coordination of the response to health emergencies**, and a key partner in the response to humanitarian disasters, NCDC **has a duty to consider the requirements and recommendations of the Sendai framework** in developing and implementing health policy at national level

## PESTEL Analysis: Legal Factors

- Privately financed and provided **medical care is much larger than the publicly funded sector**, accounting for **50 – 70% of the health infrastructure** and yet, the many different types of private providers are barely recognized in legislation and regulation.

## PESTEL Analysis: Impact of Legal Factors

- The NCDC establishment Act empowers the agency to **develop and enforce the use of protocols, standards and guidelines** for the actualization of its mandate of disease prevention and control. NCDC may be able to leverage this to **develop stronger partnerships across the public and private sectors** to fortify the country's preparedness

# **Strategy Framework**

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# The 2023 to 2027 strategy framework is focused on ‘Technical improvements’ to ensure a successful strengthening of the agency





# **Goal ODG**

## **Office of the Director-General**

## Strategic Goal ODG

### Goal

Optimize coordination infrastructure and support systems to improve the efficiency and effectiveness of health security interventions by NCDC

### Outcome

Improved coordination and support systems that enables NCDC to respond effectively to health security and public health threats

### Objectives

- ① Enhance Health Security coordination encompassing AMR, One Health, NAPHS, GHSS, and IHR, to improve efficiency and effectiveness.
- ② Strengthen the coordination and implementation of IHR core capacities across all levels to meet Nigeria's international obligations
- ③ Oversee the digital transformation and development of cross cutting public health informatics capacity across the NCDC



## Strategic Objective ODG1

### Objective

Optimize coordination infrastructure and support systems to improve the efficiency and effectiveness of health security interventions by NCDC

|    | <b>Activities</b>   | <b>Deliverables</b>                                  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|----|---|--|-------------|-------------|-------------|-------------|-------------|
| 1a | Conduct a review of existing health security coordination within the NCDC   | NCDC Health Security coordination report             | .....       | March       | .....       | .....       | .....       |
| 1b | Develop a standardized NCDC health security coordination framework that clearly defines roles and responsibilities. | NCDC health security coordination framework document | .....       | April       | .....       | .....       | .....       |
| 1c | Institutionalize annual high level health security convening  | Annual national health security summit report        | .....       | September   | .....       | .....       | .....       |
| 1d | Conduct IHR-PVS bridging workshop and develop Roadmap for Health Security   | Annual national health security summit report        | .....       | January     | .....       | .....       | .....       |

## Strategic Objective ODG2

### Objective

Strengthen the coordination and implementation of IHR core capacities across all levels to meet Nigeria's international obligation

|    | <b>Activities</b>   | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|----|---|---|-------------|-------------|-------------|-------------|-------------|
| 2a | Conduct JEE and develop National Action Plan for Health Security  | JEE report<br>National Action Plan for Health Security disseminated (NAPHS)               | December    | .....       | .....       | .....       | .....       |
| 2b | Develop NAPHS governance and implementation structure   | NAPHS governance Terms of Reference   | .....       | March       | .....       | .....       | .....       |
| 2c | Develop a support plan on subnational health security assessment and development of State Action Plan for Health Security (SAPHS) in conjunction with SSD | State JEE report<br>State Action Plan for Health Security developed in all states and FCT | .....       | December    | .....       | .....       | .....       |

## Strategic Objective ODG3 (1/2)

### Objective

Oversee the digital transformation and development of cross cutting public health informatics capacity across the NCDC

|    | <b>Activities</b>  | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|----|--|---|-------------|-------------|-------------|-------------|-------------|
| 3a | Conduct ICT assessment and develop a costed digital transformation strategy                        | ICT Assessment report<br>Digital transformation strategy                                      | December    | .....       | .....       | .....       | .....       |
| 3b | Implement digital transformation (including digital filing and approval system)                    | Digitised filing and approval system NCDC operational procedures (Ops)                        | .....       | December    | .....       | .....       | .....       |
| 3c | Develop a learning management system for NFETP, IPC, ICT, HR, etc                                  | Learning management system courses upload and usage reports                                   | .....       | November    | .....       | .....       | .....       |
| 3d | Conduct an inventory assessment of software and hardware assets and standardise across NCDC        | Software and hardware asset inventory report  | .....       | February    | .....       | .....       | .....       |
| 3e | Standardise data collection and interoperability at national and subnational levels                | SOPs and data collection reports from national and subnational levels                         | .....       | July        | .....       | .....       | .....       |
| 3f | Conduct data management assessment and develop public health informatics capacity development plan | Data management assessment report Costed Public health informatics capacity development plan. | .....       | January     | .....       | .....       | .....       |

## Strategic Objective ODG3 (2/2)

### Objective

Oversee the digital transformation and development of cross cutting public health informatics capacity across the NCDC

|    | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|----|---|--|-------------|-------------|-------------|-------------|-------------|
| 3g | Implement PHI capacity development plan (human capital, training/fellowships equipment, etc)                                      | Creation of dedicated PHI unit 80% PHI plan implementation target achieved         | .....       | .....       | December    | .....       | .....       |
| 3h | Strengthen workforce capacity for big data analytics, artificial intelligence, math and epidemiological modelling and forecasting | Workforce capacity training reports Disease modelling dashboards and response data | .....       | .....       | April       | .....       | .....       |
| 3i | Conduct an inventory assessment of software and hardware assets and standardise across NCDC                                       | Software and hardware asset inventory report                                       | .....       | February    | .....       | .....       | .....       |

## Strategic Objective A8

| Objective                               |
|---|
| Secure and harmonise ICT infrastructure |

|    | Activities   | Deliverables   | 2023  | 2024     | 2025  | 2026  | 2027  |
|----|--|--|-------|----------|-------|-------|-------|
| 3j | Migrate critical systems and data to secure cloud services with robust back ups                            | Evidence of systems and data in secure cloud service | ..... | November | ..... | ..... | ..... |
| 3k | Establish and enforce cybersecurity policies, conduct regular security audits                              | Cybersecurity policies and audit reports             | ..... | July     | ..... | ..... | ..... |
| 3l | Provide cybersecurity workforce training to ensure data protection and compliance with privacy regulations | Cybersecurity workforce training reports             | ..... | March    | ..... | ..... | ..... |
| 3m | Ensure harmonisation/interoperability between software across NCDC   | Software harmonisation report                        | ..... | .....    | March | ..... | ..... |

## **Goal A**

### **Administration & Human Resources**

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## Strategic Goal A

### Goal

Strengthen the infrastructure and supporting systems at the NCDC to ensure an enabling environment is in place to meet its mandate

### Outcome

A robust working environment with effective and efficient systems driven by a coordinated and motivated workforce

### Objectives

- ① Strengthen existing administrative systems, policies and structures
- ② Ensure an improved workforce capacity to enable the NCDC meets its mandate



## Strategic Objective A1 (1/2)

| Objective   |  |   |       |          |       |          |       |
|---|--|---|-------|----------|-------|----------|-------|
| Strengthen existing administrative systems, policies and structures |  |   |       |          |       |          |       |
|   | Activities   | Deliverables  | 2023  | 2024     | 2025  | 2026     | 2027  |
| A1a   | Develop and implement digitisation of administrative procedures in alignment with Head of Service requirements           | Digitised system requirements implementation document and key performance metric reports or dashboard | ..... | March    | ..... | .....    | ..... |
| A1b   | Develop and operationalise administrative policies on staff management for effective and efficient running of the agency | Online NCDC administrative manual<br>Annual policy implementation and compliance report               | ..... | .....    | ..... | June     | ..... |
| A1c   | Improve facility management system across all the campuses   | NCDC facility assessment report   | ..... | .....    | ..... | December | ..... |
| A1d   | Develop and implement a Human Resources transformation plan  | Human Resource assessment report and operational plan   | ..... | March    | ..... | .....    | ..... |
| A1e   | Fleet Assessment and Optimisation  | Efficiently working fleet management system & SOPs  | ..... | March    | ..... | .....    | ..... |
| A1f   | Driver Health and Safety Curriculum Development  | Developed and operationalised health and safety curriculum  | ..... | December | ..... | .....    | ..... |

## Strategic Objective A1 (2/2)

| Objective   |
|---|
| Strengthen existing administrative systems, policies and structures |

|     | Activities   | Deliverables  | 2023  | 2024     | 2025  | 2026  | 2027  |
|-----|--|---|-------|----------|-------|-------|-------|
| A1g | Renovate office spaces and convenience rooms   | Upgraded workspaces and convenience rooms<br>Renovation reports | ..... | December | ..... | ..... | ..... |
| A1h | Furniture upgrade and replacement (desks, chairs, filing systems, storage cabinets, shelves, cubicles) | Upgraded furniture inventory and maintenance logs               | ..... | December | ..... | ..... | ..... |

## Strategic Objective A2

### Objective

Ensure an improved workforce capacity to enable the NCDC meets its mandate

|       | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|---|--|-------------|-------------|-------------|-------------|-------------|
| (A2a) | Design and implement a professional and public service development programmes for the NCDC workforce in collaboration with the Department of Planning, Research and Statistics (DPRS) | Public service development programme training module and implementation plan | .....       | June        | .....       | .....       | .....       |
| (A2b) | Develop and implement the NCDC behavioural competency management framework  | NCDC behavioural implementation plan   | .....       | April       | .....       | .....       | .....       |
| (A2c) | Develop and implement an NCDC Performance Management Framework that is aligned with civil service standards.  | NCDC performance management framework  | .....       | April       | .....       | .....       | .....       |
| (A2d) | Deploy performance management system software and integrate into NCDC's existing systems  | Periodic NCDC performance management system report                           | .....       | April       | .....       | .....       | .....       |

# **Goal A**

## **Special Duties**

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## Strategic Goal A - Special Duties

### Goal

Strengthen the infrastructure and supporting systems at the NCDC to ensure an enabling environment is in place to meet its mandate

### Outcome

A robust working environment with effective and efficient systems driven by a coordinated and motivated workforce

### Objectives

- (3) Strengthen coordination structures & mechanisms for effective partnership engagement for NCDC
- (4) Establish a funding model to support the NCDC mandate
- (5) Strengthen project management system and capacity for all NCDC programs to demonstrate impact and value



## Strategic Objective A3 (1/2)

| <b>Objective</b>  |  |  |   |             |             |             |             |             |
|---|--|--|---|-------------|-------------|-------------|-------------|-------------|
| Strengthen coordination structures & mechanisms for effective partnership engagement for NCDC |  |  |   |             |             |             |             |             |
|   |  | <b>Activities</b>  | <b>Deliverables</b>                             | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
| A3a   |  | Assessment of the current partnership engagement practices to identify areas of improvement  | Partnerships engagement assessment report       | December    | .....       | .....       | .....       | .....       |
| A3b   |  | Develop a partnership strategy and SOP that outlines the agency's priorities for engagement and sets goals for partnership development | Partnership strategic plan and SOPs             | .....       | February    | .....       | .....       | .....       |
| A3c   |  | Establish coordination structures and develop tools to standardise the process for partnership management                              | Partnerships tools and policies                 | .....       | June        | .....       | .....       | .....       |
| A3d   |  | Implement partnership engagement strategy  | Quarterly engagement reports                    | .....       | March       | .....       | .....       | .....       |
| A3e   |  | Develop capacity-building initiatives to enhance staff skills in partnership development and management.                               | Training report and participant feedback survey | .....       | February    | .....       | .....       | .....       |

## Strategic Objective A3 (2/2)

| <b>Objective</b>  |   |                                     |             |             |             |             |             |
|---|---|-------------------------------------|-------------|-------------|-------------|-------------|-------------|
| Strengthen coordination structures & mechanisms for effective partnership engagement for NCDC |   |                                     |             |             |             |             |             |
|   | <b>Activities</b>   | <b>Deliverables</b>                 | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
| (A3f)   | Develop a monitoring and evaluation framework to track progress against partnership engagement goals                                      | Monitoring and Evaluation framework | .....       | December    | .....       | .....       | .....       |
| (A3g)   | Develop a communication strategy to share the successes and impact of partnership engagement initiatives with stakeholders and the public | Communication strategic plan        | .....       | .....       | March       | .....       | .....       |

## Strategic Objective A4 (1/2)

| Objective   |  |  |          |        |         |         |       |
|---|--|--|----------|--------|---------|---------|-------|
| Establish a funding model to support the NCDC mandate |  |  |          |        |         |         |       |
|   | Activities   | Deliverables   | 2023     | 2024   | 2025    | 2026    | 2027  |
| A4a   | Develop NCDC funding model   | Funding model structure  | .....    | March  | .....   | .....   | ..... |
| A4b   | Develop a comprehensive NCDC resource mobilisation strategy  | Resource mobilisation strategic plan                                   | December | .....  | .....   | .....   | ..... |
| A4c   | Operationalise resource mobilisation strategy  | Resource mobilisation implementation report                            | .....    | August | .....   | .....   | ..... |
| A4d   | Lead the development of a sustainability plan for NCDC activities to ensure continuous funding support | NCDC funding sustainability plan                                       | .....    | .....  | .....   | January | ..... |
| A4e   | Develop private sector engagement plan and structure   | Private sector engagement implementation plan                          | .....    | .....  | January | .....   | ..... |
| A4f   | Institute a funding model for NCDC   | Funding framework developed  | .....    | March  | .....   | .....   | ..... |
| A4g   | Develop a National Health Security Fund Endowment Plan and structure                                   | National Health Security Fund Endowment Plan developed and implemented | .....    | .....  | January | .....   | ..... |

## Strategic Objective A4 (2/2)

| Objective   |  |   |       |       |       |       |       |
|---|--|---|-------|-------|-------|-------|-------|
| Establish a funding model to support the NCDC mandate |  |   |       |       |       |       |       |
|   | Activities   | Deliverables  | 2023  | 2024  | 2025  | 2026  | 2027  |
| A4h   | Host a high-level fundraising event with private sector stakeholders to raise at least 20 billion naira for national health security | Fundraising event held, with funds raised, and fundraising report developed | ..... | ..... | June  | ..... | ..... |
| A4i   | Develop policies for joint programs with private sector partners and CSOs on epidemic preparedness and response                      | Policies developed, and program impact report                               | ..... | ..... | March | ..... | ..... |
| A4j   | Operationalisation of the NCDC BHCDF gateway guidelines by PIU   | Quarterly Monitoring and Evaluation Report                                  | ..... | June  | ..... | ..... | ..... |
| A4k   | Monitor and evaluate the implementation of the NCDC BHCDF gateway  | Quarterly Monitoring and Evaluation Report                                  | ..... | June  | ..... | ..... | ..... |

## Strategic Objective A5

### Objective

Strengthen project management capacity for all NCDC programs to demonstrate impact and value

|            | <b>Activities</b>  | <b>Deliverables</b>                                     | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|------------|--|---|-------------|-------------|-------------|-------------|-------------|
| <b>A5a</b> | Review of existing projects within the NCDC  | NCDC projects review report developed and disseminated  | .....       | March       | .....       | .....       | .....       |
| <b>A5b</b> | Develop a project management framework   | Project management framework developed and disseminated | .....       | December    | .....       | .....       | .....       |
| <b>A5c</b> | Design a project management training programme for NCDC staff on effective project management practices  | Project management training manual                      | .....       | .....       | February    | .....       |             |
| <b>A5d</b> | Develop a M&E framework to track progress against project management goals and demonstrate the impact of improved project management practices | PMO M&E report  | .....       | June        | .....       | .....       | .....       |

## **Goal A**

### **Audit**

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## Strategic Goal A – Audit

### Goal

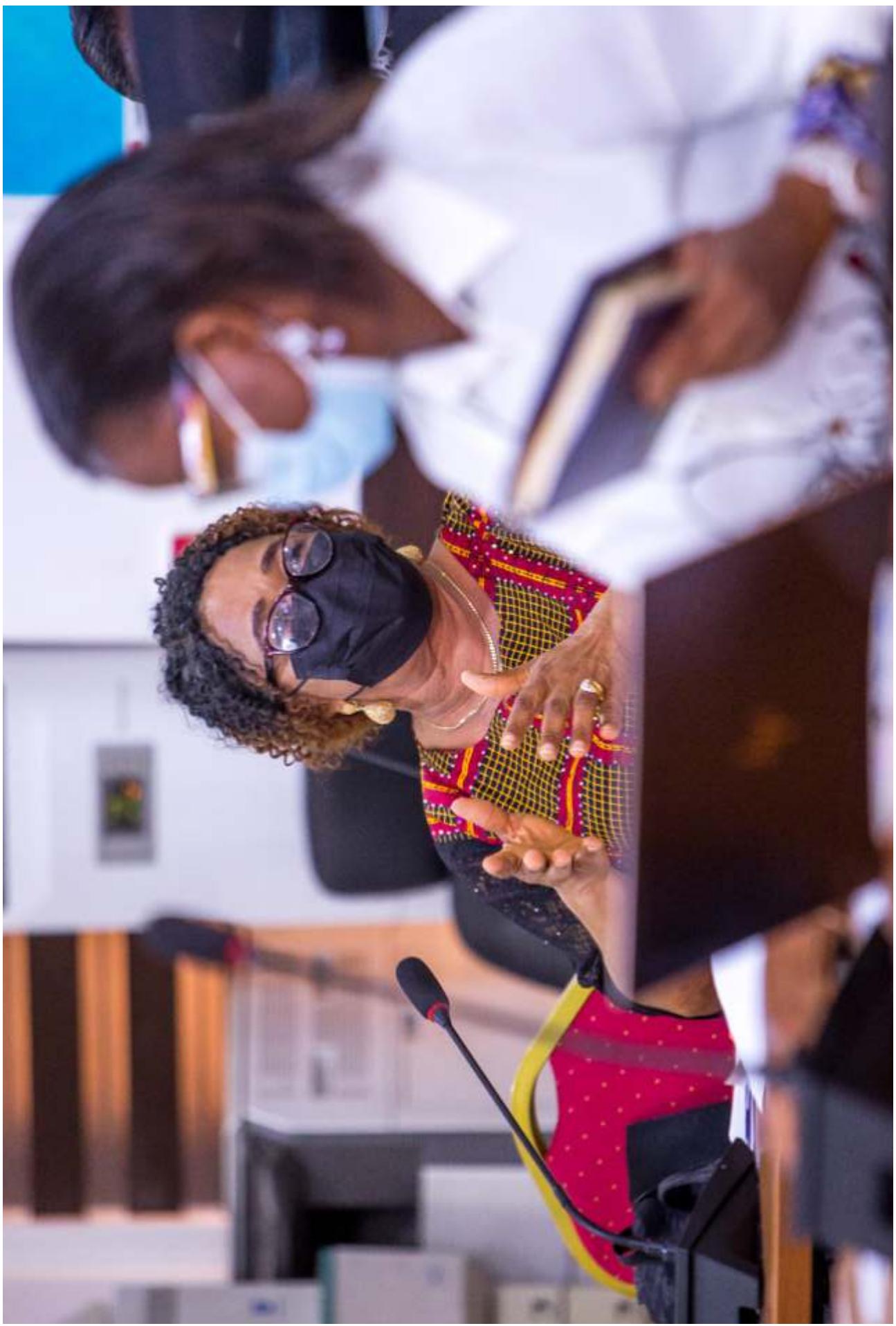
Strengthen the infrastructure and supporting systems at the NCDC to ensure an enabling environment is in place to meet its mandate

### Outcome

A robust working environment with effective and efficient systems driven by a coordinated and motivated workforce

### Objectives

- ⑥ Strengthen the NCDC Audit processes in line with global best practices



## Strategic Objective A6 (1/2)

| Objective  |  |   |          |          |       |       |       |
|--|--|---|----------|----------|-------|-------|-------|
| Strengthen the NCDC Audit processes in line with global best practices |  |   |          |          |       |       |       |
|  | Activities   | Deliverables  | 2023     | 2024     | 2025  | 2026  | 2027  |
| A6a  | Establish audit policies and SOPs that offer clear guidance, promote compliance, and align with global standards | NCDC Audit policies developed                                 | October  | .....    | ..... | ..... | ..... |
| A6b  | Disseminate Audit policies and SOPs to all relevant staff and department of the NCDC                             | Policies and SOPs implemented across the NCDC                 | November | .....    | ..... | ..... | ..... |
| A6c  | Assess the current audit process in line with the implemented policies and SOPs                                  | Assessment report development                                 | .....    | February | ..... | ..... | ..... |
| A6d  | Develop a process improvement plan to close identified gaps from the Audit process assessment                    | Improvement plan developed<br>Improvement plan implemented    | May      | March    | ..... | ..... | ..... |
| A6e  | Enhance auditing capacity using audit software within NCDC   | NCDC audit software integration tools and implementation plan | .....    | February | ..... | ..... | ..... |

## Strategic Objective A6 (2/2)

| Objective | Strengthen the NCDC Audit processes in line with global best practices                                |  |       |          |       |       |       |
|-----------|---|--|-------|----------|-------|-------|-------|
|           | Activities  | Deliverables   | 2023  | 2024     | 2025  | 2026  | 2027  |
| A6f       | Develop a monitoring and evaluation framework to evaluate audit processes within NCDC operations      | NCDC Audit M&E report  | ..... | November | ..... | ..... | ..... |
| A6g       | Design and implement a framework for whistle blowing  | NCDC Whistle blowing framework implementation plan                               | ..... | .....    | July  | ..... | ..... |
| A6h       | Develop a sustainability plan to ensure contract performance and delivery within efficiency threshold | Sustainability plan in place with issuance of internal audit certificate piloted | ..... | .....    | March | ..... | ..... |

## **Goal A**

### **Legal**

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## Strategic Goal A – Legal

### Goal

Strengthen the infrastructure and supporting systems at the NCDC to ensure an enabling environment is in place to meet its mandate

### Outcome

A robust working environment with effective and efficient systems driven by a coordinated and motivated workforce

### Objectives

- ⑦ NCDC has improved legal structure to support implementation of public health policies with national interest and global best practices

## Strategic Objective A7 (1/2)

| <b>Objective</b>   |   |  |             |             |             |             |             |
|--|---|--|-------------|-------------|-------------|-------------|-------------|
| NCDC has improved legal structure to support implementation of public health policies with national interest and global best practices |   |  |             |             |             |             |             |
|  | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
| (A7a)  | Conduct legal surveillance study of relevant health laws and policies   | Legal surveillance report                                  | December    | .....       | .....       | .....       | .....       |
| (A7b)  | Identify legal documents that require being repealed, modified or explicit transfer of functions and resources within the public health space | Reports on documents requiring repeal or explicit transfer | .....       | May         | .....       | .....       | .....       |
| (A7c)  | Review the NCDC Act to identify gaps in implementation of its mandate and compliance to IHR   | Amendment of the NCDC Act                                  | December    | .....       | .....       | .....       | .....       |
| (A7d)  | Develop capability building programme for public health legal workforce at the national and subnational level                                 | Capability building programme implementation plan          | .....       | .....       | March       | .....       | .....       |
| (A7e)  | Develop SOPs to guide policy and legal processes at the national and subnational levels   | Legal mapping report                                       | .....       | March       | .....       | .....       | .....       |

## Strategic Objective A7 (2/2)

| Objective | NCDC has improved legal structure to support implementation of public health policies with national interest and global best practices |
|-----------|--|
|-----------|--|

|     | Activities   | Deliverables   | 2023  | 2024  | 2025  | 2026  | 2027  |
|-----|--|--|-------|-------|-------|-------|-------|
| A7f | Lead the development of data protection policies to support the improvement of the NCDC data management architecture (in collaboration with Public Health Informatics) | NCDC data protection policy for PHI to implement   | ..... | April | ..... | ..... | ..... |
| A7g | Conduct a compliance review to validate NCDC's adherence to regulations on data protection, cyber security, and freedom of information.                                | NCDC legal compliance report (on all relevant laws on freedom of information, data protection, and cyber security) | ..... | April | ..... | ..... | ..... |

# **Goal A**

## **Procurement**

## Strategic Goal A – Procurement

### Goal

Strengthen the infrastructure and supporting systems at the NCDC to ensure an enabling environment is in place to meet its mandate

### Outcome

A robust working environment with effective and efficient systems driven by a coordinated and motivated workforce

### Objectives

- ⑧ Improve NCDC procurement processes through the adaptation of technology and policies
- ⑨ Enhance capacity of procurement unit to effectively support the NCDC programmes department in meeting up with their mandates



## Strategic Objective A8

### Objective

Improve NCDC procurement processes through the adaptation of technology and policies

|     | <b>Activities</b>  | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|--|--|-------------|-------------|-------------|-------------|-------------|
| A8a | Develop the NCDC procurement policy and SOP aligned to Procurement Act to guide the NCDC procurement process         | Policies and SOPs disseminated to all staff of the NCDC and suppliers in the procurement network | .....       | May         | .....       | .....       | .....       |
| A8b | Develop and adopt a robust procurement information management system to measure procurement and supplier performance | Annual procurement management report   | .....       | November    | .....       | .....       | .....       |
| A8c | Develop weighted impact and probability procurement risk assessment methodology                                      | Procurement risk register  | .....       | .....       | March       | .....       | .....       |

## Strategic Objective A9

### Objective

Enhance capacity of procurement unit to effectively support the NCDC programmes department in meeting up with their mandates

|            | <b>Activities</b>  | <b>Deliverables</b>                                    | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|------------|--|--|-------------|-------------|-------------|-------------|-------------|
| <b>A9a</b> | Conduct high level analysis of procurement competencies and skills profiles required at different levels of procurement engagement | Procurement engagement and processes assessment report | .....       | March       | .....       | .....       | .....       |
| <b>A9b</b> | Conduct skills gaps assessment for existing procurement officers   | Gaps assessment report                                 | .....       | May         | .....       | .....       | .....       |
| <b>A9c</b> | Develop a capacity building plan to close identified skills gaps of procurement officers   | Capacity building plan                                 | .....       | November    | .....       | .....       | .....       |

# **Goal A**

## **Finance & Accounts**

## Strategic Goal A – Finance & Accounts

### Goal

Strengthen the infrastructure and supporting systems at the NCDC to ensure an enabling environment is in place to meet its mandate

### Outcome

A robust working environment with effective and efficient systems driven by a coordinated and motivated workforce

### Objectives

- (10) Enhance compliance and ensure consistency in finance processes to efficiently serve all stakeholders
- (11) Improve the finance and account systems and effectively utilise technology to optimise processes



## Strategic Objective A10

### Objective

Enhance compliance and ensure consistency in finance processes to efficiently serve all stakeholders.

|      | <b>Activities</b>  | <b>Deliverables</b>                                | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|------|--|--|-------------|-------------|-------------|-------------|-------------|
| A10a | Develop and disseminate financial policies and SOPs in line with government regulations to provide guidance, ensure compliance and alignment with public service rules | NCDC financial policies developed and disseminated | .....       | May         | .....       | .....       | .....       |
| A10b | Conduct a finance and accounts capacity gap assessment   | Gap assessment report                              | .....       | February    | .....       | .....       | .....       |
| A10c | Develop and implement improvement plan to close identified gaps from the financial system  | Improvement implementation plan                    | .....       | July        | .....       | .....       | .....       |

## Strategic Objective A11

### Objective

Improve the finance and account systems and effectively utilise technology to optimise processes

|      | <b>Activities</b>   | <b>Deliverables</b>                            | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|------|---|--|-------------|-------------|-------------|-------------|-------------|
| A11a | Automate standardised accounting processes within the NCDC and build capacity for utilisation   | SOPs and staff training report                 | .....       | April       | .....       | .....       | .....       |
| A11b | Support the development of an electronic archiving system for all finance and accounts documentation, in line with NCDC digital transformation plan | Financial electronic archiving system in place | .....       | April       | .....       | .....       | .....       |

## **Goal A**

# **Corporate Communications**

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## Strategic Goal A – Corporate Communications

### Goal

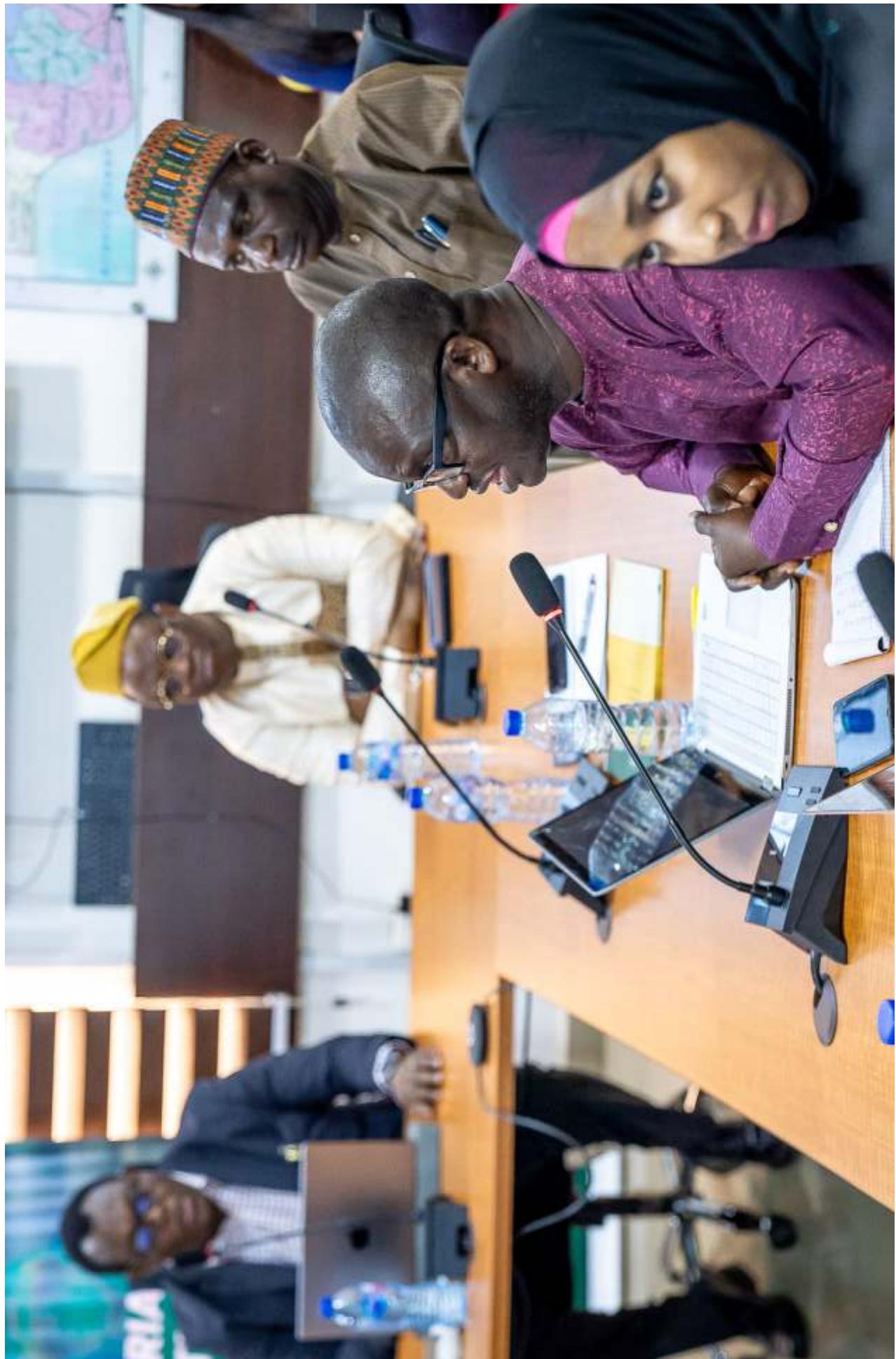
Strengthen the infrastructure and supporting systems at the NCDC to ensure an enabling environment is in place to meet its mandate

### Outcome

A robust working environment with effective and efficient systems driven by a coordinated and motivated workforce

### Objectives

- (12) NCDC has improved process for communication.
- (13) Ensure a consistent brand identity for NCDC that promotes trust and enhances its visibility among stakeholders and target audience.



## Strategic Objective A12

### Objective

NCDC has improved process for communication.

|      | <b>Activities</b>  | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|------|--|---|-------------|-------------|-------------|-------------|-------------|
| A12a | Develop and implement NCDC communications policy (internal and external)           | Communications policy published on website and disseminated to all staff and partners | September   | .....       | .....       | .....       | .....       |
| A12b | Develop and maintain framework for stakeholders' communication                     | Stakeholders' communication framework   | .....       | January     | .....       | .....       | .....       |
| A12c | Leverage APHIDS to automate internal communication processes                       | Internal communications implementation report   | .....       | November    | .....       | .....       | .....       |
| A12d | Develop a monitoring and evaluation framework for the use of communications policy | Policy utilization M&E report   | .....       | .....       | January     | .....       | .....       |
| A12d | Conduct capacity gap assessment for NCDC communication process                     | Communications gap assessment report  | .....       | March       | January     | .....       | .....       |
| A12d | Develop action plan and implement recommendations to address identified gaps       | Communications process optimisation action plan                                       | .....       | December    | .....       | .....       | .....       |

## Strategic Objective A13

| <b>Objective</b>  |   |   |             |             |             |             |             |
|---|---|---|-------------|-------------|-------------|-------------|-------------|
| Ensure a consistent brand identity for NCDC that promotes trust and enhances its visibility among stakeholders and target audience. |   |   |             |             |             |             |             |
|   | <b>Activities</b>   | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
| A13a  | Develop and implement protocol for alignment of all communications and actions with NCDC core values and vision         | Communications policy published on website and disseminated to all staff and partners   | .....       | January     | .....       | .....       | .....       |
| A13b  | Establish a unique branding path for all NCDC operations to enhance NCDC image among the public                         | NCDC branding catalogue   | .....       | January     | .....       | .....       | .....       |
| A13c  | Develop and implement brand guidelines for all products and materials from NCDC   | NCDC brand guideline implementation report  | .....       | June        | .....       | .....       | .....       |
| A13d  | Create an online repository for all NCDC resources including guidelines, SBC materials and NCDC communication templates | Tab on NCDC website leading to the NCDC communication materials                         | .....       | .....       | January     | .....       | .....       |
| A13e  | Develop and implement guideline for organisation's event planning and management  | Guideline for event planning and management incorporated into the communications policy | .....       | January     | .....       | .....       | .....       |

## **Goal B**

### **Surveillance & Epidemiology**

## Strategic Goal B

### Goal

Strengthen existing surveillance systems for timely detection, assessment, notification and reporting of priority diseases and conditions including public health events of international concern in line with the IHR

### Outcome

An accurate estimate of the burden of priority diseases and conditions and its determinants to inform public health actions and meet international obligations

### Objectives

- ① Strengthen IDSR implementation to ensure timely detection and reporting of priority diseases and conditions across all levels and MDAs
- ② Implement best practice standards for Monitoring and Evaluation for disease surveillance across all levels
- ③ Ensure high quality epidemiological information to identify disease burden, determinants, forecast disease outbreaks, plan and evaluate public health actions
- ④ Strengthen One Health approach to emerging and re-emerging disease surveillance
- ⑤ Strengthen surveillance capacity through effective linkages with laboratory in collaboration with Public Health Laboratories



## Strategic Objective B1 (1/2)

| <b>Objective</b> |  |  |  |             |             |             |             |             |
|------------------|--|--|--|-------------|-------------|-------------|-------------|-------------|
|                  |  | <b>Activities</b>  | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
| <b>B1a</b>       |  | Deploy SORMAS to all qualifying Health Facilities across the country                   | Database & report on 80% of all qualifying public health facilities across the country reporting on SORMAS                   | .....       | .....       | .....       | March       | .....       |
| <b>B1b</b>       |  | Implement community based surveillance in all communities across the 36 states and FCT | Report on 80% of the 36 states and FCT reporting at community level using Auto Visual Alert Detection and Reporting (AVADAR) | .....       | .....       | .....       | December    | .....       |
| <b>B1c</b>       |  | Establish Event-Based Surveillance at the subnational level                            | Report on Event Based Surveillance operationalized across 36 states & FCT  | .....       | December    | .....       | .....       | .....       |
| <b>B1d</b>       |  | Establish interoperability between SORMAS and other surveillance reporting systems     | IDSR Optimization report (SORMAS linked to DHIS-2, NADIS, INEHSS and others)   | .....       | August      | .....       | .....       | .....       |
| <b>B1e</b>       |  | Review and adapt IDSR policy in line with the IDSR Technical Guidelines 3rd edition    | Reviewed IDSR policy disseminated to all relevant stakeholders across all government levels and MDAs                         | ....        | March       | ....        | ....        | ....        |

## Strategic Objective B1 (2/2)

### Objective

Strengthen IDSR implementation to ensure timely detection and reporting of priority diseases and conditions across national, states, and local government areas and Ministries, Departments, and Agencies (MDAs)

|       | <b>Activities</b>  | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|--|---|-------------|-------------|-------------|-------------|-------------|
| (B1f) | Deploy SORMAS to qualified private Health Facilities across the country  | Database of qualified private health facilities across the country reporting via IDSR                 | .....       | .....       | December    | .....       | .....       |
| (B1g) | IDSR integration into a One Health preservice training modules in collaboration with all relevant professional and regulatory institutions | IDSR and one health modules included in curriculum of identified regulatory/professional institutions | .....       | September   | .....       | .....       | .....       |
| (B1h) | Conduct surveillance capacity gaps assessment all levels   | Capacity assessment report  | .....       | June        | .....       | .....       | .....       |
| (B1i) | Develop a surveillance capacity building programme (online / physical) to close identified gaps, especially at the subnational level       | Training module Surveillance Capacity Building report   | .....       | .....       | June        | .....       | .....       |

## Strategic Objective B2

| Objective  |
|--|
| Implement best practice standards for Monitoring and Evaluation for disease surveillance across all levels |

|       | Activities  | Deliverables  | 2023  | 2024  | 2025  | 2026  | 2027  |
|-------|---|---|-------|-------|-------|-------|-------|
| (B2a) | Develop and pilot M&E framework for all surveillance training across all levels for data quality audit across all government levels | M&E framework for training programmes deployed across all levels<br>Data quality audit report | ..... | March | ..... | ..... | ..... |
| (B2b) | Institute a monitoring and evaluation framework to monitor implementation of the reviewed IDSR policy in the public health sector   | IDSR implementation plan disseminated to relevant stakeholders<br>Implementation report       | ..... | ..... | March | ..... | ..... |

## Strategic Objective B3

### Objective

Develop and implement systems to provide high quality epidemiological information to identify disease burden, determinants, forecast disease outbreaks, plan and evaluate public health actions

|       | <b>Activities</b>   | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|---|---|-------------|-------------|-------------|-------------|-------------|
| (B3a) | Develop a Serosurveillance survey guidelines and plan to implement serosurveys of identified priority diseases, events and conditions | Sero-surveillance survey guidelines and implementation plan | .....       | March       | .....       | .....       | .....       |
| (B3b) | Develop a framework for epidemiological research to build research capacity for staff in Surveillance & Epidemiology Dept             | Epidemiological research framework                          | .....       | March       | .....       | .....       | .....       |

## Strategic Objective B4

### Objective

Strengthen One Health approach to emerging and re-emerging disease surveillance

|     | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|---|--|-------------|-------------|-------------|-------------|-------------|
| B4a | Develop EMS for data sharing and risk assessment for zoonotic disease surveillance                | Report on 50% of priority zoonotic diseases reported by FMAFS, FMEnv, and NCDC | .....       | .....       | .....       | June        | .....       |
| B4b | Provide technical support to the ODG for development of the One Health Strategic Plan (2024-2028) | One Health Strategic Plan developed and disseminated                           | .....       | January     | .....       | .....       | .....       |

## Strategic Objective B5

### Objective

Strengthen surveillance capacity through effective linkages with laboratory in collaboration with Public Health Laboratories

|       | <b>Activities</b>   | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|---|---|-------------|-------------|-------------|-------------|-------------|
| (B5a) | Establish interoperability between SORMAS and LIMS and network laboratory information platforms                       | LIMS and SORMAS interoperability integration report   | December    | .....       | .....       | .....       | .....       |
| (B5b) | Develop and implement plan applying knowledge of modelling & forecasting gained for decision making                   | Modelling and forecasting implementation report   | .....       | March       | .....       | .....       | .....       |
| (B5c) | Develop protocols for incorporating genomics surveillance data into epidemiological analysis/ outbreak investigation. | Framework and report on Integration of Genomics Surveillance Data into Epidemiological Analysis | .....       | June        | .....       | .....       | .....       |

## **Goal C**

# **Public Health Laboratories**

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## Strategic Goal C

### Goal

Enhance laboratory capacity to detect and support infectious disease surveillance systems and response through detection, prevention, and control

### Outcome

A public health laboratory service and network, effectively supporting the detection, prevention and response to infectious diseases of public health importance in Nigeria and contributing to regional public health capacity

### Objectives

- ① Expand the capacity of the Public Health Laboratories to ensure improved service delivery
- ② Institute a tiered laboratory network structure to ensure expanded diagnostic capacity across the country
- ③ Improve quality management system in NCDC laboratories and its network respectively
- ④ Standardise and decentralise equipment maintenance and calibration in NCDC labs and network
- ⑤ Improve and institute biosafety, biosecurity and specimen management at NCDC labs and network respectively
- ⑥ Establish a National Genomic Centre of Excellence
- ⑦ Strengthen and expand research capacities at NCDC laboratories and its network



## Strategic Objective C1 (1/2)

### Objective

Expand the capacity of the Public Health Laboratories to ensure improved service delivery

|     | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|---|--|-------------|-------------|-------------|-------------|-------------|
| C1a | Construct a modern and fit for purpose Abuja campus of the National Reference Laboratory  | National Reference Laboratory building   | .....       | .....       | .....       | .....       | October     |
| C1b | Engage highly skilled manpower to support research and diagnostics e.g., bioinformaticians, biostatisticians, immunologists etc.            | Database & ToR of skilled personnel engaged and trained across all national and zonal reference laboratories as applicable | .....       | .....       | .....       | December    | .....       |
| C1c | Establish reference laboratory functions for the national HIV, TB, Malaria, and NTDs programs, including chemicals -IHR, toxicology testing | NRL, ZRL activity impact reports   | .....       | .....       | .....       | December    | .....       |
| C1d | Conduct diagnosis of emerging and re-emerging diseases (EIDs)   | EIDs testing report from designated labs in states with PoEs   | .....       | June        | .....       | .....       | .....       |
| C1e | Identify and rollout a suitable LIMS at the NCDC labs and network   | Systems testing report on LIMS across NCDC lab network   | .....       | June        | .....       | .....       | .....       |

## Strategic Objective C1 (2/2)

| <b>Objective</b>  |  |                                     |                     |             |             |             |             |             |
|---|--|-------------------------------------|---------------------|-------------|-------------|-------------|-------------|-------------|
| Expand the capacity of the Public Health Laboratories to ensure improved service delivery |  |                                     |                     |             |             |             |             |             |
|   |  | <b>Activities</b>                   | <b>Deliverables</b> | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
| (C1f)   | Develop and implement action plan to strengthen and scale up AMR surveillance as in national AMR strategy            | AMR surveillance action plan report | June                | .....       | .....       | .....       | .....       | .....       |
| (C1g)   | Establish biosafety level 3 containment laboratory unit in one or both campuses of the national reference laboratory | AMR surveillance action plan report | .....               | .....       | .....       | .....       | January     |             |

## Strategic Objective C2

### Objective

Institute a tiered laboratory network structure to ensure expanded diagnostic capacity across the country

|     | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|---|--|-------------|-------------|-------------|-------------|-------------|
| C2a | Develop a framework for the operationalisation of a tiered laboratory network | An operationalized framework for the institutionalization of tiered lab network                          | October     | .....       | .....       | .....       | .....       |
| C2b | Establish, equip and operationalise a zonal lab in every geopolitical zone    | 6 Zonal Reference Laboratory established in 6 geopolitical zones<br>Inventory and systems testing report | .....       | .....       | .....       | .....       | January     |

## Strategic Objective C3

### Objective

Improve quality management system in NCDC laboratories and its network respectively

|     | <b>Activities</b>  | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|--|---|-------------|-------------|-------------|-------------|-------------|
| C3a | Enrol NCDC NRL, ZRLs, and public health network labs for ISO 15189:2022 accreditation (national and international) | Successful ISO accreditation granted to NCDC laboratories                       | .....       | October     | .....       | .....       | .....       |
| C3b | Develop and operationalise QMS plan for laboratory network   | A QMS plan operationalised across the network SOP & Process Improvement Records | .....       | June        | .....       | .....       | .....       |
| C3c | Enrol NRL for ISO 17043  | NRL accredited base on ISO 17043 as EQA provider                                | .....       | .....       | November    | .....       | .....       |
| C3d | Pilot and enrol Point of Care Testing (POCT) EQA scheme in primary health centres                                  | Database of 20 labs enrolled in the POCT EQA scheme                             | .....       | March       | .....       | .....       | .....       |

## Strategic Objective C4

### Objective

Standardise and decentralise equipment maintenance and calibration in NCDC labs and its network

|     | <b>Activities</b>   | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|---|---|-------------|-------------|-------------|-------------|-------------|
| C4a | Establish BME hub at CPHL & 3 NCDC zonal labs   | BME hub implementation and maintenance report for CPHL & NCDC ZRL                       | .....       | .....       | .....       | .....       | February    |
| C4b | NRL BME trained on Planned Preventive Maintenance (PPM) and calibration of high level and ancillary equipment | PPM training module and report  | .....       | .....       | June        | .....       | .....       |
| C4c | Implement and institutionalise ISO 17025 at the NRL and CPHL equipment hubs                                   | NRL accredited base on ISO 17043 as EQA provider  | .....       | .....       | .....       | June        | .....       |
| C3d | Build capacity of BME for the installation, maintenance and calibration of ultralow freezers                  | NCDC BME trained and certified for ultralow freezers calibration<br>BME training report | .....       | .....       | June        | .....       | .....       |

## Strategic Objective C5

### Objective

Improve and institute biosafety, bio-security and specimen management in the NCDC labs and its networks respectively

|     | <b>Activities</b>   | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|---|---|-------------|-------------|-------------|-------------|-------------|
| C5a | Institutionalise a Bio Risk Management (BRM) system in NCDC labs  | A BRM system report and continuity plan                                       | .....       | January     | .....       | .....       | .....       |
| C5b | Develop and operationalise capacity building plan on biosafety and biosecurity at the NCDC labs and network | Biosafety & biosecurity training report                                       | .....       | .....       | January     | .....       | .....       |
| C5c | Disseminate biosafety and biosecurity guidelines to lab network   | Guidelines disseminated   | .....       | August      | .....       | .....       | .....       |
| C5d | Implement laboratory medical surveillance system in NCDC labs and network                                   | Laboratory medical surveillance system report                                 | .....       | December    | .....       | .....       | .....       |
| C5e | Enrol NCDC labs and network staff for IAT training and certification  | At least 10 laboratory staff trained, and IATA certified IATA training report | .....       | .....       | January     | .....       | .....       |
| C5f | Establish an efficient national sample transport and referral mechanism                                     | Sample transport system framework<br>Sample transport efficiency report       | .....       | June        | .....       | .....       | .....       |

## Strategic Objective C6 (1/2)

### Objective

Establish a National Genomics Centre of Excellence

|     | <b>Activities</b>  | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|--|---|-------------|-------------|-------------|-------------|-------------|
| C6a | Expand surveillance/ pathogen sequencing activities for all priority diseases at NCDC labs | Sequencing activities report for priority diseases at NRL & CPHL                | .....       | December    | .....       | .....       | .....       |
| C6b | Expand multi-pathogen detection using multiplex assays NCDC labs                           | Multi-pathogen detection systems for priority pathogens available               | .....       | .....       | .....       | .....       | December    |
| C6c | Establish high performance computing cluster for bioinformatics and data storage           | Clusters in place for NCDC and CPHL<br>Performance testing & validation reports | .....       | .....       | December    | .....       | .....       |
| C6d | Build in-house capacity for training genomics and bioinformatics experts                   | Genomics & bioinformatics training module and report                            | .....       | June        | .....       | .....       | .....       |
| C6e | Establish wastewater surveillance activities at NCDC labs – NRL & CPHL                     | Wastewater genomics surveillance of pathogens implementation plan and report    | .....       | October     | .....       | .....       | .....       |
| C6f | Develop and validate national genomics surveillance strategy                               | National genomic surveillance strategy and implementation plan                  | December    | .....       | .....       | .....       | .....       |

## Strategic Objective C6 (2/2)

| Objective  |
|--|
| Establish a National Genomics Centre of Excellence |

|     | Activities  | Deliverables   | 2023  | 2024     | 2025  | 2026  | 2027  |
|-----|---|--|-------|----------|-------|-------|-------|
| C6g | Construct state of the art genomic laboratory suites at NRL and CPHL    | Genomics suites established at reference laboratory campuses<br>Genomic lab SOPs | ..... | December | ..... | ..... | ..... |
| C6h | Integrate genomic data in the laboratory information management System. | Genomic data available and retrievable on the LIMS platform                      | ..... | March    | ..... | ..... | ..... |

## Strategic Objective C7

### Objective

Strengthen and expand research capacities at NCDC laboratories

|     | <b>Activities</b>  | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|--|--|-------------|-------------|-------------|-------------|-------------|
| C7a | Develop and implement a laboratory research plan to coordinate lab research activities | Laboratory research plan, including assay protocol development for priority pathogens in place | .....       | March       | .....       | .....       | .....       |
| C7b | Establish a grant writing coordination team at the NRL that will harmonize with DPRS   | Terms of Reference for Grant coordination team at NCDC labs                                    | December    | .....       | .....       | .....       | .....       |
| C7c | Increase publication capacity of NCDC labs & network on laboratory activities          | At least 6 publications per year   | December    | .....       | .....       | .....       | .....       |
| C7d | Develop Laboratory Data Governance and provide data tools for coordination             | Laboratory Data Governance established and data tools available                                | December    | December    | December    | December    | December    |

## **Goal D**

### **Health Emergency Preparedness and Response**

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## Strategic Goal D

### Goal

Reduce the health-related consequences of public health emergencies and disasters

### Outcome

Significantly reduced adverse impact of public health emergencies and disasters

### Objectives

- ① Scale up multi-hazard risk assessment to improve preparedness to public health emergencies & disasters.
- ② Improve national capacity to respond to public health emergencies & disasters in collaboration with relevant MDAs
- ③ Optimize public health emergency coordination (Technical Working Group & Public Health Emergency Operating Centres) at the national and subnational level
- ④ Optimize Medical Counter Measure and personnel deployment processes at the national and subnational level
- ⑤ Improve public health readiness for rapid response to health emergencies



## Strategic Objective D1

### Objective

Scale up multi-hazard risk assessment to improve preparedness to public health emergencies & disasters.

|       | <b>Activities</b>   | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|---|---|-------------|-------------|-------------|-------------|-------------|
| (D1a) | Conduct annual state multihazard risk assessment  | State multi-hazard risk assessment report                       | .....       | June        | .....       | .....       | .....       |
| (D1b) | Develop and implement readiness actions based on annual multi-hazard risk assessments (Enhanced Situational Awareness. ESA) | Enhanced Situational Awareness (ESA) implementation plan        | .....       | November    | .....       | .....       | .....       |
| (D1c) | Develop hazard-specific contingency plan  | Hazard-specific contingency plans at national and state level   | .....       | December    | .....       | .....       | .....       |
| (D1d) | Conduct resource mapping in all relevant sectors at all government levels for emergency preparedness and response           | Resource mapping tool & report                                  | .....       | .....       | .....       | December    | .....       |
| (D1e) | Conduct tripartite joint risk assessment for priority zoonotic diseases   | Tripartite joint risk assessment report                         | .....       | .....       | June        | .....       | .....       |
| (D1f) | Conduct emergency preparedness training for multisectoral actors at national and state levels                               | EPR training report<br>Training module for subsequent trainings | .....       | .....       | January     | .....       | .....       |

## Strategic Objective D2

### Objective

Improve national capacity to respond to public health emergencies & disasters in collaboration with relevant MDAs

|     | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|---|--|-------------|-------------|-------------|-------------|-------------|
| D2a | Develop a capacity building training/fellowship programme for surge capacity at national  | State multi-hazard risk assessment report                                | .....       | March       | .....       | .....       | .....       |
| D2b | Develop and disseminate event-based risk assessment guidelines to all 36 states   | Public health eventbased risk assessment guidelines dissemination report | .....       | March       | .....       | .....       | .....       |
| D2c | Expand the implementation of 7-1-7 target & other performance improvement metrics   | Implementation report of 7-1-7 approach in 33 states                     | .....       | .....       | .....       | January     | .....       |
| D2d | Roll out capacity building program on the rules of event-based risk assessment guidelines                                       | Capacity building implementation report and training module              | .....       | June        | .....       | December    | .....       |
| D2e | Develop multi-hazard risk assessment that accounts for climate change including adapted PHEM and EPR plans                      | Multi-hazard risk assessment report                                      | .....       | July        | .....       | .....       | .....       |
| D2f | Institutionalize digitalised operational roster system of Public Health Disaster Management Teams at the National & State level | EPR training report<br>Training module for subsequent trainings          | .....       | .....       | May         | .....       | .....       |

## Strategic Objective D3

### Objective

Optimize public health emergency coordination (TWG & PHEOC) at the National and State level

|       | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|---|--|-------------|-------------|-------------|-------------|-------------|
| (D3a) | Develop strategy to improve TWG coordination within NCDC  | TWG coordination strategic plan  | .....       | June        | .....       | .....       | .....       |
| (D3b) | Establish a standardize Public Health Intelligence (PHI) for management of epidemics at all state PHEOCs    | PHI guidelines disseminated to 36 state PHEOCs and an implementation plan report | .....       | .....       | July        | .....       | .....       |
| (D3c) | Improve TWG coordination, function, impact within the NCDC including rotations, tenure of leads.            | TWG impact report  | .....       | January     | .....       | .....       | .....       |
| (D3d) | Design a performance assessment framework to assess the performance of TWGs and determine improvement areas | Performance assessment framework developed Performance review report             | .....       | June        | .....       | .....       | .....       |

## Strategic Objective D4

### Objective

Optimize Medical Counter Measure and personnel deployment processes at the national and subnational level

|       | <b>Activities</b>  | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|--|--|-------------|-------------|-------------|-------------|-------------|
| (D4a) | Review logistics and warehouse capacity based on the national multihazard preparedness and response plan | Logistics and warehouse capacity report                            | .....       | January     | .....       | .....       | .....       |
| (D4b) | Build capacity of logistics and supply chain officers on emergency supply chain management               | Trained logistics and supply chain officers database               | .....       | September   | .....       | .....       | .....       |
| (D4c) | Revamp and automate logistic Management Information System at national and state levels                  | Logistic management information system testing report              | .....       | May         | .....       | .....       | .....       |
| (D4d) | Conduct annual forecasting and quantification of health commodities                                      | Annual forecasting and quantification of health commodities report | .....       | April       | .....       | .....       | .....       |

## Strategic Objective D5

### Objective

Improve public health readiness for rapid response to health emergencies

|     | <b>Activities</b>  | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|--|---|-------------|-------------|-------------|-------------|-------------|
| D5a | Update readiness capacities at all levels and develop a Readiness Dashboard for prioritized hazards based on multi hazard risk assessment output | Readiness dashboard developed and functional                            | .....       | March       | .....       | .....       | .....       |
| D5b | Conduct routine SimEx and drills to test capacity of Public Health workforce   | Workforce readiness capacity report<br>SimEx training report            | .....       | July        | .....       | .....       | .....       |
| D5c | Conduct AAR for potential public health event develop strategies for recovery and future readiness action  | AAR conducted and readiness action plan developed                       | .....       | August      | .....       | .....       | .....       |
| D5d | Conduct tabletop exercise to test multi-hazard emergency preparedness and response plans   | National Training Manual for SimEx and AAR developed, and TOT conducted | .....       | September   | .....       | .....       | .....       |

## **Goal E**

### **Department of Planning, Research, and Statistics**

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## Strategic Goal E

### Goal

Establish a research-driven and evidence-based agency for disease prevention, health promotion, and health planning

### Outcome

Evidence-based policies and programmes with integrated health promotion activities

### Objectives

- ① Ensure improved systems for research to inform evidenced-based policies and practices
- ② Institute mechanisms to strengthen planning, policy development and monitoring and evaluation systems within the NCDC
- ③ Strengthen practices and policies to improve health promotion and disease prevention and control
- ④ Strengthen human development programmes to ensure a competent, healthier and safer health care delivery system



## Strategic Objective E1

### Objective

Ensure improved systems for research and knowledge management to inform evidenced-based policies and practices

|       | <b>Activities</b>  | <b>Deliverables</b>                               | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|--|---|-------------|-------------|-------------|-------------|-------------|
| (E1a) | Operationalise NCDC research guideline   | Research guideline adopted across all departments | .....       | .....       | .....       | .....       | June        |
| (E1b) | Build capacity of core staff of the NCDC on scientific writing and communication | Staff scientific writing capacity report          | .....       | June        | .....       | .....       | .....       |
| (E1c) | Operationalise the NCDC ECHO programme   | NCDC ECHO Programme implementation report         | .....       | June        | .....       | .....       | .....       |

## Strategic Objective E2

### Objective

Institute mechanisms to strengthen planning, policy development, and monitoring and evaluation systems within the NCDC

|       | <b>Activities</b>  | <b>Deliverables</b>                             | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|--|---|-------------|-------------|-------------|-------------|-------------|
| (E2a) | Establish a budget working committee for the agency to create a solid platform for generating a comprehensive budget | Budget committee operational with ToRs          | .....       | August      | .....       | .....       | .....       |
| (E2b) | Design a Monitoring, Evaluation, and Learning (MEL) framework for NCDC   | MEL framework implementation report             | .....       | .....       | .....       | .....       | June        |
| (E2c) | Develop and disseminate SOPs on the use of the newly designed MEL framework  | SOP disseminated across the agency              | ....        | March       | ....        | ....        | ....        |
| (E2d) | Develop guide for Data Quality assessment for data generating programmes and projects within the NCDC                | Guide rolled out across projects and programmes | .....       | June        | .....       | .....       | .....       |

## Strategic Objective E3 (1/2)

### Objective

Strengthen practices and policies to improve health promotion and disease prevention and control

|       | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|---|--|-------------|-------------|-------------|-------------|-------------|
| (E3a) | Develop NCDC HP Framework in line with the National HP policy                                 | Health promotion framework developed and disseminated to relevant stakeholders | .....       | June        | .....       | .....       | .....       |
| (E3b) | Build capacity of key actors of HP and Risk Comms activities in the 36+1 states               | HP and Risk Comms training curriculum and implementation plan                  | .....       | .....       | January     | .....       | .....       |
| (E3c) | Implement the multihazard risk communication toolkit with monitoring and evaluation framework | Multi-hazard risk communication implementation plan                            | .....       | June        | .....       | .....       | .....       |
| (E3d) | Build risk communication coordination structures at the subnational levels                    | Functional subnational coordination implementation plan                        | .....       | March       | .....       | .....       | .....       |
| (E3e) | Establish a regulatory legal framework for IPC in Nigeria                                     | Legal framework policy   | .....       | March       | .....       | .....       | .....       |
| (E3f) | Expand the national IPC TWG to include the WASH stakeholders                                  | WASH stakeholders incorporated in National IPC TWG                             | .....       | .....       | January     | .....       | .....       |

## Strategic Objective E3 (2/2)

| <b>Objective</b>   |   |  |             |             |             |             |             |
|--|---|--|-------------|-------------|-------------|-------------|-------------|
| Strengthen practices and policies to improve health promotion and disease prevention and control |   |  |             |             |             |             |             |
|  | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
| (E3g)  | Expand Orange Network by incorporating 50% of secondary public hospitals and private hospitals (tertiary level) | Report on 50% of Secondary health facilities (HF) enrolled on the Orange Network | .....       | .....       | January     | .....       | .....       |
| (E3h)  | Develop a national strategic plan for HAI surveillance  | National strategic plan for HAI surveillance implementation plan                 | .....       | June        | .....       | .....       | .....       |
| (E3i)  | Establish a National HAI Surveillance Network (Nigeria HAI NET)   | Report on HF in Orange network with HAI surveillance capacity                    | .....       | March       | .....       | .....       | .....       |
| (E3j)  | Review and implement Pandemic Influenza Preparedness (PIP) Plan   | PIP implementation plan and report   | .....       | April       | .....       | .....       | .....       |
| (E3k)  | Establish Pan-Respiratory Disease Surveillance (PRDS) in Nigeria  | Pan-Respiratory Disease Surveillance (PRDS) implementation report                | .....       | June        | .....       | .....       | .....       |
| (E3l)  | Develop and implement a Pan-Respiratory disease response plan   | Pan-Respiratory disease response implementation report                           | .....       | .....       | .....       | December    | .....       |

## Strategic Objective E4 (1/2)

### Objective

Strengthen programmes to ensure a competent, healthier and safer public health delivery system

|     | <b>Activities</b>   | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-----|---|--|-------------|-------------|-------------|-------------|-------------|
| E4a | Operationalise the digital national AMR database  | Digital platform report to manage AMR and AMU data                   | .....       | .....       | June        | .....       | .....       |
| E4b | Expand antimicrobial stewardship programmes to all government levels of health care       | AMS programme healthcare facility report                             | .....       | .....       | .....       | .....       | June        |
| E4c | Design an in-service AMS and AMR professional qualification programmes                    | In-service AMS and AMR qualification programme implementation report | .....       | .....       | September   | .....       | .....       |
| E4d | Expand the sentinel AMR surveillance and diagnostic stewardship in collaboration with PHL | AMR surveillance site national database                              | .....       | .....       | .....       | .....       | June        |
| E4e | Establish state AMR Technical Working Group (TWG) to ensure wide stakeholder engagement   | TWG Terms of Reference in every state                                | .....       | .....       | .....       | .....       | June        |
| E4f | Implement the national health security workforce strategy                                 | National health security workforce strategy implementation report    | .....       | .....       | June        | .....       | .....       |

## Strategic Objective E4 (2/2)

| <b>Objective</b>   |   |   |             |             |             |             |             |
|--|---|---|-------------|-------------|-------------|-------------|-------------|
| Strengthen programmes to ensure a competent, healthier and safer public health delivery system |   |   |             |             |             |             |             |
|  | <b>Activities</b>   | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
| (E4g)  | Establish the Technical Workforce TWG to ensure wide stakeholder engagement                         | Technical Workforce TWG ToR   | .....       | .....       | June        | .....       | .....       |
| (E4h)  | Develop and operationalise a national public health workforce wellbeing strategy                    | National public health workforce wellbeing strategy and implementation plan | .....       | .....       | .....       | June        | .....       |
| (E4i)  | Develop a sustainability plan for NFEELTP focused on sustained funding and personnel                | Sustainability plan implementation report                                   | .....       | July        | .....       | .....       | .....       |
| (E4j)  | Review the Field Epidemiology Programme (NFEELTP) to align with current trends in the public health | Revised NFEELTP curriculum  | .....       | .....       | September   | .....       | .....       |
| (E4k)  | Design a learning management system for NFEELTP   | Learning Management System implementation plan                              | .....       | .....       | January     | .....       | .....       |

## **Goal F**

### **Subnational Support Department**

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## Strategic Goal F

### Goal

Ensure functional and sustainable health security systems at the subnational level to enhance preparedness, detection, and response to public health threats.

### Outcome

A strengthened subnational health security system with improved effective and sustainable capacity to prevent, detect, and respond to public health emergencies/events through a one-health approach.

### Objectives

- ① Enhance technical and operational capacity at the subnational level for public health detection, preparedness, and response
- ② Ensure effective implementation of State Action Plan on Health Security in line with the National Action Plan
- ③ Provide frameworks and ensure monitoring & evaluation of subnational units of key performance indicators of NCDC activities

## Strategic Objective F1

### Objective

Enhance technical and operational capacity at the subnational level for public health detection, preparedness, and response

|       | <b>Activities</b>  | <b>Deliverables</b>                                  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|--|--|-------------|-------------|-------------|-------------|-------------|
| (E1a) | Strengthen EPR capacity at LGA level through strategic investment in surveillance and laboratory capacity at LGA   | Subnational EPR capacity enhancement report for LGAs | .....       | .....       | .....       | .....       | July        |
| (E1b) | Capacity building (training, mentoring, simulation exercise) at the state and LGA levels to enhance EPR  | EPR training curriculum and report                   | .....       | .....       | January     | .....       | .....       |
| (E1c) | Establish and support the implementation of guidelines for resolving subnational challenges in national TWGs and EOCs operations, in collaboration with HEPR | Resolution guidelines and implementation report      | .....       | June        | .....       | .....       | .....       |

## Strategic Objective F2

### Objective

Ensure effective implementation of State Action Plan on Health Security in line with the National Action Plan

|       | <b>Activities</b>  | <b>Deliverables</b>  | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|--|--|-------------|-------------|-------------|-------------|-------------|
| (E2a) | Develop plan to support the development and implementation of State Action Plan on Health Security (SAPHS)               | SAPHS implementation plan  | .....       | .....       | .....       | .....       | June        |
| (E2b) | Develop and implement plan to support state on the adaptation/development of multi-hazard preparedness and response plan | State multi-hazard preparedness and other relevant EPR plans developed for all 36 states | .....       | June        | .....       | .....       | .....       |
| (E2c) | Co-develop and implement one health strategy guidelines from the states to LGA levels                                    | State and LGA One Health Strategy implementation report                                  | .....       | April       | .....       | .....       | .....       |

## Strategic Objective F3

### Objective

Provide frameworks and ensure monitoring & evaluation of subnational units of key performance indicators of NCDC activities

|       | <b>Activities</b>  | <b>Deliverables</b>   | <b>2023</b> | <b>2024</b> | <b>2025</b> | <b>2026</b> | <b>2027</b> |
|-------|--|---|-------------|-------------|-------------|-------------|-------------|
| (E3a) | Develop and operationalise frameworks for monitoring and evaluation of subnational units of NCDC programmes' KPIs                    | M&E frameworks for subnational units programmes' KPIs developed and operationalised | .....       | .....       | June        | .....       | .....       |
| (E3b) | Develop support process for addressing identified challenges in activities implementation at the subnational level                   | SOP and resolution report   | .....       | June        | .....       | .....       | .....       |
| (E3c) | Support NCDC departments in the effective cascade of activities to the subnational and ensure LGA/health facility level optimisation | Subnational implementation plan   | .....       | November    | .....       | .....       | .....       |

## **NIGERIA CENTRE FOR DISEASE CONTROL AND PREVENTION**

Plot 801 Ebitu Ukiwe Street, Jabi Abuja, Nigeria



6232 (Toll-Free Call Centre)



[info@ncdc.gov.ng](mailto:info@ncdc.gov.ng)



@ncdcgov



[ncdc.gov.ng](http://ncdc.gov.ng)