

MINISTRY OF HEALTH

STAFFING NORMS FOR THE HEALTH SECTOR IN GHANA

TECHNICAL REPORT ON PHASE II

MARCH, 2018

SUPPORTED BY



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ACKNOWLEDGEMENT

The Steering Committee and Technical Working Group wish to acknowledge with gratitude of members of the Health Sector Working Group (HSWG) and all the Senior Health Managers who conceived and greatly supported the development of staffing norms. For the completion of the 30% that were left in the volume 1, the TWG is particularly grateful for the efforts of the following persons.

Hon. Kweku Agyemang-Manu - Minster of Health

Dr Anthony Nsiah-Asare - Director-General, GHS

Dr John Koku Awoonor-Williams - Director, PPMED, GHS

Dr Margaret Chebere - Diretor, HRD, GHS

Dr Kwesi Asabir - Head, HTIs

We are particularly grateful to DFID and WHO for the enormous technical and financial support towards the completion of this document.

Finally, we wish to thank all staff who participated in the process especially at the health facility level.

MEMBERS OF THE STEERING COMMITTEE

The Steering Committee provided policy direction and leadership for the implementation of the WISN process and the subsequent development of Staffing Norms from the WISN results. Members of the Steering Committee are;

1.	Hon. Tina Mensah	-	Hon. Deputy	Minister of Health

2.	Dr Anthony Nsiah-Asare	_	Director-General.	Ghana Health Service

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WISN STUDY AND DATA COLLECTION TEAM

The team collected data from the selected health facilities and performed the facility-based WISN analysis. The team included:

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- 4. Mrs Georgina Yeboah
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3.0 THE STAFFING NORMS

3.1 INTRODUCTION

Staffing Norm is a <u>human resource planning and management tool</u> that gives an indication of the number and calibre of staff required in a given health facility/institution. It is intended to facilitate efficient health workforce utilisation, a more equitable distribution and accountability.

This staffing norm is a workload-related evidence-informed one that is quite simple to use. It is designed to accommodate changes in workload levels from time to time. To use this staffing norm appropriately, one needs workload of health facilities taken from only reported statistics in reliable sources and databases such as DHIMS and annual reports. As much as possible, the use of unofficial data or anecdotal 'evidence' should be avoided. It is also better to use the average of a facility's annual data for two or three consecutive years.

Each health facility type is assigned a range of staffing requirements for each staff category. Health facilities should use the minimum staffing requirement as the basis for gap analysis and initial HR planning which should then be adjusted on annual basis using the adjustment/projection guide established in volume 1 (see Appendix 2). Where the workload change far exceeds 15%, it is advisable to check if the workload category has changed or not.

NOTE: The staffing requirements given in this norm are in aggregates for staff categories and thus, Managers need to ensure an appropriate skill mix within the numbers based on staff availability and context (see Appendix 12 for guidelines on intra-category skill mix). It should be understood that the norm is a guide and does not replace managerial responsibility of critical analysis of the context. However, reasons to exceed the norms should always be based on 'compelling evidence'.

3.2 STAFFING NORMS FOR COMMUNITY-BASED HEALTH PLANNING AND SERVICES (CHPS)

CHPS are categorized into A, B and C based on workload. Category A has an annual workload of 4,000 or less while category B has annual workload between 4,000 and 8,000. Category C, on the other hand, have annual workload exceeding 8,000. The staffing norm of each category is provided in Table 1 below.

Table 1: Staffing Norms for CHPS

CATEGORY		STAFF	FING R	EQUIRE	REMARKS		
	CATEGORY A (also includes all CHPS with No Compounds)		CATEGORY B		CATEGORY C (Facilities functioning at the level of Health Centre but designated as CHPS)		
	MIN	MAX	MIN	MAX	MIN	MAX	
Community Health Officer/Nurse	2	3	2	4	3	4	
Midwife	0	0	1	2	2	2	Only at facilities where full midwifery services are to be provided
Field Technician	0	0	0	0	1	1	
Enrolled Nurse	0	0	0	0	1	2	Only in the facilities
Registered General Nurse	0	0	0	0	1	1	that are functioning at the level of Health Centres but designated as CHPS and the annual workload is more than 8,000.
Security Guard	1	2	1	2	1	2	Only where there is a Compound

3.3 STAFFING NORMS FOR HEALTH CENTRES

Health centres are categorized into two broad groups based on their annual outpatient coverage. The health centre with the least staff requirements classified as "A" needs to cater for at least 12,655 outpatients per year as against category "B" which attend to between 13,678 and 28,119 outpatients per year. Any health centre that attends to a minimum of 29,525 outpatients per annum qualifies for staffing requirements similar to that of polyclinic. For health centre classified in category "A" to move to a higher category of "B", it needs to increase its outpatient coverage per annum by at least 5 percent as shown in Table 6 below.

Table 2: Staffing Norms for Health Centres

CT A FF CATE CODY	WORK		WORK	DEMARKS	
STAFF CATEGORY	CATEG Minimum	ORY A Maximum	CATEO Minimum	REMARKS	
Finance Officer	0	0	1	Maximum 2	
Accounts Officer (cash & NHIS)	1	1	1	2	
Biostatistics Assistant	1	2	2	3	
	1	2	3	4	
Physician Assistant (Medical) General Nurses	3		7	13	
	_	6			
Enrolled Nurses	3	5	5	8	
Midwives	2	4	4	6	
Community Health Nurse	4	8	8	12	
Mental Health Nurse	1	2	2	3	
Field Technician	1	1	1	2	
Laboratory Technician	0	0	1	2	
Laboratory Assistant	1	2	2	3	
Dispensing Technicians and/or	1	3	3	4	
Dispensing Assistant	1	3	3	4	
Storekeeper	1	1	1	2	
Community Mental Health Officer	1	1	1	1	Sub-district
Driver	1	2	1	2	In accordance with the transport policy one driver per functional car
Technical Officer (Health Information)	1	1	1	1	Sub-district
Technical Officer (Disease Control)	1	1	1	1	Sub-district
Technical Officer (Laboratory)	1	1	1	1	
Technical Officer (Health Promotion)	1	1	1	1	Sub-district
Technical Officer (Nutrition)	1	1	1	1	Sub-district
Hospital Orderly	1	2	2	4	
Labourer	1	2	1	2	
Watchman	1	2	1	2	

Note: Staff categories with 'Sub-district' remarks are to be placed at health centre designated as the Sub-district headquarters.

3.4 STAFFING NORMS FOR POLYCLINICS

Using OPD attendance, Polyclinics are categorized as A or B. Category B polyclinics records at least 31,500 OPD attendance per annum whilst those in category A records 30,000 or less per annum. It is observed that Polyclinics with the workload in category B tends to be functioning at the level of Primary Hospitals and thus requires similar levels of staffing. However, they are NOT by virtue of this workload level automatically designated as Primary Hospitals. Such designation could require other considerations beyond workload and staffing needs. The staffing norms for policlinics is detailed in Table 3.

Table 3: Staffing Norms for Polyclinics

	CATE	GORY A	CATEGORY B		
CATEGORY	Annual C	OPD <30,000	Annual OPD >31,500		
	MIN	MAX	MIN	MAX	
Accountant	1	1	1	2	
Accounts Officer	3	4	5	6	
Finance Officer	1	1	1	2	
Internal Auditor	1	1	1	2	
Biomedical Scientist	2	3	3	4	
Laboratory Assistant	2	3	3	4	
Technical Officer (Laboratory)	6	9	9	13	
Technical Assistant (Biostatistics)	5	7	7	11	
Technical Officer (Biost/HI)	2	3	3	4	
Medical Officer	1	2	4	7	
Field Technician	1	1	1	2	
Midwife	5	7	6	11	
Community Health Nurse	8	12	12	18	
Enrolled Nurse	10	15	20	30	
General Nurse	10	15	15	26	
ENT Nurse	1	1	1	2	
Ophthalmic Nurse	1	1	1	2	
Public Health Nurse	1	2	2	3	
Nutrition Officer	1	1	1	2	
Dispensing Assistant	2	3	3	4	
Pharmacist	1	2	2	3	
Pharmacy Technician	3	4	5	6	
Physician Assistant (COHO)	1	1	1	2	
Physician Assistant (Medical)	3	4	4	8	

CATEGORY	CATE	GORY A	CATEGORY B		
CATEGORI	Annual O	PD <30,000	Annual OPD >31,500		
	MIN	MAX	MIN	MAX	
Mental Health Nurse	1	1	1	2	
Radiographer	1	1	1	2	
Health Service Administrator	1	1	1	2	
Procurement Officer	1	1	1	2	
Storekeeper	1	1	1	2	
Supply Officer	1	1	1	2	
Nutrition Technical Officer	1	1	1	2	
Technical Officer (Disease Control)	1	2	2	3	
Driver ¹	1	2	1	2	
Hospital Orderly	3	4	6	9	
Labourer	1	1	1	1	
Watchman/Security Guard	2	3	4	6	

¹ In accordance with the transport policy one driver per functional car

3.5 STAFFING NORMS FOR PRIMARY HOSPITALS

District (primary) hospitals vary in terms of their workload levels. Using outpatients² and admissions³ per annum as proxies, the district hospitals are categorized into four broad bands to facilitate determining their staffing requirements. District hospitals with the least staffing requirements classified as A are those that attend to a maximum of 46,574 outpatients and 4,157 admissions per annum. Category B are those that attend to between 48,903 – 76,308 outpatient cases and between 4,685 – 6,563 inpatient clients per annum whilst Category C outpatient cases range between 80,123 – 100,000 and admissions of 6,834 – 9,000 per annum. The category D which has the highest staff requirements should attend to at least 105,000 outpatients and 9,450 admissions per year. For a facility to move from one category to a higher one there is the need for it to increase its outpatient and admission outputs by at least 5 percent beyond its upper limit. For facility in category A to be reclassified as B, there it must increase its maximum outpatient output from 44,574 to 48,903 and its admissions from 4,157 to 4,685.

Table 4: Categorisation of Primary Hospitals

Total Annual OPD	Total Annual Admissions							
	≤4157	4685 - 6563	6834 – 9000	9450 +				
≤46574	A							
48903 – 76308		В						
80123 – 100000			С					
105000 +				D				

The staffing norms for the categories of health workforce that were not covered in volume is detailed in **Table 5** below.

². The use of OPD and admissions as co-indicators reduces the chance of unnecessary shifting due to unusual happenings e.g. a one-off outbreak of disease

Admission as a percentage of OPD is around 5%-11% (9.5% on the average) except a few outliers where up to 17% of OPD cases are admitted.

Table 5: Staffing Norms for Primary Hospital

STAFF CATEGORY	WORKLOAD CATEGORY A		WORKLOAD CATEGORY B		WORKLOAD CATEGORY C		WORKLOAD CATEGORY D	
		Max.	Min.	Max.	Min.	Max.	Min.	Max.
Accountant	1	2	2	3	3	4	4	6
Finance Officer	2	3	2	4	5	8	7	12
Accounts Officer	5	7	9	11	13	18	16	22
Internal Auditor	1	1	1	1	1	2	1	2
Finance Officer (Audit)	1	1	1	1	1	2	2	3
Biomedical Scientist	3	4	4	6	6	7	8	12
Technical Officer (Laboratory)	7	10	9	15	12	18	15	22
Laboratory Assistant	5	8	7	10	10	14	12	20
Biostatistics/Medical Records Assistant	8	11	11	15	16	19	20	25
Biostatistics Officer	1	2	1	2	1	2	1	3
Clinical Engineering Technologist	1	2	2	3	2	3	2	3
Clinical Engineering Manager	0	1	0	1	1	1	1	2
Dental Surgeon	1	2	1	2	1	2	2	3
Dental Surgery Assistant	1	2	1	2	1	2	1	2
Dental Technician	1	2	1	2	1	2	1	2
Medical Officers	3	7	7	10	13	17	23	31
Obstetrician & Gynaecologist	1	2	2	3	3	5	5	8
Ophthalmologist	1	1	1	1	1	2	1	2
Paediatrician	1	2	2	3	3	4	4	6
General Surgeon	1	1	1	2	1	2	2	3
Family Medicine Physician	1	1	1	2	1	2	1	3
Midwife	10	29	30	41	43	52	55	84
Community Health Nurse	3	7	7	10	10	13	13	20
Enrolled Nurses	19	42	44	60	63	76	80	123
Registered Nurse	35	64	67	91	95	115	121	186
Ophthalmic Nurse	1	2	2	3	2	3	3	5
Public Health Nurse	2	4	4	6	6	7	8	12
Pharmacist	2	3	3	5	5	7	6	12
Pharmacy Technician	6	9	8	13	8	16	12	20
Pharmacy Assistant	3	5	4	6	5	8	5	12
Certified Registered Anaesthetist	2	3	3	5	5	8	8	13
Physician Assistant (COHO)	1	2	2	3	3	4	3	4
Physician Assistant (Medical)	2	3	3	4	4	5	6	9
Physician Assistant (Herbal)	1	1	1	1	1	2	1	2
Mental Health Nurse	2	3	3	4	4	5	4	6

STAFF CATEGORY		WORKLOAD CATEGORY A		WORKLOAD CATEGORY B		WORKLOAD CATEGORY C		WORKLOAD CATEGORY D	
		Max.	Min.	Max.	Min.	Max.	Min.	Max.	
X-ray Technician	2	3	3	4	4	5	6	9	
Radiographers	2	3	2	4	4	5	5	9	
Technical Assistant (X-Ray)	1	1	1	2	2	3	3	4	
Artisans (Mechanic, Electricals, Plumbing)	6	10	11	14	15	18	19	29	
Health Service Administrator	1	1	1	1	1	2	1	2	
Human Resource Manager	1	1	1	2	1	2	1	2	
IT Manager	1	2	1	2	2	4	4	6	
IT Officer/Technician	2	3	2	3	3	4	5	7	
Procurement Officers	1	1	1	2	2	3	2	3	
Procurement Manager	1	1	1	1	1	2	2	2	
Supply Manager	1	1	1	1	1	2	1	2	
Supply Officer	1	2	1	2	2	3	2	4	
Blood Bleeder/Phlebotomist	1	2	2	3	3	4	4	6	
Clinical Pharmacist	1	1	1	2	2	4	3	7	
Blood Donor Organizer	1	2	2	3	2	4	3	5	
Critical Care Nurse	3	5	5	7	7	11	12	17	
Emergency Nurse	8	12	13	16	17	20	21	30	
ENT Nurse	1	2	1	3	2	3	3	5	
Peri-Operative Nurse	5	8	8	11	11	13	14	20	
Public Health Nurse	2	3	3	4	4	5	5	6	
Clinical Psychologist	1	2	1	2	1	2	2	3	
Executive Officer	2	2	2	3	2	3	2	4	
Dietician	1	2	2	3	2	3	3	5	
Optician	1	2	1	2	2	3	3	5	
Optometrist	1	2	1	2	2	3	3	5	
Physiotherapist	1	1	1	1	1	2	2	3	
Physiotherapy Assistant	1	2	1	2	1	2	2	3	
Prosector	1	1	1	1	1	1	1	1	
Technical Officer (Disease Control)	1	2	2	3	2	3	3	5	
Catering Officer	1	2	1	2	2	3	3	5	
Driver	2	2	2	3	3	4	4	6	
Hospital Orderly	12	13	13	17	18	21	22	32	
Labourer	3	5	5	7	7	8	9	13	
Launderer	3	4	4	5	6	7	7	10	
Mortuary Attendant	1	2	1	2	2	3	3	5	
Nutrition Officer	1	1	1	1	1	2	1	2	

STAFF CATEGORY	WORKLOAD CATEGORY A		WORKLOAD CATEGORY B		WORKLOAD CATEGORY C		WORKLOAD CATEGORY D	
	Min.	Max.	Min.	Max.	Min.	Max.	Min.	Max.
Technical Officer (Nutrition)	1	2	1	2	1	2	2	3
Private Secretary	1	2	1	2	2	2	2	3
Security Guard	5	8	8	11	11	13	14	20
Staff Cook	2	3	3	4	4	5	5	8
Telephonist	1	2	1	2	2	3	3	5
Transport Officer	1	2	1	2	1	2	3	4
Field Technician	1	2	1	2	1	2	2	3
Administrative Manager	1	2	1	2	1	2	2	3
Technical Officer (Health Promotion)	1	1	1	1	1	2	1	2
Technical Officer (Health Information)	1	2	2	3	3	3	3	5

3.6 STAFFING NORMS FOR REGIONAL HOSPITALS

Regional Hospitals were previously not categorised in first phase but have now been categorised into two, A or B based on workload. Annual OPD attendance and inpatients data from DHIMS-2 or other reliably reported sources (s) such as annual reports are used to determine the workload category. No difference in scope or range of services is implied or inferred in the categorization but just the workload volumes. The staffing norms for Regional Hospitals are shown in Table 6.

Table 6: Staffing Norms for Regional Hospitals

	Cate	egory A	Categ	ory B
Category	OPD/Year below 100,000 and inpatient below 10,000		At least 110,000 OPD/Year and Inpatient of 15,000	
	Min	Max	Min	Max
Accountant	2	3	4	6
Accounts Officer	5	10	11	21
Finance Officer	3	5	5	9
Internal Auditor	1	2	2	3
Biomedical Scientist	4	8	12	23
Technical Officer (Laboratory)	3	6	8	15
Biostatistics Assistant	4	8	8	16
Biostatistics Officer	1	1	2	3
Technical Officer (Health Information)	2	3	4	8
Biomedical Engineer/Technologist	1	2	2	3
Dental Surgeon	1	2	2	3
Dental Surgery Assistant	1	2	3	5
Dental Technician (Prosthesis)	1	1	1	2
Maxillofacial Surgeon	1	1	1	2
Dietician	1	1	1	2
Medical Officer	14	27	27	52
Dermatologist	1	1	1	2
Doctor Anaesthetist	2	3	3	6
ENT Specialist	1	1	1	2
Internal Medicine Physician	1	2	3	5
Neurosurgeon	1	1	1	2
Obstetrician & Gynaecologist	2	4	4	8
Ophthalmologist	1	2	2	3
Paediatrician	2	3	3	5
Trauma &Orthopaedic Specialist	1	1	1	2
Urologist	1	1	1	2
General Surgeon	2	3	3	5

	Cate	egory A	Categ	ory B
Category	OPD/Year below 100,000 and inpatient below 10,000		At least 110,000 OPD/Year and Inpatient of 15,000	
	Min	Max	Min	Max
Paediatric Surgeon	1	2	2	3
Midwife	21	40	48	92
Community Health Nurse/Field Technician	4	7	8	16
Enrolled Nurse	80	123	125	142
General Nurse	121	142	185	355
Critical Care Nurse	4	7	8	15
Emergency Nurse	6	12	14	26
ENT Nurse	1	2	2	4
Ophthalmic Nurses	2	3	3	5
Peri-Operative Nurses	5	9	10	20
Public Health Nurse	3	6	6	11
Nutritionist	1	2	2	4
Opticians/Optical Technician	1	1	1	2
Optometrist	1	1	1	2
Pharmacist	6	12	18	35
Pharmacy Technician	3	6	12	23
Certified Registered Anaesthetist	9	12	12	18
Physiotherapist	2	3	4	7
Physiotherapy Assistant	3	5	5	10
Mental Health Nurse	3	6	6	12
Psychiatrist Psychiatrist	1	1	1	2
Radiographer/X-ray Technician	2	4	4	7
Radiologist Tay Technician	1	1	1	2
Technical Assistant (X-Ray)	1	2	2	4
Artisans (Mechanical, Electricals, Carpentry, Mason)	3	5	6	12
Estates Officer	1	1	1	2
Health Services Administrator	2	3	3	5
Human Resource Manager	1	2	1	3
IT Managers and Officer	2	3	4	7
Procurement Officer	1	1	1	2
Supply Officer	2	3	4	7
Specialist Pharmacist - Cardiology	1	1	1	2
Specialist Pharmacist - Cardiology Specialist Pharmacist - Infectious Disease	2	3	2	4
- 1	2	3	2	4
Specialist Pharmacist - Oncology &	1	2	1	2
Haematology Specialist Pharmacist Montal Health	1	2	1	3
Specialist Pharmacist - Mental Health Specialist Pharmacist - Production	1	2	_	1
Specialist Pharmacist - Paediatrics	1	3	2	4
Audiologist	1	2	3	5

	Cate	egory A	Cateo	gory B
Category	OPD/Year below 100,000 and inpatient below 10,000		0,000 At least 110,000	
	10	J,000	of 15,000	
	Min	Max	Min	Max
Specialist Neonatologist	2	3	3	5
Neurosurgeon	2	4	3	5
Intensive Care Specialist	5	8	8	16
Occupational Therapist	1	1	1	2
Blood Donor Organiser	1	1	1	2
Phlebotomist	4	10	15	23
Blood bleeder	1	3	5	7
Catering Officer	1	2	4	6
Diet Cook	1	3	4	7
Hospitality Manager	1	3	5	8
Staff Cook	1	2	2	4
Clinical Psychologist	1	1	2	3
Technical Officer (Disease Control)	1	1	2	2
Driver	6	8	8	12
Executive Officer	1	1	2	2
Hospital Orderly	10	15	23	35
Labourer	5	8	12	18
Launderer	4	6	9	14
Mortuary Attendant	1	2	2	3
Private Secretary	2	3	3	5
Prosector	1	1	1	2
Receptionist/Telephonist	1	2	3	5
Seamstress	1	2	4	5
Security Guard	1	1	2	3
Stenographer	1	2	3	5
Sterilization Machine Operator	3	5	6	9
Transport Manager	1	1	1	2
Transport Officer	1	1	2	3
Burns and Plastic Nurse	2	4	6	9
Nephrology Nurse	1	1	2	2
Nephrology Paediatric Nurse	1	1	2	2
Public Health Nurse	2	3	5	7
Health Research Officer	1	1	1	2
Burns and Plastic and Reconstructive Surgeon	1	1	1	2
Neurosurgeon	1	2	3	5
Estate Manager	1	1	1	2
Auditor	1	2	3	5
Public Health Officer (Disease Control)	1	2	3	5
Public Health Officer (Health Promotion)	1	2	3	5

	Cate	Category A		ory B
Category	OPD/Year below 100,000 and inpatient below 10,000			
	Min	Max	Min	Max
Technical Officer (Health Information)	1	2	3	5

3.7 STAFFING NORMS FOR TEACHING HOSPITALS

Teaching Hospitals are nominally classified into Emerging (recently established or developing) and Established (well-developed) Teaching Hospitals.

Table 7: Staffing Norms for Teaching Hospitals

STAFF CATEGORY	Emerging TH Minimum	Emerging TH Maximum	Established TH Minimum	Established TH Maximum
Accountant	8	15	20	26
Accounts Officer	24	43	57	76
Finance Officer	7	10	10	13
Internal Auditor	4	7	9	12
Biomedical Scientist – Bacteriology	14	25	33	44
Biomedical Scientist – Biochemistry	7	12	16	21
Biomedical Scientist – Histopathology	2	4	5	7
Biomedical Scientist – Immunology	8	14	18	24
Biomedical Scientist – Serology	5	9	12	15
Biomedical Scientist - Haematology	14	25	33	44
Biomedical Scientist - Parasitology	4	7	10	13
Biostatistics Assistant	12	23	36	48
Biostatistics Officer	4	7	11	15
Technical Officer (Biostatistics/Health Information)	6	12	18	24
Clinical Engineering Manager	2	5	5	8
Clinical Engineering Technologist	4	7	9	12
Dental Prosthesis Technologist	2	4	6	8
Dental Prosthesis Technician	2	3	4	6
Dental Surgery Assistant	2	4	6	8
Maxillofacial surgeon	2	4	5	7
Specialist Community Oral Health /Dentist	2	4	6	8
Specialist Orthodontist	1	1	2	2
Specialist Restorative Dentistry	2	3	4	6
Dietician	5	9	12	17
Medical Officer (General Practitioner)	38	60	65	85
Cardiologist	2	5	4	10
Cardio-Thoracic Surgeon	1	2	2	5
Dermatologist	1	3	2	5
Doctor Anaesthetist	11	20	27	36
Emergency Medicine Physician	9	17	22	30
Endocrinologist	1	3	2	5
Family Physician	3	5	7	9
Gastroenterologist	2	4	4	8
Infectious Disease Specialist	2	4	4	8

STAFF CATEGORY	Emerging TH	Emerging TH	Established TH Minimum	Established TH
N. 1. 1. 1. 1.	Minimum	Maximum		Maximum
Nephrologist	1	2	3	4
Neurologist	1	2	2	4
Obstetrician & Gynaecologist	9	15	21	28
Ophthalmologist	3	5	7	9
Paediatric Endocrinologist	1	2	2	4
Paediatric Nephrologist	1	2	2	4
Paediatric Neurologist	1	2	2	4
Paediatric Oncologist	1	2	2	4
Paediatrician (General)	7	11	16	20
Pathologist	2	4	6	8
Physician Specialist	13	23	32	43
Respiratory Physician	1	3	2	5
Rheumatologist	1	1	2	2
Specialist Haematology	2	4	5	7
Specialist Microbiology	2	4	5	7
Trauma & Orthopaedic Specialist	2	4	6	8
Urologist	2	3	4	6
General Surgeon	5	8	11	14
Paediatric Surgeon	3	6	8	11
Clinical Medical Physicist	3	6	8	11
Midwives	98	175	234	310
Community Health Nurse	8	14	19	25
General Nurses	535	955	1279	1695
Cardio-Thoracic Nurse	36	65	87	116
Critical Care Nurse	76	136	183	242
Emergency Nurse	35	63	84	111
ENT Nurse	3	6	8	11
ENT specialist	2	4	5	7
Oncology Nurse	10	17	23	31
Ophthalmic Nurse	6	11	14	19
Peri-Operative Nurse	13	24	32	42
Prosthesis Nurse (Occularist)	1	1	1	2
Nutritionist	3	5	7	9
Optical Technician	1	1	1	2
Optometrist	2	3	4	6
Clinical Pharmacist	8	15	20	26
Pharmacist	32	57	76	101
Pharmacy Specialist - Drug Information	4	7	10	13
Pharmacy Specialist- Manufacturing	3	6	7	10
Pharmacy Specialist –Radio	3	5	7	9
Pharmacy Technician	21	38	51	67
Physician Assistant (Anaesthesia)	5	8	11	14
Physiotherapist	12	22	29	39

Emerging TH	Emerging TH	Established TH Minimum	Established TH
			Maximum
	-		15
			19
			6
			12
			25
· ·			23
			9
2	4	6	8
1./	25	33	44
14	23	33	44
7	13	17	23
4	7	10	23
	9	12	17
3	6	8	11
12	22	30	40
1	1	2	4
3	5	3	6
4	7	6	11
1	2	2	4
3	5	4	6
6	9	10	15
1	2	2	3
1	3	1	3
3	5	5	9
12	23	23	45
3	5	4	6
3	4	3	5
4	6	5	8
9	15	12	18
2	3	3	4
2			6
1			3
4			10
			8
1			3
2			4
			18
			40
			65
			18
			25
			5
			12
	TH Minimum 5 6 2 4 6 7 3 2 14 7 4 5 3 12 1 3 4 1 3 6 1 1 3 12 3 4 9 2	TH TH Minimum Maximum 5 9 6 11 2 3 4 7 6 12 7 13 3 5 2 4 14 25 7 13 4 7 5 9 3 6 12 22 1 1 2 3 3 5 4 7 1 2 3 5 4 7 1 2 3 5 12 23 3 5 12 2 3 6 12 2 3 6 12 2 3 6 1 2 2 3 6	TH Minimum TH Minimum 5 9 12 6 11 14 2 3 4 4 7 9 6 12 12 7 13 17 3 5 7 2 4 6 14 25 33 7 13 17 4 7 10 5 9 12 3 6 8 12 22 30 1 1 2 3 5 3 4 7 6 1 2 2 3 5 4 6 9 10 1 2 2 3 5 5 12 23 23 3 5 4 3 4 5 9 15

STAFF CATEGORY	Emerging TH Minimum	Emerging TH Maximum	Established TH Minimum	Established TH Maximum
Seamstress	3	5	4	7
Security Guard	13	25	31	59
Sterilization Machine Operator	4	8	6	12
Transport Manager	2	3	2	3
Burns and Plastics Nurse	4	8	16	30
Nephrology Nurse	13	25	20	38
Nephrology Paediatric Nurse	5	9	8	15
Public Health Nurse	11	15	12	22
Neurosurgeon	2	4	3	5
Intensive Care Specialist	5	8	8	16
Specialist Neonatologist	2	3	3	5
Dispensing Assistant	19	28	25	35
Respiratory Therapist	3	5	4	7
Executive Officer	4	8	7	16
Speech Therapist	2	3	2	3

3.8 STAFFING NORMS FOR DISTRICT/MUNICIPAL/METROPOLITAN HEALTH DIRECTORATES

Metropolitan, Municipal and District Health Directorates are nominally classified based on the prevailing politico-administrative classification. Staffing norms for MMDHDs are provided in Table 8.

Table 8: Staffing Norms for District/Municipal/Metropolitan Health Directorates

Category	District Health Directorate		Municipal Health Directorate		Metropolitan Health Directorate	
	Min	Max	Min	Max	Min	Max
Technical Officer (Disease Control)	2	3	2	3	2	4
Public Health Officer (Disease Control)	1	1	1	1	2	4
Technical Officer (Health Information)	2	2	2	3	2	3
Public Health Officer (Health Information)	1	1	1	1	1	2
Public Health Officer (Health Promotion)	1	1	1	2	2	2
Technical Officer (Health Promotion)	1	1	1	2	2	1
Public Health Officer (Nutrition)	1	1	1	2	1	2
Technical Officer (Nutrition)	2	3	2	3	1	2
Accountant	1	1	1	1	1	2
Finance Officer	2	2	2	3	2	3
Auditor	1	1	1	1	1	1
Driver	1	2	2	3	2	3
Estate Officer	1	1	1	2	1	2
Labourer	1	2	1	2	1	2
Public Health Nurse	1	2	1	2	2	3
Health Research Officer	1	1	1	1	1	1
Executive Officer (HR Officer)	1	1	1	1	1	2
Human Resource Manager	1	1	1	1	1	1
Administrative Manager/Health Services						
Administrator	1	1	1	1	1	2
Procurement Manager	1	1	1	1	1	1
Supply Officer	1	1	1	2	1	2
Pharmacist	1	1	1	1	1	1

3.9 STAFFING NORMS FOR REGIONAL HEALTH DIRECTORATES

Regional Health Directorates are not classified, thus generic staffing norms are provided in Table 9. However, it is envisaged that regional health directorates that serve larger populations may require additional staff as compared to those that serve a relatively fewer population but within the limits provided herein.

Table 9: Staffing Norms for Regional Health Directorates

CATEGORY	MIN	MAX	REMARKS
Clinical Engineering Manager	1	2	
Clinical Engineering Technologist	2	3	
Artisans (Plumber, Carpenter, Electrician)	3	6	
Estate Manager	1	2	
Estate Officer	1	2	
Accountant	4	6	
Auditor	1	2	
Finance Officer	3	5	
Administrative Manager	2	3	
Executive Officer	5	8	Including HR Officers
Human Resource Manager	3	6	
IT Manager	1	2	
Hospital Orderly	2	3	
Private Secretary	1	2	
Procurement Manager	1	2	
Security Guard	3	5	For RHD only
Biostatistics Officer/Public Health Officer			
(Health Information)/Statistician	2	3	
Technical Officer (Health Information)	5	8	
Public Health Officer (Health			
Promotion)/Health Promotion Manager	1	2	
Technical Officer (Health Promotion)	2	3	
Nutrition Officer/Public Health Officer		2	
(Nutrition)	1	2	
Technical Officer (Nutrition)	2	3	
Public Health Officer (Disease Control)	l	2	
Technical Officer (Disease Control)	1	2	
Pharmacist	1	2	
Public Health Nurse	2	3	
Registered General Nurse (Not below PNO)	2	4	
Registered Midwife (Not below PNO)	1	2	
Health Planner	1	2	
Health Research Officer	1	2	

CATEGORY	MIN	MAX	REMARKS
Storekeeper	3	5	
Supply Manager	1	2	
Supply Officer	1	2	
Driver	10	15	
Mechanical Engineer	1	2	
Mechanical Engineer Technologist	1	2	
Transport Manager	1	2	
Transport Officer	1	2	
REGIONAL MI	EDICAL ST	ORES	
Pharmacist	3	4	Where production is done, the maximum is 6
Pharmacy Technician	2	3	Where production is done, the maximum is 7
Supply Manager	1	2	
Supply Officer	3	4	
Hospital Orderly	2	3	
Stenographer Secretary	1	1	
Security Guard	2	3	
Accountant	1	1	
Finance Officer	1	1	
REGIONAL MECHA	ANICAL W	ORKSHO	P
Mechanical Engineering Manager	1	2	
Mechanical Engineering Technologist	3	5	
Artisan (Electrical)	1	2	
Artisan (Mechanical)	4	7	
Accountant or Finance Officer	1	1	To ask for expert advise

3.10 STAFFING NORMS FOR HEALTH TRAINING INSTITUTIONS

Health Training Institutions are not categorised; hence a generic staffing norm is provided in Table 10 for selected categories of staff. However, when new programmes are to be introduced in an existing HTI, the formula below should be used to adjust the aggregate number of tutors needed in the institution (but within the limits of the norm provided herein).

Table 10: Staffing Norms for Health Training Institutions

Number of Tutors = 1.44 + (1.72 X No. of Programmes) + (1.97 X Number of Classrooms)

CATEGORY	MINIMUM	MAXIMUM	REMARKS
Accountant	1	2	
Administrative Manager	1	2	
Catering Officer	2	3	
Driver	2	4	
Finance Officer	3	5	
Hostel Warden	1	3	
IT Manager	1	2	
Labourer	2	5	
Supply Officer	1	1	
Librarian	3	5	
Security Guard/Watchman	7	12	
Executive Officer	2	4	
Health Tutors	13	51	See formula above

Appendix 1: How to make adjustments in the staffing requirements using the norms

Following statistical test runs, the following guide may be used to make projections for staffing requirements in a facility based on this staffing norm.

- 1. 15% change in workload leads to about 23. 5% change in Staffing requirement
- 2. 10% change in workload leads to 14. 3% change in staffing requirement
- 3. 5% change in workload leads to 6.3% change in staffing requirement

Where the workload change far exceeds 15%, it is advisable to check if the workload category has changed or not

Any percentage change in workload within the points of 5%, 10% and 15% should assume the status quo of the lower level. For example, 8% increase in workload will assume the staffing requirement at 5%.

Appendix 2: Guidance for disaggregating the staffing norms ceilings

Grade Levels	Proportion of Staffing Norm
Grades with Three (3) Levels	
Level 3	10%
Level 2	40%
Level 1	50%
Grades with Four (4) Levels	
Level 4	10%
Level 3	20%
Level 2	30%
Level 1	40%
Grades with Five (5) Levels	
Level 5	05%
Level 4	10%
Level 3	20%
Level 2	30%
Level 1	35%
Grades with Seven (7) Levels	
Level 7	By Appointment
Level 6	03%
Level 5	07%
Level 4	10%
Level 3	20%
Level 2	30%
Level 1	30%