

**COMMUNIQUE ISSUED BY ASSOCIATION OF HEALTH SERVICES  
ADMINISTRATORS-GHANA (AHSAG) AT ITS 29<sup>TH</sup> ANNUAL  
GENERAL MEETING (AGM) HELD FROM 29<sup>TH</sup> NOVEMBER  
TO 3<sup>RD</sup> DECEMBER 2004 AT BUSUA BEACH RESORT,  
WESTERN REGION**

The Association of Health Services Administrators-Ghana (AHSAG) at its 29<sup>th</sup> Annual General Meeting held at Busua Beach Resort in the Western Region from 29<sup>th</sup> November to 3<sup>rd</sup> December 2004, on the theme “Public Procurement Management –A tool for Improving Efficiency in the Health Sector” and having deliberated on other topical issues,

- Wishes to congratulate the Government for passing the Public Procurement Act to check various acts of malfeasance and lack of transparency in the procurement process.
- Recognizes the timely constitution of the Public Procurement Board to effect the implementation of the law.
- Takes notice that the Act has come at the right time to help streamline the procurement of resources for the efficient health service delivery, particularly the smooth implementation of the National Health Insurance Scheme (NHIS).

We, however, note with concern the absence of the legislative Instrument (LI) that would operationalize the Act to remove ambiguities that Ministries, Departments and Agencies might encounter in its implementation.

The Association wishes to appeal to Government to expedite action on the LI.

We further suggest the intensification of public education and the commitment of District Assemblies to the successful and effective implementation of the scheme.

- AHSAG further takes notice of the absence of the necessary legislative instrument to effectively operationalize the Ghana Health Service and The Teaching Hospitals Law, Act 525, 1996. The absence of the LI has culminated in serious implementation constraints particularly in the Ministry of Health /Ghana Health Service split. Unclear definition of functions has resulted in the duplication and conflict of roles which militate against efficiency and effectiveness of the two bodies.

As a matter of urgency, government should hasten without further delay, the passing of the LI which is long overdue to halt the apparent uneasiness among the Ministry and its agencies.

- We have noted with satisfaction the introduction of the deprived areas incentive package in the health sector. However, we wish to draw government's attention to the exclusion of some deprived areas and a section of the health delivery team and its potential negative consequences on this otherwise good intended objective of retaining staff in these areas.

To forestall the breakdown of team spirit it is recommended that a holistic revision of the areas and the categories of staff to benefit must be considered as one of the key proposals submitted to the Ministry.

- The Association admits that there are a number of difficulties associated with the implementation of the Additional Duty Hours Allowance (ADHA). Comprehensive long term solutions that will be acceptable to all groups must be found to these problems.

Any panic reactions to demands that will skew the scheme in favour of any group of health workers will aggravate the problem. On this note, we wish to advise that "what touches all, must be approved by all".

- AHSAG recognizes the important role of human resource in health care delivery in the country and appreciates government efforts at implementing some of the recommendations of the National Human Resource Forum held in 2003 under the auspices of the Ministry of Health.

Nevertheless, we call on government not to relent on its efforts at implementing the rest of the recommendations with total commitment and zeal to ensure the provision of total quality health care delivery to Ghanaians.

**LONG LIVE AHSAG,**

**LONG LIVE MOH/GHS,**

**LONG LIVE GHANA.**