



REPUBLIC OF LIBERIA
Ministry of State for Presidential Affairs
Executive Mansion
Monrovia, Liberia

2025 PMCS Quarterly Performance Reporting Template

SECTION 1: BASIC INFORMATION


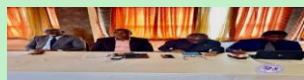
Name of Institution	Ministry of Health - MOH
Reporting Period:	April – June 2025 (Quarter 2)
Date of Report:	July 10 ,2025

SECTION 2: TARGET-BY-TARGET REPORTING

Target Area 1: Strategic Plan Development & Implementation

2025 SMART Target Set: _____

Current Status of Target: ☐ On Track ☐ Behind Schedule ☐ At Risk

Q2 Activities/ Milestones Planned	Q2 Activities Completed	% Implementation	Evidence Available
1. Carried out community engagement among selected community leaders (county superintendents, commissioners, and chiefs) in 15 counties by the end of the second quarter of 2025	Completed	100% completed with copy of report available	Reports of activity available for verification
2. Actuarial study, Analysis, and report finalized 100% by the end of the second quarter of 2025	Completed	100% completed with copy of report available	
3. LHEF document 100% developed and submitted to the Cabinet/ MOS at the end of quarter 2025	Completed	100% completed with copy of report available	

Key Challenges	Actions Taken to Address Challenges	Action Plan
<ol style="list-style-type: none"> 1. Delay in stakeholders buy-in and general acceptance to move the process speedily. 2. Lack of Trained county and Hospital staff to implement CRDF and Cost Sharing Activities 	<p>MOH through the Health Financing Unit was persistent and consistent in advocating the necessity and relevance of the LHEF and lifting its significance as a potential strategy for the attainment of Universal Health Coverage for the Liberian people.</p> <p>On-site training during the facilities assessment</p>	<ul style="list-style-type: none"> • Submission of the bill to the Legislature by the president for passage into law • Launch of the LHEF for implementation • Developed and validated the training and operational manuals • Conducted the Training of Trainers (ToT) for county-level staff to be able to roll out to district-level staff • Continuous refresher training quarterly for implementers • Assigned a CRDF focal person to each county for oversight and reporting
3. CRDF Staff working without the requisite office equipment and logistics	<p>Arranged for desks and chairs from the Eye Health program to be used temporarily</p> <p>Coordinate with other departments to use their vehicle for CRDF field works and assessments.</p>	<ul style="list-style-type: none"> • Through the procurement Unit, request for office supplies and equipment • Included in the budget is, vehicle purchase to enhance logistics and movements
4. Facilities with limited storage conditions and space	Assessed the different facilities implementing the CRDF	<ul style="list-style-type: none"> • Include in the CRDF Annual budget section for minor renovation of storage facilities for facilities that do not meet the requisite drug storage capacity
CRDF Staff are all volunteers	Continuously motivate the staff to keep working	<ul style="list-style-type: none"> • Working closely with the HR department to have the staff on payroll for incentives and motivation

Target Area 2: SDC Implementation

2025 SMART Target Set: _____

Current Status of Target: ☐ On Track ☐ Behind Schedule ☐ At Risk

Q2 Activities/ Milestones Planned	Q2 Activities Completed	% Implementation	Evidence Available
1. Mentored 126 RMNCAH service providers from 30 health facilities in seven counties by the end of quarter two, 2025	completed	80% accomplished 101 RMNCAH service providers from (24) health facilities out of 30 facilities in six(6) counties were mentored during the period.	
2. Trained 330 Maternal and newborn healthcare professionals on RMNCAH service provision in 11 counties of selected facilities by the end of the Second quarter of 2025	completed	95% accomplished (314) out of 330 Maternal and newborn healthcare professionals were trained on RMNCAH in 11 counties.	  
3. Reduced reported neonatal deaths from facilities and the community by 5% by the end of 2025	NOT COMPLETED	Service data report in MOH system is still ongoing to determine percent of reduction. Final service report will be available by the 17 of the month of July	
4. Reduced morbidity and mortality due to	Completed	100% accomplished	

Q2 Activities/ Milestones Planned	Q2 Activities Completed	% Implementation	Evidence Available
untreated mental, neurological, and substance use disorder by 40% through capacity building for primary health providers in mhGAP by the end of the second quarter of 2025		with distribution of psychotropic medications across the 15 counties and enrollment of 205 at-risk youths (males) and females) into outpatient and inpatient substance use disorders treatment fully accomplished.	Report on the accomplishment of this activity with photographs are available for verification
5. Supply 30% of public health facilities with Mental health ledgers across the country by the end of the second quarter 2025	Planned activities near completion	97.5% completed. 390 mental health service ledgers printed out of 400 targeted. Partner commitment exists for the printing of the rest of the ledgers.	Sample of the ledgers is available for verification

Key Challenges	Actions Taken to Address Challenges	Action Plan
1. Limited funding to implement activities	1.Continuous advocacy to increase timely funding for the treatment of MNS conditions	1. Establish more public-private partnerships to increase resource availability for MNS services
2. Delayed disbursement of appropriated funds to implement activities in time	2. Partnership with private service providers to expand MNS services	2. Increment in budgetary allotment to the Mental Health Unit 3. Establish more public-private partnerships to increase resource

Key Challenges	Actions Taken to Address Challenges	Action Plan
		availability for MNS services.

Target 3: Resource Mobilization

2025 SMART Target Set: _____

Current Status of Target: ☐ On Track ☐ Behind Schedule ☐ At Risk

Q2 Activities/ Milestones Planned	Q2 Activities Completed	% Implementation	Evidence Available
1. Increase Birth registration and issuance of birth certificates	Issuance of 6577 birth certificates from January to June 2025 in a total value of \$3,288,500.00LD	100% implemented	Report and data on the accomplishment of birth registration is available for verification
2. Increase death registration and issuance of death certificates	Issuance of 280 death certificates from January to June 2025 in a total value of \$140,000.00LD	100% implemented	Data on death registration is available to validate the achievement
3. Administer yellow fever vaccination and issue yellow Books	Issuance of 10655 yellow book from January to June 2025 in a total value of \$14,100.00 USD and \$7,423,255.00 LD	100% implemented	Report is available to prove the achievement

Key Challenges	Actions Taken to Address Challenges	Action Plan
Limited financial resources to timely procure logistics for printing of certificates	Engaging with both Government and Partners to make available adequate resources to ensure printing of certificates	

Target 4: Systems Efficiency Improvement**2025 SMART Target Set:** _____**Current Status of Target:** ☐ On Track ☐ Behind Schedule ☐ At Risk

Q2 Activities/ Milestones Planned	Q2 Activities Completed	% Implementation	Evidence Available
1. 100% of public health facilities supplied with essential medicines, including program commodities, across the country by the end of the second quarter of 2025	Completed	100% accomplished during the quarter Target fully achieved as planned. All public health facilities supplied with essential medicines, medical consumables, and program (malaria, HIV, &TB) commodities across the country	Report for supply chain activities available for verification Photographs of facilities store room with stock of essential medicines are also available
1. Procured and deployed 15 microscopes and 10 complete blood count analysers 10 Chemistry machines and 25 urine analysers for the primary healthcare diagnostic service by the end of the second quarter of 2025	Completed	90% accomplished equipment Distributed so far are as follow: CBC Analyzer-14pcs Semi-Automated Chemistry Analyzer-13pcs	A report for the accomplishment of the activity and photographs are available for verification. A list of benefiting counties and facilities is also available for verification.
	Completed	Fully Automated Chemistry Analysers-2pcs Urine Centrifuge-9pcs Hematocrit Centrifuge-10pcs Water Distiller-24pcs Hot Air Oven-25pcs Water Bath-24pcs	

Q2 Activities/ Milestones Planned	Q2 Activities Completed	% Implementation	Evidence Available
		Microscopes-25pcs MILAB Malaria Analyzer-2pcs Blood Bank Refrigerator-2pcs	

Key Challenges	Actions Taken to Address Challenges	Action Plan
Inadequate availability of reagents	This issue has been discussed at the appropriate level to ensure the procurement of needed reagents	Procurement of reagents

Target 5: Institutional Capacity Building

2025 SMART Target Set: _____

Current Status of Target: ☐ On Track ☐ Behind Schedule ☐ At Risk

Q2 Activities/ Milestones Planned	Q2 Activities Completed	% Implementation	Evidence Available
1. Enrolled 501 Volunteers on the GOL Payroll at the end of the second quarter	Completed	100% (501) accomplished volunteers enrolled on government payroll as planned	List of volunteers enrolled on government payroll during the quarter available for verification

Key Challenges	Actions Taken to Address Challenges	Action Plan
1. Support for Internet connectivity for HR support in the 15 counties,	Senior management has been informed through the quarterly report.	Plan is underway for the provision of stable internet connectivity in the fifteen counties. Communication cards provision for data is done to secure internet for now

Key Challenges	Actions Taken to Address Challenges	Action Plan
2. The inability of employees to submit relevant and accurate documents at both county and central levels on time.	Verification of employee documents at the county and central levels. Mentoring and coaching through supervision.	Educate employee on the importance of submission of their document for records keeping

SECTION 3: Managerial Indicator Matrix

Purpose:

This matrix tracks key internal management practices that drive effective implementation of institutional targets. It ensures accountability for internal leadership discipline, operational responsiveness, and compliance.

Managerial Performance Indicators – 2025

#	Performance Criteria	Unit of Measurement	Weight (%)	Current Status (as at June 2025)	Target for 2025	Performance Task Owner
1	Weekly Senior Management Meetings Held	Number of meetings held in Quarter (out of 12 weeks)	20%	5 Meetings held with minutes and attendance (50%)	10 Meetings	Head of Institution
2	Development and Compliance with Annual Work Plan (AWP)	% of 2025 AWP Activities implemented	20%	60% Implemented. The required technical and financial support was delayed.	80% compliance	Planning & M&E Division
3	Resolution of Public Complaints	% of complaints resolved within 15 working days	20%	Nearly 90% of public complaints were resolved by OGC.	≥85% of complaints resolved within the timeframe	Service Delivery Unit
4	Response Rate to Audit Queries and Implementation of Recommendations	% of audit recommendations responded to and implemented	20%	(73.3%) 47.7% & 25.6% implemented fully and partially, respectively.	≥90% response and implementation rate	Finance/ Admin
7 8 5	Compliance with Procurement Procedures	% of procurement actions compliant with PPCC	20%	100% Compliance. All bids sent to	≥95% compliance	Procurement Officer / Admin

		standards		PPCC received no objections. See the link for procurement evidence		Department
		Total Weight	100%			

SECTION 4: SUPPORT REQUIRED & SIGNATURES

Support Requested from PMCS Team/Cabinet Office:

☐ Technical Assistance (specify): _____

☐ Training (specify): _____

☐ Resources (specify): _____

☐ Other (specify): _____

Verification

Prepared by: Joe S. Kerkula, Sr.

Position: Director of M&E

Signature: 

Verified by: Atty. Malayah Tamba Chieyoe

Position: Deputy Minister for Planning, Policy and M & E

Signature: 



Submission Notes

- Reports are due by the **10th of the month** following each quarter.
- Attach all supporting documents referenced in the report.
- For technical assistance, contact the PMCS Directorate:
 - **Jamaima:** 0770366637
 - **Gerald:** 0777291614 / 0886208557
 - **Email:** liberiapmcs@gmail.com