



REUBLIC OF LIBERIA

Ministry of Health

SERVICE DELIVERY CHARTER

Published March 2025



FORWARD



This Service Delivery Charter is a declaration of commitment of the Ministry of Health to provide guidance to services that our clients/patients should expect. The Charter outlines the values, core services and the standard of service provided by the Ministry of Health and its facilities.

The Charter also outlines rights and responsibilities of both our clients and service providers and how our clients can lodge complaints and concerns whenever they have any grievance against our staff or our services

This charter should be upheld by all MOH employees and third-party entities working on behalf of the Ministry specifically health service providers who interact daily with clients/patients. It makes public the services the MOH provides in keeping with its statutory mandates. The Ministry has zero-tolerance stance on fraud, corruption, and unethical conduct. This charter is an instrument intended to further emphasize our commitment to provide quality services to the people of Liberia and should therefore be adhered to by all service providers within the health system.

We want to encourage all users of public health facilities and other points of service under the MOH to report violation through the established channel. All reported allegations will be thoroughly investigated, and appropriate actions will be taken.

The Ministry calls on every employee and partner to uphold the principles and values outlined in this charter and foster a healthcare system built on integrity and collectively ensure that all actions are guided by the ethical imperatives to protect the well-being of those we serve.

I, therefore call on all stakeholders to use this Charter as a life tool for enhancing people centered service delivery and effective path way for peaceful and constructive engagement between our clients/patient and service providers at all service delivery points of the Ministry.

A handwritten signature in blue ink, appearing to read 'L. Kpoto', written over the printed name of the Minister of Health.

Hon. Louise Mapleh Kpoto, MD, MPH, MMED-OGBYN, Ph.D, FWACS
Minister of Health

ACKNOWLEDGEMENT



The development of the Ministry of Health Service Delivery Charter represents a significant milestone in our commitment to maintaining the highest standards of integrity, accountability, and transparency in all aspects of our work. This charter reflects our dedication to providing quality information to the public regarding MOH service provision so as to create access and utilization of our service appropriately without hardship and waste of time.

We extend our sincere appreciation to the many individuals whose contributions were instrumental in the development of this SDC. First, we acknowledge the leadership of the Ministry of Health for its unwavering support and guidance throughout the process.

We also extend our gratitude to the MOH Focal Persons on the Performance Management and Compliance System who initiated the development of this documents, and ensured that the charter captures the key services the MOH provides and to keep the public informed about where they can access the needed health services promptly. Your diligence and professionalism have contributed to the development of a robust and comprehensive charter that will serve as a critical tool in guiding and keeping our client informed when seeking health and other services that Ministry provides.

Finally, we recognize the vital role of every Ministry employee particularly our service providers in maintaining good relationship with our clients/Patient and ensure that they receive quality service at all level of the health system.

Together, we remain committed to upholding the principles and values outlined in this charter and ensuring that the Ministry of Health continues to operate with the highest level of ethical standards.

A handwritten signature in blue ink, appearing to read 'M. Tamba Chieyoe', written in a cursive style.

Hon. Atty. Malayah Tamba Chieyoe
Deputy Minister for Policy, Planning and M&E

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DEFINITION OF ACRONYMS AND ABBREVIATION

ACT	Artemisinin-based combination therapies
ANC	Anti Natal Care
ARV	Anti retrovirus
BVS	Birth and Vital Statistics
CEMONC	comprehensive emergency Obstetric Neonatal Care
DOT	Direct Observation Therapy
EPHS	Essential Package of Health Services
HIV	Human immunodeficiency virus
HPV	Human papilloma virus
ICCM	Integrated community Case Management
MCCOD	Medical cost of cause Death
MOH	Ministry of Health
NCD	Non-Communicable
NTD	Neglected Tropical Diseases
PMTCT	Prevention of Mother to Child Transmission
RMNCAH-N	Reproductive Maternal Neonatal Child Adolescent Health-Nutrition
SDC	Service Delivery Charter
UHC	Universal Health Coverage
WHO	World Health Organization

1 Introduction

This Service Delivery Charter (SDC) is a demonstration of commitment and reflection of the Ministry of Health desires to inform and educate the citizenry regarding services that are provided to clients/patients, and the citizens as a whole. The charter describes and outlines Essential Package of Health Services and standards of service delivery in the health system and other relevant services other than health that the MOH provides.

The Charter details the priority services that the MOH provides and the various levels at which these services are provided. Health services are provided at three levels in the country. These levels are primary which includes community, clinics, and health centers. The secondary level includes service provided at county hospital and the Tertiary level that includes services provided by major referral hospital in the country. This charter presents clearly and in a detail model the kind of services that clients/patient should expect at each level stated above so that the clients/patients access and utilize the services base on their health needs.

The charter explains procedures for feedbacks on service provision for redress and appropriate adjustment in service provision and staff interaction with their clients/patients as well as grievance mechanisms for those who are not satisfied with services offered or provided to them. The charter also intended to increase information available to clients/patients of MoH and set standards for transparency accountability and responsibility in public health services. The charter is to facilitate and guide MOH Clients to access services in an organized and expeditious manner at the proper level of service to avoid tremendous time wasting and delays in services delivery processes.

In line with its policy and plan to provide services that are responsive to the needs of the citizens, the MOH commits to informing the citizens about services that are available for them and what their rights and obligations are in accessing these services. The MOH remains committed to providing service to the Liberian people with quality and in an equitable manner towards the attainment of universal health coverage.

1.1 PURPOSE OF THE SERVICE DELIVERY CHARTER (SDC)

To educate and conscientize the Liberian citizenry on the kind and type of services that the Ministry of Health providers in line with its statutory mandates

To clarify and explain to our clients about the services that they should expect to receive at each level of the health system

To sensitize the citizens who are our clients on their rights and responsibility when seeking service at the facilities

To outline the rights, responsibilities and limitations of our service providers

To explain to our clients how they can make suggestions or file complaints where needed about our service delivery and attitude of our service providers.

To build friendly relationships between our clients and service providers during their interaction with one another during service provision at the facilities

1.2 General Objective

To provide clear service commitments that enhance good relationship and interactions between MOH service providers and their clients/Patients at all public facilities at all levels of the health system toward the attainment of Universal health coverage and health security particularly for the vulnerable

1.2.1 Specific Objectives

To promote a culture of quality standards of health services and responsiveness, ensuring public services are safe and delivered effectively and efficiently.

To Establish a pathway of guidance and awareness to patients/clients and enable them seek health at the appropriate level of the health system based on their medical conditions and health needs without wasting time

Increase access to quality health services at all public facilities for the improvement of the health and satisfaction of the Liberian people

Empower our clients/Patient and acquaint them with their rights and responsibilities when seeking health at public facilities

To improve access to and utilization of quality essential services provided by the MOH at all levels of care to all persons, regardless of gender or social status through

2 Who we are?

The Ministry of Health is the government entity established by law as amended in 2015, approved 2016 and published in 2017 known by Law as the Ministry of Health or the Ministry. It is responsible for the formulation, implementation, monitoring and evaluation of health policy, plan and standards. It coordinates the delivery of decentralized medical care in public health facilities, issues birth, Vaccines and death certificate at central Office, County Health team and at select service Centers. The MOH develops health man power, undertake preventive and promote health

services including specific health interventions. Some key functions of the Ministry include but not limited to the following:

- Maintain national health management information system which includes data relating to birth, death and burial
- Conduct health related research
- Provide medical services and treatment through public health facilities and deliver health promotion services.
- Deliver preventive service and promote family, environmental and occupational health services
- Coordinate with health care institutions and stakeholders and donor community to support health care intervention in the country.

2.1 Structural organization of the Ministry and Summary of function

The Ministry is structurally organized with the inclusion of

- a. The Office of the Minister,
- b. Department of Policy, Planning and M&E
- c. Department of Health services
- d. Department of Administration

The office of the Minister is responsible for oversight in the execution of the core functions and responsibilities of the MOH with the assistance of the three departments listed above and each headed by a deputy minister

2.1.1 The Department of Policy, Planning and M&E

This department is responsible for the following but not limited to

- Prepare and coordinate the preparation of sector policies and plans
- Adapt national planning guidelines and issues sector policies and plans
- Coordinate sector M&E plan implementation among others among others.

2.1.2 Department of Administration

- Is responsible for administering the Ministry's financial management system including budgeting, petty cash management, financial accounting and reporting and carry out internal and external audits ensuring that they are consistent with the public financial management
- Administer HR management and procure goods and services
- Manages general service, performs duties assigned by the Minister from time to time among others

2.1.3 Department of Health Services

Is responsible for formulating program policies and promote implementation of public health

- Work in close collaboration with the Director general of National Public Health Institute NPHIL
- Coordinate the development of Nation standards, guidelines and plan for implementation of programmatic activities and public health interventions
- Ensure the development and periodic revision of national policy, treatment guidelines and standard related to pharmaceutical supplies and service
- Provide effective supervision over country health services

Ensure provision of quality curative and rehabilitation of health care service through accessible and quality medical and services and adequate and viable pharmaceutical product and laboratory services are accessible, promote collative and mutually beneficial coordination with complementary medicines services among others

2.2 Goal: The goal of this charter in line with the MOH Policy is to improve the health and wellbeing of all people in Liberia through the incremental delivery of the EHPS II, starting with the priority package for UHC based on available resources.

2.3 Mission

The mission of the MoH service delivery charter in line with its policy is to transform the health sector into an effective, efficient and equitable system for delivery of quality health services towards attainment of universal health coverage (UHC).

2.4 Vision

To have a healthy population, with particular protections for the poor and vulnerable, for the attainment of equitable growth and sustainable development.

3 Principles and values

3.1 Health as a human right:

Access to quality health care is a basic human right and is a precondition for individual and societal development.

3.2 Equity:

All people in Liberia shall have person-centered care and equal access across the life course to effective healthcare services without discrimination.

3.3 Quality of Care and safety:

The delivery of quality services that meet the seven quality dimensions (i.e., safety, timeliness, efficiency, effectiveness, equity, people-centered care, and integration) is fundamental to improving the health and wellbeing of the population.

3.4 Gender Sensitivity and Responsiveness:

Understand the role of gender and the implication in health and health care delivery at all levels of the health system ensuring services are accessible, available and acceptable to all Liberians, regardless of gender or social status with consideration of women, girls and integrates other socially marginalized group in the communities.

3.5 Efficiency

Allocated resources to various layers and levels of the health system based on need demonstrated by evidence to get maximum output and outcomes from available resources.

3.6 Accountability

Take responsibility for what we do in the health system in providing service to clients and for decisions and actions that we take.

3.7 Transparency:

Openness and honesty in interaction coordination and decision making

3.8 Impartiality

We act solely according to the merits of the case of our clients and serve fairly without any discrimination.

3.9 Family and People-Centered care:

The health care delivery system promotes health programs targeting families to prevent and control illnesses. Services benefit families, communities, individuals not just one disease or condition or patient.

Emphasize the well-being all citizens and foreigner alike within our borders with focus mainly on reproductive maternal newborn child adolescent health and nutrition (RMNCAH_N)

Encourages and values community participation and inputs to identify health priorities and needs expressed by the population

3.10 Inclusive and coordinated partnership:

The MoH is committed to forming multi-sectoral partnerships to ensure that health is represented in all policies and continue during implementation of program and service deliveries.

4 Rights Of Clients

The Rights of patients/client of the MOH include the following:

- The patients/clients have the right to be served based on their health condition and in a confidential manner in line with existing health policies and standards.
- Clients/patients are to be received, listened to, and served with respect in the earliest possible time,
- Clients/Patients are to be served in a friendly and saved environment
- Clients/Patients will be given clear information and education regarding their health and related needs including medicines, procedures and referrals where needed.
- Clients/Patients provided with Client/patients centered, quality and compassionate care.
- To complain and to be complained to authority

4.1 Responsibility of Clients/Patients

- To render and treat MOH service providers with courtesy and respect;
- To give accurate information regarding their health condition when requested;
- To promptly respond to requests for information by service providers
- To be kind and patient with care provider/ health worker as they provide services
- Not to offer any gifts, favors or inducements to our staff or solicit the same from them; and
- Adhere and comply with procedures and or instructions in place at the service delivery points as provided for patients by service providers, governing the provision of the services;
- Not to endanger the health, safety and security of the health care workers and other clients or patients in their care.

5 Rights and Responsibilities of Service Providers

5.1 Rights of Service Providers

- Right to quality standards of working environment with adequate and available resources

- Right to associate freely to advocate their interest and be given due courtesy in performing their duty
- Right to refuse to perform a procedure based on their morals:
- Right to patient medical information and to maintain patient confidentiality
- Right to be free from discrimination based on race gender, religion etc.
- Right to acceptable compensation for their works

5.2 Responsibilities of Service Providers

- Liability for their action in providing service
- Responsible to provide quality and ethical care, maintaining confidentiality, and obtaining informed consent.
- Diagnose and provide the appropriate Treatment.
- Patient Care through administering medications, performing procedures, and monitoring their condition.
- Preventative Care by promoting health and preventing diseases through vaccinations, screenings, and health education.
- Educating and Counseling patients and their families about health conditions, treatment options, and healthy behaviors.
- Coordination of Care with other professionals
- Advocates for patient to receive best care
- Maintaining a safe and respectful environment for patients
- Adhere to ethical principles and standards of care.

6 How To Complain and Compliment

Clients/patients are encouraged to provide feedback or complaints or compliments about our services. When making complain or complementing our service we ask the client/Patients to do the following:

- Provide personal details such as full names, phone number and address. This will enable us to respond to your complaint promptly and appropriately
- State clearly why you are happy or not happy with the service or conduct of our staff.
- Clearly State what you want to be corrected or improved if you are not satisfied with the service or staff conduct in an honest manner

- Say suggestion boxes will be made available at service center or health facilities and key accessible only to district health officer who supervises the facility- for PHC facilities or the Medical director for hospital and supervisors for other service centers.
- Complain should also be addressed to Administrator for the hospital and Health Center or to the District Health Officer for PHC/ clinics.
- In case of a serious complaint, Client could address the complaint to the County Health Officer or the Chief Medical Officer of Liberia who is the deputy Minister of Health for Health Services at the SKD Boulevard Congo Town Office in case the CHO delay or not responsive to said complaint

6.1 How we Deal or handle Queries and Complaints

Complain from our clients/patient is consider paramount and will be dealt with expeditiously through the appropriate redress level.

- Complain against any staff at facility must go to the Officer in charge for redress.
- In the event such complain is not handle properly the client can proceed to the district health officer for redress
- All serious cases that are life threatening arising from ethical impropriety shall be intervene by the Central MOH through the Minister for appropriate redress
- Our clients are advised not to resolve to legal action at first option but to the Central Ministry with any serious grievance through the Office of the Honorable Minister of Health or Chief medical Officer and Deputy Minister for Health services

7 Services MOH offers to patients /clients and the Liberian people

In line with our policy, principles and values the MOH provides EPHS for the Liberian people towards the attainment of Universal Health Coverage (UHC) in a prioritized and cost-effective way that afford the greatest impact on major health burdens in Liberia and the core of interventions are focused on the following cluster for the Liberian people.

- (1) Reproductive, maternal, newborn, child, and adolescent health and Nutrition
- (2) Communicable diseases
- (3) non-communicable diseases
- (4) Health Promotional and Preventive services
- (5) Mental health
- (6) Emergency preparedness and response.

7.1 Standard of Service

The above cluster services are provided at population level, community level, health clinics, health centers, district and county hospitals and tertiary hospitals. The table below presents a detailed description of the minimum standard of services provided by the MOH at different levels of the health system. Services are provided from the Communities up to tertiary level. For patients' satisfaction and to avoid waste of time each service is clearly spelt out and the level or locations of the services are stated to guide health seekers/Patients. In conformity with the law and mandates and our core values, we remain committed to providing services in accordance with the following standard

Intervention Title	Delivery Platform
IEC/BCC on immunization	Population- Based
IEC/BCC on preventing malaria transmission	Population- Based
IEC/BCC on spread of filariasis, symptoms and case management	Population- Based
Mass media messages concerning healthy eating and exercise	Population- Based
Mass media messages concerning substance abuse	Population- Based
Conduct a comprehensive assessment of International Health Regulations (IHR) competencies using the Joint External Evaluation tool and develop, cost, finance and implement an action plan to address gaps in preparedness and response	Population- Based
Conduct simulation exercises and health worker training for outbreak events including outbreak investigation, contact tracing and emergency response	Population- Based
Decentralize stocks of antiviral medications in order to reach at- risk groups and disadvantaged populations	Population- Based
Develop and implement a plan to ensure surge capacity in hospital beds, stockpiles of disinfectants, equipment for supportive care, and personal protective equipment	Population- Based
Develop plans and legal standards for curtailing interactions between infected persons and uninfected population and implement and evaluate infection control measures in health facilities	Population- Based
Promotion of exclusive breastfeeding and complementary feeding by community health workers	Community
Detection of malnourished children and referral to appropriate level of care	Community
Detection and treatment of childhood infections (iCCM), including referral of danger signs	Community
Education on handwashing and safe disposal of stools	Community

Provision of vitamin A and zinc supplementation to children according to WHO guidelines	Community
Deworming of children	Community
School based HPV vaccination for girls	Community
Mass drug administration for lymphatic filariasis, onchocerciasis, schistosomiasis, soil-transmitted helminthiases, yaws, trachoma, and foodborne trematode infections	Community
Education campaigns for the prevention of gender-based violence	Community
Provision of condoms to key populations, including sex workers, men who have sex with men, people who inject drugs, transgender populations, and prisoners	Community
Routine contact tracing to identify individuals exposed to TB and link them to care	Community
DOTS and defaulters tracing	Community
Mass drug distribution, administration for NTDs	Community
Early detection and treatment of human African trypanosomiasis and leprosy	Community
Total treatment for yaws	Community
Identify and refer patients with high risk including pregnant women, young children, and those with underlying medical conditions	Community
In the context of an emerging infectious outbreak, provide advice and guidance on how to recognize early symptoms and signs and when to seek medical attention	Community
Focused use of vaccines for epidemic infections, such as COVID-19, meningococcus, Lassa fever, and others	Community
Antenatal and postpartum education on family planning	Clinic
Encouraging 8 or more ANC contacts at the facility with support from the community	Clinic
Management of miscarriage or incomplete abortion and post abortion care	Clinic
Management of anemia before and during pregnancy	Clinic
Screening and management of hypertensive disorders in pregnancy	Clinic
Screening and management of diabetes in pregnancy (gestational diabetes or pre-existing type II diabetes)	Clinic
Detection and management of fetal growth restriction	Clinic
Management of preterm premature rupture of membranes, including administration of antibiotics	Clinic

Management of labor and delivery in low-risk women (BEmNOC), including initial treatment of obstetric or delivery complications prior to transfer	Clinic
Counseling of mothers on providing thermal care for preterm newborns (delayed bath and skin-to-skin contact)	Clinic
Management of labor and delivery in low-risk women by skilled attendants, including basic neonatal resuscitation following delivery	Clinic
Provision of vitamin A supplementation to postpartum women	Clinic
HIV education and counseling for pregnant women, sex workers, people who inject drugs, men who have sex with men, and transgender individuals, and PLHIV and their partners	Clinic
PMTCT of HIV (Option B+) and syphilis	Clinic
In high malaria transmission settings, intermittent preventive treatment in pregnancy	Clinic
Provision of insecticide-treated nets to children and pregnant women attending health centers	Clinic
Management of severe malaria, including early detection and provision of rectal artesunate in community settings followed by parenteral artesunate and full course of ACT	Clinic
Pneumococcus vaccination	Clinic
Rotavirus vaccination	Clinic
Provision of cotrimoxazole to children born to HIV-positive mothers	Clinic
Treatment of skin pustules or cord infection	Clinic
Early detection and treatment of neonatal pneumonia with oral antibiotics	Clinic
Treatment of neonatal tetanus	Clinic
Jaundice management with phototherapy	Clinic
Childhood vaccination series (diphtheria, pertussis, tetanus, polio, BCG, measles, hepatitis B, Hib, rubella)	Clinic
Detection and treatment of childhood infections with danger signs (IMCI)	Clinic
In all malaria-endemic countries, diagnosis with rapid test or microscopy (including speciation) followed by treatment with ACTs (or current first-line combination)	Clinic
Early detection and response for yellow fever	Clinic
Evaluation and management of fever in clinically stable individuals using WHO IMAI guidelines, with referral of unstable individuals to first-level hospital care	Clinic

Diagnosis and treatment of typhoid	Clinic
Management of lymphedema	Clinic
Case reporting and management of bites and rabies	Clinic
Post gender-based violence care, including counseling, provision of emergency contraception, and rape-response referral (medical, psychosocial and judicial)	Clinic
Syndromic management of common sexual and reproductive tract infections (for example urethral discharge, genital ulcer, and others) according to WHO guidelines	Clinic
Partner notification and expedited treatment for common STIs, including HIV	Clinic
PrEP for discordant couples and others at high risk of infection such as commercial sex workers (in high prevalence settings)	Clinic
Screening for HIV in all individuals with a diagnosis of active TB; if HIV infection is present, start (or refer for) ARV treatment and HIV care	Clinic
Provision of aspirin for all cases of suspected acute myocardial infarction	Clinic
Screening and management of diabetes among at-risk adults, including glycemic control, management of blood pressure and lipids, and consistent foot care	Clinic
Treatment of acute pharyngitis in children to prevent rheumatic fever	Clinic
Opportunistic screening for hypertension for all adults and initiation of treatment among individuals with severe hypertension and/or multiple risk factors	Clinic
Management of depression and anxiety disorders with psychological and generic antidepressant therapy	Clinic
Management of epilepsy, including acute stabilization and long-term management with generic anti-epileptics	Clinic
Resuscitation with basic life support measures	Clinic
Suturing laceration	Clinic
Early detection and treatment of eye infection	Clinic
First aid management of eye injury	Clinic

Management of ear infection	Clinic
Management of severe acute malnutrition	Health Centre
Management of eclampsia with magnesium sulfate, including initial stabilization at health center	Health Centre
Management of maternal sepsis, including early detection at Health Center	Health Centre
Management of preterm labor with corticosteroids, including early detection at health centers	Health Centre
Management of neonatal sepsis, pneumonia, and meningitis using injectable and oral antibiotics	Health Centre
Surveillance and case reporting of immunization diseases	Health Centre
Among all individuals who are known to be HIV positive, immediate ART initiation with regular monitoring of viral load for adherence and development of resistance	Health Centre
For PLHIV and children under five who are close contacts or household members of individuals with active TB, perform symptom screening and chest radiograph; if there is no active TB, provide isoniazid preventive therapy according to current WHO guidelines	Health Centre
Diagnosis of TB, including assessment of rifampicin resistance using rapid molecular diagnostics (UltraXpert), and initiation of first-line treatment per current WHO guidelines for drug- susceptible TB; referral for confirmation, further assessment of drug resistance, and treatment of drug-resistant TB	Health Centre
Identify and refer to higher levels of health care patients with signs of progressive illness	Health Centre
Low-dose inhaled corticosteroids and bronchodilators for asthma and for selected patients with COPD	Health Centre

Psychological treatment for mood, anxiety, ADHD, and disruptive behavior disorders in adolescents	Health Centre
Management of schizophrenia using generic anti-psychotic medications and psychosocial treatment	Health Centre
Dental extraction	Health Centre
Management of non-displaced fractures	Health Centre
Relief of urinary obstruction by catheterization or suprapubic cystostomy	Health Centre
Surgery for ectopic pregnancy	District and County Hospitals
Management of antepartum hemorrhage	District and County Hospitals
Management of complications of labor, including operative delivery (CEmONC)	District and County Hospitals
Management of newborn complications, neonatal meningitis, and other very serious infections requiring continuous supportive care (IV fluids, oxygen, etc.)	District and County Hospitals
Full supportive care for severe preterm newborns	District and County Hospitals
Full supportive care for severe childhood infections with danger signs	District and County Hospitals
Early detection and treatment of early-stage cervical cancer	District and County Hospitals
Essential palliative care and pain control measures, including oral immediate release morphine and medicines for associated symptoms	District and County Hospitals
Expanded palliative care and pain control measures, including prevention and relief of all physical and psychological symptoms of suffering	District and County Hospitals
Referral of cases of treatment failure for drug susceptibility testing; enrollment of those with MDR-TB for treatment per WHO guidelines (either short or long regimen)	District and County Hospitals

Evaluation and management of fever in clinically unstable individuals using WHO IMAI guidelines, including empiric parenteral antimicrobials and antimalarials and resuscitative measures for septic shock	District and County Hospitals
Management of hemorrhagic fevers	District and County Hospitals
Medical management of acute heart failure	District and County Hospitals
Long term management of ischemic heart disease, stroke, and peripheral vascular disease with aspirin, beta blockers, ACEi, and statins (as indicated) to reduce risk of further events	District and County Hospitals
Management of bowel obstruction	District and County Hospitals
Management of head injury	District and County Hospitals
Appendectomy	District and County Hospitals
Fracture reduction and placement of external fixator and use of traction for fractures	District and County Hospitals
Hernia repair including emergency surgery	District and County Hospitals
Irrigation and debridement of open fractures	District and County Hospitals
Repair of perforations (for example, perforated peptic ulcer, typhoid ileal perforation)	District and County Hospitals
Resuscitation with advanced life support measures, including surgical airway	District and County Hospitals
Surgery for filarial hydrocele	District and County Hospitals
Trauma laparotomy	District and County Hospitals
Trauma-related amputations	District and County Hospitals
Tube thoracostomy	District and County Hospitals

Initial assessment, and prescription, and provision of individualized interventions for musculoskeletal, cardiopulmonary, neurological, speech and communication, and cognitive deficits, including training in preparation for discharge	District and County Hospitals
Management of pneumothorax and hemothorax	Tertiary Hospital
Specialized TB services, including management of MDR- and XDR-TB treatment failure and surgery for TB	Tertiary Hospital
Management of refractory febrile illness including etiologic diagnosis at reference microbiological laboratory	Tertiary Hospital
Treatment of early-stage breast cancer with appropriate multimodal approaches (including generic chemotherapy), with curative intent, for cases that are detected by clinical examination at health center	Tertiary Hospital
Treatment of early-stage childhood cancers (such as Burkitt and Hodgkin lymphoma, acute lymphoblastic leukemia, retinoblastoma, and Wilms tumor) with curative intent in pediatric cancer units or hospitals	Tertiary Hospital
Urgent, definitive surgical management of orthopedic injuries (for example, by open reduction and internal fixation)	Tertiary Hospital
Repair of club foot	Tertiary Hospital
Cataract extraction and insertion of intraocular lens	Tertiary Hospital
Prevention and relief of refractory suffering and of acute pain related to surgery, serious injury, or other serious, complex or life-limiting health problems	Tertiary Hospital
Referral of cases of treatment failure for drug susceptibility testing; enrollment of those with MDR-TB for treatment per WHO guidelines (either short or long regimen)	District and County Hospitals
Evaluation and management of fever in clinically unstable individuals using WHO IMAI guidelines, including empiric parenteral antimicrobials and antimalarials and resuscitative measures for septic shock	District and County Hospitals

Management of hemorrhagic fevers	District and County Hospitals
Medical management of acute heart failure	District and County Hospitals
Long term management of ischemic heart disease, stroke, and peripheral vascular disease with aspirin, beta blockers, ACEi, and statins (as indicated) to reduce risk of further events	District and County Hospitals
Management of bowel obstruction	District and County Hospitals
Management of head injury	District and County Hospitals
Appendectomy	District and County Hospitals
Fracture reduction and placement of external fixator and use of traction for fractures	District and County Hospitals
Hernia repair including emergency surgery	District and County Hospitals

7.2 Issuance of Birth and Death certificates

The Bureau of Vital Statistics has the responsibility to produce and issue birth certificates to persons born in Liberia regardless of their economic and social status. Every child born in Liberia is entitled to birth registration and certification, regardless of the parent's nationality and social - economic status. The Ministry of Health -Bureau of Vital Statistics (BVS) is the only institution of government within the MOH that is charged with the responsibility by Law to register and issue the following:

- a. Birth Certificate
- b. Death Certificate
- c. Authentication and Attestation letters for (Birth and Death Certificates)

7.2.1 Procedures/Steps in obtaining Birth and Death Certificates

- Obtain and fill out the Application form from the BVS office on the Bypass
- Complete a short interview process with the BVS staff/Interviewer
- Pickup date will be announced after the short interview for both Birth and Death Certificates

7.2.2 Birth Certificate

- a. Application Form
- b. One Passport size Photo (white background) of child or Applicant, this does not however apply to newborn, infant and children below five years of age.
- c. One Passport size any background for parent, guardian or family member that will or can attest for the applicant.
- d. Valid Identification Card (where applicable)
- e. Any other document as required by regulation or law

7.2.3 For Death Certificate

- a. Application Form
- b. Original Copy of Medical Certificate of Cause of Death (MCCOD) signed Medical Doctor
- c. Original Coroner Medical report (Situational / optional)
- d. One Passport Photo of Informant / relatives of deceased, Valid Identification Card etc
- e. Any other Document as required by regulation or Law

NOTE: The relatives (father, Mother, Husband, Wife, Uncle Sister, Brother, Aunt and etc) of the deceased present at the time of death will be required to produce evidence of death as determined by section 5.5 of the policy.

7.2.4 FEES

- Birth Certificate = LRD\$ 500.00
- Death Certificate = LRD 500.00
- Money (Orange or Lonestar)
- Letter of Authentication/Attestation = LRD 1000.00
- Reprint = LRD 2000.00

7.2.5 Exemption/No Payment fees

- All Children below 12 years are exempted from any Payment fees and are processed free of charge, this can be done at facility level, hospital, health centers, clinics) across the fifteen counties.

7.3 Yellow fever Card/Book

The Ministry of Health provides yellow fever vaccines to the public particularly among people of age 10 and above for protection against yellow fever. The vaccine is given at all major ports of entry in Liberia and the yellow book is issued to confirm that the client is protected against yellow

fever. The yellow book is required for traveling purpose therefore MOH ensures that the service is available to the Liberian people at all time.

To take the yellow fever vaccines and obtain the yellow fever card at the Central MOH and all ports of entry the procedures are as follow:

1. Fill out a registration book with your personal information as required ex. Name etc.
2. Pay the amount US\$ 5.00 or its equivalent in Liberian dollars (LRD 950.00)
3. Take the yellow fever vaccine if you have not taken it over ten years and obtain your card/yellow book
4. No clients obtain the yellow book without taking the vaccine when eligible
5. If a client has taken the vaccine and misplaced his card within 10 years that client can obtain a new card without the vaccination when proven

8 Where can we be found

In all counties the Ministry of Health can be reached through the County Health Team that are located in all the provincial/County capital and through District Health Team in each health districts in the country.

Joseph N. Togbah Sr.MD
Building SKD Boulevard
Congo Town

Ministry of Health
P. O. Box 10-9009
1000Monrovia 10, Liberia
West Africa

8.1 Contacts

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9 Reference

National Health policy and plan 2022-2031
Bureau of Vital Statistics