

Jackson F. Doe Memorial Regional Referral Hospital (JFDMRRH)



STRATEGIC PLAN 2025–2029

EXECUTIVE SUMMARY

This five-year strategic plan for JFDMRRH outlines a structured approach to elevate the hospital's capacity, clinical quality, academic standing, and sustainability. Aligned with Liberia's national health goals and global health strategies, the plan focuses on clinical excellence, human resource strengthening, digital transformation, and infrastructure expansion

Anchored in Liberia's National Health Policy and the Essential Package of Health Services (EPHS), the Strategy prioritizes six mutually reinforcing objectives: (1) improving clinical quality and patient safety; (2) expanding digital systems and data use; (3) strengthening human resource capacity and retention; (4) enhancing financial sustainability; (5) upgrading infrastructure and essential equipment; and (6) institutionalizing research and innovation. Together, these objectives aim to improve patient outcomes, operational efficiency, accountability, and long-term sustainability. The Strategic Plan is fully costed, with a total budget ceiling of USD 19.0 million over the implementation period, comprising USD 3.87 million in investment costs for infrastructure, systems, and capacity strengthening, and USD 15.13 million in recurrent costs for salaries, drugs, consumables, and routine operations. Implementation is phased to align with realistic resource mobilization, absorptive capacity, and service continuity. The Plan will be implemented under strong governance and accountability mechanisms led by the Board of Management and Hospital Management Team, with support from the Ministry of Health, development partners, insurers, and the private sector.

Robust monitoring, evaluation, and learning systems—including annual operational plans, performance dashboards, and mid- and end-term reviews—will ensure adaptive management and results delivery.

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The formulation of this strategic plan has been the result of the following inputs, including extensive data review and analysis examining the hospital financial systems and annual performance reports from 2023 to 2025. Nonetheless, a through environmental scanning was performed to assess the broader political, economic and technological landscape shaping health care delivery in Liberia and the Jackson F. Doe Memorial Hospital. Special thanks and appreciation go to the hospital leadership and various department heads who worked tirelessly to provide updates to inform the strategic planning process. Also, we would like to appreciate the following stakeholders including the city government mayor of Tappita, Tappita District Health Team, Youth community representative, religious community representatives, the Tappita Districts Development Association (TADDA) among others that participated in the strategic plan validation workshop.

List of Acronyms

Acronym	Full Meaning
ACLS	Advanced Cardiac Life Support
CEO	Chief Executive Officer
CME	Continuous Medical Education
CMO	Chief Medical Officer
EHR	Electronic Health Record
FGD	Focus Group Discussion
GoL	Government of Liberia
HMIS	Health Management Information System
HR	Human Resources
ICU	Intensive Care Unit
IPC	Infection Prevention and Control
IRB	Institutional Review Board
IRG	Internal Revenue Generation
JFDMRRH	Jackson F. Doe Memorial Regional Referral Hospital
KII	Key Informant Interview
KPI	Key Performance Indicator
M&E	Monitoring and Evaluation

Acronym	Full Meaning
MEL	Monitoring, Evaluation, and Learning
MFDP	Ministry of Finance and Development Planning
MoH	Ministry of Health (Liberia)
MRI	Magnetic Resonance Imaging
NDS	National Drug Service
NICU	Neonatal Intensive Care Unit
OKR	Objectives and Key Results
OPD	Outpatient Department

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1.0 Introduction and Hospital Profile

The Jackson F. Doe Memorial Regional Referral Hospital (JFDMRRH) was formally dedicated in 2011, representing a significant gift from the People's Republic of China to the People of Liberia. This institution was established to address a critical gap in the nation's healthcare infrastructure, standing as only the second tertiary healthcare facility in the country. It serves as the dominant regional referral hospital for the entire northern region of Liberia, providing essential and advanced medical services not only to Liberian citizens but also to a substantial number of cross-border patients from neighboring Ivory Coast and Guinea. The core functions of JFDMRRH are comprehensive and multifaceted, centered on the provision of tertiary clinical care. This encompasses a wide range of advanced medical services including specialized surgical, medical, pediatric, and obstetric care, supported by modern diagnostic capabilities.

Beyond its direct clinical role, the hospital functions as a vital teaching hub for the nation's health sector, training the next generation of medical doctors, nurses, and allied health professionals through formal partnerships with universities and the Liberia College of Physicians and Surgeons. Furthermore, JFDMRRH is committed to conducting clinical and operational research, generating valuable evidence to directly inform best practices in medical care and national health policy.

The hospital has a financial autonomy and operates under the oversight of the Ministry of Health (MOH). The hospital is managed by an internal leadership team, which is spearheaded by the Chief Executive Officer, deputized by the Chief Medical Officer and assisted by the Hospital Administrator and Chief Financial Officer.

1.1 Background

This strategic plan has been developed to respond to the need for institutional strengthening to address the high disease burden, and to match growing demands and ensure quality, efficient, and accessible care. JFDMRRH operates at the nexus of three core mandates: delivering advanced **tertiary healthcare**, providing **clinical training** for the next generation of healthcare professionals, and conducting **applied clinical research**. The hospital is located within a complex landscape characterized by a high burden of disease, evolving health priorities, and a growing population with escalating expectations for high quality and affordable health care. Currently, Liberia has only one national referral hospital which is in an urban environment, which remain geographically and financially inaccessible to many rural dwellers. High costs of medical care, transportation, and accommodations in Monrovia create insurmountable barriers for individuals living in underserved areas such as Lofa, Nimba, Bong, Grand Gedeh, River Gee, Maryland and neighbouring cross-border communities. This situation highlights a pressing need for a decentralized healthcare system that bridges the gap between the quality of urban and rural healthcare access.

This strategic plan is been developed to address these challenges and the immense opportunity to solidify JFDMRRH's position as Liberia national tertiary hospital and a leader in health care in West African.

2.0 Purpose of the Strategic Plan:

- Strengthen institutional capacity and governance
- Enhance patient care quality
- Respond to increased healthcare demands
- Align hospital development with national and global health agendas
- Ensure financial sustainability

The Jackson F. Doe Memorial Regional Referral Hospital (JFDMRRH) five-year Strategic Plan (2025–2029) provides a definitive roadmap to guide the

development, operationalization, and performance of JFDMRRH. It is designed to transform the hospital from a functionally capable institution into a Center of Excellence renowned for clinical quality, academic rigor, and operational sustainability and most importantly making it Liberia national referral hospital by 2029 which is a national development goal stated in the national development plan (AAID – Pillar 6: Human Capital Development, Strategic Policy 20: Health System, Program 44: Health services, Key Target 9: Improve national referral capacity of JFD Hospital by 100%).

The primary objective of the Strategic Plan is to articulate a clear vision and unified direction to guide all activities and resource allocations across the institution towards a common future. To realize this vision, the plan is fundamentally focused on enhancing institutional capacity by systematically addressing critical gaps in infrastructure, technology, human resources, and operational systems, thereby building a more resilient and purpose-built institution.

Concurrently, it aims to directly improve service delivery and the quality of care through the standardization of clinical protocols, the integration of digital health solutions, and the active cultivation of a culture dedicated to continuous quality improvement and patient safety. Recognizing that these ambitions require a solid foundation, the plan commits to ensuring long-term financial sustainability by diversifying revenue sources, optimizing cost-recovery mechanisms, and instituting a robust financial management system to reduce dependence on the national budget. Finally, to guarantee these efforts are effective and transparent, the plan will foster a system of accountability and performance measurement, creating a framework for rigorous monitoring, evaluation, and reporting to all stakeholders, ensuring the hospital remains steadfastly on track to achieve its strategic goals.

2.1 Legislative and Mandatory Framework

JFDMRRH operates under the health policy guidance of the Ministry of Health (MoH) of the Republic of Liberia. This strategic plan is expressly aligned with key national policy documents, including:

The National Health Policy & National Health Plan: This alignment ensures that the hospital's objectives directly contribute to national priorities such as improving maternal and child health, combating infectious diseases, and strengthening the health system.

The National Community Health Policy: This emphasized the hospital's role in supporting and strengthening the broader healthcare ecosystem, including primary and secondary levels of care.

ARREST AGENDA FOR INCLUSIVE DEVELOPMENT (AAID): Aligning the hospital's growth with the national vision of Liberia. (AAID – Pillar 6: Human Capital Development, Strategic Policy 20: Health System, Program 44: Health services, Key Target 9: Improve national referral capacity of JFD Hospital by 100%).

International Health Regulations (IHR 2005): Committing to strengthening core capacities for surveillance, outbreak response, and emergency preparedness. Furthermore, the plan adheres to professional standards of clinical practice and medical ethics as mandated by the Liberian Medical and Dental Council and other professional bodies.

2.2 Linkage to National and Global Health Agendas

JFDMRRH recognizes that its mission contributes to broader global commitments to which Liberia is a signatory. This strategic plan is intentionally crafted to advance:

Universal Health Coverage (UHC): By improving the quality, efficiency, and accessibility of essential health services, JFDMRRH acts as a critical pillar in Liberia's journey towards UHC.

Sustainable Development Goals (SDGs): Primarily **SDG 3** (Good Health and Well-being) through reducing maternal mortality, ending preventable newborn deaths, combating communicable diseases, and strengthening capacity for early warning and risk reduction. The plan also contributes to **SDG 4** (Quality Education) through clinical training and **SDG 17** (Partnerships for the Goals) through its collaborative model.

Global Health Security Agenda (GHSA): By developing a specialized trauma center, enhancing ICU capacity, and improving infection prevention and control (IPC) protocols, the hospital directly strengthens Liberia's ability to respond to public health emergencies, pandemics, and mass casualty events.

The Abuja Declaration: Supporting the national goal of increasing domestic investment in health by demonstrating efficient use of resources and generating internal revenue to supplement government funding.

3.0 Strategic Planning Process

The strategic plan was meticulously crafted through a comprehensive, multi-stage process grounded in evidence and collaborative input. The foundational stage involved an extensive data review and analysis, which established a critical baseline by examining financial statements and annual performance reports from both 2023 and 2024, and most of 2025. These rigorous financial and operational reports provided a clear, quantitative understanding of the hospital's current position and historical performance trends. Building upon this empirical foundation, the process then incorporated vital qualitative insights through broad stakeholder engagement. Virtual consultations were conducted with key figures including hospital leadership and various department heads, ensuring their frontline expertise and managerial perspectives were captured. These discussions were further enriched by a formal review of the challenges and recommendations systematically documented in previous internal reports, creating a continuous thread of institutional learning.

To ensure the plan's resilience and external relevance, a thorough environmental scanning was performed to assess the broader political, economic, and technological landscape shaping healthcare delivery in Liberia. This critical step guaranteed that the strategy was not developed in a vacuum but was instead acutely aware of external pressures, opportunities, and systemic constraints. The intelligence gathered from the data analysis, stakeholder input, and environmental scan was then synthesized into a coherent strategic framework through a structured SWOT analysis. This exercise consolidated the internal strengths and weaknesses of the hospital alongside the external opportunities and threats, providing a holistic view of the strategic environment.

The insights from this synthesis directly informed the objective formulation phase, where the identified gaps, strengths, and priorities were translated into a set of clear strategic pillars and specific, measurable objectives. Finally, to ensure coherence and operational viability, the entire plan underwent a phase of integration and validation. This essential step involved aligning the proposed strategic objectives with the national health agenda to ensure harmony with country-wide

goals, while simultaneously grounding them in the practical operational realities of the hospital to confirm their feasibility and relevance.

4.0 Situational Analysis

The healthcare landscape presents a complex array of challenges and opportunities that require careful strategic consideration. Through a comprehensive analysis of environmental factors and internal capabilities, a clearer picture emerges of the strategic position facing this healthcare organization. This narrative examines the interplay between external environmental forces and internal organizational dynamics, providing insights into the critical factors that will shape future strategic decisions and operational success.

4.1. Environmental Context: A Foundation for Strategic Planning

The external environment presents a predominantly favorable backdrop for healthcare operations, though not without significant challenges that demand strategic attention. The political landscape demonstrates strong governmental commitment to healthcare strengthening, creating an enabling environment for organizational growth and service expansion. This political support manifests in policy frameworks that facilitate healthcare delivery and demonstrate recognition of health services as a national priority.

However, the economic environment presents a more complex picture that requires careful navigation. The organization faces a critical transition as traditional donor funding streams show signs of withdrawal, creating an urgent need to diversify financial resources and increase reliance on government budget allocations. This shift represents both a challenge and an opportunity, as it may lead to more sustainable, locally-controlled funding mechanisms while requiring enhanced efficiency and accountability to justify increased government investment.

The sociodemographic factors reveal a dynamic population landscape characterized by rapid growth that is driving increased demand for healthcare services. This demographic trend creates both opportunities for service expansion and challenges in meeting growing needs with existing resources. The expanding population base represents a larger constituency that may justify increased investment in healthcare infrastructure and services, yet it also places pressure on current capacity and resources.

Technological advancement emerges as a significant enabler, offering pathways to improved care delivery and enhanced data management capabilities. The rapid evolution of medical technology presents opportunities to modernize service delivery, improve patient outcomes, and enhance operational efficiency through better data systems and clinical technologies.

The legal, environmental, religious, and security factors all contribute to a stable operating environment. The conducive legal framework supports strategic execution, while the stable climate with minimal disaster risk reduces the likelihood of service disruptions. Religious tolerance fosters an inclusive environment for service provision, and the stable security situation enables consistent operations and planning. These factors collectively create a foundation of stability that supports strategic planning and implementation.

4.2. Internal Capacity Assessment (SWOT)

The organization demonstrates significant internal strengths that position it well for future growth and development. The presence of a skilled workforce with full specialist departments represents a critical competitive advantage in healthcare delivery. This human capital foundation enables comprehensive service provision and creates opportunities for specialization and center-of-excellence development. The academic capacity and training platforms further enhance this strength by ensuring continuous skill development and knowledge transfer.

Modern equipment and infrastructure constitute another significant strength, providing the physical foundation necessary for high-quality healthcare delivery. This infrastructure investment demonstrates organizational commitment to quality and creates capacity for advanced medical procedures and services. The combination of skilled personnel and modern facilities positions the organization to deliver comprehensive, high-quality healthcare services that can compete effectively in the healthcare marketplace.

4.3 Critical Weaknesses Requiring Strategic Attention

Despite these strengths, several internal weaknesses demand immediate strategic attention. The inadequate ICT system represents a significant vulnerability in an increasingly digital healthcare environment. Modern healthcare relies heavily on information systems for patient records, clinical decision support, operational management, and quality monitoring. The weakness in this area not only limits current operational efficiency but also constrains the organization's ability to leverage technological advances and meet evolving regulatory and quality requirements.

The inconsistent supply of medicines and consumables presents another critical weakness that directly impacts service delivery quality and patient satisfaction. Supply chain reliability is fundamental to healthcare operations, and inconsistencies in this area can compromise patient care, create operational inefficiencies, and damage organizational reputation. This weakness requires systematic supply chain management improvements and may necessitate diversification of suppliers or enhanced inventory management systems.

Limited internal revenue generation capabilities represent a strategic vulnerability, particularly given the external threat of reduced donor funding. The organization's financial sustainability depends increasingly on its ability to generate revenue through service delivery, partnerships, or other income-generating activities. This weakness becomes more critical in the context of changing funding patterns and growing demand for services.

4.4 Strategic Opportunities and Market Potential

The external environment presents several opportunities that align well with organizational capabilities. Advances in medical technology offer pathways to enhanced service delivery, improved patient outcomes, and operational efficiency gains. The organization's existing modern infrastructure and skilled workforce position it well to adopt and implement new technologies effectively.

The government's focus on strengthening healthcare creates opportunities for partnership, funding, and policy support. This governmental priority suggests potential for increased public sector investment and collaboration opportunities that could support organizational growth and service expansion. The alignment between government priorities and organizational capabilities creates favorable conditions for strategic initiatives.

4.5 Threat Assessment and Risk Considerations

The threat landscape requires careful consideration and proactive management. Reduced donor funding represents the most immediate and significant threat, particularly given the organization's limited internal revenue generation capabilities. This threat demands urgent attention to financial sustainability and revenue diversification strategies.

The growing demand that may overwhelm current capacity presents both a threat and an opportunity. While increased demand validates the need for services and potential for growth, it also risks service quality degradation and patient satisfaction decline if not properly managed. This threat requires capacity planning and potentially strategic choices about service priorities and expansion strategies.

4.6 Strategic Implications and Recommendations

The analysis reveals an organization with strong foundational capabilities operating in a generally supportive environment but facing critical challenges around financial sustainability and operational efficiency. The combination of skilled workforce, modern infrastructure, and supportive external environment creates significant potential for growth and service expansion.

However, success requires addressing critical weaknesses in ICT systems, supply chain management, and revenue generation while capitalizing on technological opportunities and government support. The organization must develop strategies that leverage its strengths while systematically addressing weaknesses and preparing for the changing funding environment.

The strategic priority should focus on building sustainable operations that can maintain quality service delivery despite reduced donor funding while positioning for growth in response to increasing demand. This requires balanced investment in technology, systems, and revenue generation capabilities while maintaining the organization's core strengths in human resources and infrastructure.

5.0 Strategic Framework: Vision, Mission, and Core Values

Vision:

- To be a center of excellence in healthcare in West Africa.

Mission:

- To deliver high-quality, evidence-based, and patient-centered care through innovative and sustainable approaches.

Core Values:

- Accountability
- Transparency
- Innovation
- Equity
- Teamwork.

6.0 Overall Strategic Goal (High-Level)

Goal (2025–2029): *To transform JFDMRRH into a financially sustainable, digitally enabled, and high-quality tertiary referral and teaching hospital delivering safe, equitable, and evidence-based care in Liberia and the sub-region.*

6.1 Strategic Objectives

Strategic Objective 1: Improve quality, safety, and effectiveness of clinical care

Objective 1: *By 2029, reduce preventable morbidity and mortality at JFDMRRH by at least 30% through standardized clinical protocols, functional triage, and continuous quality improvement systems.*

Key Results:

- $\geq 95\%$ of departments using approved clinical SOPs by 2027
- $\geq 30\%$ reduction in reported adverse events by 2029
- $\geq 30\%$ reduction in hospital-based mortality with a specific focus on Maternal and new-born death
- Emergency department waiting time reduced by $\geq 40\%$ by 2028
- $\geq 20\%$ increase in staffing in high-burden units
- $\geq 80\%$ availability of essential stationery/equipment
- Patient flow map displayed in all departments
- Waiting time dashboard updated weekly
- Average OPD waiting time reduced by 40%
- Same-day completion of assessment & care $\geq 75\%$
- Staff-reported workflow satisfaction $\geq 70\%$ positive
- Essential drug availability $\geq 80\%$ (from 42%)
- Imaging service availability $\geq 80\%$
- Lab TAT compliance $\geq 85\%$
- Reduced lab/imaging result delays ($\geq 80\%$ timely results)
- $\geq 90\%$ staff trained on communication & confidentiality
- ≥ 12 community health talks/year
- $\geq 85\%$ patients report clear explanations

Strategic Objective 2: Achieve digital transformation for clinical, administrative, and decision support systems

Objective 2: *By 2028, fully digitize clinical, administrative, and financial operations to improve efficiency, accountability, and data-driven decision-making.*

Key Results:

- 100% of inpatient and outpatient records captured in EHR by 2027
- $\geq 90\%$ of billing and procurement transactions digitized by 2028
- Routine management dashboards operational in all departments by 2028
- $\geq 95\%$ of overall Patient Satisfaction by 2028
- $\geq 90\%$ of drug availability by 2027

- $\geq 95\%$ of confidentiality satisfaction
- $\geq 85\%$ of staff have a positive perception of hospital support leadership support
- $\downarrow 60\%$ sustained of the average waiting time is sustained
- $\geq 95\%$ of lab timely results

Strategic Objective 3: Strengthen human resources for sustainable tertiary and academic care

Objective 3: *By 2030, build and retain a competent, motivated, and equitably distributed workforce capable of delivering advanced tertiary and teaching services.*

Key Results:

- At least 90% of critical specialist positions filled by 2027
- $\geq 80\%$ of staff receiving CPD annually
- Staff retention rate $\geq 85\%$ by 2029
- $\geq 90\%$ staff trained on communication & confidentiality
- Confidentiality compliance audits quarterly
- ≥ 12 community health talks/year
- $\geq 85\%$ patients report clear explanations
- Confidentiality satisfaction increases from 58% to $\geq 85\%$
- Reduction in complaints related to disrespect
- Additional seating capacity increased by $\geq 30\%$
- Functional caretaker space established
- $\geq 95\%$ cleanliness compliance audits
- Reduced overcrowding complaints
- Improved patient comfort scores $\geq 90\%$
- $\geq 80\%$ of reported issues responded to within 30 days
- Staff satisfaction $\geq 70\%$ positive (from $< 50\%$)
- Quarterly departmental KPI reports published
- Improved perception of management support $\geq 75\%$
- Reduced interdepartmental communication gaps

Strategic Objective 4: Ensure financial sustainability and efficient resource utilization

Objective 4: *By 2029, increase internally generated revenue to finance at least 25% of recurrent operational costs while maintaining equitable access to care.*

Key Results:

- $\geq 15\%$ annual growth in internal revenue

- At least 3 new revenue streams operational (VIP services, diagnostics, insurance contracts)
- Functional hospital foundation with annual diaspora contributions by 2027
- Essential drug availability $\geq 80\%$ (from 42%)
- Imaging service availability $\geq 80\%$ • Lab TAT compliance $\geq 85\%$
- Monthly stock-out report shared with management
- Reduced lab/imaging result delays ($\geq 80\%$ timely results)
- Increased patient satisfaction with service delivery $\geq 90\%$ overall

Strategic Objective 5: Expand and modernize infrastructure to meet growing referral demand

Objective 5: *By 2029, expand and modernize infrastructure to increase access to critical care, emergency, maternal, neonatal, and trauma services.*

Key Results:

- Fully functional ICU, trauma center, and emergency OR by 2028
- NICU and maternity expansion completed by 2029
- $\geq 25\%$ reduction in external referrals for critical care

Strategic Objective 6: Institutionalize research, innovation, and learning

Objective 6: *By 2029, institutionalize clinical research and innovation to improve care quality, inform policy, and enhance JFDMRRH's academic profile.*

Key Results:

- Functional IRB by 2026
- At least 10 active research projects annually by 2028
- ≥ 5 peer-reviewed publications per year by 2029

Jackson F. Doe Hospital Strategic Plan (2025-2029) Alignment with the AAID Table

AAID PILLAR	AAID PROGRAM	AAID INTERVENTION	STRATEGIC PLAN LINKAGE
PILLAR 6: Human Capital Development	Strategic Policy 20: Health System Program 44: Health Services Key Target 9: Improve national referral capacity of JFD hospital by 100%	Upgrade of the Jackson F. Doe Hospital	Strategic Objective 1: Improve quality, safety, and effectiveness of clinical Care Strategic Objective 3: Strengthen human resources for sustainable tertiary and academic care Strategic Objective 5: Expand and modernize infrastructure to meet growing referral demand

7.0 Results Framework (LOGIC MODEL)

Inputs:	Activities	Outputs (Short term):	Outcomes (Medium term):	Impact (Long term):
<ul style="list-style-type: none"> • Human resources, funding, infrastructure, equipment, partnerships • Clinical quality • Expand digital systems • Enhance human capacity • Increase number of trained specialists • Increase in internal revenue • Expand infrastructure – ICU, trauma center, etc. • Recruitment budget • Essential equipment such as basic office tools, clinical instruments, and adequate workspace. • Adopt simple digital tracking • Establish a management oversight team to ensure effective implementation. 	<ul style="list-style-type: none"> • Training • Construction • Digitization • protocol development • audits • fundraising • Workforce gap analysis • Redistribute staff to peak-hour bottlenecks • Map patient flow (registration → triage → consultation → lab → pharmacy → billing) • Implement first-come-first-served enforcement • Introduce daily delay tracking log • Quarterly stock forecasting • Minimum stock level policy implementation • Monthly stock audit • Transparent pricing display 	<ul style="list-style-type: none"> • Functional ICU • trauma center • HER trained staff • revenue systems, research outputs • number of healthcare workers trained • Availability of essential stationery/equipment • Patient flow map • Weekly Waiting time dashboard • Reduction in complaints about waiting • Essential drug availability • Imaging service availability • Monthly stock-out report shared with management 	<ul style="list-style-type: none"> • Safer, higher-quality clinical services • Efficient, data-driven hospital management • Stable and skilled workforce • Sustainable hospital financing • Average OPD waiting time. • workflow satisfaction • Reliable supply chain system • Reduced financial burden on patients 	<ul style="list-style-type: none"> • Reduced morbidity and mortality • improved population health • strengthened national referral capacity. • Improved access, equity, and patient trust • Increased service utilization and hospital reputation • Improved treatment continuity and clinical outcomes • Increased patient satisfaction

<ul style="list-style-type: none"> • Drug procurement budget • Inventory management tool (manual or electronic) • Partnerships with government & external partners • Pharmacy & supply chain focal person 	<ul style="list-style-type: none"> • Escalation protocol for stock-outs 			
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8.0 JFDMRRH Strategic Objectives – Implementation, Results & M&E Matrix

Strategic Objective	Result Chain (Inputs → Activities → Outputs → Outcomes → Impact)	Key Activities (Step-by-Step)	Key Indicators	Means of Verification	Timeframe	Key Assumptions
1. Improve Clinical Quality and Patient Safety	<p>Inputs: Protocols, trained staff, audit tools, recruitment budget</p> <p>Activities: Training, protocol, workforce gap analysis, implementation, audits</p> <p>Outputs: Standardized care, functional triage</p> <p>Outcomes: Reduced errors, improved patient flow</p> <p>Impact: Improved patient safety and survival (reduced morbidity & mortality)</p>	<ol style="list-style-type: none"> 1. Baseline clinical quality assessment 2. Develop/update SOPs and protocols 3. Train clinicians and nurses 4. Implement triage & referral feedback 5. Conduct regular audits and M&M reviews 6. tracking log 	<ul style="list-style-type: none"> • % of departments using protocols • Reduction in adverse events (%) • Average waiting time 	<ul style="list-style-type: none"> • Clinical audit reports • Incident reports • OPD/Emergency registers 	2025–2027 (establish), 2028–2029 (sustain)	<ul style="list-style-type: none"> • Staff compliance with protocols • Continuous availability of essential supplies
2. Expand Digital Systems and Data Use	<p>Inputs: ICT infrastructure, software, trained staff</p> <p>Activities: System deployment & training</p> <p>Outputs: Functional EHR & digital systems</p> <p>Outcomes: Improved data quality & efficiency</p> <p>Impact: Evidence-based decision-making</p>	<ol style="list-style-type: none"> 1. ICT needs assessment 2. Procure EHR, HR, finance & inventory systems 3. Staff training 4. Phased system rollout 5. Monitor system use & data quality 	<ul style="list-style-type: none"> • % departments using HER • % transactions digitized • System uptime (%) 	<ul style="list-style-type: none"> • System usage logs • ICT reports • Data quality audits 	2025–2028	<ul style="list-style-type: none"> • Reliable power & internet • Staff acceptance of digital systems
3. Enhance Human Resource Capacity and Retention	<p>Inputs: HR budget, training partners</p> <p>Activities: Recruitment, CPD, incentives</p>	<ol style="list-style-type: none"> 1. HR gap analysis 2. Recruit priority specialists 3. Implement appraisal & incentives 4. Conduct CPD & mentorship 	<ul style="list-style-type: none"> • Staff-to-patient ratio • % staff receiving CPD annually • Retention rate 	<ul style="list-style-type: none"> • HR records • Training reports • Appraisal reports 	2025–2029	<ul style="list-style-type: none"> • Availability of funding for incentives • Retention policies approved by MoH

	<p>Outputs: Skilled & motivated staff Outcomes: Improved service coverage & quality Impact: Sustainable workforce</p>	5. Improve staff housing & welfare				
4. Strengthen Financial Sustainability	<p>Inputs: Financial systems, revenue policies Activities: Billing reform, private services Outputs: Increased revenue streams Outcomes: Improved financial stability Impact: Institutional sustainability</p>	<ol style="list-style-type: none"> 1. Review billing & costing systems 2. Introduce VIP/private services 3. Strengthen insurance agreements 4. Launch hospital foundation & diaspora engagement 	<ul style="list-style-type: none"> • % increase in internal revenue • Share of budget funded internally 	<ul style="list-style-type: none"> • Financial statements • Audit reports • Revenue dashboards 	2025–2029	<ul style="list-style-type: none"> • Client willingness to pay • Timely reimbursement from insurers
5. Expand Infrastructure and Service Capacity	<p>Inputs: Capital funds, contractors Activities: Construction & equipping Outputs: New functional units Outcomes: Improved access to specialized care Impact: Reduced referrals abroad & mortality</p>	<ol style="list-style-type: none"> 1. Finalize designs & budgets 2. Mobilize funding & contractors 3. Construct ICU, trauma center, NICU, OR, housing 4. Equip & operationalize facilities 	<ul style="list-style-type: none"> • % completion of infrastructure • Number of functional new units 	<ul style="list-style-type: none"> • Construction reports • Commissioning certificates • Equipment inventories 	2025–2029	<ul style="list-style-type: none"> • Timely funding • Contractor performance & supervision
6. Strengthen Research and Innovation	<p>Inputs: IRB, research funds Activities: Training & research support Outputs: Approved studies & publications Outcomes: Evidence-based practice Impact: Improved clinical outcomes & policy influence</p>	<ol style="list-style-type: none"> 1. Operationalize IRB 2. Train staff in research methods 3. Provide seed grants & mentorship 4. Publish and disseminate findings 	<ul style="list-style-type: none"> • Number of research projects • Number of publications 	<ul style="list-style-type: none"> • IRB records • Research reports • Journal publications 	2025–2029	<ul style="list-style-type: none"> • Staff interest in research • Ethical and administrative approvals

9.0 COMPREHENSIVE MONITORING & EVALUATION (M&E) FRAMEWORK

This section presents the **complete and comprehensive M&E framework for ALL Strategic Intervention Goals (SIGs) / Strategic Objectives** of the JFDMRRH Strategic Plan 2025–2029. The framework is designed to be used as a **standalone, print-ready M&E reference** for hospital management, the Board, Ministry of Health, and development partners.

9.1 PURPOSE OF THE M&E FRAMEWORK

The purpose of this M&E Framework is to:

- Track implementation progress of all strategic objectives
- Measure outputs, outcomes, and impact systematically
- Support evidence-based decision-making and adaptive management
- Ensure accountability and transparency to stakeholders
- Inform annual operational planning, budgeting, and evaluations

9.2 RESULTS CHAIN APPLIED TO ALL STRATEGIC OBJECTIVES

Inputs → Activities → Outputs → Outcomes → Impact

- **Monitoring** focuses on inputs, activities, and outputs
- **Evaluation** focuses on outcomes and impact

9.3 COMPREHENSIVE M&E FRAMEWORK MATRIX (ALL SIGs) 1

Strategic Objective 1: Improve Clinical Quality and Patient Safety

Results Level	Indicators	Baseline (2024)	Target (2029)	Data Source	Collection Method	Frequency	Responsible Unit	Key Assumptions
Output	% of departments using protocols	40%	≥95%	Clinical audit reports	Document review	Quarterly	Chief Medical Officer / QI	Staff compliance with protocols
Output	Functional triage & referral feedback system	40%	≥95%	ER registers	Facility assessment	Biannual	Emergency Dept	Continuous availability of essential supplies
Output	Number of M&M reviews conducted	1/year	≥12/year	QI records	Record review	Quarterly	QI Committee	Regular audit participation
Outcome	% Reduction in adverse events	10%	≥30%	Incident reports	Routine reporting	Quarterly	QI Committee	Reporting culture established
Outcome	Average waiting time (minutes)	High	↓40%	OPD/Emergency registers	Time analysis	Quarterly	Hospital Admin	Stable patient flow
Impact	Reduction in morbidity & mortality (%)	↓5%	↓25%	HMIS/EHR	Data analysis	Annual	Medical Director	Essential services available

Strategic Objective 2: Expand Digital Systems and Data Use

Results Level	Indicators	Baseline (2024)	Target (2029)	Data Source	Collection Method	Frequency	Responsible Unit	Key Assumptions
Output	% departments using EHR	Partial	100%	System usage logs	System reports	Quarterly	Records/ ICT Unit	Reliable power & internet
Output	HR, finance & inventory systems deployed	No	Yes	ICT reports	Verification	Annual	Records/ ICT Unit	Staff acceptance of digital systems

Output	% Staff trained on digital systems	30%	≥90%	Training reports	Record review	Biannual	ICT / HR	Training resources available
Outcome	% Transactions digitized	30%	≥90%	Finance system	System reports	Quarterly	Finance Dept	Staff adoption
Outcome	System uptime (%)	30%	≥98%	ICT logs	Monitoring	Monthly	ICT Unit	Vendor support
Outcome	Data quality score (%)	40%	≥95%	Data quality audits	Audit	Quarterly	M&E / ICT	Standard definitions
Impact	Evidence-based decision-making institutionalized	Low	High	Management minutes	Document review	Biannual	Hospital Mgmt	Leadership commitment

Strategic Objective 3: Enhance Human Resource Capacity and Retention

Results Level	Indicators	Baseline (2024)	Target (2029)	Data Source	Collection Method	Frequency	Responsible Unit	Key Assumptions
Output	Staff-to-patient ratio improvement	TBD	WHO standards	HR records	Record review	Annual	HR Dept	Availability of funding for incentives
Output	% priority specialists recruited	30%	≥80%	HR records	Record review	Annual	HR Dept	Retention policies approved by MoH
Output	% staff receiving CPD annually	30%	≥80%	Training reports	Record review	Annual	HR / Training	Training partners engaged
Output	Appraisal & incentive system implemented	No	Yes	Appraisal reports	Verification	Annual	HR Dept	Policy approval
Outcome	Retention rate (%)	40%	≥85%	HR database	Cohort analysis	Annual	HR Dept	Incentive policies effective
Outcome	Staff satisfaction score (%)	50%	≥75%	Staff surveys	Survey	Biannual	HR/Admin	Honest feedback
Impact	Improved service coverage & quality		Significant improvement	Service statistics	Trend analysis	Annual	Medical Director	Specialist availability

Strategic Objective 4: Strengthen Financial Sustainability

Results Level	Indicators	Baseline (2024)	Target (2029)	Data Source	Collection Method	Frequency	Responsible Unit	Key Assumptions
Output	Billing & costing system reviewed	No	Yes	Financial statements	Review	Annual	Finance Dept	Client willingness to pay
Output	VIP/private services introduced	No	Yes	Revenue dashboards	Verification	Annual	Finance Dept	Market demand
Output	Number of insurance agreements strengthened	2	≥5	Audit reports	Review	Annual	Finance Dept	Timely reimbursement from insurers
Output	Hospital foundation & diaspora engagement launched	No	Yes	Foundation records	Verification	Annual	Hospital Board	Legal approval
Outcome	% increase in internal revenue	5%	≥15% annually	Financial statements	Analysis	Annual	Finance Dept	Timely reimbursements
Outcome	Share of budget funded internally (%)	6%	30-40%	Budget analysis	Ratio analysis	Annual	Finance Dept	Cost control
Impact	Institutional sustainability (months of operating reserve)	1	≥6 months	Audit reports	Audit	Annual	Hospital Mgmt	Stable revenue flow

Strategic Objective 5: Expand Infrastructure and Service Capacity

Results Level	Indicators	Baseline (2024)	Target (2029)	Data Source	Collection Method	Frequency	Responsible Unit	Key Assumptions
Output	% Completion of infrastructure (ICU, trauma center, NICU, OR, housing)	0%	100%	Construction reports	Site inspection	Quarterly	Admin / MoH	Timely funding
Output	Number of functional new units	0	≥5 units	Commissioning certificates	Verification	Annual	Admin	Contractor performance & supervision

Output	Equipment procured & operationalized	No	Yes	Equipment inventories	Inventory review	Biannual	Admin / Procurement	Equipment maintenance
Outcome	% Reduction in referrals abroad	TBD	≥40%	Referral records	Record analysis	Annual	Medical Director	Functional new units
Outcome	Improved access to specialized care (patient volume)	TBD	↑50%	Service statistics	Data analysis	Annual	Medical Director	Adequate staffing
Impact	Reduced mortality in critical cases (%)	TBD	↓30%	Clinical audits	Audit	Annual	ICU/QI	Essential services functional

Strategic Objective 6: Strengthen Research and Innovation

Results Level	Indicators	Baseline (2024)	Target (2029)	Data Source	Collection Method	Frequency	Responsible Unit	Key Assumptions
Output	Functional IRB operationalized	No	Yes (2026)	IRB records	Verification	Annual	Research Office	Ethical and administrative approvals
Output	Number of staff trained in research methods	10%	≥40	Training reports	Record review	Annual	Research Office	Staff interest in research
Output	Seed grants & mentorship provided	No	Yes	Research reports	Review	Annual	Research Office	Funding availability
Outcome	Number of research projects annually	0	≥10	Research registry	Registry review	Annual	Research Office	Research funding
Outcome	Number of publications	1	≥5/year	Journal publications	Bibliometric review	Annual	Research Office	Protected research time
Impact	Evidence-based practice & policy influence	Low	Institutionalized	Policy documents / Citations	Document review	Annual	Research Office / Medical Director	Research uptake by management

10.0 FINANCING THE STRATEGIC PLAN

Source	Strategy
Government Budget	Secure MFDP commitment for salaries, maintenance, and core operational costs
Internal Revenue	Expand paid diagnostic services, pharmacy, VIP wards, and cost-sharing models
Partners & Donors	Engage WHO, UNICEF, China Aid, USAID for equipment, capacity-building, and research support
Diaspora Engagement	Launch targeted fundraising through Liberian diaspora networks
Public-Private Models	Explore MOUs with private labs, telemedicine providers, and diagnostic companies
Innovative Funds	Establish hospital endowment, rotating emergency fund, and apply for catalytic health grants

11.0 DATA COLLECTION METHODS

- Routine hospital records (EHR, registers, HR, finance systems)
- Clinical audits and quality improvement reviews
- Patient and staff satisfaction surveys
- Financial statements and external audits
- Construction and commissioning reports

12.0 REPORTING STRUCTURE

Report	Audience	Frequency
Routine performance report	Hospital Management	Quarterly
Strategic performance report	Board / MoH	Semi-annual
Partner & donor reports	Development Partners	Annual
Midterm evaluation	All stakeholders	2026
End-term evaluation	All stakeholders	2029

13.0 GOVERNANCE AND MANAGEMENT SYSTEM

- **M&E Committee:** Hospital Administrator (Chair), Medical Director, Heads of Departments, M&E Officer, ICT Lead
- **Departments:** Primary data collection and validation
- **M&E Officer:** Data analysis, reporting, learning facilitation
- **Hospital Management:** Decision-making and corrective action

15.0 LEARNING AND ADAPTIVE MANAGEMENT

M&E findings will be used to:

- Improve implementation effectiveness
- Reallocate resources toward high-impact interventions
- Strengthen transparency and accountability
- Inform annual plans, budgets, and policy dialogue