

A BILL

FOR

AN ACT TO PROVIDE FOR THE ESTABLISHMENT OF THE FEDERAL CAPITAL
TERRITORY PRIMARY HEALTH CARE BOARD AND FOR RELATED MATTERS,
2018

Sponsored by Senator Tanimu Aduda

[] Commencement

BE IT ENACTED by the National Assembly of the Federal
Republic of Nigeria as follows:

PART 1 - INTERPRETATION

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1. This Bill may be cited as the FCT Primary Health Care Board
Bill, 2018. Short title

2. In this Bill, unless the context otherwise requires: Interpretation

- "ACHA" means Area Council Health Authority;
- "ACSS" means Area Council Services Secretariat;
- "ACSC" means Area Council Service Commission;
- "Area Councils" mean the FCT Area Councils;
- "BHCPF" means Basic Health Care Provision Fund;
- "Board" means the FCT Primary Health Care Board, established under section 3 of this Bill;
- "Chairman" means the Chairman of the Governing Board appointed under section 5 of this Bill;
- "Executive Secretary" means the Executive Secretary of the Board appointed under section 15 of this Bill;
- "FCT" means Federal Capital Territory, Abuja;
- "FCTA" means the Federal Capital Territory Administration;
- "Functions" includes powers and duties;
- "Governing Board" means the Governing Board of the FCT Primary Health Care Board, established under section 4 of this Bill;

- 1 "HHSS" means Health and Human Services Secretariat;
- 2 "Member" means a Member of the Governing Board, and includes the
3 Chairman;
- 4 "Minister" means the Minister of the Federal Capital Territory;
- 5 "MSP" means Minimum Services Package; is an identified essential package
6 of high impact health interventions that addresses the majority of prevailing
7 health problems;
- 8 "PHCUOR" means Primary Health Care Under One Roof;
- 9 "PHERMC" means Private Health Establishment Regulatory and
10 Monitoring Committee;
- 11 "Private Health Establishments" includes privately owned or privately
12 managed Hospitals, Dental Centres, Nursing Homes, Maternity Homes,
13 Convalescent Homes, Medical Clinics, Medical Laboratory Centres,
14 Physiotherapy Centres, Radio diagnostic Centres, Pharmacies, Patent
15 Medicine Premises, Ophthalmology and Optical Centres that are supervised by
16 qualified and registered practitioners and regulated by statutory bodies;
- 17 "PHC" means Primary Health Care and refers to essential health care that is
18 based on scientifically sound and socially acceptable methods and technology
19 made universally accessible to all individuals and families in a community, at
20 an affordable cost and is the first level of care.

21 PART II - ESTABLISHMENT OF THE FCT PRIMARY HEALTH CARE BOARD

22 3.-(1) There is hereby established for the FCT a body to be known as
23 FCT Primary Health Care Board.

24 (2) The Board-

25 (a) Shall be a body corporate with perpetual succession and a
26 common seal with power to sue and be sued in its corporate name;

27 (b) may acquire, hold or dispose of any moveable or immoveable
28 property; and

29 (c) shall seek to achieve the objectives set out in section 4 and perform
30 the functions listed in section 7 of this Bill.

- 1 4. The objectives of the Board: Objective of the Board
- 2 (a) To ensure the development and operations of Primary Health
- 3 Care structure and services in FCT;
- 4 (b) To ensure equitable distribution of Primary Health Care
- 5 facilities and effective access to services within the FCT;
- 6 (c) To work with other relevant bodies to facilitate the
- 7 implementation of the Health Insurance scheme in the FCT.
- 8 5.-(1) The Governing Board shall consist of: Composition of the Governing Board
- 9 (a) a part- time Chairman, who shall be an accomplished Nigerian
- 10 of good character and proven integrity from the public or private sector;
- 11 (b) a representative of Federal Capital Development Authority not
- 12 below the rank of a Director;
- 13 (c) one representative of FCT Area Council Services Secretariat;
- 14 (d) the Chairman of Association of Local Government of Nigeria,
- 15 FCT Chapter;
- 16 (e) the Director of FCT Treasury;
- 17 (f) the General Manager, FCT Hospitals Management Board;
- 18 (g) the Executive Secretary, FCT Health Insurance Scheme;
- 19 (h) the Chairman of Nigerian Medical Association, FCT Branch;
- 20 (i) the Chairman of Joint Health Sector Union, FCT Branch; and
- 21 (j) the Executive Secretary of the Board who shall serve as the
- 22 Secretary.
- 23 At least two of the members of the board should be female.
- 24 (2) The Chairman and all members of the Governing Board shall,
- 25 on the recommendation of the Secretary HHSS, FCTA be appointed by the
- 26 Minister.
- 27 6.-(1) Subject to the provisions of this Bill, the Chairman and Tenure of and cessation of membership of the Governing Board
- 28 members of the Governing Board, other than an ex-officio member, shall
- 29 hold office for a term of four years in the first instance and may be
- 30 reappointed for a further term of four years and no more.

1 (2) The office of a member of the Governing Board shall become
2 vacant if-

3 (a) he resigns his appointment by notice in writing to the Minister;

4 (b) he dies;

5 (c) the period of his appointment expires;

6 (d) is convicted of an offence involving fraud by a court of competent
7 jurisdiction;

8 (e) he is adjudged or declared bankrupt;

9 (f) he is sentenced to death or imprisoned;

10 (g) he is a member of a secret society; and

11 (h) the Governing Board passes a resolution declaring that-

12 (i) he has become incapable by reasons of mental or bodily infirmity
13 or unable to discharge his duties,

14 (ii) he has become unfit for membership of the Board by reason of the
15 fact that he has interest in contract entered into by the Board and has not
16 disclosed that fact, or

17 (iii) he has become unfit for membership by reason of having
18 contravened the provisions of this Bill or any regulations made generally for
19 the carrying into effect the purpose of this Bill.

20 (2) Where a vacancy occurs in the membership of the governing
21 board, it shall be filled by the appointment of a successor to represent the same
22 interest as and for the unexpired term of the member concerned.

23 PART 111 - FUNCTIONS AND POWERS OF THE FCT PHCB

24 GOVERNING BOARD

Functions and
powers of the
Governing Board

25 7.-(1) The Governing Board shall:

26 (a) Provide guidance and oversight for the provision and efficient
27 running of Primary Health Care systems for all residents of the FCT;

28 (b) Approve all Appointments, Promotion and Discipline, Annual
29 Work plans, Budgets, Programs, Capital Expenditures and Projects, any other
30 major undertaking, that may be necessary to enhance the function of the Board;

1 (c) Mobilize funds necessary for the provision of effective and
2 efficient PHC services;

3 (d) Undertake Capital Projects as needed to improve Primary
4 Health Care services in the FCT;

5 (e) Perform such functions as assigned to it by the Minister of the
6 FCT.

7 (2) The Governing Board shall not be involved in the day-to-day
8 running of the Board;

9 8. The supplementary provisions contained in the Schedule to this
10 Bill shall have effect with respect to the proceedings of the governing board
11 and other matters mentioned in those provisions.

Proceeding of
Governing Board

12 9. No member of the Board may be personally liable for any act or
13 omission, provided that such act or omission occurred in the course of
14 discharge of his/her official duties and was done in good faith.

Protecting of
Members of
Governing Board

15 PART IV - ADMINISTRATIVE STRUCTURE AND COORDINATION

16 10. There shall be appointed by the Minister, an Executive
17 Secretary for the Board upon recommendation by the Honorable Secretary
18 of Health and Human Services Secretariat of FCTA, upon the conclusion of
19 internal competitive screening process.

Appointment of
the Executive
Secretary

20 11. The Executive Secretary shall be a Health professional, not
21 below the rank of a Director or its equivalent, and of good character and
22 proven integrity, with additional qualification in public health and cognate
23 experience of not less than fifteen years, five of which must be in Primary
24 Health Care in the FCT

Qualifications
of th Executive
Secretary

25 12. The Executive Secretary shall:

Responsibility,
Tenure and
Remuneration

26 (i) be the Chief Executive and Accounting officer of the Board;

27 (ii) be responsible for the day-to-day administration of the Board;

28 and

29 (iii) ensure the implementation of the decisions of the Governing
30 Board.

Tenure	1	13. The Executive Secretary shall hold office for a period of four
	2	years and shall be eligible for reappointment for a final term of four years.
Remuneration	3	14. The Executive Secretary shall be paid such salary and allowances
	4	as may be determined by the Minister.
Vacancy	5	15. The Minister may declare the office of the Executive Secretary
	6	vacant if:
	7	(a) the Executive Secretary resigns his appointment by notice in
	8	writing under his hand to the Minister; or
	9	(b) the Minister is satisfied that the Executive Secretary-
	10	(i) has been convicted of an offence involving fraud or dishonesty,
	11	(ii) is incapacitated by physical or mental illness from performing his
	12	functions,
	13	(iii) has become bankrupt or made arrangements with his creditors, or
	14	(iv) has such financial or other interest in the operations of the Board,
	15	which is likely to prejudicially affect the discharge of his functions.
Management team	16	16. The Management team shall be comprised of the Executive
	17	Secretary and such number of Directors as may be appointed in accordance
	18	with the operational guideline.
Meeting of Management Team	19	17. The board Management Team shall meet weekly and shall,
	20	through the Executive Secretary prepare, present and submit Quarterly
	21	Progress Report to the Governing Board during the latter's Quarterly Review
	22	Meeting
Roles of the Management Team	23	18. The Board shall:
	24	(a) take responsibility for the day-to-day running of the PHCB as
	25	outlined in the structures of the Departments that make up the Board;
	26	(b) be responsible for the development and implementation of all
	27	aspects of PHC human resources and services within the FCT in line with the
	28	principles of Primary Health Care under One Roof (PHCUOR);
	29	(c) take into cognisance the Primary Health Care operational
	30	guideline in the execution of its mandate;

- 1 (d) be responsible for planning and implementation of Primary
2 Health Care services and programs in the FCT;
- 3 (e) ensure budgetary provision, monitoring and evaluation of all
4 Primary Health Care services in the FCT;
- 5 (f) advise the Minister of the FCT and Area Councils Health
6 Authorities in the FCT on any matter regarding Primary Health Care
7 Services in the FCT;
- 8 (g) ensure the development and establishment of policies with
9 respect to the implementation of Primary Health Care Services and
10 programs in the FCT;
- 11 (h) recruit, promote, deploy, train and discipline of all Staff in line
12 with Public Service Rules;
- 13 (i) appoint program and deputy or sub program officers for each
14 Area Council;
- 15 (j) pay salaries and allowances to Primary Health Care staff;
- 16 (k) manage Funds provided to it by the National Primary Health
17 Care Development Agency and other sources;
- 18 (l) ensure annual medical and financial auditing of Primary Health
19 Care facilities in all Area Council Health Authorities; and
- 20 (m) ensure compliance with minimum standard and issue annual
21 certificate as appropriate to public and private Primary Care Health facilities
22 in the FCT.
- 23 19. The Board shall have Departments headed by Directors based
24 on operational guideline as follows:
- 25 (i) Department of Administration and Human Resources;
- 26 (ii) Department of Account and Finance (DAF);
- 27 (iii) Department of Community Health Services (DCHS);
- 28 (iv) Department of Disease Control and Immunization (DDCI);
- 29 (v) Department of Essential Drugs System, Equipment and
30 Logistics (DEDSEL);

Department
within the Board

1 (vi) Department of Planning, Research and Statistics (DPRS):
2 PROVIDED that changes in departmental structures may be
3 recommended by the management to the Governing board for approval.

Establishment
of the Inter-agency
Technical
Committee

4 20. There shall be established an inter-agency coordinating
5 committee that will provide technical advice to the board. The composition and
6 function shall be in line with national guidelines.

Establishment
of the minimum
services package
for FCT primary
health care

7 21.-(a) There shall be Established a costed Minimum Services
8 Package (MSP) for FCT Primary Health Care services;

9 (b) The MSP and guidelines for its implementation shall be published
10 by the Board.

Establishment
Area Council
Health Authority

11 22. There shall be established for each Area Council of FCT an Area
12 Council Health Authority (ACHA). It consists of an advisory committee and a
13 management team both reporting to the Executive Secretary.

Members of Area
Council Advisory
Committee

14 23. The ACHA Advisory Committee shall consist of the following:

15 (i) Executive Chairman of the Area Council - who shall be the
16 Chairman;

17 (ii) Area Council Supervisory Councillor for Health;

18 (iii) Directors of other departments in the Area Councils (Works,
19 Agriculture, Finance, Education, Community Development, Personnel, and
20 Environment);

21 (iv) One representative of National Orientation Agency in the Area
22 Council;

23 (v) One representative of Traditional Council;

24 (vi) One representative of Religious Leaders;

25 (vii) Head of one secondary public hospital in the Area Council;

26 (viii) One representative of private health sector;

27 (ix) One representative of women leaders;

28 (x) One representative of health training institutions where available;

29 (xi) One representative of CSOs/CBOs;

30 (xii) Two representatives of Ward Health Committee (WHC) (on

1 rotational basis);

2 (xiii) Director PHC, who shall be the secretary of the committee.

3 **24.** The ACHA Advisory Committee shall:

Roles of Advisory
Committee

4 (i) primarily advise the Board and the AGHA Management Team;

5 (ii) set the overall vision and mission of the ACHA;

6 (iii) provide strategic direction to ACHA Management team;

7 (iv) mobilize and allocate resources;

8 (v) hold implementers to account for effective and efficient use of
9 resources;

10 (vi) develop effective working relationship with the management
11 team and communities;

12 (vii) receive and deliberate on health reports of AC and advise
13 ACHAMT on decisions to improve health outcomes;

14 (viii) support ACHAMT on implementation of PHC in the AC; and

15 (ix) identify and fund the PHC capital projects

16 **25.** The ACHA Management Team (ACHAMT) shall be composed
17 of the following:

Composition of
ACHA Management
Team

18 (i) Director PHC;

19 (ii) Two Deputy Directors;

20 (iii) Programme Officer, Planning, Research and M & E;

21 (iv) Programme Officer, Disease Control;

22 (v) Programme Officer, Immunization;

23 (vi) Programme Officer, Essential Drugs and Logistics;

24 (vii) Programme Officer, Health Promotion;

25 (viii) Programme Officer, Nutrition;

26 (ix) Programme Officer, Reproductive, Maternal & Child Health;

27 (x) Administrative Officer;

28 (xi) Finance and Accounts Officer.

29 **26.** The PHC department shall be headed by a PHC
30 Coordinator/HOD Health who shall be The Medical Officer of Health

Appointment and
Qualification of
Area Council PHC
Coordinator

1 (MOH) for the Area Council. A Medical Doctor, who shall not be below Grade
 2 level 16 in the continuous service of the FCT, shall be appointed by the Board to
 3 occupy the office. Where there is no Medical Officer on Grade level 16, any
 4 Health Officer with a minimum of a University degree in the Health Profession
 5 and not below Grade Level 15, shall be appointed to head the office in Acting
 6 capacity.

Appointment
of Deputies

7 27. The PHC Coordinator/HOD shall be assisted by suitable qualified
 8 officers with relevant qualifications designated as Deputies/Program Officers
 9 to head relevant units of the dept.

Ward Health
Committee

10 28.-(1) The implementation of PHC services within the Area
 11 Councils shall be based on the principles of the Ward Health Services system.
 12 (2) The Ward Health Services in the FCT shall consist of the Ward
 13 Health Committee (WHC) at the ward level and the Community Health
 14 Committee (CHC) or Village Health Committee (VHC) at the urban
 15 (community) and rural (village) levels respectively.

16 PART V - FINANCE, ANNUAL ACCOUNTS AND AUDIT REPORTS

Funding for
Board

17 29. A basket fund will be provided and maintained for the
 18 implementation of the board's activities and programs. This fund shall
 19 comprise of:

20 (i) FCT Annual Statutory Budgetary Allocation for Primary Health
 21 Care;

22 (ii) Annual grants of not less than two percent (2%) of FCTA
 23 Consolidated Revenue Fund from the FCTA/ACs Joint Account or any other
 24 similar account that may be operated from the FCTA/ACs;

25 (iii) Allocation from the National Basic Health Care Provision fund as
 26 provided by the National Basic Health Act; and

27 (iv) Grants and donation from development partners and
 28 philanthropists.

Proper record
and statements

29 30. The Board shall keep proper record and statements of accounts of
 30 all its transactions and shall cause to be prepared a report on or before 45 days

1 after the closure of each financial year.

2 31. The statement of account referred to in section 33 of this External Audit
3 Section shall be verified by the Governing Board and Audited by a firm of of Statement
4 Auditors appointed by the Governing Board and shall be published in the account
5 Annual Report of the Board.

6 PART VI - REGULATIONS AND MISCELLANEOUS PROVISIONS

7 32. The Governing Board may, subject to the approval of the Regulation
8 Minister make regulations for the purpose of carrying out its functions.

9 33. The staff of the Board shall be subject to the provisions of the Pension and
10 Pension Reform Act. Gratuity

11 34. Provisions of the Area Council Bye-Laws shall not apply in Provisions of the
12 relation to matters provided for by this Act. Accordingly: Area Council
Bye-Laws

13 (i) Any matter concerning the appointment, promotion, discipline,
14 transfer and retirement of Area Council PHC staff which were being handled
15 by the FCT Area Council Service Commission (FCT ACSC) before the
16 commencement of this Act when enacted as Law is hereby transferred to the
17 Board; and

18 (ii) Any person who, before the commencement of this Act was
19 appointed by the FCT Area Council Service Commission (FCT ACSC) shall
20 be deemed to have been appointed by the Board pursuant to the provisions of
21 this Act provided such person satisfies the minimum requirements for such
22 appointment.

23 35. The Board or AC Health Authority (through the Board) may Power of the Board
24 enter into agreement with any Private practitioner, private health to enter into
25 establishment or non-governmental organization in order to achieve the Agreements with
26 objectives of this Act. Private organizations

27 36. All Area Council Health Authorities and private health Dissemination
28 establishments shall ensure that appropriate, and comprehensive service of service provision
29 provision information is disseminated and displayed at facility level on the Information
30 health services for which they are responsible, this shall include:

- 1 (i) the types of health services available;
- 2 (ii) the organization of health services;
- 3 (iii) Operating schedules and timetables of visits;
- 4 (iv) Procedures for laying complaints; and
- 5 (v) The rights and duties of clients and health care professionals

Record Keeping

6 37. Subject to applicable archiving legislation, the person in charge
 7 of a health establishment shall ensure that a health record containing such
 8 information as may be prescribed is created and available at the health
 9 establishment for every authorised user of health services.

Primary Health Care Management Information System

10 38. There shall be established a Primary Health Care Management
 11 Information System(PHCMIS) which is a sub-set of the NHMIS to guide
 12 strategic planning, management and operational functions of the PHC at all
 13 levels.

Duties of Area Council

14 39. Each Area Council, which provides health services shall establish
 15 and maintain a health information system, as part of the National Health
 16 Information System as specified under section 35(1) of the National Health
 17 Act.

Duties of Private Health Care Provider

18 40. All private health care providers shall:
 19 (a) Establish and maintain a Health Information System as part of the
 20 National Health Information System as specified under section 35(1) of this
 21 Act; and
 22 (b) Ensure compliance with the provision of section 45 as a condition
 23 necessary for the grant or renewal of the Certificate of Standards.

Limitation of suits against the Board etc.

24 41.-(1) Subject to the provisions of this Act, the provisions of the
 25 Public Officers Protection Act shall apply in relation to any suit instituted
 26 against any member, officer or employee of the Board.

27 (2) Notwithstanding anything contained in any other law or
 28 enactment, no suit against the Executive Secretary, a member of the Governing
 29 Board, or any other officer or employee of the Board for any act done in
 30 pursuance or execution of this Act or any other law or enactment, or of any

1 public duty or authority or in respect of any alleged neglect or default in the
2 execution of this Act or any other law or enactment, duty or authority, shall
3 lie or be instituted in any court unless it is commenced-

4 (a) within three months next after the act, neglect or default
5 complained of; or

6 (b) in the case of a continuation of damage or injury, within six
7 months next after the ceasing thereof.

8 (3) No suit shall be commenced against the Executive Secretary, a
9 member of the Governing Board, or any other officer or employee of the
10 Board before the expiration of a period of one month after written notice of
11 the intention to commence the suit shall have been served on the Service by
12 the intending plaintiff or his agent.

13 42.-(1) In any action or suit against the Service, no execution or
14 attachment of process in the nature thereof shall be issued against the
15 Service unless not less than three months' notice of the intention to execute
16 or attach has been given to the Service.

Restriction on
execution against
property of the
Service t

17 (2) Any sum of money which by the judgment of any court has been
18 awarded against the Service shall, subject to any direction given by the
19 court, where no notice of appeal against the judgment has been given, be
20 paid from the fund of the Service.

21 43. The Executive Secretary, a member of the Governing Board,
22 or any officer or employee of the Board shall be indemnified out of the assets
23 of the Board against any liability incurred by him in defending any
24 proceeding, whether civil or criminal, if the proceeding is brought against
25 him in his capacity as Executive Secretary, a member of the Governing
26 Board, officer or other employee of the Board.

Indemnity

1 SCHEDULE

2 [Section 8]

3 SUPPLEMENTARY PROVISIONS RELATING TO THE GOVERNING BOARD, ETC.

4 *Proceedings of the governing board*

5 1.-(I) Subject to this Act and to section 27 of the Interpretation Act
6 (which provides for the decisions of a statutory body to be taken by a majority
7 of the members of the body and for the person presiding to have a second or
8 casting vote) the governing board may make standing orders regulating the
9 proceeding of the governing board or a committee thereof.

10 (2) The quorum of the governing board shall be the chairman and six
11 other members, and the quorum of any committee of the Governing Board shall
12 be determined by the governing board.

13 2.-(I) The governing board shall meet not less than four times in each
14 year and, the governing board shall meet whenever it is summoned by the
15 chairman, and if the chairman is required to do so by notice given to him by not
16 less than three other members, he shall summon a meeting of the Board to be
17 held within fourteen days from the date on which the notice is given.

18 (2) At any meeting of the governing board, the chairman shall preside,
19 but if he is absent, the members present at the meeting shall appoint one of their
20 number to preside at that meeting.

21 (3) Where the governing board desires to obtain the advice of any
22 person on a particular matter, the governing board may co-opt him as a member
23 for such period as it thinks fit, but a person who is a member by virtue of this
24 sub-paragraph shall not be entitled to vote at any meeting of the governing
25 board and shall not count towards the quorum.

26 (4) Notwithstanding anything in the foregoing provisions of this
27 paragraph, the first meeting of the governing board shall be summoned by the
28 Minister.

29 *Committees*

30 3.-(I) The governing board may appoint one or more committees to

1 carry out on behalf of the governing board such of its functions as the
2 governing board may determine.

3 (2) A committee appointed under this paragraph shall consist of
4 such number of persons (not necessarily all members of the governing
5 board) as may be determined by the governing board and a person other than
6 a member of the governing board shall hold office on the committee in
7 accordance with the terms of his appointment.

8 (3) A decision of a committee of the governing board shall be of no
9 effect until it is confirmed by the Governing Board.

10 *Miscellaneous*

11 4.-(1) The fixing of the seal of the governing board shall be
12 authenticated by the signature of the Executive Secretary and of some other
13 member authorised generally or specially to act for that purpose by the
14 governing board.

15 (2) Any contract or instrument which, if made or executed by a
16 person not being a body corporate, would not be required to be under seal
17 may be made or executed on behalf of the governing board by the executive
18 secretary or any person generally or specially authorised to act for that
19 purpose by the governing board.

20 5. The validity of any proceedings of the governing board or of a
21 committee thereof shall not be affected by any vacancy in the membership
22 of the governing board or of a committee, or by reason that a person not
23 entitled to do so took part in the proceedings.

24 6. A member of the governing board or of a committee thereof who
25 has a personal interest in any contract or arrangement entered into or
26 proposed to be considered by the governing board or the committee shall
27 forthwith disclose his interest to the governing board or committee and shall
28 not vote on any question relating to the contract or arrangement.

EXPLANATORY MEMORANDUM

This Bill seeks to provide for the establishment of the Federal Capital Territory Primary Health Care Board.