



HEALTHY DRUKYUL PROGRAM

The Health Sector's

**13th Five
Year
Plan**

Ministry of Health
Royal Government of Bhutan
Thimphu, Bhutan
PO Box 726

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The Health Sector's 13th Five Year Plan

*Background, Outcome, Outputs,
Key Performance Indicators, Projects and Activities*

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In the 21st century, change is taking place at a phenomenal rate. Our healthcare institutions should be agile and receptive, in order to take advantage of opportunities, and respond to new challenges brought about by the digital revolution, and progress in medical science, technology, and practices. Of all our institutions, it is vital that our education and healthcare be the most dynamic, responsive, and flexible. We have to establish a culture of being able to respond to changing times.

- His Majesty's Address at the first Convocation of KGUMSB

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Foreword



It is with great pride and anticipation that I present the “**Healthy Drukyl Program**”. The comprehensive plan marks a major milestone in our enduring commitment to advancing the health and well-being of every Bhutanese citizen.

The program is crafted with the vision of creating a healthier and more resilient Bhutan—a nation where the highest standards of health care are accessible to all, and where every individual has the opportunity to lead a fulfilling and productive life. As we embark on this transformative journey, we are guided by the principles of equity, excellence, and sustainability, ensuring that our health system evolves to meet the changing needs of our people.

In recent years, Bhutan has made remarkable strides in health care delivery, yet we recognize that challenges remain. Our mission in this 13th FYP is to build on our successes and address these challenges with renewed vigor and strategic foresight. We are committed to enhancing the quality of care, expanding access to essential services and strengthening our health workforce to ensure that every Bhutanese can benefit from the full spectrum of health services.

Central to our plan is the focus on preventive care and wellness, reflecting our belief that a proactive approach to health is crucial for long-term success. The Healthy Drukyl Program emphasizes the integration of traditional and modern medical practices, the promotion of healthy lifestyles, and the strengthening of community-based health initiatives.

We are also dedicated to addressing the evolving health needs of our population through innovation and investment in health technologies and infrastructure. The development of new health facilities and consolidation of existing ones will be pursued to ensure the sustainable and prudent use of limited resources. Collectively, these efforts will enable us to provide high-quality care and respond effectively to emerging health threats.

Furthermore, the Healthy Drukyl Program aligns with our broader national goals and aspirations, supporting the vision of a prosperous and healthy Bhutan as envisioned by His Majesty the Druk Gyalpo. Our approach is informed by His Majesty’s guidance and reflects our collective resolve to advance the well-being of our people.

A handwritten signature in blue ink, which appears to read 'Tandin Wangchuk'. The signature is stylized and fluid.

Tandin Wangchuk
Health Minister

1. Healthy Drukyul Program

The Healthy Drukyul programme, with a budget of BTN 19.125 billion, is dedicated to ensuring good health and wellbeing of the Bhutanese population. A systemic and whole-of-society approach will be adopted to enable the delivery of quality preventive and curative healthcare services. The Ministry of Health (MoH) will take the lead in implementing this programme, working closely with the National Medical Services (NMS), The PEMA Secretariat, Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB), Royal Centre for Disease Control, relevant ministries, civil society organizations, and local governments, to ensure effective collaboration and coordination.

Defining Healthy Drukyul Program

The Healthy Drukyul Program aspires to create a Drukyul with an enabling environment and right ecosystem for everyone to achieve the highest level of health and wellbeing to be able to contribute effectively and meaningfully to nation building.

2. Context

Good health governance is a critical precursor for a strong health system and it is a vital cornerstone for addressing the evolving health system challenges. While significant efforts in the past years have resulted in farsighted and evidence-based policies and strategies, these instruments of governance must be supplemented with robust long and medium term plans to ensure that aspirations are duly fulfilled.

With epidemiological shifts and evolving health technologies, sustainability of free healthcare has become a major concern. There is an urgent need to pursue innovative solutions to transform the mindset of both service providers and recipients as well as the wider population. Further, cross-sectoral collaboration must be pursued to address the sustainability concern. Prudent use of financial resources needs to be embraced, and alternative and innovative mechanisms for sustainable health financing must be pursued if we are to meet the increasing demands of expanding and sustaining quality health services.

Given the growing importance of evidence-based policy decisions, sound and reliable information is fundamental for a resilient health system. Going forward, the Ministry of Health must enhance efforts to leverage ICT-enabled healthcare solutions and enable its use in a safe and reliable ecosystem.

Human Resource for Health (HRH) is one of the core building blocks of a Health System. It is empirically established that the quality of health services significantly depend on the availability of competent and skilled health workforce and their equitable distribution. The shortage of skilled health workers in the country is one of the major health system challenges. In recent times, this has been further compounded by attrition issues. With ever changing healthcare dynamics and increasing demand of health human resources especially for specialised tertiary services, the Khesar Gyalpo University of Medical Sciences of Bhutan needs to strengthen its technical capacity to enhance the scope and quality of their programs. The Ministry of Health along with the newly formed National Medical Services should continue to design practical strategies to enhance HR planning, recruitment, deployment and retention. Furthermore, enhanced efforts are needed to ensure leadership planning at all levels of the health sector and talent must be retained and identified to take the health sector forward.

Access to quality, safe and effective medical products; and access to safe, nutritious and healthy food is one of the essential elements in achieving national health outcomes and public health goals. Bhutan heavily depends on the import of medical and food products; therefore, existing monitoring and regulatory systems must be strengthened to ensure that medicines, vaccines, biologicals and medical devices are of good standard and quality, and that food products are safe for consumption. In addition, to strive towards an illicit drug and tobacco free society, regulatory interventions are required to reduce offenses related to controlled substances and tobacco products. Additionally, efforts must be sustained to improve plant and animal biosecurity through enhanced investments in quality assurance and certification systems.

Although significant progress has been made towards national and global disease elimination and other key public health goals, continued efforts must be ensured to sustain the progress that have been made so far. The challenges posed by the rapid rise in the burden of Non Communicable Diseases (including ALDs, injuries and cancers) is further augmented by the prevailing challenges posed by tuberculosis, HIV, malaria and emerging infectious diseases. Furthermore, mental health issues, including suicides and self harm, are increasing often affecting the most productive age group, with significant implications on productivity and daily lives of people. Therefore, the health sector must continuously strive to adopt and implement innovative and practical public health strategies to address these challenges. Multi-sectoral approach and HiAP must be adopted to ensure that proven gains are achieved and unique potentials harnessed.

Bhutan has seen significant improvements in the expansion of clinical services over the past decades; nevertheless, a lot more is required to be done to improve the quality, coverage and depth of it. Currently, a significant proportion of Bhutanese patients requiring critical care are referred outside Bhutan where they face major challenges posed by language and cultural barriers. Continuous investments must be made to introduce high quality sub and super specialist services in the country so that we become self reliant and Bhutanese can avail services in the comfort of their own country. Furthermore, there is also a need to ensure equitable distribution of healthcare services across the country to address concerns associated with financial burden and timely access to quality healthcare.

3. Outcome of the Healthy Drukyul Program

The outcome for the Healthy Drukyul Program is, “By 2029, more Bhutanese enjoy improved health and wellbeing”.

4. Outputs of the Healthy Drukyul Program

Seven outputs have been identified under the healthy drukyul program to help the health sector design programs and interventions towards realizing the broader aspirations of the plan. The seven outputs are built around World Health Organisation’s six health systems building blocks, and are accommodative of the transformation that has occurred in the health sector during the 12th Five Year Plan.

Output 6 which is “Regulatory, monitoring, and health security system strengthened” has been specifically designed to accommodate the mandates of the Bhutan Food and Drug Authority.

1. More Bhutanese practice healthy lifestyle
2. Control and elimination of priority diseases achieved
3. Access to quality health-related services and products improved
4. Adequacy and competency of health workforce ensured
5. Innovative governance and sustainable health financing systems in place
6. Regulatory, monitoring, and health security system strengthened
7. Information and technology harnessed to enhance health systems efficiency

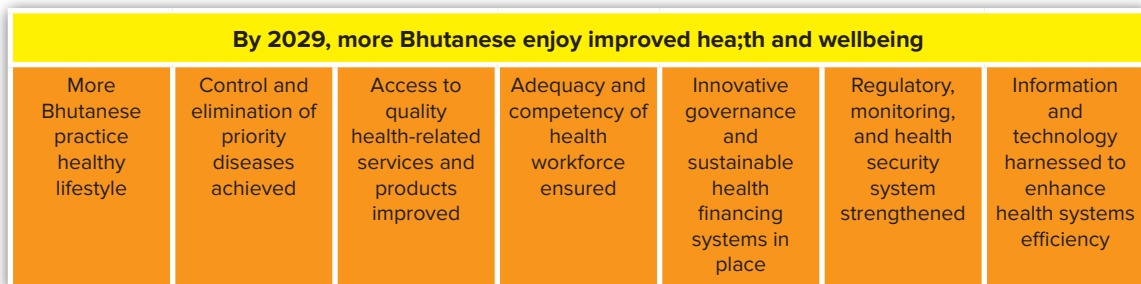


Figure: Outcome and Outputs of Healthy Drukyl Program

5. Resource Allocation Framework for the Healthy Drukyl Program

Based on the revised outlay of Nu. 19.125 bn for the Healthy Drukyl Program that was provided by the Cabinet Secretariat and Ministry of Finance, the Ministry of Health worked out a resource allocation framework by looking at allocation and spendings during the last two Five Year Plans.

The following table outlines the outlay for all the agencies under the health drukyl program based on the Resource Allocation Framework.

SI	Agency	19.125 bn fiscal space (in Nu)
1	BFDA	656.57 mn
2	DHS	313.44 mn
3	DoPH	1,943.09 mn
4	NMS	14,988.90 mn
5	The PEMA	714.34 mn
6	Secretariat, MoH	108.87 mn
7	Royal Center for Disease Control	399.98 mn
	TOTAL	19,125.19 mn

6. Key Performance Indicators at the Outcome and Output Level

OUTCOME: BY 2029, MORE BHUTANESE ENJOY IMPROVED HEALTH AND WELLBEING					
Outcome Indicators		Unit	Baseline	Target	Data Source
				2029	
1	Mental health status index	Number	20.1	89.7	Program report, The PEMA/ Annual Health Bulletin
2	Health status index	Number	86.8	92.2	NHS and Annual Health bulletin
3	GNH health index	Number	0.097	TBD	GNH Survey, CB & GNH Studies
OUTPUT 1: MORE BHUTANESE PRACTICE HEALTHY LIFESTYLE					
Outcome Indicators		Unit	Baseline	Target	Data Source
				2029	
1	NCD risk factors index (tobacco, alcohol, physical activity, fruits and vegetables, salt)	Number	55.1	>59.7	STEPS, NHS
2	Mental health services coverage index	Number	37.7	78.7	Program report, The PEMA/ Annual Health Bulletin
OUTPUT 2: CONTROL AND ELIMINATION OF PRIORITY DISEASES ACHIEVED					
1	Number of targeted priority diseases of public health concern with sustained elimination and eradication status Eliminated- Measles, Rubella, Leprosy, Maternal & Neonatal Tetanus	Number	5	Sustain	Program data, CDD, DoPH

Outcome Indicators	Unit	Baseline	Target	Data Source
			2029	
2 Number of targeted priority diseases of public health concern including NTDs controlled and eliminated Controlled: Dengue, Death from snake bites, Human deaths from dog-mediated rabies, Tuberculosis Eliminated: Leishmaniasis, Chikungunya, Japanese encephalitis, Cervical cancer, Mother-to-child-transmission (MTCT) of HIV, Syphilis and Hepatitis B, Indigenous Malaria	Number	0	12	Program data, DoPH

OUTPUT 3: ACCESS TO QUALITY HEALTH-RELATED SERVICES AND PRODUCTS IMPROVED

1	Bhutan Healthcare Standard for Quality Assurance (BHSQA) Index-National Referral Hospital	Number	78.55	>95.6	BHSQA Report
2	Bhutan Healthcare Standard for Quality Assurance (BHSQA) Index-Regional Referral Hospitals	Number	83.82	>95.6	BHSQA Report
3	Bhutan Healthcare Standard for Quality Assurance (BHSQA) Index-Cluster hospitals and below	Number	76.93	>95.6	BHSQA Report

Outcome Indicators		Unit	Baseline	Target	Data Source
				2029	
4	Proportion of health technologies introduced or expanded or consolidated or decommissioned after HTA	Percentage	<50	<90, >80	Program data, DHS
5	Proportion of basket of safe and quality essential medicines and consumables available in all health facilities at any point of time	Percentage	95	>98	Program data, DMP, NMS
6	TAT for ambulance services	Time	<10 mins	Sustain	Program report, DCS, NMS
7	Population using safely managed drinking-water services	Percentage	70.3	90	MOIT (Lead agency)
8	Percentage of population using safely managed sanitation services	Percentage	81.3	100	MoV (Lead agency)
9	Proportion of cluster hospitals with disability friendly features (wheelchair ramps, seating priority, visual signages, disabled friendly toilets)	Percentage	0	100	STEPS, NHS
10	Percentage of critical medical equipment safe and functional at all hospital at any point of time.	Percentage	90	≥94	Program report, DBME, NMS
11	Health service coverage and behaviour index	Number	62.9	74.7	Annual Health Bulletin
OUTPUT 4: ADEQUACY AND COMPETENCY OF HEALTH WORKFORCE ENSURED					
1	Percentage of health facilities fulfilling human resources as per the HR Standard	Percentage	75	≥80	RCSC Report
2	Critical health workforce attrition rate	Percentage	11.25	Sustain	RCSC Report

Outcome Indicators		Unit	Baseline	Target	Data Source
				2029	
3	Percentage of health professionals fulfilling the continuous professional development requirement	Percentage	91.7 (as of Feb 2024)	100	BQPCA Report
OUTPUT 5: INNOVATIVE GOVERNANCE AND SUSTAINABLE HEALTH FINANCING SYSTEMS IN PLACE					
1	Total public spending on health as a percentage of GDP	Percentage	2.8	4	NHA Report
2	Out-of-pocket Spending (OOPS) as a percentage of Current Health Expenditure	Percentage	14	≤14	NHA Report
3	Proportion of health expenditure on preventive healthcare	Percentage	15	30	NHA Report
4	Number of sustainable health financing mechanisms introduced	Number	0	3	Program report, HFD, DHS
5	Health governance and diplomacy index	Number	TBD	100	Reports and documents, PPD, MOH
OUTPUT 6: REGULATORY, MONITORING, AND HEALTH SECURITY SYSTEMS STRENGTHENED					
1	WHO Global Benchmarking Tool (cGBT) Maturity Level for Medical Products	Number	1	3	WHO cGBT Assessment Report
2	Incidence of non-compliance on controlled substances, precursor chemical and tobacco products	Percentage	35	<10	Reports and documents, BFDA
3	Proportion of exotic livestock and agriculture pests and diseases prevented (average of the livestock and agriculture sections)	Percentage	>90	Sustain	Reports and documents, BFDA

Outcome Indicators		Unit	Baseline	Target	Data Source
				2029	
4	Incidence of reports on substandard and falsified (defective) medical products	Number	336	<100	Reports and documents, BFDA
5	Number of food businesses issued with Food Safety License	Number	113	188	Reports and documents, BFDA
6	International Health Regulation (IHR) Core Capacity Index	Number	63 (2022)	≥67	SPAR and JEE Reports, DOPH
7	Proportion of health facilities complying with BHSQA standards	Percentage	66.2	≥95	Annual BHSQA Report, DHS
8	Percentage of regulatory services delivered to clients within specified TAT	Percentage	100	Sustain	Records (certificates, application forms etc)
9	Proportion of laboratory and certification services for food and agricultural products meeting international standards (ISO/IEC standards).	Percentage	100	Sustain	BFDA, Program data
10	Percentage of drug treatment/rehabilitation centers registered with the Competent Authority and complying with national standards	Percentage	33.3	>95	BFDA, Program data
11	Quality assurance systems meeting international standards (ISO/IEC standards)	Number	nil	1	RCDC, Program report

OUTPUT 7: INFORMATION AND TECHNOLOGY HARNESSSED TO ENHANCE HEALTH SYSTEMS EFFICIENCY					
1	Proportion of health facilities using ePIS	Percentage	4.25	100	GovTech report
2	Health information surveillance and population health needs Index Tracers: Information system and surveillance (7), Adjustment to population health needs (5)	Number	41	72.8	Program report, HERS, PPD, MOH

7. Outputs, Projects and Activities

7.1. Overview

Output	Number of Projects	Number of Activities	Revised Budget
OUTPUT 1: More Bhutanese practice healthy lifestyle	3	5	132.7
OUTPUT 2: Control and elimination of priority diseases achieved	1	3	864.39
OUTPUT 3: Access to quality health-related services and products improved	11	44	16388.52
OUTPUT 4: Adequacy and competency of health workforce ensured	2	8	619.88
OUTPUT 5: Innovative governance and sustainable health financing systems in place	2	10	64.59
OUTPUT 6: Regulatory, monitoring and health security system strengthened	7	38	881.857
OUTPUT 7: Information and technology harnesssed to enhance health systems efficiency	2	14	177.753

7.2. Details of outputs, projects and activities

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 1 More Bhutanese practice healthy lifestyle	1.1. Health promotion and disease prevention	Improve health promotion including risk communication and community engagement	100	RGoB & DPs	DOPH
		Implement evidence informed interventions to reduce NCD risk factors	21	RGoB & DPs	DoPH
		Implement interventions to reduce controlled substances and tobacco offense through monitoring, advocacy and sensitization	1.7	RGoB	BFDA
OUTPUT 2 Control and elimination of priority diseases achieved	1.2. Recreational Facilities and Opportunities 1.3. Safe and nutritious food	Create conducive environment for physical activity and healthy living including the implementation of healthy city concepts		RGoB & DPs	BOC
		Implement interventions to promote the consumption of healthy and balanced diet	10	RGoB & DPs	DoPH
		Implement systematic screening and management of priority public health diseases (HIV, STIs, TB & CaCx)	416.39	RGoB & DPs	DoPH
OUTPUT 3 Access to quality health-related services and products improved	2.1. Prevention, control and elimination of priority diseases 3.1. People-centered health care services	Implement measures to control Vector Borne Diseases	290	RGoB & DPs	DoPH
		Sustain elimination and eradication status of vaccine preventable diseases & Neglected Tropical Diseases	158	RGoB & DPs	DoPH
		Review and develop clinical standards and guidelines	10	RGoB/ Donors	NMS
		Enhance healthcare coverage through outreach health camps	125	RGoB	NMS
		Strengthen access to specialised health care services	500	RGoB	NMS

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 3 Access to quality health-related services and products improved	3.1. People-centered health care services	Patient referral and referral system	3000	RGoB	NMS
		Need base consolidation and expansion of health infrastructure	2540.7	RGOB	NMS
		Royal Centre for Infectious Diseases, Gidakom	2,022	JICA	NMS
		Cancer and Transplant Center as a part of MDSH	660	GoI	NMS
		Implement evidence informed interventions to reduce the burden of NCDs	121.5	RGoB & DPs	DOPH
	3.2. Bhutanese traditional medicine (TM) as a centre of excellence	Develop and revise policies, standards and guidelines for Traditional Medicine	36.75	RGOB	DHS
		Enhance the quality management of services and products for traditional medicine.	14.85	RGOB	DHS
		Ensure access to adequate traditional medicinal resources and products	28	RGOB	DHS
	3.3. Access to essential medical products and vaccines	Engagement of Traditional Medicine in public health interventions	28.5	RGOB	DHS
		Ensure timely procurement and distribution of medical products	4400	RGoB, BHTF	NMS
		Ensure functionality and upkeep of medical equipment in all health facilities	950	RGoB/ Donors	NMS
		Testing of medical products using GPHF minilab test kit, and testing of medical products at third party testing laboratory	2.25	RGoB/ Donors	BFDA

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency	
OUTPUT 3 Access to quality health-related services and products improved	3.4. Appropriate use of essential medical products	Develop and revise policies, standards and guidelines for medical products	14.1	RGoB/ Donor	DHS	
		Carry out technology assessments for new services, program and interventions	26.9	RGoB/ Donor	DHS	
			Carryout periodic and regular monitoring and evaluation of clinical services across the country	25	RGoB/ Donor	NMS
			Implement measures to strengthen the quality and safety of health care services	40	RGoB/ Donor funded	DHS
			Review, update and adopt BHSQA and other health care standards	3.8	RGoB/ Donor funded	DHS
			Build system and human resource capacity for quality management of health services	11.9	RGoB/ Donor funded	DHS
			Strengthen quality systems through external quality certification and accreditation system	5.75	RGoB/ Donor funded	DHS
			Develop and implement a robust system for monitoring and supervision of private diagnostic centers and services	5	RGoB/ Donor funded	DHS

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 3 Access to quality health-related services and products improved	3.6. Reference Centre for disease control and prevention	Introduction and evaluation of new technology and transfer of technology including human resource capacity building for detection of novel/rare/emerging public health concern diseases.	20	RGoB/ Donor funded	RCDC
		Establishment of smooth functioning of robust surveillance systems and disease modeling for timely detection of outbreaks of public health concerns.	102.5	RGoB/ Donor funded	RCDC
		Establish capacity for Genomic surveillance for priority diseases and biobanking.	56	RGoB/ Donor funded	RCDC
	3.7. Environmental Health	Introduction of high-end technology and human resource capacity building for detection of harmful contaminants in the food, drugs, and water.	81	RGoB/ Donor funded	RCDC
		Strengthen capacities at the national reference laboratories to enhance timely diagnosis within the country	140.48	RGoB/ Donor funded	RCDC
		Implement interventions to mitigate health risk from climate change and environmental factors	50	RGoB/DPs	DoPH
	3.8. Disability prevention and management	Strengthen Water, Sanitation and Hygiene	45	RGoB/ Donor funded	DoPH
		Establish disability friendly health infrastructure	100	RGoB & DPs	NMS
		Provide rehabilitative services for individuals with chronic illness	34.7	DPs	DoPH
		Strategize actions to reduce occupational hazards	15	RGoB/DPs	DoPH

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency	
OUTPUT 3 Access to quality health-related services and products improved	3.9. Holistic and compassionate mental health care	Enhance Mental Health Promotion and Prevention Programmes	13	RGoB/ Donor funded	The PEMA	
		Improve Access to Quality Mental Health Care and Services	688.84	RGoB/ Donor funded	The PEMA	
	3.10. Antimicrobial Resistance	Infrastructure development, quality improvement of the microbiology laboratories for accurate identification and Antibiotic susceptibility testing	Infrastructure development, quality improvement of the microbiology laboratories for accurate identification and Antibiotic susceptibility testing	5	RGoB/ Donor funded	NMS
			Implementation of antimicrobial stewardship programs for rational use of antimicrobials.	5	RGoB/ Donor funded	NMS
			Capacity building in AMR data management and data informed policies and interventions.	5	RGoB/ Donor funded	NMS
			Advocacy and educational material development and implementation.	5	RGoB/ Donor funded	NMS
			AMR and collaborative one health AMR researches.	10	RGoB/ Donor funded	NMS
	3.11. Reproductive, Maternal, Newborn, Child and Adolescent Health	Strengthen and accelerate mother and child health programs Strengthen health system governance and capacity to provide reproductive maternal newborn and child services Implement evidence based nutrition-specific and nutrition-sensitive interventions	Implement interventions to improve adolescent health	30	RGoB & DPs	DoPH
			Strengthen and accelerate mother and child health programs	250	RGoB & DPs	DoPH
			Strengthen health system governance and capacity to provide reproductive maternal newborn and child services	120	RGoB & DPs	DoPH
			Implement evidence based nutrition-specific and nutrition-sensitive interventions	40	RGoB & DPs	DoPH

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 4 Adequacy and competency of health workforce ensured	4.1. Capacity Building of Health Workforce	Develop and review curriculum for short term and long term training programs	5	RGoB	NMS
		Strengthen the capacity building for law enforcement officials (BFDA)	23.38	RGoB/ Donor funded	BFDA
		Enhance Continuous Medical Education for both Short Term and Long term training	442	RGoB/ Donor funded	NMS
	4.2. Adequacy of health workforce	Build capability and competency of officials on pest/disease diagnostics and biosecurity management	7	RGoB	BFDA
		Addressing human resource gaps in the health sector	5	RGoB	MoH
		Institutionalise systemic mechanisms between relevant institutions to match HR demand and supply	5	RGoB	MoH
		Develop appropriate and adequate human resources for specialized and community based mental health services	12.5	RGoB/ Donor funded	The PEMA
		Ensure appropriate, adequate and timely deployment of clinical workforce	120	RGoB	NMS
		Improve global health diplomacy and Bhutan's visibility in global health governance platforms	10	RGoB	MoH
		Strengthen the implementation of the HST through periodic assessments and evaluations	10	RGoB	MoH
OUTPUT 5 Innovative governance and sustainable health financing systems in place	5.1. Innovative health system governance	Review, design and develop national acts, policies and other instruments of governance in agreed and key thematic areas	10	RGoB	MoH

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 5 Innovative governance and sustainable health financing systems in place	5.2. Sustainable health financing	Design. and develop policies and strategies to achieve a sustainable health financing ecosystem	8.1	RGoB	DHS
		Integrate key health financing studies into the normative functions of the Ministry of Health	5.29	RGoB	DHS
		Strengthen Public Private Partnership modality/ approaches	4.3	RGoB	DHS
		Design and develop innovative cost-sharing and financing mechanisms for selected services	7.7	RGoB	DHS
		Evaluation of the health financing mechanism	5	RGoB	DHS
		Advocacy and education on financing of preventive healthcare	4.2	RGoB	DHS
		Enhance regulatory systems through innovative approaches	23.392	RGoB	BFDA
		Promote and improve food quality and safety	8.81	RGoB	BFDA
		Quality Management Framework and SPS Capacities are strengthened in line with international standards	51.45	STDF	BFDA
		Build capacities of field officials and key stakeholders in the areas of food safety, biosecurity and response to food safety and biosecurity emergencies	51.45	RGoB	BFDA
OUTPUT 6 Regulatory, monitoring and health security system strengthened	6.1. Food, Drug and Biosecurity Regulatory systems	Strengthen food testing capabilities	111.15	RGOB	BFDA
		Strengthen and institute regulation/SoPs/Guideline/ Standards/Strategy on NDPS and Tobacco Control measure.	4.5	RGOB	BFDA

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 6 Regulatory, monitoring and health security system strengthened	6.2. International regulations and standards	Strengthen communication and information exchange with international stakeholders to ensure timely access to OIE, FAO, IPPC, CAC, CBD, INFOSAN information.	3.38	RGoB	BFDA
		Develop linkages with food safety and biosecurity authorities of trading partners countries for mutual recognition of inspection, testing and certification system for safe food and agriculture trade	12.095	RGoB	BFDA
		Maintain compliance to ISO 9001:2015, Quality Management system to enhance consistency and quality of services while also building the National Regulatory System for medical products	6.5	RGoB	BFDA
		Develop, revise and update required documents (Guidelines, standards, manuals, procedures, standard operating procedures, forms, & formats) for biosecurity and food safety enforcement	6.5	RGoB	BFDA
		Accreditation and maintenance of ISO/IEC 17020:2012 status with the scope of Food Safety related inspection and licensing of processing and catering units based on GHP/GMP requirements set by BFDA.	3.3	RGoB	BFDA
		WHO Global Benchmarking Tool (cGBT) Maturity Level for Medical Products	11.3	RGoB	BFDA
	6.3. Pre and post market control of medical products	Pre-market control of medical products	15	RGoB	BFDA
		Post-market control of medical products	12.95	RGoB	BFDA
		Enhancement of drug testing program	2.5	RGoB	BFDA

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 6 Regulatory, monitoring and health security system strengthened	6.4. Sanitary and phytosanitary certifications capacity	Sensitization and capacity building on Phytosanitary treatment. Implementation of Bhutan Phytosanitary treatment manual 2020.	5	RGoB	BFDA
		Build capability and competency of officials on pest/disease diagnostics and biosecurity management	10.87	RGoB	BFDA
		Strengthen animal quarantine station and improve the laboratory testing for animal quarantine	7.2	RGoB	BFDA
		National border and risk management frameworks for risk-based controls for selected BRAs are enhanced to facilitate SPS compliance and the safe trade of agricultural and food products	20.86	STDF	BFDA
		Platforms/mechanisms for national/bilateral/regional coordination and dialogue on SPS and trade facilitation issues are established and/or strengthened	20.516	STDF	BFDA
		Strengthen biosecurity infrastructure facilities and necessary equipment for biosecurity enforcement	187.107	RGoB	BFDA
		Improve biosecurity risk preparedness and response capability of BFDA officials in the management of animal and plant biosecurity incident responses jointly with the technical departments	1.5	RGoB	BFDA
		Strengthen phyto-sanitary and zoo-sanitary requirement for export of agricultural and food commodities for export	5.75	RGoB	BFDA

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 6 Regulatory, monitoring and health security system strengthened	6.5. Regulation of healthcare and wellbeing services	Develop technical and regulation framework for health and wellbeing services in country	8.3	RGoB/ Donor funded	DHS
		Conduct Technical assessment and continuous monitoring of wellness services	1.5	RGoB/ Donor funded	DHS
		Promote health and wellbeing services through engagement of various stakeholders	20.6	RGoB/ Donor funded	DHS
		Streamline Local Healing and spiritual Healing practices.	20.9	RGoB/ Donor funded	DHS
	6.6. Health emergency preparedness and response	Strengthen surveillance, outbreak response and investigation on public health concern diseases and events	65	RGoB & DPs	DoPH
		Strengthen IHR core (2005) capacity requirements for responding to health emergencies	135	RGoB & DPs	DoPH
		Carry out health emergency risk assessments including conduct of drills and simulation exercise at hospitals and POEs	21.5	RGoB & DPs	DoPH
	6.7. National & international standards	Sustenance of accredited scopes for product certification as per ISO/IEC 17065 (food products, organics and Bhutan GAP)	33	RGoB	BFDA
		Provide Third-party food Product Certification Services to food processing industries based on Food Product Certification Scheme and ISO/IEC 17065 certification system	10	RGoB	BFDA

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
OUTPUT 6 Regulatory, monitoring and health security system strengthened	6.7. National & international standards	Provide Third-party Organic Certification Services to farmers, farmer groups and organic processing units based on Organic Product Certification Scheme and ISO/IEC 17065 certification system	10	RGoB	BFDA
		Provide Third-party BhutanGAP Certification Services to farmers and farmer groups based on BhutanGAP Product Certification Scheme and ISO/IEC 17065 certification system	10	RGoB	BFDA
		Food and agricultural product certification scopes increased as per the requirements from the clients	22.8	RGoB	BFDA
		Regulate and Monitor the quality of Drug treatment and rehabilitation centres and their compliance with the national standards.	5	RGoB	BFDA
		Sustenance of accreditation scopes of laboratory testing services as per ISO/IEC 17025	0	RGoB	BFDA
		Increase the scope of accreditation	0	RGoB	BFDA
		Conduct scientific researches to foster evidence based regulatory enforcement of medical products	1.5	RGOB	BFDA
		Strengthen research/survey/culture on NDPS and impact of the programs	1.5	RGOB	BFDA
		Strengthen the system of Import Risk Analysis (IRA) for the import of livestock and their products and Pest Risk Analysis (PRA) for plant and plant products	6.77	RGOB	BFDA
		Carry out research/ studies/ assessments on priority public health/ health systems concerns	50	RGOB	MoH
Output 7 Information and technology harnessed to enhance health systems efficiency	71. Research and development	Adopt innovative solutions to enhance health information quality	15	RGOB	MoH

Output	Projects	Activities	Revised Budget (with 20B outlay)	Funding Modality	Lead Agency
Output 7 Information and technology harnessed to enhance health systems efficiency	7.1. Research and development	Conduct scientific researches to foster evidence based biosecurity and food safety enforcement	2	RGoB	BFDA
		Strengthen TM through research and innovative interventions.	12	RGOB	DHS
		Carry out assessments to generate evidence for designing human resource interventions and policies	3	RGoB/ Donor funded	MoH
	7.2 Digital Health	Leverage the innovative use of social media and ICT to strengthen health information, education and communication	5	RGoB/ Donor funded	DoPH
		Adopt innovative technologies to enhance surveillance, early detection and diagnosis of infectious diseases in the country	5	RGoB/ Donor funded	DoPH
		Leverage ICT enabled solutions to strengthen health systems	59.2	RGoB/ Donor funded	NIMS
		Engage ICT-based solutions to enhance food safety and biosecurity services	15.913	RGoB/ Donor funded	BFDA
		The IPPC e-phytosanitary (ePhyto) digital solution is rolled out in Bhutan to pave the way for electronic ePhytos exchanges with neighboring/regional trading partners	11.6	STDF	BFDA
		Leverage digital solutions to strengthen HRH management information systems	0.87	RGoB/ Donor funded	MoH
		Total Budget Outlay	19129.69		

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