



Guidance Template for Development of Long-Term Goals Medium-Term Objectives

The Ministry Department and Agency's (MDA's) Long-Term Goals (LTGs) are the broad priority services it would deliver in 5 to 20 years' time, based on its PESTLE/SWOT analyses.

SWOT/PESTLE Analysis looks at the *internal and external* dynamics of your MDA that could support or hinder effective planning and implementation of the plans. The desired result is not to have long lists of theoretical factors but to have lists of actual factors that are carefully thought-out and are promoting or inhibiting your work in your MDA. To arrive at these realities, you may need to consult with your key stakeholders or actors of your MDA to get their views on the four key areas.

A PESTLE/SWOT Analysis is therefore a useful tool for understanding the "big picture" of the planning environment, that is, the state and the MDAs. By understanding the environment in which you operate, you can *build on the identified strengths, reduce the weaknesses, take advantage of the opportunities and minimize the threats.* Specifically, the analysis will enable officers of an MDA to isolate and understand the risks associated with an increase or decrease in service delivery and focus development in that direction with the main objective of improving on service delivery and governance.

	Strength	Weakness	Opportunity	Threats
Political				
Economic				
Social				
Technology				
Legal				
Environment				

Goals, which are long-term (5 to 20 years), are properly aligned with the MDA's vision, mission, strategic and other issues from the SWOT/PESTLE analysis, and stakeholders' expectations. These LTGs set the stage for the formulation of more precise medium-term objectives (MTOs) which could be for 3 to 5-year time horizon.

The MTOs derive from the LTGs and take account of political manifestos, short- to medium-term priorities, human resources, and budget and resource envelopes. Delivering on the MTOs and overall strategic objectives require a mix of well-articulated policies and planned financial and human resources. These policies and

financial resources will be addressed through Medium-term strategic plans that schedule costed activities over a medium-term period, that is, 3-5 year period.

The medium-term objectives are usually used as the MDA's performance standards/indicators against which the its performance will be measured. The MTOs are therefore the basis for developing its Service Charters and/or Service level standards – contracts of service delivery commitments made by the MDA to its stakeholders.

Clarifying goals and objectives

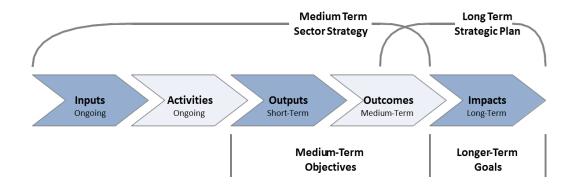


Diagram: The results chain

Illustrative Examples of LTGs and MTOs:

1. Water Corporation

No	Long-term Goals	Medium-term objectives	Strategies
1	Access to clean water for all citizens of the State by 2025	To supply 745 million gallons per day by 2020, 622 million gallons by 2017, 317 million gallons per day by 2020	Ensuring the necessary long-term financial resources to deliver the access to clean water for all citizens. Conducting regular research on areas of need
			Sensitizing communities of the cleanliness and health benefits of pipe borne water
2		By the end 2015 the Water Corporation will be "fit" for the purpose of delivering the overall objective. It will have the necessary leadership and management capacity in place; the appropriate "business orientated" culture and the necessary, flexible, efficient 9and effective workforce and	Ensuring the establishment of an operational, independent Water Corporation Board with powers to: • Employing its workforce; • Deciding staffing numbers; • Deciding the terms of conditions of service of its workforce; enter into contracts and partnerships as an independent statutory body within government; and borrow money.

		financial resources necessary to deliver its plans effectively.	 Developing institutional, organizational and individual capacities
3	Have better synergy with, and coordination of all partners in all our activities	To have in place a comprehensive Partners Coordination Framework by 2020	Strengthening partners (horizontal and vertical) coordination: • Development partners; • State partners (EXCO, legislatures, MDAs, LGAs) • Non-state actors: Civil Society, traditional Leaders', NGOs, community leaders, media, professionals etc on pipe borne water generation and supply; • All other state and non-state partners. Ensuring regular meetings Ensuring that partners contribute to the State Development plans.
4	To strengthen performance management system	To institutionalize robust individual and organizational performance management systems by 2020	 Raising staff productivity and performance by: Reviewing and updating the existing staff performance measurement tools and using them annually; Implementing policy on reward and sanctions; Enforcing employee performance contracts. Organizational Developing robust planning, monitoring and evaluation framework; Developing service charter compliance evaluation tools and implementing them. Sensitizing beneficiaries of their rights to demand.

Note: the long-term goal (strategic objective) and medium-term objective (target) cannot be achieved without collaboration with other MDAs e.g. physical planning and infrastructure. The activities and inputs require major organizational changes, including devolved responsibility for finance and human resource management.

2. Primary Health Care Development Agency

S/N	Long-term	Medium-term	Strategies		
	Goals	Objectives			
1	To advance health and wellbeing of individuals and communities	To reduce the prevalence of epidemic diseases (Measles, Meningitis, Cholera, Lassa Fever, etc) by 20% by 2020	 Increasing immunization coverage; Strengthening disease surveillance; Providing drugs and health commodities; Improving hygiene and sanitation; Liaising with relevant water agencies to provide potable water; Training and retraining of health workers; Creating awareness – community sensitization and mobilisation. 		
		To reduce the prevalence of endemic diseases (Malaria, Typhoid, Diarrhoea, etc) by 20% by 2020	 Same as above including: Providing and monitoring use long lasting insecticide mosquito net (LLIN); Carrying out indoor residual spray (IRS); Distributing mectizan, SP, albendazole, mebendazole, etc. 		
		To reduce nutritional disorders (Kwashiorkor and Marasmus) by 30% by 2020	 Screening of children under five years; Providing and monitoring use of ready to use therapeutic food (RUTF), F75 and F100; Creating awareness – sensitization and mobilization; Establishing more OTP and SC sites; Developing capacity for staff in the programme; Carrying out nutritional surveys and research. 		
		 To reduce: Maternal mortality rate by 15% in 2020; Child mortality rate by 25% in 2020; Infant mortality rate by 20% by 2020 	 Increasing number of skilled birth attendants; Improving awareness on the imperative of antenatal care (ANC); Providing input for focused ANC; Providing incentives for facility delivery; Developing capacity of health workers; Implementing task-shifting and task-sharing policy; Increasing number of health facilities that provides free maternal and child health services; Sustaining supply of essential drugs. 		

2	To improve equitable access to and utilisation of healthcare services	To increase the number of facilities from by 25% by 2020	 Constructing of new facilities; Equipping and staffing new facilities; Rehabilitating/expanding existing facilities; Providing drugs and health commodities; Equitable distributing of facilities and HR.
		To increase number of health facilities providing minimum service package from 0 in 2017 to 500 by 2020	 Upgrading/modernizing existing primary healthcare centres to comply with minimum service package; Developing human and organizational capacity; Distributing facilities and HR equitably.
		To increase the number of patients and clients utilising health facilities by 60% by 2020	 Creating awareness – community sensitization and mobilization; Increasing outreach services; Institutionalizing village health workers/Community Oriented Resource Persons (CORPs) Providing drugs and health commodities; Providing resources (human resources, material, finance).
		To increase number of HR for health by 40% by 2020	 Reviewing reward and incentive policies for medical personnel – incentive Employing new medical personnel Utilising better, the Midwife Services Scheme (MSS) and Nursing and Midwifery Council of Nigeria Internship.

Note: Good quality information and baseline data is essential in measuring progress in achieving these objectives.

Performance monitoring:

- Every medium-term objective must be 'SMART' (specific, measurable, attainable, realistic, time-bound, gender and social inclusive);
- Each measure must be owned by a director and cascaded to staff;
- Each measure must be reviewed monthly by the board; individual performance appraisal linked to achievement.

'Score card' measures:

- Percentage customer satisfaction;
- Percentage employee satisfaction;
- Rating in the Environment Index;
- Percentage of positive and factual media coverage;
- Suppliers' rating of the organisation's performance;

 Percentage of stakeholders agreeing that the organisation meets social obligations.

Crafting Medium-Term Objectives

Strategy answers four questions:

- Where are we now?
- Where do we want to get to?
- How can we get there? and
- In what time-frame?

Strategic objectives articulate the standard and volume of services that will be provided:

- Who the service users and beneficiaries will be and what they will value,
- The relative strengths of the assumptions the organisation is making about the world and context in which it is operating (including the political, economic, social, technological, legal and environmental forces at play)
- The strengths weaknesses, opportunities and threats faced, the resources available; and
- The staff and capability that will be required for success.

As the world changes, strategic objectives are a means by which organisations can keep up or even get ahead.

Why set objectives?

- People get so wrapped up in their current activity or problem that they can lose sight of their objectives.
- If people cannot see clearly what they are working towards they will become demotivated or less productive than they should be.
- Capacity to deliver services is increased when the purpose and goal are clear.
- In the 'activity trap' people will go to great lengths to avoid facing the reality of their situation; the work becomes a means of distracting their attention from unpalatable reality; being busy becomes the goal.

The advantages of working to clear objectives include:

- Organisational goals and medium-term objectives allow senior staff to see 'the bigger picture' and to integrate their function with it;
- Responsibility and the level of risk involved is known; responsibility and risk taking can be delegated to lower levels;
- Medium-term objectives help in making strategic decisions about service delivery, functions, organisation and processes;
- Team members know what is expected of them and they are able to measure their performance and results in relation to shared and common objectives;
- Managers and directors who know what is expected of them can communicate better with staff and professionals including in gaining responsible collaboration and participation.

Goals, Long and Medium-Term Objectives (MTOs) and KPIs template

Corporate Planning: Clarifying Purpose, Establishing Objectives and Success Indicators (KPIs)

No	0.	MDA Mandate (s)	Contribution to State plans or Goals and MTSS	Long Term Strategic Goals (Purpose / Why)	Medium-term Objectives (3-5 years) (How)	How success will be measured (KPIs)	Accountabil ity (Departmen t or Unit)

Note – This exercise may take several hours and needs to go through a number of iterations until the purpose and objectives are clear.

Aims of the exercise:

- To set objectives for the MDA ensure that the objectives are SMART (specific, measurable, attainable, realistic and time-bound);
- To ensure that such objectives are aligned to the MDA's ministerial mandates i.e. can objectives enable the delivery of the mandate and core services?
- Establish how success will be measured, i.e. determining KPIs (quantity and quality);
- Ensure Gender and Social Inclusion (G&SI) issues e.g. accessibility to services, equal treatment are considered;
- Ensure all aspects on MTOs are included: technical and sector specific; institutional (legislation, regulation); organisational (structural and functional changes); Human Resource Management (HRM) (skills capability and deployment); governance and accountability.

Example: PESTLE/SWOT Analysis Template

PESTLE Analysis: The purpose of this analysis is to offer respondents who are senior and experienced civil servants in the State a tool to objectively assess how their macro-environment has affected or will affect the purpose of their respective MDAs.

The general external environment of an MDA comprises of, but is not limited to political, economic, social, technological, legal and environmental (ecological, geographical or physical) factors that create the context within which the MDA must function. These factors are mostly outside the MDA and the MDA has little or no control over them.

PESTLE is an acronym for Political, Economic, Social, Technological, Legal and Environmental factors affecting an MDA either positively or negatively.

Some examples of **Political** factors are:

- government policies,
- type of political leadership
- government decision making processes
- change of government
- type of government
- foreign influences, etc.

Some Examples of **Economic** factors are:

- · Government fiscal policy and financial system
- Volume of money in circulation
- Banking operations and services obtainable
- Economic Growth and Development
- Average income in the MDA area of coverage
- Prevalent Employment situation in the area covered
- Average purchasing power and standard of living, etc.

Some examples of **social** factors are:

- attitudes and opinions of end users of your services of your MDA
- Media views of your MDA
- Major events that affects how you work in your MDA
- Major influences from outside your MDA that inform how work is done
- Ethnic/religious factors
- Ethical issues
- Demographics (age, gender, race, family size,)
- Change in lifestyle
- Population issues
- Education influence
- State of health facility and practices
- Average Living standards
- Housing trends
- Influence of fashion
- Type of leadership and role models available
- Prevailing general attitude to work
- Attitudes to people doing certain types of work

Common leisure activities:

- Occupational trend and productivity level of the majority of people
- Average earning capacity, etc

Some examples of **Technological** factors are:

- Automation of some work processes
- The impact of the internet on information processing and data management
- Increased availability and reduced cost of transport
- Advances in online money transfers
- Improvements in telecommunications,
- Innovations such as new discoveries, research outcomes
- Rate of obsolescence in your MDA, etc

Some examples of **legal** factors:

- All binding legislations of your MDA (local, national or international)
- Regulations
- Regulatory bodies and processes that your MDA must comply with
- Civil Service laws and regulations
- All justice and judicial processes affecting your MDA
- The mandate of your MDA
- The constitution and laws binding on your MDA
- Enshrined rights and privileges of people around of your MDA,
- All prescriptive and/or competitive regulations concerning your MDA, etc.

Some examples of **environmental** factors:

- All positive and negative influences imposed on your MDA by the virtue of its geographical location of your MDA within the state.
- Physical environment of your MDA
- The topography,
- Weather,
- Climate,
- Vegetation,
- Soil, and
- Other ecological factors that affects the operation of your MDA

Environmental issues and regulations/policies (local, national and international), etc.