



**BASELINE MAPPING REPORT:
HUMAN RESOURCES FOR HEALTH (HRH) GAP
ANALYSIS AND STRATEGIC RECRUITMENT PLAN
FOR PRIMARY HEALTHCARE (PHC) IN GOMBE
STATE (2025–2029)**

GOMBE STATE MINISTRY OF HEALTH



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Gombe State Ministry of Health
Primary Health Care Development Agency

FOREWORD

A robust and efficient healthcare system relies on the strength of its workforce. The lack of skilled, motivated, and adequately staffed health professionals remains a significant challenge in delivering quality healthcare services to our community, irrespective of the resources available in hospitals and Primary Health Centres (PHCs). The Gombe State Government is committed to improving the Human Resources for Health (HRH) system, acknowledging its significance within the broader Universal Health Coverage (UHC) initiative. This baseline mapping report and the Multi-Year HRH Recruitment and Sustainability Plan (2025–2030) is designed to systematically recruit, train, deploy, and retain health workers across all PHCs in the state, ensuring that every community has access to quality healthcare services. This plan ensures that all communities, including urban, rural, and underserved areas, have access to qualified healthcare providers. The plan aligns with the Gombe State Health Sector Reform Agenda under the visionary leadership of His Excellency Mohammadu Inuwa Yahaya and is essential to our goal of positioning Gombe as the healthiest state in Nigeria.

I urge all stakeholders, including health workers, policymakers, development partners, private sector representatives, and the residents of Gombe State, to support the full implementation of this plan. Let's collaborate to create a resilient health workforce and a healthier future for our state.



Dr. Habu Dahiru

Honourable Commissioner for Health
Gombe State Government

ACKNOWLEDGMENT

We would like to extend our heartfelt appreciation to His Excellency, Muhammdu Inuwa Yahaya, CON, (Dan Majen Gombe), Executive Governor of Gombe State, for his insightful leadership and steadfast dedication to the transformation of healthcare. The focus of his administration on revitalising Primary Health Care (PHC) and investing in human capital development has laid the groundwork for this plan.

We express our heartfelt gratitude to the Honourable Commissioner for Health, Dr. Habu Dahiru (Danmasanin Deba), for his strategic guidance, policy knowledge, and unwavering commitment to ensuring that this baseline mapping report and the recruitment plan is in harmony with the broader health sector reform agenda of Gombe State. His commitment to enhancing HRH systems and service delivery has played a crucial role in shaping this initiative.

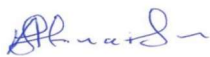
We extend our heartfelt gratitude to the Permanent Secretaries of the Ministry of Health, Dr. Ibrahim Yakubu Usman, and the Ministry of Budget and Economic Planning, Alh. Jalo Ibrahim Ali mni, for their unwavering dedication to enhancing primary healthcare services. Their exemplary leadership in promoting HRH strengthening, workforce expansion, and service equity throughout all LGAs is truly commendable. Their effort and dedication have played a vital role in the success of this plan.

We express our gratitude to the Director of Planning, Research, and Statistics (DPRS), Dr. Suraj Abdulkarim Abdullahi, for his thorough research, insightful data analysis, and valuable policy recommendations, which have guaranteed that this HRH plan is grounded in evidence and consistent with national and global HRH best practices.

Additionally, we express our gratitude to Mr. Jamilu Usman and Mr. Paul Balogun, whose technical skills, coordination efforts, and steadfast commitment to workforce planning and implementation have greatly enhanced the depth and quality of this document.

Finally, we acknowledge and value the efforts of all health professionals, government agencies, development partners, and staff of the agency who contributed to the development of this HRH recruitment and sustainability plan. Your collaboration and input will propel the successful execution of this initiative, ensuring that every citizen of Gombe State has access to skilled, motivated, and properly assigned health professionals.

Together, we are building a stronger, more resilient healthcare system for the people of Gombe State.



Dr Abdulraham Shuaibu

Executive Secretary

Gombe State Primary Healthcare Development Agency

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LIST OF ABBREVIATIONS AND ACRONYMS

ABBREVIATION	MEANING
AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral Therapy
CHOs	Community Health Officers
CHEWs	Community Health Extension Workers
DLI	Disbursement Linked Indicators
DST	Directly Observed Treatment
FH	Family Health
GOPH	Gombe State Ministry of Health
GPMHS	Gombe State Ministry of Health
GPHCDA	Gombe State Primary Healthcare Development Agency
HIV	Human Immunodeficiency Virus
HU	Health Unit
IMN	Infant Mortality Rate
JCHEW	Junior Community Health Extension Worker
LGA	Local Government Area
MOH	Ministry of Health
MSP	Minimum Service Package
NGO	Non-Governmental Organization
NPHCDA	National Primary Health Care Development Agency
NTD	Neglected Tropical Diseases
PHC	Primary Health Care/Primary Health Centre
PHCDA	Primary Health Care Development Agency
RHS	Rural Health Scheme

ABBREVIATION	MEANING
RHU	Rural Health Unit
SFP	Seasonal Malaria Chemoprevention
STIs	Sexually Transmitted Infections
SWAp	Sector Wide Approach
TB	Tuberculosis
UHC	Universal Health Coverage
UHMIS	Universal Health Management Information System
WASH	Water, Sanitation and Hygiene
WHO	World Health Organization

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EXECUTIVE SUMMARY

This report presents a comprehensive baseline mapping and Human Resources for Health (HRH) gap analysis of Gombe State's Primary Health Care (PHC) system, conducted in alignment with the Minimum Service Package (MSP 2024–2028), and in fulfillment of DLI 5.2 of the Nigeria Human Capital Opportunities for Prosperity and Equality Governance (HOPE-Gov) project. The analysis applied a mixed-methods approach, incorporating facility surveys across 598 PHC facilities, historical staffing records, stakeholder interviews, and the HRH Optimization Tool to validate and triangulate workforce data.

Findings reveal a total requirement of 10001 health workers across all PHC facility types (PHCCs, PHCs, Health Clinics, and Health Posts), whereas only 3419 staff are currently deployed, indicating a staffing shortfall of 6582 workers or 66% below national standards. Notably, key cadres such as doctors, nurses/midwives, and medical laboratory technicians are critically underrepresented, while Environmental Health Officers (EHOs) and Health Attendants are overstaffed in some locations. The skilled health worker density is just 2.5 per 10,000 population, far below the national benchmark of 10 per 10,000. Disparities are particularly pronounced in rural LGAs like Kaltungo, Nafada, and Yalmatu Deba.

To address these gaps, the report outlines a five-year strategic recruitment and deployment plan (2025–2029) targeting 6,582 new hires, including attrition replacement. The plan is structured to prioritize underserved rural areas (81% of total recruits), backed by a costed budget of ₦13.2 billion for salaries, training, and retention incentives. Gender analysis reveals a modest female majority in overall staffing (52.3%), though local disparities persist. Additionally, a robust training needs matrix and phased upskilling strategy are included to ensure that new and existing staff meet MSP service expectations.

Finally, the report emphasizes sustainability measures, including integration into state budgeting cycles, stakeholder coordination, and a monitoring framework to ensure long-term impact. With timely implementation, this HRH plan can reposition Gombe's PHC sector to deliver equitable, quality, and people-centered healthcare, and advance progress toward Universal Health Coverage (UHC) and Sustainable Development Goals (SDGs).

1.0 INTRODUCTION

A well-functioning health workforce is the backbone of any effective healthcare system. In Gombe State, Nigeria, the Primary Health Care (PHC) system faces significant challenges in terms of workforce availability, distribution, and competency. These challenges hinder the delivery of essential health services and the achievement of Universal Health Coverage (UHC). This baseline mapping report provides a comprehensive assessment of the current HRH situation, identifies critical gaps, and offers strategic recommendations to strengthen the health workforce in Gombe State.

Gombe State is committed to improving access to quality healthcare services for all its residents. However, the state's health system struggles with inadequate staffing levels, uneven distribution of health workers, and skill mix imbalances. These issues are more pronounced in rural and underserved areas, where access to healthcare is most limited. Addressing these challenges is essential to ensure equitable access to healthcare and to meet the health-related Sustainable Development Goals (SDGs).

The PHC system in Gombe State is organized into 11 Local Government Areas (LGAs), each responsible for managing and coordinating PHC services within its jurisdiction. There are a total of 456 PHC facilities across the state, including PHC centers, maternal and child health (MCH) clinics, and rural health posts. These facilities serve as the first point of contact for healthcare services for the majority of the population, particularly in rural and underserved areas. The PHC system is designed to provide comprehensive primary healthcare services, including maternal and child health, immunization, disease prevention and control, and basic curative services. However, the distribution of PHC facilities is uneven, with higher concentrations in urban areas and significant gaps in rural regions.

The health workforce in Gombe State is characterized by severe shortages across all cadres. The state currently employs only 3,874 health workers, far below the total requirement of 13,224, to meet the MSP standards. This represents a significant gap of 11,350 health workers. The shortage is most critical for doctors, medical laboratory scientists, and other specialized cadres, with none of the PHC facilities having a resident doctor. Additionally, there is a heavy reliance on lower cadres such as Community Health Extension Workers (CHEWs) and Junior Community Health Extension Workers (JCHEWs), who are often overburdened and lack specialized training.

The state's health workforce also faces challenges in terms of distribution. Urban areas have relatively better staffing levels compared to rural areas, where health workers are severely concentrated.

The document also highlights the urgent need for targeted interventions to recruit, train, and retain health workers, particularly in rural and underserved areas. By addressing these challenges, Gombe State can build a resilient health workforce capable of delivering high-quality care to all communities.

2.0 METHODOLOGY

This section outlines the methodological approach used to conduct the baseline mapping and the Human Resources for Health (HRH) Gap Analysis for Gombe State's Primary Health Care (PHC) system. The analysis employed a mixed-methods approach to comprehensively assess the current state of the health workforce and identify gaps in relation to the Minimum Service Package (MSP) 2024–2028 and Universal Health Coverage (UHC) objectives.

2.1 Data Sources and Collection

The data for the baseline mapping and HRH Gap Analysis was collected through multiple sources to ensure comprehensiveness and accuracy. **Primary data** was gathered through a comprehensive survey of all 456 PHC facilities across the 11 LGAs in Gombe State. This involved the use of standardized questionnaires and data collection forms designed to capture detailed information on staffing levels, cadre distribution, facility infrastructure, and service delivery capacity. Additionally, **secondary data** was obtained from the Gombe State Ministry of Health, the Primary Health Care Development Agency, and relevant government databases. This included historical staffing records, health service utilization data, and existing HRH policies and plans. **Stakeholder interviews** with health officials, facility managers, and health workers were also conducted to gather qualitative insights into the challenges and dynamics of the PHC system.

To enhance the **reliability and validity** of the collected data, the HRH Optimization tool was employed. This tool provided a systematic approach to compiling and validating the data, ensuring consistency and minimizing errors. It allowed for the integration of data from various sources and facilitated the identification of discrepancies and outliers, which were then verified through additional checks and cross-referencing with facility records.

2.2 Analytical Framework

The analysis employed a multi-dimensional framework to assess the HRH situation. **Descriptive analysis** was used to map the distribution of PHC facilities and staffing levels across LGAs. **Comparative analysis** was conducted to evaluate the current workforce against the recommended standards outlined in the Gombe State Minimum Service Package (MSP) 2024 – 2028. This involved calculating staff-to-population ratios and comparing them with national and international benchmarks. **Gap analysis** was performed to quantify the shortfalls in staffing levels for each cadre. **Equity analysis** was applied to examine disparities in staffing between urban and rural areas, as well as gender distribution within the workforce. **A heat map visualization** technique was employed to highlight critical gaps and prioritize areas for intervention. Furthermore, a **cost-benefit analysis** was conducted to assess the financial implications of the proposed recruitment and training plan.

The **HRH Optimization tool** played a crucial role in the analytical process. It provided advanced data analysis capabilities, enabling the identification of trends, patterns, and potential bottlenecks in the health workforce. The tool facilitated the application of various analytical techniques, such as predictive modeling and scenario analysis, to forecast future HRH requirements and evaluate the impact of different intervention strategies. It also supported the development of the strategic recruitment and deployment plan by simulating different recruitment scenarios and optimizing resource allocation to achieve the desired workforce levels within the given constraints.

2.3 Definitions and Assumptions

Key terms and assumptions were clearly defined to ensure consistency in the analysis. PHC facilities were categorized according to the national classification system, including PHC centers, maternal and child health centers, and health posts. HRH cadres were defined based on the national health workforce taxonomy, including doctors, nurses/midwives, community health officers, CHEWs, JCHEWs, and others. The analysis assumed that the recommended staffing levels in the MSP are achievable and sufficient to meet the health needs of the population. It also assumed that the current health service utilization rates and disease burden patterns would remain relatively stable over the planning period. Additionally, the analysis assumed that the proposed recruitment and training plan would be implemented as scheduled, with no significant disruptions.

2.4 Limitations

Despite the rigorous data collection and analysis process, several limitations were acknowledged. Data accuracy was a potential issue due to inconsistencies in record-keeping across facilities. Some staffing records were found to be incomplete or outdated, which may have affected the precision of the gap calculations. The analysis was also constrained by the availability of data on certain aspects, such as the competency levels and training needs of the existing workforce. Furthermore, the analysis did not account for potential changes in health service delivery models or technological advancements that could influence future HRH requirements. Finally, the financial projections were based on current salary scales and benefit packages, which may be subject to change due to policy reforms or economic factors.

3.0 HEALTH SYSTEM & HRH CONTEXT IN GOMBE STATE

3.1 Overview of PHC Structure

Gombe State's primary health care (PHC) system is organized into 11 Local Government Areas (LGAs), each responsible for managing and coordinating PHC services within its jurisdiction. There is a total of 598 PHC facilities across the state, including PHC centers, maternal and child health (MCH) clinics, and rural health posts (1). These facilities serve as the first point of contact for healthcare services for the majority of the population, particularly in rural and underserved areas. The PHC system is designed to provide comprehensive primary healthcare services, including maternal and child health, immunization, disease prevention and control, and basic curative services. However, the distribution of PHC facilities is uneven, with higher concentrations in urban areas and significant gaps in rural regions.

3.2 National and State HRH Policies

The Nigerian National Health Policy emphasizes the importance of a well-trained and adequately distributed health workforce to achieve Universal Health Coverage (UHC) (2). The Primary Health Care Development Agency (PHCDA) has established standards and guidelines for HRH in PHC facilities, including recommended staffing levels and skill mix (3). **At the state level**, Gombe State has developed its own health sector strategic plan, which aligns with the national goals and outlines specific objectives for strengthening the health system. The Gombe State Minimum Service Package (MSP) 2024–2028 sets clear benchmarks for staffing levels in PHC facilities to ensure the delivery of quality healthcare services (4). However, the implementation of these policies and standards has been challenging due to resource constraints and systemic bottlenecks.

3.3 State Demographic and Epidemiological Profile



Gombe State, with 11 LGAs as shown in the map, has a population of approximately 3.4 million people, with a growth rate of 2.8% per annum (5). The population is predominantly rural, with about 65% living in rural areas. The state has a young population, with over 45% under the age of 15 (6). The urbanization rate is relatively low, but it is increasing steadily, leading to higher demands for health services in urban centers. The epidemiological profile of the state is characterized by a high burden of communicable diseases such as malaria, tuberculosis, and respiratory infections (7). Maternal and child health indicators are also a major concern, with high maternal mortality ratio (MMR) and under-5 mortality rate (U5MR). Non-communicable diseases (NCDs) are emerging as a significant public health challenge, particularly in urban areas.

3.4 Health Status and Disease Burden

The health status of the population in Gombe State is generally poor, with limited access to quality healthcare services, especially in rural and underserved areas. The state has a high prevalence of maternal and child health issues, with an MMR of 580 per 100,000 live births and an U5MR of 120 per 1,000 live births (8). Malaria remains the leading cause of morbidity and mortality, accounting for over 40% of outpatient visits (9). Malnutrition is prevalent among children under five, with stunting rates exceeding 30% (10). The disease burden is further compounded by limited access to clean water and sanitation facilities, which contributes to the high incidence of waterborne diseases. The health system faces significant challenges in addressing these health issues due to inadequate HRH, poor infrastructure, and limited resources.

4.0 PHC FACILITY AND STAFFING OVERVIEW

This section provides an overview of the distribution and staffing levels of Primary Health Care (PHC) facilities across Gombe State. The data is based on comprehensive mapping of all 598 PHC facilities and 17 non-PHC facilities (14 Administrative Offices, and 3 posts at secondary facilities) spread across the 11 Local Government Areas (LGAs).

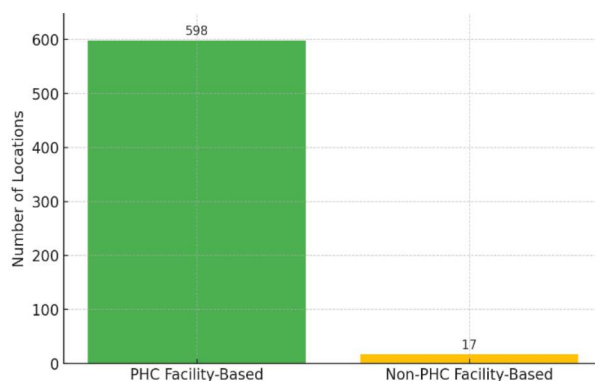
Table 4.1 Current Operational Locations of Gombe State PHC Staff by LGA

LGA	PHCC	PHC	Health Clinic	Health Post	PHC Facility Subtotal	OFFICE	Others	Non-PHC Facility Subtotal	Grand Total
AKKO	11	44	0	21	76	1	0	1	77
BALANGA	10	6	25	17	58	1	0	1	59
BILLIRI	10	33	0	23	66	1	0	1	67
DUKKU	11	41	0	19	71	1	1	2	73
FUNAKAYE	10	42	0	0	52	1	0	1	53
GOMBE	11	5	5	3	24	3	0	3	27
KALTUNGO	10	0	44	3	57	1	0	1	58
KWAMI	10	1	23	20	54	1	0	1	55
NAFADA	10	22	0	0	32	2	0	2	34
SHONGOM	10	29	1	13	53	1	0	1	54
Y/DEBA	11	0	18	26	55	1	2	3	58
Total	114	223	116	145	598	14	3	17	615

The distribution of operational locations where PHC staff are deployed across Gombe State shows that out of 615 total locations, 598 (97.2%) are facility-based comprising PHCCs, PHCs, Health Clinics, and Health Posts while only 17 (2.8%) are non-facility-based, such as offices and special facilities. This indicates that the vast majority of PHC staff are positioned at service delivery points within communities, supporting decentralized healthcare access. LGAs like Akko, Dukku, and Billiri have the highest number of facility-based locations, while non-facility deployments are mainly concentrated in Gombe, Dukku, and Yamaltu/Deba, suggesting strategic hubs for coordination and oversight functions.

Figure 4.1 PHC Facility-Based vs Non-Facility-Based Operational Locations in Gombe State

Here is the bar chart showing the number of operational locations for PHC staff in Gombe State. It clearly illustrates that the majority of deployments are in PHC facility-based locations (598), with only a small number (17) in non-facility-based locations such as offices and special facilities



Here is the bar chart showing the number of PHC staff distributed across different types of operational locations in Gombe State. It highlights that the majority of staff are posted at PHCCs (1,683) and PHCs (1,007), followed by Offices (609), Health Clinics (395), Health Posts (332), and a few in Special Facilities (26). This indicates a strong workforce presence at key service delivery points

Table 4.2 Staff Distribution by Location Type

Category	PHC Staff Count	Non-PHC Staff Count
PHCC	1683	
PHC	1007	
Health Clinic	397	
Health Post	332	
Office		609
None-PHC Facility		26
Subtotal	3419	635
Grand Total	4054	4054

The side-by-side summary of PHC staff deployment across Gombe State reveals a clear concentration of personnel within facility-based locations. Of the total 4,058 PHC staff, 84.4% (3,419 staff) are assigned to direct service delivery points, including Primary Health Care Centres (PHCCs – 1,683 staff), PHCs (1,007 staff), Health Clinics (397 staff), and Health Posts (332 staff). In contrast, only 15.6% (639 staff) are deployed in non-facility-based roles such as LGA PHC Offices (609 staff) and Special Facilities (30 staff). This distribution aligns with the state’s focus on strengthening front-line health service delivery, ensuring that the majority of the workforce is positioned within community-accessible facilities. The relatively smaller proportion of staff in administrative supports system coordination, planning, and supervision functions essential to effective primary health care governance.

Table 4.3: Distribution of Current Staff (Both Facility and Non-Facility) by LGA

LGA	SITE	STAFF	GENDER	
			Female	Male
AKKO	77	644	278 (43.2%)	366 (56.8%)
BALANGA	59	308	127 (41.2%)	181 (58.8%)
BILLIRI	67	348	223 (64.1%)	125 (35.9%)
DUKKU	73	340	135 (39.7%)	205 (60.3%)
FUNAKAYE	53	406	175 (43.1%)	231 (56.9%)
GOMBE	27	508	292 (57.5%)	216 (42.5%)
KALTUNGO	58	159	113 (71.1%)	46 (28.9%)
KWAMI	55	394	209 (53.0%)	185 (47.0%)
NAFADA	34	185	67 (36.2%)	118 (63.8%)
SHONGOM	54	425	304 (71.5%)	121 (28.5%)
Y/DEBA	58	337	198 (58.8%)	139 (41.2%)
Total	615	4054	2121 (52.3%)	1933 (47.7%)

Table 4.3 presents the distribution of Primary Health Care (PHC) staff across Gombe State by LGA, number of sites, total staff strength, and gender composition. A total of 4,054 PHC staff are deployed across 615 sites in the 11 LGAs. Gender-wise, 52.3% (2,121) of the workforce are female, while 47.7% (1,933) are male, indicating a fairly balanced gender representation at the state level, with a slight female majority.

However, LGA-level analysis reveals significant gender disparities. Shongom (71.5%) and Kaltungo (71.1%) have the highest proportion of female staff, followed by Billiri (64.1%), suggesting strong female representation in these areas. In contrast, Nafada (36.2%) and Dukku (39.7%) have the lowest proportion of female staff, indicating male-dominated staffing. Gombe LGA, despite having the fewest sites (27), hosts a substantial number of staff (508), with female staff making up 57.5%, likely reflecting its administrative role. These disparities highlight the need for targeted gender equity efforts in recruitment and deployment, particularly in LGAs with a low female workforce, to promote inclusivity and ensure that health service delivery is culturally responsive across communities in Gombe State.

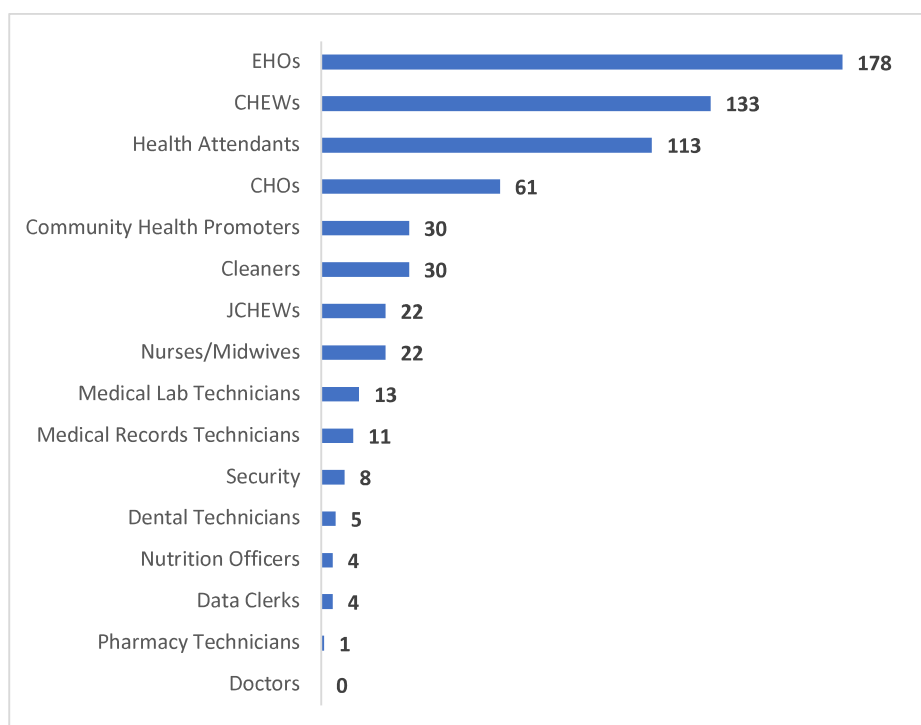
Table 4.4 Facility-Based Staff by Cadre

Cadre	Health Clinic	Health Post	PHC	PHCC	Facility-Based Total
Doctors	0	0	0	0	0
Nurses/Midwives	1	0	3	31	35
CHOs	8	2	19	92	121
CHEWs	98	55	244	389	786
JCHEWs	47	33	119	150	349
EHOs	106	99	233	291	729
Pharmacy Technicians	0	1	0	11	12
Medical Records Technicians	6	2	19	47	74

Medical Lab Technicians	5	1	7	82	95
Dental Technicians	0	0	8	17	25
Health Attendants	108	126	318	433	985
Security	6	2	11	47	66
Cleaners	4	7	9	41	61
Data Clerks	1	0	0	2	3
Community Health Promoters	2	0	12	17	31
Nutrition Officers	5	4	5	33	47
Total					3419

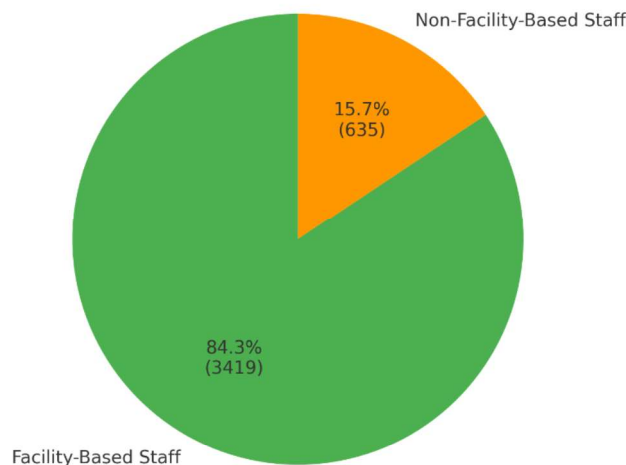
The Facility-Based Staff by Cadre in table 4.4 reveals that the bulk of the PHC workforce in Gombe State is concentrated in front-line service delivery points such as PHCCs, PHCs, Health Clinics, and Health Posts. Among all cadres, Health Attendants (985), CHEWs (786), and EHOs (729) constitute the largest groups deployed across these facilities, highlighting the system’s reliance on community- and environmental-level health workers for primary care delivery. Notably, JCHEWs (349) and CHOs (121) also have substantial representation, supporting clinical and supervisory roles. Deployment of professional cadres like Nurses/Midwives (35) and Medical Lab Technicians (94) is relatively low, indicating potential gaps in skilled facility-based care. Doctors remain completely absent from all PHC facility levels, suggesting a critical shortage at the front-line level. This staffing pattern reflects a health system primarily driven by mid- and lower-level health workers, with a need to rebalance the workforce to enhance quality of care at the facility level.

Figure 4.2 PHC Staff Distribution by Cadre (Non-Facility-Based)



The visual distribution of non-facility-based PHC staff across Gombe State shows a strong concentration in support and mid-level health worker roles. Environmental Health Officers (EHOs) form the largest group with 178 staff, followed by Community Health Extension Workers (CHEWs) at 133, and Health Attendants at 113, indicating their key roles in administrative offices and special facility functions. Notably, higher-level clinical cadres like Doctors are completely absent, and Nurses/Midwives (22) and JCHEWs (22) are only minimally represented in non-facility settings. Technical cadres such as Medical Records Technicians (11), Medical Lab Technicians (13), and Data Clerks (4) are sparsely distributed, suggesting limited diagnostic and information management capacity at the administrative level. The presence of Cleaners (30) and Community Health Promoters (30) underscores a supportive environment, but the overall composition reflects a system where managerial and coordination functions rely heavily on mid- and low-level staff, with minimal specialist input. This highlights a potential need to enhance the skills mix within non-facility-based teams for improved oversight and system efficiency.

Figure 4.3 Distribution of PHC Staff: Facility vs Non-Facility Based



The pie chart in figure 4.3, illustrates the distribution of Primary Health Care (PHC) staff in Gombe State between facility-based and non-facility-based locations. Out of a total of 4,056 PHC staff, approximately 84.3% (3,417 staff) are deployed at facility-based locations, including PHCCs, PHCs, Health Clinics, and Health Posts. These are frontline service delivery points, reflecting the state's commitment to ensuring accessible community-based healthcare. In contrast, only 15.7% (639 staff) are located in non-facility-based settings, such as administrative offices and special facilities, which support coordination, supervision, and system oversight. This distribution demonstrates a strong focus on direct service provision, while also maintaining a lean administrative workforce to support the health system's operational needs.

Table 4.5 Gender and PHC Facility Based Staffing Distribution

FACILITY	Sum of Total No. of Staff	Sum of No. Female	Sum of No. of Male
Health Clinic	397	238	157
Health Post	332	146	186
PHC	1007	550	457
PHCC	1683	950	733
Grand Total	3419	1884	1533

Table 4.5 shows staff distribution across all primary health care facility types in Gombe State with a total of 3,419 personnel, with 1,884 females (55.1%) and 1,533 males (44.9%), indicating a female-majority workforce.

Among facility types:

- PHCCs (Primary Health Care Clinics), being the most comprehensive and better-resourced, account for the highest number of staff with 1,683, comprising 950 females and 733 males.
- PHCs follow with 1,007 staff, of which 550 are female and 457 males.
- Health Clinics have 397 staff, with a higher female proportion (238 females) compared to 159 males.
- Interestingly, Health Posts are the only facility type with more male staff (186) than female (146) out of 332 total staff, possibly reflecting deployment patterns in rural or hard-to-reach areas.

This distribution highlights gender imbalances across different facility types, with implications for equitable workforce planning, gender-sensitive HR policies, and facility-level support strategies.

Table 4.6 Facility Types and Service Packages

Facility Type	Number of Facilities	Key Services Provided
PHCC (Primary Health Care Clinic)	114	Comprehensive primary care, emergency obstetric care, maternal and child health services, immunization, referral services, minor surgeries
PHC (Primary Health Centre)	223	Maternal and child health, outpatient care, antenatal services, basic lab tests, immunization, family planning
HC (Health Clinic)	116	Outpatient care, immunization, antenatal care, treatment of common illnesses
HP (Health Post)	145	Basic health promotion, immunization, first aid, referral to higher facilities
Total	598	

Table 4.6 shows that Gombe State currently has a total of 598 Primary Health Care (PHC) facilities, distributed across four main categories: Primary Health Care Clinics (PHCCs), Primary Health Centres (PHCs), Health Clinics (HCs), and Health Posts (HPs). Each facility type plays a distinct role in the delivery of essential health services at the community level.

- PHCCs (114 facilities) provide the most comprehensive range of services, including emergency obstetric care, minor surgeries, referral services, and comprehensive maternal and child health care. These facilities serve as the first-level referral points within the PHC system.
- PHCs (223 facilities) focus on maternal and child health, outpatient consultations, antenatal care, immunization, basic laboratory services, and family planning, offering a broader but less specialized package than PHCCs.
- Health Clinics (116) deliver outpatient care, antenatal services, and treatment of common illnesses, with limited diagnostic or emergency capabilities.
- Health Posts (145) are the most basic facility type, providing health promotion, immunization, first aid, and facilitating referrals to higher-level centers.

This distribution suggests that while PHCs are the most common facility type (representing 37% of all facilities), there is a balanced spread of service tiers, allowing for scalability and coverage across rural and urban settings. The layered facility structure supports a referral-based PHC system, where clients can receive care appropriate to the level of need, with the ability to escalate to higher levels when necessary. However, the relatively lower number of PHCCs which are equipped to handle emergencies may indicate a need for strengthening or upgrading select PHCs to PHCC standards to improve emergency response capacity at the local level.

5.0 GAP ANALYSIS

To conduct an accurate workforce gap analysis, Gombe State adopted a facility-specific staffing standard derived from the National Primary Health Care Development Agency (NPHCDA) Minimum Standards for PHC (2012). This standard defines the ideal number of staff per cadre required in each type of primary health facility, namely PHC Centers, Maternal and Child Health (MCH) Clinics, and Rural Health Posts. The standard reflects the expected service package at each level and serves as a benchmark for identifying staffing gaps.

Table 5.1 below presents the required number of staff per cadre per facility type. It provides the baseline for comparing with current deployments in Gombe State to determine where significant surpluses or shortfalls exist. This analysis helps guide recruitment planning, staff redistribution, and training priorities to ensure each facility type is adequately staffed to deliver quality health services. The detailed breakdown of staff gap per facility is presented in Annex 2 of this report.

Table 5.1 Staffing Standard per Cadre and Facility Type

Cadre	Health Post (HP)	Health Clinic (HC)	Primary Health Centre (PHC)	PHC Clinic (PHCC)
Doctors	0	0	0	1
Nurses/Midwives	0	1	2	4
CHOs	0	0	1	1
CHEWs	1	2	3	4
JCHEWs	1	1	2	2
EHOs	0	1	1	1
Pharmacy Technicians	0	0	1	1
Medical Records Technicians	0	0	1	1
Medical Lab Technicians	0	0	1	2
Dental Technicians	0	0	0	1
Health Attendants	1	1	2	2
Security	1	1	1	2
Cleaners	1	1	1	2
Data Clerks	0	0	1	1
Community Health Promoters	0	1	2	2
Nutrition Officers	0	0	1	1

Note: Adapted from the National Primary Health Care Development Agency (NPHCDA) Minimum Standards for Primary Health Care in Nigeria (2012)

Table 5.1 outlines the recommended staffing standards by health worker cadre across the four tiers of primary healthcare facilities in Nigeria Health Post (HP), Health Clinic (HC), Primary Health Centre (PHC), and Primary Health Care Clinic (PHCC). These

standards are critical for ensuring a minimum service package is consistently delivered at each facility level.

- Health Posts, being the most basic facility type, are designed to operate with minimal staff. They require just two frontline workers: one Community Health Extension Worker (CHEW) and one Junior CHEW (JCHEW), making them suitable for delivering basic health promotion, first aid, and referrals.
- Health Clinics are expected to have a broader but still limited team that includes at least 1 Nurse/Midwife, 2 CHEWs, 1 JCHEW, and a few essential support staff (e.g., Cleaners, Security, Health Attendants). This supports delivery of outpatient care and preventive services like immunization and antenatal care.
- Primary Health Centres (PHCs) serve as the first-level comprehensive care facilities and are expected to be staffed with skilled health professionals, including 2 Nurses/Midwives, 1 CHO, 3 CHEWs, 2 JCHEWs, and technical support staff such as Lab Technicians, Medical Records, Pharmacy Technicians, and Nutrition Officers. This allows PHCs to offer maternal and child health services, family planning, minor treatment procedures, and diagnostic services.
- Primary Health Care Clinics (PHCCs) represent the most advanced level among PHC facilities. They are expected to have a full complement of staff, including a Medical Doctor, 4 Nurses/Midwives, 4 CHEWs, 2 Lab Technicians, Dental Technicians, and other support and administrative personnel. This configuration supports emergency obstetric care, minor surgeries, and comprehensive outpatient services, positioning PHCCs as the referral and coordinating hub for lower-level facilities.

This staffing standard ensures that human resources are aligned with service delivery expectations at each facility level. However, comparing this standard to actual staffing data (as seen in earlier tables) may highlight gaps in skilled personnel, especially in the areas of doctors, pharmacists, and lab professionals. Addressing such gaps will be essential for meeting national PHC performance benchmarks and improving health outcomes at the community level.

Table 5.2 Facility Structure Under One PHCC

Facility Type	Expected No. Per PHCC	Function
PHCC (Primary Health Care Clinic)	1	Hub facility at ward level (comprehensive care + coordination)
PHC / HC (Health Centres or Clinics)	4 – 5	Mid-level PHC service delivery (maternal care, outpatient, etc.)

HP (Health Posts)	6 – 10	Basic-level outreach and referral points in remote areas
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Note: Adapted from the National Primary Health Care Development Agency (NPHCDA) Minimum Standards for Primary Health Care in Nigeria (2012)

The recommended facility structure under a single Primary Health Care Clinic (PHCC) reflects a tiered and integrated model of service delivery aimed at ensuring accessibility, continuity, and referral efficiency within each ward. At the core of this structure is one PHCC per ward, functioning as the hub facility responsible for delivering comprehensive primary care services, including emergency obstetric care, minor surgeries, referral coordination, and administrative oversight of lower-tier facilities.

Each PHCC is expected to be supported by 4–5 PHCs or Health Clinics (HCs), which serve as mid-level service delivery points, offering outpatient care, maternal and child health services, antenatal care, immunization, and basic diagnostic services. These facilities act as the first point of clinical contact for most clients and provide upward referrals to the PHCC for more advanced care.

Further down the structure are 6–10 Health Posts (HPs), strategically located in hard-to-reach or underserved communities. Health Posts provide basic health promotion, first aid, immunization, and act primarily as referral gateways to higher-level facilities. This pyramid-like structure ensures that every community is within reasonable reach of essential health services, with a clear referral pathway from HPs to PHCs/HCs and up to the PHCC.

This model promotes equitable and decentralized healthcare delivery, supports task-shifting, and enables community-level surveillance and engagement. Successful implementation depends not only on the physical presence of these facilities but also on adequate staffing, supply chains, supervision, and transport systems to facilitate effective coordination and patient referrals.

Table 5.3 PHC Centers Staffing Gap Analysis (114 PHC Centers)

Cadre	PHC Clinic (PHCC)	Total Expected	% of State Workforce	Current Workforce (PHCC)	Staffing Gap (-/+)
Doctors	1	114	0.0%	0	-114
Nurses/Midwives	4	456	6.8%	31	-425
CHOs	1	114	80.7%	92	-22
CHEWs	4	456	85.3%	389	-67
JCHEWs	2	228	65.8%	150	-78
EHOs	1	114	255.3%	291	177
Pharmacy Technicians	1	114	9.6%	11	-103
Medical Records Technicians	1	114	41.2%	47	-67

Medical Lab Technicians	2	228	36.0%	82	-146
Dental Technicians	1	114	14.9%	17	-97
Health Attendants	2	228	189.9%	433	205
Security	2	228	20.6%	47	-181
Cleaners	2	228	18.0%	41	-187
Data Clerks	1	114	1.8%	2	-112
Community Health Promoters	2	228	7.5%	17	-211
Nutrition Officers	1	114	28.9%	33	-81

Note: Negative (-) gaps mean staff shortages, positive (+) gaps show surplus

Staffing analysis for Gombe State’s 114 Primary Health Care Clinics (PHCCs) as guided by the National Primary Health Care Development Agency (NPHCDA) minimum standards reveals significant shortfalls across most critical health worker cadres, as shown in table 5.3. While each PHCC is expected to have at least one doctor, none are currently deployed, resulting in a 100% staffing gap. Similarly, only 31 out of 456 required Nurses/Midwives (6.8%) are in place. Key technical roles such as Pharmacy Technicians (9.6%), Medical Lab Technicians (36.0%), and Dental Technicians (14.9%) also show major deficits, indicating a limited capacity to provide essential clinical, pharmaceutical, and diagnostic services at the PHCC level.

Mid-level cadres, which form the backbone of PHC service delivery, show comparatively higher coverage. Community Health Officers (CHOs) and Community Health Extension Workers (CHEWs) have reached 80.7% and 85.3% of their expected numbers respectively, while Junior CHEWs (JCHEWs) are at 65.8% coverage. However, support staff such as Data Clerks (1.8%), Security (20.6%), and Cleaners (18.0%) remain significantly underrepresented, which may affect patient records, facility safety, and hygiene. Interestingly, Environmental Health Officers (255.3%) and Health Attendants (189.9%) are overstaffed relative to the standard, suggesting a misalignment between current deployment and actual service needs.

Overall, the data demonstrates that while Gombe State has successfully established the recommended number of PHCCs (114), the distribution and composition of staff do not align with national standards. There is a critical need to recruit and deploy more skilled medical and technical staff, particularly doctors, nurses, and diagnostic personnel, while also rationalizing support staff based on facility workload and service demands. Addressing these disparities is essential to ensure PHCCs function effectively as ward-level hubs for comprehensive, high-quality primary healthcare.

Table 5.4 PHCs Staffing Gap Analysis (223 Clinics)

Cadre	PHC	Total Expected	% of State Workforce	Current Workforce (PHC)	Staffing Gap (-/+)
Doctors	0	0	0.0%	0	0
Nurses/Midwives	2	446	0.7%	3	-443
CHOs	1	223	8.5%	19	-204
CHEWs	3	669	36.5%	244	-425
JCHEWs	2	446	26.7%	119	-327
EHOs	1	223	104.5%	233	10
Pharmacy Technicians	1	223	0.0%	0	-223
Medical Records Technicians	1	223	8.5%	19	-204
Medical Lab Technicians	1	223	3.1%	7	-216
Dental Technicians	0	0	0.0%	8	8
Health Attendants	2	446	71.3%	318	-128
Security	1	223	4.9%	11	-212
Cleaners	1	223	4.0%	9	-214
Data Clerks	1	223	0.0%	0	-223
Community Health Promoters	2	446	2.7%	12	-434
Nutrition Officers	1	223	2.2%	5	-218

Note: Negative (-) gaps mean staff shortages, positive (+) gaps show surplus. N/R = Not Required.

Table 5.4 shows staffing analysis for Gombe State's 223 Primary Health Centres (PHCs) with a substantial shortfall in key cadres required to deliver the essential package of PHC services. According to national staffing standards, each PHC should be staffed with mid- and low-level healthcare workers, yet the data reveals that critical clinical cadres are severely underrepresented. For example, only 3 Nurses/Midwives are currently deployed out of 446 expected, and no doctors or pharmacy technicians are assigned to any PHC. Similarly, technical support cadres such as Medical Lab Technicians (3.1%), Medical Records Technicians (8.5%), and Nutrition Officers (2.2%) fall well below their expected numbers, indicating a lack of capacity for diagnostics, record-keeping, and nutrition services.

Despite these gaps, certain cadres show moderate-to-strong representation. Community Health Extension Workers (CHEWs) and Junior CHEWs (JCHEWs) form the core of the workforce at this level, accounting for 36.5% and 26.7% coverage respectively. Environmental Health Officers (EHOs) are the only cadre exceeding the standard, with 104.5% coverage, suggesting an over-concentration in this category. Meanwhile, Health Attendants, though not yet at full strength, cover 71.3% of their target. However, other essential operational roles such as Cleaners (4.0%), Security (4.9%), and Data Clerks (0.0%) are poorly staffed, which may impact facility cleanliness, safety, and data reporting.

In summary, the staffing situation at PHCs in Gombe State indicates a serious deficit in skilled clinical and technical personnel, especially in nursing, laboratory, pharmacy, and data management roles. This undermines the capacity of PHCs to serve as effective mid-level service points within the PHC system. While reliance on CHEWs and JCHEWs aligns with community health strategies, the absence of higher-skilled professionals limits the scope and

quality of services provided. Bridging these gaps through targeted recruitment, capacity building, and workforce realignment will be essential to strengthen PHC functionality and improve health outcomes at the community level.

Table 5.5 Health Clinics Staffing Gap Analysis (116 Posts)

Cadre	HC	Total Expected	% of State Workforce	Current Workforce (PHC)	Staffing Gap (-/+)
Doctors	0	0	0.00%	0	0
Nurses/Midwives	1	116	0.90%	1	-115
CHOs	0	0	0.00%	8	8
CHEWs	2	232	42.20%	98	-134
JCHEWs	1	116	40.50%	47	-69
EHOs	1	116	91.40%	106	-10
Pharmacy Technicians	0	0	0.00%	0	0
Medical Records Technicians	0	0	0.00%	6	6
Medical Lab Technicians	0	0	0.00%	5	5
Dental Technicians	0	0	0.00%	0	0
Health Attendants	1	116	93.10%	108	-8
Security	1	116	5.20%	6	-110
Cleaners	1	116	3.40%	4	-112
Data Clerks	0	0	0.00%	1	1
Community Health Promoters	1	116	1.70%	2	-114
Nutrition Officers	0	0	0.00%	5	5

Table 5.5 shows staffing review for Gombe State’s 116 Health Clinics (HCs) reveals modest levels of coverage across key community health cadres, but significant shortfalls in several operational and technical support roles. Based on the national staffing standard of 2 CHEWs and 1 JCHEW per HC, there should be 232 CHEWs and 116 JCHEWs. Currently, 98 CHEWs (42.2%) and 47 JCHEWs (40.5%) are in place, indicating partial fulfillment in these frontline roles. Nurses/Midwives, although expected at a rate of 1 per clinic, are critically underrepresented with only 1 currently deployed out of 116 required (0.9%). There are no doctors, which aligns with the staffing standard, as doctors are not expected at the HC level.

Support staff such as Environmental Health Officers (EHOs) and Health Attendants have relatively high representation 91.4% and 93.1% respectively indicating strong coverage for hygiene, sanitation, and basic patient support services. However, essential non-clinical roles show severe underrepresentation: Cleaners (3.4%), Security personnel (5.2%), and Community Health Promoters (1.7%) are all far below the required thresholds. Additionally, some staff categories not typically expected at HC level such as CHOs, Nutrition Officers, Medical Records Technicians, and Lab Technicians are currently in place in small numbers, suggesting either facility upgrading, over-deployment, or task-shifting practices.

Overall, while Gombe State's Health Clinics have made progress in deploying CHEWs, JCHEWs, and EHOs, the absence of key clinical support staff and under-deployment of facility management personnel present a major constraint to effective service delivery. The data points to a need for rebalancing the workforce, with a focus on fulfilling the staffing standards for cleaning, security, and community outreach roles, and evaluating the appropriateness of assigning technical cadres to facility types where they are not formally required. Strengthening these areas would improve operational efficiency and the quality of care provided at the HC level.

Table 5.6 Health Posts Staffing Gap Analysis (145 Posts)

Cadre	HP	Total Expected	% of State Workforce	Current Workforce (PHC)	Staffing Gap (-/+)
Doctors	0	0	0.00%	0	0
Nurses/Midwives	0	0	0.00%	0	0
CHOs	0	0	0.00%	2	2
CHEWs	1	145	37.90%	55	-90
JCHEWs	1	145	22.80%	33	-112
EHOs	0	0	0.00%	99	99
Pharmacy Technicians	0	0	0.00%	1	1
Medical Records Technicians	0	0	0.00%	2	2
Medical Lab Technicians	0	0	0.00%	1	1
Dental Technicians	0	0	0.00%	0	0
Health Attendants	1	145	86.90%	126	-19
Security	1	145	1.40%	2	-143
Cleaners	1	145	4.80%	7	-138
Data Clerks	0	0	0.00%	0	0
Community Health Promoters	0	0	0.00%	0	0
Nutrition Officers	0	0	0.00%	4	4

The staffing assessment for Gombe State's 145 Health Posts (HPs) as shown in table 5.6, highlights a limited but essential workforce structure, aligned with national expectations for these entry-level facilities. Health Posts are designed to operate with just 1 Community Health Extension Worker (CHEW) and 1 Junior CHEW (JCHEW) per facility. However, the data shows significant shortfalls in both categories only 55 CHEWs (37.9%) and 33 JCHEWs (22.8%) are currently deployed indicating that nearly two-thirds of Health Posts lack the minimum required staffing for basic service delivery. No doctors or nurses are expected at this level, and none are present, which aligns with the PHC staffing guidelines.

Surprisingly, cadres not typically assigned to Health Posts such as Environmental Health Officers (99 staff), Medical Records Technicians (2), Lab Technicians (1), and Nutrition Officers (4) are present, suggesting possible over-deployment or role overlap in these facilities. The high number of EHOs (99) in particular may reflect programmatic demands for sanitation and hygiene promotion at the community level, although this exceeds the standard and may indicate a need for reassessment. On a positive note, Health Attendants are relatively well

represented, with 126 currently deployed (86.9%), supporting non-clinical tasks such as basic patient care and facility upkeep.

The greatest gaps are in operational support: Security (1.4%) and Cleaners (4.8%) are critically underrepresented, which can undermine the safety, cleanliness, and functionality of these community-level service points. The absence of Community Health Promoters and Data Clerks may also impact outreach activities and record-keeping. Overall, while Health Posts are not expected to be fully staffed with clinical professionals, the shortage of CHEWs and JCHEWs their core personnel is a significant concern. Addressing this gap is critical to ensuring minimum service coverage in hard-to-reach and rural communities, where Health Posts often serve as the first and only point of contact with the health system.

Figure 5.1 PHC Staffing Summary by Cadre (All Facility Types)

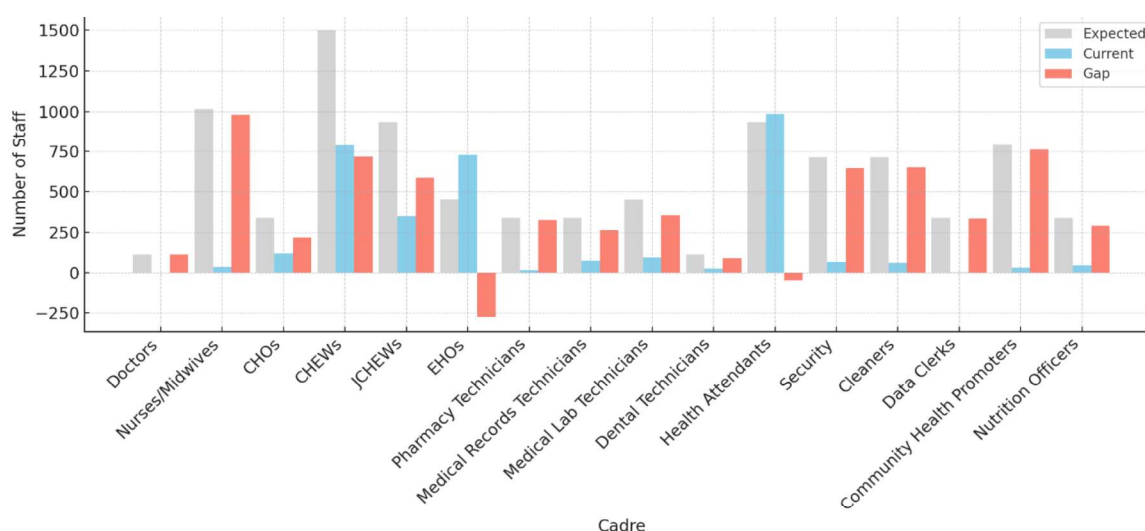


Figure 5.1 presents a comparative summary of staff distribution across all Primary Health Care (PHC) facility types in Gombe State, highlighting the *expected*, *current*, and *gap* in staffing for each health worker cadre.

- **Significant Gaps in Key Cadres:** The chart shows substantial staffing shortfalls in nearly all professional cadres. Notably, Nurses/Midwives, CHEWs, JCHEWs, and Community Health Promoters exhibit the widest gaps between expected and current workforce, confirming a critical shortage in frontline clinical personnel essential for maternal and child health services.
- **Support Cadres Are Also Underserved:** There are major gaps in Security, Cleaners, and Data Clerks, indicating that operational support systems within facilities are equally overstretched. This can affect safety, cleanliness, and data management.
- **Overstaffing in EHOs and Health Attendants:** Interestingly, Environmental Health Officers (EHOs) and Health Attendants show minimal or negative gaps suggesting they are overstaffed in relation to the national standard. This points to a misalignment in deployment priorities that may require rationalization.

- Cadres with Zero or Very Low Presence: Cadres such as Doctors, Pharmacy Technicians, and Medical Lab Technicians are almost entirely absent despite being expected at facility levels, which significantly undermines the ability to deliver quality diagnostics and curative services.

Table 5.7 PHC Facility Based Staffing Summary

Facility Type	No. of Facilities	Total Expected Staff + Attrition	Current Staff Strength	Staffing Gap (-/+)	Attrition
PHCC	114	3548	1683	1792	73
PHC	223	4617	1007	3471	139
HC	116	1096	397	672	27
HP	145	740	332	393	15
Total	598	10001	3419	6328	254

Table 5.7 presents a summary of staffing requirements, current availability, and gaps across various types of primary health care (PHC) facilities in Gombe State. Out of 598 functional facilities, the system requires a total of 10,001 staff (including attrition adjustments) to meet the expected staffing levels. However, only 3,419 staff are currently in place, resulting in a significant staffing gap of 6,328 personnel indicating that just over 34% of required staff are available.

Across facility types, Primary Health Clinics (PHCs) and Primary Health Care Centres (PHCCs) account for the largest share of the gap, with shortfalls of 3,471 and 1,792 respectively. Health Clinics (HCs) and Health Posts (HPs) also reflect considerable under-staffing. The recorded attrition of 254 staff further compounds the challenge, with PHCs experiencing the highest attrition (139), signaling potential instability in staffing retention. This situation underscores the urgent need for targeted recruitment, retention strategies, and workforce redistribution to ensure adequate service delivery across all PHC facility levels.

Table 5.8 Skilled Health Worker Ratio Table

LGA	Population	Total Staff	% of Workforce	Skilled Staff	Skilled per 10,000	Expected Ratio	Gap
Akko	565,000	603	17.6%	156	2.8	10	7.2
Balanga	354,100	274	8.0%	74	2.1	10	7.9
Billiri	339,400	285	8.3%	84	2.5	10	7.5
Dukku	347,700	216	6.3%	82	2.4	10	7.6
Funakaye	398,000	320	9.4%	98	2.5	10	7.5
Gombe	446,800	402	11.8%	122	2.7	10	7.3
Kaltungo	268,600	124	3.6%	38	1.4	10	8.6
Kwami	324,800	368	10.8%	95	2.9	10	7.1
Nafada	234,700	97	2.8%	45	1.9	10	8.1
Shongom	252,800	422	12.3%	103	4.1	10	5.9

Yalmatu Deba	428,200	308	9.0%	81	1.9	10	8.1
Total	4,519,100	3419	100.0%	978	2.5(avg)	10	7.5(avg)

Note: Population are based on estimates from the Gombe State Bureau of Statistics. Expected ratio: 10 per 10,000. Skilled staff distributed by LGA workforce share.

Table 5.8 provides a snapshot of the distribution and adequacy of skilled PHC workers across the 11 LGAs in Gombe State, benchmarked against the national standard of 10 skilled health workers per 10,000 population. With a total of 978 skilled staff serving a population of over 4.5 million, the average skilled health worker density stands at just 2.5 per 10,000 indicating a substantial workforce shortfall across the state. The resulting average gap of 7.53 highlights a critical deficit in the availability of skilled personnel required to deliver essential health services.

Notably, no LGA meets the national benchmark, with the highest density observed in Shongom (4.1 per 10,000) and the lowest in Kaltungo (1.4 per 10,000). Despite having the highest number of skilled staff (156), Akko still records a significant gap (7.2), reflecting the influence of population size on workforce adequacy. These findings underscore the urgent need for targeted recruitment, equitable redistribution, and investment in workforce planning to strengthen primary health care delivery across Gombe State.

Table 5.9 Future Workforce Requirements Based on Urban vs Rural Ratio

Classification of Location	List of Component LGAs	Staff Gap	Ratio
Urban	Akko, Gombe	-14.5	2.7
Rural	Balanga, Billiri, Dukku, Funakaye, Kaltungo, Kwami, Nafada, Shongom, Yalmatu Deba	-68.3	2.4
Total	All LGAs	-82.8	2.5

The analysis of skilled health worker distribution across urban and rural LGAs in Gombe State in Table 5.9, reveals a significant imbalance in staffing relative to population needs. Urban LGAs (Akko and Gombe) together have a skilled health worker ratio of 2.7 per 10,000, slightly higher than the 2.4 per 10,000 observed in the rural LGAs. However, both classifications fall well below the national benchmark of 10 per 10,000, indicating a statewide shortfall in skilled health workforce.

As presented in Table 5.9, 82.4% of the current staff gap (-68.3 out of -82.8) is concentrated in rural locations, while only 17.5% (-14.5) is found in urban areas. This highlights the disproportionate burden of staff shortages in rural LGAs, where access to health services is already constrained by geographic and infrastructural challenges. Despite urban LGAs having slightly better ratios, they too remain under-resourced relative to national standards.

These findings strongly justify the need for a massive redistribution and expansion of the skilled health workforce, with a priority focus on rural LGAs, where the majority of the population resides and the service delivery gaps are most pronounced. Strategic investments in rural health staffing through targeted recruitment, deployment, and incentives will be essential for achieving equitable healthcare access across the state.

Table 5.10 Training Needs Matrix

Cadre	Facility Type(s)	Reason for Training Need	Suggested Training Focus
Nurses/Midwives	PHC, MCH, Health Posts	Critical shortage and limited deployment	EmONC, IMCI, family planning, respectful maternity care
CHEWs	All	Backbone of PHC, need for advanced procedure skills	IMCI, safe delivery, minor ailments, supervisory skills
JCHEWs	All	Numerous, potential for internal upgrading	Bridging to CHEW, immunization, health promotion
CHOs	PHC, MCH, Health Posts	Limited availability, key supervisory role	Health management, supportive supervision, data use
EHOs	PHC, Health Posts	Present in some facilities, underutilized	Environmental sanitation, outbreak response, food hygiene
Pharmacy Technicians	PHC	Critical gap, often under-skilled or misassigned	Rational drug use, drug inventory, dispensing standards
Medical Records Techs	PHC, MCH, Health Posts	Deployed without full HMIS capacity	DHIS2 reporting, data quality, digital health records
Medical Lab Technicians	PHC, MCH	Found where not expected or insufficient training	Rapid diagnostics, biosafety, sample handling
Dental Technicians	PHC, MCH	Deployed without clear role	Basic oral care, screening, referral protocols
Health Attendants	All	Numerous but lack clinical safety knowledge	Infection prevention, waste handling, basic patient care
Security/Cleaners	All	Oversupplied, often informal	Facility safety, respectful conduct, hygiene protocols
Data Clerks	PHC, MCH	Often clerical, need digital and HMIS skills	DHIS2, Excel, monthly report generation
Community Health Promoters	All	Key to mobilization, many untrained volunteers	IPC, health messaging, demand generation techniques
Nutrition Officers	PHC	Present but few, essential for targeted child health efforts	Maternal/child nutrition, counselling, growth monitoring

Justification for Identified Training Needs

The training needs, shown in Table 5.9, were determined using three key methods:

1. **Staffing Gap Analysis:** Cadres with major shortages (e.g. CHEWs, CHOs, Nurses/Midwives) were prioritized for upskilling or bridging programs. For example, gaps in CHEWs support the need to upgrade JCHEWs through targeted training.
2. **Mismatch Between Role and Deployment:** Cadres like Medical Lab Technicians and EHOs were found in facilities where they are not required by standard, signaling the need for cross-training to ensure relevance and value in their current placements.
3. **Service Package vs. Competence Needs:** Each facility type has a defined service package. Comparing this with the deployed workforce revealed skill gaps. For example, staff at MCH Clinics require EmONC and immunization skills, while data clerks need capacity in DHIS2 and electronic reporting tools.

Implementation Considerations for Training Plan

To operationalize the identified training needs, Gombe State will:

1. Work with **existing training institutions** (e.g. Schools of Health Technology, Colleges of Nursing)
2. Leverage **in-service modular training** and **on-site mentorship** coordinated by GSPHCDA and LGA PHC coordinators
3. Use **digital platforms** where feasible (for data clerks, medical records, CHOs)
4. Prioritize **training in batches**, aligned with the phased recruitment plan (2025–2029)
5. Monitor training coverage and post-training impact through quarterly reviews

Why This Training Investment is Cost-Effective

By focusing on **existing staff** and upskilling **new recruits**, the state can rapidly increase service readiness without relying solely on long-term pre-service pipelines. This also supports **task-shifting, career progression** (e.g. JCHEWs to CHEWs), and improves retention when staff feel supported and valued in their roles.

Table 5.11 Suggested Training Timeline (2025–2029)

Aligned with phased recruitment plan and training institution capacity

Year	Training Focus
2025	Orientation & onboarding for 10% recruits; refresher for existing staff in critical roles (CHEWs, CHOs)
2026	Modular training for 25% new recruits; JCHEW bridging begins

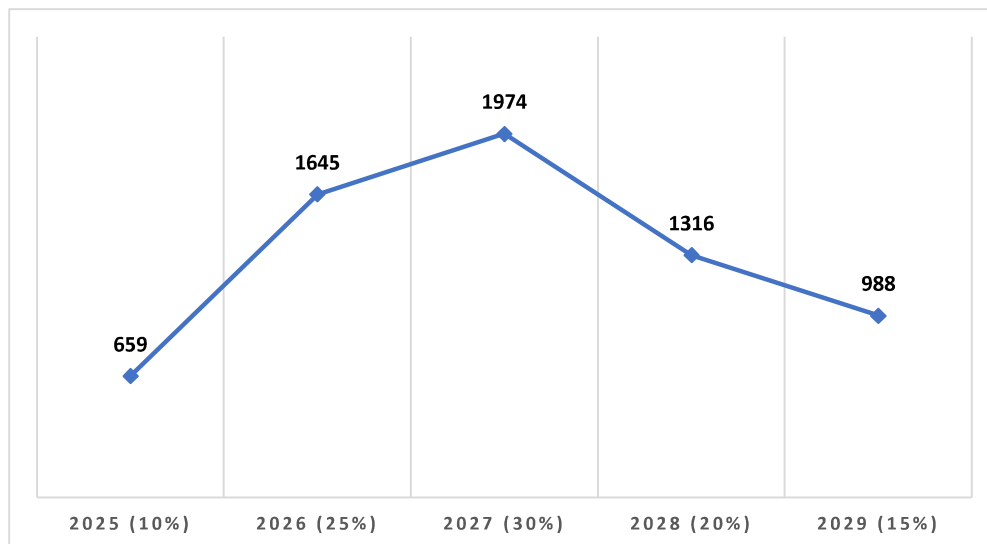
2027	Largest training batch (30%); scale up for lab, data, and pharmacy technicians
2028	Specialist training: EmONC, DHIS2, supportive supervision
2029	Final batch onboarding; refresher courses and mid-term evaluation-based updates

6. STRATEGIC RECRUITMENT & DEPLOYMENT PLAN (2025–2029)

To address the critical workforce gaps and achieve the Minimum Service Package (MSP) targets by 2029, a phased recruitment and deployment strategy has been developed. This plan prioritizes equity, efficiency, and sustainability while aligning with the fiscal and operational constraints of Gombe State.

6.1 Recruitment Plan (Targets and Phasing)

Figure 6.1: Five-Year Recruitment Projection – Gombe State PHC (2025–2029)



The five-year recruitment projection for Gombe State PHC illustrates a structured plan to close staffing gaps across primary health facilities. The line graph in Figure 6.1 shows that a total of 6,582 health workers will be recruited in phases from 2025 to 2029, with the highest intake occurring in 2027 (1,974 staff or 30%), followed by 2026 (1,645 staff or 25%), 2028 (1,316 staff or 20%), 2029 (988 staff or 15%), and 2025 (659 staff or 10%). This progressive increase in early years ensures rapid workforce buildup before tapering into maintenance levels by 2029.

The approach reflects a commitment to gradually strengthen the PHC system by filling critical workforce gaps, especially in underserved areas. The declining trend after 2027 also accounts for reduced pressure as the staffing gap narrows, while simultaneously integrating attrition replacement to sustain the workforce size. If implemented as planned, this strategy will significantly improve PHC service delivery and equity in healthcare access across Gombe State.

6.1 Recruitment Plan (Targets and Phasing)

Table 6.1: 2025–2029 PHC Workers Recruitment and Deployment Plan

Cadre	Original Gap	Attrition	(Gap + Attrition)	2025 (10%)	2026 (25%)	2027 (30%)	2028 (20%)	2029 (15%)
Doctors	114	5	119	12	30	36	24	18
Nurses/Midwives	983	39	1022	102	256	307	204	153
CHOs	216	9	225	23	56	67	45	34
CHEWs	716	29	745	75	186	223	149	112
JCHEWs	586	23	609	61	152	183	122	91
Pharmacy Technicians	325	13	338	34	85	101	68	51
Medical Records Technicians	263	11	274	27	68	82	55	41
Medical Lab Technicians	356	14	370	37	93	111	74	56
Dental Technicians	89	4	93	9	23	28	19	14
Security	646	26	672	67	168	202	134	101
Cleaners	651	26	677	68	169	203	135	102
Data Clerks	334	13	347	35	87	104	69	52
Community Health Promoters	759	30	789	79	197	237	158	118
Nutrition Officers	290	12	302	30	75	90	60	45
Total	6328	254	6582	659	1645	1974	1316	988

Table 6.1 outlines a strategic five-year recruitment and deployment plan aimed at addressing the human resource gaps in Gombe State’s Primary Health Care (PHC) system. Based on a total staffing gap of 6,328 across key cadres, an additional 254 staff are projected to exit due to attrition (retirement from service, transfer of service to other levels of care, resignation, etc.), bringing the cumulative staff need to 6,582.

The recruitment is phased: 10% of the required workforce will be recruited in 2025 (659 workers), scaling up to 25% in 2026 (1,645), peaking at 30% in 2027 (1,974), and tapering to 20% and 15% in 2028 (1,316) and 2029 (988) respectively.

The plan prioritizes cadres with the highest service impact and critical shortages. For example, Nurses/Midwives (1,022) and CHEWs (745) represent major components of the required workforce due to their frontline roles in maternal and child health services. The strategy also accommodates operational staff such as Security (672) and Cleaners (677) to support functionality and hygiene in PHC facilities. By spreading recruitment over five years and including attrition considerations, this plan aims to progressively close workforce gaps, enhance service quality, and achieve sustainable human resource management within the PHC sector in Gombe State.

Recruitment Strategy

The State will prioritize new hires through competitive recruitment process in line with the recruitment policy for health workers, this includes absorption of graduates from the schools of health and schools of nursing in the state. Where necessary, existing part-time staff in any facility will also be evaluated and converted as full-time health workers. Also, excess workers that are not optimally engaged in facilities with surpluses will be reviewed on priority basis and redistributed to facilities where their services/skills are critically required.

In addition, the State plan to balance out the gender disparity observed in affected LGAs during recruitment and deployment exercise.

6.2 Deployment Plan

Classification of Location	Total to be Deployed	Ratio	2025	2026	2027	2028	2029
Urban Facilities	1,251	19%	126	312	375	250	187
Rural Facilities	5,331	81%	533	1,333	1,599	1,066	801
Total	6,582	100%	659	1,645	1,974	1,316	988

Note: Deployment per year is rounded proportionally from each category's total (10%, 25%, 30%, 20%, 15%).

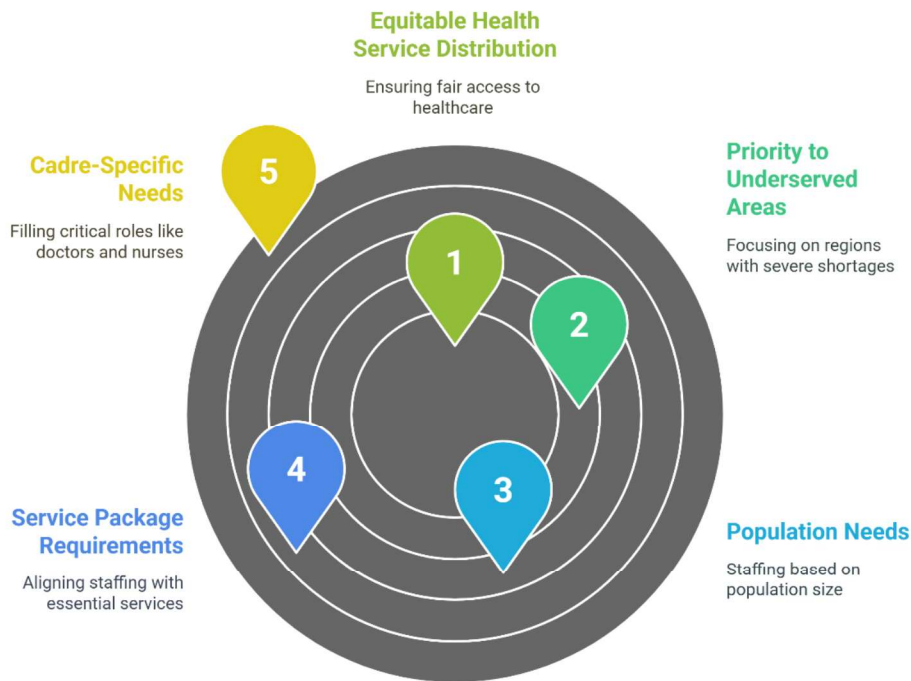
Table 6.2 reflects the geographic distribution of staff recruitment across Gombe State's PHC system from 2025 to 2029, based on identified workforce gaps. Out of 6,582 staff needed, 81% (5,331 staff) are planned for deployment to rural facilities, which reflects the disproportionate staff shortages in remote areas. Conversely, only 19% (1,251 staff) are allocated to urban facilities.

The phased deployment plan prioritizes rural coverage each year, with over 500 staff deployed to rural settings in 2025 alone, growing annually in line with the overall recruitment targets. This approach underscores the government's commitment to addressing rural health inequities and achieving more balanced access to essential services across the state.

6.2.1 Deployment Criteria and Prioritization

To ensure equitable distribution of health workers across all 11 LGAs, the deployment criteria in Figure 6.1 will be applied.

Figure 6.2: Deployment Criteria Diagram



The diagram above illustrates the prioritization process used in deploying health workers across Gombe State. Each numbered criterion represents a key factor considered in deployment decisions. Arrows are used to clearly link the numbered items to their corresponding descriptions to enhance clarity and visual understanding.

1. **Equitable Distribution of Health Services:** Ensure a fair spread of health workers between urban and rural areas so that all communities have access to quality care.
2. **Focus on Underserved and Hard-to-Reach Areas:** Give priority to locations with poor access to health services, such as remote villages or communities with limited healthcare infrastructure.
3. **Responding to Population Health Needs:** Deploy more staff to areas with large populations or where there is a high burden of illness (e.g., high rates of malaria or maternal deaths).
4. **Facility Readiness and Service Capacity:** Assign staff to facilities that are already equipped with the necessary infrastructure and tools to deliver essential services.
5. **Cadre-Specific Staffing Gaps:** Prioritize LGAs with the most urgent shortage of specific health workers (e.g., no nurses, doctors, or lab technicians).

6.3 Multi-Year Recruitment and Deployment Cost

The cost implications of the recruitment and deployment plan are presented in Tables 6.3 – 6.9. The cost covers the estimated expenses for the recruitment exercise, salaries of the new recruits, allowances, training costs and other costs like stationery, utilities, work station, etc.

Table 6.3 Cost of Recruitment Exercise

Year	Total Staff to be Recruited	Cost of Recruitment Exercise (₦)
2025	659	₦32,950,000
2026	1645	₦82,264,000
2027	1974	₦98,716,800
2028	1316	₦65,811,200
2029	988	₦49,358,400
Total	6582	₦329,100,400

Assumption: A unit cost of **₦50,000 per staff** was applied, covering all key activities: advertising, assessments, interviews, documentation, and onboarding logistics.

Over the five-year period from 2025 to 2029, the Gombe State Government plans to recruit a total of 6,582 PHC workers to address the identified human resource gaps across all facility types. The recruitment effort is projected to cost a total of ₦329,100,400, applying a standard unit cost of ₦50,000 per staff, which encompasses all essential recruitment activities, including job advertisement, screening, interviews, documentation, and onboarding logistics as shown in table 6.3.

The cost distribution aligns with the annual recruitment targets, with the highest investment required in 2027 (₦98.7 million) due to the peak intake of 1,974 staff that year. This is followed by 2026 (₦82.3 million) and 2028 (₦65.8 million). The lowest projected costs occur in 2025 and 2029, reflecting the 10% and 15% recruitment targets, respectively. This phased funding approach enables better budget predictability and planning, while ensuring sustained investment in strengthening the PHC workforce across the state.

Table 6.4 Monthly and Annual Salaries by Cadre (Based on CONHESS, adjusted to state context)

Cadre	Est. Monthly Salary (₦)	Est. Annual Salary (₦)
Doctors (Junior Level)	300,000	3,600,000
Nurses/Midwives	180,000	2,160,000
CHOs	160,000	1,920,000
CHEWs	140,000	1,680,000
JCHEWs	100,000	1,200,000
EHOs	160,000	1,920,000
Pharmacy Technicians	140,000	1,680,000
Medical Records Technicians	120,000	1,440,000

Medical Lab Technicians	150,000	1,800,000
Dental Technicians	140,000	1,680,000
Health Attendants	80,000	960,000
Security/Cleaners	70,000	840,000
Data Clerks	100,000	1,200,000
Community Health Promoters	100,000	1,200,000
Nutrition Officers	150,000	1,800,000

Note: These are rounded averages adjusted to reflect PHC settings in Northern states, excluding higher CONHESS step-ups used in federal hospitals.

Table 6.5: Deployment Cost Implications: 5-Year Personnel Cost (Salary) Projection by Cadre (2025–2029)

Cadre	Total Recruits	Unit Cost	2025 (10%)	2026 (25%)	2027 (30%)	2028 (20%)	2029 (15%)	Total
Doctors	119	₦3,600,000.00	₦43,200,000.00	₦108,000,000.00	₦129,600,000.00	₦86,400,000.00	₦64,800,000.00	₦432,000,000.00
Nurses/Midwives	1022	₦2,400,000.00	₦244,800,000.00	₦614,400,000.00	₦736,800,000.00	₦489,600,000.00	₦367,200,000.00	₦2,452,800,000.00
CHOs	225	₦2,200,000.00	₦48,400,000.00	₦123,200,000.00	₦147,400,000.00	₦99,000,000.00	₦74,800,000.00	₦492,800,000.00
CHEWs	745	₦1,800,000.00	₦133,200,000.00	₦334,800,000.00	₦401,400,000.00	₦268,200,000.00	₦201,600,000.00	₦1,339,200,000.00
JCHEWs	609	₦1,500,000.00	₦91,500,000.00	₦228,000,000.00	₦274,500,000.00	₦183,000,000.00	₦136,500,000.00	₦913,500,000.00
Pharmacy Technicians	338	₦2,000,000.00	₦68,000,000.00	₦170,000,000.00	₦202,000,000.00	₦136,000,000.00	₦102,000,000.00	₦678,000,000.00
Medical Records Technicians	274	₦1,800,000.00	₦48,600,000.00	₦122,400,000.00	₦147,600,000.00	₦99,000,000.00	₦73,800,000.00	₦491,400,000.00
Medical Lab Technicians	370	₦2,000,000.00	₦74,000,000.00	₦186,000,000.00	₦222,000,000.00	₦148,000,000.00	₦112,000,000.00	₦742,000,000.00
Dental Technicians	93	₦1,900,000.00	₦17,100,000.00	₦43,700,000.00	₦53,200,000.00	₦36,100,000.00	₦26,600,000.00	₦176,700,000.00
Security	672	₦900,000.00	₦60,300,000.00	₦151,200,000.00	₦181,800,000.00	₦120,600,000.00	₦90,900,000.00	₦604,800,000.00
Cleaners	677	₦850,000.00	₦57,800,000.00	₦143,650,000.00	₦172,550,000.00	₦114,750,000.00	₦86,700,000.00	₦575,450,000.00
Data Clerks	347	₦1,000,000.00	₦35,000,000.00	₦87,000,000.00	₦104,000,000.00	₦69,000,000.00	₦52,000,000.00	₦347,000,000.00
Community Health Promoters	789	₦1,200,000.00	₦94,800,000.00	₦236,400,000.00	₦284,400,000.00	₦189,600,000.00	₦141,600,000.00	₦946,800,000.00
Nutrition Officers	302	₦2,000,000.00	₦60,000,000.00	₦150,000,000.00	₦180,000,000.00	₦120,000,000.00	₦90,000,000.00	₦600,000,000.00
Total	6582		₦1,076,700,000.00	₦2,698,750,000.00	₦3,237,250,000.00	₦2,159,250,000.00	₦1,620,500,000.00	₦10,792,450,000.00

Over the five-year period from 2025 to 2029, the Gombe State Government will require a total of ₦10.79 billion to cover the salaries of 6,582 newly recruited Primary Health Care (PHC) workers as shown in table 6.5. This projection spans all cadres, with costs increasing in the first three years due to higher recruitment volumes before tapering off in 2028 and 2029. The peak expenditure is expected in 2027 (₦3.24 billion), coinciding with the year of highest staff intake. The budget covers a mix of skilled and support staff including doctors, nurses/midwives, CHEWs, laboratory technicians, and cleaners.

This investment reflects the critical need to close the staffing gap in PHC facilities and ensure equitable service delivery across Gombe State. Efficient planning and funding allocation will be vital for timely implementation and sustainability of the workforce strategy.

Table 6.6 Training Cost Estimate – Gombe State PHC Workforce (2025–2029)*Focused on in-service and induction training for new recruits and existing staff upgrade*

Cadre	Planned Trainees	Unit Training Cost (₦)	Total Cost (₦)
Doctors	119	₦150,000	₦17,850,000
Nurses/Midwives	1022	₦120,000	₦122,640,000
CHOs	225	₦100,000	₦22,500,000
CHEWs	745	₦100,000	₦74,500,000
JCHEWs	609	₦90,000	₦54,810,000
Pharmacy Technicians	338	₦100,000	₦33,800,000
Medical Records Technicians	274	₦90,000	₦24,660,000
Medical Lab Technicians	370	₦100,000	₦37,000,000
Dental Technicians	93	₦90,000	₦8,370,000
Security	672	₦50,000	₦33,600,000
Cleaners	677	₦40,000	₦27,080,000
Data Clerks	347	₦70,000	₦24,290,000
Community Health Promoters	789	₦80,000	₦63,120,000
Nutrition Officers	302	₦90,000	₦27,180,000
Total	6582		₦571,400,000

Note: Unit cost includes training materials, facilitator fees, logistics, venue, refreshments, and supervision. May vary based on batch size and delivery mode.

Table 6.6 presents the training cost projection for newly recruited Primary Health Care (PHC) workers in Gombe State across all relevant cadres, covering a total of 6,582 planned trainees. The cost estimates reflect reduced but realistic unit training costs suitable for a government-run health workforce capacity-building initiative.

The highest share of training investment is allocated to Nurses/Midwives (₦122.64 million) due to their large number (1,022 trainees) and their critical role in clinical service delivery. This is followed by Community Health Extension Workers (CHEWs) at ₦74.5 million and Junior CHEWs (JCHEWs) at ₦54.81 million, who form the backbone of PHC service provision in rural and peri-urban areas.

Support and administrative roles such as Security (₦33.6 million) and Cleaners (₦27.08 million) are also included to ensure functional and hygienic PHC environments. Less represented cadres like Dental Technicians and Nutrition Officers have comparatively lower costs due to smaller trainee numbers.

Overall, the total estimated training cost is ₦571.4 million over the recruitment period. This investment is essential to ensure that newly hired personnel are adequately prepared for their roles, thereby enhancing service delivery quality and sustaining health outcomes across the state's PHC system.

Table 6.7 Other Costs

Year	Total Staff to be Recruited	Other Cost (₦)
2025	659	₦26,360,000
2026	1,645	₦65,800,000

2027	1,974	₦78,960,000
2028	1,316	₦52,640,000
2029	988	₦39,520,000
Total	6,582	₦263,280,000

Considering that every new recruitment increases government expenditure on associated operational needs such as office materials and supplies, utilities, work desks, and basic equipment Table 6.7 presents the estimated “other costs” required to support newly recruited Primary Health Care (PHC) workers across Gombe State from 2025 to 2029.

Based on a standard unit allocation of ₦40,000 per recruit, the projected cost for other supporting logistics in 2025 is ₦26,360,000 for 659 staff. This cost grows in line with the recruitment volume, peaking in 2027 at ₦78,960,000 for 1,974 staff, before tapering down to ₦39,520,000 in 2029 for 988 staff. Over the five-year implementation period, the cumulative other costs amount to ₦263,280,000, reflecting the financial implication of equipping and supporting 6,582 newly hired PHC personnel to perform their duties effectively and safely.

Table 6.8: Incentive Strategies for Rural Health Workers

Incentive Strategy	Description
Financial Incentives	Higher salary scales and hardship allowances for rural postings.
Career Development	Opportunities for continuous professional development and career advancement.
Improved Work Environment	Investment in facility infrastructure and equipment to enhance working conditions.
Community Engagement	Partnerships with local communities to provide housing and other support for health workers.
Recognition Programs	Establishing awards and recognition programs for health workers in rural areas.

Table 6.9 Rural Retention Framework for Gombe State PHC Workforce

To address high attrition and improve rural service coverage, Gombe State proposes a combination of financial and non-financial incentives designed to attract, deploy, and retain health workers, especially in underserved LGAs.

Incentive Category	Strategy
Financial	- Monthly rural allowance (N5,000–N50,000 by cadre)
	- Hardship allowance for remote/insecure areas
	- Performance-based bonuses tied to service delivery (ANC, immunization, TB case detection)
Non-Financial	- Staff housing (direct or rent support)
	- Motorbikes for field staff (CHEWs, CHOs)
	- Prioritized promotions/study leave for rural postings
	- On-the-job training and digital CPD access
	- Community appreciation and WDC support mechanisms

Implementation and Oversight

GSPHCDA will coordinate the implementation of the incentive scheme in collaboration with LGAs and the State Primary Health Care Board. Incentive payments will be tracked using the state HRIS and verified quarterly through supportive supervision. Deployment decisions will prioritize local recruitment and proximity posting, with routine feedback from facility heads and WDCs to assess satisfaction and address challenges.

6.5 Potential Funding Sources

1. **Government Budget Allocation:** Advocacy for increased state government budgetary allocations to the health sector, with a specific focus on HRH development.
2. **Donor Organizations:** Leverage funding from international donors and development agencies, such as the World Bank, WHO, and UNICEF.
3. **Public-Private Partnerships:** Explore partnerships with private healthcare providers and corporate entities for co-funding and resource sharing.
4. **Innovative Financing Mechanisms:** Implement innovative financing approaches like health impact bonds and results-based financing to attract diverse funding streams.

6.6 Cost-Benefit Analysis

1. **Short-Term Costs vs. Long-Term Gains:** While the upfront recruitment and training costs are significant, the long-term benefits include improved health

outcomes, increased productivity, and reduced healthcare costs for the population.

2. **Economic Impact:** A well-staffed health system can lead to a healthier workforce, reduced absenteeism, and increased economic productivity, providing a positive return on investment.

Table 6.10 Risks and Mitigation Strategies for Recruitment Plan Implementation

Potential Risk	Impact	Mitigation Strategy
Funding shortfalls or delays	Slows or halts recruitment and training activities	Leverage BHCPF and development partner support; include HRH in annual state budgeting
Limited training capacity or graduate output	Shortage of qualified candidates for recruitment	Strengthen linkages with health training institutions; implement JCHEW-to-CHEW bridging
Delayed approvals or bureaucratic bottlenecks	Slows deployment and contract processing	Early engagement with Civil Service Commission and Ministry of Finance
Higher-than-expected attrition	Undermines workforce stability and projections	Monitor attrition annually; include flexible replacement in recruitment cycles
Poor rural retention of new recruits	Undermines service availability in underserved areas	Apply incentives (rural, hardship, housing); prioritize local recruitment and posting
Mismatch between deployment and facility needs	Wasted resources, continued facility-level gaps	Use real-time HRH tracking and facility classification for deployment decisions

6.4 Stakeholder Roles and Responsibilities in Plan Implementation

This section outlines the expected roles of key stakeholders involved in implementing the Gombe State Primary Health Care Human Resources for Health (HRH) recruitment, training, and deployment plan. Collaboration and role clarity are essential to ensure accountability, coordination, and sustained progress toward the MSP 2024–2028 and Universal Health Coverage (UHC) goals.

Stakeholder	Key Roles and Responsibilities
Gombe State Ministry of Health (SMOH)	Policy oversight, budget approval, integration with state health strategies
Gombe State Primary Health Care Development Agency (GSPHCDA)	Lead coordination of recruitment, training, deployment, and workforce supervision
State Civil Service Commission (CSC)	Recruitment authorization, processing appointments, ensuring due process

Ministry of Finance, Budget and Planning	Resource allocation, inclusion of HRH costs in annual state budgets
Local Government Authorities (LGAs)	Facility-level oversight, support supervision, workforce monitoring, and staff welfare coordination
Federal Ministry of Health (FMoH)	Technical support, alignment with national HRH frameworks, and provision of tools or guidelines
National Primary Health Care Development Agency (NPHCDA)	Standard setting, training guidance, PHC facility and workforce standards enforcement
Health Training Institutions	Production of qualified health workers, pre-service training, support for bridging programs
Donor Partners (e.g., WHO, UNICEF, BMGF)	Funding support, technical assistance, capacity-building support, and system-strengthening inputs
Community Structures (Ward Development Committees, Traditional Leaders)	Support recruitment acceptance, community-based volunteer identification, retention advocacy

Note:

Successful implementation of the HRH plan hinges on multi-level collaboration, especially between state agencies, local authorities, and partners. Clear delineation of roles will reduce duplication, encourage ownership, and ensure that each phase of the plan from recruitment to deployment is timely and efficient. A functional coordination mechanism will also be essential to track progress and course-correct where needed.

7.0 MONITORING, EVALUATION & SUSTAINABILITY

Effective monitoring, evaluation, and sustainability frameworks are crucial to ensure the successful implementation of the HRH strategic plan and achieve long-term improvements in Gombe State's PHC system. These frameworks provide continuous oversight, measure progress against targets, and ensure the plan's objectives are sustainable beyond the initial implementation period.

7.1 Monitoring Framework

Monitoring activities are designed to track progress in real-time and facilitate rapid response to emerging challenges. The framework clearly defines what should be monitored, who is responsible, what tools will be used, and how gaps will be escalated and addressed.

7.1.1 Key Performance Indicators (KPIs)

Tracked through a KPI matrix (see Table 7.1) to ensure consistent progress.

KPI Category	Indicator	Target/Benchmark	Data Source	Frequency
Staffing Levels	Number of health workers recruited by cadre and LGA	100% of HRH recruitment target by 2029	HRH Database, HRIS	Quarterly
Facility Staffing Ratios	Staff-to-population and staff-to-facility ratio by LGA	Aligned with MSP 2024–2028 standards	NHMIS, Facility Reports	Quarterly
Recruitment Timeliness	Average time to fill vacancies	< 6 months per recruitment cycle	HRH Recruitment Tracker	Biannually
Training Effectiveness	% of staff who demonstrate skill improvement post-training	≥ 80% post-training knowledge gain	Training Assessment Tools	After each cycle
Service Coverage	Immunization, ANC, and malaria treatment rates	≥ 90% coverage in target populations	NHMIS, DHIS2	Quarterly
Equity in Distribution	% of staff deployed to rural/underserved LGAs	≥ 50% of new hires posted to rural areas	GIS, HRH Deployment Records	Biannually
Retention Rates	% of health workers retained annually by LGA	≥ 85% retention rate	HRIS, Payroll Records	Annually
Community Health Impact	Maternal and child mortality rates	Annual decline ≥ 5%	HMIS, Health Surveys	Annually

7.1.2 Roles and Responsibilities

- a. **State HRH M&E Team:** Leads statewide monitoring and analysis of recruitment, distribution, and staffing compliance.
- b. **LGA Health Management Teams:** Submit monthly staffing reports, track local KPIs, and implement corrective actions.
- c. **Facility Managers:** Ensure accurate and timely data entry and staff-level updates.

7.1.3 Monitoring Tools:

- a. Standardized templates for monthly staffing reports and cadre deployment.
- b. GIS-enabled deployment maps for tracking urban-rural equity.
- c. DHIS2 and HRIS integration for automated indicator tracking.

7.1.4 Benchmarks for Compliance:

- a. LGAs are considered compliant if at least 90% of their cadre-specific staffing targets are met for two consecutive quarters.
- b. Recruitment cycle performance is acceptable if the average vacancy is filled within 6 months.

7.1.5 Escalation Mechanisms:

- a. If a facility or LGA reports a gap >50% in any cadre for two consecutive quarters, an alert is triggered.
- b. SPHCDA, in collaboration with the HRH Rapid Response Team, must develop an emergency corrective plan within 30 days.

7.1.6 Feedback and Accountability:

- a. Feedback loops include a state-level HRH hotline and quarterly stakeholder forums.
- b. Results from monitoring are publicly reported through a real-time HRH dashboard.

7.2 Evaluation Strategy

Evaluation provides a structured process to assess the effectiveness, efficiency, and impact of HRH interventions in Gombe State's PHC system. This strategy is essential to validate results, identify areas for improvement, and inform future policy adjustments.

- **Evaluation Objectives:**
 1. Assess whether staffing targets are being met and aligned with MSP 2024–2028.
 2. Determine the quality and outcomes of training, deployment, and retention strategies.
 3. Measure the contribution of HRH improvements to service delivery and community health indicators.

- **Evaluation Activities:**
 1. **Baseline and Endline Assessments:** Establish key benchmarks at project initiation and measure final outcomes by 2029.
 2. **Midterm Review:** Conduct a comprehensive evaluation in 2027 to assess interim progress and recalibrate strategies.
 3. **Training Impact Studies:** Use pre- and post-training assessments to evaluate knowledge and competency gains.
 4. **Community Health Surveys:** Gather data on patient satisfaction, service access, and health outcomes.
 5. **Equity Audits:** Evaluate whether rural, remote, and underserved LGAs are equitably benefitting from HRH reforms.

- **Evaluation Tools and Methodologies:**
 1. Mixed-methods approach including quantitative indicators and qualitative feedback.
 2. Use of digital M&E platforms to streamline data analysis and report generation.
 3. External evaluators may be engaged for impartial reviews.

- **Feedback and Learning:**
 1. Evaluation findings will be presented at annual HRH review summits.
 2. Lessons learned will inform adaptive management and guide revisions to recruitment and training plans.
 3. Successes and challenges will be documented and shared with stakeholders through reports and learning briefs.

7.3 Sustainability Measures

Ensuring the long-term sustainability of HRH investments is essential for maintaining improvements in healthcare delivery across Gombe State. This section outlines the strategies designed to institutionalize gains and ensure they continue beyond the duration of the strategic plan.

- **Policy Integration:**
 1. Embed HRH strategies into the Gombe State Health Sector Strategic Plan and related policies to secure ongoing political and institutional support.
 2. Advocate for HRH issues in broader health system reforms, ensuring alignment with national UHC goals.
- **Financial Planning:**
 1. Develop a multi-year financial roadmap with specific budget lines for HRH recruitment, training, and retention.
 2. Diversify funding sources through government allocation, donor contributions, and innovative mechanisms like health impact bonds and PPPs.
- **Institutional Strengthening:**
 1. Build the capacity of HRH units at the state and LGA levels to plan, implement, and manage workforce programs effectively.
 2. Establish sustainable HRH information systems and data governance structures.
- **Stakeholder Engagement:**
 1. Maintain regular forums with development partners, civil society, and community-based organizations to foster collaboration and resource sharing.
 2. Involve communities in HRH planning and monitoring through health committees and advocacy platforms.
- **Innovation and Research:**
 1. Partner with academic and research institutions to conduct longitudinal studies on HRH interventions.
 2. Pilot and scale up innovative solutions such as task-shifting, digital training platforms, and mobile-based supervision tools.

- **Advocacy and Communication:**
 1. Launch public awareness campaigns highlighting the importance and impact of HRH.
 2. Document and disseminate success stories and best practices through newsletters, reports, and media engagement.
- **Research and Innovation:** Establish partnerships with academic and research institutions to conduct regular workforce assessments and identify best practices. This includes supporting pilot projects on innovative HRH solutions.
- **Advocacy and Communication:** Develop a strategic communication plan to advocate for increased HRH investment and share success stories. This includes regular media briefings and success story documentation.

8.0 CONCLUSIONS

This report provides a comprehensive assessment of Gombe State's primary health care (PHC) workforce, highlighting the critical gaps that must be addressed to achieve the Minimum Service Package (MSP) 2024–2028 and move closer to Universal Health Coverage (UHC). The findings reveal an alarming overall staffing deficit of 85.8%, with key cadres such as doctors and medical laboratory scientists completely absent from PHC facilities. Rural areas remain the most underserved, compounding inequities in access to essential health services. Gender imbalance and an inadequate skill mix further limit the effectiveness of service delivery across the state.

To tackle these challenges, the report proposes a realistic and costed five-year roadmap that includes phased recruitment, targeted in-service training, and financial and non-financial incentives to improve rural retention. This plan is supported by a robust monitoring and evaluation framework and aligns with national HRH standards and state policy priorities.

By fully committing to this plan, Gombe State can significantly improve workforce availability, strengthen service delivery in rural and underserved LGAs, and build a resilient PHC system. With strong political will, adequate funding, and active stakeholder collaboration, the state can close its health workforce gap and ensure that every resident has equitable access to quality care. The task ahead is ambitious but achievable and it is the foundation for healthier communities and lasting health system reform.

9.0 RECOMMENDATIONS

This section outlines the key recommendations to address the critical workforce shortages and disparities in Gombe State's Primary Health Care (PHC) system, derived from the findings of the HRH Gap Analysis. These recommendations are designed to be actionable and realistic, building on existing structures and policies to ensure practicality and sustainability.

9.1 Policy and Governance: The first area of focus is on policy and governance. It is recommended to conduct a comprehensive review of existing HRH policies to identify gaps and update them to better reflect current challenges and future needs. This will ensure that the policies are aligned with the state's health objectives and are effective in addressing the identified issues. Additionally, enhancing the capacity and effectiveness of the existing HRH coordination unit will improve workforce planning and management, leading to more efficient allocation of resources and better coordination among stakeholders.

9.2 Strategic Recruitment and Deployment: Implementing a strategic recruitment and deployment plan is crucial to addressing the workforce shortages. The five-year

phased recruitment plan should be initiated immediately, with a focus on critical cadres such as doctors, nurses, and laboratory scientists. This will help to gradually but steadily close the staffing gap and move towards full staffing coverage by 2029. Furthermore, offering financial incentives and non-financial benefits to attract health workers to rural LGAs will help to address the urban-rural disparities in staffing levels. Prioritizing hiring from rural communities can also increase the likelihood of retention in these underserved areas, ensuring a more stable and reliable workforce in rural health facilities.

9.3 Training and Capacity Building: Significant attention must be given to training and capacity building to address the competency gaps within the existing workforce. Developing short-term, modular training programs can provide urgent competency development without requiring health workers to be away from their posts for extended periods. This will help to quickly improve the skill set of the workforce and enhance the quality of healthcare services provided. Additionally, deploying mobile training units to remote and rural areas will make training more accessible to health workers in these locations, ensuring that they also have the opportunity to develop their skills and stay updated with best practices. Utilizing digital tools and e-learning platforms can further expand access to continuous professional development, allowing health workers to conveniently access training resources and improve their competencies on an ongoing basis.

9.4 Incentives and Retention Strategies: To attract and retain skilled health workers in rural and underserved areas, a range of incentives should be introduced. Financial incentives, such as higher salary scales and additional allowances, can provide economic motivation for health workers to choose and remain in these areas. Non-financial incentives, including housing support, educational opportunities for children, and recognition awards, can enhance job satisfaction and overall quality of life for health workers and their families. Establishing clear career progression pathways will encourage long-term commitment from health workers, giving them a sense of professional growth and development opportunities within the health system. This can help to reduce turnover rates and ensure a more stable workforce in rural and underserved areas.

9.5 Data and Monitoring: Strengthening data systems is essential for effective workforce planning and management. Enhancing the use of digital health information systems will enable real-time workforce data collection and analysis, providing up-to-date and accurate information to inform decision-making. Conducting annual workforce audits will ensure that staffing records are regularly updated and that any changes in workforce requirements are identified promptly. This will allow for timely adjustments to recruitment and deployment strategies. Developing user-friendly performance dashboards will facilitate the monitoring of recruitment progress, staffing

levels, and service coverage. These dashboards can serve as valuable tools for tracking the implementation of the strategic plan and assessing the impact of interventions on the health workforce and service delivery.

9.6 Resource Mobilization: Finally, resource mobilization is crucial to support the implementation of the recommended strategies. Advocating for increased funding allocations to the health sector, particularly for HRH development, will provide the necessary financial resources to carry out recruitment, training, and retention initiatives. Collaborating with international donors and agencies can secure additional funding and technical support, leveraging their expertise and resources to strengthen the health workforce in Gombe State. Exploring public-private partnerships offers opportunities to share resources and expertise between the public and private sectors, enhancing the capacity to train health workers and deliver quality healthcare services, especially in underserved areas.

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Annexures

Annex 1: Distribution of Staff by Facility

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
1	AKKO PHCC	PHCC	AKKO	0	0	1	3	0	3	0	2	0	0	3	1	1	0	0	0	5	9	14
2	ARAWA PHC	PHC	AKKO	0	0	0	3	0	3	0	1	0	0	7	0	0	0	1	1	10	6	16
3	BADARA PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	3	0	3
4	BAPPA IBRAHIMA PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
5	BARAMBU PHCC	PHCC	AKKO	0	1	0	1	1	1	0	0	0	0	7	0	0	0	0	0	7	4	11
6	BARUNDE PHC	PHC	AKKO	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	1	1	2
7	BOGO MODEL PHCC	PHCC	AKKO	0	0	1	1	0	6	0	1	1	0	3	2	0	0	1	1	5	12	17
8	BOGO PHC	PHC	AKKO	0	0	0	0	1	10	0	1	1	0	2	0	0	0	0	0	3	12	15
9	BOGO WAZIRI PHC	PHC	AKKO	0	0	0	3	4	5	0	0	0	0	2	0	0	0	0	0	2	12	14
10	BOMALA PHC	PHC	AKKO	0	0	0	1	1	4	0	0	0	0	0	0	0	0	0	0	3	3	6
11	BULA PHC	PHC	AKKO	0	0	0	9	2	8	0	0	0	0	5	1	0	0	0	1	5	21	26
12	CHILO PHC	PHC	AKKO	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	2	1	3
13	DOLLI PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	2	1	3
14	DONGOL PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	3	0	3
15	GADAWO PHCC	PHCC	AKKO	0	0	0	1	0	3	0	1	2	0	4	0	0	0	0	0	7	4	11
16	GAMAWA PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	3	0	3
17	GARIN BAKARI PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	8	0	0	0	0	0	4	5	9
18	GARIN BARAYA HP	Health Post	AKKO	0	0	0	0	1	1	0	0	0	0	1	0	0	0	0	0	3	0	3
19	GARIN GALADIMA PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	5	0	0	0	0	0	5	1	6
20	GARIN RJIYA HP	Health Post	AKKO	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	1	2	3
21	GARKO PHC	PHC	AKKO	0	1	0	2	0	1	0	0	0	0	1	0	0	0	0	0	4	1	5
22	GARWA HP	Health Post	AKKO	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	2	1	3
23	GIDIM HP	Health Post	AKKO	0	0	0	0	2	2	0	0	0	0	2	0	0	0	0	0	0	6	6
24	GOKARU HP	Health Post	AKKO	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2	0	2
25	GONA PHC	PHC	AKKO	0	0	0	0	2	0	0	0	0	0	1	0	0	0	0	0	1	2	3
26	GUJUBAPHC	PHC	AKKO	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	2	1	3
27	HAMMADU KAFI PHC	PHC	AKKO	0	0	0	2	3	4	0	0	0	0	6	0	0	0	0	1	6	10	16
28	JABBA PHC	PHC	AKKO	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	2	1	3
29	JUNGUDO DEGA PHC	PHC	AKKO	0	0	0	0	1	5	0	0	0	0	6	0	0	0	0	0	5	7	12
30	JURARA HP	Health Post	AKKO	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2	0	2
31	KALCHINGI PHCC	PHCC	AKKO	0	1	0	2	2	1	0	0	0	0	9	2	0	0	0	0	11	6	17
32	KALTANGA HP	Health Post	AKKO	0	0	0	1	0	1	0	0	0	0	2	0	0	0	0	0	3	1	4
33	KARGO PHC	PHC	AKKO	0	0	0	2	0	1	0	0	0	0	1	0	0	0	0	0	3	1	4
34	KASHERE MODEL PHCC	PHCC	AKKO	0	0	0	2	0	3	0	0	1	0	4	2	0	0	0	0	9	3	12
35	KAYEL BAGA HP	Health Post	AKKO	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2	0	2
36	KEMBU PHC	PHC	AKKO	0	0	0	1	2	2	0	0	0	0	7	0	0	0	0	0	10	2	12
37	KIDDA PHC	PHC	AKKO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
38	KOBUWA PHC	PHC	AKKO	0	0	0	2	0	0	0	0	0	0	5	0	0	0	0	0	5	2	7
39	KOMBANI ISA HP	Health Post	AKKO	0	0	0	0	0	2	0	0	0	0	3	0	0	0	0	0	4	1	5
40	KWAMBANI MAIKASUWA HP	Health Post	AKKO	0	0	0	0	1	0	0	0	0	0	1	1	0	0	0	0	3	0	3
41	KOROTI HP	Health Post	AKKO	0	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	2	1	3
42	KUMO PHCC	PHCC	AKKO	0	1	0	4	3	24	0	1	1	1	16	1	0	0	0	1	20	33	53
43	KUNDULUM PHC	PHC	AKKO	0	0	0	1	1	6	0	0	0	0	8	0	0	0	0	0	9	7	16
44	KUNJI PHC	PHC	AKKO	0	0	0	1	1	2	0	1	1	1	4	0	0	0	0	0	9	2	11
45	LAWANTI PHC	PHC	AKKO	0	0	0	2	0	1	0	0	0	0	5	1	0	0	0	0	2	7	9
46	LEDEN PHC	PHC	AKKO	0	0	0	0	2	1	0	0	0	0	4	0	0	0	9	0	8	8	16
47	LEMBI PHC	PHC	AKKO	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	2	1	3
48	LUGGEREWO PHC	PHC	AKKO	0	0	0	0	0	2	0	0	0	0	4	0	0	0	0	0	4	2	6
49	MAI GANGA PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	3	0	3

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
50	MAIDUGU HP	Health Post	AKKO	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	3	0	3
51	NEW MAI GANGA HP	Health Post	AKKO	0	0	0	0	0	3	0	1	1	0	6	0	0	0	0	1	8	4	12
52	PANDA PHCC	PHCC	AKKO	0	0	0	1	2	0	0	0	0	0	2	0	0	0	0	0	3	2	5
53	PANDAYA PHC	PHC	AKKO	0	0	0	0	1	2	0	0	0	0	6	1	1	0	0	0	6	5	11
54	PINDIGA PHCC	PHCC	AKKO	0	0	0	1	0	2	0	0	1	1	12	3	0	0	0	1	19	2	21
55	PIYAU PHC	PHC	AKKO	0	0	0	1	0	1	0	0	0	0	0	1	0	0	0	0	2	1	3
56	SABONGARIN TIJJANI HP	Health Post	AKKO	0	0	0	0	0	2	0	0	0	0	2	0	0	0	0	0	4	0	4
57	SHABBAL HP	Health Post	AKKO	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	0	2
58	SHANGO HAMMA HP	Health Post	AKKO	0	0	0	1	1	1	0	0	0	0	4	0	0	0	0	0	2	5	7
59	SHANGO PHC	PHC	AKKO	0	0	0	3	2	2	0	0	0	0	11	0	0	0	0	0	13	5	18
60	TABRA PHC	PHC	AKKO	0	0	0	3	3	2	0	0	0	0	2	1	0	0	0	0	5	6	11
61	TALIYAWA PHC	PHC	AKKO	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
62	TAMBELO PHC	PHC	AKKO	0	0	0	0	1	3	0	0	0	0	2	0	0	0	0	0	3	3	6
63	TUKULMA PHCC	PHCC	AKKO	0	0	0	2	0	3	0	0	0	0	4	2	0	0	0	0	9	2	11
64	TULMI HP	Health Post	AKKO	0	0	0	0	1	1	0	0	0	0	3	0	0	0	0	0	4	1	5
65	TUMUPHCC	PHCC	AKKO	0	0	0	1	1	2	0	0	0	0	8	2	0	0	0	0	9	5	14
66	TUMFURE PHC	PHC	AKKO	0	0	0	2	1	3	0	0	0	0	5	0	0	0	0	1	3	9	12
67	WARRA HP	Health Post	AKKO	0	0	0	0	0	1	0	0	0	0	3	1	0	0	0	0	4	1	5
68	WURO DOLE HP	Health Post	AKKO	0	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3	0	3
69	YELWA HP	Health Post	AKKO	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	0	2
70	YANKARI HP	Health Post	AKKO	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
71	YARIMA SAHE PHC	PHC	AKKO	0	0	0	1	0	1	0	0	0	0	6	0	0	0	0	0	6	2	8
72	YELWAN BOGO PHC	PHC	AKKO	0	0	0	1	1	8	0	1	0	0	3	0	0	0	0	0	5	9	14
73	ZABIN KANI PHC	PHC	AKKO	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
74	ZONGOMARI PHC	PHC	AKKO	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	1	2
75	SAMBO DAJI PHC	PHC	AKKO	0	0	0	0	1	5	0	0	0	0	2	0	0	0	0	0	6	2	8
76	GWARAM PHC	PHC	AKKO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
77	PHC DEPARTMENT	OFFICE	AKKO	0	1	4	10	1	9	0	0	1	0	8	2	1	1	1	2	30	11	41
78	TALASSE PHCC	PHCC	BALANGA	0	0	1	6	0	0	0	2	2	3	6	2	3	0	0	1	16	10	26
79	DONG PHC	PHC	BALANGA	0	0	0	0	1	0	0	0	0	0	4	0	0	0	0	0	3	2	5
80	REME PHC	PHC	BALANGA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
81	JAMJARA HC	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82	SWA PHCC	PHCC	BALANGA	0	0	2	6	7	2	2	2	2	3	6	2	1	0	0	1	20	16	36
83	WADACHI HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
84	DABA HP	Health Post	BALANGA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
85	GASI HC	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
86	WALA HC	Health Clinic	BALANGA	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1
87	REFELE HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	1	1	2
88	KOLAKU HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
89	GELENGU PHCC	PHCC	BALANGA	0	0	0	5	5	3	1	1	2	0	4	1	0	1	0	2	17	8	25
90	BAKASI HC	Health Clinic	BALANGA	0	0	0	1	1	0	0	1	0	0	1	0	0	0	0	0	2	2	4
91	GANGAWARE HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	1	2	3
92	KEMBU HC	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1
93	BALANGA PHC	PHC	BALANGA	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
94	BANGU PHCC	PHCC	BALANGA	0	0	0	2	0	0	0	0	1	0	3	0	0	0	0	0	6	0	6
95	DALAWAJA HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
96	LAFIYA HC	Health Clinic	BALANGA	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	1	2
97	TIYAKUNU HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
98	SABONLAYI HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
99	PUTOKI PHCC	PHCC	BALANGA	0	0	0	3	2	1	1	1	0	3	2	0	1	0	0	1	9	6	15
100	SIKKAM PHC	PHC	BALANGA	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	0	2	1	3
101	LUKI A HP	Health Post	BALANGA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
102	LUKI B HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
103	DEGRI KUFAL PHC	PHC	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
104	KULANI PHC	PHC	BALANGA	0	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	1	2	3
105	CHESSI HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1
106	KWANOGHARA HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
107	CHAMCHIYO HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
108	GURMA HC	Health Clinic	BALANGA	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	1	2
109	KORE HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
110	NYUWAR PHCC	PHCC	BALANGA	0	2	0	4	5	1	1	0	2	0	8	2	5	0	0	1	20	11	31
111	JESSU HC	Health Clinic	BALANGA	0	0	0	1	1	0	0	0	0	0	1	0	0	0	0	0	1	2	3
112	CHAM PHCC	PHCC	BALANGA	0	0	1	4	2	0	1	1	1	0	4	0	0	0	0	2	7	9	16
113	TIKSIR HP	Health Post	BALANGA	0	0	0	1	0	1	0	0	0	0	1	0	0	0	0	0	1	2	3
114	KWASI HP	Health Post	BALANGA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
115	LABUN HC	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
116	KUMTUR HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
117	GWENTI HP	Health Post	BALANGA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
118	YOLDE HP	Health Post	BALANGA	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	1	2
119	SILON PHCC	PHCC	BALANGA	0	0	2	1	0	0	0	0	0	0	2	0	0	0	0	0	2	3	5
120	MONA HC	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
121	BARE HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
122	LAKUN HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	2	0	2
123	KWARGE HC	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
124	KWARI HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
125	BAMBAM PHCC	PHCC	BALANGA	0	1	2	6	4	2	1	2	1	2	9	2	0	0	0	0	19	13	32
126	BARE JAUDI HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
127	DADIYA PHCC	PHCC	BALANGA	0	0	0	8	0	0	0	0	0	0	6	1	2	0	0	2	9	10	19
128	LOBATI HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
129	MAITUNKU HC	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
130	YALWA HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	2	1	3
131	LOBARE HP	Health Post	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
132	KAFIN BAWA HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
133	YAMFIYO HC	Health Clinic	BALANGA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
134	SABARA	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
135	OFFICE	OFFICE	BALANGA	0	2	3	7	0	1	0	3	0	5	10	0	0	3	0	0	20	14	34
136	BALANSANI HC	Health Clinic	BALANGA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
137	PHC DEPARTMENT	OFFICE	BILLIRI	0	3	6	13	3	13	0	0	0	0	24	0	0	0	0	1	37	26	63
138	Algon PHC	PHC	BILLIRI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
139	Amawalim HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	0	2
140	Amutha PHC	PHC	BILLIRI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
141	Awai HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	1	2	3
142	Avaba PHCC	PHCC	BILLIRI	0	0	2	2	1	0	0	1	0	0	2	0	0	0	0	0	2	6	8
143	Banganje PHC	PHC	BILLIRI	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2	2
144	Banganje PHCC	PHCC	BILLIRI	0	1	1	2	2	3	0	0	0	1	2	0	0	0	0	2	5	9	14
145	Bassa HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
146	Falseje HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
147	kalindi PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	1	1	2
148	kalkulum PHC	PHC	BILLIRI	0	0	0	8	1	1	0	0	0	1	0	0	0	0	0	0	1	10	11
149	Kalmari PHC	PHC	BILLIRI	0	0	0	3	1	0	0	0	0	2	0	0	0	0	0	0	1	5	6
150	Kekkel PHCC	PHCC	BILLIRI	0	1	0	10	2	5	0	0	3	0	6	0	0	0	0	1	6	22	28
151	Kentengereng PHCC	PHCC	BILLIRI	0	1	0	4	3	2	1	0	2	0	6	0	0	0	0	2	3	18	21
152	Kolkos PHC	PHC	BILLIRI	0	0	0	2	0	1	0	0	0	1	0	0	0	0	0	0	1	3	4
153	Kokokwannin PHC	PHC	BILLIRI	0	0	0	0	2	0	0	0	0	0	2	0	0	0	0	0	1	3	4
154	komta HP	Health Post	BILLIRI	0	0	0	0	2	1	0	0	0	2	0	0	0	0	0	0	1	4	5
155	Kufai PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	0	3	3
156	Kulgal PHCC	PHCC	BILLIRI	0	0	0	4	1	0	0	0	0	1	0	0	0	0	0	0	2	4	6
157	Kuron Mota PHC	PHC	BILLIRI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
158	Kurum HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
159	Kwaya PHC	PHC	BILLIRI	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2	0	2
160	Kwibah PHC	PHC	BILLIRI	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1
161	Kwilapandi Amoyo HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1
162	kiwulang HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
163	Laberfito HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
164	Lafurut HP	Health Post	BILLIRI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
165	Lakalkai HP	Health Post	BILLIRI	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1
166	Lakarai HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	0	0	3	3
167	Lakelembu PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	1	1	2
168	Lakukdu HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	1	1	2
169	Lamugu PHC	PHC	BILLIRI	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2
170	Lapanshedde PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
171	Lasale PHC	PHC	BILLIRI	0	0	0	2	0	2	0	0	0	1	0	0	0	0	0	0	0	5	5
172	Lasani PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	2	2
173	Latambayo HP	Health Post	BILLIRI	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	2	0	2
174	Latoddo HP	Health Post	BILLIRI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
175	Latugad HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
176	Lawape HP	Health Post	BILLIRI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1
177	Lawiltu PHC	PHC	BILLIRI	0	0	0	4	1	0	0	0	0	0	0	0	0	0	0	0	1	4	5
178	Lawushi Daji PHC	PHC	BILLIRI	0	0	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	4	4
179	Lawurkondo HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1
180	Layafi PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	2	2
181	Pakla HP	Health Post	BILLIRI	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	2	0	2
182	Pandikungu HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	0	1	2	3
183	Pandinkude PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
184	Panguni PHC	PHC	BILLIRI	0	0	0	1	1	0	0	0	0	1	0	0	0	0	0	0	2	1	3
185	Payi PHC	PHC	BILLIRI	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	0	2
186	Pissiuoko PHC	PHC	BILLIRI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
187	Pobawure PHCC	PHCC	BILLIRI	0	0	0	2	1	1	0	1	1	0	2	0	0	0	0	0	2	6	8
188	Pokulji PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	2	2
189	pokwangli PHC	PHC	BILLIRI	0	0	0	4	2	0	0	0	0	1	0	0	0	0	0	0	1	6	7
190	Popandi HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
191	Powushi PHC	PHC	BILLIRI	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	0	1	2	3
192	Poyali PHC	PHC	BILLIRI	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	1	1	2
193	Ruggan Alh. Adeh PHC	PHC	BILLIRI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
194	Sabonlayi PHCC	PHCC	BILLIRI	0	0	0	2	0	1	0	2	1	0	1	0	0	0	0	0	1	6	7
195	Sansani PHCC	PHCC	BILLIRI	0	0	1	6	2	2	0	0	2	0	5	0	0	0	0	0	5	13	18
196	shela PHC	PHC	BILLIRI	0	0	0	1	1	1	0	0	0	0	1	0	0	0	0	0	1	3	4

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
197	Sikirit HP	Health Post	BILLIRI	0	0	0	2	0	0	0	0	0	0	1	0	0	0	0	0	1	2	3
198	Tal PHC	PHC	BILLIRI	0	0	1	3	0	1	0	0	0	0	1	0	0	0	0	0	2	4	6
199	Tal Maternity	PHC	BILLIRI	0	0	1	2	2	2	0	0	0	0	2	0	0	0	0	0	3	6	9
200	Tangji HP	Health Post	BILLIRI	0	0	0	0	1	1	0	0	0	0	1	0	0	0	0	0	2	1	3
201	Tanglang PHC	PHC	BILLIRI	0	1	1	6	3	0	0	1	0	0	4	0	0	0	0	0	3	13	16
202	Todi PHCC	PHCC	BILLIRI	0	0	0	2	0	2	0	0	1	0	3	0	0	0	0	0	5	3	8
203	Tudu PHCC	PHCC	BILLIRI	0	0	1	4	0	0	0	1	2	0	3	0	0	0	0	0	4	7	11
204	ALANI PHC	PHC	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
205	BALAJE PHC	PHC	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
206	BANGAYI PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2
207	BAWA PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2
208	BAWA ZEGO HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
209	BOKKIRU PHC	PHC	DUKKU	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2	0	2
210	BOZONSILWA PHCC	PHCC	DUKKU	0	0	0	1	2	2	0	1	0	0	2	0	0	0	0	0	4	4	8
211	BULAMA PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1
212	BURARI PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
213	DAMBA PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
214	DAMINYA PHC	PHC	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	2	0	2
215	DASHI PHC	PHC	DUKKU	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	0	2
216	DIGE PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
217	DOKORO PHC	PHC	DUKKU	0	0	0	2	0	0	0	0	0	0	1	0	0	0	0	0	2	1	3
218	DUGGIRI HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
219	DUKKU PHCC	PHCC	DUKKU	0	0	1	15	9	23	0	3	4	0	8	0	1	0	0	2	21	45	66
220	DUKKU TOWN MATERNITY PHC	PHC	DUKKU	0	0	0	2	4	2	0	0	0	0	7	0	0	0	0	0	0	15	15
221	DUKKUYEL PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	3	0	3
222	DUU PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
223	GABCHIYARI PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
224	GADUM PHC	PHC	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1
225	Gale PHC	PHC	DUKKU	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1
226	GANAWAJI HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
227	GARIN AHMADU HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
228	GARIN ALARAMMA PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
229	GENERAL HOSPITAL	SF	DUKKU	0	1	0	3	2	6	1	0	0	0	6	0	0	0	1	0	14	6	20
230	GODE PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
231	GOMBE ABBA PHCC	PHCC	DUKKU	0	0	1	0	1	1	0	0	0	0	4	0	0	0	0	0	4	3	7
232	GORINGO PHC	PHC	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
233	HASHIDU PHCC	PHCC	DUKKU	0	0	0	2	2	3	0	0	0	0	2	0	2	0	0	0	7	4	11
234	ISAH ALI PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
235	JALINGO HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
236	JAMARI PHCC	PHCC	DUKKU	0	0	0	2	1	0	0	0	0	0	1	0	0	0	0	0	3	1	4
237	JARKUM PHC	PHC	DUKKU	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
238	JOMBO HP	Health Post	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
239	JONDE HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
240	KABADE PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
241	KALAM HP	Health Post	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
242	KALOMA PHC	PHC	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	1	1	2
243	KAMBA PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
244	KOMBI PHC	PHC	DUKKU	0	0	0	1	0	1	0	0	0	0	2	0	0	0	0	0	3	1	4
245	KOWAGOL HP	Health Post	DUKKU	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
246	KUKADI HP	Health Post	DUKKU	0	0	0	0	1	1	0	0	0	0	2	0	0	0	0	0	3	1	4
247	KUNDE PHCC	PHCC	DUKKU	0	0	0	1	1	2	0	0	0	0	2	0	0	0	0	0	6	0	6
248	KUNI HP	Health Post	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
249	LAFIYA PHCC	PHCC	DUKKU	0	0	0	2	1	1	0	0	0	0	0	0	0	0	0	0	2	2	4
250	Lule HP	Health Post	DUKKU	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2
251	MALALA PHCC	PHCC	DUKKU	0	0	0	4	1	2	0	0	1	0	3	0	1	0	0	0	9	3	12
252	MALALAYEL HP	Health Post	DUKKU	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2
253	MALURI YELWA PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
254	MARU PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
255	MAYO LAMIDO PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
256	NYSC CLINIC WURO TARA PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
257	PALIMOCCHI HP	Health Post	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
258	SHABEWA PHC	PHC	DUKKU	0	0	0	3	0	2	0	0	0	0	0	0	0	0	0	0	1	4	5
259	SHUWE PHC	PHC	DUKKU	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
260	SUKA PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
261	TALE HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
262	TIMBU PHC	PHC	DUKKU	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
263	TUMFURE PHC	PHC	DUKKU	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2
264	Walama PHC	PHC	DUKKU	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2
265	WALOJI PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
266	WANGI BAKO PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
267	WEDU KOLE PHC	PHC	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
268	WURO BOGGA HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
269	WURO KUDU PHC	PHC	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	2	0	2
270	WURO TALE PHCC	PHCC	DUKKU	0	0	1	1	0	3	0	0	0	0	1	0	0	0	0	0	4	2	6
271	Yole HP	Health Post	DUKKU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
272	ZAGALA HP	Health Post	DUKKU	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2
273	ZANGE PHCC	PHCC	DUKKU	0	1	1	0	1	0	0	0	0	0	1	0	0	0	0	0	3	1	4
274	Zaune HP	Health Post	DUKKU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
275	ZAUNE PHCC	PHCC	DUKKU	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	2	1	3
276	PHC DEPARTMENT	OFFICE	DUKKU	0	1	3	19	6	49	0	1	7	0	1	0	7	0	9	1	71	33	104
277	PHC DEPARTMENNT	OFFICE	FUNAKAYE	0	2	15	13	2	14	0	0	1	0	8	4	15	0	12	0	51	35	86
278	Ashaka Gari PHC	PHC	FUNAKAYE	0	0	0	1	1	0	0	0	0	0	4	0	0	0	0	0	4	2	6
279	Bulagaidam PHC	PHC	FUNAKAYE	0	0	0	0	0	3	0	0	0	1	1	0	0	0	0	0	3	2	5
280	Dayayi PHC	PHC	FUNAKAYE	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	2	2	4
281	Jalingo Primary Health Centre	PHCC	FUNAKAYE	0	1	0	2	0	5	0	2	1	0	8	0	2	0	0	0	12	9	21
282	Jalingo Gate PHC	PHC	FUNAKAYE	0	0	0	2	4	0	0	0	0	0	0	0	0	0	0	0	2	4	6
283	Kademi PHC	PHC	FUNAKAYE	0	0	0	2	0	2	0	0	0	0	1	0	0	0	0	0	4	1	5
284	Magaba PHC	PHC	FUNAKAYE	0	0	0	1	1	1	0	0	0	0	2	0	0	0	0	0	2	3	5
285	Mannari PHC	PHC	FUNAKAYE	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	0	2	1	3
286	Bage Primary Health Centre	PHCC	FUNAKAYE	0	0	0	2	1	2	0	0	0	0	4	0	0	0	0	0	6	3	9
287	Badabdi PHC	PHC	FUNAKAYE	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	1	1	2
288	Bumqum PHC	PHC	FUNAKAYE	0	0	0	2	1	0	0	0	0	0	0	0	0	0	0	0	2	1	3
289	Dindi PHC	PHC	FUNAKAYE	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	2
290	FeshingoPHC	PHC	FUNAKAYE	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	2
291	Garin Maja PHC	PHC	FUNAKAYE	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	2	2
292	Gongila PHC	PHC	FUNAKAYE	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
293	Gube PHC	PHC	FUNAKAYE	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	2	1	3
294	Juggof Borkono PHC	PHC	FUNAKAYE	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
295	Kafiwol PHC	PHC	FUNAKAYE	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1
296	Lariski PHC	PHC	FUNAKAYE	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0	3	1	4
297	Manawashi PHC	PHC	FUNAKAYE	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	1	1	2
298	Ngeltanni Health Clinic	PHC	FUNAKAYE	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1
299	Sanganu Primary Health Centre	PHCC	FUNAKAYE	0	1	0	4	0	8	0	0	3	0	7	1	0	0	0	1	14	11	25
300	Bajoga Primary Health Centre	PHCC	FUNAKAYE	0	0	3	4	2	2	0	2	1	0	5	1	0	0	0	0	11	9	20
301	Sharfuri PHC	PHC	FUNAKAYE	0	0	0	1	3	2	0	0	0	0	1	0	0	0	0	0	4	3	7

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
302	Jagabari PHC	PHC	FUNAKAYE	0	0	0	1	1	1	0	0	0	0	1	0	0	0	0	0	3	1	4
303	Jilahi Primary Health Centre	PHCC	FUNAKAYE	0	0	0	3	0	4	0	0	0	0	1	0	0	0	0	0	5	3	8
304	Mutuke PHC	PHC	FUNAKAYE	0	0	0	1	0	1	0	0	0	0	3	1	0	0	0	0	4	2	6
305	Wuro Arsi PHC	PHC	FUNAKAYE	0	0	0	0	0	1	0	0	0	0	3	2	0	0	0	0	2	4	6
306	Kupto Primary Health Centre	PHCC	FUNAKAYE	0	0	1	2	3	1	0	0	0	0	3	1	2	0	0	0	7	6	13
307	Jangade PHC	PHC	FUNAKAYE	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1
308	Kuka Bakwai PHC	PHC	FUNAKAYE	0	0	0	0	1	1	0	0	0	0	3	0	0	0	0	0	1	4	5
309	Abuja PHC	PHC	FUNAKAYE	0	1	0	1	0	1	0	0	0	0	1	0	0	0	0	0	2	2	4
310	Garin Dogo PHC	PHC	FUNAKAYE	0	0	0	1	0	2	0	0	0	0	6	1	0	0	0	0	7	3	10
311	Guiwa PHC	PHC	FUNAKAYE	0	0	0	1	0	1	0	0	0	0	4	0	0	0	0	0	3	3	6
312	Ngarai PHC	PHC	FUNAKAYE	0	0	0	0	0	3	0	3	0	0	1	0	0	0	0	0	4	3	7
313	Ribadu Primary Health Centre	PHCC	FUNAKAYE	0	0	1	2	3	3	0	0	0	0	5	0	4	0	0	0	11	7	18
314	Bodor PHC	PHC	FUNAKAYE	0	0	0	0	1	0	0	0	0	0	5	0	0	0	0	0	4	2	6
315	Tilde Primary Health Center	PHCC	FUNAKAYE	0	0	1	2	0	3	0	0	0	0	4	2	2	0	0	0	9	5	14
316	Sisi Bako PHC	PHC	FUNAKAYE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
317	Tongo Primary Health Centre	PHCC	FUNAKAYE	0	0	1	2	2	2	0	0	0	0	17	0	5	0	0	2	19	12	31
318	Yarda PHC	PHC	FUNAKAYE	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	1	2	3
319	Komi PHC	PHC	FUNAKAYE	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	2	1	3
320	Wakaltu PHC	PHC	FUNAKAYE	0	0	0	2	0	2	0	0	0	0	2	0	0	0	0	0	4	2	6
321	Wawa PHCC	PHCC	FUNAKAYE	0	0	3	3	1	4	0	0	0	0	2	2	0	0	0	0	7	8	15
322	Wuro Galde PHC	PHC	FUNAKAYE	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	1	2	3
323	Gardawashi PHC	PHC	FUNAKAYE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
324	Garin Aba PHC	PHC	FUNAKAYE	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
325	Boggawo PHC	PHC	FUNAKAYE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
326	Gadakka PHC	PHC	FUNAKAYE	0	0	0	1	1	1	0	0	0	0	5	0	0	0	0	0	5	3	8
327	Siddikiyo PHC	PHC	FUNAKAYE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
328	Gerengi PHC	PHC	FUNAKAYE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
329	Yarimari PHC	PHC	FUNAKAYE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
330	PHC DEPARTMENT	OFFICE	GOMBE	0	3	4	11	1	9	0	3	0	0	6	1	0	0	4	0	26	16	42
331	WASH DEPARTMENT	OFFICE	GOMBE	0	0	0	0	0	17	0	0	0	0	0	0	5	0	0	0	14	8	22
332	IDI HP	Health Post	GOMBE	0	0	0	1	1	0	0	0	0	0	1	0	0	0	0	0	0	3	3
333	MADAKI PHCC	PHCC	GOMBE	0	0	3	11	0	1	0	0	1	0	2	0	0	1	2	0	8	13	21
334	FAMILY SUPPORT	PHC	GOMBE	0	0	1	4	0	3	0	2	1	1	1	0	0	0	0	0	5	8	13
335	BOLARI PHCC	PHCC	GOMBE	0	0	3	6	2	2	0	0	1	0	9	0	0	0	1	0	11	13	24
336	MANAWASHI HP	Health Post	GOMBE	0	0	1	1	0	2	0	0	0	0	3	0	0	0	0	0	4	3	7
337	TOWN PHCC	PHCC	GOMBE	0	3	3	7	2	4	0	3	4	0	5	0	0	0	1	2	11	23	34
338	TBL HC	Health Clinic	GOMBE	0	0	0	3	3	3	0	1	0	0	3	0	0	0	1	0	5	9	14
339	PHCC HERWAGANA	PHCC	GOMBE	0	2	2	6	2	3	1	0	0	0	6	0	0	0	0	0	8	14	22
340	JEKADAFARI PHCC	PHCC	GOMBE	0	1	3	4	2	2	0	2	0	0	2	0	0	0	3	0	3	16	19
341	DOMA PHCC	PHCC	GOMBE	0	0	2	4	3	2	0	0	2	0	1	0	0	0	0	0	6	8	14
342	KUMBIYA KUMBIYA PHCC	PHCC	GOMBE	0	1	3	7	4	4	0	1	1	0	2	0	1	0	1	0	8	17	25
343	NASARAWO PHCC	PHCC	GOMBE	0	1	3	4	3	4	0	1	0	0	3	0	0	0	3	0	6	16	22
344	SABON GARI HC	Health Clinic	GOMBE	0	0	0	1	2	0	0	0	0	0	1	0	0	0	0	0	2	2	4
345	PANTAMI PHCC	PHCC	GOMBE	0	4	0	7	3	1	0	1	1	0	2	0	0	0	0	0	8	11	19
346	PANTAMI HC	Health Clinic	GOMBE	0	0	1	1	0	2	0	0	0	0	0	0	0	0	0	0	3	1	4
347	GABUKKA PHC	PHC	GOMBE	0	0	1	4	1	3	0	1	0	0	2	0	1	0	0	0	7	6	13
348	PHCC TUDUN WADA	PHCC	GOMBE	0	3	1	11	2	2	0	0	2	1	5	0	0	0	0	0	8	19	27
349	KASUWAN MATA PHC	PHC	GOMBE	0	0	2	6	5	6	0	6	0	0	2	0	0	0	0	0	13	14	27
350	PHC LONDON	PHC	GOMBE	0	0	2	6	3	4	0	0	0	3	2	0	2	0	1	0	9	14	23
351	JAURO ABARE HC	Health Clinic	GOMBE	0	0	0	6	2	3	0	0	0	0	2	0	0	1	0	0	4	10	14
352	MALLAM INNA PHC	PHC	GOMBE	0	0	0	5	2	6	0	1	0	0	4	0	0	0	1	0	8	11	19
353	JAURO ABARE KORAN ZAKI	Health Clinic	GOMBE	0	0	0	2	3	3	0	0	0	0	2	0	0	0	1	0	4	7	11
354	KAGARAWAL PHCC	PHCC	GOMBE	0	0	2	6	4	3	0	1	0	0	4	0	0	0	0	0	11	9	20
355	HAYIN DOGO HP	Health Post	GOMBE	0	0	0	1	1	0	0	0	0	0	1	0	0	0	0	0	2	1	3

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357	PHC DEPARTMENT	OFFICE	GOMBE	0	2	8	9	2	11	0	3	1	0	4	0	0	0	2	0	22	20	42	
356	SABON LAYI PHCC	PHCC	KALTUNGO	0	0	1	1	0	1	0	0	0	0	1	0	0	0	0	0	0	4	4	4
357	SOBLONG H/C	Health Clinic	KALTUNGO	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1
358	DOGONRUWA H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	1	0	4	4	4
359	GARIN BAKO H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
360	DUNDAYE H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1
361	BWARA H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
362	BAULE GARI PHCC	PHCC	KALTUNGO	0	0	1	0	1	2	0	0	0	0	1	0	0	0	0	0	1	4	5	5
363	JALINGO H/ C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
364	LUNGURE H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1
365	LAFIYA H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
366	JAURO AUDI H/C	Health Clinic	KALTUNGO	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1
367	BILKITAMAN H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1
368	KALTIN PHCC	PHCC	KALTUNGO	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	2
369	BULE H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1
370	KWANG H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	1
371	SABONGARI H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
372	BUNDI-BUNDE HP	Health Post	KALTUNGO	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1	1
373	JAURO ALI H/C	Health Clinic	KALTUNGO	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1
374	LAKWEME H/C	Health Clinic	KALTUNGO	0	0	0	0	1	1	0	0	0	0	2	0	0	0	0	0	0	4	4	4
375	KALAKOROK HP	Health Post	KALTUNGO	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	1
376	PURMAI H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
377	KALUWA H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1	1
378	POSSHERENG H/C	Health Clinic	KALTUNGO	0	0	1	1	1	1	0	1	1	0	1	0	0	0	0	0	1	6	7	7
379	POPANDI H/C	Health Clinic	KALTUNGO	0	0	0	0	1	2	0	0	1	0	0	0	0	0	0	0	1	3	4	4
380	KALEH ALGON H/C	Health Clinic	KALTUNGO	0	0	1	0	0	1	0	0	1	0	3	0	0	0	0	0	1	5	6	6
381	LAYIRO POSSHERENG H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
382	LAYIRO H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
383	A T SHAMALI PHCC	PHCC	KALTUNGO	0	0	1	2	0	2	0	0	0	0	1	0	0	0	0	0	0	6	6	6
384	BANDARA H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
385	KOKDE H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
386	KALORGU PHCC	PHCC	KALTUNGO	0	0	1	3	0	1	0	0	1	0	1	0	0	0	0	0	0	7	7	7
387	LAPANDINTAI H/C	Health Clinic	KALTUNGO	0	0	1	1	0	1	0	0	0	0	2	0	0	0	0	0	1	4	5	5
388	FADA H/C	Health Clinic	KALTUNGO	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1	1
389	KWA H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
390	LIMDE HP	Health Post	KALTUNGO	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2	2	2
391	POKWANLI H/C	Health Clinic	KALTUNGO	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	2	2
392	LAKIDIR PHCC	PHCC	KALTUNGO	0	0	1	3	2	1	0	0	0	0	0	0	0	0	0	0	3	4	7	7
393	WILI H/C	Health Clinic	KALTUNGO	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2	2
394	TUREMAI H/C	Health Clinic	KALTUNGO	0	0	0	2	0	0	0	0	1	0	2	0	0	0	0	0	1	4	5	5
395	TURE OKRA H/C	Health Clinic	KALTUNGO	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	2	2	2
396	BEDBERE H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
397	TURE BALAM PHCC	PHCC	KALTUNGO	0	0	1	4	0	0	0	0	0	0	1	0	0	0	0	0	1	5	6	6
398	GUJUBA PHCC	PHCC	KALTUNGO	0	0	1	1	0	0	0	0	1	0	0	0	0	0	0	0	1	2	3	3
399	PATUWANA H/C	Health Clinic	KALTUNGO	0	0	0	1	1	0	0	0	1	0	1	0	0	0	0	0	3	1	4	4

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
400	BIRWAI H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
401	SHENGE-SHENGE H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
402	JALINGO KAMO H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
403	DABEWA H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
404	ZANGE H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
405	LATARIN H/C	Health Clinic	KALTUNGO	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	1	1	2
406	WANGE PHCC	PHCC	KALTUNGO	0	0	1	3	2	0	0	0	0	0	3	0	0	0	0	0	2	7	9
407	KUNINI H/C	Health Clinic	KALTUNGO	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	1	1	2
408	BWELE H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	1
409	YORIYO H/C	Health Clinic	KALTUNGO	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
410	BAMBAM YIRI H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	2	2
411	YIRI PHCC	PHCC	KALTUNGO	0	0	0	1	0	2	0	0	1	0	2	0	0	0	0	0	1	5	6
412	KWEN H/C	Health Clinic	KALTUNGO	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
413	PHCD	OFFICE	KALTUNGO	0	3	6	7	3	9	0	1	2	0	4	0	0	0	0	0	19	16	35
414	PHC Department	OFFICE	KWAMI	0	0	6	8	0	7	0	0	0	0	3	0	1	0	1	0	6	20	26
415	Abuja Primary Health Center	PHCC	KWAMI	0	0	1	2	1	3	0	0	1	0	2	1	0	0	0	0	6	5	11
416	Ahluget HP	Health Post	KWAMI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
417	Algon Daban fulani Health Clinic	Health Clinic	KWAMI	0	0	0	1	1	3	0	0	0	0	2	0	0	0	0	0	4	3	7
418	Bele HP	Health Post	KWAMI	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1
419	Bojude Health Clinic	Health Clinic	KWAMI	0	0	0	3	3	3	0	0	0	0	6	0	0	0	0	0	6	9	15
420	Bomala HP	Health Post	KWAMI	0	0	0	0	0	2	0	0	0	0	6	0	0	0	0	0	5	3	8
421	D/Fulani Primary Health Center	PHCC	KWAMI	0	0	1	4	0	5	0	0	0	0	0	0	0	0	1	1	7	5	12
422	Damba Barde health Clinic	Health Clinic	KWAMI	0	0	0	1	0	0	0	0	0	0	4	0	0	0	0	0	3	2	5
423	Daniya Health Clinic	Health Clinic	KWAMI	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	0	1	2	3
424	Dawo HP	Health Post	KWAMI	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2	0	2
425	Dinawa HP	Health Post	KWAMI	0	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	1	2	3
426	Dirri primary Health Centre	PHCC	KWAMI	0	0	1	1	2	3	0	0	1	0	3	0	0	0	0	0	5	6	11
427	Doho Primary Health Center	PHCC	KWAMI	0	0	1	5	3	9	0	1	0	0	8	2	1	0	1	1	13	19	32
428	Dokari HP	Health Post	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	0	2
429	Dukkul Primary Health Center	PHCC	KWAMI	0	0	1	2	1	6	0	0	0	0	3	2	0	0	0	0	6	9	15
430	Gabukka Health Clinic	Health Clinic	KWAMI	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
431	Gadam Primary Health Care	PHCC	KWAMI	0	1	1	3	2	5	0	1	1	1	8	1	2	0	0	0	11	15	26
432	Gafara Galadima HP	Health Post	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	0	2
433	Ganjuwa Health Clinic	Health Clinic	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	1	1	2
434	Garin Abbasu Health Clinic	Health Clinic	KWAMI	0	0	0	1	1	3	0	0	0	0	2	0	0	0	0	0	3	4	7
435	Garin Wakili Health Clinic	Health Clinic	KWAMI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
436	Gerkwami Health Clinic	Health Clinic	KWAMI	0	0	0	3	1	3	0	0	0	0	3	0	0	0	0	0	5	5	10
437	Gwaram HP	Health Post	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	1	1	2
438	Jamji Health Clinic	Health Clinic	KWAMI	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	1	2	3
439	Jauro Gabdo HP	Health Post	KWAMI	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	2
440	Jauro Isa HP	Health Post	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	0	2
441	Jauro Malam Health Clinic	Health Clinic	KWAMI	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2
442	Jauro Yaro Health Clinic	Health Clinic	KWAMI	0	0	0	1	2	0	0	0	0	0	1	0	0	0	0	0	2	2	4
443	Jorre HP	Health Post	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	1	1	2
444	Jurara Primary Health Center	PHCC	KWAMI	0	0	1	2	1	5	0	0	0	0	5	0	0	0	0	0	7	7	14
445	Kalajanga Health Clinic	Health Clinic	KWAMI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
446	Kiyari Health Clinic	Health Clinic	KWAMI	0	0	0	1	0	2	0	0	0	0	1	0	0	0	0	0	2	2	4
447	Komfulata HP	Health Post	KWAMI	0	0	0	0	0	3	0	0	0	0	6	0	0	0	0	0	4	5	9
448	Kufayi Health Clinic	Health Clinic	KWAMI	0	0	1	3	1	8	0	0	0	0	3	0	0	0	0	0	6	10	16
449	Kulum Health Clinic	Health Clinic	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	1	1	2
450	Kurugu HP	Health Post	KWAMI	0	0	0	0	0	2	0	0	0	0	2	0	0	0	0	1	2	3	5
451	Kwami Model Primary Health Centre	PHCC	KWAMI	0	0	1	4	2	8	0	0	1	0	5	3	3	0	1	2	13	17	30
452	Laro HP	Health Post	KWAMI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
453	Madu Kellumi Health Clinic	Health Clinic	KWAMI	0	0	0	1	1	4	0	0	0	0	1	0	0	0	0	0	4	3	7
454	Demi shuwa Health Clinic	Health Clinic	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	1	1	2
455	Mallam/Sidi Primary Health Center	PHCC	KWAMI	0	0	2	4	2	5	0	0	1	1	6	1	1	0	1	0	10	14	24
456	Malleri Primary Health Center	PHCC	KWAMI	0	0	0	2	1	2	0	0	0	0	3	0	0	0	0	0	5	3	8
457	Mettako HP	Health Post	KWAMI	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	1
458	Shongo Health Clinic	Health Clinic	KWAMI	0	0	0	4	0	5	0	0	0	0	8	0	0	0	0	0	8	9	17
459	Shugu Health Clinic	Health Clinic	KWAMI	0	0	0	0	1	2	0	0	0	0	1	0	0	0	0	0	2	2	4
460	Tappi PHC	PHC	KWAMI	0	0	3	1	1	1	0	0	0	0	1	0	0	0	0	0	3	3	6
461	Tinda HP	Health Post	KWAMI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
462	Titi HP	Health Post	KWAMI	0	0	0	0	1	3	0	0	0	0	2	0	0	0	0	1	3	4	7
463	Titi Malari Health Clinic	Health Clinic	KWAMI	0	0	0	0	1	2	0	0	0	0	1	0	0	0	0	0	2	2	4
464	Tumbushi HP	Health Post	KWAMI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1
465	Wudil Health Clinic	Health Clinic	KWAMI	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	2	1	3
466	Wuro Dole Health Clinic	Health Clinic	KWAMI	0	0	0	1	0	2	0	0	0	0	2	0	0	0	0	0	2	3	5
467	Wuro Lule HP	Health Post	KWAMI	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	0	2
468	Yame HP	Health Post	KWAMI	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
469	BARWO NASARAWO PHCC	PHCC	NAFADA	0	0	1	1	0	0	0	0	0	0	2	0	0	0	0	0	3	1	4
470	BARWO SABON GARI PHC	PHC	NAFADA	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1
471	WAKKALTU PHC	PHC	NAFADA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
472	Barwo winde PHCC	PHCC	NAFADA	0	0	0	1	2	1	0	0	0	0	2	1	0	0	0	0	6	1	7
473	Daba phc	PHC	NAFADA	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
474	GANIYANA PHC	PHC	NAFADA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
475	BIRIN BOLEWA PHCC	PHCC	NAFADA	0	0	3	0	1	0	0	0	0	0	2	0	0	0	0	1	2	5	7
476	BURARI PHC	PHC	NAFADA	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	2
477	MAIDUKURI PHC	PHC	NAFADA	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	1	1	2
478	MUNDA PHC	PHC	NAFADA	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	1	1	2
479	TASHAN KARGO PHC	PHC	NAFADA	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	1	2	3
480	BIRIN FULANI PHC	PHC	NAFADA	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2	0	2
481	GADI PHC	PHC	NAFADA	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1
482	GURAJAWA PHC	PHC	NAFADA	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2
483	SORODO PHCC	PHCC	NAFADA	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	1	2	3
484	BIRIN FULANI PHCC	PHCC	NAFADA	0	0	0	3	0	0	0	0	0	0	4	0	0	0	0	0	3	4	7
485	SHAGANAWA PHC	PHC	NAFADA	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	0	2
486	WURO BUNDU PHC	PHC	NAFADA	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
487	MADAKI LAMU PHC	PHC	NAFADA	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	1
488	GUDUKKU PHCC	PHCC	NAFADA	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	0	2
489	TASHA PHC	PHC	NAFADA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
490	Dendele PHC	PHC	NAFADA	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
491	Jigawa PHCC	PHCC	NAFADA	0	0	0	2	0	1	0	0	0	0	2	0	0	0	0	0	4	1	5
492	Jolie PHC	PHC	NAFADA	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1
493	Kiyayo PHC	PHC	NAFADA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
494	Suko PHC	PHC	NAFADA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
495	NIALKAM PHC	PHC	NAFADA	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2	0	2

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
496	WURE PHCC	PHCC	NAFADA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
497	NAFADA PHCC	PHCC	NAFADA	0	0	0	2	1	2	1	0	1	0	11	0	1	0	0	1	5	15	20
498	SHOLE PHC	PHC	NAFADA	0	0	0	0	0	1	0	0	0	0	1	1	0	0	0	0	2	1	3
499	MADA PHCC	PHCC	NAFADA	0	0	0	1	1	0	0	0	0	0	2	0	0	0	0	0	1	3	4
500	KADUBU PHC	PHC	NAFADA	0	0	0	0	1	0	0	0	0	0	5	0	1	0	0	0	2	5	7
501	PHC DEPARTMENT	OFFICE	NAFADA	0	1	4	17	2	8	0	0	0	0	19	0	0	0	0	0	42	9	51
502	WASH DEPARTMENT	OFFICE	NAFADA	0	0	0	1	0	20	0	0	0	0	16	0	0	0	0	0	26	11	37
503	BANGUNJI PHCC	PHCC	SHONGOM	0	1	0	3	2	1	0	1	0	0	2	0	0	0	0	0	4	6	10
504	KALOH PHC	PHC	SHONGOM	0	0	0	3	1	1	0	0	0	0	3	0	0	0	0	0	3	5	8
505	GALDIMARU PHC	PHC	SHONGOM	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
506	BANGUK HP	Health Post	SHONGOM	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2	0	2
507	BOH PHCC	PHCC	SHONGOM	0	0	0	11	1	2	0	1	4	0	9	0	0	0	1	0	8	21	29
508	KAREL PHC	PHC	SHONGOM	0	0	0	7	5	2	0	0	0	0	7	0	0	0	0	0	3	18	21
509	POKATA PHC	PHC	SHONGOM	0	0	0	4	0	3	0	0	0	0	3	0	0	0	0	0	2	8	10
510	LABEKE HP	Health Post	SHONGOM	0	0	0	1	0	1	0	0	0	0	1	0	0	0	0	0	0	3	3
511	LAWISHI HP	Health Post	SHONGOM	0	0	0	1	1	2	0	0	0	0	1	0	0	0	0	0	1	4	5
512	ALGON CLINIC	PHC	SHONGOM	0	0	1	1	1	2	0	0	0	0	1	0	0	0	0	0	0	6	6
513	BURAK PHCC	PHC	SHONGOM	0	0	0	2	0	5	0	0	0	0	3	0	0	0	0	0	4	6	10
514	NYALIMI PHC	PHC	SHONGOM	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2	0	2
515	LASSANJANG DUNA HP	Health Post	SHONGOM	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
516	KWANAN KUKA HP	Health Post	SHONGOM	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	0	2
517	PERO PHCC	PHCC	SHONGOM	0	0	2	5	1	4	0	1	0	0	10	0	0	0	0	0	7	16	23
518	FARIN KASA PHC	PHC	SHONGOM	0	0	0	1	0	1	0	0	0	0	2	0	0	0	0	0	1	3	4
519	JAURO SAJO PHC	PHC	SHONGOM	0	0	0	5	0	1	0	0	0	0	2	0	0	0	0	0	1	7	8
520	GWALE HP	Health Post	SHONGOM	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
521	YAPILO PHC	PHC	SHONGOM	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3
522	GUNDALE PHCC	PHCC	SHONGOM	0	0	0	3	3	0	0	0	0	0	3	0	0	0	0	0	5	4	9
523	DAJA PHC	PHC	SHONGOM	0	0	0	2	0	0	0	0	0	0	4	0	0	0	0	0	2	4	6
524	FUGULA PHC	PHC	SHONGOM	0	0	0	1	0	1	0	0	0	0	2	0	0	0	0	0	3	1	4
525	GWANDUM PHCC	PHCC	SHONGOM	0	0	1	5	2	1	1	1	3	0	6	0	0	0	0	1	5	16	21
526	DAMJIGRI HP	Health Post	SHONGOM	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
527	TORO PHC	PHC	SHONGOM	0	0	0	0	0	1	0	1	0	0	2	0	0	0	0	0	4	0	4
528	KEFFI PHC	PHC	SHONGOM	0	0	0	2	2	0	0	0	0	0	2	0	0	0	0	0	0	6	6
529	PAMADU PHC	PHC	SHONGOM	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
530	POPANDI PHC	PHC	SHONGOM	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	1
531	GUJUBA HP	Health Post	SHONGOM	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	0	3	0	3
532	MAJIDADI PHC	PHC	SHONGOM	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	2	1	3
533	KATAGUM HP	Health Post	SHONGOM	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1
534	KULISHIN PHCC	PHCC	SHONGOM	0	0	2	13	1	5	0	1	4	0	8	0	0	0	0	0	6	28	34
535	LASHIKOLTOK PHC	PHC	SHONGOM	0	0	1	10	5	2	0	0	0	0	7	0	0	0	0	0	5	20	25
536	KALISEN HP	Health Post	SHONGOM	0	0	0	1	2	3	0	0	0	0	4	0	0	0	0	0	0	10	10
537	KUSHI KAURI PHCC	PHCC	SHONGOM	0	0	1	0	1	2	0	1	0	0	4	0	0	0	0	0	3	6	9
538	KUSHI GOMLE PHC	PHC	SHONGOM	0	0	0	3	0	2	0	0	0	0	7	0	0	0	0	0	3	9	12
539	LAPANDINTAI PHC	PHC	SHONGOM	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	0	2	1	3
540	LALAIPO PHCC	PHCC	SHONGOM	0	0	1	9	1	1	0	1	1	0	7	0	0	0	0	0	5	16	21
541	LAKENTURUM PHC	PHC	SHONGOM	0	0	0	2	0	2	0	0	0	0	0	0	0	0	0	0	0	4	4
542	LATATAR PHC	PHC	SHONGOM	0	0	0	4	1	1	0	0	0	0	2	0	0	0	0	0	2	6	8
543	LASADAR PHC	PHC	SHONGOM	0	0	1	0	0	1	0	0	0	0	2	0	0	0	0	0	2	2	4
544	TEDMUKZU PHC	PHC	SHONGOM	0	0	0	0	2	0	0	0	0	0	1	0	0	0	0	0	1	2	3
545	AMKOLOM HP	Health Post	SHONGOM	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	1	2	3
546	LAPAN PHCC	PHCC	SHONGOM	0	0	2	15	1	1	0	1	4	0	7	0	0	0	0	0	6	25	31
547	LABARYA PHC	PHC	SHONGOM	0	0	0	3	1	0	0	0	0	0	2	0	0	0	0	0	3	3	6
548	LASANJANG PHC	PHC	SHONGOM	0	0	0	2	0	2	0	0	0	0	0	0	0	0	0	0	2	2	4

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
549	LASSASAP PHC	PHC	SHONGOM	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2	0	2
550	LABAYO HP	Health Post	SHONGOM	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	1	1	2
551	KALAKU PHC	PHC	SHONGOM	0	0	3	6	2	3	0	0	2	0	4	0	0	0	0	0	4	16	20
552	LAYASAKALAK HP	Health Post	SHONGOM	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	1
553	FADA H/C	Health Clinic	SHONGOM	0	0	1	1	0	1	0	1	0	0	3	0	0	0	0	0	1	6	7
554	MADAKI PHC	PHC	SHONGOM	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1
556	GSPHCDA	OFFICE	SHONGOM	0	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3
615	FILIYA PHCC	PHCC	SHONGOM	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
558	PHC DEPT	OFFICE	Y/DEBA	0	2	2	12	0	2	0	0	0	0	3	1	1	0	0	0	16	7	23
559	DEBA PHCC	PHCC	Y/DEBA	0	0	0	7	1	11	0	1	1	0	7	0	0	0	0	0	11	17	28
560	SARUJE HP	Health Post	Y/DEBA	0	0	0	3	0	1	0	0	0	0	1	0	1	0	0	0	4	2	6
561	GEN HOSPITAL DEBA	SF	Y/DEBA	0	0	0	0	0	2	0	0	1	0	1	0	0	0	0	0	4	0	4
562	GWANI EAST HP	Health Post	Y/DEBA	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	1	1	2
563	GWANI WEAST HP	Health Post	Y/DEBA	0	0	0	2	0	0	0	0	0	0	2	0	0	0	0	0	2	2	4
564	KALO HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	1	1	2
565	SHINGA PHCC	PHCC	Y/DEBA	0	2	1	1	1	1	0	0	0	0	0	0	0	0	0	0	5	1	6
566	WADE HP	Health Post	Y/DEBA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	1
567	WADE HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	0	0	2	0	0	0	0	1	0	0	0	0	0	2	1	3
568	DADIN KOWA HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	2	0	3	0	0	0	0	1	0	0	0	0	0	4	2	6
569	DADIN KOWA MODEL PHCC	PHCC	Y/DEBA	0	0	1	2	1	0	0	0	2	0	1	0	0	0	0	0	3	4	7
570	GARIN ABDULLAHI HP	Health Post	Y/DEBA	0	0	0	2	0	0	0	0	0	0	1	0	0	0	0	0	1	2	3
571	GARIN BUKAR HP	Health Post	Y/DEBA	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	0	2
572	HINA HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	1	1	2	0	0	0	0	0	0	0	0	0	0	1	3	4
573	JANGARGARE HP	Health Post	Y/DEBA	0	0	0	0	1	1	0	0	0	0	1	0	1	0	0	0	1	3	4
574	TSANDO HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	2	2
575	DASA HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	1	2	3
576	JAGALI HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	1	2	3
577	JAURO GOTEL H CLINIC	Health Clinic	Y/DEBA	0	0	0	1	0	1	0	0	0	0	2	0	0	0	0	0	1	3	4
578	JAURO MUSA KADI	Health Post	Y/DEBA	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	2	1	3
579	MAIKAHO PHCC	PHCC	Y/DEBA	0	0	0	1	0	1	0	0	0	0	2	0	0	0	0	0	3	1	4
580	TSANDON DAN DELA HP	Health Post	Y/DEBA	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	1	1	2
581	JIGAWAN IRO HP	Health Post	Y/DEBA	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	1	2	3
582	KURJALE PHCC	PHCC	Y/DEBA	0	0	1	2	0	2	0	0	0	0	1	0	0	0	0	0	1	5	6
583	PATA HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	1	2	0	0	0	0	0	1	0	1	0	0	0	2	3	5
584	DANGAR PHCC	PHCC	Y/DEBA	0	0	1	2	1	2	0	0	0	0	3	1	0	0	0	0	3	7	10
585	JANNAWO HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	1	0	2	0	0	0	0	1	0	0	0	0	0	1	3	4
586	KACHALLARI HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	1	3	0	1	0	0	0	0	3	0	0	0	0	0	2	6	8
587	KANAWA HP	Health Post	Y/DEBA	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3	3
588	WAJARI HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
589	ZAMFARAWA HP	Health Post	Y/DEBA	0	0	0	1	0	2	0	0	0	0	0	0	0	0	0	0	2	1	3
590	HAMMATATU HP	Health Post	Y/DEBA	0	0	0	0	0	2	0	0	0	0	2	0	0	0	0	0	1	3	4
591	JAURO SAMBO HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
592	KURBA HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	2	3	6	0	0	0	0	2	1	0	0	0	0	5	9	14
593	KWADON PHCC	PHCC	Y/DEBA	0	0	1	8	1	8	0	0	1	0	4	0	0	0	0	1	7	17	24
594	LIJI HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	8	3	7	0	0	0	0	3	0	0	0	0	2	8	16	24
595	DUMBU HP	Health Post	Y/DEBA	0	0	0	0	2	0	0	0	0	0	1	0	1	0	0	0	2	2	4

S/N	Facility Name	Facility Type	LGA	No. of Doctors	No. of Nurses/Midwives	No. of CHOs	No. of CHEWs	No. of JCHEWs	No. of EHOs	No. of Pharmacy Technicians	No. of Medical Records Technicians	No. of Medical Lab Technicians	No. of Dental Technicians	No. of Health Attendants	No. of Security	No. of Cleaners	No. of Data Clerks	No. of Community Health Promoters	No. of Nutrition officers	No. of Male	No. of Female	Total No. of Staff
596	JIGAWAN MAGAJI HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
597	KURI HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	2	0	3	0	1	0	0	2	1	1	0	0	0	4	6	10
598	LAMBAN HEALTH	Health Clinic	Y/DEBA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	2	2
599	LANO PHCC	PHCC	Y/DEBA	0	0	1	1	1	2	0	0	2	0	1	0	0	0	0	0	3	5	8
600	NASARAWA HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	1	2
601	NASARAWA DAN KUDE HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	1	1	2
602	SHEMEL DAURA HP	Health Post	Y/DEBA	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	1
603	DIFA HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	2	0	1	0	0	0	0	2	0	1	0	0	0	2	4	6
604	GARIN MALAN BABA HP	Health Post	Y/DEBA	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	1	1	2	3
605	KINAFI HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	1
606	LUBO PHCC	PHCC	Y/DEBA	0	0	0	3	1	2	0	0	0	0	2	0	0	0	0	0	3	5	8
607	BOLTUNGO HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	1	2
608	GARINBARAYA HP	Health Post	Y/DEBA	0	0	1	3	1	0	0	0	0	0	2	0	0	0	0	0	1	6	7
609	KUNUWAL HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	5	0	2	0	1	0	0	1	2	0	0	0	0	4	7	11
610	NONO M ISA H/ CLINIC	Health Clinic	Y/DEBA	0	0	0	1	1	1	0	0	0	0	0	0	1	0	0	0	2	2	4
611	NONO PHCC	PHCC	Y/DEBA	0	1	1	0	0	2	0	0	0	0	0	1	0	0	0	0	2	3	5
612	GENERAL HOSP ZAMBUK	SF	Y/DEBA	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	2	0	2
613	KWALI HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	1	1	0	0	0	0	0	1	0	0	0	0	0	1	2	3
614	SABON GARI HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	1	2	3
615	ZAMBUK PHCC	PHCC	Y/DEBA	0	0	2	3	1	2	0	0	0	0	5	0	0	0	0	0	4	9	13
Total				0	57	182	919	371	907	13	85	108	30	1098	74	91	7	61	51	1933	2121	4054

Annex 2: Primary Health Care (PHC) Facility-Level Staffing Gap Analysis

S/N	Facility Name	Facility Type	LGA	No. of Doctors Gap	No. of Nurses/Midwives Gap	No. of CHOs Gap	No. of CHEWs Gap	No. of JCHEWs Gap	No. of EHOs Gap	No. of Pharmacy Technicians Gap	No. of Medical Records Technicians Gap	No. of Medical Lab Technicians Gap	No. of Dental Technicians Gap	No. of Health Attendants Gap	No. of Security Gap	No. of Cleaners Gap	No. of Data Clerks Gap	No. of Community Health Promoters Gap	No. of Nutrition officers Gap	Attrition Allocation	Adjusted Total Gap
1	AKKO PHCC	PHCC	AKKO	1	4	0	1	2	-2	1	-1	2	1	-1	1	1	1	2	1	1	15
2	ARAWA PHC	PHC	AKKO	0	2	1	0	2	-2	1	0	1	0	-5	1	1	1	1	0	0	4
3	BADARA PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	0	1	1	1	2	1	1	18
4	BAPPA IBRAHIMA PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
5	BARAMBU PHCC	PHCC	AKKO	1	3	1	3	1	0	1	1	2	1	-5	2	2	1	2	1	1	18
6	BARUNDE PHC	PHC	AKKO	0	2	1	3	2	0	1	1	0	0	2	1	1	1	2	1	1	19
7	BOGO MODEL PHCC	PHCC	AKKO	1	4	0	3	2	-5	1	0	1	1	-1	0	2	1	1	0	0	11
8	BOGO PHC	PHC	AKKO	0	2	1	3	1	-9	1	0	0	0	0	1	1	1	2	1	0	5
9	BOGO WAZIRI PHC	PHC	AKKO	0	2	1	0	-2	-4	1	1	1	0	0	1	1	1	2	1	0	6
10	BOMALA PHC	PHC	AKKO	0	2	1	2	1	-3	1	1	1	0	2	1	1	1	2	1	1	15
11	BULA PHC	PHC	AKKO	0	2	1	-6	0	-7	1	1	1	0	-3	0	1	1	2	0	0	-6
12	CHILO PHC	PHC	AKKO	0	2	1	2	2	1	1	1	1	0	0	1	1	1	2	1	1	18
13	DOLLI PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	0	1	1	1	2	1	1	18
14	DONGOL PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	0	1	1	1	2	1	1	18
15	GADAWO PHCC	PHCC	AKKO	1	4	1	3	2	-2	1	0	0	1	-2	2	2	1	2	1	1	18
16	GAMAWA PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	0	1	1	1	2	1	1	18
17	GARIN BAKARI PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	-6	1	1	1	2	1	0	11
18	GARIN BARAYA HP	Health Post	AKKO	0	0	0	1	0	-1	0	0	0	0	0	1	1	0	0	0	0	2
19	GARIN GALADIMA PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	-3	1	1	1	2	1	1	15
20	GARIN RIJIYA HP	Health Post	AKKO	0	0	0	1	1	-1	0	0	0	0	-1	1	1	0	0	0	0	2
21	GARKO PHC	PHC	AKKO	0	1	1	1	2	0	1	1	1	0	1	1	1	1	2	1	1	16
22	GARWA HP	Health Post	AKKO	0	0	0	1	1	-2	0	0	0	0	0	1	1	0	0	0	0	2
23	GIDIM HP	Health Post	AKKO	0	0	0	1	-1	-2	0	0	0	0	-1	1	1	0	0	0	0	-1
24	GOKARU HP	Health Post	AKKO	0	0	0	1	1	0	0	0	0	0	-1	1	1	0	0	0	0	3
25	GONA PHC	PHC	AKKO	0	2	1	3	0	1	1	1	1	0	1	1	1	1	2	1	1	18
26	GUJUBAPHC	PHC	AKKO	0	2	1	2	1	0	1	1	1	0	2	1	1	1	2	1	1	18
27	HAMMADU KAFI PHC	PHC	AKKO	0	2	1	1	-1	-3	1	1	1	0	-4	1	1	1	2	0	0	4
28	JABBA PHC	PHC	AKKO	0	2	1	3	1	-1	1	1	1	0	2	1	1	1	2	1	1	18
29	JUNGUDO DEGA PHC	PHC	AKKO	0	2	1	3	1	-4	1	1	1	0	-4	1	1	1	2	1	0	8
30	JURARA HP	Health Post	AKKO	0	0	0	1	1	-1	0	0	0	0	0	1	1	0	0	0	0	3
31	KALCHINGI PHCC	PHCC	AKKO	1	3	1	2	0	0	1	1	2	1	-7	0	2	1	2	1	0	11
32	KALTANGA HP	Health Post	AKKO	0	0	0	0	1	-1	0	0	0	0	-1	1	1	0	0	0	0	1
33	KARGO PHC	PHC	AKKO	0	2	1	1	2	0	1	1	1	0	1	1	1	1	2	1	1	17
34	KASHERE MODEL PHCC	PHCC	AKKO	1	4	1	2	2	-2	1	1	1	1	-2	0	2	1	2	1	1	17
35	KAYEL BAGA HP	Health Post	AKKO	0	0	0	1	1	-1	0	0	0	0	0	1	1	0	0	0	0	3
36	KEMBU PHC	PHC	AKKO	0	2	1	2	0	-1	1	1	1	0	-5	1	1	1	2	1	0	8
37	KIDDA PHC	PHC	AKKO	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
38	KOBUWA PHC	PHC	AKKO	0	2	1	1	2	1	1	1	1	0	-3	1	1	1	2	1	1	14
39	KOMBANI ISA HP	Health Post	AKKO	0	0	0	1	1	-2	0	0	0	0	-2	1	1	0	0	0	0	0
40	KWAMBANI MAIKASUWA HP	Health Post	AKKO	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	2
41	KOROTI HP	Health Post	AKKO	0	0	0	1	0	0	0	0	0	0	-1	1	1	0	0	0	0	2
42	KUMO PHCC	PHCC	AKKO	1	3	1	0	-1	-23	1	0	1	0	-14	1	2	1	2	0	0	-25
43	KUNDULUM PHC	PHC	AKKO	0	2	1	2	1	-5	1	1	1	0	-6	1	1	1	2	1	0	4
44	KUNJI PHC	PHC	AKKO	0	2	1	2	1	-1	1	0	0	-1	-2	1	1	1	2	1	0	9
45	LAWANTI PHC	PHC	AKKO	0	2	1	1	2	0	1	1	1	0	-3	0	1	1	2	1	0	11
46	LEDEN PHC	PHC	AKKO	0	2	1	3	0	0	1	1	1	0	-2	1	1	1	-7	1	0	4
47	LEMPI PHC	PHC	AKKO	0	2	1	3	2	-1	1	1	1	0	1	1	1	1	2	1	1	18
48	LUGGEREWO PHC	PHC	AKKO	0	2	1	3	2	-1	1	1	1	0	-2	1	1	1	2	1	1	15
49	MAI GANGA PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	0	1	1	1	2	1	1	18
50	MAIDUGU HP	Health Post	AKKO	0	0	0	1	1	-1	0	0	0	0	-1	1	1	0	0	0	0	2
51	NEW MAI GANGA HP	Health Post	AKKO	0	0	0	1	1	-3	0	-1	-1	0	-5	1	1	0	0	-1	0	-7
52	PANDA PHCC	PHCC	AKKO	1	4	1	3	0	1	1	1	2	1	2	0	2	1	2	1	1	24
53	PANDAYA PHC	PHC	AKKO	0	2	1	3	1	-1	1	1	1	0	-4	0	0	1	2	1	0	9
54	PINDIGA PHCC	PHCC	AKKO	1	4	1	3	2	-1	1	1	1	0	-10	-1	2	1	2	0	0	7
55	PIYAU PHC	PHC	AKKO	0	2	1	2	2	0	1	-1	-1	0	2	0	1	1	2	1	1	18
56	SABONGARIN TIJJANI HP	Health Post	AKKO	0	0	0	1	1	-2	0	0	0	0	-1	1	1	0	0	0	0	1
57	SHABBAL HP	Health Post	AKKO	0	0	0	0	1	-1	0	0	0	0	1	1	1	0	0	0	0	3

S/N	Facility Name	Facility Type	LGA	No. of Doctors Gap	No. of Nurses/Midwives Gap	No. of CHOs Gap	No. of CHEWs Gap	No. of JCHEWs Gap	No. of EHOs Gap	No. of Pharmacy Technicians Gap	No. of Medical Records Technicians Gap	No. of Medical Lab Technicians Gap	No. of Dental Technicians Gap	No. of Health Attendants Gap	No. of Security Gap	No. of Cleaners Gap	No. of Data Clerks Gap	No. of Community Health Promoters Gap	No. of Nutrition officers Gap	Attrition Allocation	Adjusted Total Gap
58	SHANGO HAMMA HP	Health Post	AKKO	0	0	0	0	0	-1	0	0	0	0	-3	1	1	0	0	0	0	-2
59	SHANGO PHC	PHC	AKKO	0	2	1	0	0	-1	1	1	1	0	-9	1	1	1	2	1	0	2
60	TABRA PHC	PHC	AKKO	0	2	1	0	-1	-1	1	1	1	0	0	0	1	1	2	1	0	9
61	TALIYAWA PHC	PHC	AKKO	0	2	0	3	2	1	1	1	1	0	1	1	1	2	1	1	1	19
62	TAMBELO PHC	PHC	AKKO	0	2	1	3	1	-2	1	1	1	0	0	1	1	1	2	1	1	15
63	TUKULMA PHCC	PHCC	AKKO	1	4	1	2	2	-2	1	1	2	1	-2	0	2	1	2	1	1	18
64	TULMI HP	Health Post	AKKO	0	0	0	1	0	-1	0	0	0	0	-2	1	1	0	0	0	0	0
65	TUMUPHCC	PHCC	AKKO	1	4	1	3	1	-1	1	1	2	1	-6	0	2	1	2	1	1	15
66	TUMFURE PHC	PHC	AKKO	0	2	1	1	1	-2	1	1	1	0	-3	1	1	1	2	0	0	8
67	WARRA HP	Health Post	AKKO	0	0	0	1	1	-1	0	0	0	0	-2	0	1	0	0	0	0	0
68	WURO DOLE HP	Health Post	AKKO	0	0	0	1	0	0	0	0	0	0	-1	1	1	0	0	0	0	2
69	YELWA HP	Health Post	AKKO	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	0	3
70	YANKARI HP	Health Post	AKKO	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
71	YARIMA SAHE PHC	PHC	AKKO	0	2	1	2	2	0	1	1	1	0	-4	1	1	1	2	1	0	12
72	YELWAN BOGO PHC	PHC	AKKO	0	2	1	2	1	-7	1	0	1	0	-1	1	1	1	2	1	0	6
73	ZABIN KANI PHC	PHC	AKKO	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
74	ZONGOMARI PHC	PHC	AKKO	0	2	1	3	1	1	1	1	1	0	2	0	1	1	2	1	1	19
75	SAMBO DAJI PHC	PHC	AKKO	0	2	1	3	1	-4	1	1	1	0	0	1	1	1	2	1	0	12
76	GWARAM PHC	PHC	AKKO	0	2	1	2	2	1	1	1	0	0	2	1	1	1	2	1	1	20
77	TALASSE PHCC	PHCC	BALANGA	1	4	0	-2	2	1	1	-1	0	-2	-4	0	-1	1	2	0	0	2
78	DONG PHC	PHC	BALANGA	0	2	1	3	1	1	1	1	1	0	-2	1	1	1	2	1	1	16
79	REME PHC	PHC	BALANGA	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
80	JAMJARA HC	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
81	SWA PHCC	PHCC	BALANGA	1	4	-1	-2	-5	-1	-1	-1	0	-2	-4	0	1	1	2	0	0	-8
82	WADACHI HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
83	DABA HP	Health Post	BALANGA	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
84	GASI HC	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	0	1	1	0	1	0	0	8
85	WALA HC	Health Clinic	BALANGA	0	1	0	2	0	1	0	0	0	0	1	1	1	0	1	0	0	8
86	REFELE HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	1	0	1	0	1	0	0	7
87	KOLAKU HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
88	GELENGU PHCC	PHCC	BALANGA	1	4	1	-1	-3	-2	0	0	0	1	-2	1	2	0	2	-1	0	3
89	BAKASI HC	Health Clinic	BALANGA	0	1	0	1	0	1	0	-1	0	0	0	1	1	0	1	0	0	5
90	GANGAWARE HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	-1	1	1	0	1	0	0	6
91	KEMBU HC	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	0	1	1	0	1	0	0	8
92	BALANGA PHC	PHC	BALANGA	0	2	0	3	2	1	1	1	1	0	2	1	1	1	2	1	1	20
93	BANGU PHCC	PHCC	BALANGA	1	4	1	2	2	1	1	1	1	1	-1	2	2	1	2	1	1	23
94	DALAWAJA HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	0	1	1	0	1	0	0	7
95	LAFIYA HC	Health Clinic	BALANGA	0	1	0	2	0	1	0	0	0	0	0	1	1	0	1	0	0	7
96	TIYAKUNU HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
97	SABONLAYI HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	4
98	PUTOKI PHCC	PHCC	BALANGA	1	4	1	1	0	0	0	0	2	-2	0	2	1	1	2	0	1	14
99	SIKKAM PHC	PHC	BALANGA	0	2	1	2	2	1	1	1	1	-2	2	1	1	1	2	1	1	18
100	LUKI A HP	Health Post	BALANGA	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
101	LUKI B HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	4
102	DEGRI KUFAL PHC	PHC	BALANGA	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
103	KULANI PHC	PHC	BALANGA	0	2	1	3	1	1	1	1	1	0	0	1	1	1	2	1	1	18
104	CHESSI HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	4
105	KWANOGHARA HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
106	CHAMCHIYO HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
107	GURMA HC	Health Clinic	BALANGA	0	1	0	2	0	1	0	0	0	0	0	1	1	0	1	0	0	7
108	KORE HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	0	1	1	0	1	0	0	7
109	NYUWAR PHCC	PHCC	BALANGA	1	2	1	0	-3	0	0	1	0	1	-6	0	-3	1	2	0	0	-3
110	JESSU HC	Health Clinic	BALANGA	0	1	0	1	0	1	0	0	0	0	0	1	1	0	1	0	0	6

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111	CHAM PHCC	PHCC	BALANGA	1	4	0	0	0	1	0	0	1	1	-2	2	2	1	2	-1	0	12
112	TIKSIR HP	Health Post	BALANGA	0	0	0	0	1	-1	0	0	0	0	0	1	1	0	0	0	0	2
113	KWASI HP	Health Post	BALANGA	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
114	LABUN HC	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
115	KUMTUR HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
116	GWENTI HP	Health Post	BALANGA	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
117	YOLDE HP	Health Post	BALANGA	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	0	3
118	SILON PHCC	PHCC	BALANGA	1	4	-1	3	2	1	1	1	2	1	0	2	2	1	2	1	1	24
119	MONA HC	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	0	1	1	0	1	0	0	8
120	BARE HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
121	LAKUN HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	1	0	1	0	1	0	0	7
122	KWARGE HC	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	0	1	1	0	1	0	0	8
123	KWARI HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
124	BAMBAM PHCC	PHCC	BALANGA	1	3	-1	-2	-2	-1	0	-1	1	-1	-7	0	2	1	2	1	0	-4
125	BARE JAUDI HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
126	DADIYA PHCC	PHCC	BALANGA	1	4	1	-4	2	1	1	1	2	1	-4	1	0	1	2	-1	0	9
127	LOBATI HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
128	MAITUNKU HC	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
129	YALWA HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	-1	1	1	0	1	0	0	6
130	LOBARE HP	Health Post	BALANGA	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
131	KAFIN BAWA HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	0	1	1	0	1	0	0	7
132	YAMFIYO HC	Health Clinic	BALANGA	0	1	0	1	1	1	0	0	0	0	0	1	1	0	1	0	0	7
133	SABARA	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
134	BALANSANI HC	Health Clinic	BALANGA	0	1	0	2	1	1	0	0	0	0	0	1	1	0	1	0	0	8
135	Algon PHC	PHC	BILLIRI	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
136	Amtawalam HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	0	3
137	Amutha PHC	PHC	BILLIRI	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
138	Awai HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	-1	1	1	0	0	0	0	2
139	Ayaba PHCC	PHCC	BILLIRI	1	4	-1	2	1	1	1	0	2	1	0	2	2	1	2	1	1	21
140	Banganje PHC	PHC	BILLIRI	0	2	1	2	1	1	1	1	1	0	2	1	1	1	2	1	1	19
141	Banganje PHCC	PHCC	BILLIRI	1	3	0	2	0	-2	1	1	2	0	0	2	2	1	2	-1	1	15
142	Bassa HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
143	Falseje HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
144	kaindi PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
145	kalkulum PHC	PHC	BILLIRI	0	2	1	-5	1	0	1	1	1	0	1	1	1	1	2	1	0	9
146	Kalmal PHC	PHC	BILLIRI	0	2	1	0	1	1	1	1	1	0	1	1	1	1	2	1	1	15
147	Kekkel PHCC	PHCC	BILLIRI	1	3	1	-6	0	-4	1	1	-1	1	-4	2	2	1	2	0	0	0
148	Kentengereng PHCC	PHCC	BILLIRI	1	3	1	0	-1	-1	0	1	0	1	-4	2	2	1	2	-1	0	7
149	Kolkos PHC	PHC	BILLIRI	0	2	1	1	2	0	1	1	1	0	1	1	1	1	2	1	1	17
150	Kolokkwannin PHC	PHC	BILLIRI	0	2	1	3	0	1	1	1	1	0	0	1	1	1	2	1	1	17
151	komta HP	Health Post	BILLIRI	0	0	0	1	-1	-1	0	0	0	0	-1	1	1	0	0	0	0	0
152	Kufai PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	0	1	1	1	2	1	1	18
153	Kulgul PHCC	PHCC	BILLIRI	1	4	1	0	1	1	1	1	2	1	2	2	1	2	1	1	1	23
154	Kuron Mota PHC	PHC	BILLIRI	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
155	Kurum HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
156	Kwaya PHC	PHC	BILLIRI	0	2	1	3	2	1	1	1	1	0	0	1	1	1	2	1	1	19
157	Kwibah PHC	PHC	BILLIRI	0	2	1	3	1	1	1	1	1	0	2	1	1	1	2	1	1	20
158	Kwilapandi Amoyo HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	1	1	1	0	0	0	0	4
159	kiwulang HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
160	Laberfito HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
161	Lafurut HP	Health Post	BILLIRI	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
162	Lakalkal HP	Health Post	BILLIRI	0	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	4
163	Lakarai HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	-1	1	1	0	0	0	0	2
164	Lakelembu PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
165	Lakukdu HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3

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166	Lamugu PHC	PHC	BILLIRI	0	2	1	2	1	1	1	1	1	0	2	1	1	1	2	1	1	19
167	Lapanshedde PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
168	Lasale PHC	PHC	BILLIRI	0	2	1	1	2	-1	1	1	1	0	1	1	1	1	2	1	1	16
169	Lasani PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
170	Latambayo HP	Health Post	BILLIRI	0	0	0	1	1	-1	0	0	0	0	0	1	1	0	0	0	0	3
171	Latoddo HP	Health Post	BILLIRI	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
172	Latugad HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
173	Lawape HP	Health Post	BILLIRI	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
174	Lawiltu PHC	PHC	BILLIRI	0	2	1	-1	1	1	1	1	1	0	2	1	1	1	2	1	1	16
175	Lawushi Daji PHC	PHC	BILLIRI	0	2	0	0	2	1	1	1	1	0	2	1	1	1	2	1	1	17
176	Lawurkondo HP	Health Post	BILLIRI	0	0	0	1	0	0	0	0	0	0	1	1	1	0	0	0	0	4
177	Layafi PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
178	Pakia HP	Health Post	BILLIRI	0	0	0	1	1	-1	0	0	0	0	0	1	1	0	0	0	0	3
179	Pandikungu HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	-1	1	1	0	0	0	0	2
180	Pandinkude PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
181	Panguru PHC	PHC	BILLIRI	0	2	1	2	1	1	1	1	1	0	1	1	1	1	2	1	1	18
182	Payi PHC	PHC	BILLIRI	0	2	1	2	2	0	1	1	1	0	2	1	1	1	2	1	1	19
183	Pissiuko PHC	PHC	BILLIRI	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
184	Pobawure PHCC	PHCC	BILLIRI	1	4	1	2	1	0	1	0	1	1	0	2	2	1	2	1	1	21
185	Pokuji PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
186	pokwangli PHC	PHC	BILLIRI	0	2	1	-1	0	1	1	1	1	0	1	1	1	1	2	1	0	13
187	Popandi HP	Health Post	BILLIRI	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
188	Powushi PHC	PHC	BILLIRI	0	2	1	2	2	1	1	1	1	0	0	1	1	1	2	1	1	18
189	Poyali PHC	PHC	BILLIRI	0	2	1	3	2	1	1	1	1	0	1	1	1	1	2	0	1	19
190	Ruggan Alh Adeh PHC	PHC	BILLIRI	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
191	Sabonlayi PHCC	PHCC	BILLIRI	1	4	1	2	2	0	1	-1	1	1	2	2	1	2	1	1	1	22
192	Sansani PHCC	PHCC	BILLIRI	1	4	0	-2	0	-1	1	1	0	1	-3	2	2	1	2	1	0	10
193	shela PHC	PHC	BILLIRI	0	2	1	2	1	0	1	1	1	0	1	1	1	1	2	1	1	17
194	Sikirit HP	Health Post	BILLIRI	0	0	0	-1	1	0	0	0	0	0	0	1	1	0	0	0	0	2
195	Tal PHC	PHC	BILLIRI	0	2	0	0	2	0	1	1	1	0	1	1	1	1	2	1	1	15
196	Tal Maternity	PHC	BILLIRI	0	2	0	1	0	-1	1	1	1	0	0	1	1	1	2	1	0	11
197	Tangji HP	Health Post	BILLIRI	0	0	0	1	0	-1	0	0	0	0	0	1	1	0	0	0	0	2
198	Tanglang PHC	PHC	BILLIRI	0	1	0	-3	-1	1	1	0	1	0	-2	1	1	1	2	1	0	4
199	Todi PHCC	PHCC	BILLIRI	1	4	1	2	2	-1	1	1	1	1	-1	2	2	1	2	1	1	21
200	Tudu PHCC	PHCC	BILLIRI	1	4	0	0	2	1	1	0	0	1	-1	2	2	1	2	1	1	18
201	ALANI PHC	PHC	DUKKU	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
202	BALAJE PHC	PHC	DUKKU	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
203	BANIGAYI PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
204	BAWA PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
205	BAWA ZEGO HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
206	BOKKIRU PHC	PHC	DUKKU	0	2	1	3	2	0	1	1	1	0	1	1	1	1	2	1	1	19
207	BOZONSILWA PHCC	PHCC	DUKKU	1	4	1	3	0	-1	1	0	2	1	0	2	2	1	2	1	1	21
208	BULAMA PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	0	1	2	1	1	20
209	BURARI PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
210	DAMBA PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
211	DAMINYA PHC	PHC	DUKKU	0	2	1	3	2	0	1	1	1	0	2	1	0	1	2	1	1	19
212	DASHI PHC	PHC	DUKKU	0	2	1	3	1	1	1	1	1	0	1	1	1	1	2	1	1	19
213	DIGE PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
214	DOKORO PHC	PHC	DUKKU	0	2	1	1	2	1	1	1	1	0	1	1	1	1	2	1	1	18
215	DUGGIRI HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	4
216	DUKKU PHCC	PHCC	DUKKU	1	4	0	-11	-7	-22	1	-2	-2	1	-6	2	1	1	2	-1	0	-38
217	DUKKU TOWN MATERNITY PHC	PHC	DUKKU	0	2	1	1	-2	-1	1	1	1	0	-5	1	1	1	2	1	0	5
218	DUKKUYEL PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	0	1	1	1	2	1	1	18
219	DUU PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
220	GABCHIYARI PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
221	GADUM PHC	PHC	DUKKU	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
222	Gale PHC	PHC	DUKKU	0	2	1	3	1	1	1	1	1	0	2	1	1	1	2	1	1	20
223	GANAWAJI HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
224	GARIN AHMADU HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5

S/N	Facility Name	Facility Type	LGA	No. of Doctors Gap	No. of Nurses/Midwives Gap	No. of CHOs Gap	No. of CHEWs Gap	No. of JCHEWs Gap	No. of EHOs Gap	No. of Pharmacy Technicians Gap	No. of Medical Records Technicians Gap	No. of Medical Lab Technicians Gap	No. of Dental Technicians Gap	No. of Health Attendants Gap	No. of Security Gap	No. of Cleaners Gap	No. of Data Clerks Gap	No. of Community Health Promoters Gap	No. of Nutrition officers Gap	Attrition Allocation	Adjusted Total Gap
225	GARIN ALARAMMA PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
226	GODE PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
227	GOMBE ABBA PHCC	PHCC	DUKKU	1	4	0	4	1	0	1	1	2	1	-2	2	2	1	2	1	1	22
228	GORINGO PHC	PHC	DUKKU	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
229	HASHIDU PHCC	PHCC	DUKKU	1	4	1	2	0	-2	1	1	2	1	0	2	0	1	2	1	1	18
230	ISAH ALI PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
231	JALINGO HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
232	JAMARI PHCC	PHCC	DUKKU	1	4	1	2	1	1	1	1	2	1	1	2	2	1	2	1	1	25
233	JARKUM PHC	PHC	DUKKU	0	2	1	1	2	1	1	1	1	0	2	1	1	1	2	1	1	19
234	JOMBO HP	Health Post	DUKKU	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
235	JONDE HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
236	KABADE PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
237	KALAM HP	Health Post	DUKKU	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
238	KALOMA PHC	PHC	DUKKU	0	2	1	3	2	0	1	1	1	0	2	1	0	1	2	1	1	19
239	KAMBA PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
240	KOMBI PHC	PHC	DUKKU	0	2	1	2	2	0	1	1	1	0	0	1	1	1	2	1	1	17
241	KOWAGOL HP	Health Post	DUKKU	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
242	KUKADI HP	Health Post	DUKKU	0	0	0	1	0	-1	0	0	0	0	-1	1	1	0	0	0	0	1
243	KUNDE PHCC	PHCC	DUKKU	1	4	1	3	1	-1	1	1	2	1	0	2	2	1	2	1	1	23
244	KUNI HP	Health Post	DUKKU	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
245	LAFIYA PHCC	PHCC	DUKKU	1	4	1	2	1	0	1	1	2	1	2	2	2	1	2	1	1	25
246	Lule HP	Health Post	DUKKU	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
247	MALALA PHCC	PHCC	DUKKU	1	4	1	0	1	-1	1	1	1	1	-1	2	1	1	2	1	1	17
248	MALALAYEL HP	Health Post	DUKKU	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
249	MALURI YELWA PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
250	MARU PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	1	1	1	1	2	1	1	20
251	MAYO LAMIDO PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
252	NYSCLINIC WURO TARA PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
253	PALIMOCCHI HP	Health Post	DUKKU	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
254	SHABEWA PHC	PHC	DUKKU	0	2	1	0	2	-1	1	1	1	0	2	1	1	1	2	1	1	16
255	SHUWE PHC	PHC	DUKKU	0	2	1	1	2	1	1	1	1	0	2	1	1	1	2	1	1	19
256	SUKA PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
257	TALE HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	4
258	TIMBU PHC	PHC	DUKKU	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
259	TUMFURE PHC	PHC	DUKKU	0	2	1	2	2	0	1	1	1	0	2	1	1	1	2	1	1	19
260	Walama PHC	PHC	DUKKU	0	2	1	2	1	1	1	1	1	0	2	1	1	1	2	1	1	19
261	WALOJI PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
262	WANGI BAKO PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
263	WEDU KOLE PHC	PHC	DUKKU	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
264	WURO BOGGA HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
265	WURO KUDU PHC	PHC	DUKKU	0	2	1	3	2	0	1	1	1	0	2	1	0	1	2	1	1	19
266	WURO TALE PHCC	PHCC	DUKKU	1	4	0	3	2	-2	1	1	2	1	1	2	2	1	2	1	1	23
267	Yole HP	Health Post	DUKKU	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
268	ZAGALA HP	Health Post	DUKKU	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
269	ZANGE PHCC	PHCC	DUKKU	1	4	0	3	2	0	1	1	2	1	1	2	2	1	2	1	1	25
270	Zaune HP	Health Post	DUKKU	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
271	ZAUNE PHCC	PHCC	DUKKU	1	4	1	3	1	0	1	1	2	1	2	2	2	1	2	1	1	26
272	Ashaka Gari PHC	PHC	FUNAKAYE	0	2	1	2	1	1	1	1	1	0	-2	1	1	1	2	1	1	15
273	Bulagaidam PHC	PHC	FUNAKAYE	0	2	1	3	2	-2	1	1	1	-1	1	1	1	1	2	1	1	16
274	Dayayi PHC	PHC	FUNAKAYE	0	2	1	2	1	0	1	1	1	0	1	1	1	1	2	1	1	17
275	Jalingo Primary Health Centre	PHCC	FUNAKAYE	1	3	1	2	2	-4	1	-1	1	1	-6	2	0	1	2	1	0	7
276	Jalingo Gate PHC	PHC	FUNAKAYE	0	2	1	1	-2	1	1	1	1	0	2	1	1	1	2	1	1	15
277	Kademi PHC	PHC	FUNAKAYE	0	2	1	1	2	-1	1	1	1	0	1	1	1	1	2	1	1	16
278	Magaba PHC	PHC	FUNAKAYE	0	2	1	2	1	0	1	1	1	0	0	1	1	1	2	1	1	16
279	Mannari PHC	PHC	FUNAKAYE	0	2	1	2	2	-1	1	1	1	0	2	1	1	1	2	1	1	18
280	Bage Primary Health Centre	PHCC	FUNAKAYE	1	4	1	2	1	-1	1	1	2	1	-2	2	2	1	2	1	1	20
281	Badabdi PHC	PHC	FUNAKAYE	0	2	1	3	0	1	1	1	1	0	2	1	1	1	2	1	1	19
282	Bumgum PHC	PHC	FUNAKAYE	0	2	1	1	1	1	1	1	1	0	2	1	1	1	2	1	1	18
283	Dindi PHC	PHC	FUNAKAYE	0	2	1	3	1	0	1	1	1	0	2	1	1	1	2	1	1	19

S/N	Facility Name	Facility Type	LGA	No. of Doctors Gap	No. of Nurses/Midwives Gap	No. of CHOs Gap	No. of CHEWs Gap	No. of JCHEWs Gap	No. of EHOs Gap	No. of Pharmacy Technicians Gap	No. of Medical Records Technicians Gap	No. of Medical Lab Technicians Gap	No. of Dental Technicians Gap	No. of Health Attendants Gap	No. of Security Gap	No. of Cleaners Gap	No. of Data Clerks Gap	No. of Community Health Promoters Gap	No. of Nutrition officers Gap	Attrition Allocation	Adjusted Total Gap
284	FeshingoPHC	PHC	FUNAKAYE	0	2	1	3	1	0	1	1	1	0	2	1	1	1	2	1	1	19
285	Garin Maja PHC	PHC	FUNAKAYE	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
286	Gongila PHC	PHC	FUNAKAYE	0	2	0	2	2	1	1	1	1	0	2	1	1	1	2	1	1	19
287	Gube PHC	PHC	FUNAKAYE	0	2	1	3	1	-1	1	1	1	0	2	1	1	1	2	1	1	18
288	Juggol Borkono PHC	PHC	FUNAKAYE	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
289	Kafiwol PHC	PHC	FUNAKAYE	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
290	Lariski PHC	PHC	FUNAKAYE	0	2	1	3	2	-3	1	1	1	0	2	1	1	1	2	1	1	17
291	Manawashi PHC	PHC	FUNAKAYE	0	2	1	3	2	-1	1	1	1	0	2	1	1	1	2	1	1	19
292	Ngeltanni Health Clinic	PHC	FUNAKAYE	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
293	Sanganu Primary Health Centre	PHCC	FUNAKAYE	1	3	1	0	2	-7	1	1	-1	1	-5	1	2	1	2	0	0	3
294	Bajoga Primary Health Centre	PHCC	FUNAKAYE	1	4	-2	0	0	-1	1	1	1	1	-3	1	2	1	2	1	0	8
295	Sharfuri PHC	PHC	FUNAKAYE	0	2	1	2	-1	-1	1	1	1	0	1	1	1	1	2	1	1	14
296	Jagabari PHC	PHC	FUNAKAYE	0	2	1	2	1	0	1	1	1	0	1	1	1	1	2	1	1	17
297	Jillahi Primary Health Centre	PHCC	FUNAKAYE	1	4	1	1	2	-3	1	1	2	1	1	2	2	1	2	1	1	21
298	Mutuke PHC	PHC	FUNAKAYE	0	2	1	2	2	0	1	1	1	0	-1	0	1	1	2	1	1	15
299	Wuro Arsi PHC	PHC	FUNAKAYE	0	2	1	3	2	0	1	1	1	0	-1	-1	1	1	2	1	1	15
300	Kupto Primary Health Centre	PHCC	FUNAKAYE	1	4	0	2	-1	0	1	1	2	1	-1	1	0	1	2	1	1	16
301	Jangade PHC	PHC	FUNAKAYE	0	2	1	3	2	1	1	1	1	0	1	1	1	1	2	1	1	20
302	Kuka Bakwai PHC	PHC	FUNAKAYE	0	2	1	3	1	0	1	1	1	0	-1	1	1	1	2	1	1	16
303	Abuja PHC	PHC	FUNAKAYE	0	1	1	2	2	0	1	1	1	0	1	1	1	1	2	1	1	17
304	Garin Dogo PHC	PHC	FUNAKAYE	0	2	1	2	2	-1	1	1	1	0	-4	0	1	1	2	1	0	10
305	Guwra PHC	PHC	FUNAKAYE	0	2	1	2	2	0	1	1	1	0	-2	1	1	1	2	1	1	15
306	Ngarai PHC	PHC	FUNAKAYE	0	2	1	3	2	-2	1	-2	1	0	1	1	1	1	2	1	1	14
307	Ribadu Primary Health Centre	PHCC	FUNAKAYE	1	4	0	2	-1	-2	1	1	2	1	-3	2	-2	1	2	1	0	10
308	Bodor PHC	PHC	FUNAKAYE	0	2	1	3	1	1	1	1	1	0	-3	1	1	1	2	1	1	15
309	Tilde Primary Health Center	PHCC	FUNAKAYE	1	4	0	2	2	-2	1	1	2	1	-2	0	0	1	2	1	1	15
310	Sisi Bako PHC	PHC	FUNAKAYE	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
311	Tongo Primary Health Centre	PHCC	FUNAKAYE	1	4	0	2	0	-1	1	1	2	1	-15	2	-3	1	2	-1	0	-3
312	Yarda PHC	PHC	FUNAKAYE	0	2	1	0	2	1	1	1	1	0	2	1	1	1	2	1	1	18
313	Komi PHC	PHC	FUNAKAYE	0	2	1	3	2	0	1	1	1	0	0	1	1	1	2	1	1	18
314	Wakaltu PHC	PHC	FUNAKAYE	0	2	1	1	2	-1	1	1	1	0	0	1	1	1	2	1	1	15
315	Wawa PHCC	PHCC	FUNAKAYE	1	4	-2	1	1	-3	1	1	2	1	0	0	2	1	2	1	1	14
316	Wuro Galde PHC	PHC	FUNAKAYE	0	2	1	3	1	-1	1	1	1	0	2	1	1	1	2	1	1	18
317	Gardawashi PHC	PHC	FUNAKAYE	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
318	Garin Aba PHC	PHC	FUNAKAYE	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
319	Boggawo PHC	PHC	FUNAKAYE	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
320	Gadakka PHC	PHC	FUNAKAYE	0	2	1	2	1	0	1	1	1	0	-3	1	1	1	2	1	0	12
321	Siddikiyo PHC	PHC	FUNAKAYE	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
322	Gerengi PHC	PHC	FUNAKAYE	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
323	Yarimari PHC	PHC	FUNAKAYE	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
324	IDI HP	Health Post	GOMBE	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
325	MADAKI PHCC	PHCC	GOMBE	1	4	-2	-7	2	0	1	1	1	1	0	2	2	0	0	1	0	7
326	FAMILY SUPPORT	PHC	GOMBE	0	2	0	-1	2	-2	1	-1	0	-1	1	1	1	1	2	1	0	7
327	BOLARI PHCC	PHCC	GOMBE	1	4	-2	-2	0	-1	1	1	1	1	-7	2	2	1	1	1	0	4
328	MANAWASHI HP	Health Post	GOMBE	0	0	-1	0	1	-2	0	0	0	0	-2	1	1	0	0	0	0	-2
329	TOWN PHCC	PHCC	GOMBE	1	1	-2	-3	0	-3	1	-2	-2	1	-3	2	2	1	1	-1	0	-6
330	TBL HC	Health Clinic	GOMBE	0	1	0	-1	-2	-2	0	-1	0	0	-2	1	1	0	0	0	0	-5
331	PHCC HERWAGANA	PHCC	GOMBE	1	2	-1	-2	0	-2	0	1	2	1	-4	2	2	1	2	1	0	6
332	JEKADAFARI PHCC	PHCC	GOMBE	1	3	-2	0	0	-1	1	-1	2	1	0	2	2	1	-1	1	0	9
333	DOMA PHCC	PHCC	GOMBE	1	4	-1	0	-1	-1	1	1	0	1	1	2	2	1	1	1	1	15
334	KUMBIYA KUMBIYA PHCC	PHCC	GOMBE	1	3	-2	-3	-2	-3	1	0	1	1	0	2	1	1	1	1	0	3
335	NASARAWO PHCC	PHCC	GOMBE	1	3	-2	0	-1	-3	1	0	2	1	-1	2	2	1	-1	1	0	6
336	SABON GARI HC	Health Clinic	GOMBE	0	1	0	1	-1	1	0	0	0	0	0	1	1	0	1	0	0	5
337	PANTAMI PHCC	PHCC	GOMBE	1	0	1	-3	-1	0	1	0	1	1	0	2	2	1	2	1	0	9
338	PANTAMI HC	Health Clinic	GOMBE	0	1	-1	1	1	-1	0	0	0	0	1	1	1	0	1	0	0	5
339	GABUKKA PHC	PHC	GOMBE	0	2	0	-1	1	-2	1	0	1	0	0	1	0	1	2	1	0	7
340	PHCC TUDUN WADA	PHCC	GOMBE	1	1	0	-7	0	-1	1	1	0	0	-3	2	2	1	2	1	0	1

S/N	Facility Name	Facility Type	LGA	No. of Doctors Gap	No. of Nurses/Midwives Gap	No. of CHOs Gap	No. of CHEWs Gap	No. of JCHEWs Gap	No. of EHOs Gap	No. of Pharmacy Technicians Gap	No. of Medical Records Technicians Gap	No. of Medical Lab Technicians Gap	No. of Dental Technicians Gap	No. of Health Attendants Gap	No. of Security Gap	No. of Cleaners Gap	No. of Data Clerks Gap	No. of Community Health Promoters Gap	No. of Nutrition officers Gap	Attrition Allocation	Adjusted Total Gap
341	KASUWAN MATA PHC	PHC	GOMBE	0	2	-1	-3	-3	-5	1	-5	1	0	0	1	1	1	2	1	0	-7
342	PHC LONDON	PHC	GOMBE	0	2	-1	-3	-1	-3	1	1	1	-3	0	1	-1	1	1	1	0	-3
343	JAURO ABARE HC	Health Clinic	GOMBE	0	1	0	-4	-1	-2	0	0	0	0	-1	1	1	-1	1	0	0	-5
344	MALLAM INNA PHC	PHC	GOMBE	0	2	1	-2	0	-5	1	0	1	0	-2	1	1	1	1	1	0	1
345	JAURO ABARE KORAN ZAKI	Health Clinic	GOMBE	0	1	0	0	-2	-2	0	0	0	0	-1	1	1	0	0	0	0	-2
346	KAGARAWAL PHCC	PHCC	GOMBE	1	4	-1	-2	-2	-2	1	0	2	1	-2	2	2	1	2	1	0	8
347	HAYIN DOGO HP	Health Post	GOMBE	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
348	SABON LAYI PHCC	PHCC	KALTUNGO	1	4	0	3	2	0	1	1	2	1	1	2	2	1	2	1	1	25
349	SOBLONG H/C	Health Clinic	KALTUNGO	0	1	0	2	0	1	0	0	0	0	1	1	1	0	1	0	0	8
350	DOGONRUWA H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	-1	1	1	0	1	-1	0	5
351	GARIN BAKO H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
352	DUNDAYE H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
353	BWARA H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
354	BAULE GARI PHCC	PHCC	KALTUNGO	1	4	0	4	1	-1	1	1	2	1	1	2	2	1	2	1	1	24
355	JALINGO H/ C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
356	LUNGURE H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
357	LAFIYA H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
358	JAURO AUDI H/C	Health Clinic	KALTUNGO	0	1	0	2	0	1	0	0	0	0	1	1	1	0	1	0	0	8
359	BILKITAMAN H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
360	KALTIN PHCC	PHCC	KALTUNGO	1	4	0	3	2	1	1	1	2	1	2	2	2	1	2	1	1	27
361	BULE H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
362	KWANG H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	0	1	1	0	1	0	0	8
363	SABONGARI H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
364	BUNDI-BUNDE HP	Health Post	KALTUNGO	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
365	JAURO ALI H/C	Health Clinic	KALTUNGO	0	1	0	2	0	1	0	0	0	0	1	1	1	0	1	0	0	8
366	LAKWEME H/C	Health Clinic	KALTUNGO	0	1	0	2	0	0	0	0	0	0	-1	1	1	0	1	0	0	5
367	KALAKOROK HP	Health Post	KALTUNGO	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
368	PURMAI H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
369	KALUWA H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	0	1	1	0	1	0	0	8
370	POSSHERENG H/C	Health Clinic	KALTUNGO	0	1	-1	1	0	0	0	-1	-1	0	0	1	1	0	1	0	0	2
371	POPANDI H/C	Health Clinic	KALTUNGO	0	1	0	2	0	-1	0	0	-1	0	1	1	1	0	1	0	0	5
372	KALEH ALGON H/C	Health Clinic	KALTUNGO	0	1	-1	2	1	0	0	0	-1	0	-2	1	1	0	1	0	0	3
373	LAYIRO POSSHERENG H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
374	LAYIRO H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
375	A T SHAMALI PHCC	PHCC	KALTUNGO	1	4	0	2	2	-1	1	1	2	1	1	2	2	1	2	1	1	23
376	BANDARA H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
377	KOKDE H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
378	KALORGU PHCC	PHCC	KALTUNGO	1	4	0	1	2	0	1	1	1	1	1	2	2	1	2	1	1	22
379	LAPANDINTAI H/C	Health Clinic	KALTUNGO	0	1	-1	1	1	0	0	0	0	0	-1	1	1	0	1	0	0	4
380	FADA H/C	Health Clinic	KALTUNGO	0	1	0	2	1	0	0	0	0	0	1	1	1	0	1	0	0	8
381	KWA H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
382	LIMDE HP	Health Post	KALTUNGO	0	0	0	1	0	-1	0	0	0	0	1	1	1	0	0	0	0	3
383	POKWANLI H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	-1	0	7
384	LAKIDIR PHCC	PHCC	KALTUNGO	1	4	0	1	0	0	1	1	2	1	2	2	2	1	2	1	1	22
385	WILI H/C	Health Clinic	KALTUNGO	0	1	0	1	1	0	0	0	0	0	1	1	1	0	1	0	0	7
386	TUREMAI H/C	Health Clinic	KALTUNGO	0	1	0	0	1	1	0	0	-1	0	-1	1	1	0	1	0	0	4

S/N	Facility Name	Facility Type	LGA	No. of Doctors Gap	No. of Nurses/Midwives Gap	No. of CHOs Gap	No. of CHEWs Gap	No. of JCHEWs Gap	No. of EHOs Gap	No. of Pharmacy Technicians Gap	No. of Medical Records Technicians Gap	No. of Medical Lab Technicians Gap	No. of Dental Technicians Gap	No. of Health Attendants Gap	No. of Security Gap	No. of Cleaners Gap	No. of Data Clerks Gap	No. of Community Health Promoters Gap	No. of Nutrition officers Gap	Attrition Allocation	Adjusted Total Gap
387	TURE OKRA H/C	Health Clinic	KALTUNGO	0	1	-1	2	1	1	0	0	0	0	0	1	1	0	1	0	0	7
388	BEDBERE H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
389	TURE BALAM PHCC	PHCC	KALTUNGO	1	4	0	0	2	1	1	1	2	1	1	2	2	1	2	1	1	23
390	GUJUBA PHCC	PHCC	KALTUNGO	1	4	0	3	2	1	1	1	1	1	2	2	2	1	2	1	1	26
391	PATUWANA H/C	Health Clinic	KALTUNGO	0	1	0	1	0	1	0	0	-1	0	0	1	1	0	1	0	0	5
392	BIRWAI H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
393	SHENGE-SHENGE H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
394	JALINGO KAMO H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
395	DABEWA H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
396	ZANGE H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
397	LATARIN H/C	Health Clinic	KALTUNGO	0	1	0	1	0	1	0	0	0	0	1	1	1	0	1	0	0	7
398	WANGE PHCC	PHCC	KALTUNGO	1	4	0	1	0	1	1	1	2	1	-1	2	2	1	2	1	1	20
399	KUNINI H/C	Health Clinic	KALTUNGO	0	1	0	2	1	-1	0	0	0	0	1	1	1	0	1	0	0	7
400	BWELE H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	0	1	1	0	1	0	0	8
401	YORIYO H/C	Health Clinic	KALTUNGO	0	1	0	2	1	1	0	0	0	0	1	1	1	0	1	0	0	9
402	BAMBAM YIRI H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	-1	0	7
403	YIRI PHCC	PHCC	KALTUNGO	1	4	1	3	2	-1	1	1	1	1	0	2	2	1	2	1	1	23
404	KWEN H/C	Health Clinic	KALTUNGO	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
405	Abuja Primary Health Center	PHCC	KWAMI	1	4	0	2	1	-2	1	1	1	1	0	1	2	1	2	1	1	18
406	Ahluget HP	Health Post	KWAMI	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
407	Algon Daban fulani Health Clinic	Health Clinic	KWAMI	0	1	0	1	0	-2	0	0	0	0	-1	1	1	0	1	0	0	2
408	Bele HP	Health Post	KWAMI	0	0	1	0	0	0	0	0	0	0	1	1	1	0	0	0	0	4
409	Bojude Health Clinic	Health Clinic	KWAMI	0	1	0	-1	-2	-2	0	0	0	0	-5	1	1	0	1	0	0	-6
410	Bomala HP	Health Post	KWAMI	0	0	0	1	1	-2	0	0	0	0	-5	1	1	0	0	0	0	-3
411	D/Fulani Primary Health Center	PHCC	KWAMI	1	4	0	0	2	-4	1	1	2	1	2	2	2	1	1	0	1	17
412	Damba Barde health Clinic	Health Clinic	KWAMI	0	1	0	1	1	1	0	0	0	0	-3	1	1	0	1	0	0	4
413	Daniya Health Clinic	Health Clinic	KWAMI	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	1	0	0	6
414	Dawo HP	Health Post	KWAMI	0	0	0	1	1	-1	0	0	0	0	0	1	1	0	0	0	0	3
415	Dinawa HP	Health Post	KWAMI	0	0	0	1	1	-3	0	0	0	0	1	1	1	0	0	0	0	2
416	Dirri primary Health Centre	PHCC	KWAMI	1	4	0	3	0	-2	1	1	1	1	-1	2	2	1	2	1	1	18
417	Doho Primary Health Center	PHCC	KWAMI	1	4	0	-1	-1	-8	1	0	2	1	-6	0	1	1	1	0	0	-4
418	Dokari HP	Health Post	KWAMI	0	0	0	1	1	-2	0	0	0	0	1	1	1	0	0	0	0	3
419	Dukkul Primary Health Center	PHCC	KWAMI	1	4	0	2	1	-5	1	1	2	1	-1	0	2	1	2	1	1	14
420	Gabukka Health Clinic	Health Clinic	KWAMI	0	1	0	1	1	1	0	0	0	0	1	1	1	0	1	0	0	8
421	Gadara Primary Health Care	PHCC	KWAMI	1	3	0	1	0	-4	1	0	1	0	-6	1	0	1	2	1	0	2
422	Gafara Galadima HP	Health Post	KWAMI	0	0	0	1	1	-2	0	0	0	0	1	1	1	0	0	0	0	3
423	Ganjuwa Health Clinic	Health Clinic	KWAMI	0	1	0	2	1	-1	0	0	0	0	1	1	1	0	1	0	0	7
424	Garin Abbasu Health Clinic	Health Clinic	KWAMI	0	1	0	1	0	-2	0	0	0	0	-1	1	1	0	1	0	0	2
425	Garin Wakili Health Clinic	Health Clinic	KWAMI	0	1	0	2	1	0	0	0	0	0	1	1	1	0	1	0	0	8
426	Gerkwami Health Clinic	Health Clinic	KWAMI	0	1	0	-1	0	-2	0	0	0	0	-2	1	1	0	1	0	0	-1
427	Gwaram HP	Health Post	KWAMI	0	0	0	1	1	-2	0	0	0	0	1	1	1	0	0	0	0	3
428	Jamji Health Clinic	Health Clinic	KWAMI	0	1	0	2	1	0	0	0	0	0	-1	1	1	0	1	0	0	6
429	Jauro Gabdo HP	Health Post	KWAMI	0	0	0	1	0	-1	0	0	0	0	1	1	1	0	0	0	0	3
430	Jauro Isa HP	Health Post	KWAMI	0	0	0	1	1	-2	0	0	0	0	1	1	1	0	0	0	0	3
431	Jauro Malam Health Clinic	Health Clinic	KWAMI	0	1	0	1	1	0	0	0	0	0	1	1	1	0	1	0	0	7
432	Jauro Yaro Health Clinic	Health Clinic	KWAMI	0	1	0	1	-1	1	0	0	0	0	0	1	1	0	1	0	0	5
433	Jorre HP	Health Post	KWAMI	0	0	0	1	1	-2	0	0	0	0	-1	1	1	0	0	0	0	3
434	Jurara Primary Health Center	PHCC	KWAMI	1	4	0	2	1	-4	1	1	2	1	-3	2	2	1	2	1	1	15

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435	Kalajanga Health Clinic	Health Clinic	KWAMI	0	1	0	2	1	0	0	0	0	0	1	1	1	0	1	0	0	8
436	Kiyari Health Clinic	Health Clinic	KWAMI	0	1	0	1	1	-1	0	0	0	0	0	1	1	0	1	0	0	5
437	Komfulata HP	Health Post	KWAMI	0	0	0	1	1	-3	0	0	0	0	-5	1	1	0	0	0	0	-4
438	Kufayi Health Clinic	Health Clinic	KWAMI	0	1	-1	-1	0	-7	0	0	0	0	-2	1	1	0	1	0	0	-7
439	Kulum Health Clinic	Health Clinic	KWAMI	0	1	0	2	1	-1	0	0	0	0	1	1	1	0	1	0	0	7
440	Kurugu HP	Health Post	KWAMI	0	0	0	1	1	-2	0	0	0	0	-1	1	1	0	0	-1	0	0
441	Kwami Model Primary Health Centre	PHCC	KWAMI	1	4	0	0	0	-7	1	1	1	1	-3	-1	-1	1	1	-1	0	-2
442	Laro HP	Health Post	KWAMI	0	0	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	5
443	Madu Kellumi Health Clinic	Health Clinic	KWAMI	0	1	0	1	0	-3	0	0	0	0	0	1	1	0	1	0	0	2
444	Demi shuwa Health Clinic	Health Clinic	KWAMI	0	1	0	2	1	-1	0	0	0	0	1	1	1	0	1	0	0	7
445	Mallam/Sidi Primary Health Center	PHCC	KWAMI	1	4	-1	0	0	-4	1	1	1	0	-4	1	1	1	1	1	0	4
446	Malleri Primary Health Center	PHCC	KWAMI	1	4	1	2	1	-1	1	1	2	1	-1	2	2	1	2	1	1	21
447	Mettako HP	Health Post	KWAMI	0	0	0	1	1	0	-1	0	0	0	1	1	1	0	0	0	0	4
448	Shongo Health Clinic	Health Clinic	KWAMI	0	1	0	-2	1	-4	0	0	0	0	-7	1	1	0	1	0	0	-8
449	Shugu Health Clinic	Health Clinic	KWAMI	0	1	0	2	0	-1	0	0	0	0	0	1	1	0	1	0	0	5
450	Tappi PHC	PHC	KWAMI	0	2	1	0	1	0	1	1	1	0	1	1	1	1	2	1	1	15
451	Tinda HP	Health Post	KWAMI	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
452	Titi HP	Health Post	KWAMI	0	0	0	1	0	-3	0	0	0	0	-1	1	1	0	0	-1	0	-2
453	Titi Malari Health Clinic	Health Clinic	KWAMI	0	1	0	2	0	-1	0	0	0	0	0	1	1	0	1	0	0	5
454	Tumbushi HP	Health Post	KWAMI	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
455	Wudil Health Clinic	Health Clinic	KWAMI	0	0	0	2	1	-1	0	0	0	0	0	1	1	0	1	0	0	6
456	Wuro Dole Health Clinic	Health Clinic	KWAMI	0	1	0	1	1	-1	0	0	0	0	-1	1	1	0	1	0	0	4
457	Wuro Lule HP	Health Post	KWAMI	0	0	0	1	1	-2	0	0	0	0	1	1	1	0	0	0	0	3
458	Yame HP	Health Post	KWAMI	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
459	BARWO NASARAWO PHCC	PHCC	NAFADA	1	4	0	3	2	1	1	1	2	1	0	2	2	1	2	1	1	25
460	BARWO SABON GARI PHC	PHC	NAFADA	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
461	WAKKALTU PHC	PHC	NAFADA	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
462	Barwo winde PHCC	PHCC	NAFADA	1	4	1	3	0	0	1	1	2	1	0	1	2	1	2	1	1	22
463	Daba phc	PHC	NAFADA	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
464	GANIYANA PHC	PHC	NAFADA	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
465	BIRIN BOLEWA PHCC	PHCC	NAFADA	1	4	1	1	2	0	1	1	2	1	0	2	2	1	2	0	1	22
466	BURARI PHC	PHC	NAFADA	0	2	1	3	1	0	1	1	1	0	2	1	1	1	2	1	1	19
467	MAIDUKURI PHC	PHC	NAFADA	0	2	1	3	1	0	1	1	1	0	2	1	1	1	2	1	1	19
468	MUNDA PHC	PHC	NAFADA	0	2	1	3	2	0	1	1	0	0	2	1	1	1	2	1	1	19
469	TASHAN KARGO PHC	PHC	NAFADA	0	2	1	3	2	-1	1	1	1	0	1	1	1	1	2	1	1	18
470	BIRIN FULANI PHC	PHC	NAFADA	0	2	1	3	2	0	1	1	1	0	1	1	1	1	2	1	1	19
471	GADI PHC	PHC	NAFADA	0	2	1	3	1	1	1	1	1	0	2	1	1	1	2	1	1	20
472	GURAJAWA PHC	PHC	NAFADA	0	2	1	2	2	0	1	1	1	0	2	1	1	1	2	1	1	19
473	SORODO PHCC	PHCC	NAFADA	1	4	1	3	1	0	1	1	2	1	2	2	2	1	2	1	1	26
474	BIRIN FULANI PHCC	PHCC	NAFADA	1	4	1	1	2	1	1	1	2	1	-2	2	2	1	2	1	1	22
475	SHAGANAWA PHC	PHC	NAFADA	0	2	1	3	0	1	1	1	1	0	2	1	1	1	2	1	1	19
476	WURO BUNDU PHC	PHC	NAFADA	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
477	MADAKI LAMU PHC	PHC	NAFADA	0	2	1	3	1	1	1	1	1	0	2	1	1	1	2	1	1	20
478	GUDURKKU PHCC	PHCC	NAFADA	1	4	1	3	2	0	1	1	2	1	2	2	2	1	2	1	1	27
479	TASHA PHC	PHC	NAFADA	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
480	Dendele PHC	PHC	NAFADA	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
481	Jigawa PHCC	PHCC	NAFADA	1	4	1	2	2	0	1	1	2	1	0	2	2	1	2	1	1	24
482	Jolle PHC	PHC	NAFADA	0	2	1	2	2	1	1	1	1	0	2	1	1	1	2	1	1	20
483	Kiyayo PHC	PHC	NAFADA	0	2	1	3	2	1	1	1	1	0	2	1	1	1	2	1	1	21
484	Suko PHC	PHC	NAFADA	0	2	1	3	2	1	1	1	1	0	1	1	1	1	2	1	1	20
485	NJALKAM PHC	PHC	NAFADA	0	2	1	3	2	1	1	1	1	0	0	1	1	1	2	1	1	19
486	WURE PHCC	PHCC	NAFADA	1	4	1	3	2	1	1	1	2	1	1	2	2	1	2	1	1	27
487	NAFADA PHCC	PHCC	NAFADA	1	4	1	2	1	-1	0	1	1	1	-9	2	1	1	2	0	0	8
488	SHOLE PHC	PHC	NAFADA	0	2	1	3	2	0	1	1	1	0	1	0	1	1	2	1	1	18

S/N	Facility Name	Facility Type	LGA	No. of Doctors Gap	No. of Nurses/Midwives Gap	No. of CHOs Gap	No. of CHEWs Gap	No. of JCHEWs Gap	No. of EHOs Gap	No. of Pharmacy Technicians Gap	No. of Medical Records Technicians Gap	No. of Medical Lab Technicians Gap	No. of Dental Technicians Gap	No. of Health Attendants Gap	No. of Security Gap	No. of Cleaners Gap	No. of Data Clerks Gap	No. of Community Health Promoters Gap	No. of Nutrition officers Gap	Attrition Allocation	Adjusted Total Gap
489	MADA PHCC	PHCC	NAFADA	1	4	1	3	1	1	1	1	2	1	0	2	2	1	2	1	1	25
490	KADUBU PHC	PHC	NAFADA	0	2	1	3	1	1	1	1	1	0	-3	1	0	1	2	1	1	14
491	BANGUNJI PHCC	PHCC	SHONGOM	1	3	1	1	0	0	1	0	2	1	0	2	2	1	2	1	1	19
492	KALOH PHC	PHC	SHONGOM	0	2	1	0	1	0	1	1	1	0	-1	1	1	1	2	1	0	12
493	GALDIMARU PHC	PHC	SHONGOM	0	2	1	2	2	1	1	1	1	0	1	1	1	1	2	1	1	19
494	BANGUK HP	Health Post	SHONGOM	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
495	BOH PHCC	PHCC	SHONGOM	1	4	1	-7	1	-1	1	0	-2	1	-7	2	2	1	1	1	0	-1
496	KAREL PHC	PHC	SHONGOM	0	2	1	-4	-3	-1	1	1	1	0	-5	1	1	1	2	1	0	-1
497	POKATA PHC	PHC	SHONGOM	0	2	1	-1	2	-2	1	-1	-1	0	-1	1	1	1	2	1	0	10
498	LABEKE HP	Health Post	SHONGOM	0	0	0	0	1	-1	0	0	0	0	0	1	1	0	0	0	0	2
499	LAWISHI HP	Health Post	SHONGOM	0	0	0	0	0	-2	0	0	0	0	0	1	1	0	0	0	0	0
500	ALGON CLINIC	PHC	SHONGOM	0	2	0	2	1	-1	1	1	1	0	1	1	1	1	2	1	1	15
501	BURAK PHCC	PHC	SHONGOM	0	2	1	1	2	-4	1	1	1	0	-1	1	1	1	2	1	0	10
502	NYALIMI PHC	PHC	SHONGOM	0	2	1	3	2	0	1	1	1	0	1	1	1	1	2	1	1	19
503	LASSANJANG DUNA HP	Health Post	SHONGOM	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
504	KWANAN KUKA HP	Health Post	SHONGOM	0	0	0	1	1	-2	0	0	0	0	1	1	1	0	0	0	0	3
505	PERO PHCC	PHCC	SHONGOM	1	4	-1	-1	1	-3	1	0	2	1	-8	2	2	1	2	1	0	5
506	FARIN KASA PHC	PHC	SHONGOM	0	2	1	2	2	0	1	1	1	0	0	1	1	1	2	1	1	17
507	JAURO SAJO PHC	PHC	SHONGOM	0	2	1	-2	2	0	1	1	-1	0	0	1	1	1	2	1	0	12
508	GWALE HP	Health Post	SHONGOM	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
509	YAPILO PHC	PHC	SHONGOM	0	2	1	0	2	1	1	1	1	0	2	1	1	1	2	1	1	18
510	GUNDALE PHCC	PHCC	SHONGOM	1	4	1	1	-1	1	1	1	2	1	-1	2	2	1	2	1	1	20
511	DAJA PHC	PHC	SHONGOM	0	2	1	1	2	1	1	1	1	0	-2	1	1	1	2	1	1	15
512	FUGULA PHC	PHC	SHONGOM	0	2	1	2	2	0	1	1	1	0	0	1	1	1	2	1	1	17
513	GWANDUM PHCC	PHCC	SHONGOM	1	4	0	-1	0	0	0	0	-1	1	-4	2	2	1	2	0	0	7
514	DAMJIGRI HP	Health Post	SHONGOM	0	0	0	0	1	0	0	0	0	0	1	1	1	0	0	0	0	4
515	TORO PHC	PHC	SHONGOM	0	2	1	3	2	0	1	0	1	0	0	1	1	1	2	1	1	17
516	KEFFI PHC	PHC	SHONGOM	0	2	1	1	0	1	1	1	1	0	0	1	1	1	2	1	1	15
517	PAMADU PHC	PHC	SHONGOM	0	2	1	1	2	1	1	1	-1	0	2	1	1	1	2	1	1	19
518	POPANDI PHC	PHC	SHONGOM	0	2	1	3	2	0	1	1	1	0	2	1	1	1	2	1	1	20
519	GUJUBA HP	Health Post	SHONGOM	0	0	0	0	1	-2	0	0	0	0	1	1	1	0	0	0	0	2
520	MAJIDADI PHC	PHC	SHONGOM	0	2	1	3	2	0	1	1	1	0	0	1	1	1	2	1	1	18
521	KATAGUM HP	Health Post	SHONGOM	0	0	0	1	1	-1	0	0	0	0	1	1	1	0	0	0	0	4
522	KULISHIN PHCC	PHCC	SHONGOM	1	4	-1	-9	1	-4	1	0	-2	1	-6	2	2	1	2	1	0	-6
523	LASHIKOLTOK PHC	PHC	SHONGOM	0	2	0	-7	-3	-1	1	1	1	0	-5	1	1	1	2	1	0	-5
524	KALISEN HP	Health Post	SHONGOM	0	0	0	0	-1	-3	0	0	0	0	-3	1	1	0	0	0	0	-5
525	KUSHI KAURI PHCC	PHCC	SHONGOM	1	4	0	4	1	-1	1	0	2	1	-2	2	2	1	2	1	1	20
526	KUSHI GOMLE PHC	PHC	SHONGOM	0	2	1	0	2	-1	1	1	1	0	-5	1	1	1	2	1	0	8
527	LAPANDINTAI PHC	PHC	SHONGOM	0	2	1	2	2	-1	1	1	1	0	2	1	1	1	2	1	1	18
528	LALAIPIDO PHCC	PHCC	SHONGOM	1	4	0	-5	1	0	1	0	1	1	-5	2	2	1	2	1	0	7
529	LAKENTURUM PHC	PHC	SHONGOM	0	2	1	1	2	-1	1	1	1	0	2	1	1	1	2	1	1	17
530	LATATAR PHC	PHC	SHONGOM	0	2	1	-1	1	0	1	1	1	0	0	1	1	1	2	1	0	12
531	LASADAR PHC	PHC	SHONGOM	0	2	0	3	2	0	1	1	1	0	0	1	1	1	2	1	1	17
532	TEDMUKZU PHC	PHC	SHONGOM	0	2	1	3	0	1	1	1	1	0	1	1	1	1	2	1	1	18
533	AMKOLOM HP	Health Post	SHONGOM	0	0	0	1	1	-1	0	-1	0	0	0	1	1	0	0	0	0	2
534	LAPAN PHCC	PHCC	SHONGOM	1	4	-1	-11	1	0	1	0	-2	1	-5	2	2	1	2	1	0	-3
535	LABARYA PHC	PHC	SHONGOM	0	2	1	0	1	1	1	1	1	0	0	1	1	1	2	1	1	15
536	LASANJANG PHC	PHC	SHONGOM	0	2	1	1	2	-1	1	1	1	0	2	1	1	1	2	1	1	17
537	LASSASAP PHC	PHC	SHONGOM	0	2	1	2	2	0	1	1	1	0	2	1	1	1	2	1	1	19
538	LABAYO HP	Health Post	SHONGOM	0	0	0	1	1	-1	0	0	0	0	0	1	1	0	0	0	0	3
539	KALAKU PHC	PHC	SHONGOM	0	2	-2	-3	0	-2	1	1	-1	0	-2	1	1	1	2	1	0	0
540	LAYASAKALAK HP	Health Post	SHONGOM	0	0	0	1	0	0	0	0	0	0	1	1	1	0	0	0	0	4
541	FADA H/C	Health Clinic	SHONGOM	0	1	-1	1	1	0	0	-1	0	0	-2	1	1	0	1	0	0	2
542	MADAKI PHC	PHC	SHONGOM	0	2	1	3	2	1	1	1	1	0	1	1	1	1	2	1	1	20
543	FILIYA PHCC	PHCC	SHONGOM	1	4	1	4	2	1	1	1	2	1	2	2	2	1	2	1	1	29
544	DEBA PHCC	PHCC	Y/DEBA	1	4	1	-3	1	-10	1	0	1	1	-5	2	2	1	2	1	0	0
545	SARUJE HP	Health Post	Y/DEBA	0	0	0	-2	1	-1	0	0	0	0	0	1	0	0	0	0	0	-1
546	GWANI EAST HP	Health Post	Y/DEBA	0	0	0	1	1	-1	0	0	0	0	1	1	0	0	0	0	0	3

S/N	Facility Name	Facility Type	LGA	No. of Doctors Gap	No. of Nurses/Midwives Gap	No. of CHOs Gap	No. of CHEWs Gap	No. of JCHEWs Gap	No. of EHOs Gap	No. of Pharmacy Technicians Gap	No. of Medical Records Technicians Gap	No. of Medical Lab Technicians Gap	No. of Dental Technicians Gap	No. of Health Attendants Gap	No. of Security Gap	No. of Cleaners Gap	No. of Data Clerks Gap	No. of Community Health Promoters Gap	No. of Nutrition officers Gap	Attrition Allocation	Adjusted Total Gap
547	GWANI WEAST HP	Health Post	Y/DEBA	0	0	0	-1	1	0	0	0	0	0	-1	1	1	0	0	0	0	1
548	KALO HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	1	1	0	0	0	0	0	3
549	SHINGA PHCC	PHCC	Y/DEBA	1	2	0	3	1	0	1	1	2	1	2	2	2	1	2	1	1	23
550	WADE HP	Health Post	Y/DEBA	0	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	4
551	WADE HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	2	1	-1	0	0	0	0	0	1	1	0	1	0	0	6
552	DADIN KOWA HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	0	1	-2	0	0	0	0	0	1	1	0	1	0	0	3
553	DADIN KOWA MODEL PHCC	PHCC	Y/DEBA	1	4	0	2	1	1	1	1	0	1	1	2	2	1	2	1	1	22
554	GARIN ABDULLAHI HP	Health Post	Y/DEBA	0	0	0	-1	1	0	0	0	0	0	0	1	1	0	0	0	0	2
555	GARIN BUKAR HP	Health Post	Y/DEBA	0	0	0	1	1	-2	0	0	0	0	1	1	1	0	0	0	0	3
556	HINA HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	1	0	-1	0	0	0	0	1	1	1	0	1	0	0	5
557	JANGARGARE HP	Health Post	Y/DEBA	0	0	0	1	0	-1	0	0	0	0	0	1	0	0	0	0	0	1
558	TSANDO HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	0	3
559	DASA HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	2	1	0	0	0	0	0	-1	1	1	0	1	0	0	6
560	JAGALI HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	2	0	1	0	0	0	0	-1	1	1	0	1	0	0	6
561	JAURO GOTEH H CLINIC	Health Clinic	Y/DEBA	0	1	0	1	1	0	0	0	0	0	-1	1	1	0	1	0	0	5
562	JAURO MUSA KADI	Health Post	Y/DEBA	0	0	0	1	1	-1	0	0	0	0	-1	1	1	0	0	0	0	2
563	MAIKAHO PHCC	PHCC	Y/DEBA	1	4	1	3	2	0	1	1	2	1	0	2	2	1	2	1	1	25
564	TSANDON DAN DELA HP	Health Post	Y/DEBA	0	0	0	0	1	-1	0	0	0	0	1	1	1	0	0	0	0	3
565	JIGAWAN IRO HP	Health Post	Y/DEBA	0	0	0	1	1	0	0	0	0	0	-1	1	0	0	0	0	0	2
566	KURJALE PHCC	PHCC	Y/DEBA	1	4	0	2	2	-1	1	1	2	1	1	2	2	1	2	1	1	23
567	PATA HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	1	-1	1	0	0	0	0	0	1	0	0	1	0	0	4
568	DANGAR PHCC	PHCC	Y/DEBA	1	4	0	2	1	-1	1	1	2	1	-1	1	2	1	2	1	1	19
569	JANNAWO HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	1	1	-1	0	0	0	0	0	1	1	0	1	0	0	5
570	KACHALLARI HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	-1	-1	1	0	0	0	0	0	-2	1	1	0	1	0	0	1
571	KANAWA HP	Health Post	Y/DEBA	0	0	0	0	1	-2	0	0	0	0	1	1	1	0	0	0	0	2
572	WAJARI HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
573	ZAMFARAWA HP	Health Post	Y/DEBA	0	0	0	0	1	-2	0	0	0	0	1	1	1	0	0	0	0	2
574	HAMMATATU HP	Health Post	Y/DEBA	0	0	0	1	1	-2	0	0	0	0	-1	1	1	0	0	0	0	1
575	JAURO SAMBO HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
576	KURBA HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	0	-2	-5	0	0	0	0	-1	0	1	0	1	0	0	-5
577	KWADON PHCC	PHCC	Y/DEBA	1	4	0	-4	1	-7	1	1	1	1	-2	2	2	1	2	0	0	4
578	LIJI HEALTH CLINIC	Health Clinic	Y/DEBA	0	0	0	-6	-2	-6	0	0	0	0	-2	1	1	0	1	-2	0	-15
579	DUMBU HP	Health Post	Y/DEBA	0	0	0	1	-1	0	0	0	0	0	0	1	0	0	0	0	0	1
580	JIGAWAN MAGAJI HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
581	KURI HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	0	1	-2	0	-1	0	0	-1	0	0	0	1	0	0	-1
582	LAMBAN HEALTH	Health Clinic	Y/DEBA	0	1	0	1	1	1	0	0	0	0	0	1	1	0	1	0	0	7
583	LANO PHCC	PHCC	Y/DEBA	1	4	0	3	1	-1	1	1	0	1	1	2	2	1	2	1	1	21
584	NASARAWA HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
585	NASARAWA DAN KUDE HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	1	1	0	0	0	0	0	3
586	SHEMEL DAURA HP	Health Post	Y/DEBA	0	0	0	1	1	0	0	0	0	0	0	1	1	0	0	0	0	4
587	DIFA HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	0	1	0	0	0	0	0	-1	1	0	0	1	0	0	3
588	GARIN MALAN BABA HP	Health Post	Y/DEBA	0	0	0	1	1	-1	0	0	0	0	0	1	1	0	0	-1	0	2
589	KINAFI HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	2	1	0	0	0	0	0	1	1	1	0	1	0	0	8
590	LUBO PHCC	PHCC	Y/DEBA	1	4	1	1	1	-1	1	1	2	1	0	2	2	1	2	1	1	21
591	BOLTUNGO HP	Health Post	Y/DEBA	0	0	0	1	0	0	0	0	0	0	0	1	1	0	0	0	0	3
592	GARINBARAYA HP	Health Post	Y/DEBA	0	0	-1	-2	0	0	0	0	0	0	-1	1	1	0	0	0	0	-2
593	KUNUWAL HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	-3	1	-1	0	-1	0	0	0	-1	1	0	1	0	0	-2
594	NONO M ISA H/ CLINIC	Health Clinic	Y/DEBA	0	1	0	1	0	0	0	0	0	0	1	1	0	0	1	0	0	5
595	NONO PHCC	PHCC	Y/DEBA	1	3	0	4	2	-1	1	1	2	1	2	1	2	1	2	1	1	24
596	KWALI HEALTH CLINIC	Health Clinic	Y/DEBA	0	1	0	1	0	1	0	0	0	0	0	1	1	0	1	0	0	6
597	SABON GARI HP	Health Post	Y/DEBA	0	0	0	0	1	0	0	0	0	0	-1	1	1	0	0	0	0	2

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598	ZAMBUK PHCC	PHCC	Y/DEBA	1	4	-1	1	1	-1	1	1	2	1	-3	2	2	1	2	1	1	16
TOTAL				114	983	216	716	586	-276	325	263	356	89	-50	646	651	334	759	290	254	6256