



KANO STATE GOVERNMENT
KANO STATE GOVERNMENT, PRIMARY HEALTH CARE HUMAN RESOURCES
MAPPING AND RECRUITMENT PLAN

2025-2028





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FOREWORD

A strong and well-distributed healthcare workforce is the foundation of an effective health system. In Kano State, ensuring the availability of skilled health professionals is essential for delivering quality care and improving overall community well-being. However, evolving health challenges, shifting disease patterns, and a growing population necessitate a strategic approach to health workforce planning, deployment, and recruitment.

As Kano State and its Local Government Areas (LGAs) work to strengthen healthcare services, understanding the availability, skill sets, and distribution of health workers is crucial. Workforce mapping goes beyond simply identifying the number of healthcare personnel; it involves aligning their skills and placement with the actual needs of communities, particularly in underserved areas.

Recruiting and retaining qualified health professionals is equally vital. This requires attracting, training, and supporting a workforce that can operate effectively, even in resource-constrained settings. This document provides a comprehensive framework for HRH mapping and recruitment in Kano State, offering insights and strategic guidance for healthcare planners, policymakers, and administrators.

By adopting an integrated and data-driven approach to workforce management, Kano State aims to strengthen its healthcare system, improve service delivery, and ensure equitable access to quality care across all communities. Healthcare should not be a privilege—it is a fundamental right for all residents of Kano State.



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1. Introduction

Healthcare is the cornerstone of societal well-being, and at its foundation lies primary healthcare—a fundamental right that ensures equitable access to essential health services. Recognizing the pivotal role of a well-trained and sufficient workforce in delivering quality healthcare, this Primary Healthcare Manpower Plan has been developed as an integral part of the ongoing reforms within the primary healthcare sub-sector in Kano State. The plan reflects the state's unwavering commitment to strengthening its healthcare workforce, addressing critical gaps, and achieving the overarching goals of accessibility, quality, and inclusiveness in primary healthcare delivery.

The current reform initiative is driven by the pressing need to address workforce shortages and inefficiencies that have long hindered optimal service delivery within the sub-sector. These reforms emphasize data-driven strategies, innovative approaches, and sustainable solutions aimed at enhancing the capacity, motivation, and performance of frontline health workers, administrators, and other essential healthcare personnel. By systematically planning and managing human resources in primary healthcare, this document seeks to empower the sector to meet both current and future healthcare demands effectively.

This manpower plan serves as a blueprint for action, aligning with broader state and national health policies. It outlines a structured roadmap for recruiting, deploying, and retaining qualified healthcare personnel who will drive the delivery of essential services across all primary healthcare centers (PHCs) in Kano State. The plan also ensures the equitable distribution of resources and personnel, particularly in underserved and hard-to-reach areas, thereby fostering inclusive growth. By systematically addressing manpower planning within the primary healthcare sub-sector, this document lays a strong foundation for achieving Kano State's vision of a robust, inclusive, and high-performing healthcare system.

2. Current Staffing Cadre and Numbers

This section presents findings from a detailed assessment of the current workforce requirements and the gap identified in the sector when a comprehensive manpower assessment was done as indicated in figure I below and the staff mapping by Local Government Areas is indicated in Annex I.

Figure I: Current Staffing Gaps

S\N	CADRE	REQUIRED	AVAILABLE	GAP
1	CHOs	492	334	158
2	Nurses/midwives	3082	467	2615
3	CHEWs	2813	2411	402
4	JCHEWs	5293	572	4721
5	Pharmacy Tech.	497	203	294
6	Health Information Manager	994	408	586
7	Medical Lab Tech	497	548	-51
8	Environmental Health officer	497	2671	-2174
9	General Maintenance officer	497	0	497
10	Security Personnel	1836	0	1836

11	Health Attendant	1866	1389	477
TOTAL		18,364	9003	9361

3. Planned Recruitment

This manpower planning exercise was carryout in March 2025 to identify staffing and recruitment needs for 2025 and beyond (2026, 2027, and 2028). Several key factors were considered in assessing the needs beyond 2025 which includes:

- **Annual increase in patient numbers** (resulting from population growth, increased healthcare-seeking behavior and improved access to services). The annual increase in patients' numbers has been constantly high.
- **Workforce attrition rate**, which accounts for retirements, resignations, and other exits from the primary healthcare workforce.
- **Redeployment considerations**: If certain facilities have an excess number of staff, some personnel may be reassigned to other PHCs within the same Local Government Area (LGA) where there are shortages.
- **Optimal patient-to-health worker ratio**: It is assumed that the desired patient-to-health worker ratio will remain the same over the period,

4. Recruitment Costings

Based on the planned recruitments for 2025-2028, a forecast of the marginal costs is presented in Figure II below.

The **costing assumptions** are as follows:

- The cost of employment (annual salary, allowances, and social contributions) for a primary healthcare worker in 2025 is NGN 1,030,575,606.00.
- The **cost of recruiting a new healthcare worker** will be on average **NGN 852,000 per worker**, subject to the same annual percentage increase through 2028.
- **New recruits** are expected to start in **April 2025**

Based on these assumptions, the projected recruitment cost for 2025-2028 is presented in Figure II.

To bridge the above identified human resources for health gap, the state Ministry of health through Primary Healthcare Management Board in collaboration with Ministry for Local Government projected to recruit above specific healthcare cadre in the next four years, 2025-2028, in view of this commitment His Excellency the Executive Governor of Kano state has approved in 2025 appropriation bill to recruit 1,500, healthcare staff of the different cadres.

Figure II: 2025-2028 PHC Workers Recruitment Plan

Number of staff	Year	Proposed cost(NGN)
1500	2025	1,030,575,606.00
2000	2026	*TBD
2500	2027	*TBD
3000	2028	*TBD

*TBD To be Determined when preparing budget for that year base on inflation rate.

Conclusion

A well-trained and equitably distributed healthcare workforce is essential for strengthening Kano State’s primary healthcare system and ensuring access to quality healthcare services. This Primary Healthcare Manpower Plan provides a strategic roadmap for addressing workforce shortages, optimizing resource allocation, and enhancing service delivery across all Local Government Areas. By adopting a data-driven approach to workforce planning, recruitment, and deployment, Kano State is taking proactive steps to bridge the human resource gaps identified in this assessment. The government’s commitment to hiring 1,500 healthcare workers in 2025, with plans for continued recruitment through 2028, demonstrates a strong political will to invest in the health sector. Through this strategic manpower plan, Kano State is laying a solid foundation for a resilient, inclusive, and sustainable healthcare system—one that guarantees equitable access to essential healthcare services, particularly for underserved populations. Moving forward, consistent implementation, periodic workforce assessments, and adaptive policy measures will be key to achieving lasting improvements in primary helthcare delivery across the state.

Annex I –Kano PHC Staff Mapping by Local Government Areas

LGA	NUMBER OF HEALTH FACILITIES	NUMBER OF STAFF
Ajingi	30	137
Albasu	32	164
Bagwai	30	154
Bebeji	25	156
Bichi	54	134
Bunkure	28	144
Dala	22	317
Dambatta	42	196
Dawakin Kudu	23	347
Dawakin Tofa	46	255
Doguwa	27	157
Fagge	15	308
Gabasawa	31	190
Garko	18	115
Garun Malam	26	140
Gaya	30	202
Gezawa	28	284
Gwale	26	609
Gwarzo	26	207
Kabo	31	218
Kano Municipal	18	555
Karaye	23	156
Kibiya	23	131
Kiru	34	195
Kumbotso	27	465
Kunchi	33	151

Kura	27	237
Madobi	24	173
Makoda	32	181
Minjibir	27	226
Nasarawa	23	463
Rano	19	166
Rimin Gado	22	165
Rogo	25	201
Shanono	24	126
Sumaila	43	182
Takai	34	202
Tarauni	18	476
Tofa	22	254
Tsanyawa	29	142
Tudun Wada	28	171
Ungogo	39	389
Warawa	21	201
Wudil	21	219
State ,Zone & LGA HQ		817
TOTAL	1226	11078