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NATIONAL AGENCY FOR FOOD AND DRUG ADMINISTRATION AND CONTROL (NAFDAC)

STRATEGIC PLAN

(2018 – 2023)

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LIST OF ABBREVIATIONS

A&HRM	-	Administration and Human Resources Management
APIs	-	Active Pharmaceutical Ingredients
CBN	-	Central Bank of Nigeria
CEO	-	Chief Executive Officer
CER	-	Chemical Evaluation & Research
CRIA	-	Clean Report of Inspection Analysis
CTD	-	Common Technical Documents
DER	-	Drug Evaluation and Research
DG	-	Director General
DHIS	-	District Health Information System
F&A	-	Finance and Accounts
FDA	-	Food and Drug Administration (United States)
FMoH	-	Federal Ministry of Health
FSAN	-	Food Safety and Applied Nutrition
FPPs	-	Finished Pharmaceutical Products
cGMP	-	Current Good Manufacturing Practices
HRM	-	Human Resource Management
HRMIS	-	Human Resources Management Integrated System
IA	-	Institutional Assessment/Analysis
ICT	-	Information Communication Technology
I&E	-	Investigation and Enforcement
ICH	-	International Conference on Harmonization
INGO	-	International Non-Governmental Organization
ISO	-	International Organization for Standardization
INCB	-	International Narcotics Control Board
LIMS	-	Laboratory Information Management System
LS	-	Laboratory Services
MAS	-	Mobile Authentication Service
MDGs	-	Millennium Development Goals
MDAs	-	Ministries, Departments and Agencies
M&E	-	Monitoring and Evaluation
MRA	-	Medicines Regulatory Agencies
MoU	-	Memorandum of Understanding
MSMEs	-	Micro, Small & Medium Enterprises
NAFDAC	-	National Agency for Food and Drug Administration and Control
NAPAMS	-	NAFDAC Automated Product Administration & Monitoring System
NCS	-	Nigerian Customs Service/Narcotics and Controlled Substances
NEIPS	-	
NICIS	-	Nigerian Integrated Custom Information System
NGO	-	Non-Governmental Organizations
NHREC	-	Nigerian Health Research Ethics Committee
PA	-	Public Affairs
PID	-	Port Inspection Directorate
PRASCOR	-	Pharmacovigilance Rapid Alert System for Consumer Reporting
PR&S	-	Planning Research & Statistics
PV/PMS	-	Pharmacovigilance/ Post Market Surveillance
PQM	-	Product Quality Management
QA	-	Quality Assurance
QC	-	Quality Control
QMS	-	Quality Management System
R&R	-	Registration and Regulatory Affairs
SF	-	Strategic Focus
SFs	-	Substandard and Falsisfied Medicines
SO	-	Strategic Objective
SOP	-	Standard Operating Procedure
SWOT	-	Strengths, Weaknesses, Opportunities and Threats
TMC	-	Top Management Committee
UNICEF	-	United Nations Children Fund
UNIDO	-	United Nations Industrial Development Organization
USAID	-	United States Agency for International Development
VMAP	-	Veterinary Medicines & Allied Products
WHO	-	World Health Organization
WHO-GTB	-	World Health Organization-Global Benchmarking Tool

FOREWORD

As an organization of government tasked with the onerous responsibility of safeguarding the health of the nation through effective and efficient control of production, importation, exportation, advertisement, use and sale of regulated products, NAFDAC is in constant search of new ideas and ways to improve its operations and deliver on her mandate.

Following my appointment as the Director General (NAFDAC); I was informed of the need to have a Strategic Plan that will reflect my vision and the Federal Ministry of Health's (FMoH) 2nd National Strategic Health Development Plan. Thus, the plan development process involved identification of new areas of focus and the realignment of our priorities in line with the present Management's direction and the FMoH Strategic Plan in order to make us work smarter in the same direction and deliver on our mandate. Some of these identified areas include; Provision of Strong Leadership Governance, Institutionalization of best Practices, Ensuring Quality and Safety of Regulated Products and Strengthening the Agency in all Global Benchmark Indicators to bring it to the highest maturity level equivalent to a "Stringent Regulatory Agency. Others are; Continuous Monitoring along Supply Chain using globally accepted innovative technological tools, Evidence-based Agency-wide Staff Development, as well as efficient Financial Management.

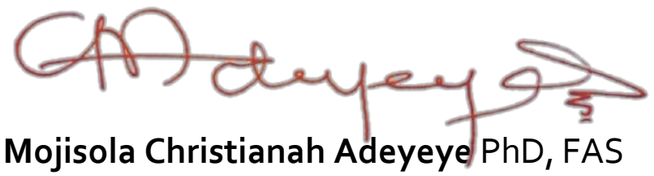
These are imperative in the face of a regulated environment that is ever changing and re-inventing itself. Indeed, the Agency as a matter of fact is not contented with keeping apace but rather staying ahead of the emerging trend.

This Plan is therefore a set of ideas and practical actions drawn up to enhance the effective execution of our mandate in the next five years. It lays a strategic path to be followed to achieve our cherished ideas of where we want the Agency to be.

To engender 'buy in' of all stakeholders, the draft copy of the Strategic Plan (2018-2023) was shared with all Directors and relevant staff during a Management Review Retreat in Ibadan, Oyo State which was anchored by HEDIA (Consults) Ltd. The workshop afforded us the opportunity to collate individual Directorates' goals and objectives which were imbued into the Agency's Strategic plan. The draft plan was also shared with our external stakeholders (pharmaceutical and food) whose inputs were collated and considered. It was then presented to Top Management Committee for final review and was finally approved by the Agency's Governing Council.

Unlike our previous Strategic Plans (2010-2015, 2016-2020) which suffered pitfalls largely due to lack of total "buy in"; this Strategic Plan (2018-2023) no doubt encapsulates our collective vision and I am firmly convinced that we all believe in the new direction it charts for the Agency. It is a vision that should drive us to exhibit our unique attributes in the service to our nation.

On the part of management, we shall galvanize resources to ensure its full implementation as I will provide focused leadership, lead the charge as we remain "Customer focused: Agency minded".



Mojisola Christianah Adeyeye PhD, FAS
Director-General, NAFDAC
11th November, 2019

BACKGROUND

The National Agency for Food and Drug Administration and Control (NAFDAC) was established in 1992 with the mandate to regulate and control the manufacture, importation, exportation, distribution, advertisement, sale and use of food, drugs, cosmetics, chemicals, detergents, medical devices, and packaged water (collectively known as regulated products). With a core national responsibility of safeguarding public health, NAFDAC is desirous of continually improving and undertaking strategies to position or re-position itself for better performance with the aim of attaining greater efficiency on a "Customer-focused, Agency-minded" template.

The Agency work in tandem with other institutional stakeholders in the Nigerian health sector to achieve the 2014 National Health Act's aim of universal health care for all citizens. Also, NAFDAC's mandate is situated within Global Sustainable Development Goal 3, vis-à-vis good health, and wellbeing. Achieving this goal is quite daunting in Nigeria taking into consideration the country's long-term poor health indices. For instance, WHO 2018 data showed that the life expectancy at birth in Nigeria is 55 years, which is below the Sub-Saharan Africa's average of 56 years.

The mandate of the Agency therefore is crucial to the achievement of good health and wellbeing of the Nigerian people.

Recently, the re-organization and re-orientation in the Agency under the present management has ignited a spirit of innovation within the Agency with significant opportunities to develop and inspire staff, to foster novel and impactful ideas towards realization of the Agency's mandate.

One of the key challenges that impeded excellent implementation of the previous Strategic Plans (2010-2015, 2016-2020) was inadequate funding. Thus, it has become imperative for the Agency to be proactive, innovative and more efficient in resource management going forward.

This Strategic Plan (2018-2023) articulates our highest aspirational goals in realizing our shared vision. It is designed to be a five-year plan that ensures, we continue to move forward strategically and thoughtfully as an Agency. The investments that we must make in shaping and defining our future are clear. We must institutionalize global best practices; ensure efficient financial management, continued transformation and innovation in our regulatory strategies to achieve continued growth, and cultivation of authentic and strong partnerships locally, nationally, and globally.

The Strategic Plan opens with our vision, mission and our core values. Our core values define who we are and what we believe in -- they represent the heart of the staff and the Agency. The Plan is framed around the five (5) strategic pillars in line with that of Federal Ministry of Health. Each strategic pillar guides the Agency's future planning efforts and outlines our aspirations. Strategic objectives provide direction, with performance target, Key Performance Indicators (KPIs) and journey tracker to guide our efforts and measure our progress hence inclusion of a clear-cut and realistic Monitoring and Evaluation Framework. With this, we can monitor progress and report on a quarterely, biannual and yearly basis. The process requires us to be agile, opportunistic, responsive, and adaptable to internal and external factors that will continue to impact our environment and, inevitably, allow us to both foster and navigate change.

This Strategic Plan provides guidance and context to achieve our aspirational goals, and is our compass in defining our future. Thus, all stakeholders should identify with the strategic pillars and determine how best to contribute to and shape the Agency's future. We must remain relentless in our pursuit of excellence. Priorities will be determined, implementation will be staged, and resources will be aligned with those priorities.

CHAPTER ONE

INSTITUTIONAL ANALYSIS

Identified as a major component of the strategic planning process, an Institutional Assessment (IA) of NAFDAC featuring internal and external stakeholders was conducted. A rich harvest of information was gathered from this as the data collected from the Institutional Analysis and its interpretation provided background material for discussing and identifying priority areas for actions.

The IA revealed that NAFDAC is a key Agency providing essential lifesaving services in the Nigerian health sector. The challenges bedeviling the Agency however include in-adequate funding, poor legislation etc.

The current management has therefore identified actions required to better position the Agency in achieving its mandate. These include: Institution of strong governance (including responsible budgeting, strong and disciplined workforce), Ensuring Quality, Safety and Effectiveness of medicines and wholesomeness of food and other regulated products, Evidence-based Agency-wide staff development and Strengthening the Agency in all WHO Global Benchmark Indicators. Others include; Strengthening the capacity and regulatory controls of local manufacturing companies, partnership with interested foreign companies and Medicines Regulatory Authorities (MRAs) and ensuring a strong drug supply chain management using innovations.

In a nutshell, the Agency is committed to linking development and resources directly to this strategic plan by developing and institutionalizing best practices, measurable and innovative steps that will result in effective regulatory outcomes.

CHAPTER TWO

VISION, MISSION & CORE VALUES

VISION

To be a World Class Regulator that ensures availability of quality and safe Food, Drugs and other regulated products.

MISSION

To protect and promote the public health by instituting an effective and efficient regulatory system that ensures only the right quality Food, Drugs and other regulated products are manufactured, exported, imported, advertised, distributed, sold and used.

CORE VALUES

The PRIDE core values of the Agency:

1. Professionalism
2. Resilience
3. Integrity (Transparency & Good Governance)
4. Dedication & Commitment
5. Excellence

CHAPTER THREE

STRATEGIC FOCUS, GOALS & STRATEGIC OBJECTIVES

STRATEGIC FOCUS

Taking into consideration the key issues identified in the internal and external environment of NAFDAC, as well as consensus at the Strategic Plan development retreat, the Agency's strategic focus which also serve as strategies for the period 2018-2022 are as follow:

- Strong Leadership and Governance
- Institutionalization of Best Practices
- Safety and Quality of Regulated Products
- Continuous Monitoring along the Supply Chain
- Efficient Financial and Procurement Management

GOALS AND STRATEGIC OBJECTIVES

Goals and objectives are very critical in defining and establishing the results to be achieved during the strategic plan period. These are general or broad and specific statements of intended accomplishments. Goals and objectives guide and support the achievements of organizational mission. Participants drawn from all directorates, with technical support from the Consultants and PRS staff discussed and developed goals and strategic objectives to be achieved during the strategic plan period. The goals and strategic objectives developed are presented below along strategic focus line.

SF1. **Strong Leadership and Governance:**
Goal: To Build a Transparent Quality-Driven Management Structure for Strong Regulatory and Enforcement Framework
SO1: Ensure Disciplined and Motivated Management and Workforce
SO2: Develop and Gazette Relevant Laws
SO3: Entrench Quality Management System in NAFDAC Processes
SO4: Adopt WHO Global Benchmarking Principles.
SO5: Strengthen Overarching Information Communication Technology

SF2. Institutionalization of Best Practices:
Goal: To improve Corporate Image of the Agency and the Country.
SO1: Improve efficiency in all NAFDAC Processes from Registration to Enforcement
SO2: Build Capacity of Staff and Stakeholders.
SO3: Disseminate Information on NAFDAC's activities in Relevant Media
SO4: Improve Customer Complaint Resolution.
SO5: Strengthen Laboratory Systems

SF3. Safety and Quality of Regulated Products:
Goal: To ensure Safe and Quality Regulated Products that are fit for both Local and Foreign Markets.
SO1: Reduce Significantly Substandard and Falsified/Counterfeit Pharmaceutical Products and Unwholesome Foods.
SO2: Strengthen Post-marketing Surveillance of Food and Medical Products
SO3: Strengthen the Regulatory Environment for Safety of Foods
SO4: Ensure Strict Utilization of Controlled Drugs for Medical Purposes

SF4. Continuous Monitoring along the Supply Chain:
Goal: To Safeguard the Health of the Population.
SO1: Strengthen Good Distribution Practice of Regulated Products from Pre-Shipmentand Local Manufacturers to the End User
SO2: Ensure Quality of Medical Products and Foods via Track and Trace Technology and other-Detection Devices
SO3: Strengthen the Platform for Easy Reporting of Adverse Events and Timely Resolution

SF5. Efficient Financial and Procurement Management:
Goal: To Promote, Sustain, and Reinforce Transparency & Accountability in the Management of the Financial Resources of the Agency.
SO1 Adopt Responsible and Balanced Budgeting System.
SO2: Implement Agency-wide Business Process Management Digital Platform
SO3: Increase Revenue Drive and Sustainability of Financial Best Practices.
SO4: Implement an Efficient Procurement Process

CHAPTER FOUR

STRATEGIC FRAMEWORK - STRATEGIC FOCUS & STRATEGIC OBJECTIVES

Strong Leadership and Governance

- **1.1** Ensure Disciplined and Motivated Management and Workforce
- **1.2** Develop and Gazette Relevant Laws
- **1.3** Entrench QMS in NAFDAC Processes
- **1.4** Adopt WHO Global Benchmarking Principles
- **1.5** Strengthen Overarching Information Communication Technology

Institutionalization of Best Practices

- **2.1** Improve efficiency in all NAFDAC Processes (from Registration to Enforcement)
- **2.2** Build Capacity of Staff & Stakeholders
- **2.3** Disseminate Information on NAFDAC's Activities in relevant Media
- **2.4** Improve Customer Complaint Resolution
- **2.5** Strengthen Laboratory Systems

Safety and Quality of Regulated Products

- **3.1** Reduce Significantly Substandard and Falsified or Counterfeit Pharmaceutical Products and Unwholesome Foods
- **3.2** Strengthen Post-marketing Surveillance of Food and Medical Products
- **3.3** Strengthen the Regulatory Environment for Safety of Foods.
- **3.4** Ensure Strict Utilization of Controlled Drugs for Medical Purposes

Continuous Monitoring along the Supply Chain

- **4.1** Strengthen Good Distribution Practice of Regulated Products from Pre-Shipmentand Local Manufatcurers to the End User within the country (Nigeria).
- **4.2** Ensure Quality of Medical Products and Foods via Track and Trace Technology and other Dection Devices
- **4.3** Strengthen the Platform for Easy Reporting of Adverse Events and Timely Resolution

Efficient Financial and Procurement Management

- **5.1** Adopt Responsible and Balanced Budgeting System
- **5.2** Implement Agency-wide Business Process Management Digital Platform
- **5.3** Increase Revenue Drive and Sustainability of Financial Best Practices
- **5.4** Implement an Efficient Procurement Process

CHAPTER FIVE

RESULT FRAMEWORK & ACTIVITY TIMELINE

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
SF1: STRONG LEADERSHIP AND GOVERNANCE - Goal: To Build a Transparent Quality-Driven Management Structure for Strong Regulatory and Enforcement Framework																												
1.1	**Ensure Disciplined and Motivated Management and Workforce**	1.1.1. Implement and rollout the upgraded HRMIS version including Performance Management Module.	IR-1.1.1.1. Level of implementation of upgraded HRMIS	Upgraded HRMIS implemented 100% by 2020	Fully Implement HRMIS by 2020 and sustain till 2023.	D, A&HRM	Upgraded HRMIS version including Performance Management Module implemented.	Implement and sustain the upgraded HRMIS version including Performance Management Module by 2020.						x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.1.2. Provision of additional human and operational vehicles by 2023	IR-1.1.2.1. Proportion of additional employees engaged	30% increase in the current number of staff.	Achieve 10% by 2020, 15% by 2021 20% by 2022 & 30% by 2023.	D, A&HRM	Adequate Provision of human resources & equipment	1. Seek and obtain approval from relevant government MDAs. 2. Staff recruitment.				x					x				x					x		
			IR-1.1.2.2. Proportion of additional operational vehicles procured	Provision of 100 additional operational vehicles to the Directorate, Zones and States.	Procure 40% by 2020, 75% by 2021, 90% by 2022 & 100% by 2023.	D, A&HRM	Adequate operational vehicles	Provision of additional operational vehicles.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.1.3. Provision of additional computers systems.	IR-1.1.3.1. Proportion of additional computer units procured.	Procure 100% of planned computer Units	Achieve 50% by 2020, 75% by 2021 90% by 2022 & 100% by 2023.	DGN D, A&HRM ICT	Provision of adequate computer systems and other working tools	Procurement of additional working tools			x				x			x				x				x		
		1.1.4. Provision of materials resources and equipment.	IR-1.1.4.1. Proportion of functional material resources and equipment	Ensure 60% functionality of all material resources and equipment by 2023	Achieve 50% by 2020, 55% by 2021, 58% by 2022 & 60% by 2023.	D, A&HRM	Provision of optimized materials resources and equipment.	Regular and timely maintenance of material resources and equipment	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.1.5. Develop and update Job Specifications for each personnel	IR-1.1.5.1. Proportion of personnel job specifications developed /updated	All personnel job specifications developed /updated.	Achieve 100% by 2020 and sustain till 2023	D, A&HRM	Improved service delivery	Regularly update personnel job specifications	x				x				x				x				x			

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
1.2	**Develop and Gazette Relevant Laws**	1.2.1. Review regulations and guidelines for regulatory processes.	IR-1.2.1.1. Proportion of regulations and guidelines received from Directorates reviewed.	80% of required Regulations and guidelines forwarded from directorates reviewed by 2023.	To achieve 65% by 2020, 70% by 2021, 75% by 2022. & 80% by 2023	D, R&R	Reviewed regulations and guidelines for regulatory processes.	Review/develop relevant Regulations and Guidelines.	x	x			x	x			x	x			x	x			x	x		
		1.2.2. Review and gazette NAFDAC Laws	IR-1.2.2.1. Proportion of relevant NAFDAC Laws reviewed/gazetted.	20% of Relevant NAFDAC Laws, are gazetted by 2023.	To achieve 20% by 2023	D, Legal	Reviewed NAFDAC Laws	Review of Relevant NAFDAC Laws.	x				x				x				x				x			
		1.2.3. Litigations (Criminal & Civil) - Institute action in criminal matte	IR-I.2.3.1. Proportion of case files received from I&E Directorate and cases instituted against the Agency	80% of all criminal action and civil action are being instituted or responded to yearly	Institute or respond to 80% of litigations yearly	D, Legal	Effective prosecution	Receive case files from I&E Directorate and institute cases when necessary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.2.4. Legal Opinions & Drafting - Study issues & advice, Draft Legal documents	IR-1.2.4.1. Proportion of all advice, opinions, agreement/ memorandum of understanding	90% of appropriate advice, draft of agreements/ MOU's completed yearly	Achieve 90% yearly	D, Legal	Agreements/MoU drafted	Regular advice, opinions, agreement/ memorandum of understanding as necessary	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.2.5. Draft new food regulations and guidelines	IR-1.2.5.1. Proportion of food regulations and guidelines drafted	Draft 3 regulations and 3 guidelines by 2023	Draft 1 regulation and review 1 guideline in 2020, 2021, 2022 & 2023	D, FSAN D, Legal	New regulations drafted and guidelines reviewed	Three regulations drafted and 3 guidelines reviewed							x				x				x					x
		1.2.6. Notify stakeholders of relevant draft and finalized food regulations in accordance with WTO-SPS Transparency agreement	IR-I.2.6.1. Proportion of food regulations and guidelines notified	Notify stakeholders of 100% of relevant draft and finalized food regulations by 2023	Notify 50% by 2020, 75% by 2021, 90% by 2022 & 100% by 2023	D, FSAN	WTO notified of new regulations and reviewed guidelines	100% of regulations and guidelines to be notified	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
1.3	**Entrench Quality Management Systems (QMS) in NAFDAC Processes**	1.3.1. Maintain dedicated Quality Teams across NAFDAC formations.	IR-1.3.1.1. Proportion of NAFDAC formations with dedicated quality teams.	100% of NAFDAC formations to maintain dedicated Quality Teams.	All NAFDAC formations with dedicated QMS Teams by 2020 and sustained till 2023	NAFDAC Quality Manager	All NAFDAC formations with dedicated quality teams.	Formation of QMS teams in all NAFDAC Formations					x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.3.2. Refresher Training for Top Management, QMS Steering Committee and Directorates Quality team and all others including Drivers.	IR-1.3.2.1. Proportion of officers trained on QMS implementation for continual improvement	100% Refresher Training for Top Management, QMS Steering Committee and Directorates Quality team and all others including Drivers.	100% of relevant officers trained by 2020 & retrained till 2023	NAFDAC Quality Manager NAFDAC & QMS Steering Committee	Well Trained staff	Conduct QMS training for TMC, QMS Steering committee and all others					x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.3.3. Conduct Certification training for QMS Steering Committee and all Quality Managers	IR-1.3.3.1. Proportion of certified QMS personnel	100% Certification training for QMS Steering Committee and all Quality Managers	50% -2019 60%-2020 70%-2021 90%-2022 100% -2023	D, PR&S NAFDAC Quality Manager	Well Trained and certified Quality Managers and QMS steering committee	Conduct certified training for QMS Steering committee and Quality managers	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.3.4. Conduct monthly Directorate Quality meetings and bimonthly QMS Steering Committee Quality Meeting	IR-1.3.4.1. Proportion of Quality meetings conducted.	100% monthly Directorate Quality meetings and bimonthly QMS Steering Committee Quality Meeting.	Conduct 100% of Quality meetings yearly	NAFDAC Quality Manager & NAFDAC QMS Steering Committee	Sustained Quality review meetings	12 Directorate Quality meetings & 6 QMS Steering Committee meetings	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.3.5. Conduct Internal Audit across the Directorates.	IR-I.3.5.1. Proportion of Internal Audit should be conducted	Conduct 100% of scheduled Internal Audit across the Directorates.	100% of audit conducted by 2020 & sustained till 2023	NAFDAC Quality Manager & QMS Steering Committee	Sustained Internal audit across Directorates	Conduct two internal audits in a year		x		x		x		x		x		x		x		x		x
		1.3.6. Conduct Quarterly Risk Review Meeting.	IR-I.3.6.1. Proportion of quarterly risk review meetings conducted	Conduct 100% of Quarterly Risk Review Meeting.	100% of audit conducted by 2020 & sustained till 2023	NAFDAC Quality Manager & QMS Steering Committee	Regular risk review meetings	4 Risk Review meetings annually and updated Risk Register.					x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
		1.3.7. Conduct Needs and expectation of Interested Parties Review every six months	IR-I.3.7.1. Proportion of scheduled review of needs and expectation of interested parties conducted	Conduct 100% of bi-annual review of Needs and expectation of Interested Parties by 2023	Achieve 50% - 2019 60%-2020 70%-2021 90%-2022 100% -2023	NAFDAC Quality Manager & QMS Steering Committee & Directorate Quality Managers	Regular review of needs/expectations of interested parties	Conduct bi-annual review of needs/expectations of interested parties	x		x		x		x		x		x		x		x		x		x	
		1.3.8. Conduct quarterly Process Audit across the Agency	IR-1.3.8.1. Proportion of scheduled quarterly Process Audit across the Agency conducted	Conduct 100% of scheduled quarterly Process Audit across the Agency.	100% of audit conducted by 2021 & sustained till 2023	NAFDAC Quality Manager	Regular process audit across the Agency	Conduct at least 4 process audits across the Agency	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.3.9. Conduct QMS Management Review Meeting	IR-1.3.9.1. Proportion of scheduled QMS Management Review Meeting conducted	Conduct 100% of scheduled QMS Management Review Meeting yearly	100% of meetings conducted yearly	NAFDAC Quality Manager	Sustained QMS Management review meetings	At least 2 meetings should be conducted in a year.					x		x		x		x		x		x		x	
1.4	**Adopt WHO Global Benchmarking Tool (GBT) Principles**	1.4.1. Conduct the Assessment of all GBT Regulatory functions	IR-1.4.1.1. Level of maturity attained on WHO- GBT	Become a WHO Listed Authority (WLA)	Attain Maturity level 3 by 2021, and level 4 by 2023	DG (NAFDAC), WHO-GBT Coordinator	All GBT Regulatory functions assessed	Quarterly assessment of all GBT regulatory functions					x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.4.2. Develop & deploy all relevant documents (Regulations, Manuals, SOPS, etc.) as required.	IR-1.4.2.1. Agency attains a level 4 compliance on the benchmark scale by 2023	All relevant Regulations & Guidelines including Manuals, SOPs, etc) are deployed by 2023.	Attain level 3 by 2021, and level 4 by 2023	DG (NAFDAC), WHO-GBT Coordinator	All relevant documents (Manuals, SOPS, etc.) Developed and deployed.	1. Develop/Review and deploy all relevant Regulations & Guidelines including Manuals, SOPs, etc) as required by 2022. 2. Conduct management review meetings. 3. Maintain functional benchmarking team in every NAFDAC Formations by 2019					x	x	x	x			x	x			x	x		x	x	x
		1.4.3. Train relevant personnel on use of Global Benchmark Indicators and Procedures.	IR-1.4.3.1. Proportion of relevant staff competent in WHO-GB principles	100 % competence improvement on Benchmarking tools by 2023	Attain 80% competence by 2021 and 100% by 2023.	NAFDAC WHO-GBT Coordinator.	Competence improvement on Benchmarking tools.	Train relevant personnel on use of Global Benchmark Indicators and Procedures.					x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
1.5	**Strengthen Overarching Information Communication Technology**	1.5.1 Improve Communications and Collaboration within and outside the Agency	1.5.1.1 Level of staff usage of MS 365, SharePoint etc (Digital Transformation)	Increase to 90%, staff usage of emails, outlook, SharePoint, MS Team	Achieve 60% by 2020, 70% by 2021, 80% by 2022 and 90% by 2023	DG Head, ICT Unit	Improved communication and collaboration within the Agency	1. Deploy MS O356 and SharePoint 2. Train Staff on Digital Transformation and SharePoint usage	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			1.5.1.2 Improve NAFDAC information availability and accessibility on Agency's website	Increase site visitors by 20 % yearly	Achieve 20% every year	DG Head, ICT Unit	Improved communication and collaboration and reliance with stakeholders	Review and update Website periodically	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.5.2. Ensure Compliance on IT Regulations and Policy	100% compliance with FGN IT Regulation and Policy	To achieve 100% compliance by 2023	Achieve 60% by 2020, 70% by 2021, 80% by 2022 and 100% by 2023	DG Head, ICT Unit	Full compliance with NITDA guidelines	1.Ensure Government Digital Services (GDS) and IT projects implementation follows the provisions of National Economy Policy and Strategy (NDEPS), Nigeria e-Government. 2. Master Plan, IT Projects Clearance Policy and Guidelines, Nigeria e-Government. 3. Interoperability Framework (Ne-GIF), Nigeria Government Enterprise Architecture (NGEA), Nigeria Data Protection Regulation (NDPR) and other National ICT/e-Government Documents.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.5.3. Develop and implement NAFDAC ICT Plans and Enterprise Architecture (EA)	IR-1.5.3.1. ISO 27001:2013 Implementation & Certification.	To obtain ISO 27001:2013 Certification by 2021	Achive 27001:2013 Certification by 2021 and sustain till 2023.	DG Head, ICT Unit	Improved ICT systems	Develop, implement, and maintain Information Security Management System (ISMS) Plan based on ISO 27001 standards.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-1.5.3.2. ISO 22301 Implementation and Certification Audit – BCMS.	To obtain ISO 22301 Implementation and Certification by 2022.	Achive ISO 22301 Certification by 2022 and sustain till 2023.	DG Head, ICT Unit	Improved ICT systems	Develop, implement, and maintain Business Continuity and Disaster Recovery Plan based on ISO 22301 standards	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
			IR-1.5.3.3. ISO 27032 Cyber Security Implementation and Strategy Certification.	To obtain ISO 27032: Cyber Security Implementation and Strategy Certification by 2023.	Achive ISO 27032 Certification by 2023.	DG Head, ICT Unit	Improved ICT systems	Develop, implement, and maintain cybersecurity risk management Plan based on ISO 22301 standards	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		1.5.4. Develop and retain Skilled IT Staff	IR-1.5.4.1. Number of professional IT Trainings scheduled and implemented	Implement 90% of scheduled IT professional trainngs	Achieve 70% by 2021, 80% by 2022 and 90% by 2023	DG Head, ICT Unit	Highly skilled IT Staff and Improved IT services delivery.	Train staff on IT systems and Management	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
SF2: INSTITUTIONALIZATION OF BEST PRACTICES - Goal: To improve Corporate Image of the Agency and the Country																												
2.1	**Improve Efficiency in all NAFDAC Processes (from Registration to Enforcement)**	2.1.1. Improve efficiency in Registration and Regulatory processes through the Implementation & sustenance of a robust e-registration platform by 2023.	IR-2.1.1.1. Proportion of received applications for listing certificates/marketing authorization processed.	Process 90% of received applications by 2023.	Process 80% in 2019, 85% in 2020, 88% in 2021 & 90% in 2023.	D, R&R	Improved efficiency in Registration and Regulatory processes	1. Provision of ICT driven infrastructures and software. 2. Provision of hardware (computers, printers, scanners). 3. Training of staff and stakeholders	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.1.1.2. Proportion of marketing authorizations approved/issued within timelines.	80% of Marketing Authorization Licenses are issued to applicant within the stipulated timelines by 2023.	70% in 2019, 75% in 2020, 78% in 2021 & 80% in 2022 and sustain till 2023.	D, R&R	Marketing Authorizations issued within timelines	1. Provision of ICT driven infrastructures and software. 2. Provision of hardware (computers, printers, scanners). 3. Training of staff and stakeholders	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.1.1.3. Proportion of collected samples sent to the laboratories within timelines.	Ensure 100% compliance with stipulated timeline for sending collected samples to the laboratory (5 days) is met by 2023	Achieve 60% in 2020, 70% by 2021, 90% by 2022. & 100% by 2023	D, R&R	Timely forwarding of Samples to the laboratories	Meet the 5 days stipulated timeline for sending collected samples to the laboratory.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		2.1.2. Provide a Comprehensive Governing Framework for Registration and Regulation of Regulated Products by 2023.	IR-2.1.2.1. Proportion of required guidelines, SOPs and reviewed/developed by 2022.	Develop and deploy 90% of required guidelines and SOPs by 2023	Achieve 40% by 2020, 50% by 2021, 70% by 2022 & 90% by 2023.	D, R&R	Comprehensive Governing Framework for Registration and Regulation of Products for Regulated Products.	Review 5, develop 5 new regulations and develop 15 new SOPs and review 35 existing SOPs for regulatory processes in Food, Drugs, Cosmetics, Medical Devices, and other emerging Regulatory Issues		x				x				x				x				x		

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
			IR-2.1.2.2. Proportion of staff trained on review of guidelines & SOPs	Train 80% of staff on guidelines & SOP development/review by 2023	Achieve 50%, 60% 70% & 80% by 2020,2021, 2022 & 2023	D, R&R	Trained staff on review of guidelines and SOPs	Conduct yearly training for staff on review of SOPs and guidelines	x				x				x				x				x			
			IR-2.1.2.3. Level of completion of the development of identified CTD guidance document.	Develop 60% of identified CTD Guidances Documents 2023.	Achieve 40% by Q3 2019, 60% by Q4 2019 & sustain till 2023.	D, R&R	Standardized CTD	1. Develop 1 CTD Guidances & Guidelines. 2. Training of staff and stakeholders on CTD Guidances	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		2.1.3. Strengthen the inspection of chemical/raw materials warehouses.	IR-2.1.3.1. Proportion of application for chemical/raw materials warehouse inspections treated.	90% of applications for chemical/raw materials warehouse inspections treated by 2020.	Achieve 90% by 2020 and sustain till 2023.	D, CER D, VMAP	Strengthened inspection of chemical warehouses.	Timely treatment of applications for chemical warehouse inspections.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.1.3.2. Proportion of applications for chemicals/raw materials warehouse inspections treated within timeline	90% of treated applications are within stipulated timelines by 2023.	Achieve 90% by 2020 and sustain till 2023.	D, CER D, VMAP	Applications handled within timelines	Treat applications within stipulated timelines.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.1.3.3. Proportion of Chemicals E-Permit issued.	100% of Permits issued electronically by 2020.	Achieve 100% by 2020 and sustain till 2023.	D, CER D, VMAP	More effective permit issuance	Produce a list of Products implicated as toxic to humans and updated list of banned substances; classification of Variation of registered products	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
2.2	**Build Capacity of Staff and Stakeholders**	2.2.1. Implementation of trainings and staff development programmes to improve staff and stakeholders' operational performance.	IR-2.2.1.1. Proportion of trained Staff	60% of staff to participate in at-least one training programme every year.	60% of staff trained in 2019, 2020, 2021, 2022, and 2023	D, PR&S	Training programs identified and implemented	Coordinate trainings and awareness programmes for staff and stakeholders.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.2.1.2. Decrease in specific training needs.	Reduce staff training needs to 10% by year 2023	Achieve 40%, 30%, 20%, 15%, 10% by 2019, 2020, 2021, 2022 & 2023	D, PR&S	Specific training needs reduced	Yearly Assessment Of Staff Training Needs	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.1.1.3. Rate of Improvement in Staff Performance	Increase staff Performance by 90% by 2023	Achieve 70%, 75%, 80%, 85%, 90% by 2019, 2020,	D, A&HRM	Increased staff productivity	Bi-Annually Staff Performance Evaluation				x				x				x				x				x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
					2021, 2022 & 2023																							
2.3	**Disseminate Information on NAFDAC's Activities in Relevant Media**	2.3.1. Strengthen dissemination of NAFDAC messages via Social and other Media Platforms	IR-2.3.1.1. Proportion of NAFDAC information disseminated through social media	Disseminate 85% of NAFDAC information through social media.	Achieve 50%, 60%, 70%, 80%, 85% by 2019, 2020, 2021, 2022 & 2023	D, PA Head, ICT	Improved information dissemination through social media	Continuously convey the Agency's programmes (sensitization, workshops, and events, Press Releases, DGs keynotes/speeches/addresses) on our Digital platforms.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.3.1.2. Proportion of NAFDAC information disseminated through conventional media (Television, Radio, print).	Disseminate 85% of NAFDAC information through conventional media (Television, Radio, print) by 2023.	Achieve 50%, 60%, 70%, 80%, 85% by 2019, 2020, 2021, 2022 & 2023 respectively	D, PA	Increased dissemination of information through conventional media	Quarterly press releases and Weekly NAFDAC and your Health Television programme	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		2.3.2. Increase collaborations with stakeholders by 2022	IR-2.3.2.1. Proportion of collaborative meetings with Stakeholders held.	Hold quarterly meetings with stakeholders every year.	4 meetings each in 2019, 2020, 2021, 2022 & 2023.	Director, PA	Well informed stakeholders	Hold 4 meetings yearly.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		2.3.3. Disseminate research findings using Agency's online resources, bulletins, electronic, print media and other outlets.	IR-2.3.3.1. Proportion of research findings disseminated per/annum.	Disseminate at least 90% of research findings by 2023.	50% by 2019, 60% by 2020, 70% by 2021, 80% by 2022 90% by 2023	D, PRS Head, ICT	Research findings and M&E reports disseminated.	Disseminate research findings using Agency's online resources, bulletins, electronic, print media and other outlets.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
2.4	**Improve Customer Complaint Resolution**	2.4.1. Evolve effective resolution of customer complaints in a timelier manner	IR-2.4.1.1. Proportion of complaints resolved within stipulated timelines	100% of complaints resolved within timelines by 2023.	Achieve 70% - 2019 75%-2020 80%-2021 90%-2022 100% -2023	Head, Reforms	Effective resolution of customer complaints.	Develop guideline/SOPs for receiving and handling customer complaints.		x				x				x				x				x		

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
			IR-2.4.1.2. Proportion of NAFDAC formations with designated customer Service Desk Officers	100% of NAFDAC formations to have designated customer Service Desk Officers by 2020.	Achieve 80% by 2019 & 100% by 2020 & sustain till 2023	Head, Reforms	Designated and sustained customer Service desk officers in all NAFDAC formations.	Designate and sustain customer Service desk officers in all NAFDAC formations by 2019.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.4.1.3. Database on complaints Developed.	Existence of Consumers' Complaints database by 2020	Achieve 100% by 2020 & sustain till 2023	Head, Reforms	Complaints database developed.	Develop and maintain Complaints database.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
2.5	**Strengthen Laboratory Systems**	2.5.1. Improve Analytical Processes In the Laboratories	IR-2.5.1.1. Proportion of required Laboratory instruments and consumables provided.	90% of required Laboratory instruments and reference standards provided by 2023	70% by 2019,75% by 2020, 85% by 2021, 88% by 2022, 90% by 2023	D, LS	Laboratory instruments, reference standards provided.	Timely acquisition and supply of adequate laboratory equipment and reference materials/standards.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.5.1.2. Proportion of received samples treated and released.	95% of collected samples are treated by 2023.	80% by 2019,85% by 2020, 88% by 2021, 90% by 2022, 95% by 2023	D, LS	Timely analysis of Lab samples	Staff training and Capacity especially in the area of Analytical method review	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.5.1.3. Proportion of received samples treated within timelines	80% of results released within timelines by 2023.	60% by 2019,65% by 2020, 70% by 2021, 75% by 2022, 80% by 2023	D, LS	Timely release of Lab results	Staff training and Capacity especially in the area of Analytical method review	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.5.1.4. Proportion of analyzed export samples within timelines.	90% export samples of regulated products analyzed within timelines by 2023	60% by 2020, 70% by 2021, 80% by 2022 & 90% by 2023	D, LS (F) D, LS (D)	Increase the proportion of all analyzed export samples of regulated products.	Prioritized export samples and ensure the samples are analyzed within 3 weeks of submission.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		2.5.2. Improve and sustain Laboratory Quality Systems	IR-2.5.2.1. Proportion of NAFDAC Laboratories that attain ISO certification.	80% of NAFDAC Laboratories attain ISO certification by 2023.	65% by 2019 70% by 2020, 75% by 2021, 78% by 2022 & 80% by 2023	D, LS (Food), D, LS (Drug)	80% of NAFDAC Laboratories ISO certified	1.Regular training of laboratory staff 2. Pre-Qualification of all suppliers 3. Internal Audits		x	x			x	x			x	x			x	x			x	x	

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
			IR-2.5.2.2. Proportion of Test Methods that are ISO certified.	80% of NAFDAC test Methods are ISO certified by 2023.	70% by 2020, 75% by 2021, 80% by 2022	D, LS (Food), D, LS (Drug)	Improved Laboratory Quality Systems	1. Staff training on Metrology and in all testing techniques 2. Annual calibration of equipment and other measuring devices and Preventive maintenance. 3. A Scope extension to cover other testing e.g. AAS for herbal samples. 4. Participation in ILT and PT 5. Obtain and sustain International Certification for all NAFDAC laboratories and test methods	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.5.2.3. Proportion of samples analyzed using risk-based related Laboratory Technique.	Full implementation of risk-based policy by 2023	70% by 2019 80% by 2020 90% by 2021, 100% by 2023	D, LS	Efficiency and cost effectiveness.	1. Development and Communication of a risk-based policy. 2. Personnel training on Document Review and use of LIMS. 3. Generation of data and data analysis on upgraded LIMS. 5. Provision of soft/hardware	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.5.2.4. NAFDAC Laboratory, Yaba attain WHO-PQ.	Obtain & Sustain WHO Pre-Qualification for NAFDAC Central Drug Control and Biologics Laboratories	NAFDAC Laboratory, Yaba attain WHO-PQ by 2020 and sustain till 2023.	D, LS (D)	WHO-PQ attained & sustained	1. Procurement and installation of laboratory equipment. 2. Regular replacement of laboratory consumables 3. Regular training of laboratory staff	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-2.5.2.5. Proportion Mobile Laboratories procured and deployed 2022.	Procure and commission 25 Mobile Laboratories by 2023	60% by 2019 70% by 2020 80% by 2021, 90% by 2022 & 100% by 2023	D- LS (F) D- LS (D)	Mobile Laboratories procured.	Procurement and installation of mobile laboratories					x			x			x				x				x
			IR-2.5.2.7. Proportion of planned participation in Laboratory Int'l Programmes attended.	70% no of planned participations in int'l laboratory programmes attended by 2023.	50% by 2020, 60% by 2021, 65% by 2022 & 70% by 2023	DG, NAFDAC; Ds-LS	Exposure and Participation of NAFDAC Laboratories in int'l programs.	Consistent participation of NAFDAC laboratories in int'l laboratory programmes.		x				x				x				x				x	

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
SF3: SAFETY AND QUALITY OF REGULATED PRODUCTS - Goal: To ensure Safe and Quality Regulated Products that are fit for both Local and Foreign Markets																												
3.1	**Reduce Significantly Substandard and Falsified/Counterfeit Pharmaceutical Products and Unwholesome Food**	3.1.1. Strengthen Intelligence and Enforcement activities	IR-3.1.1.1. Level of Substandard and falsified medicines in Nigeria	Achieve and sustain 5% of Substandard and Falsified medicines in circulation by 2023	Reduce to 7%, 6% and 5% by 2019, 2020 and 2021 & sustain till 2023	D, I&E	Reduced level of SF medicines in circulation	1. Yearly Survey on quality of medicines 2. Provision of 100 units of field kits and tools for on-the-spot detection of fake and counterfeit products in the country.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		3. 1.2. Improved Collaboration with Regulatory Authorities of Exporting Countries; Shipping Lines and Whistle Blowers from Identified Vulnerable Exporting countries	IR-3.1.2.1. Proportion of the increase in the number of alerts received by NAFDAC on incoming Illicit/Falsified Drugs.	50% Increase in the number of alerts received by NAFDAC on incoming Illicit/Falsified Drugs tracked	Achieve 35% by 2020, 40% by 2021; 45% by 2022 & 50% by 2023	DG D, PID D, NCS	50% Increase in the number of alerts received by NAFDAC on incoming Illicit/Falsified Drugs tracked	1. Identification of source countries for illicit drugs 2. Risk profiling of importers 3. Collaboration with International Narcotics Controlled Board (INCB) for alert notification 4.Create database for input of alerts 5. Engage the CRIA Agents for prompt alerts on failed products	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		3.1.3. Strengthen GMP inspections	IR-3.1.3.1. Proportion of requested GMP inspections conducted.	90% of requested GMP inspections conducted by 2023.	Achieve 70% by 2020; 80% by 2021, 85% by 2022 & 90% by 2023	D, DER D, VMAP D, FSAN	Strengthened GMP inspections	Conduct regular GMP inspections.		x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-3.1.3.2. Proportion of requested GMP inspections conducted within timelines	90% of requested GMP inspections conducted within timelines by 2023.	Achieve 70% by 2020; 80% by 2021, 85% by 2022 & 90% by 2023	D, DER D, VMAP	Strengthened GMP inspections	Conduct regular GMP inspections.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-3.1.3.3. Proportion of Pharmaceutical facilities inspected with satisfactory GMP.	Ensure that 90% of pharmaceutical manufacturing facilities are compliant by 2023	Achieve 70% in 2020, 80% by 2021 85% by 2022 & 90% by 2023.	D, DER D, VMAP	Improved capacity of local pharma companies	1. Regular monitoring of pharma manufacturing companies 2. Improve timely submission of inspection reports. 3. Improve timely submission of sampled pharmaceutical products to laboratories	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
			IR-3.1.3.4. Proportion of Food/Feeds facilities inspected with satisfactory GMP.	Ensure that 90% of Food/feeds manufacturing facilities are compliant by 2023	Achieve 70% in 2020, 80% by 2021 85% by 2022 & 90% by 2023.	D, FSAN D, VMAP	Improved capacity of local Food producing facilities	1. Regular monitoring of Food manufacturing companies 2. Improve timely submission of inspection reports. 3. Improve timely submission of sampled food products to laboratories	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
			IR-3.1.3.5. Proportion of herbal medicines manufacturing facilities inspected with satisfactory GMP	Strengthen GMP Inspection of herbal medicines manufacturing facilities to ensure that at least 60% are consistently compliant by 2023	Achieve 20% by 2020, 40%, and 50% by 2021, 55% by 2022 & 60% by 2023	D, DER	GMP compliant herbal medicine manufacturing facilities	Regular inspections of herbal manufacturing companies	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		3.1.4. Strengthen capacity of local Pharmaceutical manufacturing facilities to improve compliance and self sufficiency	IR-3.1.4.1. Proportion of medicines manufactured locally.	60% of Medicines manufactured locally by 2023	Achieve 35% by 2020, 40% by 2021, 55% by 2022 & 60% in 2023	D, DER	Strengthened Regulatory Controls of Local Manufacturing Companies	Increase routine inspections of local manufacturing facilities	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-3.1.4.2. Proportion of APIs sourced locally.	10% of APIs obtained locally by 2023.	Achieve 2% by 2020, 4% by 2021 8% by 2022 & 10% in 2023	D, DER	Increased local availability of APIs	Increase routine inspections of local API sources	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-3.1.4.3. Proportion of staff with capacity for API DMF review	At least 80% of relevant staff with capacity for comprehensive API Drug Master File review by 2023	Achieve 60% by 2020, 70% by 2021, 75% by 2022 & 80% by 2023.	D, DER	Drug Master Reviewers available	1. Training of staff on Drug Master review. 2. Training of stakeholders									x	x	x	x	x	x	x	x	x	x	x	x
		3.1.5. Strengthen Clinical Trials.	IR-3.1.5.1. Designation of NAFDAC as a WHO Regional Centre by 2023	Achieve the Designation of NAFDAC as a Regional Centre of Excellence for Clinical Trials by 2023.	Achieve designation as WHO Regional Centre by 2023.	DG, NAFDAC; D, DER	NAFDAC designated as a Regional Centre of Excellence & sustained	1. Provision of relevant guidelines and SOPs. 2. Sign an MOU with NHREC specifying input requirements, responsibilities and communication exchange by the two institutions (NAFDAC and NHREC involved in Clinical Trial oversight. 3. Continuous training of staff and stakeholders.										x				x				x		

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
		3.1.6. Improve Strategic partnership	IR-3.1.6.1. Proportion of planned collaborations and alignments established.	Achieve 70% of planned collaborations and alignments by 2023	Achieve 40% by Q4 2019, 50%, 60%, 65% and 70% in 2020,2021,2022, & 2023.	DG, NAFDAC	Improved collaboration and alignments with stakeholders	1 Collaborate with relevant stakeholders. 2. Promote the Alignment of Regulatory Standards across multiple countries to facilitate greater efficiency in key Regulatory Functions.							x	x			x	x			x	x			x	x
3.2	**Strengthen Risk-Based Post-Marketing Surveillance of Food and Medical Products**	3.2.1. Categorization of food and medical products into high, medium and low risk due to a large number of products and the huge cost of conducting country-wide PMS	IR-3.2.1.1. Proportion of structured PMS of target products conducted per quarter, year	Conduct 100% of sampling and testing of target medicines and Foods in 2021, 2022 and 2023	Achieve 100% of set performance target each year from 2021-2023	D, PV-PMS D, DER D, LS (D) D, I&E Zonal Directors	Bi-annual structured PMS Conducted And Institutionalized	1. Itemization of criteria for inclusion of products into target list for PMS 2. Develop protocol for risk-based sampling and testing of target products 3. Periodic training of multi-directorate survey team 4. Risk-based sampling and testing 5. OOS/Failure investigations and prompt regulatory actions eg. placement of holds, mop-up, seizures, etc 6. Dissemination of findings to stakeholders	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		3.2.2. Heightened PMS and GDP inspections at wholesale, distributors and retail facilities	IR-3.2.2.1. Proportion of scheduled PMS activities, GDP inspections conducted per quarter, year	Conduct 100% of PMS activities and GDP inspections scheduled in 2021, 2022 and 2023	Achieve 100% yearly of set performance target	D, PV-PMS D, DER D, LS (D) D, I&E Zonal Directors	Sustained efficient and effective PMS systems country-wide	1. Mystery shopping 2. Mop-Up inspections 3. "Placement of Hold" inspections 4. GDP inspections 5. Sampling and testing of food and medical products 6. Investigation of consumer complaints	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		3.2.3. Effective recall of violating products from the supply chain to protect the public	IR-3.2.3.1. Proportion of violating products recalled per quarter, year	Effectively oversight recall of violating products by MAHs	Achieve 100% of recalls of violating products	D, PV-PMS D, I&E	Strengthened recall systems for violating products by MAHs	1. Implement SOP for recall of violating products 2. Training and retraining of MAHs on recalls 3. Communicating information on recalls to relevant authorities eg WHO, SGF, JIB etc. 4. Remove violating products (SF) medical products from the supply chain via appropriate regulatory actions	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
3.3	**Strengthen Regulatory Environment for Safety of Foods.**	3.3.1. Improve inspection and monitoring of food/feeds production facilities.	IR-3.3.1.1. Proportion of food and feeds production facilities monitored/inspected	80% of registered food, feeds and medication facilities inspected by 2023.	50% by 2020, 60% by 2021, 70% by 2022 & 80% by 2023.	D, FSAN D, VMAP	Improved quality and safety of food, feed and animal medications.	1. Routine monitoring of food/feed production facilities. 2. Training and sensitization of farmers, distributors and agro dealers on safe and responsible use of pesticides and agro-chemicals in 2 geo-political zones. 3. Implementation mandatory HACCP Policy in animal feed and animal feed manufacturing facilities. 4. Conduct GMP/GHP Inspections and forward such reports to R&R in a timely manner.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
3.4	**Ensure Strict Utilization of Controlled Drugs for Medical Purposes**	3.4.1. Improved control of Narcotics and controlled Substances to identify diversion and abuse.	IR-3.4.1.1. Proportion of finished Narcotics utilized by health facilities.	100% of available finished Narcotics is utilized by health facilities by 2023.	Achieve 85% by 2020 95% by 2021; 100% by 2022 & sustain till 2023	D, NCS	Improved control of Narcotics and control Substances to identify diversion and abuse.	1. Carry out drug abuse sensitization awareness programmes. 2. Collaborate with International Narcotics Control Board for alert notification. 3. Increase monitoring to ensure compliance with requirements for distribution of controlled substances 4. Implement the Zonal distribution of finished narcotics 5. Timely issuance of permits to import and clear psychotropic substances.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-3.4.1.2. Effective documentation of controlled substances to avert diversion and abuse.	90 % increase in compliance to requirements for importation /distribution of controlled substances.	Achieve 85% by 2020 95% by 2021; 100% by 2022 & sustain	D, NCS	Improved compliance	1. Regular sensitization and enlightenment programmes 2. Conduct regular inspections to verify proper storage and handling and utilization of controlled substances and precursor chemicals.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
			IR-3.4.1.3. Proportion of Drug abuse Sensitization and awareness programmes conducted	Conduct 80% of scheduled Drug abuse Sensitization and awareness programmes	Achieve 65% by 2020 70% by 2021; 750% by 2022 & 70% by 2023	D, NCS	Reduced drug abuse in Nigeria	1. Conduct regular Drug abuse Sensitization and awareness programmes in schools, markets 2. Pay advocacy visits to opinion leaders	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
SF4: CONTINUOUS MONITORING ALONG THE SUPPLY CHAIN - Goal: To Safeguard the Health of the Population																												
4.1	**Strengthen Good Distribution Practice of Regulated Products from Pre-Shipment and Local Manufacturers to the End User within the country (Nigeria).**	4.1.1. Strengthen GDP Inspections	IR-4.1.1.1. Proportion of planned GDP inspections conducted	90% of planned GDP inspections conducted	Achieve 75%, 80%, 85% and 90% in 2020, 2021, 2022, 2023	D, PV/PMS D, DER D, PID D, I&E	Improved GDP compliance	1. Conduct training of NAFDAC staff on GDP inspections. 2. Carryout regular GDP inspections	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
				Ensure that 60% of drug wholesalers and distributing facilities are compliant.	Achieve 40%, 50%, 55% and 60% in 2020, 2021, 2022, 2023	D, PV/PMS D, DER D, PID D, I&E	Improved GDP compliance	Carryout GDP inspections.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
				100% adherence to timelines for key GDP processes.	Achieve 90% by 2019, 100% by 2020 and sustain till 2023	D, PV/PMS D, DER D, PID D, I&E	Improved GDP compliance	Timely submission of inspection reports	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
				Develop a data base and directory of 100% of facilities involved in the distribution and sale of medicines and other regulated products.	Achieve 70%, 80%, 90% and 100% in 2020, 2021, 2022, 2023	D, PV/PMS D, DER D, PID D, I&E	Improved GDP compliance	Continuous profiling of facilities involved in the distribution and sale of medicines and other regulated products.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-4.1.1.2. Proportion of relevant staff trained on GDP Inspections	Train 90% of relevant Personnel on GDP Inspections	Achieve 60%, 70%, 80% and 90% in 2020, 2021, 2022, 2023	D, PV/PMS D, PR&S	Improved GDP Inspection competence	Training of staff on GDP Inspections	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
4.2	**Ensure Quality of Pharmaceutical Products via implementation of nationwide Track**	4.2.1. Implementation of Traceability Systems	IR-4.2.1.1. Proportion of identified track and trace technologies procured	Procure 95% of identified technologies for track and trace system	Achieve 70% by 2020, 80% by 2021,90% by 2022 & 95% by 2023	DGN D, DR&RA D, PV/PMS	Improved control of illicit regulated products	Procurement of identified technologies for track and trace system	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
	and Trace System using GS1 Standards and other Detection systems		IR-4.2.1.2. Proportion of procured GS1 compliant track and trace protocols/technologies, and Truscan Detection Devices deployed	Deploy 90% of procured technologies for GS1 track and trace system and Truscan detection device	Achieve 60% by 2021, 80% by 2022 & 90% by 2023	DGN D, DR&RA D, PV/PMS NAFDAC Traceability Office	Improved control of illicit regulated products	Deployment of procured technologies for track and trace system and Truscan detection device	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-4.2.1.3. Level of implementation of traceability systems and Truscan use/detection	Implement traceability system and SFs detection for 60% of Pharmaceutical products	Achieve 40% by 2021, 50% by 2022; 60% by 2022 & sustain till 2023	D, DR&RA D, FR&RA D, PV/PMS NAFDAC Traceability Office	Effective detection of falsification and illicit distribution of regulated products	1. Development and Review of relevant guidelines 2. Training of relevant staff																				
		4.2.1. Empower and enhance traceability knowledge and surveillance capacity of staff	IR-4.2.1.1. Proportion of identified innovative portable devices (to screen for poor quality medicines) procured and tracebility protocols adopted	Increase by 50% the acquisition and deployment of ICT systems and protocols for improved I&E, PID and PMS activities by 2021.	Achieve 35% by 2020, 60% by 2021; 70% by 2022 and sustained by 2023	DGN D, I&E D, PV/PMS NAFDAC Traceability Office	1. Improved track and trace (visibility) of pharmaceutical products in the supply chain 2. Improved detection of SF products	Procurement of more detection devices and adequate training of staff on use of track and trace technology	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-4.2.1.2. Proportion of procured innovative portable devices (to screen for poor quality medicines) deployed	Deploy 100% of procured innovative portable devices to screen for poor quality medicines	Achieve 35% by 2020, 40% by 2021; 45% by 2022 & 50% by 2023	DGN D, I&E D, PV/PMS NAFDAC Traceability Office	1. Improved track and trace (visibility) of pharmaceutical products in the supply chain 2. Improved detection of SF products	Deployment of more traceability applications/detection devices	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-4.2.1.3. Proportion of relevant staff trained on traceability principles and systems, the use of detection devices acquired & deployed as well as on New/Current	Train 90% of relevant Personnel on traceability systems understanding and applications, use of detection devices acquired & deployed as well as on New/Current	Achieve 60%, 70%, 80% and 90% in 2020, 2021, 2022, 2023	D, I&E D, PR&S NAFDAC Traceability Office	1. Knowledgeable, capable and confident personnel on track and trace systems and applications 2. Improved detection of SF products	Training of relevant staff on traceability systems detection devices acquired & deployed as well as on New/Current Counterfeiting and Anti-Counterfeiting Technologies	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
			Counterfeiting and Anti-Counterfeiting Technologies	Counterfeiting and Anti-Counterfeiting Technologies by 2022.																								
4.3	**Strengthen the Platform for Easy Reporting of Adverse Events and Timely Resolution**	4.3.1. Promote the use of ADR E-reporting form available on the NAFDAC website.	IR-4.3.1.1. Proportions of reports generated from the website.	80% increase in the number of ADR report annually	Achieve 80% by 2019 and sustain till 2023	D, PV/PMS	Improved dissemination of Adverse Events	1. Continuous monitoring of ADR events 2. Analysis and dissemination of ADR events 3 Reporting of the results	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		4.3.2. Partner with WHO to subscribe and deploy Mobile Safety Application (Med-safety App) for Nigeria.	IR-4.3.2.1. Proportions of reports generated from Med-safety application	Increase to 80% the number of ADR report annually.	Achieve 80% by 2019 and sustain till 2023	D, PV/PMS	Improved dissemination of Adverse Events	Continuous reporting of ADR to Upsalla Monitoring Centre	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		4.3.3. Training/Capacity building of pharmacovigilance Staff.	IR-4.3.3.1. Proportion of identified staff trained	100% of identified PV staff trained on the processing and analysis of ADR reports.	Achieve 70% by 2020, 80% by 2021, 90% by 2022, 100% by 2023	D, PV/PMS D, PRS	Improved ADR reporting	Continuos training and retraining of identified PV staff on the processing and analysis of ADR reports.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		4.3.4. Engagement and Sensitization of Healthcare providers and other stakeholders on the various ADR reporting platforms	IR-4.3.4.1. Proportion of planned sensitization workshops conducted	Conduct 80% of planned sensitization workshops/programs	Achieve 50% by 2020, 60% by 2021, 70% by 2022, 80% by 2023	D, PV/PMS D, PA	Improved ADR reporting	Continuus engagement and Sensitization of Healthcare providers and other stakeholders	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
SF5: EFFICIENT FINANCIAL AND PROCUREMENT MANAGEMENT - Goal: To Promote, Sustain, and Reinforce Transparency & Accountability in the Management of the Financial Resources of the Agency																												
5.1	**Adopt Responsible and Balanced Budgeting System**	5.1.1. Improve Evaluation of Financial Goals.	IR-5.1.1.1. Proportion of the approved budget implemented within specified timeline.	80% of planned/approved budget implemented by 2023.	Achieve 50% by 2020, 60% by 2021, 70% by 2022, 80% by 2023	D, F&A	Improved evaluation of financial goals.	Improve the implementation of planned/approved budget.		x				x				x				x				x		
		5.1.2. Adopt processes for tracking Resource Utilization.	IR-5.1.2.1. Proportion of utilized resources tracked	Track 100% of resources utilized	Achieve 100% by 2020 and sustain till 2023	D, F&A	Efficient Resource utilization	Deploy ICT mechanism for tracking resource utilization					x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
		5.1.3. Review of existing Internal Control Systems.	IR-5.1.3.1. Proportion of quarterly review meetings conducted.	Quarterly Review existing internal control systems.	4 Review meetings yearly	D, F&A	Effective Review Internal Control Systems.	Conduct Quarterly Review existing internal control systems.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
		5.1.4. Standardize Financial Reporting Format.	IR-5.1.4.1. Proportion of Annual Financial Report Standardized In line with IPAS.	Achieve 100% compliance with Annual Report standardization in line with IPSAS.	Yearly standardized financial reporting and advisory management.	D, F&A	Standardized Financial Reporting Format.	Yearly production of IPSAS compliant financial statement			x				x				x				x				x	
		5.1.5. Enhance the capacity of staff on SAGE Line X3 package, GIFMIS, Remita, IPSAS and IPPIS.	IR-5.1.5.1. Proportion of identified staff trained to proficiency level.	20% of identified staff trained to proficiency level by 2023.	Achieve 5% by Q4 2019 and 10%, 15%,18% & 20% by 2020,2021,2022, 2023)	D, F&A	Trained and proficient Accounting Officers	Continuous Training of personnel on Line X3 package, GIFMIS, Remita, IPSAS and IPPIS.	x				x				x				x				x			
5.2	**Implement Agency-wide Business Process Management Digital Platform**	5.2.1. Use of E-payment to Combat evasion by Clients & Concealment of Imported Regulated Products.	IR-5.2.1.1. Proportion of adopted electronic payments/collection platforms deployed by 2023.	Deploy 100% of adopted electronic payments/collection platforms by 2023.	90% by 2019, 100% by 2022 and sustain till 2023.	D, F&A D, PID	Automation of e-receipting, e-payment modules on PIDCARMS concluded by 2020	1. Needs assessment for implementation across all PID locations 2. Development and deployment of e-receipting and e-payment on PIDCARMS 3. Staff Training on use and benefits of e-payments in evasion of NAFDAC clearing processes.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		5.2.2. Strengthened survey system for Data Integrity & evidence-based decision.	IR-5.2.2.1. Proportion of survey tools deployed per quarter.	50% improvement in the deployment of survey tools through e-processes by 2023.	Achieve 35% by 2019, 40% by 2020, 45% by 2021, 48% by 2022 & 50% by 2023	D, PR&S	Strengthened survey system for Data Integrity & evidence-based decision.	Develop and deploy survey tools through e-processes.		x		x		x	x		x	x				x		x			x	x
		5.2.3. Strengthened M&E System.	IR-5.2.3.1. Proportion of quarterly M&E visit conducted.	100% Of Quarterly M&E Visits/exercises Conducted	4 quarterly M&E Reports annually	D, PR&S	Strengthened M&E System.	Quarterly M&E inspections.	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
			IR-5.2.3.2. Proportion of M&E reports review meetings.	100% Of M&E Review Meetings Conducted	Bi-annual M&E Review Meetings	D, PR&S	Strengthened M&E System.	Conduct regular M&E reports review meetings.		x		x		x		x		x			x				x			x
		5.2.4. Deployment of DHIS 2.0	IR-5.2.4.1. Proportion of Planned M&E Exercises conducted.	100% planned M&E visits conducted.	100% of planned quarterly M&E Exercises conducted	D, PR&S	Strengthened M&E system.	Conduct Quarterly M&E Exercise					x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
				Produce 100% Reports for M&E Visits conducted	100% M&E reports review meetings held	D, PR&S	Strengthened M&E system.	Regular review and upload of reporting templates.	x	x	x	x	x	x	x	x	x	x	*	x	x	x	x	x	x	x	x	x
			IR-5.2.4.2. Proportion of Directorates/Zonal reports submitted via DHIS	100% of Directorates and Zonal reports submitted via DHIS	100% Directorates/zonal reports via DHIS by 2023.	D, PR&S	Full deployment of DHIS 2.0s	Routine monitoring of timelines of Directorates/zones report submission via DHIS	x	x	x	x	x	x	x	x	x	x	*	x	x	x	x	x	x	x	x	x
5.3	**Increase Revenue Drive and Sustainability of Financial Best Practices**	5.3.1. Encourage regular meetings and advocacy visits to Nigeria Customs Service and other relevant MDAs	IR-5.4.1.1. Proportion of meetings conducted/carried out	Increase by 50% meetings with Nigeria Customs Service and other relevant MDAs	30%, 40%, 45% & 50% by 2020, 2021, 2022, 2023 respectively.	D, PID	Increase by 50% meetings with Nigeria Customs Service and other relevant MDAs	Engagement of the Nigeria Custom Service and other relevant MDAs	x	x	x	x	x	x	x	x	x	x	*	x	x	x	x	x	x	x	x	x
		5.3.2. Quarterly Revenue Surveillance Visits	IR-5.4.1.1. Level of increase in revenue achieved yearly	Increase by 90% revenue from that of 2018	Achieve 25%, 45%, 70%, 85% & 90% by 2019, 2020, 2021, 2022, 2023.	D, F&A	Increased revenue generation	1. Conduct quarterly revenue surveillance visits. 2. Automation of payment platform	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		5.3.3. Deploy and sustain new technologies to enhance regulatory activities	IR-5.4.2.1. Proportion of identified regulatory activities provided ICT support.	90% of identified regulatory activities provided ICT support	Achieve 70%, 80%, 85%, 90% by 2020, 2021, 2022, 2023.	Head, ICT	Improved revenue generation.	1.Conduct inventory of assets and applications to enhance Asset Management. 2. Develop and publish service catalog. 3. Adopt Cobit 5.0 and ITIL methodology 4. Provide guidance for acquisition and management of IT contracts.					x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
5.4	**Implement an Efficient Procurement Process**	5.4.1. Institutionalize Transparent Procurement and Tendering process	IR-5.4.1.1. Proportion of procurement /tendering activities carried out in compliance with laiddown procedure	Carry out 100% of procurement/tendering activities in line with the Procurement Act 2007 by 2023	Every procurement /tendering activities carriedout in line with laid down procedure	DG AD, Procurement	Efficient procurement/tendering system	1. Review and categorize the proportion of Agency's spending managed and unmanaged by the Procurement Unit. 2. Digitalize internal requisition process. 3. Centralized purchasing to reduce unmanaged spending 4. Effectively track and monitor supplier contracts 5. Adopt and deploy Procurement Management	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

S/N	OBJECTIVES	INITIATIVE	KPIs	PERFORMANCE TARGET	JOURNEY TRACKER	RESPONSIBLE	TIMELINE		2019				2020				2021				2022				2023			
							OUTPUT	ACTIVITY	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
								Software to help bring more spend under management.																				
		5.4.2. Reduce Procurement Cycle	IR-5.4.2.1. Proportion of Procurements completed (placed) within agreed timelines	90% of Procurement Activities done within timelines	Achieve 70%, 75%, 80%, 90% by 2020, 2021, 2022, 2023.	DG AD, Procurement	Efficient procurement system	1. Minimize the time it takes to produce and approve a requisition 2. Get approved Purchase Orders (PO) into the hands of vendors more quickly 3. Proactively monitor open orders 4. Provide vendor self-service portals to empower vendors to enter their own invoices	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		5.4.3. Reduce Average Cost of Processing Purchase Orders	IR-5.4.3.1. Level of Reduction in Average Cost of Processing Purchase Orders	Reduce by 30% Average Cost of Processing Purchase Orders	Achieve 10%, 15%, 20%, 30% by 2020, 2021, 2022, 2023	DG AD, Procurement	Efficient Purchase Orders processing	1. Incorporate vendor self-service 2. Add mobile requisition and approval capabilities 3. Using guided buying catalogs and Punch-out tools	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		5.4.4. Review Performance Of Existing Service Providers	IR-5.4.4.1. Performance Records of Services Providers Assessed and Documented	Review Performance of 80% of Existing Service Providers	Achieve 60%, 70%, 75%, 80% by 2020, 2021, 2022, 2023.	DG AD, Procurement	Efficient procurement system	Assessment of Service Providers across all the Directorates by the Staff of Procurement Unit	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x
		5.4.5. Capacity Buiding of Procurement Staff and Procurement Committee members	IR-5.4.5.1. Proportion of Identified Staff Trained on Procurement Methods, Applications Of e-Procurement, Evaluation of Bids, and Effective Procurement Process Record and Documentation	Train 30 staff including members of Procurement Planning and Evaluation Committees on Procurement Methods, applications of e-Procurement, Evaluation of bids, and Effective Procurement Process record and Documentation	Achieve 70%, 80%, 90% and 100% in 2020, 2021, 2022, 2023 respectively	DG AD, Procurement	Efficient Procurement System Management	Continuous training of staff including members of Procurement Planning and Evaluation Committees	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x

CHAPTER SIX
MONITORING & EVALUATION FRAMEWORK

This Strategic Plan (2018-2023) will only be successful when there is a clear-cut monitoring and evaluation framework that is realistic and up to date. This will enable the Agency to monitor her progress in real time and to make adjustment as necessary. The M&E framework is a product of many consultations and its indicators were chosen in a participatory manner to ensure ownership and collective responsibility.

This Monitoring and Evaluation Plan serves as the tool for planning, implementing, tracking, and documenting progress towards the objectives and expected outcomes. It also serves as a guide for systematically tracking activity outputs and outcomes, and for documenting good practices as well as unintended consequences that will be shared with key stakeholders for learning purposes.

The specific objectives of the framework are to:

i. Ensure that all activities are carried out in order to achieve the objective of the Strategic plan.
ii. Ensure that data collection is done routinely and consistently
iii. Provide reliable data with which the performance of the Strategic plan can be measured.
iv. Support evidence based and timely decision making.

NAFDAC MONITORING AND EVALUATION FRAMEWORK

M&E Goal: Enhanced Agency Performance and Outcomes				
Strategic Objectives	**Main activities**	**Verifiable indicators**	**Means of verification**	**Frequency**
Ensure that all activities are carried out in order to the achieve the objective of the Strategic plan.	Implementation review meetings/workshops with directorates.	▪ ***Proportion of planned implementation review meetings held*** ▪ ***Proportion of Directorates/Zones represented at review meetings***	▪ Meeting reports ▪ Attendance register	Quarterly
	All Directorates/Units are monitored to ensure strict compliance with the activities provided in the Strategic Plan	▪ ***Proportion of planned M&E visit conducted*** ▪ ***Dashboard ranking Directorates and zones performance on strategic plan implementation developed***	▪ Monitoring report from PRS Directorate	Quarterly
	The Strategic Plan performance is reviewed as scheduled.	▪ ***Proportion of Directorate KPI baselines determined*** ▪ ***Number of new indicators/activities introduced or removed during review***	▪ Strategic Plan review report	Mid-term review (2021)/ End of Strategic Plan review report (2023)
Ensure that data collection is done routinely and consistently	Review/develop and pilot test all data collecting tools for accuracy and consistency	▪ ***Proportion of Directorates' reporting templates uploaded on DHIS***	▪ Copies of data collection tools in use	Annually
	Train data collectors in appropriate methods of data collection using the tools	▪ ***Proportion of Data reporting officers trained on DHIS use***	▪ Training reports	Annually
	Collect data as at when due and in line with protocols	▪ ***Proportion of identified NAFDAC formation reporting via DHIS***	▪ Copies of monthly reports	Half yearly
Provide reliable data with which the performance of the Strategic plan can be measured.	Ensure timely and accurate collection of data	▪ ***Proportion of Directorates reporting within approved timeline***	▪ Copies of M&E reports	Monthly
	Ensure data are clean and analyzed in a timely manner.	▪ ***Proportion of complete reports received***	▪ Hard copies of data/ data stored in separate external drives	Monthly
	Timely collection, analysis, storage and use of data	▪ ***Proportion of planned M&E validation reports developed***	▪ Document of budget released ▪ Receipt of purchase	Quarterly
	Train M&E staff to understand M&E principles and carry out due diligence for all M&E activities in NAFDAC.	▪ ***Proportion of M&E Staff trained on Core M&E activities***	▪ Training Reports ▪ M&E activity reports ▪ Attendance register ▪ Pre and post tests	Annually
Support evidence based and timely decision making based on Agency wide data.	Ensure that organization's decisions are based on facts and figures derived from data analysis	▪ ***Proportion of M&E reports discussed at council meeting***	▪ Research and M&E reports ▪ NAFDAC TMC/SMC reports ▪ Attendance register	Annually
	Top management commit to data demand and information use (DDIU)	▪ ***Proportion of Management decisions emanating from evidences gathered from M&E reports***	▪ NAFDAC TMC/SMC reports ▪ Attendance register	Annually

M&E Goal: Enhanced Agency Performance and Outcomes				
Strategic Objectives	**Main activities**	**Verifiable indicators**	**Means of verification**	**Frequency**