

## Impact Evaluations: NHSSP training makes an impact in Nepal

“Your training programmes are having a real impact”

That was the message to Ganesh Ram Nhamafuki, the Capacity Enhancement Advisor for the Nepal Health Sector Support Programme (NHSSP) when he received feedback on workshops held in Kathmandu for government staff.

Ganesh leads the Capacity Enhancement Programme, part of the NHSSP’s Health Infrastructure work, which is helping to strengthen institutional capacity and skills of staff in the Ministry of Health and Population (MoHP) and Department of Urban Development & Building Construction (DUDBC). It also focuses on sharing information and knowledge with private sector construction contractors and professionals.

### Improve delivery and design

Ganesh has designed and implemented workshops, training sessions and other activities, helping nearly 400 people to develop their skills. But without knowing the impact of these sessions, Ganesh doesn’t know if it’s making any difference; “Impact evaluation exercises will become increasingly important from now on” he said. “I need to measure how effective these events are, and look for ways to improve the programme delivery and design.”

To do this he commissioned Kathmandu-based companies HURDEC and Scott Wilson Nepal to carry out independent assessments of three training exercises held in November 2017 and April 2018 on ‘Policy Skills Development’, ‘Orientation on Retrofitting and Government Procurement’, and ‘Planning, Design and Implementation of Multi-hazard Resistant Health Infrastructure’.

### Policy skills for decision-makers

The ‘Policy Skills Development’ was led by NHSSP specialists in health infrastructure and experts in Nepal governance issues; Mr Balananda Poudel, a former senior civil servant and widely rated as the



Ganesh Ram Nhamafuki, NHSSP Capacity Enhancement Advisor architect of the new Nepal federal structure, and Mr Sudip Pokheral, an adviser to the former Minister of Health and Population.

Following this training, HURDEC interviewed senior staff from MoHP and DUDBC to find out how they found it. Everyone said they now had a better understanding of federal and sub-national government structures and roles and responsibilities that meant they were more confident in designing activities, programmes and services to cater for their operational objectives and work plan.

### Technical skills for technical staff

“The skills modules are a key part of our commitment to enhance the technical expertise of government engineering and design professionals”, said Ganesh. “We need to ensure that our counterparts are familiar with new techniques of retrofitting and health facility standards, particularly those workers located in district offices.”

The NHSSP’s Health Infrastructure team and Nepal government partners ran two training events covering approaches to seismic retrofitting, standards and guidelines for the construction of health infrastructure, and the Nepal government’s online procurement system.

The evaluation showed government staff were very engaged – 70 per cent of the workshop participants

rated the NHSSP team’s approach to facility decanting as a key area of learning. The training on different forms of retrofitting was also ranked as a key area of learning by almost 50 per cent of all trainees.

Making sure that training is applied in the workplace is the main objective for any capacity enhancement exercise. Ganesh was pleased to find that more than half of the evaluation respondents said they had sought further information on retrofitting after they took part in the training. Even more exciting is that 30 per cent of participants reported that they had been assigned tasks or projects related to retrofitting after the training. They all said that the learning event helped them to overcome challenges and be more efficient in their work.

## Lessons learned, moving forward

Participants were keen that these trainings should continue and be rolled-out to more technical staff in DUDBC. They felt retrofitting and procurement were key learning areas, and there was a call for more practical exercises to be introduced as part of the in-depth training. “This kind of feedback is essential,” said Ganesh, “and I’ll be developing ideas for hands-on training at the next round of workshops.”

Moving forward, the NHSSP Health Infrastructure team will roll out more training events to government staff, as well as briefings to private sector contractors and construction professionals. Spreading the skills of retrofitting is an essential part of the programme’s objective to show how to make Nepal’s hospitals seismically secure.



## BACKGROUND

**Retrofitting:** Seismic retrofitting strengthens the structural integrity of the hospital buildings against earthquakes. This means reinforcing walls, floors and framework to survive in a disaster. It also includes protecting non-structural building components – such as partitions, ceilings, shelving, and utility supplies. Together, these aspects seek to ensure that service delivery will continue immediately after an earthquake.

**Decanting:** the NHSSP retrofitting works will take place at two priority hospitals. These will remain operational throughout the construction period. ‘Decanting’ refers to the temporary transfer of medical services, units, wards and patients to a purpose-built facility on site, allowing work to take place in those areas. On completion, the areas are re-occupied. Decanting is a critical component of the NHSSP’s approach to patient-centred construction, and will be essential to the smooth implementation of these projects.

## Contact

Ganesh Ram Nhamafuki  
NHSSP Capacity Enhancement Advisor  
E: ganesh@nhssp.org.np

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