



# **Nepal Health Sector Support Programme III (NHSSP – III)**

**Joint Hospital Assessment Report – Karnali Province  
Mehelkuna Hospital  
Final Draft 2  
6 August 2019**



*Disclaimer: -*

*This material has been funded by UKaid from the UK government; however the views expressed do not necessarily reflect the UK government's official policies”*

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## **2 Introduction**

### **2.1 Background**

The Nepal Health Sector Support Programme 3 (NHSSP) is a four-year programme designed to support the Government of Nepal (GoN) in implementing the Nepal Health Sector Strategy (2015-2020). The NHSSP is funded by UK Aid / UK Department for International Development (DFID) and aims to enhance the capacity of the Ministry of Health and Population (MoHP) and Department of Urban Development and Building Construction (DUDBC) to build a resilient health system providing quality health services for all.

The health systems component of NHSSP provides support to the MoHP to improve health policy-making and planning, procurement and financial management, health services, and the use of evidence for planning and management. The NHSSP's infrastructure component focuses on strengthening the capacity of government to develop resilient health infrastructure able to withstand natural disasters and climate change-induced hazard. The NHSSP Health Infrastructure team comprises architects, engineers, and Geographical Information System (GIS) experts, operating in the following work areas:

- development/improvement of national and provincial health infrastructure policy
- promoting the use of a planned integrated approach to health infrastructure development
- development of appropriate standards and codes, including the national standards for health infrastructure, and codes for seismic retrofitting of health infrastructure
- building the capacity of MoHP in evidence-based health infrastructure policy-making and managing an integrated, resilient health service
- building the capacity of the DUDBC to develop, manage and maintain health infrastructure works more effectively and efficiently, and to build technical skills in specialist aspects of health infrastructure development including utility services, healthcare waste management, seismic retrofitting and procurement procedures
- providing technical support for the seismic and functional retrofitting of two major hospitals at Bhaktapur and Pokhara

In the context of the Nepal federal administrative structure, the NHSSP Health Infrastructure team is providing technical assistance to sub-national governments. It is assisting municipalities to develop short-, medium- and long-term interventions to improve health facilities.

Currently, the NHSSP health infrastructure team working with five Provincial Ministries of Social Development, primarily providing technical, design and planning support for improving health facilities. In Karnali Province, the team is working jointly with USAID's Strengthening Systems for Better Health and Saving Newborn Lives (SSBHSNL). The SSBHSNL programme is supporting the assessment of human resources and service delivery in selected hospitals across the province, the NHSSP team is carrying out assessments on health infrastructure, connectivity and utilities.

### **2.2 Assessment Methodology and Process**

The NHSSP team is guided by the following key principles in making assessments and recommendations for development of health infrastructure:

- Promoting integrated and efficient use of health infrastructure to provide better services to users
- Maximizing the use of existing facilities, and extending their operational life span where feasible and economic
- Improving operational efficiency and connectivity within the health facilities network, and promoting referrals to relevant facilities

- Promoting the use of and compliance with the Nepal Health Infrastructure Development standards 2017 (NHIDS) and the Standard Guidelines for the Development of Health Infrastructure 2017

A technical team from the Nepal Health Sector Support Programme 3 (NHSSP) carried out a field assessment at Dullu Hospital on 19 December 2018, at the request of the Ministry of Health and Population (MoHP).

The general methodology can be summarised as:

**2.2.1 Collection of data and information:** Collection of secondary data on the hospital from sources including DoHS, MoSD information, Department of Urban Development & Building Construction (DUDBC) records – Divisional Offices and Provincial Project Implementation Units, hospital records, reports from previous project consultants.

**2.2.2 Field assessment tools:** The NHSSP team used its standard checklist and needs assessment tool to gather information on buildings on the site.

**2.2.3 Field assessment exercise:** The NHSSP technical experts carried out a field assessment on 19 December 2018, facilitated by the hospital management.

**2.2.4 Consultation meetings:** The NHSSP team have engaged closely with the Provincial Minister, representatives of the MoSD, hospital management, staff, the local authority and other relevant stakeholders to secure information on proposed developments, operational requirements, catchment areas, road networks, and future plans.

**2.2.5 Analysis of data and information:** The NHSSP team analysed the primary and secondary data against a range of factors, including Health Infrastructure Information System (HIIS) data, Geographical Information System (GIS) maps, existing drawings, health facility standards and categories drawn from Nepal Health Infrastructure Development Standards (NHIDS). This analysis identified infrastructure and service delivery gaps, problems and key issues.

## 4 Infrastructure (NHSSP)

### 4.1 Site, buildings and existing situation

Mehelkuna Hospital is in Mehelkuna municipality, Surkhet District, and was established as Primary Healthcare Centre in 2054 BS and later upgraded to Hospital in 2068 BS. It is located in the Babai Bheri valley, with good road connections to Birendranagar. The Hospital has been categorized as a Primary A2 Level hospital under the Nepal Health Infrastructure Development Standards (NHIDS).



Figure 1: Mehelkuna Hospital location

According to the Health Infrastructure Information System (HIIS), the immediate hospital catchment within 7 km radius (between 2-3 hours walk) is 35,467 people. The dependent population – the total number of people in the District who could be referred to Mehelkuna Hospital – is over 165,807 (see Table 1 and Figure 2).

Hospital	Dependent Population	Catchment Population (within 7kms radius)	Categorized Status
Mehelkuna Hospital	165,807	35,467	Primary Hospital Type A2

Table 1: Mehelkuna Hospital Dependent Population

The dependent population is nearly 5 times higher than the immediate catchment population, supporting the categorization of the Hospital at Primary A2 level.

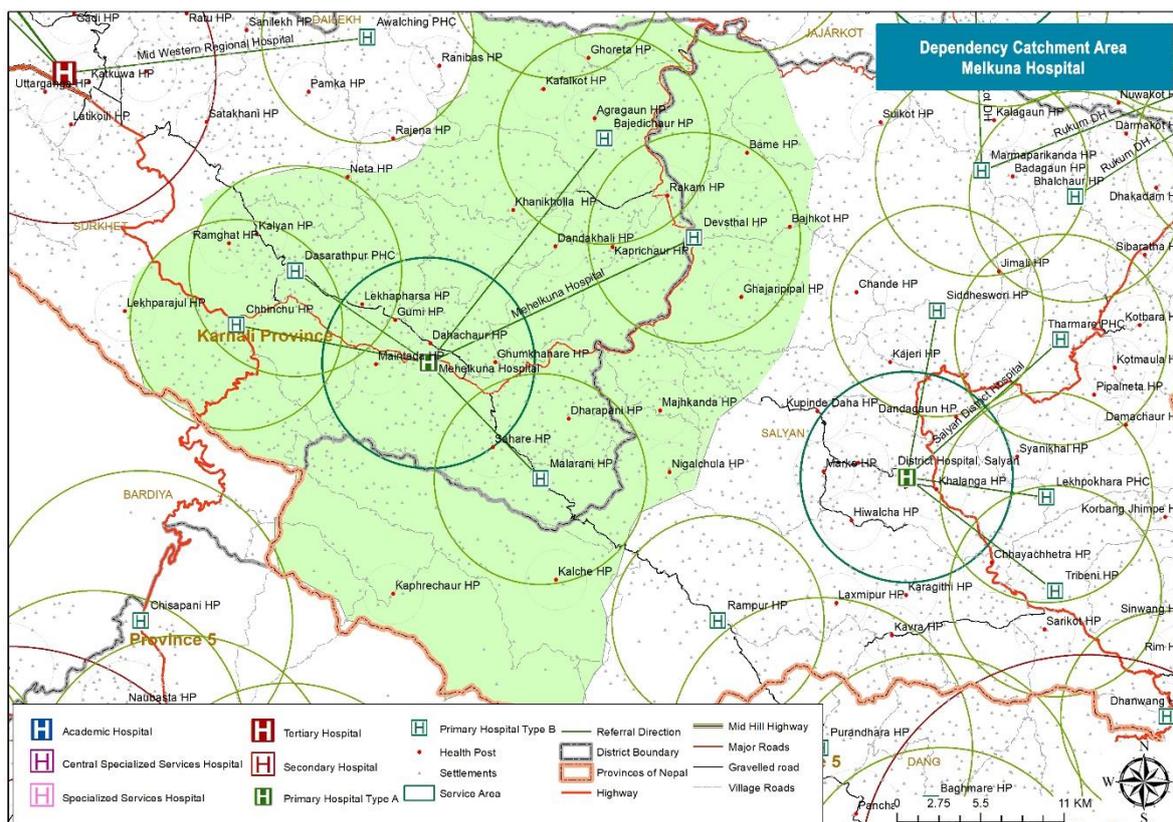


Figure 2: Mehlkuna Hospital Dependency Catchment Area

### Existing buildings

The NHSSP Health Infrastructure team carried out a field inspection at Mehlkuna Hospital in December 2018, at the request of the Ministry of Health and Population (MoHP). The existing facility consists of the following buildings:

SN	Building Name	Year of Construction	Ground Coverage (Sq. Feet)	Number of Stories	Building Typology
1	Outdoor	2057	2200	1	BM in Cement Mortar with RCC Slab
2	Indoor	2057	2568	1	BM in Cement Mortar with RCC Slab
3	Nurse Quarter	2054	1210	2	BM in Cement Mortar with CGI Roof
4	Store	2054	306	1	BM in Cement Mortar with CGI Roof
5	Toilet	2054	124	1	BM in Mud Mortar with RCC Slab
6	Doctor Quarter	2054	1531	1	BM in Cement Mortar with RCC Slab
7	Kitchen	2054	259	1	BM in Cement Mortar with CGI Roof
8	Training Hall	2054	725	1	BM in Cement Mortar with CGI Roof

There is a pump for water supply and an incinerator / waste disposal area to the NE side of the hospital site.



*Inpatient Block*



*Nurse Quarter*



*Store*



*Toilet*



*Doctor's Quarter*



*Kitchen*



*Training Block*

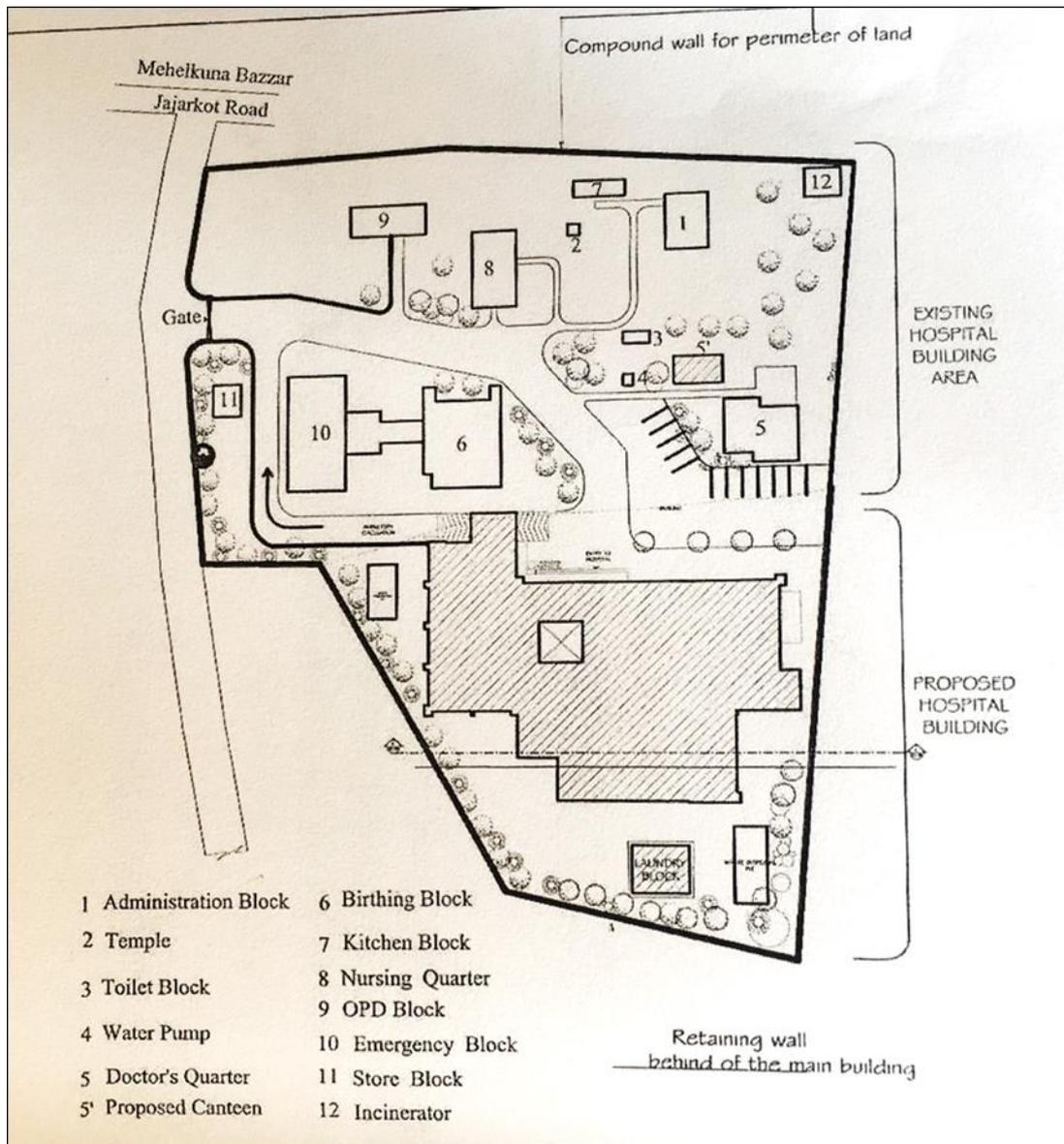


*Outpatient Block*

## 4.2 Interventions

The MoHP has initiated a major upgrade of Mehelkuna Hospital to Primary A2 level, and the provision of a new hospital building is underway adjacent to the existing buildings (see Figure 3).

Figure 3: Mehelkuna Hospital Site Plan showing location of new hospital block



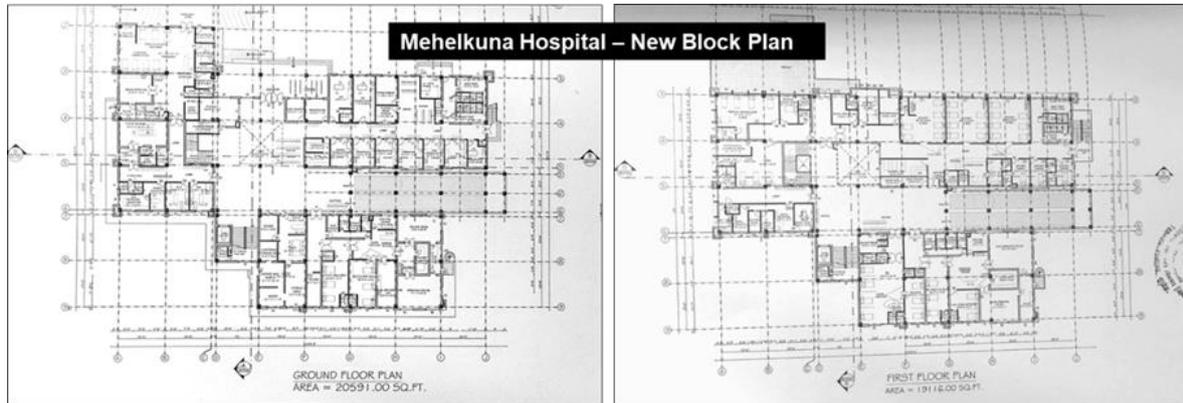
The new facilities planned in this building include:

- Maternity Unit with Operating Theatre (OT)
- Minor OT
- Pathology Laboratory
- X-ray
- Pediatrics
- Pharmacy
- Physiotherapy
- Obstetrics / Gynecology
- HIV treatment
- Orthopedics
- Eye services
- Administration

- Ear / Nose / Throat
- In-patients ward
- Out-patients Department
- Laundry
- Immunization

The floor plans for this new block are set out in Figure 4.

Figure 4: Mehelkuna Hospital Floor Plans



The new block is a Reinforced Cement Concrete (RCC) frame building (see Figure 5).



Figure 5: Steelwork for RCC frame at Mehelkuna Hospital

However, the construction process has not gone smoothly, and there have been problems and delays due to contractor negligence. The DUDBC Federal Project Implementation Unit (FPIU) have been engaging with the contractor to speed up progress.

Completion of the new hospital block will require the transfer of functions from the existing buildings to the new location. Prior to this, an integrated master planning exercise should be carried out to lay out rational use of facilities and future development of the site.

### **4.3 Conclusion**

Mehelkuna Hospital is a very important and well-located facility, in the process of being upgraded to higher A2 status. At this stage the emphasis must remain on ensuring that the contractor finishes the construction to the required quality, time and cost.