





Nepal Health Sector Support Programme III (NHSSP - III)

Policy Development Training Updated and Implemented August 2018









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Nepal Health Sector

Ministry of Health

Nepal Health Sector Support Programme (NHSSP)

Health Infrastructure Policy Development Workshop

31 August 2018

1. Context

The Ministry of Health (MoH), with the support of UKAid funded Nepal Health Sector Support Programme (NHSSP), has structured a capacity enhancement programme in health infrastructure development. This comprises different training modules for developing the capacity of the officials of MoH and its subordinate authorities as well as other key state and non-state stakeholders in health infrastructure development.

The NHSSP Health Infrastructure Team conducted a Training Needs analysis (TNA) exercise in September 2017 and identified health infrastructure development policy formulation as a priority. A two-day training module on this issue was subsequently designed for senior officials of MoH and DUDBC who play key roles in policy formulation, planning and programme management. The first Health Infrastructure Policy Development Workshop was organised in November 2017 and consequently its impact evaluation was conducted in May 2018. Incorporating the feedbacks from the impact evaluation report, changes in a policy environment and different issues and challenges experienced during the implementation the contents of the training materials were revised and updated and a second round of policy development training was organised on 28th and 29th August 2018.

Considering the good outcome from the last workshop in November 2017, this time also Nepal Administrative Staff College (NASC) was selected as the best suitable partner for this exercise. NASC has a long history of policy formulation training for senior government officials, a pool of resource persons highly experienced in delivering and supporting government in the area of policy formulation and implementation, and partnerships with high-level experts involved in the formulation of the Nepal federal structure.

The module design was a collaborative exercise – the NHSSP Health Infrastructure Team designed much of the structure and topic-specific content, while the Nepal Administrative Staff College (NASC) assisted with guidance on adult education methodology, design of learning objectives and inputs on the government policy-making process.

2. Learning Outcomes of the Workshop

The learning outcomes of the workshop were to ensure that each participant:

- Understands the characteristics of good policy instruments
- Understands the key processes for formulating good public policies and policy implementation challenges in the health sector including GESI/LNOB perspective
- Understands the Governance in a context of federalism
- Understands the roles and responsibilities of Federal, Provincial and Local Government in Health Infrastructure development.
- Has knowledge on different policies that guide health infrastructure development
- Understands the Nepal Health Infrastructure Development Standard (NHIDS)
- Gains basic knowledge on Multi-hazard resilient health infrastructure development

3. Training Content

The content for each session for the workshop comprised expert inputs, followed by facilitated a discussion on issues and examples.

The training content was divided in four sessions which was delivered over the duration of two days. The programme schedule has been attached to this report

Introduction to Public Policies

- Characteristics of good public policies
- Why public policies are important?
- Leading question: critical discourse
- Tenets of public policy and policy types
- Policy management process

Gender Equality and Social Inclusion (GESI)" and "Leave no one behind (LNOB)

- Ensuring gender equality and social inclusion (GESI) in health infrastructure development
- Designing GESI friendly health infrastructure
- GESI Mainstreaming in health Infrastructure Construction
- Constitutional and legislative provisions on GESI and LNOB

Governance in a context of federalism

- Governance in federal Nepal
- Interaction between Federal, Provincial and Local Government

- Characteristics of good governance
- Issues and challenges

Roles and responsibilities of Federal, Provincial and Local Government

- Federalism and power sharing principle
- Constitutional obligations on power sharing within three tiers of governments
- Functional assignments at three levels of government
- Critical issues

Existing policies and gaps

- Discussion on different policies, guidelines and standards related to health infrastructure development
- Implementation status and issues related to different policies
- Issues related to location and land ownership
- Issues and challenges

Nepal Health Infrastructure Development Standard (NHIDS)

- Necessity of NHIDS 2017
- Roles and responsibilities of federal, provincial and local government
- Categorization of health facilities
- Standard guidelines for design and construction of health buildings
- Standard design drawings
- Issues and challenges

Multi-hazard resilience in health infrastructure development

- Status of health infrastructures
- Multi-hazard resilient health infrastructure
- Current practices
- Policy issues
- Current initiatives

4. Workshop Organisation

As usual MoHP was the overall process owner of this event. Request was sent from MoHP to Nepal Administrative Staff College for the managing the overall organisation of the workshop. All the necessary invitations were issued through NASC to the participants.

The NHSSP provided overall financial support, material development for technical subjects and inputs into the overall contents, including experts and resource people for the sessions. The list of resource persons for each session is provided in **annex A**.

The NASC was responsible for the overall management of the event and also provided resource persons for sessions on government policy development process in a federal context.

5. Formal Sessions

A short formal session was conducted as a formal opening of the workshop. The formal session was facilitated by Mr Rajandra Adhikari, Director of Studies and Head, Centre for Development Policy Management as the Master of the Ceremony.

The opening session was begun by remarks from Mr Mohammad Daud, Director of Health Coordination Division at the Ministry of Health and Population. He welcomed all the participants and emphasised on the importance to have uninterrupted health service delivery from all levels of health service for effective health service delivery to the citizens.

Speaking at the opening the Deputy Executive Director of NASC Mr Khum Raj Punjali, thanked NHSSP for establishing enhanced relationship between Nepal Administrative Staff College DFID and MOHP and supporting to organise such important events collaboratively. He further expressed his views that this type of workshops should be able to enhance the effectiveness of the participants in developing good policies and its successful implementation and wished for the success of the two days workshop.

A closing session was held at the end once again facilitated by Mr Rajendra Adhikari. The closing ceremony started by remarks on the workshop from the participants Ms Rita Joshi Bhandari, Provincial Director from Karnali Pradesh. Then after it was addressed by Ms Eleanor Bainbridge, Infrastructure Adviser from DFID, Mr Mohammad Daud, Director of Health Coordination Division of Ministry of Health and Population and Mr Punya Prasad Neupane Executive Director of NASC, respectively.

Ms Eleanor Bainbridge, Infrastructure Advisor of DFID Nepal, briefly talked about the two major hospitals retrofitting projects (Bhaktapur Hospital and Western Regional Hospital, Pokhara) which is being supported through DFID. She explained that these two projects are designed to demonstrate and build a better understanding of the stakeholders on how sustainable, GESI responsible and environmental friendly multi hazard resilient health infrastructure can be implemented. She also emphasised on the need to have safe construction practices. Further she stressed on the need to transfer these practices at all levels of a federal structure.

Mr Mohammad Daud, Director of Health Coordination Division of the Ministry of Health and Population also expressed the need to have uniformity in the understanding between all the technical people implementing multi hazard resilient health infrastructure. He also expressed on the need to stress more on the solutions to different problems than projecting the problem itself.

Certificates were also distributed to the participants during the closing session.

At the end of the closing session, Mr Punya Prasad Neupane Executive Director of NASC thanked NHSSP for supporting to organise this event. He expressed his views that Nepal has many good policies, but in many instances, questions have been raised in the implementation. He wished the participants success in implementing the policies that are in place for the health infrastructure development and was positive that this kind of workshop can help in the better implementation.

6. Participants

The participants composed of senior and mid-level officials from MoHP, DUDBC, NRA, Ministry of Social Development of different provincial governments including provincial health directorate and relevant municipalities.

At the end of the workshop presentation materials and other relevant documents were provided to all the participants.

The participant's list is attached at annex B.

7. Key Outcomes and Conclusions

In general, the participants found the workshop to be very informative on formulation of good policy. They expressed the view that these kinds of a workshops are essential to disseminate information and promote engagement. They also felt that this workshop on Health Infrastructure Policy Development was very informative on the federal system and roles and responsibilities of all tiers of governance on health infrastructure development.

They also demanded that workshop must be held at least at all the province level to disseminate Nepal Health Infrastructure Development Service (NHIDS) and the supporting documents such as a categorisation of health facilities and the design standards and shed more clarity on the health infrastructure development issues.

Issues were raised on lack of land for health infrastructure construction, relocation and land acquisition issues several times by the participants. The floor demanded for developing policy guideline as a solution for resolving these issues. They also put forward that the

categorisation, relocation and the acquisition issues need to be further discussed with the communities and the local government and accordingly guidelines or policy developed.

The participants also felt the need to develop standards around electrical, sanitary and HVAC design requirements for facilities.

They also felt that NHIDS needs to be updated in line with some changes made in the structures after the document was endorsed. The floor also suggested on developing supporting guidelines for the effective implementation of the policy. They also expressed that homework should be done by the central government to implement the integrated approach of planning human resources and equipment simultaneously to have an effective service delivery from all level of services as envisaged by NHIDS. The projection of required human resources and policy for fulfilment of all the required the posts at all levels were very important and crucial for successful health service delivery. They also suggested that all the staff contracted by the Hospital management must be accounted and roles and responsibilities must be defined.

Participants also stressed the need to incorporate Ayurveda Medicine in the NHIDS.

The participants agreed on the paradigm shift in the planning of health facilities from a number of beds to functions as guided by NHIDS. The health facility should be categorised based on health functions rather than the number of beds. The function must be defined based on spatial conditions and local needs. It is necessary to think at least for 25 years ahead while planning of health facilities and also need to think about its expansion.

The floor also discussed on the following areas related to current confusion regarding the current federal structure and in the delegation of authority at different levels of governance

- The federal government need to release its rights to provincial and local government
- The federal laws should be made in such a way that minimises the conflict between local, provincial and federal government.
- Federal government can't directly intervene the provincial and local government because they are constitutionally autonomous.
- The federalism has not been institutionalised yet. Each level of government has to be effective for successful delivery of federalism.
- The federal government have to guide the provincial and local government but not to dictate.
- Some participants also expressed their observation that Provincial and local government is not listening to federal government.

- There are still confusion among Federal, Provincial and Local governments regarding their role and responsibilities in a federal context.
- Appreciation to the constitutional provision is necessary for the successful delivery of the federal system
- People had to come to centre even for their small works, now the government have gone to their place. People can take the service from their own place. The federal government system is not costly but reduces the efforts and cost of people for getting their jobs done easily at their home place.
- A survey result conducted by Nepal National Governance Survey 2017/18 shows that only 60% of people have heard about the new constitution
- Advocacy and schooling of the federal constitution is necessary for the successful delivery of a federal system
- More than 40% of health facilities do not have their own land
- The health facilities have been planned in such a way that everybody has access to a health facility with half an hour and within 3 km, health facilities has been a provision in Tarai area.
- The Government of Nepal has decided that each local government will have a hospital
- The awareness on health services provided by each type of health facility need to increase
- NHIDS 2074 needs to be updated and disseminated. Stakeholder at all levels are responsible to update and make them more useful for the health system.

8. Workshop Evaluation

At the end of the workshop facilitators conducted a formal workshop evaluation, using a structured evaluation form to collate responses on:

- Design of Workshop
- Learning
- Methodology
- Resource Person
- Services

Each topic is ranked from Poor (Score 1) to Excellent (Score 4).

The evaluation scores were summed and produced an overall score from participants of 3.11, which gives a total workshop satisfaction result between very good and excellent.

Annex A: Programme Schedule

DAY 1, 12 Bhadra (28 August)									
Time	Session	Outline	Facilitators						
10:00-10:15	Registration and To	Registration and Tea							
10:15-10:30 Inaugural									
Theme: 1, Public Policy and Governance									
10:40-12:10	Session-I	1. Introduction to Public Policy	Narayan Gopal Malego Rajendra Adhikari						
12:10-1:00	Lunch								
1:00-2:30	Session II	2. "Gender Equality and Social Inclusion(GESI)" and "Leave no one behind (LNOB)"	Sitaram Prasai,						
2:30-2:45	Tea Break								
2:45-4:15	Session III	3. Governance in context of federalism	Punya Prasad Neupane						
DAY 2, 13 Bhadra	a (29 August)								
10:00-10:15	10:00-10:15 Recap of Day 1								
Theme: 1, Public F	Policy and Governan	ce							
10:15-11:45	Session I	4. Roles and responsibilities of Federal, Provincial and Local Government.	Trilochan Pokharel						
Theme: 2 - Stockta	aking of Policies and	Guiding Instruments in Health Infrastructure	e Development						
11:45-1:15	Session II	5. Existing policies and gaps	Sagar Ghimire						
1:15-2:00	Lunch								
2:00-2:45	Session III	6. Nepal Health Infrastructure Development Standards (NHIDS)	Sunil Khadka						
Theme: 3 - Multi-hazard Resilience in Health Infrastructure Development									
2:45-3:45	Session IV	7. Multi-hazard Resilience in Health Infrastructure Development	Santosh Shrestha						
3:45-4:15	3:45-4:15 Way forward, Certification and Closing followed by Hi-tea								

Annex B: Registration

Health Infrastructure Policy Development Workshop Nepal Administrative Staff College 28-29 August (12-13 Bhadra 2075)



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Nepal Health Sector Support Programme Health Infrastructure Policy Development Workshop

Nepal Administrative Staff College, Jawalakhel 28th -29th August 2018

List of Participants

SN	Name	Designation/section	Organization
			National Reconstruction
1	Ramashish Sah	Engineer	Authority, NRA
2	Smriti Upadhyaya	Architect	Health building Section, DUDBC
3	Sanju Lamichhane	Engineer	DUDBC, Health Building Section
4	Thalindra Pangeni	Sr. HEO	Social Dev. Ministry, Province 3
5	Hemraj Khadka	HEO	Social Dev. Ministry, Province 7
6	Ridesh Kumar Tamrakar	Computer Officer	DUDBC, Health Building Section
7	Rita Joshi	Director	PHA, Surkhet
8	Avinash Shrivastav	Engineer	DUDBC, Health Building Section
9	Sudip Ale Magar	Public Health Officer	MOHP
10	Siddhi Raj Bhatta	Ves Officer	MOSD, Province 7
			Health Directorate, Pradesh- 2,
11	Chandra Dev Mehta	Health Director	Janakpur
		Lalitpur Metro. City HEA	
12	Dilliser K.C	Officer	Lalitpur Metropolitan City
13	Sushil Pd. Nepal	Computer Officer	DOHS/MD
14	Sagar P Ghimire	Sr. PHA	DOHS/MD
15	Ujjwal Karki	Engineer	NHSSP
16	Prashan Lal Shrestha	GIS/ IT Expert	NHSSP
		Policy Development	
17	Subash Bhattarai	Advisor	NHSSP
18	Pujita Shrestha	Architect	NHSSP
19	Prabina Pokharel	Architect	CLPIU, NRA
20	Dr. Guna Raj Awastha	Director	Health Directorate, Province 7
			Ministry of Social Development ,
21	Dr Kamal Raj Adhikari	Ayurveda Physician	Gandaki Province
			Ministry of Social Development ,
22	Ajay Kumar Shrivstav	F.P.O	Gandaki Province
23	Yeshoda Aryal	Sr. PHA	MOHP
24	Mohammad Daud	Chief, HCD	HCD/MOHP
25	Gyanendra Shakya	Senior Architect	NHSSP
26	Sunil Khadka	Lead Advisor	NHSSP
27	Surya Bdr. Khadka	S.O	МОНР
28	Pranay Upadhyaya	PHA	МОНР
			Ministry of Social Development,
29	Gyan Bdr. Basnet	PHA	Province1
30	Dr. Binod Kumar Giri	Director	Health Directorate, Province 5

31	Surat Bdr. Sunav	Engineer	NRA
			Ministry of Social Development,
32	Keshab Rijal	Public Health Inspector	Province 3
33	Puja Shah	Architect	CLPIU
34	Ganesh Ram Nhemafuki	CEA	NHSSP
35	Sitaram Prasain	Sr. GESI Advisor	MOHP
36	Khem Puruti	LA	NHSSP
37	Eleanor Bainbhioge	Infrastructure Advisor	DFID
38	Dr. Pranod K. Yadav	Chief, Med. Specialist	МОНР



