

Report on the Dissemination of MoHP's Human Resources for Health Strategic Plan (2011-15)

1.0 Background

In 2012, the Ministry of Health and Population (MoHP) published its first Draft HRH Strategic Plan which aims to ensure 'the equitable distribution of appropriately skilled human resources for health (HRH) to support the achievement of health outcomes in Nepal and, in particular, the implementation of NHSP-2'.¹

The plan contains a range of strategies and activities, captured under four main outputs as follows:

- 1. Appropriate supply of health workers for labour market needs;
- 2. Equitable distribution of health workers;
- 3. Improved health worker performance;
- 4. Effective and coordinated HR planning, management and development across the health sector.

In January 2012, following several months of consultations, reviews and revisions, the Draft Plan was endorsed by the Country Coordination Facilitation (CCF) whose membership comprised MoHP's Secretary, DoHS's Director General and WHO's Country Representative. The final Draft Plan was presented at MoHP's Joint Annual Review in January 2012 and subsequently used to incorporate HRH activities in the Ministry's Annual Work Plan and Budget (AWPB) for 2013-14.

The Draft Plan was also presented to stakeholders from the National Planning Commission (NPC), Ministry of Education (MoE), Ministry of General Administration (MoGA), Public Service Commission (PSC) and Office of the Prime Minister (OPM). Further endorsement was received from the Ministry of Finance (MoF) and the NPC prior to endorsement by the Cabinet of Ministers in December 2012.

2.0 Purpose and Objectives of MoHP's Dissemination Plan²

MoHP has developed a dissemination plan to share the Plan with internal and external stakeholders at all levels and to specifically promote its use in addressing HRH challenges in the sector. Specific objectives are to:

- 1. Generate interest in, and awareness of, HR issues and the strategies available in the HRH Strategic Plan to address them;
- 2. Promote implementation of these strategies through contextually appropriate and adequately funded HR implementation plans and activities;
- 3. Advocate for use of the HRH Strategic Plan in promoting coordinated and collaborative activities both within the health sector and across other concerned sectors.

¹ Ministry of Health and Population, Government of Nepal (2011) HRH Strategic Plan 2011-2015

² Dissemination plan for the MoHP HRH Strategic Plan (draft), October 2012, Ministry of Health and Population, Government of Nepal

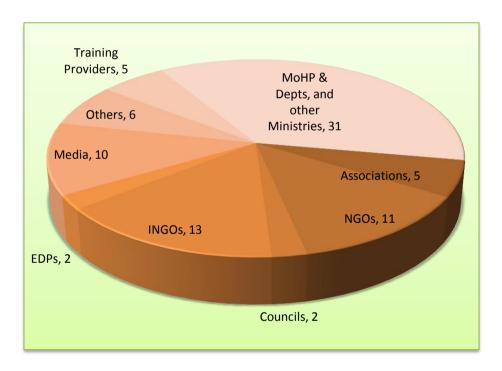


3.0 Dissemination Activities

3.1 National Level Dissemination

The official launch of the HRH Strategic Plan took place on 23 January, 2013 at the Hotel Everest in Kathmandu. The Director General of the Department of Health Services (DoHS) chaired the event with MoHP's Secretary serving as chief guest. A Nepali language summary of the Plan was distributed to all participants.

A total of 85 people attended the launch, including representatives from MoHP departments, training providers, health service associations, the media (both print and television), INGOs, NGOs and EDPs, including WHO and DFID. The breakdown of participants by agency type was as follows:



Other participants included representatives from the NPC, Ministry of General Administration, National Health Training Centre, Kathmandu University, Pokhara University, Nick Simons Institute, WHO, DFID and GIZ (see Annex A for details of all participants). Several INGOs involved in HR capacity building in MoHP also attended including Save the Children, United Mission to Nepal, Britain Nepal Medical Trust (BNMT) and MERLIN Nepal.

Print media representation included Rastriya Samachar Samiti, Kantipur, Nagarik and The Kathmandu Post (see Annex B) with two TV stations, Nepal TV and Sagarmatha TV, also covering the event.



3.1.1. Key Messages Delivered

The following section captures the main points made by senior officials during the dissemination event:

Mr Dhruba Prasad Dahal, Joint Secretary - HR & FM Division, MoHP

- Health is a fundamental right of citizens and it is the State's obligation to provide quality and free health services to the people.
- The HRH Strategic plan is essential in order to:
 - ensure access to equitable, effective and quality health services;
 - balance HR supply with demand;
 - analyse factors likely to affect demand such as emerging disease patterns, new physical infrastructure, changing population distribution and new technologies;
 - analyse factors affecting the supply side including the numbers and characteristics of HR produced by the existing education system, the nature and dynamics of the labour market, and the roles played by the private health sector and NGOs etc.
- Some of the activities currently underway to implement the HRH Strategic Plan include:
 - amendment of the Health Services Act;
 - the filling of some vacant positions on a temporary basis with the permission of the Public Service Commission;
 - an HRH assessment of both the public and private sectors;
 - preparation of a 20-year workforce plan by the Technical Working Group;
 - systematic development of HRH mechanisms from district to central levels;
 - initiation of a process to fill the 14,210 positions required within the strategic plan period.

Dr Frank Paulin - WHO and EDP Representative

The WHO and EDP Representative, Dr Paulin:

- described the process used to develop the HRH Strategic Plan including the technical assistance provided by Liverpool Associates in Tropical Health (LATH);
- expressed his belief that the HRH Strategic Plan marks the beginning of a new era in human resources for health in Nepal;
- noted with appreciation that, in accordance with the Strategic Plan, MoHP is now developing HR profiles for both the public and private health sectors, including HR production;
- acknowledged the great support provided by MoHP's Secretary and Director General in preparing the Plan and looked forward to MoHP's dissemination of it across the country.



Dr Pravin Mishra, Secretary - MoHP

The Health Secretary, Dr Mishra made the following comments:

- MoHP's existing manpower plan was prepared 20 years ago. Due to changing disease patterns, life styles and population patterns, the provision of quality health services will only be possible once an appropriate human resource plan is effectively implemented;
- The MDGs which aim to reduce poverty are also related to health. Without quality health services, Nepal will not be able to achieve its MDG targets. The HRH Strategic Plan will contribute to achieving the MDG targets in a systematic way;
- Government is determined to attract qualified and skilled health workers. For this reason it
 is proposing an amendment to the Health Services Act, and an ordinance has been
 presented to the President to this effect;
- An initiative has been taken to prevent "brain-drain" in the health workforce an issue continuously being raised at the World Health Assembly;
- The cooperation of all stakeholders is expected for the effective implementation of the HR Strategic Plan;
- The news media has an equal responsibility to improve the lives of the people and, as such, is also requested to play its part in disseminating the Strategic Plan.

Dr Mingmar Gyelzen Sherpa, Director General of DoHS and Programme Chair

Dr Sherpa expressed the following views:

- A strategic plan is essential to address emerging challenges in existing health services and MoHP's HRH Strategic Plan was developed in explicit recognition of this;
- The principal focus should be on rural and remote areas not just on urban areas if the MDG targets are to be achieved;
- All stakeholders are urged to contribute towards achieving the MDGs;

3.2 Note on District level dissemination

While the HRH Strategic Plan was still in draft form, MoHP used district level HRH Assessments to promote and disseminate it. The Joint Secretary of HR & FM Division led several interactive sessions on the draft including its development, aim, objectives, expected outputs and activities. The Draft Plan was distributed to DHOs in Okhaldunga, Saptari, Morang and Chitwan in the Eastern and Central development regions. Similarly, the HRH Assessment monitoring team held meetings with D(P)HO officials in Kailali, Dadeldhura, Banke, Nawalparasi and Kapilbastu districts of Western, Mid- and Far-Western Regions.



Annex A: Participants details

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Annex B: Kathmandu Post Article



5,935 nursing staff posts, 628 posts are vacant while among 10,642 paramedics' posts 1430 posts are vacant. Government hospitals in rural areas are mostly bereft of staff as most of the doctors, nurses and paramedics are located in Kathmandu Valley. There are 9,000 registered doctors but 5,000 of them have left the country. More than 3,000 of the remaining are in the private sector. Thus, there are just 900 doctors in government health institutions, according to Dr. Anjani Kumar Jha, General Secretary of Nepal Medical Association.

"We have long been raising the issue of doctors' posting. MoHP's exercise to create new post is a welcoming step," added Jha.
"The population was around 17.5 million in 1991, and the number of doctors then was the same as it is now. Now, the population has reached 26.5 million. Therefore, the government ought to create doctors' posts to increase people's access to health services at affordable rates."

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