



PULSE

UPDATING YOU ON HEALTH DEVELOPMENTS

QUARTERLY HIGHLIGHTS: July to September 2012

This Pulse brief is the second in a series of quarterly news updates from MoHP's TA support team. Be sure to visit us at www.nhssp.org.np and on Facebook for more details of the latest developments and publications.

Headlines

- ▲ Twelve publications were produced in the quarter, covering Health Financing, Maternal, Neonatal and Child Health, Gender Equality and Social Inclusion (GESI) and Monitoring and Evaluation.
- ▲ MoHP's first ever Annual Business Plan (2012/13) was prepared, as requested by both Government and EDPs.
- ▲ An Institutional Assessment of the National Health Training Centre (NHTC) was completed and discussed with stakeholders.
- ▲ The first draft of the Consolidated Annual Procurement Plan was presented to the World Bank in August, eight months earlier than last year.

1. Health Policy and Planning and Health Systems and Governance



- ▲ The NHSP-2 Implementation Plan was developed with full GESI integration and reviewed by MoHP.
- ▲ A review of the National Health Policy 1991 was completed, so preparing the way for the development of a new national health policy.
- ▲ A first draft of MoHP's State, Non-state Partnership Policy was prepared.
- ▲ Regional Health Directorates developed the capacity to plan, monitor and analyse health service statistics.

2. Health Financing



- ▲ A Benefit-Incidence Analysis (BIA) report was produced and orientation provided to key stakeholders. The BIA will make up an important component of MoHP's new health financing strategy.
- ▲ A Public Financial Management Committee was formed to guide the work planned in health financing, financial management, procurement and governance.
- ▲ An Implementation Plan was prepared for use of the Transaction Accounting and Budget Control System, draft Audit Clearance Manual and Financial Monitoring Report Manual.
- ▲ Integration of the Aama and 4ANC (Antenatal Care) programmes was completed, including dissemination of revised guidelines and the preparation of an integrated monitoring and evaluation framework.

3. Human Resource Management



- ▲ The Human Resources for Health (HRH) Strategic Plan was submitted to Cabinet following consultations with the Ministry of Finance and National Planning Commission.
- ▲ An Institutional Assessment of the National Health Training Centre (NHTC) was completed and discussed with stakeholders.
- ▲ The HRH assessment (a count of all human resources active in the public and private health sectors) was planned with the contractor and field work began in October.
- ▲ NHSSP began mapping HRH activities across Divisions, Sections and Centres in order to assess how HRH functions are performed and coordinated, and to help identify strengths and weaknesses of current structures, systems, functions and processes.



4. Essential Health Care Services (EHCS) including Maternal, Neonatal and Child Health



- ▲ A draft Health Sector Strategy to Address Maternal Under-nutrition was completed and reviewed at a stakeholder workshop.
- ▲ The Integrated Management of Childhood Illness (IMCI) Section of Child Health Division continued work on its Community-Based IMCI/Neonatal Care Programme Multi-year Costed Plan.
- ▲ The IMCI Section also implemented and monitored immunisation intensification activities focused on poorly performing districts.
- ▲ Family Health Division reviewed obstetric first aid training materials for remote district health workers, prepared postnatal care checklists and provided information leaflets for women.
- ▲ The National Health Training Centre reviewed the quality of Skilled Birth Attendant training in 19 sites and produced a training plan for 2012/13.

5. Gender Equality and Social Inclusion (GESI)



- ▲ Field work for the Rapid Peer Ethnographic Evaluation and Research study on access to health services in six districts was completed. The study team is now working on data processing, analysis and reporting.
- ▲ Additional GESI Technical Working Groups (TWGs) were formed at District Public Health Offices. 41 such TWGs have now been formed. Training on GESI mainstreaming was provided to GESI focal persons in the Ministry of Health and Population (MoHP) and Department of Health Services (DoHS).
- ▲ The National Health Education, Information and Communication Centre developed a series of district level Behaviour Change Communication/Information and Education Campaign planning tools.
- ▲ The Primary Health Care Revitalisation Division piloted its Social Audit Guidelines and provided training on these guidelines to key stakeholders.
- ▲ The Population Division prepared a roadmap to establish and strengthen Social Service Units and a MoHP work plan to implement its Gender Based Violence National Strategy.

6. Procurement and Infrastructure



- ▲ A first draft of the Consolidated Annual Procurement Plan (CAPP) was presented to the World Bank in August, eight months earlier than last year. This represents encouraging progress towards having a CAPP approved at the same time as the Annual Work Plan and Budget in any fiscal year.
- ▲ Various improvements to procurement practices have been instituted within Logistic Management Division (LMD): use of World Health Organisation Good Manufacturing Practice Certified Producers and Certificates of Pharmaceutical Practice, lab tests to ensure quality of drugs, an increase over last year in the number of multi-year contracts, a template for Acceptance of Goods into the LMD store, a template for Contract administration (not {yet} taken into use), a Code of Ethics, a Complaints Resolution Procedure, and others.
- ▲ Production of a Specification Bank for equipment has begun and is well underway, with two Bio-Medical Engineers hired for this work. A third Bio-Medical Engineer is expected to assist in the not-too-distant future. A survey of drugs pricing was conducted and a database has been established to allow systematic tracking of drugs procurement.
- ▲ Value for Money evaluations of two activities, integrated building designs and e-bidding for construction, showed that large cost-savings were obtained. The final reports will be available in the next quarter.
- ▲ Standard designs for health facilities were discussed by the Department of Urban Development and Building Construction and DoHS, and are close to endorsement. These are expected to improve the construction quality and functionality of buildings and reduce costs. Typical costings for 25 and 50 bed hospitals were completed for Management Division.

7. Monitoring and Evaluation



- ▲ The Service Tracking Survey (STS) 2011 report was finalised with MoHP and data collection for the STS 2012 and the Household Survey 2012 was completed.
- ▲ A NHSP-2 Monitoring Framework, M&E Implementation Plan and a report on achievements made against NHPS-2 Logical Framework indicators for 2011 were published.
- ▲ The indicators, tools and reporting process for the HMIS were extensively revised to align with the NHSP-2 Logical Framework and the Health Sector Information System national strategy and programmes. These will be field tested before finalisation and rolled out in all 75 districts from the next fiscal year.
- ▲ The Maternal and Perinatal Death Review process is being improved through the use of revised tools, guidelines and training, all of which are currently under development.
- ▲ A plan was agreed for improving the quality and timeliness of the DoHS annual report. This plan is now being implemented.