





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

# Joint Hospital Assessment Report – Karnali Province Kalikot District Hospital Final Draft 26 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 Kalikot District Hospital on 19 December 2018, at the request of the Provincial Ministry of Social Development (MoSD).

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.

The NHSSP team also provided specific information on contractor performance with respect to site management and safety to the Provincial Project Implementation Unit.

# 4 Infrastructure (NHSSP)

# 4.1 Site, buildings and existing situation

Kalikot District Hospital is located at Khadachakra Municipality, Manma. It has an immediate catchment area of 34, 921 people within a radius of 7 kms (2-3 hours walking distance) and an increased District-wide dependency population of 141,800 (see Table 1 and Figure 1).

SN	Hospital	Dependent Population	Catchment Population (within 7kms radius)	Categorised Status
1	Kalikot District Hospital	141,800	34,921	Primary Hospital Type A 3

Table 1: Kalikot District Hospital Dependent Population

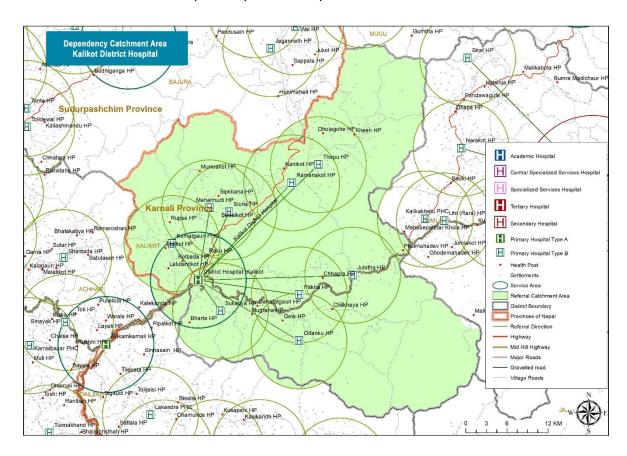


Figure 1: Kalikot District Hospital dependent catchment area

A new hospital building is under construction implemented by the Department of Urban Development and Building Construction (DUDBC) at a contract value of NPR 28,95,55,470. Over 35% of the scheduled works have been completed, with an estimated completion date of 2021. The hospital site plan is shown in Figure 2 below.



# 4.2 Assessment Findings and Gap Analysis

The construction of the new hospital block is a major project on a cramped, congested and sloping site. Excavation to 8 m deep have been made immediately adjacent residential quarters. The In-patient block has been demolished, and this function transferred to the building used for stores (see Figure 3).





Figure 3: 8m deep open excavation adjacent to residential quarters (left) and Demolition of In-patient block (right)

# 4.2.1 Sequencing of construction work.

Building is underway without detailed consideration of maintaining operations at the hospital and implementing a patient-centered approach to construction. Old hospital buildings have been demolished without the provision of suitable alternatives — the In-patient Department building was demolished and this service is operating under overcrowded unsuitable conditions in the Stores building. Given that the contract has an anticipated 2 year timeframe, it is important that extra space in the form of decanting facility is developed to facilitate effective functioning of the hospital.

# 4.2.2 Electricity supply problems

The hospital is experiencing problems of intermittent electricity supply and low voltage, which seriously affects the operation of medical equipment and lighting. Generators are being used to provide a reliable supply as a stopgap.

### 4.3 Interventions

#### 4.3.1 Decant Facility

The NHSSP team has developed two options for a suitable decanting facility to facilitate construction and health operations at the hospital, and these have already been submitted to the Ministry of Social Development (MSD).

## 4.3.2 Transformer

The NHSSP team recommends that a study of the electrical supply to the hospital be carried out, with a view to identifying and then implementing improvements. It seems likely that a suitable transformer with adequate capacity will need to be installed to resolve this problem.

#### 4.4 Conclusion

The upgrade of Kalikot District Hospital to Primary A3 status is well underway, with major works on the ground. However, in the opinion of the NHSSP team, there will be significant problems of sequencing operations and construction without the provision of a decanting facility and tighter project management. Options for this facility have already been provided to the provincial MSD. In addition, a review of the electricity supply to the hospital is necessary to identify capacity shortfalls, faults and improvements.