THE FOCUS OF NHSSP PHASE 2

The focus of NHSSP-2 is increased and more equitable access to quality essential health care services by strengthening core health system functions and the information and monitoring system, and supporting institutional reform.

Phase 2 of NHSSP is working on most of the thematic areas covered in Phase 1 while responding to new challenges. NHSSP Phase 2 supports:

- 1. Health policy and planning (including the preparation of NHSP-3)
- 2. Health financing
- 3. Procurement and infrastructure
- Essential health care services
- 5. Public financial management
- 6. Gender equality and social inclusion
- 7. Monitoring, evaluation and research.

NHSSP is also helping manage a new Technical Assistance Resource Fund (TARF) to support initiatives proposed by MoHP. Initial support has gone to draft a new national health policy and to support the development of a new Health Act and NHSP-3.



An LMD engineer checks equipment against the standards in the new online bank of specifications.



Improving transport options for emergency cases in rural areas and improving the system for referrals to higher level hospitals are important areas of NHSSP support.

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Nepal Health Sector Support Programme



@NHSSP





An Introduction to





Strengthening Health Systems-Improving Services

THE MAIN POINTS

- The Nepal Health Sector Support Programme (NHSSP) provides technical assistance to the Ministry of Health and Population to implement the Nepal Health Sector Programme-2 (NHSP-2, 2010–2015).
- 2. NHSSP supports system strengthening, the development of policies and strategies, the carrying out of studies, and the implementation of solutions across Nepal's health sector.
- 3. The programme is funded by the UK's Department for International Development and provides technical assistance on behalf of DFID and the NHSP-2 pooled fund partners.
- Phase 1 of NHSSP ran from January 2011 to August 2013. Phase 2 runs from September 2013 to July 2015.
- Phase 2 is managed by Options Consultancy Service Ltd (UK), with the Crown Agents and Oxford Policy Management as the other two consortium partners.



The central goal of NHSSP is to improve the provision and use of health services, particularly by poor and excluded people, including for safe motherhood.



The Health Management Information System (HMIS) has been revised to capture more indicators and disaggregated data to track service use by poor and excluded people.

ACHIEVEMENTS SO FAR

NHSSP's support has made major contributions to the development of Nepal's health sector.

More efficient and transparent systems:

- A web-based annual workplan and budget (AWPB) system has been introduced that enables more accurate and efficient planning and budgeting.
- ▲ A Transaction Accounting and Budget Control System (TABUCS) has been piloted and rolled out to all 278 MoHP cost centres to improve the accuracy and timeliness of financial reporting.
- The web-based Health Infrastructure Information System (HIIS) has been upgraded to help plan new facilities and track the condition of existing health facility buildings.
- Standard building designs and guidelines have been introduced for hospitals and health facilities.

Strengthened planning and policy making:

- The Joint Annual Review (JAR) of progress in Nepal's health sector has become institutionalised and is now led by MoHP.
- The process for producing the Nepal Health Sector Programme-3 (NHSP-3, 2015–2020) has been developed and agreed by MoHP and work is underway to develop this new strategy.
- Government systems are using more data from national surveys for evidence-based planning.
- The Human Resources for Health (HRH) Strategic Plan, HRH Profile and Workforce Plan are in use by MoHP to secure additional personnel.

More comprehensive, accountable and inclusive health services:

- Recommendations from NHSSP-supported studies, such as on health services in remote areas and overcrowding in maternity wards, are being taken forward by the Department of Health Services.
- An institutional structure and guidelines have been developed on gender equality and social inclusion (GESI) in the health sector and implemented, with GESI activities mainstreamed by key departments in their 2013/14 AWPBs.
- One-stop crisis management centres and social service units are providing victimised and marginalised people with support services in hospitals.
- Performance-based grant agreements have been developed and signed with seven hospitals.
- The Family Health Division is being supported to improve the availability of comprehensive emergency obstetric and neonatal care (CEONC) in health facilities and district hospitals.