



# Annual Report

2009-10  
(2066-67)

## **Our Vision**

People in rural Nepal receiving a full range of quality health care services within their own communities.

## **Our Mission**

To train and support skilled, compassionate health care workers for rural Nepal.



# TABLE of CONTENTS

	<u>Page</u>
<b>Achieving Better Outcomes</b>	<b>1</b>
<b>An Overview of NSI Programs</b>	<b>3</b>
<b>This Year's Results</b>	<b>5</b>
<b>Finances</b>	<b>12</b>

# Achieving Better Outcomes



This woman just traveled 5 hours from her village to have her sick baby treated in the hospital. She is not concerned with the institution's goals, objectives, or outputs. She's not looking for an explanation of how the medicines are supposed to work. She only wants her daughter to get better.

The Nick Simons Institute, likewise, is concerned with bottom line results. We repeatedly come back to the question: *'Did this program help someone?'* NSI has now completed its fourth full year of operation. While in its formative years NSI devoted energy to planning, building an organization, and establishing partnerships – we are now far enough along that we hold ourselves to a standard of 'better outcomes'.

This annual report describes the successes and short-falls of the year (2009-10) just passed. In some areas we have made real progress: As assessed by NSI and by the participants themselves, training sites have improved their quality. NSI now facilitates training across six courses, five of which are under the Nepal government's auspices. The map in the Results section of this report shows that graduates of NSI courses are going back to work in remote locations all across Nepal. This has impact on rural health care. The Mid-Level Practicum training program – conceived and raised within NSI – has grown from a pilot program into a course that is expanding into government hospitals and soon will be a national level training.

Still, we have fallen short of our year plan to follow up graduates in the field; we will undertake that work in the next year. Other disappointments of the year included our not being able to expand the skilled birth attendant training program into two partner hospitals and the delayed establishment of our long-developed 1-year anesthesia assistant training course.

NSI's Rural Staff Support Program (RSSP) goes the step beyond training, to support workers at their place of impact: three rural district hospitals. In Gulmi Hospital, we have seen a three-fold increase in patient numbers and establishment of emergency operative services where there were none. In hospitals where NSI's scholarship MDGP doctors have not yet been posted, the results of RSSP are more modest. Seeking to spread these improvements elsewhere, the Health Ministry has requested that NSI expand RSSP into seven more district hospitals.

Achieving better outcomes involves more than producing graduates. Left to natural forces, graduates are not likely to serve where (and how) they are most needed. NSI advocates for health care workers. Last year, we ran our second annual conference for rural workers from all over rural Nepal, and this is leading into a regular biannual newsletter to link, encourage, and inform workers in remote locations. While we fell short of our target of advocating the Nepal government to establish posts for MDGPs, biomedical technicians, and anesthesia assistants – the Health Ministry has accepted the need for GP posts and a document calling for 43 GP posts has gone to the Cabinet.

In summary, the year 2009-10 has included its share of both successes and shortfalls. Nevertheless, with each subsequent trip into the field our commitment grows. We continue to learn and improve, measuring our work against better outcomes for people like this woman and her child.

Dr. Mark Zimmerman  
Executive Director  
Nick Simons Institute

# An Overview of NSI Programs

In pursuit of its vision, NSI works in four main program areas – training, rural staff support, monitoring and evaluation, and advocacy. These areas are synergistic: they fit together to improve each other and to boost the final outcome.



## (1) TRAINING

- ❖ Anesthesia Assistant  
1-year course for nurses/health assistants
- ❖ Skilled-birth Attendant  
2-month course for nurses
- ❖ Mid-Level Practicum  
3-month course for auxiliary health workers
- ❖ Ultrasound  
3-month course for doctors
- ❖ Biomedical Technician  
1-year and 2-month courses
- ❖ NepalCME  
Distance education for doctors

NSI facilitates training through ten partner hospitals located from the far western to eastern Nepal. NSI provides development of the training site, training of trainers, subsidy to hire training and administrative staff, and gives ongoing quality assurance.

These 6 trainings have been chosen with the following criteria in mind:

- Likelihood of the competencies improving the existing rural health care scene.
- Likelihood of the graduate remaining in rural Nepal.
- Government involvement. (The vast majority of graduates are government workers).
- Long-term sustainability within the government system.

## **(2) RURAL STAFF SUPPORT PROGRAM (RSSP)**

RSSP complements the training component by providing support to workers in their home institutions. Based on previous published studies and experience in Nepal, NSI developed a package of environmental supports with the acronym '**the 6 Cs**':

*Communication, Continuing Medical Education, Community Governance, Children's Education, Connection with a Larger Hospital, and Captaincy by an MDGP Doctor.*

The government agreed for this program to be piloted in the district hospitals of  
Chainpur, Bajhang

Tamghas, Gulmi

Jiri, Dolakha

The program MoU was signed in August 2007, but only became fully operational in the last year, especially as NSI's MDGP scholarship holders graduated and became available for service in RSSP sites.

## **(3) MONITORING AND EVALUATION**

Overlaid upon all of NSI's work, the M+E component serves two purposes:

1. Documenting the course and effects of NSI's work.
2. Providing evidence to both inform NSI strategy and advocate for health workers.

Since the previous year, NSI has established a system and database for gathering data on each of its trainings. This includes feedback from NSI supervisory visits as well as from students graduating from the courses. This feedback is discussed within NSI, provided to the trainers, and shared with the government.

At any given time, NSI and its associates are conducting 2-4 research projects on the status of health care workers in Nepal.

## **(4) ADVOCACY**

In working to improve rural health care by improving the performance of health care workers, NSI has encountered several areas where changes in perspective could prove beneficial. Our target audiences in this regard are the government of Nepal and the public at large.

Some of our messages include:

- *Rural health care workers are critical to Nepal and are praiseworthy.*
- *Certain government posts need to be created to make room for needed workers.*
- *Waiting for specialist doctors to staff rural hospitals is not practical – task-shifting is needed.*
- *The field of hospital biomedical technician needs to emerge more quickly.*

While NSI's main technique for advocacy involves knocking on government doors, we also conducted conferences, produced a radio program, and wrote articles.



# This Year's Results

## (1) TRAINING

### 2009-10 MAIN GOALS

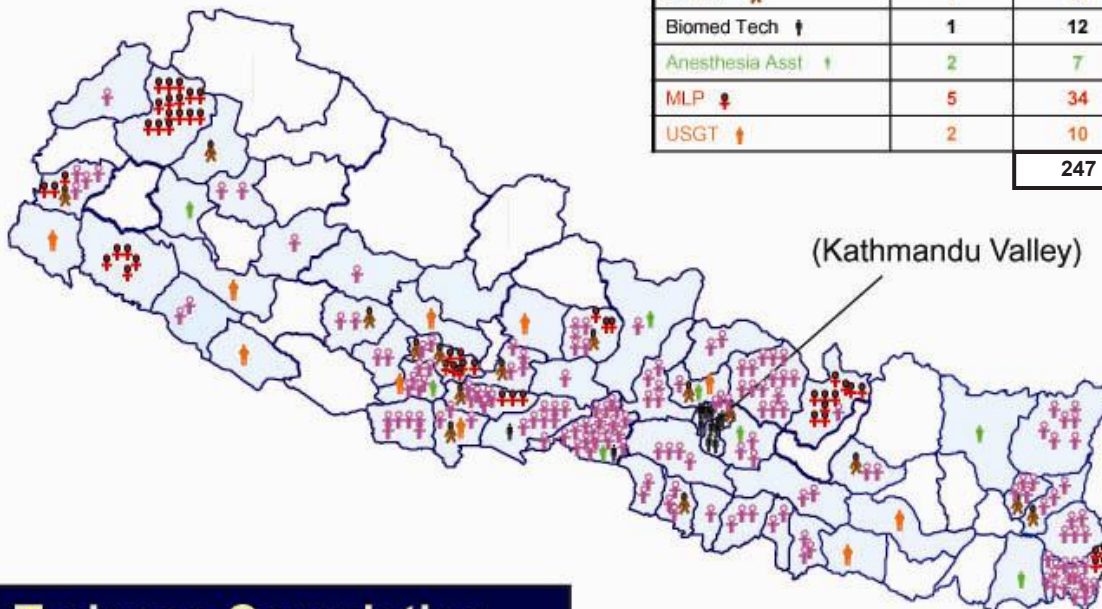
- ❖ Increase the number of training sites
  - Skilled Birth Attendant: 3 → 5
  - Anesthesia Assistant 3 → 4
  - Mid-Level Practicum 3 → 5
  - Ultrasound 2 → 3
  
- ❖ Roll out the mid-level practicum from pilot to government sites.

### RESULTS

- X → 3
- X → 3
- ✓ → 6
- ✓ → 3
  
- ✓ Established in 2 government regional training centers.



Training	# of Batches	Total # Trainees
Birth Attendant ♀	14	171
BMEAT ♂	1	13
Biomed Tech †	1	12
Anesthesia Asst †	2	7
MLP ♀	5	34
USGT †	2	10
		247



**Trainees Completing Training at NSI Sites 2009-2010**

*By district where they were working.*

## (TRAINING)

### IMPACT

- ⌘ Participants from NSI trainings returned to work in the government hospitals where they were posted.
- ⌘ Quality of training, as assessed by NSI supervisors' forms and participants' feedback forms was good and continues to improve.
- ⌘ Mid-level practicum course is on target to be adopted as a national-level course for government mid-levels.
- ⌘ Biomedical equipment assistant technician (BMEAT) has become a regular course alongside BMET, with graduates working in hospitals across Nepal.
- ⌘ Advanced Life Support Obstetrics (ALSO) has been launched and is running as a regular refresher course for doctors.

### FALLING SHORT

- ▼ Anesthesia Assistant one-year course did not start due to lack of consensus in Bir Hospital.
- ▼ Skilled birth attendant training did not start – in Patan Hospital due to lack of administrative support and in Lamjung Hospital due to lack of an MDGP doctor.
- ▼ Ultrasound training quality was good in Patan, but questionable elsewhere.
- ▼ NepalCME Volume 2 was slow to be completed.

### FUTURE CHANGES

- ◇ NSI will develop 2 new training partner hospitals for the SBA course.
- ◇ NSI will continue to coax the AAT training course forward.
- ◇ NSI will complete the NepalCME Volume 2 in the coming year.

## (2) RURAL STAFF SUPPORT PROGRAM

### 2009-10 MAIN GOAL

- ❖ All components of RSSP fully operational in all three districts.

### RESULTS

- ✓ Fully operational, only GP doctor in Bajhang remaining to be placed.



## (RURAL STAFF SUPPORT PROGRAM)

### IMPACT

- ∞ Nepal's Health Ministry requested NSI to roll out RSSP into 7 more district hospitals in the coming year.
- ∞ Gulmi District Hospital saw a three-fold increase in outpatient numbers and conducted 40 C-sections (vs. 0 in the year before the MDGP doctor arrived).
- ∞ Bajhang District Hospital saw a two-fold increase in admissions and a three-fold increase in deliveries, with retention of a senior doctor for over two years.
- ∞ New quarters for senior doctors were completed in 2 hospitals and renovated in the third.
- ∞ All three hospital committees continued to improve in autonomy and activity.

### FALLING SHORT

- ▼ Connection of district hospitals with larger partner hospitals was started but not effective.
- ▼ Two GP scholarship doctors paid off their bond, thus delaying the deployment of GPs in Bajhang and Jiri.
- ▼ Two anesthesia assistants trained by NSI transferred (or were absent) from the district hospital.

### FUTURE CHANGES

- ◇ NSI will conduct a mid-term assessment of the RSSP and refine the program before scaling up to three more districts.
- ◇ NSI will add a quality improvement (QI) practice component to RSSP.

## (3) MONITORING AND EVALUATION

2009-10 MAIN GOALS	RESULTS
<ul style="list-style-type: none"> <li>❖ Conduct a follow assessment of Skilled Birth Attendant graduates in their places of work.</li> <li>❖ Establish and meet training quality indicators for supervision of all NSI courses.</li> <li>❖ Contract out an external assessment of NSI.</li> </ul>	<ul style="list-style-type: none"> <li>X Could not agree with the government about coordinator.</li> <li>✓ In operation.</li> <li>X Board deferred 1-2 years.</li> </ul>

### IMPACT

- ⊗ NSI system for supervising course quality has become more comprehensive, receiving reports from NSI supervisors and participants – and using these to give feedback.
- ⊗ 2 journal papers were published.
- ⊗ 3 research studies were completed:
  - Career choices of Nepal doctors
  - Practice location by Nepal doctors
  - NepalCME experience in mentoring CME doctors

### FALLING SHORT

- ▼ No SBA Follow up study was conducted.
- ▼ Assessment was deferred to allow NSI to mature further.
- ▼ Studies completed were slow to be submitted for publication.

### FUTURE CHANGES

- ❖ NSI will conduct an MLP follow up / enhancement program, which will be used as a template for the SBA follow up process to follow. Based on these two pilots, NSI will develop strategic plan for wider follow-up of participants in the future.
- ❖ NSI will work further on quantitative measures of training quality.
- ❖ NSI will contract an external assessment in the following fiscal year.

## (4) ADVOCACY

2009-10 MAIN GOALS	RESULTS
<ul style="list-style-type: none"><li>❖ Implement a new strategy for advocacy for key government posts.</li><li>❖ Implement plans for wider, private marketing of NSI courses.</li></ul>	<p>X Strategy about the same. Results slowly coming – for GP posts first.</p> <p>✓ Marketing survey conducted. Plans evolving.</p>

### IMPACT

- ∞ Document for creation of 43 GP posts has gone to the Cabinet.
- ∞ A network of rural health care workers was strengthened by the 2<sup>nd</sup> Annual Conference, a radio program, and plan for a regular workers' newsletter.

### FALLING SHORT

- ▼ Government posts for BMET and AAT are not imminent.
- ▼ NSI has not developed a comprehensive strategy for advocacy; media like television and radio could be utilized more effectively.

### FUTURE CHANGES

- ◇ NSI will keep pushing for the creation of needed posts – a task requiring much patience.
- ◇ NSI will explore linkage with like-minded INGOs to make advocacy more effective.
- ◇ NSI will explore creating a video presentation for TV.



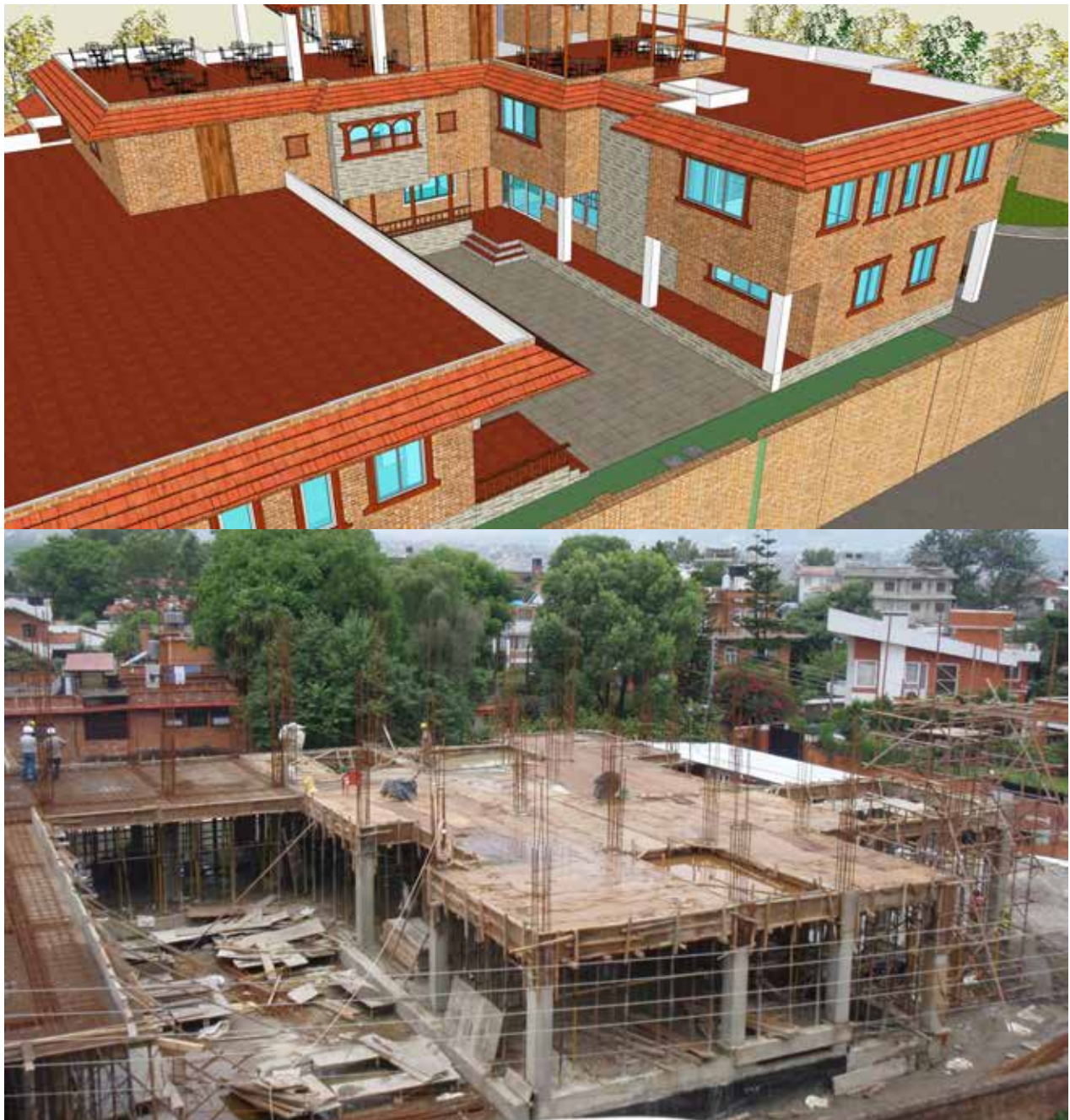
# OFFICE + STAFF

## 2009-10 MAIN GOALS

- ❖ Begin building new NSI headquarters.
- ❖ Develop new staff salary increment / bonus system.
- ❖ Develop contract tracking system.

## RESULTS

- ✓ Superstructure done.
- ✓ Fully instituted.
- ✓ Done on paper.



# Finance

## **Nick Simons Institute Annual Report 2009-10 (2066-67)**

### **Finance Report**

- (1) Program Area Summary
- (2) Functional Summary
- (3) Funding Route Summary
- (4) Detailed Budget / Expenditure



**Nick Simons Institute  
Program Area Summary for FY 2066/67**

Group	Previous Year's Actual	FY 66/67 Actual	FY 66/67 Budgeted
<b>1. Training</b>			
1.1 Anesthesia Assistant Technician	8,452,972	5,773,320	8,603,333
1.2 Bio Medical Equipment Technician	8,759,247	2,808,558	3,450,800
1.3 Mental Health Training	2,986,505	3,150,235	3,314,541
1.4 Mid Level Practicum	8,304,575	13,300,064	15,695,833
1.5 Skilled Birth Attendant	11,001,253	6,151,095	7,925,833
1.6 Ultrasound	930,146	397,311	2,025,000
1.7 General Training	2,900,777	3,290,797	5,373,999
<b>Total Training Expense</b>	<b>43,335,476</b>	<b>34,871,380</b>	<b>46,389,340</b>
<b>2. RSSP</b>			
2.1 Communication	384,056	404,611	450,000
2.2 Continuing Med Education	2,533,559	4,117,913	3,400,000
2.3 Community Governance	683,787	1,340,820	900,000
2.4 Connection with NSI Centers	1,200	99,060	600,000
2.5 Children's Education	-	848,186	1,110,000
2.6 Captaincy by MDGP	390,000	1,115,695	4,000,000
2.7 Capital Subsidy	1,036,341	1,576,570	1,500,000
2.8 Administration	1,421,481	1,329,659	1,060,000
2.9 CME Development	3,588,392	352,667	1,960,000
<b>Total RSSP Expense</b>	<b>10,038,815</b>	<b>11,185,182</b>	<b>14,980,000</b>
<b>3. Scholarships</b>			
3.1 Anesthesia	642,000	677,610	1,451,000
3.2 MDGP	5,741,915	6,748,129	6,763,000
3.3 Other Scholarships	102,240		
<b>Total Scholarship Expense</b>	<b>6,486,155</b>	<b>7,425,739</b>	<b>8,214,000</b>
<b>4. Advocacy</b>			
4.1 Advocacy General	-	100,000	100,000
4.2 Marketing	442,851	1,562,133	1,400,000
4.3 Radio Program	2,177,380	384,397	500,000
4.4 Rural Healthcare Workers Conference	2,726,236	3,050,077	1,660,000
<b>Total Advocacy Expense</b>	<b>5,346,467</b>	<b>5,096,607</b>	<b>3,660,000</b>
<b>5. Monitoring &amp; Evaluation</b>			
5.1 M & E General	65,982	211,952	3,300,000
5.2 Research	296,794	172,128	400,000
<b>Total Monitoring &amp; Evaluation Expense</b>	<b>362,776</b>	<b>384,080</b>	<b>3,700,000</b>
<b>6. Office</b>			
6.1 Staff Salary	9,025,327	11,420,364	13,126,000
6.2 Staff Development	2,280,016	592,255	1,200,000
6.3 Consultants	1,285,000	1,552,954	1,610,000
6.4 Insurance	307,011	195,631	240,000
6.5 Utilities	508,415	344,724	423,000
6.6 Office Consumables	640,907	789,328	780,000
6.7 Rent & Equipment	3,160,590	1,449,563	1,450,000
6.8 Other	1,506,582	1,525,347	1,948,000
<b>Total Office Expense</b>	<b>18,713,847</b>	<b>17,870,166</b>	<b>20,777,000</b>
<b>7. Land &amp; Building</b>			
7.1 NSI Office	801,616	59,411,197	40,000,000
7.2 Jiri Doctors' Quarters	2,750,000	700,000	-
7.3 Bharatpur Hospital Building	3,193,349	185,564	160,000
7.4 Lamjung Hospital Training Building	4,500,000	5,500,000	5,000,000
7.5 AMDA Maternity Block		9,623,961	12,000,000
7.6 Team Hospital Training Center		-	7,000,000
7.7 Bajhang Doctor's Quarter		3,600,000	4,000,000
<b>Total Land &amp; Building Expense</b>	<b>11,244,965</b>	<b>79,020,722</b>	<b>68,160,000</b>
<b>Grand Total (1 - 7)</b>	<b>95,528,500</b>	<b>155,853,875</b>	<b>165,880,340</b>

\* Inclusive of NSF Payments @ 74.40

# FINANCE

## Functional Summary

<b>Functional Area</b>	<b>Expenditure</b> (NRs. Million, rounded to nearest)
NSI Headquarters Building	59
Training site development	31
Training tuition	13
Office staff	12
Non-training rural support	11
Curriculum development	10
Scholarships (PG doctors)	7
Non-staff office	6
Advocacy	5
Research	1
Other	1
<b>TOTAL</b>	<b>156</b>

## Funding Route Summary

<b>Funding Route *</b>	<b>Amount</b> (NRs. Million, rounded to nearest)
Nick Simons Institute (Nepal)	144
Nick Simons Foundation (NY)	8
Income (Nepal)	4
<b>TOTAL</b>	<b>156</b>

\* Apart from income derived in Nepal, the Nick Simons Foundation (NY) provides all of the funding for NSI. The routes of funding include payments made to NSI (Nepal) (from which NSI makes local payments in NRs.) and direct payments by NSF to international entities (in USD).

**Nick Simons Institute**  
**Detail Budget/Expenditure (FY 2066/67)**

Program Heading	Sub Headings	Budget FY 66/67 NPR	Fiscal YTD NPR Actual Expense	Variance NPR (over expenses to be approved)	Remarks
<b>1 Training</b>					
<b>1.1 General</b>	1.1.1 NSI Network Meeting	200,000	143,483		
	1.1.2 NHTC Support	1,500,000	69,946		
	1.1.3 NHTC Staff	224,000	141,000		
	1.1.4 JHPIEGO	7,800,000	7,440,000		NSF all
		<b>9,724,000</b>	<b>7,794,429</b>		
<b>1.2 Biomedical Equipment Technician (BMET)</b>	1.2.1 Staff	800,800	1,044,697	243,897	
	1.2.2 Marketing	100,000	117,253		
	1.2.3 Equipment / Furnishing	300,000	141,251		
	1.2.4 Equipment Transport	50,000	-		
	1.2.5 BMEAT Curriculum Dev.	300,000	50,376		
	1.2.6 External Consultancy	600,000	460,023		NSF partial
	1.2.7 Program Support	300,000	-		
	1.2.8 BMEAT Training	1,000,000	994,958		
		<b>3,450,800</b>	<b>2,808,558</b>		
<b>1.3 Anesthesia Assistant (AAT)</b>	1.3.1 National Training Consultant	200,000	80,202		
	1.3.2 Marketing	100,000	23,305		
	1.3.3 Course Development	200,000	168,933		
	1.3.4 Training Materials	500,000	114,449		
	1.3.5 Training Trainers	300,000	69,752		
	1.3.6 Equipment	100,000	52,089		
	1.3.7 External Consultancy	-	-		
	1.3.8 Steering Committee	100,000	22,335		
	1.3.9 Assessment of new sites	100,000	-		
	1.3.10 AA Refresher (S1)	400,000	289,290		
	1.3.11 Bir Hospital AA Dev (S1)	1,000,000	646,393		
	UAM	-	184,989	184,989	
		<b>3,000,000</b>	<b>1,651,738</b>		
<b>1.4 Skilled Birth Attendant (SBA)</b>	1.4.1 Training Materials, Equipment	100,000	107,150		
	1.4.2 National Trainers' Workshop	500,000	495,000		
			<b>600,000</b>	<b>602,150</b>	
<b>1.5 Mid-level Practicum</b>	1.5.1 MoHP meetings/ consultancy	500,000	247,081		
	1.5.2 Curriculum development	700,000	1,057,787	357,787	
	1.5.3 New Site Visits	400,000	222,197		
	1.5.4 Replacement ML Workers	2,200,000	1,724,615		
	1.5.5 Training Dev. (2 Sites)	700,000	427,329		
	1.5.6 Equipment (2 Sites) (S1)	1,900,000	1,415,219		
	1.5.7 MLP Training - Non RSSP (S1)	2,500,000	2,237,759		
	1.5.8 RHTC Mgmt TOT (S1)	400,000	451,332		
		<b>9,300,000</b>	<b>7,783,318</b>		
<b>1.6 Mental Health Training</b>	1.6.1 Grant to CMC - Nepal	2,884,541	3,084,541		
	1.6.2 Staff	200,000	-		
	1.6.3 Marketing	100,000	-		
	1.6.4 Training of Trainers/ CTS	130,000	65,694		
		<b>3,314,541</b>	<b>3,150,235</b>		
<b>1.7 Ultrasound</b>	1.7.1 Curriculum Development				
	1.7.1.1 Potentialsite assess	200,000	-		
	1.7.1.2 Curriculum dev.	200,000	115,765		
	1.7.1.3 Curriculum consultant	150,000	11,765		
	1.7.2 Doctors training	900,000	269,781		
		<b>1,450,000</b>	<b>397,311</b>		
<b>1.8 Bharatpur Hospital (Chitwan Government Hospital)</b>	1.8.1 General				
	1.8.1.1 Hosp Support	1,000,000	665,800		
	1.8.1.2 Office	-	-		
	1.8.1.4 Equipment	200,000	37,000		
	1.8.1.5 Building (OT)	-	-		
	1.8.1.6 Communication	60,000	-		
	1.8.1.7 Site Visits	100,000	24,245		
		<b>1,360,000</b>	<b>727,045</b>		

Program Heading	Sub Headings	Budget FY 66/67 NPR	Fiscal YTD NPR Actual Expense	Variance NPR (over expenses to be approved)	Remarks
	1.8.2 SBA	-			
	1.8.2.1 Training Develop	150,000	38,653		
	1.8.2.2 Equipment/Supply	100,000	92,749		
	1.8.2.3 Site Visits	-			
		<b>250,000</b>	<b>131,402</b>		
	1.8.3 AAT				
	1.8.3.1 Training Develop	40,000	4,753		
	1.8.3.2 Equipment/Supply	200,000	228,143		
	1.8.3.3 Non-NSI Visits	-	-		
		<b>240,000</b>	<b>232,896</b>		
	1.8.4 Other Trainings				
	1.8.4.1 Training Develop	100,000	-		
		<b>100,000</b>	<b>-</b>		
	1.8.5 MLP				
	1.8.5.1 Training Development (S1)	300,000	240,773		
	1.8.5.2 Equipment Supply (S1)	950,000	784,875		
	1.8.5.3 Non - NSI Visits (S1)	50,000	-		
	<b>1,300,000</b>	<b>1,025,647</b>			
	<b>3,250,000</b>	<b>2,116,989</b>			
1.9 AMDA Damak Hosp	1.9.1 General				
	1.9.1.1 Hosp Support	800,000	1,040,052	240,052	
	1.9.1.2 Equipment	200,000	-		
	1.9.1.3 Building	-	-		
	1.9.1.4 VSAT/Bandwidth	150,000	204,861	54,861	
	1.9.1.5 Site Visits	200,000	68,990		
		<b>1,350,000</b>	<b>1,313,903</b>		
	1.9.2 SBA				
	1.9.2.1 Training Develop	300,000	111,309		
	1.9.2.2 Equipment/Supply	100,000	100,000		
	1.9.2.3 Non-NSI visits	-	-		
	<b>400,000</b>	<b>211,309</b>			
	1.9.3 AAT				
	1.9.3.1 Training Develop	200,000	38,303		
	1.9.3.2 Equipment/Supply	300,000	-		
	1.9.3.3 Non-NSI Visits	-	-		
		<b>500,000</b>	<b>38,303</b>		
	1.9.4 MLP				
	1.9.4.1 Training Develop	50,000	90,353	40,353	
	1.9.4.2 Equipment/Supply	100,000	6,045		
	1.9.4.3 Non-NSI Visits	-	-		
		<b>150,000</b>	<b>96,398</b>		
	1.9.5 Other Trainings				
1.9.5.1 Training Develop	100,000	-			
	<b>100,000</b>	<b>-</b>			
	<b>2,500,000</b>	<b>1,659,913</b>			
1.10 Tansen Hospital	1.10.1 General				
	1.10.1.1 Hospital Support	800,000	847,039		
	1.10.1.2 Equipment	200,000	200,000		
	1.10.1.3 VSAT Bandwidth	150,000	332,691	182,691	
	1.10.1.4 Site Visits	150,000	97,129		
		<b>1,300,000</b>	<b>1,476,858</b>		
	1.10.2 SBA				
	1.10.2.1 Training Develop	200,000	154,342		
	1.10.2.2 Equipment/Supply	100,000	100,000		
	1.10.2.3 Non-NSI visits	-	-		
		<b>300,000</b>	<b>254,342</b>		
	1.10.3 AAT				
	1.10.3.1 Training Develop	150,000	38,303		
	<b>150,000</b>	<b>38,303</b>			

Program Heading	Sub Headings	Budget FY 66/67 NPR	Fiscal YTD NPR Actual Expense	Variance NPR (over expenses to be approved)	Remarks
	1.10.4 MLP	-			
	1.10.4.1 Training Develop	50,000	33,428		
	1.10.4.2 Equipment/Supply	100,000	1,073		
	1.10.4.3 Non-NSI Visits	-	-		
		<b>150,000</b>	<b>34,501</b>		
	1.10.5 Other Trainings				
	1.10.5.1 Training Develop	100,000	-		
		<b>100,000</b>	<b>-</b>		
		<b>2,000,000</b>	<b>1,804,005</b>		
<b>1.11 Dandeldhura Hospital</b>	1.11.1 Hospital Support	1,500,000	1,500,000		
	1.11.2 Site Visits	200,000	31,666		
	1.11.3 Training Building/Complex	-	-		
	1.11.4 VSAT Bandwidth	150,000	116,338		
	1.11.5 General Training (S1)	1,299,999	1,104,194		
		<b>3,149,999</b>	<b>2,752,198</b>		
<b>1.12 Lamjung Hospital</b>	1.12.1 General				
	1.12.1.1 Training Building/Comp	-	-		
	1.12.1.2 Training Development	100,000	1,427		
	1.12.1.3 Hosp Support	1,000,000	1,000,000		
	1.12.1.4 Equipment	500,000	500,000		
	1.12.1.5 VSAT Bandwidth	150,000	125,067		
	1.12.1.6 Site Visit	75,000	38,155		
		<b>1,825,000</b>	<b>1,664,649</b>		
	1.12.2 SBA				
	1.12.2.1 Training Develop	200,000	35,135		
	1.12.2.2 Equipment/Supply	100,000	-		
	1.12.2.3 Non-NSI Visits	-	-		
		<b>300,000</b>	<b>35,135</b>		
	1.12.3 MLP				
	1.12.3.1 Training Develop	200,000	116,548		
	1.12.3.2 Equipment/Supply(S1)	200,000	1,073		
	1.12.3.3 Non-NSI Visits	-	-		
		<b>400,000</b>	<b>117,621</b>		
		<b>2,525,000</b>	<b>1,817,406</b>		
<b>1.13 Patan Hospital</b>	1.13.1 General				
	1.13.1.1 Hospital Support	1,000,000	-		
	1.13.1.2 Staff	500,000	-		
		<b>1,500,000</b>	<b>-</b>		
	1.13.2 SBA				
	1.13.2.1 Training Dev.	200,000	7,433		
	1.13.2.2 Equipment Supply	300,000	303,224		
		<b>500,000</b>	<b>310,657</b>		
	1.13.3 AAT				
	1.13.3.1 Training Dev.	50,000	38,303		
		<b>50,000</b>	<b>38,303</b>		
	1.13.4 Ultrasound				
	1.13.4.1 Training Development	25,000	-		
	1.13.4.2 Equipment Supply	50,000	-		
		<b>75,000</b>	<b>-</b>		
		<b>2,125,000</b>	<b>348,960</b>		
<b>TOTAL TRAINING EXPENSE (1)</b>		<b>46,389,340</b>	<b>34,687,210</b>		

Program Heading	Sub Headings	Budget FY 66/67 NPR	Fiscal YTD NPR Actual Expense	Variance NPR (over expenses to be approved)	Remarks
<b>2. Rural Staff Support Program</b>					
<b>2.1 Bajhang</b>	2.1.1 Field Staff (Including MDGP)	1,200,000	743		
	2.1.2 Office	-	-		
	2.1.3 Travel	250,000	460,289	210,289	
	2.1.4 Communication	150,000	116,337		
	2.1.5 Continuing Med Education	1,000,000	1,405,846	405,846	
	2.1.6 Connection with NSI Centers	200,000	28,090		
	2.1.7 Children's Education	370,000	454,729	84,729	
	2.1.8 Community Governance	300,000	300,000		
	2.1.9 Capital Subsidy	500,000	499,661		
	2.1.10 Other	150,000	-		
	<b>4,120,000</b>	<b>3,265,695</b>			
<b>2.2 Dolakha</b>	2.2.1 Field Staff (Including MDGP)	1,100,000	274,952		
	2.2.2 Office	-	-		
	2.2.3 Travel	180,000	144,163		
	2.2.4 Communication	150,000	171,936		
	2.2.5 Continuing Med Education	1,100,000	1,431,882	331,882	
	2.2.6 Connection with NSI Centers	200,000	10,635		
	2.2.7 Children's Education	370,000	196,729		
	2.2.8 Community Governance	300,000	150,000		
	2.2.9 Capital Subsidy	500,000	503,162		
	2.2.10 Other	150,000	-		
	2.2.11 Jiri Doctors' Quarters	-	-		
	<b>4,050,000</b>	<b>2,883,459</b>			
<b>2.3 Gulmi</b>	2.3.1 Field Staff (Including MDGP)	1,700,000	840,000		
	2.3.2 Office	-	-		
	2.3.3 Travel	180,000	273,879	93,879	
	2.3.4 Communication	150,000	116,338		
	2.3.5 Continuing Med Education	1,300,000	1,280,185		
	2.3.6 Connection with NSI Centers	200,000	60,335		
	2.3.7 Children's Education	370,000	196,729		
	2.3.8 Community Governance	300,000	890,820	590,820	
	2.3.9 Capital Subsidy	500,000	573,747		
	2.3.10 Other	150,000	451,328	301,328	
	<b>4,850,000</b>	<b>4,683,361</b>			
<b>2.4 RSSP General</b>	2.4.1 RSSP	-	-		
	2.4.2 VSAT/TM Training	-	-		
	2.4.3 Nepal CME Advertisement	250,000	107,576		
	2.4.4 CME Conference (ALSO)	500,000	29,950		
	2.4.5 CME Consultant (S1)	160,000	130,020		
	2.4.6 CME Admin	200,000	85,121		
	2.4.7 Evaluate CME Pilot Dissemin.	50,000	-		
	2.4.8 CME Course Development (S1)	800,000	-		
	<b>1,960,000</b>	<b>352,667</b>			
<b>TOTAL RSSP EXPENSES (2)</b>		<b>14,980,000</b>	<b>11,185,182</b>		
<b>3. Scholarships</b>					
<b>3.1 MDGP Scholarship</b>	3.1.1 Tuition NAMS	4,223,000	3,302,050		
	3.1.2 Tuition/Stipend IoM	2,540,000	3,446,079	906,079	
		<b>6,763,000</b>	<b>6,748,129</b>		
<b>3.2 MD Anesth Scholarship</b>	3.2.1 Tuition NAMS	1,451,000	677,610		
		<b>1,451,000</b>	<b>677,610</b>		
<b>TOTAL SCHOLARSHIP EXPENSES (3)</b>		<b>8,214,000</b>	<b>7,425,739</b>		

Program Heading	Sub Headings	Budget FY 66/67 NPR	Fiscal YTD NPR Actual Expense	Variance NPR (over expenses to be approved)	Remarks
<b>4. Measurement / Evaluation</b>					
<b>4.1 M-E Component</b>	4.1.1 AAT Follow-up Study	400,000	-		
	4.1.2 SBA Follow-up Study	2,400,000	-		
	4.1.3 SBA Dissemination Workshop	200,000	-		
	4.1.4 BMEAT follow-up study	300,000	211,952		
	4.1.5 RSSP Monitoring	-	-		
		<b>3,300,000</b>	<b>211,952</b>		
<b>4.2 Research/ Assessment</b>	4.2.1 Research Studies (MBBS)	200,000	172,128		
	4.2.2 Other	200,000	-		
	4.2.3 External Assessment (NSI)	-	-		
		<b>400,000</b>	<b>172,128</b>		
<b>TOTAL M/E EXPENSES (4)</b>		<b>3,700,000</b>	<b>384,080</b>		
<b>5. Advocacy</b>					
<b>5.1 Marketing</b>	5.1.1 Brochures	200,000	341,023	141,023	
	5.1.2 Advertisements/Marketing	1,000,000	1,014,021		
	5.1.3 Conference Support	200,000	207,089		
	5.1.4 Website	-	-		
	5.1.5 Rural HCW Conference	1,600,000	3,050,077	1,450,077	
	5.1.6 Nick Simons Award	60,000	-		
		<b>3,060,000</b>	<b>4,612,210</b>		
<b>5.2 Advocacy Committees</b>	5.2.1 BMET, AAT, MDGP	100,000	100,000		
	5.2.2 Advocacy Consultation	-	-		
		<b>100,000</b>	<b>100,000</b>		
<b>5.3 Radio Program</b>	5.3.1 Production/Distribution	-	-		
	5.3.2 Dissemination CD ROMs	100,000	100,000		
	5.3.3 Follow up Survey	400,000	284,397		
		<b>500,000</b>	<b>384,397</b>		
<b>TOTAL ADVOCACY EXPENSES (5)</b>		<b>3,660,000</b>	<b>5,096,607</b>		
<b>6. Central Office Development</b>					
<b>6.1 Staff Development</b>	6.1.1 Staff Development Fund	1,200,000	592,255		
	6.1.2 Computer Skills workshop	-	-		
		<b>1,200,000</b>	<b>592,255</b>		
<b>6.2 Space Development</b>	6.2.1 Architect	-	-		
	6.2.2 Land Acquisition	-	-		
	6.2.3 Building	-	-		
	6.2.4 Office Extension	-	-		
		-	-		
<b>TOTAL OFFICE DEV EXP (6)</b>		<b>1,200,000</b>	<b>592,255</b>		
<b>7. Office Expenses</b>					
<b>7.1. Staff Salary</b>	7.1.1 Salary	10,360,000	8,437,414		
	7.1.2 Staff PF	1,036,000	949,965		
	7.1.3 Dashain Bonus	800,000	751,636		
	7.1.4 Gratuity Provision	930,000	1,281,349	351,349	
		<b>13,126,000</b>	<b>11,420,364</b>		
<b>7.2. Consultants</b>	7.2.1 Legal	580,000	503,828		
	7.2.2 Auditor	150,000	141,250		
	7.2.3 Other Consultancy	880,000	907,876		NSF partial
		<b>1,610,000</b>	<b>1,552,954</b>		
<b>7.3. Insurance</b>	7.3.1 Health Insurance	150,000	159,906		
	7.3.2 Vehicle Insurance	60,000	35,725		
	7.3.3 Office Insurance	30,000	-		
		<b>240,000</b>	<b>195,631</b>		

Program Heading	Sub Headings	Budget FY 66/67 NPR	Fiscal YTD NPR Actual Expense	Variance NPR (over expenses to be approved)	Remarks
<b>7.4. Utilities</b>	7.4.1 Telephone	150,000	126,318		
	7.4.2 Water	8,000	4,988		
	7.4.3 Electricity	65,000	71,024		
		<b>223,000</b>	<b>202,330</b>		
<b>7.5. Office Consumable</b>	7.5.1 Household	70,000	70,000		
	7.5.2 Kitchen Supplies	60,000	68,501		
	7.5.3 Groceries	300,000	336,153		
		<b>430,000</b>	<b>474,654</b>		
<b>7.6 Other</b>	7.6.1 Fuel	200,000	168,386		
	7.6.2 Vehicle Maintenance	30,000	30,000		
	7.6.3 Conveyance	30,000	30,000		
	7.6.4 Rent	1,300,000	1,307,152		
	7.6.4 Stationary	350,000	314,674		
	7.6.5 Postage and Delivery	45,000	49,431		
	7.6.6 VSAT/Video Bandwidth	200,000	142,393		
	7.6.7 Board Meeting / Retreat	500,000	311,410		
	7.6.8 TAG Meeting	15,000	-		
	7.6.9 Furniture	50,000	36,343		
	7.6.10 Entertainment	20,000	5,000		
	7.6.11 Membership / Renewal	50,000	31,376		
	7.6.12 Books and Periodicals	10,000	10,000		
	7.6.13 Office Equipment	50,000	50,000		
	7.6.14 Computer & Printer	100,000	92,411		
	7.6.15 Field Visit / Travel	250,000	146,918		
	7.6.16 Visa Fee	130,000	130,000		
	7.6.17 Promotional Expenses	100,000	57,443		
	7.6.18 AMC	120,000	98,293		
	7.6.19 Miscellaneous	100,000	84,995		
	7.6.20 Repair and Maintenance	40,000	40,000		
	7.2.21 Bank Charges	8,000	8,000		
	7.6.22 Annual Planning Meeting	250,000	287,752		
	7.6.23 Two wheeler (Scooter)	-	-		
7.6.24 Office Renovation	-	-			
		<b>3,948,000</b>	<b>3,431,977</b>		
<b>TOTAL OFFICE EXPENSES (7)</b>		<b>19,577,000</b>	<b>17,277,910</b>		
<b>TOTAL RECURRING EXPENSE</b>		<b>97,720,340</b>	<b>76,648,983</b>		
<b>BUILDING</b>					
	NSI Building	40,000,000	59,411,197		
	Bhajang Doctors Qtrs	4,000,000	3,600,000		
	Jiri Doctor's Building	-	700,000		
	Lanjung Training / Hostel Building	5,000,000	5,500,000		
	AMDA Maternity Building	12,000,000	9,623,961		
	Bharatpur OT Renovation	160,000	185,564		
	BMET Training Hall	7,000,000	-		
<b>TOTAL BUILDING</b>		<b>68,160,000</b>	<b>79,020,722</b>		
<b>ADVANCES</b>					
	Advance to Staff	-	184,170		
<b>TOTAL ADVANCES</b>			<b>184,170</b>		
<b>GRAND TOTAL</b>		<b>165,880,340</b>	<b>155,853,875</b>		