

ENHANCING RURAL HEALTH CARE

Annual Report

2011-12
(2068-69)



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Our Vision

People in rural Nepal receiving quality health care services within their own communities

Our Mission

To train and support competent health care workers for rural Nepal

HOW NSI WORKS

The **Nick Simons Institute** is now 7 years old. From its beginning, NSI has seen the rural healthcare worker as a critical lever to improving health in underserved areas of Nepal. To clarify its mission and vision statements, NSI has formulated a clear policy test that the organization applies to all its potential programs:

Will this program improve rural health care?

along with a second supporting test:

Will it have long-term impact on government policies?

The NSI strategy evolving from these two questions centers on several principles: First, because of the large disparity between rural and urban health care, NSI focuses on improving curative services – rather than public health services. Second, because the Nepal government assumes the lion’s share of rural health care – with only a few mission ‘islands of excellence’ scattered across the country – NSI works in close partnership with government institutions. Third, because of the glut of in-service training, NSI works with the National Health Training Centre to build up in-service training of existing workers – anesthesia assistants, skilled birth attendants, auxiliary health workers, and biomedical staff. Fourth, NSI goes beyond training – implementing an integrated program that supports staff in district hospitals.

So, how does NSI work? After identifying a rural healthcare problem, the NSI team works with the government to formulate a solution. Next, a pilot is trialed in government rural settings. This process only reaches its ultimate target when this pilot program is eventually incorporated into the government system of healthcare.



This report gives a number of examples of how NSI works through these steps, and gives the current status of different programs. In training, after some years of work and lobbying, the Mid-level Practicum and Anesthesia Assistant courses have finally reached mainstreaming by the government. NSI’s Rural Staff Support Program began with 3 districts in 2007, added 3 more in 2010 and now a seventh in the last year, and the Health Ministry is now urging NSI to take on a larger number of its 60 district hospitals.

NSI has much to learn and room to grow – the organization remains committed to bringing about positive change in the rural health care system – in ever-widening spheres of work.

2011-12 (2068-69) MAJOR GOALS

- 1. Implement the Rural Staff Support Program (RSSP) in seven district hospitals, including new quality improvement (QI) and monitoring/evaluation processes.**
- 2. Conduct the first two batches of one-year Anesthesia Assistant Course (AAC) and obtain AA registration with Health Professional Council.**
- 3. Complete development of training sites: total SBA 7; AAC 5.**
- 4. Facilitate for more than half of Mid-level Practicum (MLP) training to be done in hybrid with the government's Sr. AHW training.**
- 5. Develop and pilot a Hospital Management course.**
- 6. Conduct regular Follow-up and Enhancement Program (FEP) for multiple cadre: SBA (1), AAC (1), MLP (2), BMET (1), USGT (1)**
- 7. Disseminate Nepal CME Volume 2. Participate in starting a national CME providers' accreditation process.**
- 8. Facilitate posts for MDGP doctors and Anesthesia Assistants. Make progress for Biomedical Equipment Technician posts.**
- 9. Revise all staff job descriptions.**
- 10. Revise administrative/financial norms.**

ACCOMPLISHMENTS

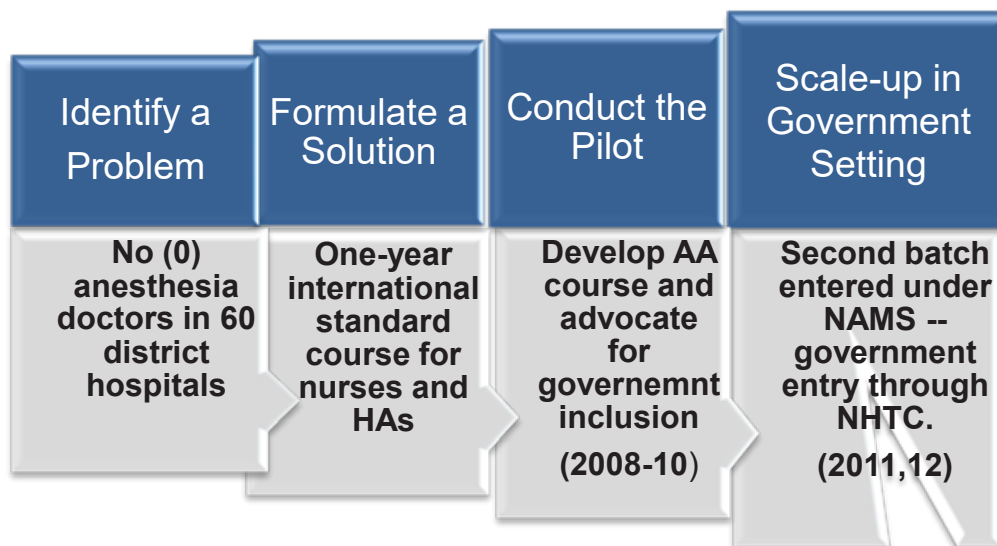
- With the addition of Doti District, RSSP is now in seven districts. The QI tools are slowly being implemented.
- First two batches of AAC were entered, totaling 23 students. Registration started for health assistants, but remains to nurses.
- SBA has 7 sites developed, 6 of them training. AAC has 6 sites developed and training.
- Although incorporation into the government's Sr. AHW training was agreed during this year, it did not start until the following year.
- It was still being developed during this year.
- Each of these follow-ups was conducted.
- Still in development process.
- 23 MDGP and 29 Anesthesia Assistant posts are approved by the Health Ministry and have gone to other Ministries for final approval.
- Job descriptions are still in process.
- Revision started.

TRAINING

NSI conducts those trainings with high likelihood of impacting health care within the Nepal government's essential areas. These courses for health care workers "fill gaps" in the rural health care team and are in areas where few other organizations are providing the training.

Anesthesia Assistant Course (AAC)

AAC is the one year Anesthesia Assistant Course under the National Academic of Medical Science (NAMS). A total of 9 participants of first batch passed out in 2011/12 and 14 more are studying in the second batch.



Biomedical Equipment Technician (BMET, BMEAT, and Short Course)

Biomedical Equipment Technician (BMET) is the one-year course that trains college graduates to repair and maintain hospital equipment. A total of 20 private participants were being trained during this year. This is Nepal's first full technician course in an emerging field that is essential to delivering quality health care.

2 months Biomedical Equipment Assistant Technician course was designed for the support level government staff. Two batches of the training were conducted and 33 participants were trained this year. One batch of short term training for radiographers was provided to 10 participants.

Skilled Birth Attendant (SBA)

This is a course of 4 to 10 weeks that trains nurses, midwives and doctors to conduct deliveries including those with complications. This year NSI conducted 17 batches of trainings and trained 173 candidates out of which some were private participants. NSI has developed two new SBA sites for expansion as requested by National Health Training Center (NHTC).

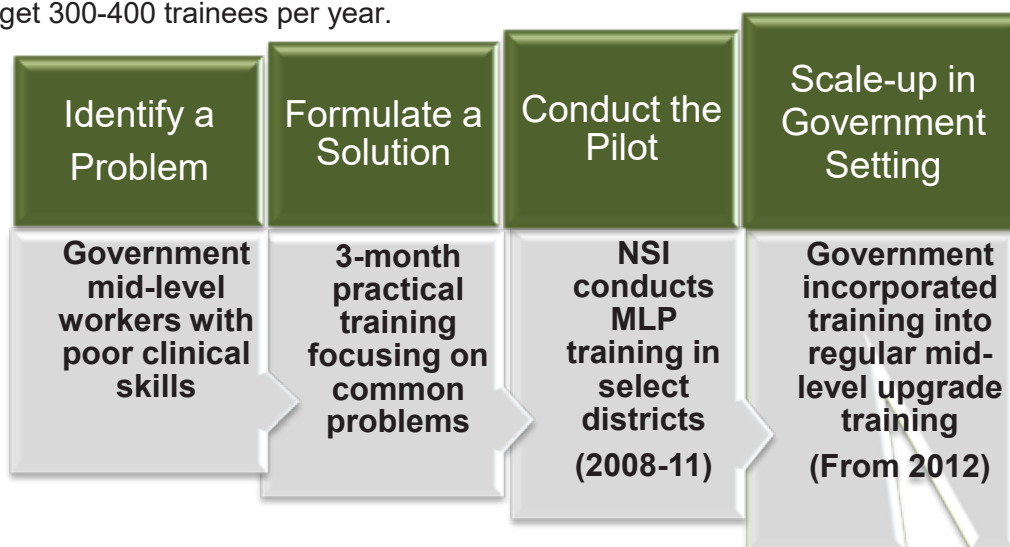
Ultrasound Training (USG)

This is a 3-month course that trains government doctors to do basic diagnostic ultrasound. NSI conducted five batches this year at Patan Hospital, Civil Hospital, Bir Hospital and Teaching Hospital. Altogether 15 doctors were trained during this year. NSI is in the process of developing other hospitals as an USG training site.

Mid- Level Practicum (MLP)

This 3-month clinical-based course upgrades the skills of government's mid-level workers (health assistants and auxiliary health workers) who form the back-bone of the rural health care team. This year NSI conducted nine batches of the training and trained 66 participants.

NSI signed an agreement with the Ministry of Health and Population for the MLP course to be integrated into the government's standing Sr. AHW 6-month course. This will increase both intake and change the funding source to the government. MLP will then be conducted in 11 different sites and target 300-400 trainees per year.



In the last year, NSI provided training to a total of 326 participants under different training programs, most coming from remote government institutions. During this year NSI developed new training sites, coming to a total of 6 SBA sites, 6 AAC sites, 11 MLP sites and 4 USG sites.

2011-12 Trainings	# of Batches	# Trainees
Skill Birth Attendant	17	173
Biomed Asst Tech	2	33
BMET –short training	1	10
Biomed Technician	1	20
Anesthesia Assistant	1	9
Mid-level Practicum	9	66
Ultrasound	5	15
TOTAL		326

RURAL STAFF SUPPORT PROGRAM

This year NSI has expanded RSSP to four more districts as requested by Ministry of Health and Population. The program is now running in seven remote district hospitals – Jiri, Bajhang, Gulmi, Kalikot, Salyan, Kapilvastu and Doti. The RSSP is an integrated package of supporting rural hospitals called the "8 Cs" that enhance the enabling environment and center on the MDGP doctor.

Communication

Under this component, ADSL is connected so that doctors and other staff have continuous connection to the internet.

Continuing Medical Education

Under this component, staff of RSSP district hospitals is brought to the higher NSI partner centers' for refresher courses and on-the-job training.

Community Governance

NSI has taken an active role in building up the local governance board of each hospital.

Connection with the District

NSI links the district hospital with smaller district health institutions, through field visits, CME programs, and an emerging cell-phone based consultation system.

Comfortable Quarters

NSI builds or renovates quarters for staff.

Clinical Coordination by MDGP

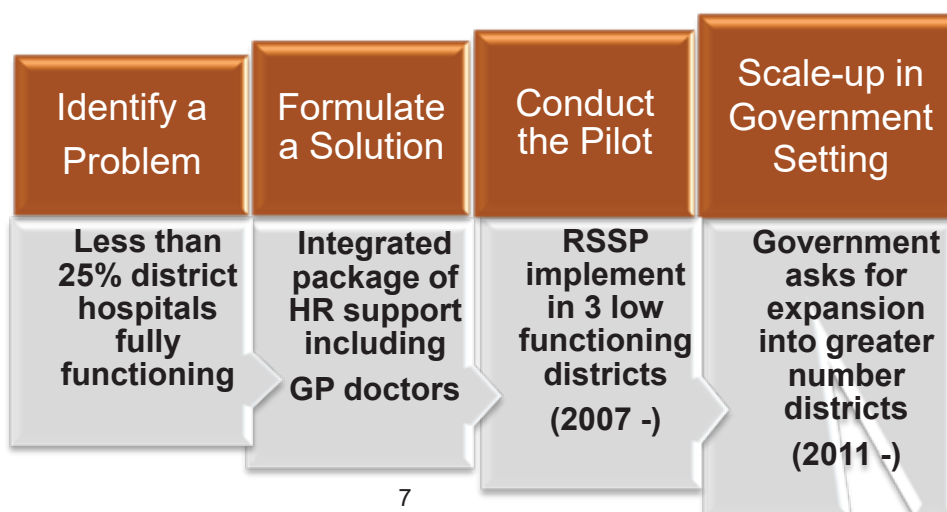
12 MDGPs including 3 GoN GPs are now in the field, fulfilling their bond to work in rural hospitals after receiving scholarships.

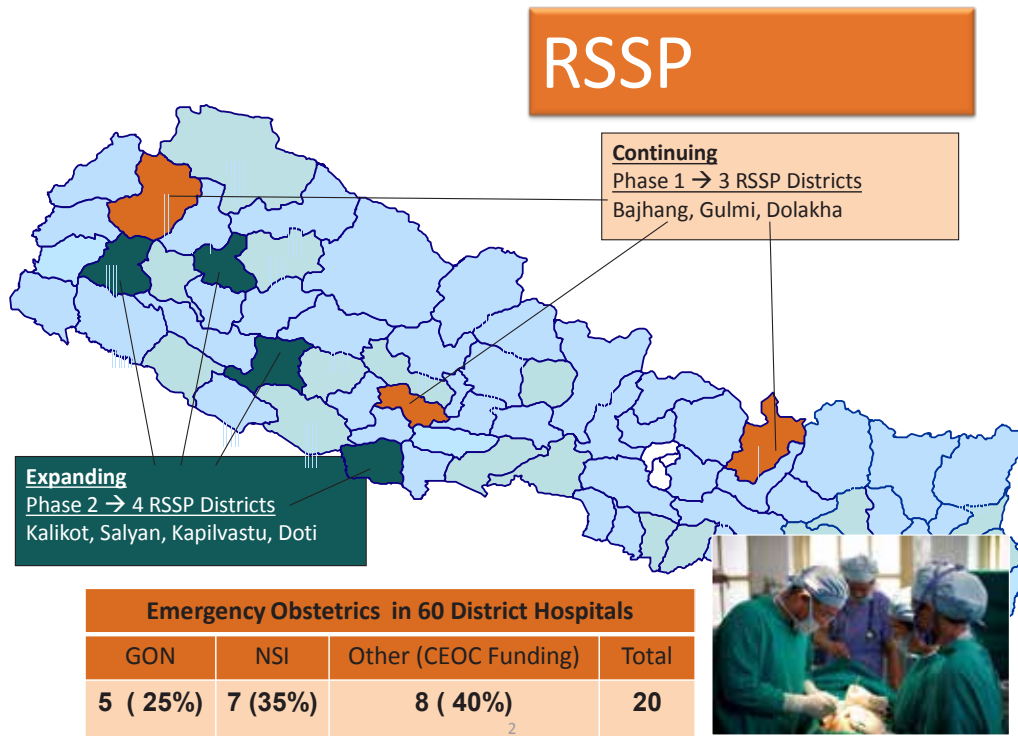
Capital Support

A modest support package of 'mop up' capital support is tailored to each hospital's current needs such as infrastructure development and human resource development.

Continuous Quality Improvement

This is a self-administered program of improvement of hospital performance.





Scholarships

NSI has provided scholarships for 40 doctors studying for their MDGP under Institute of Medicine (IoM) and National Academy of Medical Sciences (NAMS) of which 4 had completed bond and 6 paid back without serving full time period. The scholarship recipients are then posted to RSSP districts for 3 years. The totals of 12 doctors are currently serving in different district hospitals and 14 are in training.

Similarly NSI has provided a scholarship to an additional MD Anesthesia doctor this year that is committed to work in the AA program as a trainer upon completion of his MD. One MD Anesthesia doctor is working at Tansen Mission Hospital.

Type	Till Date	Currently Serving	Per Year
MDGP	36*	12	3-5
MD Anesthesia	3	1	1-2
Bishal Memorial Scholarship	0	0	1
Total	40	13	

ADVOCACY

NSI has helped to establish (and continues to play a coordinating role) in three Advocacy Committees – for the MDGP doctor, Anesthesia Assistants, and Biomedical Equipment Technicians. The committees include leaders of that profession, academic and INGO representative, and government workers themselves. The main objective of this lobbying is for improvement in government human resource policy. The achievements made in this year were:

- MDGP and AA post creation process is at the final stage.
- Government has recognized the importance of a BMET- Career ladder created in the government system.
- Formed a BMET Advocacy Committee
- Initiated the process for the integration of training follow-up (FEP) within the government system.

Each year NSI conducts Annual Rural Healthcare Workers Conference with the objectives to – i) provide encouragement and uplift to the healthcare workers; ii) provide continuing medical education (CME); provide a forum for discussion within the government system; and iv) explore wider future linkages between rural healthcare workers, the government and NSI. In March 2012, NSI organized the 4th Rural Health Care Workers Conference in coordination with the National Health Training Center (photo below) specifically for workers from rural government health institutions. The three-day conference was inaugurated by Health Secretary of Ministry of Health and Population Dr. Praveen Mishra. On the same day "Nick Simons Award 2011" was awarded to SrANM Yasoda Ojha of Mauwa Health Post, Doti district, to honor her long, excellent service in a rural health care center.



MONITORING AND EVALUATION

Follow-up Enhancement Program

As a necessary adjunct to training and according to government policies (not fully implemented), NSI conducts a program of follow-up for graduates in their work-place. The components of this program include: assessment testing, coaching, workplace assessment, and feedback at multiple levels.

During the last year, the new NSI FEP department worked with training experts in multiple fields to conduct one SBA, one AA, two MLP, one BMET, and the start of one ultrasound training. This was widely appreciated by both the graduates who were visited, as well as by the government.



M+E Section

During the last year, the monitoring and evaluation system was completely revised. This began with standardization of 'quality' into three main domains: classroom, practice, and administration. A database was constructed around that system, which allows for reports from field visits, trainers, and participants to be fed back to training sites for their improvement.

Research

NSI was involved in the following research projects during the year:

- Cell-phone based medicine
- Local hiring of health workers
- Migration of Nepalese doctors
- Career choices of Nepalese medical students and doctors

These are in various processes of data collection, write-up and publication. In addition, last year NSI hired a research consultant and began a process of supporting NSI staff to develop their research skills.

BUILDING

NSI supported two building projects this year.

- Dadeldhura Training Center/Hostel (in Far West Nepal)
- Biomedical Equipment Technician Training Center (on NHTC campus, Teku)

NSI also completed work on its Central Office in Sanepa.

FINANCE

Finance Report Sections

- 1. Summary of Expenses for fiscal year 2068/69 (2011-12)**
- 2. Functional Summary of Expenses**
- 3. Funding Route Summary**
- 4. Detailed Budget/Expenditure**

The Nick Simons Institute is a charitable company working exclusively in Nepal under a Board of distinguished Nepalese professionals. In 2006, Jim and Marilyn Simons established the organization as a memorial to their son Nick, who had worked in Nepal in 2002-3.

Funding for NSI comes mainly from the Nick Simons Foundation in New York with a smaller part from training income. NSI has no other sources of income.

NSI's expenses include building projects, the largest of which was the NSI Center in Sanepa. This construction and furnishing was completed during the past year. Other smaller building projects included the training center/hostel in Dadeldhura and the start of the BMET training center in Teku. All building projects together constituted 34% of the year expenditure.

The last five financial years have seen the growth of the Rural Staff Support Program relative to Training expenditures. With the growth to 7 districts – and including scholarship expenses, which are mainly for district GPs – RSSP utilizes 20% of total NSI expenses, slightly more than Training programs (each of these are exclusive of any building projects).

Office expenses – including staff salaries and development, equipment, and daily running costs – total 20% of total expenses.

The Functional Summary shows a re-calculation based on program areas, including associated building within those areas. When training-related building is added to training programs, this makes up nearly 50% of NSI's expenses.

Nick Simons Institute
Summary of Expenses for FY 2068/69 (2011-12)
(in Nepalese Rupees)

Group	Previous Year's Actuals	FY 68/69 Actuals	FY 68/69 Budgeted
1. Training			
1.1 Anesthesia Assistant Technician	4,026,921	5,794,143	4,395,597
1.2 Bio Medical Equipment Technician	3,655,765	2,951,633	3,700,000
1.3 CME	258,236	474,392	950,000
1.4 General Training	948,577	1,120,229	1,860,000
1.5 Hospital Management	-	132,757	600,000
1.6 Mid Level Practicum	7,635,755	10,274,953	11,393,211
1.7 Skilled Birth Attendant	4,877,902	6,614,994	8,026,667
1.8 Ultrasound	912,495	319,290	770,000
Total Training Expense	22,315,651	27,682,390	31,695,475
2. RSSP			
2.1 Communication	355,077	204,733	500,000
2.2 Continuing Med Education	5,099,522	560,043	1,950,000
2.3 Community Governance	699,280	1,087,111	1,500,000
2.4 Connection with NSI Centers	70,440	269,766	3,950,000
2.5 Children's Education	957,153	236,000	900,000
2.6 Captaincy by MDGP	5,015,526	11,010,445	12,600,000
2.7 Capital Subsidy	1,520,792	3,648,256	3,000,000
2.8 Comfortable Quarter		1,248,152	1,300,000
2.9 Continuous Quality Improvement		250,000	600,000
2.10 Administration	1,082,602	2,892,879	3,975,000
2.11 RSSP General	1,181,730	1,416,968	2,166,703
Total RSSP Expense	15,982,121	22,824,354	32,441,703
3. Scholarships			
3.1 Anesthesia	317,610	-	-
3.2 MDGP	6,522,541	6,704,530	9,314,000
Total Scholarship Expense	6,840,151	6,704,530	9,314,000
4. Monitoring & Evaluation (M & E)			
4.1 Follow-up Enhancement Program (FEP)	-	2,223,874	3,040,000
4.2 Research	547,596	505,184	1,000,000
4.3 M & E General	3,035,043	-	-
Total Monitoring & Evaluation Expense	3,582,639	2,729,058	4,040,000
5. Advocacy			
5.1 Advocacy General	1,107,238	444,482	550,000
5.2 Marketing	296,105	490,479	500,000
5.3 Rural Healthcare Workers Conference	3,230,091	2,865,846	2,600,000
5.4 Radio Program	558,388	-	-
Total Advocacy Expense	5,191,822	3,800,807	3,650,000
6. Office			
6.1 Staff Salary	14,313,727	19,305,089	19,030,000
6.2 Staff Development	1,586,146	1,311,972	1,400,000
6.3 Consultants	1,368,750	1,566,153	1,700,000
6.4 Insurance	326,845	823,413	700,000
6.5 Utilities	263,755	590,778	600,000
6.6 Office Consumables	711,618	1,000,428	580,000
6.7 Rent & Equipment	1,251,041	1,162,225	1,000,000
6.8 Other	5,240,588	4,192,459	3,740,000
Total Office Expense	25,062,470	29,952,518	28,750,000
TOTAL RECURRING EXPENSES (1-6)	78,974,854	93,693,657	109,891,178
7. Building			
7.1 NSI Office	48,761,925	19,783,434	13,000,000
7.2 AMDA Maternity Block	17,424,777	7,420,285	11,000,000
7.3 BMET Training Center	1,978,982	10,761,030	30,000,000
7.4 Dadeldhura Team Hospital Training Center	14,000,000	11,500,000	11,000,000
7.5 Bajhang Doctor's Quarter	982,736	-	-
7.6 Lamjung Hospital Training Building	4,733,564	-	-
Total Building Expense	87,881,984	49,464,749	65,000,000
Grand Total (1 - 7)	166,856,838	143,158,406	174,891,178

Functional Summary

Functional Area	Expenditure (NPR. Million, rounded to nearest)
A. Training Site Development	49.7
B. Non-training Rural Support	22.3
C. Office Staff	20.6
D. NSI Headquarters Building	19.8
E. Non-staff Office	9.3
F. Scholarship (PG doctors)	6.7
G. Training Tuition	4.8
H. Advocacy	3.8
I. Curriculum Development	3
J. Follow-up	2.2
K. Research	0.5
L. Other	0.3
TOTAL	143.0

Funding Route Summary

Funding Route	Amount (NPR. Million, rounded to nearest)
1. Nick Simons Foundation	141.0
2. Income (Nepal)	2.0
TOTAL	143.0

Nick Simons Institute
Details of Expenses (FY 2068/69)

Program Heading	Sub Headings	Budget FY 68/69 NPR	Actual FY 68/69 NPR	Variance	Remarks
1 Training					
1.1 General	1.1.1 NSI Network Meeting	400,000	135,250		
	1.1.2 NHTC Support	800,000	804,144		
	1.1.3 NHTC Staff	360,000	-		
	1.1.4 JHPIEGO	-	-		
	1.1.5 New Partner Assessment		-		
	1.1.6 CTS Development	300,000	180,835		
		1,860,000	1,120,229		
1.2 Biomedical Equipment Technician (BMET)	1.2.1 Staff	1,700,000	1,873,131		
	1.2.2 Marketing	300,000	57,873		
	1.2.3 Equipment / Furnishing	100,000	110,103		
	1.2.4 Curriculum Development	100,000	80,592		
	1.2.5 External Consultancy	200,000	3,000		
	1.2.6 BMET Program Support	700,000	471,084		
	1.2.7 BMEAT Training (non RSSP)	600,000	355,850		
		3,700,000	2,951,633		
1.3 Anesthesia Assistant Course (AAC)	1.3.1 National Training Consultant/Travel	100,000	37,564		
	1.3.2 Marketing	-	-		
	1.3.3 Course Development	-	-		
	1.3.4 Training Materials	400,000	1,696,327	1,296,327	Expanded 2 sites
	1.3.5 Training of Trainers	100,000	12,098		
	1.3.6 External Consultancy	-	-		
	1.3.7 Training & Supervision	200,000	420,897	220,897	Expanded 2 sites
	1.3.8 Assessment of New Sites	50,000	28,906		
	1.3.9 AA Refresher	200,000	37,700		
	1.3.10 Training Site Development		-		
	1.3.10.1 Maternity Hospital	150,000	353,931	100,000	Needed additional support
	1.3.10.2 NAMS	400,000	116,955		
	1.3.11 UAM Training & Support		290,490	290,490	Unsure of expenses
	1.3.12 Anesthesia Doctor Support	300,000	732,000	432,000	Early payment made to Dr Bishal's family
		1,900,000	3,726,867		
1.4 Skilled Birth Attendant (SBA)	1.4.1 Materials, Equipment (& forum)	300,000	87,946		
	1.4.2 Site Development				
	1.4.2.1 Siddhartha Hospital, Butwal	1,400,000	1,395,835		
	1.4.2.2 Mahakali Zonal Hospital	1,400,000	1,301,665		
	1.4.3 SBA Refresher	300,000	-		
	1.4.4 National SBA Program Support	200,000	9,598		
		3,600,000	2,795,044		
1.5 Mid-level Practicum	1.5.1 MoHP / EDP Meeting	100,000	68,632		
	1.5.2 Curriculum Development/CME	200,000	372,507		
	1.5.3 New Site Visits	150,000	153,268		
	1.5.4 Participants Kit	-	789,237		
	1.5.5 Trainer Development (4 Sites)	1,200,000	1,124,595		
	1.5.6 Equipment (4 New Sites)	1,900,000	2,030,096		
	1.5.7 PTC Committee Support	-	-		
	1.5.8 Support for Existing Site (3 Sites)	450,000	441,991		
	1.5.9 Sr. AHW/MLP Travel Support	360,000	-		
		4,360,000	4,980,326		
Mental Health Training	Grant to CMC - Nepal	-	-		
	Training of Trainers/ CTS	-	-		

Program Heading	Sub Headings	Budget FY 68/69 NPR	Actual FY 68/69 NPR	Variance	Remarks
1.6 Ultrasound	1.6.1 Curriculum Development				
	1.6.1.1 Potential Site Assessment	20,000	4,500		
	1.6.1.2 Curriculum Development	-	-		
	1.6.1.3 USGT Consultant	50,000	-		
	1.6.2 Doctors Training (10 Doctors)	700,000	314,790		
		770,000	319,290		
1.7 CME	1.7.1 Production of Vol 2 CD	600,000	393,577		
	1.7.2 Marketing	150,000	5,300		
	1.7.3 CME Consultant	-	-		
	1.7.4 ALSO Admin Support	150,000	23,930		
	1.7.5 CME Accreditation Workshop	50,000	51,585		
		950,000	474,392		
1.8 Hospital Management	1.8.1 Training Consultant	200,000	79,982		
	1.8.2 Dissemination of Need Assessment	100,000	11,020		
	1.8.3 Work plan/Curriculum Development	100,000	9,510		
	1.8.4 Pilot Training	200,000	32,245		
		600,000	132,757		
1.9 AMDA Damak Hospital	1.9.1 General				
	1.9.1.1 Hospital Support	700,000	727,232		
	1.9.1.2 Equipment	500,000	500,000		
	1.9.1.3 VSAT/Bandwidth	40,000	-		
	1.9.1.4 Site Visits	200,000	92,441		
		1,440,000	1,319,673		
	1.9.2 SBA				
	1.9.2.1 Training Development	150,000	168,532		
	1.9.2.2 Equipment/Supply	200,000	214,032		
		350,000	382,564		
	1.9.3 AAC				
	1.9.3.1 Development/Scholarship	100,000	32,038		
	1.9.3.2 Equipment/Supply	600,000	639,039		
		700,000	671,077		
	1.9.4 MLP				
	1.9.4.1 Training Development	75,000	74,988		
	1.9.4.2 Equipment/Supply	25,000	20,000		
	100,000	94,988			
1.9.5 Other Trainings					
1.9.5.1 Training Development	-	-			
	-	-			
		2,590,000	2,468,300		
1.10 Tansen Hospital	1.10.1 General				
	1.10.1.1 Hospital Support	900,000	1,026,100		
	1.10.1.2 Equipment	500,000	600,000		
	1.10.1.3 VSAT Bandwidth	45,000	-		
	1.10.1.4 Site Visits	150,000	70,593		
	1.10.1.5 Participant Housing	200,000	150,000		
		1,795,000	1,846,693		
	1.10.2 SBA				
	1.10.2.1 Training Development	150,000	82,572		
	1.10.2.2 Equipment/Supply	200,000	186,577		
		350,000	269,149		
	1.10.3 AAC				
	1.10.3.1 Development/Scholarship	150,000	84,753		
		150,000	84,753		
	1.10.4 MLP				
	1.10.4.1 Training Development	50,000	-		
	1.10.4.2 Equipment/Supply	50,000	-		
	100,000	-			
1.10.5 Other Trainings					
1.10.5.1 Training Development	-	-			
	-	-			
		2,395,000	2,200,595		

Program Heading	Sub Headings	Budget FY 68/69 NPR	Actual FY 68/69 NPR	Variance	Remarks
1.11 Dadeldhura Hospital	1.11.1 General				
	1.11.1.1 Hospital Support	700,000	834,050		
	1.11.1.2 Equipment	500,000	500,000		
	1.11.1.3 Site Visits	200,000	203,658		
	1.11.1.4 VSAT Bandwidth	150,000	44,216		
		1,550,000	1,581,924		
	1.11.2 SBA				
	1.11.2.1 Training Development	200,000	52,461		
	1.11.2.2 Equipment/Supply	200,000	2,750		
		400,000	55,211		
	1.11.3 MLP				
	1.11.3.1 Training Development	100,000	29,527		
	1.11.3.2 Equipment/Supply	50,000	51,716		
		150,000	81,243		
	1.11.4 Other Trainings				
1.11.4.1 Training Development	-	-			
	-	-			
		2,100,000	1,718,378		
1.12 Lamjung Hospital	1.12.1 General				
	1.12.1.1 Hospital Support	700,000	800,000		
	1.12.1.2 Equipment	500,000	600,000		
	1.12.1.3 VSAT Bandwidth	45,000	-		
	1.12.1.4 Site Visit	75,000	39,411		
		1,320,000	1,439,411		
	1.12.2 SBA				
	1.12.2.1 Training Development	150,000	47,340		
	1.12.2.2 Equipment/Supply	200,000	193,573		
		350,000	240,913		
	1.12.3 MLP				
	1.12.3.1 Training Development	100,000	93,591		
	1.12.3.2 Equipment/Supply	50,000	430		
		150,000	94,021		
			1,820,000	1,774,345	
1.13 Bharatpur Hospital (Chitwan Government Hospital)	1.13.1 General				
	1.13.1.1 Hospital Support	700,000	600,557		
	1.13.1.2 Equipment	100,000	100,000		
	1.13.1.3 Communication	40,000	-		
	1.13.1.4 Site Visits	100,000	67,417		
		940,000	767,974		
	1.13.2 SBA				
	1.13.2.1 Training Development	50,000	50,000		
	1.13.2.2 Equipment/Supply	100,000	-		
		150,000	50,000		
	1.13.3 AAC				
	1.13.3.1 Training Development	50,000	-		
	1.13.3.2 Equipment/Supply	100,000	-		
		150,000	-		
	1.13.4 MLP				
	1.13.4.1 Training Development	100,000	96,684		
	1.13.4.2 Equipment Supply	50,000	52,362		
		150,000	149,046		
	1.13.5 Other Trainings				
1.13.5.1 Training Development	-	-			
	-	-			
		1,390,000	967,020		
TOTAL TRAINING EXPENSE (1)		28,035,000	25,629,175		

Program Heading	Sub Headings	Budget FY 68/69 NPR	Actual FY 68/69 NPR	Variance	Remarks
2. Rural Staff Support Program					
2.1 Bajhang	2.1.1 MDGP	2,800,000	3,008,040		
	2.1.2 Other Staff	600,000	772,666		
	2.1.3 Travel	500,000	304,436		
	2.1.4 Communication	100,000	79,010		
	2.1.5 Continuing Medical Education	-	-		
	2.1.5.1 MLP Training	350,000	375,538		
	2.1.5.2 Other CME	300,000	54,402		
	2.1.6 Connection with Partners/District	650,000	-		
	2.1.7 Children's Education	200,000	-		
	2.1.8 Community Governance	350,000	271,111		
	2.1.9 Capital Subsidy	500,000	516,710		
	2.1.10 Comfortable Quarter	100,000	110,651		
	2.1.11 Continuous Quality Improvement	100,000	50,000		
2.1.12 Other	-	-			
		6,550,000	5,542,563		
2.2 Dolakha	2.2.1 MDGP	1,300,000	808,483		
	2.2.2 Other Staff	200,000	217,136		
	2.2.3 Travel	200,000	45,080		
	2.2.4 Communication	100,000	89,115		
	2.2.5 Continuing Medical Education	-	-		
	2.2.5.1 MLP Training	350,000	320,278		
	2.2.5.2 Other CME	300,000	233,937		
	2.2.6 Connection with Partners/District	700,000	8,200		
	2.2.7 Children's Education	350,000	236,000		
	2.2.8 Community Governance	150,000	150,000		
	2.2.9 Capital Subsidy	500,000	317,757		
	2.2.10 Comfortable Quarter	200,000	30,825		
	2.2.11 Continuous Quality Improvement	100,000	100,000		
2.2.12 Other	-	-			
		4,450,000	2,556,811		
2.3 Gulmi	2.3.1 MDGP	2,500,000	3,052,752	552,752	Paid contract completion bonus to 1 MDGP & revised salary
	2.3.2 Other Staff	200,000	238,607		
	2.3.3 Travel	300,000	234,960		
	2.3.4 Communication	50,000	36,609		
	2.3.5 Continuing Medical Education	-	-		
	2.3.5.1 MLP Training	350,000	324,348		
	2.3.5.2 Other CME	300,000	147,800		
	2.3.6 Connection with Partners/District	650,000	226,434		
	2.3.7 Children's Education	350,000	-		
	2.3.8 Community Governance	250,000	166,000		
	2.3.9 Capital Subsidy	500,000	507,420		
	2.3.10 Comfortable Quarter	200,000	166,512		
	2.3.11 Continuous Quality Improvement	100,000	50,000		
2.3.12 Other	-	-			
		5,750,000	5,151,442		

Program Heading	Sub Headings	Budget FY 68/69 NPR	Actual FY 68/69 NPR	Variance	Remarks
2.4 Kapilvastu	2.4.1 MDGP	800,000	454,574		
	2.4.2 Other Staff	300,000	163,933		
	2.4.3 Travel	300,000	198,948		
	2.4.4 Communication	50,000	-		
	2.4.5 Continuing Medical Education	-	-		
	2.4.5.1 MLP Training	350,000	328,418		
	2.4.5.2 Other CME	350,000	-		
	2.4.6 Connection with Partners/District	650,000	16,950		
	2.4.7 Community Governance	250,000	250,000		
	2.4.8 Capital Subsidy	500,000	445,510		
	2.4.9 Comfortable Quarter	200,000	76,377		
	2.4.10 Continuous Quality Improvement	100,000	-		
2.4.11 Other	-	-			
		3,850,000	1,934,709		
2.5 Salyan	2.5.1 MDGP	2,000,000	1,749,490		
	2.5.2 Other Staff	300,000	100,000		
	2.5.3 Travel	250,000	262,670		
	2.5.4 Communication	50,000	-		
	2.5.5 Continuing Medical Education	-	-		
	2.5.5.1 MLP Training	350,000	329,094		
	2.5.5.2 Other CME	350,000	22,600		
	2.5.6 Connection with Partners/District	650,000	18,182		
	2.5.7 Community Governance	250,000	250,000		
	2.5.8 Capital Subsidy	500,000	510,129		
	2.5.9 Comfortable Quarter	200,000	211,231		
	2.5.10 Continuous Quality Improvement	100,000	-		
2.5.11 Other	-	-			
		5,000,000	3,453,395		
2.6 Kalikot	2.6.1 MDGP	3,200,000	1,825,504		
	2.6.2 Other Staff	200,000	-		
	2.6.3 Travel	500,000	234,865		
	2.6.4 Communication	150,000	-		
	2.6.5 Continuing Medical Education	-	-		
	2.6.5.1 MLP Training	350,000	375,541		
	2.6.5.2 Other CME	350,000	101,304		
	2.6.6 Connection with Partners/District	650,000	-		
	2.6.7 Community Governance	250,000	-		
	2.6.8 Capital Subsidy	500,000	1,350,730	850,730	Required more input
	2.6.9 Comfortable Quarter	400,000	361,825		
	2.6.10 Continuous Quality Improvement	100,000	50,000		
2.6.11 Other	-	-			
		6,650,000	4,299,769		

Program Heading	Sub Headings	Budget FY 68/69 NPR	Actual FY 68/69 NPR	Variance	Remarks
2.7 Other (Seventh) District	2.7.1 MDGP	-	111,602	111,602	Previously not budgeted
	2.7.2 Other Staff	-	119,578	119,578	Previously not budgeted
	2.7.3 Travel	-	-	-	
	2.7.4 Communication	-	-	-	
	2.7.5 Continuing Medical Education	-	-	-	
	2.7.6 Connection with Partners/District	-	-	-	
	2.7.7 Community Governance	-	-	-	
	2.7.8 Capital Subsidy	-	-	-	
	2.7.9 Comfortable Quarter	-	290,731	290,731	Previously not budgeted
	2.7.10 Continuous Quality Improvement	-	-	-	
	2.7.11 Other	-	-	-	
			521,911		
2.8 RSSP General	2.8.1 New Site Visit	75,000	75,609		
	2.8.2 Baseline M & E Survey	600,000	268,006		
	2.8.3 Common Capital Fund Program Assessment	1,000,000	1,073,353		
		-	-		
		1,675,000	1,416,968		
TOTAL RSSP EXPENSES (2)		33,925,000	24,877,568		
3. Scholarships					
3.1 MDGP	3.1.1 Tuition/ Stipend NAMS	3,000,000	2,113,830		
	3.1.2 Tuition/Stipend IoM	4,000,000	4,057,220		
	3.1.3 Institution Support	400,000	399,980		
	3.1.4 GP Network Meeting	200,000	133,500		
		7,600,000	6,704,530		
3.2 MD Anesthesia	3.2.1 Tuition NAMS	-	-		
		-	-		
TOTAL SCHOLARSHIP EXPENSES (3)		7,600,000	6,704,530		
4. Measurement / Evaluation					
M-E Component	Database	-	-		
	SBA Follow-up Study	-	-		
	SBA Dissemination Workshop	-	-		
	MLP follow-up study	-	-		
		-	-		
4.2 Research/ Assessment	4.2.1 IOM Dissemination Workshop	-	-		
	4.2.2 Other Research Study	1,000,000	505,184		
	4.2.3 Research Consultant		-		
	4.2.4 External Assessment of NSI Program		-		
		1,000,000	505,184		
4.3 Follow-up& Evaluation Program (FEP)	4.3.1 SBA		-		
	4.3.1.1 Conduct Studies	800,000	866,178		
	4.3.1.2 Dissemination	100,000	100,000		
	4.3.2 MLP (2)	600,000	424,971		
	4.3.3 USGT	700,000	-		
	4.3.4 BMET	240,000	158,102		
	4.3.5 AAC	600,000	674,623		
		3,040,000	2,223,874		
TOTAL M/E EXPENSES (4)		4,040,000	2,729,058		

Program Heading	Sub Headings	Budget FY 68/69 NPR	Actual FY 68/69 NPR	Variance	Remarks
5. Advocacy					
5.1 Marketing	5.1.1 Brochures	200,000	164,200		
	5.1.2 Advertisements/Marketing	300,000	326,279		
	5.1.3 Conference Support	300,000	241,143		
	5.1.4 Website	-	-		
	5.1.5 Rural HCW Conference	2,500,000	2,785,401		
	5.1.6 Nick Simons Award	100,000	80,445		
		3,400,000	3,597,468		
5.2 Advocacy	5.2.1 BMET Committee	-	-		
	5.2.2 Advocacy Consultancy workshop	-	-		
	5.2.3 MBBS/MDGP Committee	50,000	8,701		
	5.2.4 Newsletter	200,000	194,638		
	WONCA (GPAN) Conference	-	-		
		250,000	203,339		
5.3 Broadcasting Activities	5.3.1 Program Development	-	-		
	5.3.2 Program Broadcasting	-	-		
		-	-		
Radio Program	Airing of Program	-	-		
	Follow up Survey	-	-		
		-	-		
		-	-		
TOTAL ADVOCACY EXPENSES (5)		3,650,000	3,800,807		
6. Office Expenses					
6.1. Staff Salary	6.1.1 Salary	14,300,000	14,901,040		
	6.1.2 Staff PF	1,430,000	1,573,054		
	6.1.3 Dashain Bonus	1,300,000	1,186,382		
	6.1.4 Gratuity Provision	2,000,000	1,644,613		
		19,030,000	19,305,089		
6.2. Consultants	6.2.1 Legal	600,000	580,000		
	6.2.2 Auditor	200,000	186,450		
	6.2.3 Other Consultancy	900,000	799,703		
		1,700,000	1,566,153		
6.3. Insurance	6.3.1 Health Insurance	350,000	410,241		
	6.3.2 Vehicle Insurance	50,000	34,940		
	6.3.3 Office Insurance	300,000	378,232	78,232	Cost exceeded projection
		700,000	823,413		
6.4. Utilities	6.4.1 Telephone	150,000	162,734		
	6.4.2 Water	-	-		
	6.4.3 Electricity	450,000	428,044		
		600,000	590,778		
6.5. Office Consumable	6.5.1 Household	100,000	328,703	228,703	Expenses incurred RHCW Conference
	6.5.2 Kitchen Supplies	80,000	105,469	25,469	Started in-house training
	6.5.3 Groceries	400,000	566,256	166,256	Started in-house training/Increase in commodity prices
		580,000	1,000,428	420,428	

Program Heading	Sub Headings	Budget FY 68/69 NPR	Actual FY 68/69 NPR	Variance	Remarks
6.6. Other	6.6.1 Fuel	250,000	708,976	458,976	Rise in fuel prices / increased storing capacity
	6.6.2 Vehicle Maintenance	50,000	99,549	49,549	Vehicles requiring more maintenance
	6.6.3 Conveyance	50,000	60,325	10,325	Rise in taxi fares
	6.6.4 Rent	-	-		
	6.6.5 Stationary	500,000	578,809		
	6.6.6 Postage and Delivery	50,000	35,843		
	6.6.7 VSAT/Video Bandwidth	150,000	165,369		
	6.6.8 Board Meeting / Retreat	500,000	211,769		
	6.6.9 TAG Meeting	-	-		
	6.6.10 Furniture (Old Building)	-	-		
	6.6.11 Entertainment	-	-		
	6.6.12 Membership / Renewal	150,000	154,381		
	6.6.13 Books and Periodicals	20,000	13,695		
	6.6.14 General Equipment	400,000	454,010		
	6.6.15 Computer, Printer & Equipments	600,000	708,215		
	6.6.16 Field Visit / Travel	250,000	311,046	61,046	Increase in transportation prices
	6.6.17 Visa Fee	150,000	96,416		
	6.6.18 Promotional Expenses	100,000	116,183		
	6.6.19 AMC	200,000	493,417	293,417	Increase in number of AMC items
	6.6.20 Miscellaneous	100,000	28,389		
	6.6.21 Repair and Maintenance	100,000	90,915		
	6.2.22 Bank Charges	20,000	32,342	12,342	Increase in number of transfers to partners
	6.6.23 Annual Planning Meeting	350,000	294,962		
	6.6.24 Staff Development	1,400,000	1,311,972		
	6.6.25 Office Renovation	-	-		
	6.6.26 Property Tax	750,000	700,073		
		6,140,000	6,666,656		
TOTAL OFFICE EXPENSES (6)		28,750,000	29,952,518		
TOTAL RECURRING EXPENSE		106,000,000	93,693,656		
BUILDING					
	1. NSI Building	13,000,000	19,783,434	6,783,434	Cost within total project budget
	2. Bajhang Doctors Quarter	-	-		
	3. AMDA Maternity Building	11,000,000	7,420,285		
	4. Dadeldhura Training Centre	11,000,000	11,500,000		
	5. BMET Training Centre	30,000,000	10,761,031		
	6. Lamjung Training / Hostel Building	-	-		
TOTAL BUILDING		65,000,000	49,464,750		
GRAND TOTAL		171,000,000	143,158,406		

