

# **National Annual Review 2073/74**

## **Central Hospitals**

### **Progress, Opportunities, Challenges and Way forward**

22 September 2017

# Central Hospitals

*including Academia & Centers*

- |    |   |    |  |
|----|---|----|--|
| 1  | Bir Hospital  | 12 | Paropakar Maternity and Women's Hospital |
| 2  | B P Koirala Institute of Health Sciences                | 13 | Tribhuvan University Teaching Hospital   |
| 3  | Patan Hospital  | 14 | National Trauma Center                   |
| 4  | Karnali Academy of Health Sciences                      | 15 | Civil Service Hospital                   |
| 5  | Kanti Children's Hospital                               | 16 | Nepal Police Hospital                    |
| 6  | Manamohan Cardiothoracic Vascular and Transplant Center | 17 | Birendra Army Hospital                   |
| 7  | Shahid Gangalal National Heart Center                   | 18 | Armed Police Force Hospital              |
| 8  | Shukraraj Tropical and Infectious Disease Hospital      | 19 | Bharatpur Cancer Hospital                |
| 9  | HOTC Bhaktapur  | 20 | Bhaktapur Cancer Hospital                |
| 10 | Central Jail Hospital                                   | 21 | Pokhara Academy of Health Sciences       |
| 11 | Mental Hospital   | 22 | Netra Jyoti Sangh                        |

**Regional/Sub-Regional**

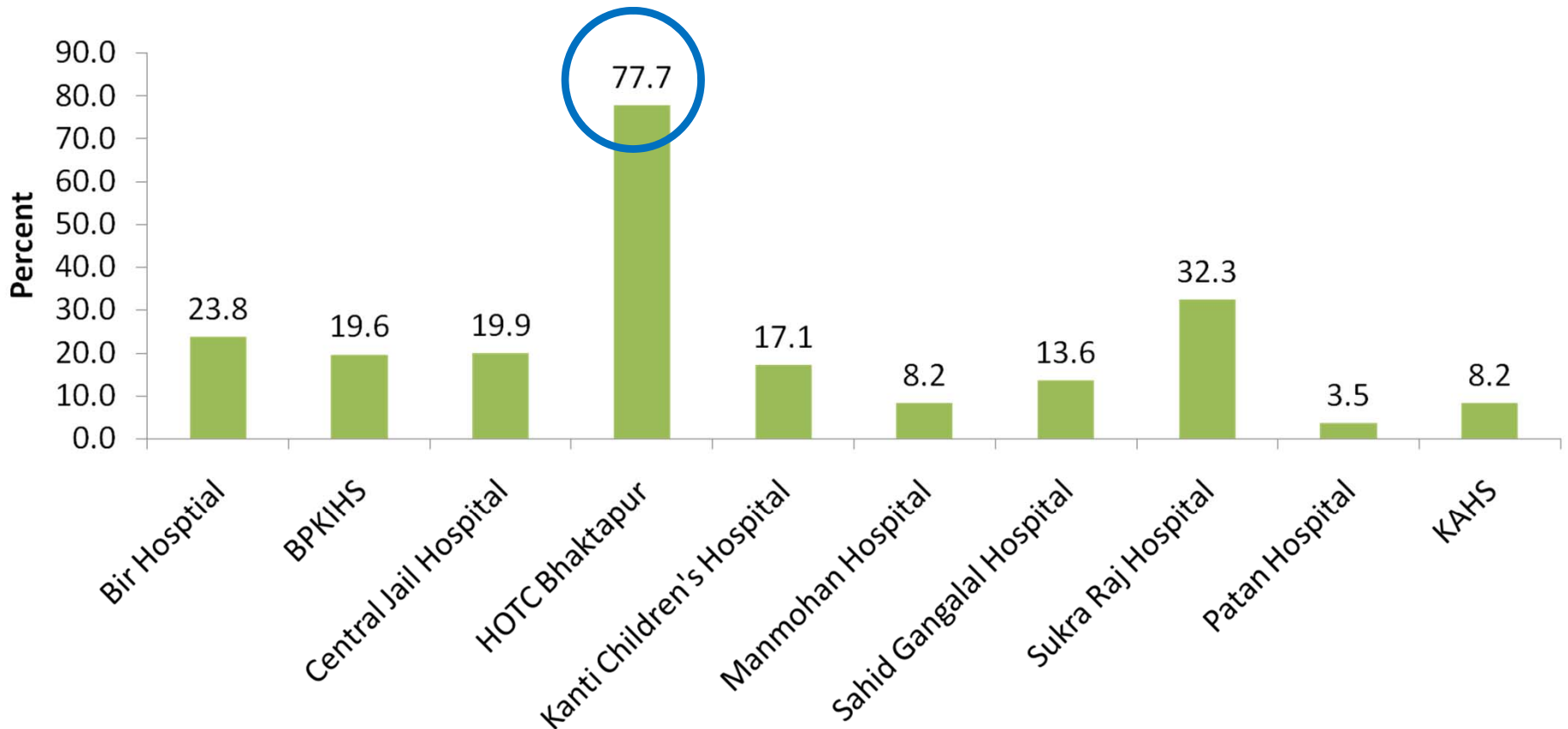
**Hospitals**

**Zonal Hospitals**

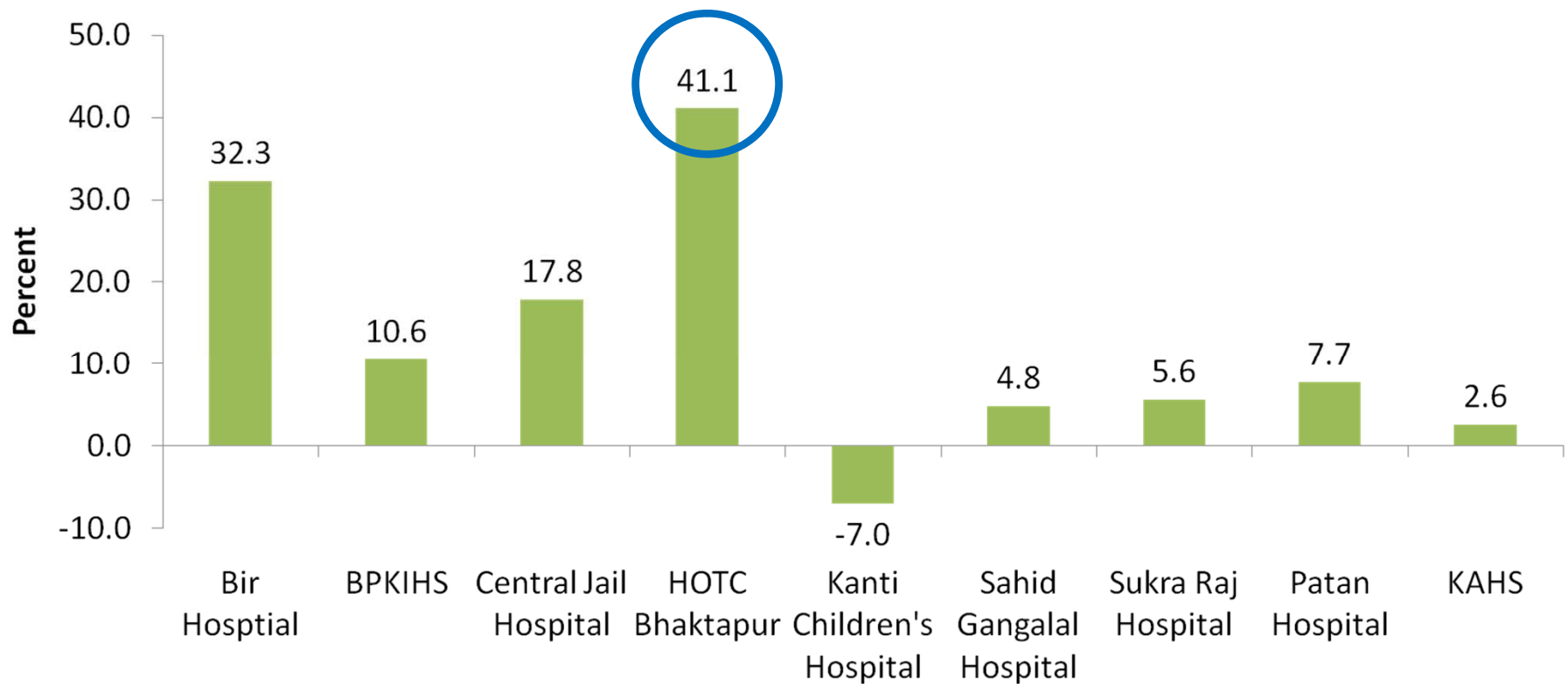
**District Hospitals**

**General Hospitals**

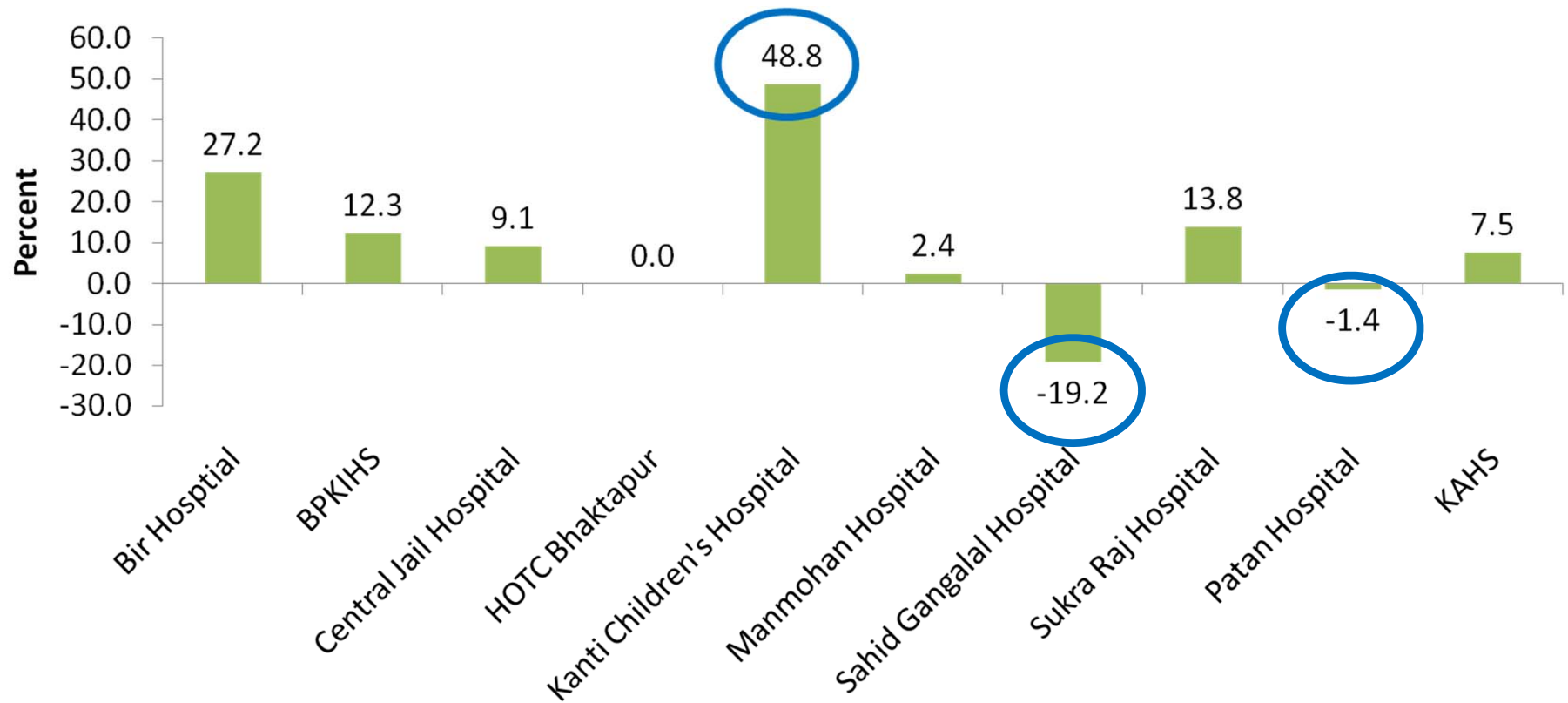
# % change in **OPD visits** by hospitals compared to previous year



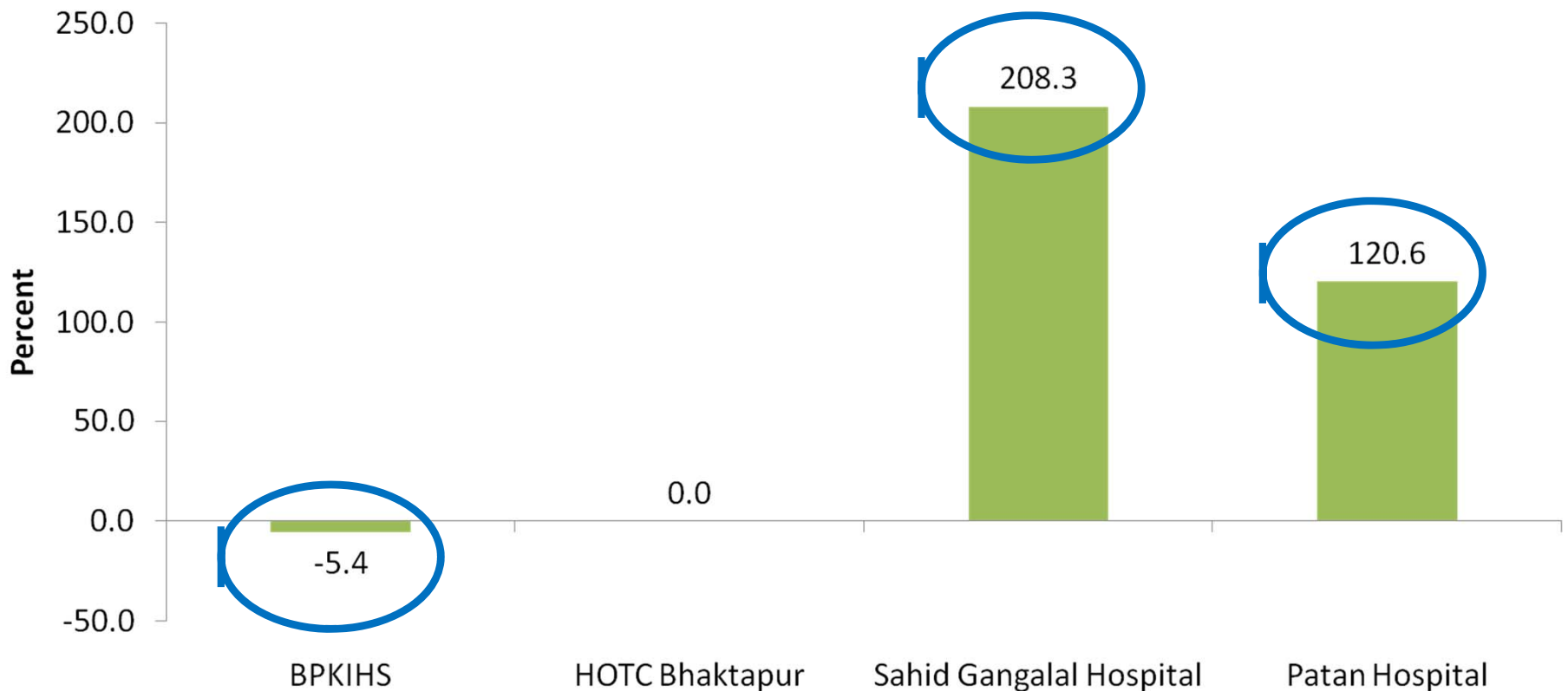
# % change in in-patient admissions by hospitals compared to previous year



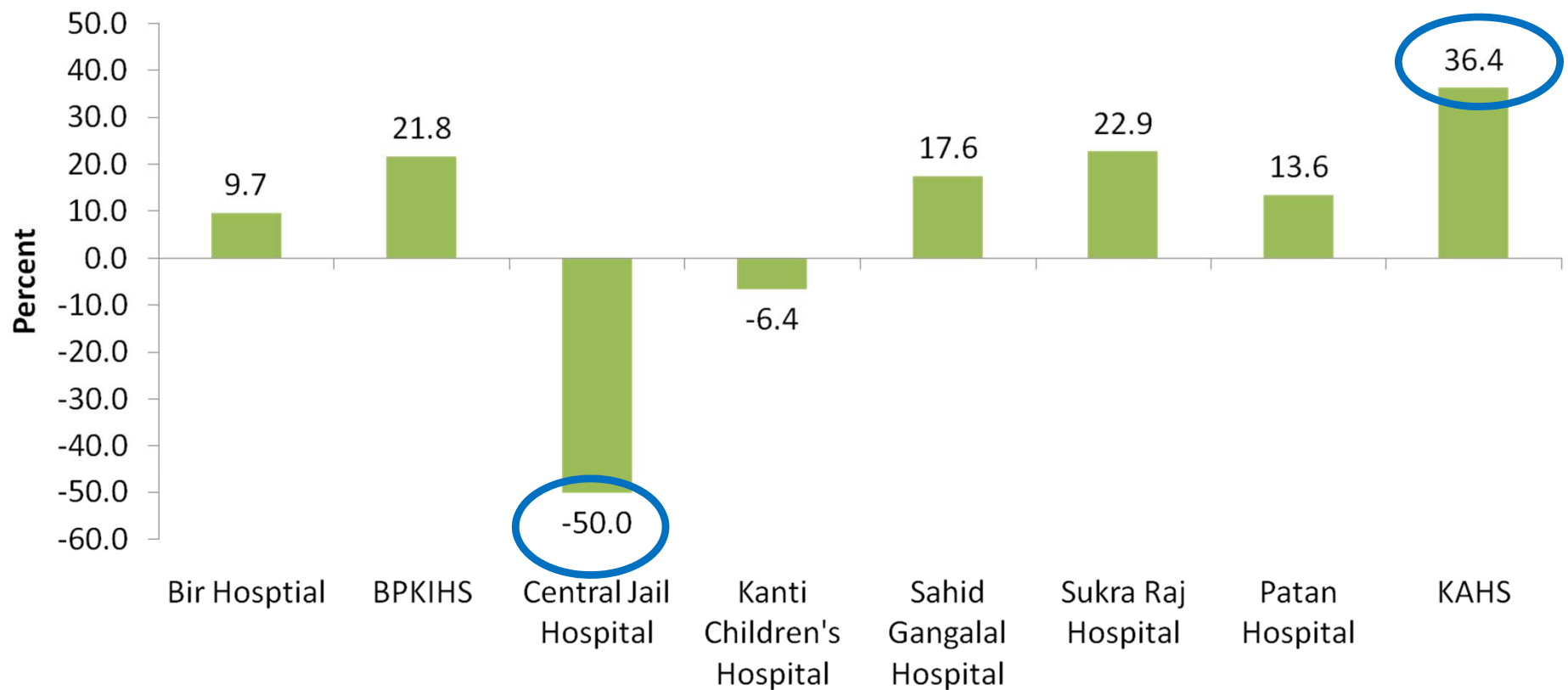
# % change in **bed occupancy rate** by hospitals compared to previous year



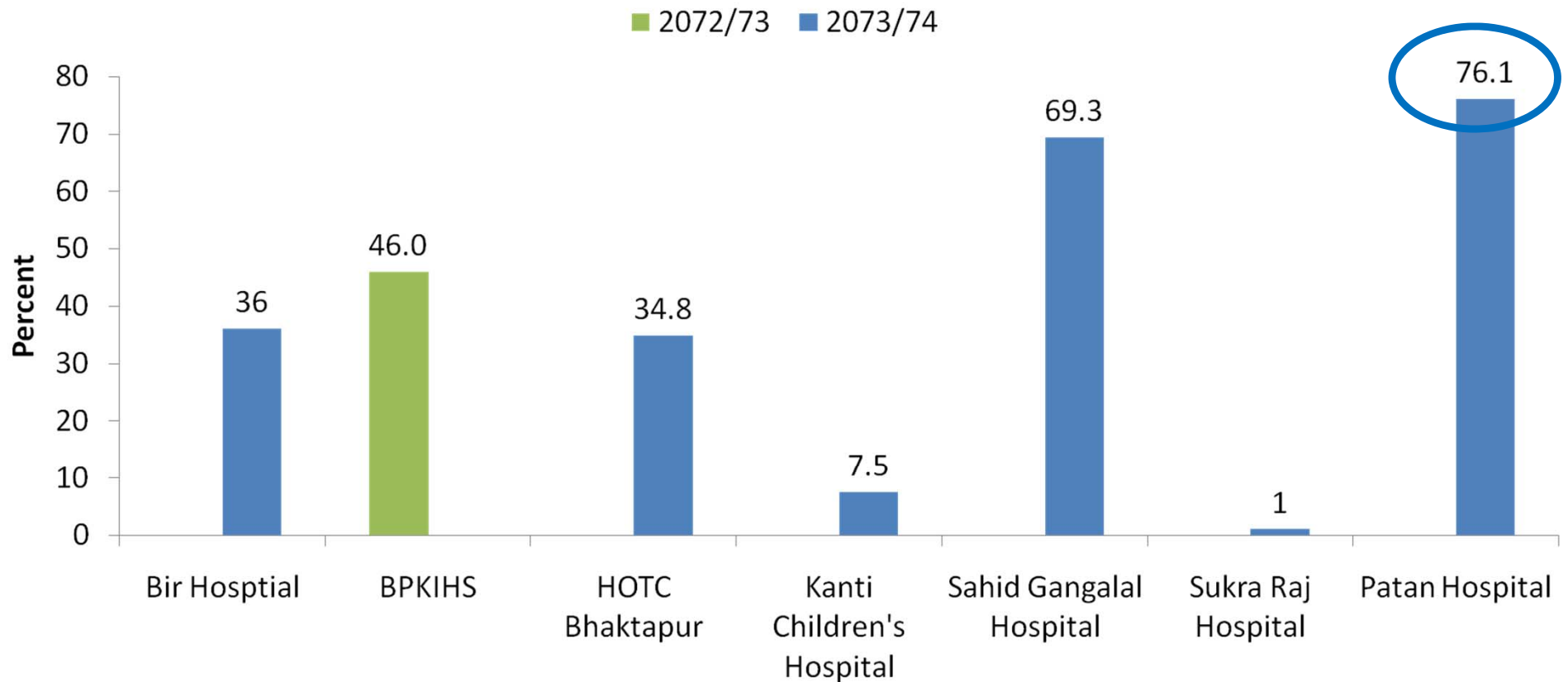
# % change in **infection rate** by hospitals compared to previous year



# % change in hospital death rate by hospitals compared to previous year



# % *Beruju* clearance by hospitals





# Opportunities

- Specialized hospitals: Gangalal hospital, Human Organ Transplant Center, Man Mohan cardio-thoracic centre, Cancer hospitals etc
  - Can collaborate with hospitals for **expansion of specialized services** in all Provinces
  - Can develop as **training sites** to produce **quality human resources**
- Collaboration with **other expertise**:
  - For improving quality services e.g. **Bio-medical engineering**
- Self-sufficient healthcare waste management
  - **Revenue from waste** is sufficient for overall waste management

# Challenges: Infrastructure

- Inadequate **space and land** in most hospitals
  - NAMS, HOTC, PAHS
  - Newer buildings are required
- Old buildings needing repair and maintenance (including toilets)
- Retrofitting:
  - Causing service disruption
- Hospital bed availability vs. sanctioned beds
  - Difficult to plan manpower and patient care

# Challenges: Human Resources

- Rapid turnover of hospital chief
- Hospital bed availability vs. human resources (No O & M survey for many years)
- Irrational allocation of Human Resources in existing organogram
- Management of Govt. staff vs. Hospital Development Committee staff vs. Academic Staff

# Challenges: Human Resources

- Salary discrepancies among public hospitals a major cause for staff turnover
- Specialized hospitals require sanctioned post for specialists  
(e.g.. Mental, Kanti Hospital)

# Challenges

## OTHER ISSUES

- Pharmacy
  - Difficult to manage as prescriptions are **in trade name**,
  - Procurement process difficult
- Increasing demand for **rehabilitation services**
  - Increasing burden of Non-Communicable Diseases (e.g. Mental health)
- Sickle-cell Anemia vs. Thalassemia
- Identification of *bipanna nagarik* still not clear

# Challenges

- Semi-autonomous OR Fully autonomous OR Fully Government run hospitals
  - Discrepancies in HR management
- Equipments
  - Old needing repair and maintenance
  - Inadequate budget for Procurement of new ones

# Way forward

## ▪ Infrastructure development

- Utilization of nearby facilities and other govt. health institutions,
- Expansion of service sites

## ▪ Integrated approach

- Maximizing the use of existing physical infrastructure
- e.g. Land pooling and construction of **multi-storied building** for Human Organ Transplant Center, Bhaktapur Hospital and Cancer Hospital

# Way forward

## ■ Human resource

- **O & M Survey** on the basis of hospital functionality & national standards
- Increase number of **scholarship schemes** and rational utilization of health professionals
- Develop **performance based contracts** for health professionals (min. 2 years)
- Develop **uniform facilities and incentives** for HR throughout all public facilities



# Way forward

- Develop the concept of **umbrella university**
  - for Specialized/ Super Specialized Medical Sciences with multiple faculties/specialization affiliating existing super specialized public hospitals
- One year **fellowship course** on super specialized medical studies like kidney, heart etc
- Curative Service Division to initiate discussions for resolving issues regarding **Hospital Development staff and academic staff**

# Way forward

- Implementation of strict **generic prescriptions** by MoH/NMC in govt. institutions for better pharmacy management
- Strengthen **public health wing** at all hospitals
- Mass public **awareness/motivational campaigns** on human organ transplantation

# Way forward

- Promote **hospital based research**
- Budget allocation for initiation of **waste management**
- Recruitment of **bio-medical engineers**
- Promote **optimum use of trade unions** in hospital management

Thank you