

Human Resources for Health: Nepal Country Profile

October 2012–August 2013



A nationwide assessment of health workforce in public and private health sector

Project Objectives

- To collect and process data on the stock, characteristics and distribution of the public and private health workforce in Nepal.
- To produce a sector-wide HRH profile that could be used to develop a health workforce plan and projections.
- To inform strategies and approaches for the overall management and development of the health workers

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Project Summary

Ministry of Health and Population, in collaboration with the World Health Organisation (WHO) and the Nepal Health Sector Support Programme (NHSSP), undertook Human Resources for Health (HRH) assessment of the health workforce to enable the development of their profile.

This HRH Nepal Country Profile is based on data on Nepal's health workforce at all public sector hospitals with 15 beds and above; all sub-district level health facilities and all private hospitals and non-governmental organisation-run hospitals and facilities. The plan was introduced with the aim to ensure the equitable distribution of appropriately skilled human resources for health (HRH) to support the achievement of health outcomes in Nepal and in particular the implementation of the Nepal Health Sector Programme.

Methods

The study was conducted throughout the country. All public sector hospitals with 15 beds and above including 62 district hospitals, 13 zonal and 5 regional hospitals, 4 army, police and civil service hospitals, all private hospitals and non-governmental organization (NGO) hospitals and facilities, including private pharmacies, laboratories and clinics in close proximity to the facilities were surveyed.

All 75 district health office/district public health offices (DHOs/DPHOs) were surveyed to obtain data on the health workforce in all public health facilities at sub-district levels including in all primary health care centres (PHCCs), health posts and sub-health posts (SHP).

Health training institutions in close proximity to the private and public health facilities were also surveyed. A sample of 4 PHCCs, 18 health posts and 78 SHPs from 15 districts across Nepal's three ecological zones (the Terai southern plains, hills and mountains) and five development regions were surveyed to validate the DHO/DPHO data.

In order to ensure access to private health sector data and to avoid double-counting and/or the duplication of

data as a result of dual working and the multiple employment of staff various strategies were included.

Key Findings

- This assessment identified approximately 54,177 health workers, of which 32,809 were involved in the public sector and 21,368 in the private sector.
- Most of the jobs are located between workforce levels 4 and II.
- Majority of the groups are categorized by the type of expertise required for the job, with the exception of the miscellaneous category, which includes a mix of clinical, support, management and administrative staff.
- Majority of the public health workforce is governed by the Health Service Act, 1997/98; but a significant number of staff, mainly administrative and management staff, are deployed to the public health sector and are governed by the Civil Service Act, 1993.
- Private health sector cadres vary based on the type of institution and organization employing them; but has functions and staff groups as well as roles similar to those in the public health sector. It comprises a management group, a health professionals group, as well as mid-level and support staff.
- Health workers employed in the private sector may have retired from the public sector, work less than full-time hours and may be employed in the private and public sector at the same time.

