

Acknowledgements

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Team Leader, March, 2009

Composition of Evaluation Team

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2	Mr. Ram Babu Rimal	Under Secretary, MOHP	Team Member
3	Mr. Dilip Pokhrel	Financial Consultant	Team Member
4	Mr. Uma Paudel	Director, SWC	Team Member

Acronyms

AGM	Annual General Meeting
ANM	Auxiliary Nurse Midwife
CCU	Coronary Care Unit
CHDP	Community Health Development Programs
CHW	Community Health Worker
DDC	District Development Committee
DEO	District Education Office
DH	Dhulikhel Hospital
DHO	District Health Office
DPHO	District Public Health Office
DPHO	District Public Health Officer
ECG	Electro Cardio Gram
ENT	Ear Nose Throat
FCHV	Female Community Health Volunteers
FGD	Focus Group Discussion
HMIS	Health Management and Information System
HP	Heath Post
ICU	Intensive Care Unit
IDI	In-Depth Interview
IEC	Information Education Communication
INGO	International Non-governmental Organization
IPD	In Patient Door Services
KII	Key Informant Interview
MOHP	Ministry of Health and Population
NGO	Non Governmental Organization
NICU	Neonatal Intensive Care Unit
NRs	Nepalese Rupees
OPD	Out Patient Door Services
PICU	Pediatric Intensive Care Unit
SHP	Sub Health Post
SWC	Social Welfare Council
TBA	Traditional Birth Attendant
VDC	Village Development Committee

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Executive summary

With the primary objective to examine level of progress/changes made by the project and analyze the extent to which the achievements have supported the program goals and their objectives, this final evaluation was designed and carried out. A cross-sectional descriptive study design was used in order to collect data for this evaluation study. Primarily the qualitative tools and techniques were utilized to gather information for this study, however some of the quantitative tools and techniques including personal interviews and observation checklist also were developed and administered to gather quantitative data.

The major health services being provided by Dhulikhel hospital since their establishments in 1996 are: Out patient services, Diagnostic facilities, Inpatient health services, ICU, CCU, Emergency health services, Operation services etc. In order to maintain its motto that the hospital is providing equal services to all patients irrespective to their level of poverty and affordability, the Dhulikhel hospital has been providing all quality health services at affordable cost to all.

In order to provide quality health services, the hospital has good quality and competent medical team to provide quality and efficient health services from the hospital as well as community health centres setting. Review of records show that the number of patients visiting to the hospital is in the increasing trend year by year. Results from the beneficiaries of the project activities shows that the community health programs being implemented by Dhulikhel hospital are most useful, and have contributed in many ways including improving health status, enhancing capacity of women, income status of women and other community development activities.

Dhulikhel hospital has good coordination with government health institutions in Kavre districts as well as different national and international governmental and non governmental organizations. This is one of the good practices being practiced by Dhulikhel hospital that they organize daily morning meeting, where all the staffs

participate normally keep opportunity to share their knowledge, ideas, practices and the plans etc. Additionally the meeting gives plenty of opportunities to update the current activities and plan for future.

Dhulikhel hospital adopts policy of financial sustainability in order to run hospital as well as community health activities. In connection with this, the hospital has established its collaboration with the Kathmandu University Running Medical School, which also support the hospital. Other internal source of income includes charges from hospital services, equipments charges etc. Dhulikhel hospital has been receiving supports from NepaliMed Europe and its associates like Nameste Stiftang and Sticking Wilde Ganger etc. It is identified that the hospital has yet to register to the tax office as well as to obtain permanent account number (PAN). It is explored that, all donor agencies have been sending their supports through NepaliMed account. The hospital has adopted the policy of financially sustainability of the organization. It is found that, the hospital has been exploring other sources of income beside donation and gift from the foreign donors (INGO).

Based on findings and the conclusion made, it is recommended that, the hospital should continue its current hospital based as well as community health centres based health activities at the larger scale with the bigger coverage of population and the geographical locations. In order to make the efficient plans as well as run project activities effectively, it is recommended that the hospital utilize standard format such as logical framework while developing project. Other recommendations include: to keep the financial records of NepaliMed Europe separately, do auditing by different auditor and different company in the coming years, always make transactions through bank not cash, register in tax office and obtain PAN in order to practice appropriate taxation, and practice public auditing of supports made by NepaliMed Europe annually.