

Kushudebu Public Health Mission Nepal (KPHMN)
<http://www.kushudebu.org.np>

KPHMN is a non-profit medical facility for the remote villages of the Lower Solukhumbu District, Beni VD, Nepal. Over nine wards are covered comprising approximately 3,500 people. It is situated on the outskirts of Junbesi Village.

Strategic review and recommendations



The inception of the medical support facility, nearly 10 years ago, was based on a short-term provision of medical services. It constituted occupying a disused government medical building, employing a Doctor to provide the local community with consultation, treatment and medicine.

In 2006 Kushudebu (meaning “well being”) was registered (Social Welfare Council Affiliated no. 20689) and the Mission formally constructed with the appropriate regulatory and governance structures.

Since that time, a series of local and international programs have resulted in:

- renovation and additions to existing buildings
- the building of a new residence for Doctors or Staff
- receiving and purchasing medical equipment,
- added personnel and services,
- introduced traineeships and scholarships for local students,
- hosting various visiting doctors and dentists
- and facilitating several large health camps.

The web site denoted above contains various reports and information and a host of articles, stories and notices pertaining to the activities undertaken over the past decade.

Major sponsors have been instrumental in this transition and their continuing involvement has been critical to the growth and survival of KPHMN. Notable among these is the Wilderness School Adelaide and the Friends of Junbesi.

With the amount of activity taking place since the last major strategic review, undertaken in 2008, it was necessary that a new strategic review be undertaken in February 2014.

This review encompassed:

- an inspection of patient records,
- adequacy of services,
- status of buildings, equipment and stores
- and staff performance.

In addition two major areas were evaluated:

- the functionality of the Management Committee structure, and
- the level of diversification of executive management.

At the time of the review there were nine permanent and two temporary employees, five being health workers.



Chairman Mr Chungba Chhering Lama Sherpa at the KPHMN Facility

The findings of the review after a decade of operation were concerning:

- patient records were not being kept, with consultation schedules inadequate in detail
- the level of service was diminishing,
- buildings were in reasonable condition,
- items of new equipment were not utilised due to their sophistication, poor training and/or inadequate planning for usefulness. In addition major items of equipment were either damaged or breaking down regularly due to age, compounded by the difficulty in obtaining

- maintenance due to the remote location.
- low levels of staff productivity, poor supervision practices and low of morale.
- staff selection required professional input.
- management structures of Committees were not being adequately utilised,
- no diversification of executive management.

Some specific concerns of the review were:

- The Facility has a fully equipped Birthing Centre. Despite this its use has to date been under utilised and staff have very little data or knowledge on pregnancies or births in the Wards. Child immunization and post natal services were very low.
- A common complaint of patients related to gastrointestinal problems. They include gastritis, peptic ulcer disease and reflux. In addition high levels of diarrhoea and typhoid have been experienced. Many of these issues can be addressed through education and preventative health practices.
- Other common presentations were arthritis, hypertension, respiratory and skin infections. Treatment would be improved through multi-skilling of staff.

To derive a sustainable plan for the future of KPHMN it was determined that a health management program needed to be developed, interactive with the Communities' health needs, both primary and preventative. In order to construct this:

1. A roster will be drawn up for Mission Staff to conduct surveys of all residences within the nine wards.
2. The initial surveys will gather information on basic population health demographics, such as number of persons in each household, age and general health issues/needs.
3. In turn the KPHMN staff whilst conducting the initial survey will also explain to the households the purpose and functionality of the Mission. In this way taking it into their homes.
4. From the initial data gathered, a determination can be made as to what functions the medical facility should cater for. This would include equipment, instrument, medicines and adequacy of facility infrastructure.
5. A sustainable management plan will then be constructed for the future of KPHMN. This will include a thorough review of staffing requirements, position descriptions, particularly that of the in-charge medical officer.
6. To multi-skill existing staff.
7. That the local Committee assume direct management control of KPHMN with the senior medical officer reporting to the Committee.
8. Once the initial management plan is complete to return to the respective communities with defined plans for introducing preventative health and nutrition programs.



Junbesi Village

Governance Issues:

In addition to motivating the local Committee to effectively manage KPHMN the followings actions are required:

1. the three Computers at the Facility be utilised to ensure that all records are digitally prepared, completed and stored.
2. that budgeting practices and monthly management reporting be improved based on details of the Committee led management plan.
3. the legal counsel for the Mission was requested to liaise with the Department of Health to ensure continuing compliance of KPHMN.



ECG Machine



Laboratory



Clinic equipment



X-Ray Machine



Medicine Store



Birthing Room



General consultation room



Oxygen machine



Ward



Pre-natal room