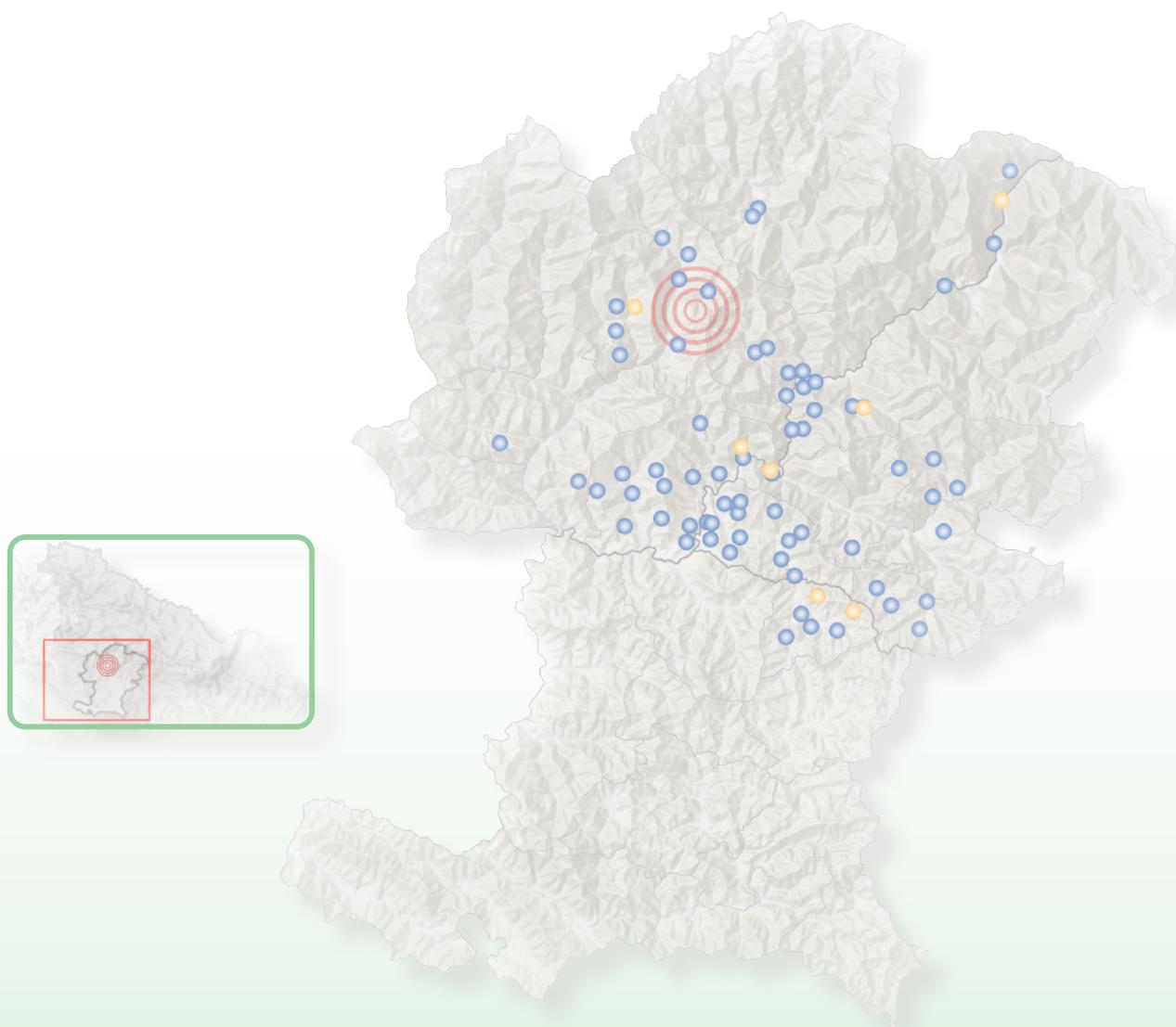




HeRAMS Nepal

Post-Jarjarkot earthquake report
April 2024



General clinical and trauma care services

A comprehensive mapping of availability of essential services and barriers to their provision



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HeRAMS Nepal

Post-Jarjarkot earthquake report

April 2024

General clinical and trauma care services

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Government of Nepal
Ministry of Health and Population



USAID
FROM THE AMERICAN PEOPLE

ACRONYMS

BHSC Basic Health Service Center

HeRAMS Health Resources and Services Availability Monitoring System

HP Health Post

HSDU Health Service Delivery Unit

PHC Primary Health Center

UHC Urban Health Centre

WHO World Health Organization

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DISCLAIMER

Disruptions to health systems can impede provision of and access to essential health services. Communities' vulnerability to increased morbidity and mortality substantially increases when a lack of reliable information prevents sound decision-making, especially in rapidly changing environments that require continued assessment. The Health Resources and Services Availability Monitoring System (HeRAMS) aims to provide decision-makers and health stakeholders at large with vital and up-to-date information on the availability of essential health resources and services, help them identify gaps and determine priorities for intervention.

HeRAMS draws on the wealth of experience and knowledge gathered by the World Health Organization (WHO) and health sector actors, including nongovernmental organizations, donors, academic institutions and other technical bodies. It builds on a collaborative approach involving health service providers at large and integrating what is methodologically sound and feasible in highly constrained, low-resourced and rapidly changing environments such as humanitarian emergencies. Rapidly deployable and scalable to support emergency response and fragile states, HeRAMS can also be expanded to - or directly implemented as - an essential component of routine health information systems. Its modularity and scalability make it an essential component of emergency preparedness and response, health systems strengthening, universal health coverage and the humanitarian development nexus.

HeRAMS has been deployed in Nepal since January 2024, allowing for the assessment of 80 health service delivery units (HSDUs), of which 5 were temporary structures, affected by the recent earthquake, which struck Jajarkot and neighboring districts on 3 November 2023. This analysis presented here is based on data collected up to 31 January for HSDUs in Jajarkot district and 8 April for HSDUs in Rukum West and Salyan districts.

It is important to note that the deployment of HeRAMS is ongoing, including data verification and validation. Hence, this analysis is not final and was produced solely for the purpose of informing operations. Furthermore, the analysis was restricted to HSDUs directly affected by the earthquake. Thus, this report does not provide an exhaustive analysis of the operational status and the availability of health services and resources in the affected districts.

This is the second report of the **HeRAMS Nepal post-Jarjarkot earthquake report April 2024** series, focusing on the availability of general clinical and trauma care services. It is a continuation of the first report on the operational status of the health system¹ and should always be interpret in conjunction with results presented in the first report. Additional reports are available covering essential child health and nutrition services², communicable disease services³, sexual and reproductive health services⁴, and non-communicable disease and mental health services⁵.

Caution must be taken when interpreting the results presented in this report. Differences between information products published by WHO, national public health authorities, and other sources using different inclusion criteria and different data cut-off times are to be expected. While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change.

For additional information, please see <https://www.who.int/initiatives/herams> or contact herams@who.int

¹ HeRAMS Nepal post-Jarjarkot earthquake report April 2024 - operational status of the health system: a comprehensive mapping of the operational status of health service delivery units, <https://www.who.int/publications/m/item/herams-nepal-post-jarjarkot-earthquake-report-2024-04-operational-status-of-the-health-system>.

² HeRAMS Nepal post-Jarjarkot earthquake report April 2024 - Child health and nutrition services: A comprehensive mapping of availability of essential services barriers to their provision, <https://www.who.int/publications/m/item/herams-nepal-post-jarjarkot-earthquake-report-2024-04-child-health-and-nutrition-services>.

³ HeRAMS Nepal post-Jarjarkot earthquake report April 2024 - Communicable disease services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-nepal-post-jarjarkot-earthquake-report-2024-04-communicable-disease-services>.

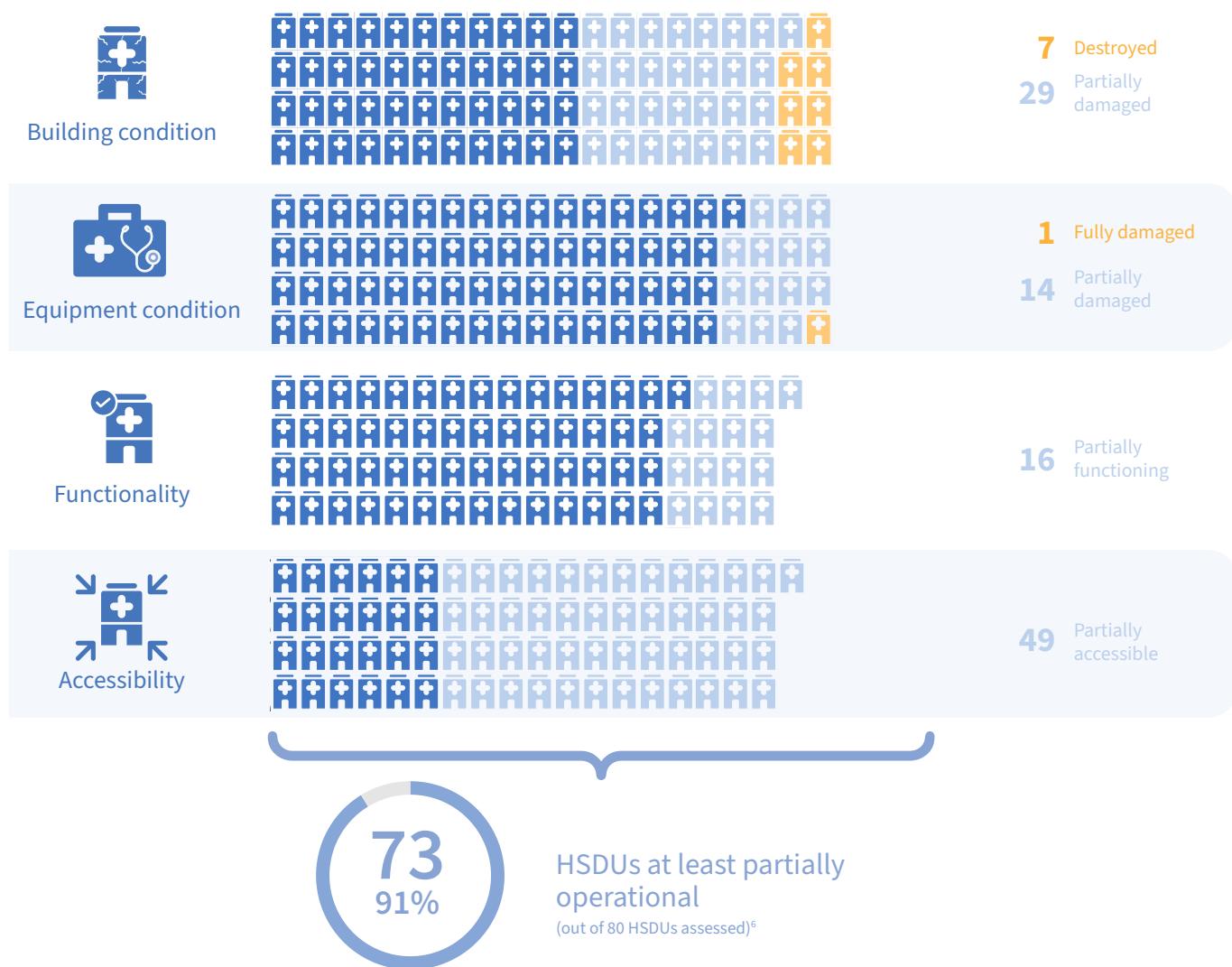
⁴ HeRAMS Nepal post-Jarjarkot earthquake report April 2024 - Sexual and reproductive health services: A comprehensive mapping of availability of essential services and barriers to their provision, <https://www.who.int/publications/m/item/herams-nepal-post-jarjarkot-earthquake-report-2024-04-sexual-and-reproductive-health-services>.

⁵ HeRAMS Nepal post-Jarjarkot earthquake report April 2024 - Noncommunicable disease and mental health services: A comprehensive mapping of availability of essential services and barriers to their provision. <https://www.who.int/publications/m/item/herams-nepal-post-jarjarkot-earthquake-report-2024-04-ncd-and-mental-health-services>.

OVERVIEW OF HSDUs EVALUATED

Data collection summary

80 HSDUs assessed*



* Five of the assessed facilities were temporary structures.

⁶ HSDUs (Health Service Delivery Units) reported as destroyed, non-functioning, or inaccessible are deemed unable to provide any health services, hence categorized as non-operational. Consequently, reporting ends upon confirmation of an HSDU's non-operational status.



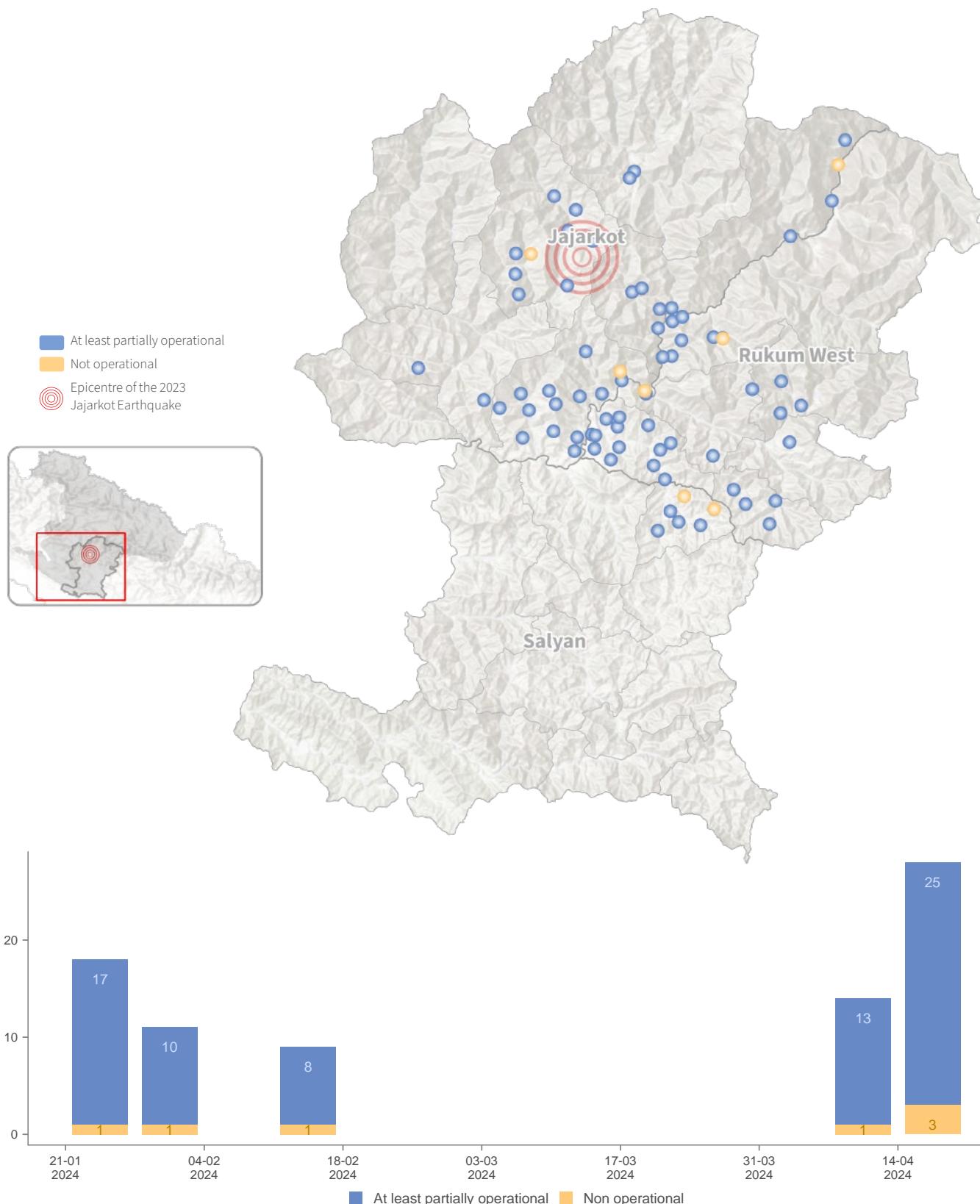
Reporting frequency and operational status by municipality

	Basic Health Service Centre	Community Health Unit		District Hospital		Health Post		Municipal/ Local level Hospital		Primary Healthcare Center		Urban Health Centre		Outreach Clinic		Total	
		O	N/O	O	N/O	O	N/O	O	N/O	O	N/O	O	N/O	O	N/O	O	N/O
JAJARKOT	BAREKOT RURAL	-	-	-	-	1	-	-	-	2	-	-	-	-	-	3	-
	BHERI	7	-	-	-	1	-	5	-	-	-	-	-	-	-	13	1
	CHHEDAGAD	1	-	-	-	-	-	1	-	-	-	-	-	-	-	2	-
	KUSHE RURAL	4	-	-	-	-	-	5	1	-	-	-	-	-	-	9	1
	NALAGAD	1	-	1	1	-	-	5	-	1	-	-	-	-	-	8	1
	TOTAL	13	-	1	1	1	-	17	1	1	-	2	-	-	-	35	3
RUKUM WEST	AATHBISKOT	2	1	1	-	-	-	2	-	-	-	-	3	-	-	8	1
	BANPHIKOT RURAL	-	-	-	-	-	-	3	-	-	-	-	-	-	-	3	-
	CHAURJAHARI	8	-	-	-	-	-	3	-	1	-	1	-	-	-	13	-
	MUSIKOT	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-
	SANI BHERI RURAL	-	-	-	-	-	-	3	1	-	-	-	-	-	-	3	1
	TRIVENI RURAL	-	-	-	-	-	-	4	-	-	-	-	-	-	-	4	-
SALYAN	TOTAL	10	1	1	-	1	-	15	1	1	-	1	-	3	-	32	2
	DARMA RURAL	2	-	1	1	-	-	3	1	-	-	-	-	-	-	6	2
	TOTAL	2	-	1	1	-	-	3	1	-	-	-	-	-	-	6	2
	GRAND TOTAL	25	1	3	2	2	-	35	3	2	-	3	-	3	-	73	7

O = At least partially operational - N/O = Not operational



Geographic distribution of HSDUs



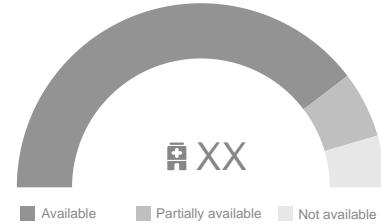
* This analysis is based on the assessment and data collection between 20 – 30 Jan 2024 in Jajarkot district and between 1 - 8 April 2024 in Rukum West and Salyan districts.



INTERPRETATION GUIDE

Service status

Arc charts provide an overview of the overall availability of a health service. The total number of HSDUs included in the analysis of a service is shown inside the arc chart. It should be noted that analysis of individual services was limited to operational HSDUs (see page 4 for details). There are two numbers separated by a bar (“|”) inside the arc of the chart: on the left is the percentage of HSDUs, and on the right of the bar is the number falling into that category.



For further insights, donut charts break down service availability by HSDU type or district. To improve readability, labels indicating the availability level for each category are provided either beside or below the chart. Additionally, to highlight the percentage of HSDUs where a service is available up to standard, the number may also be prominently placed inside the chart. Information on the total number of HSDUs included is clearly indicated above or below the respective donut.

Column charts offer a breakdown of availability by municipality. By default, these charts exclude HSDUs where a service was not applicable or the HSDU did not report on it. The total number of HSDUs included in each municipality is indicated to the right of the bar.



In contrast to charts, and to highlight areas not reporting, as well as the impact of non-operational HSDUs, **maps** depict all HSDUs targeted with HeRAMS. Each dot corresponds to an HSDU, with the colour indicating the availability level.

Barriers

To gain a more comprehensive understanding of the challenges faced by HSDUs, whenever a service was not or only partially available, main barriers impeding availability were recoded. Similarly, questions on building and equipment conditions, functionality and accessibility gather information on the underlying causes for non or partially operating HSDUs.



Each **donut chart** indicates the percentage of HSDUs having reported a specific barrier. The total number of HSDUs reporting at least one barrier is shown below the chart header.

Heat maps indicate the barriers that each HSDU listed face with a colored rectangle. When the rectangle is grey, the HSDU does not face this barrier.



Important: The denominator for barrier charts excludes HSDUs where the service is fully available or not normally provided. It should further be noted that HSDUs can report up to three barriers for each service. Thus, the sum of all barriers may exceed 100%.

REQUEST FOR AMBULANCE SERVICES BY THE PATIENT

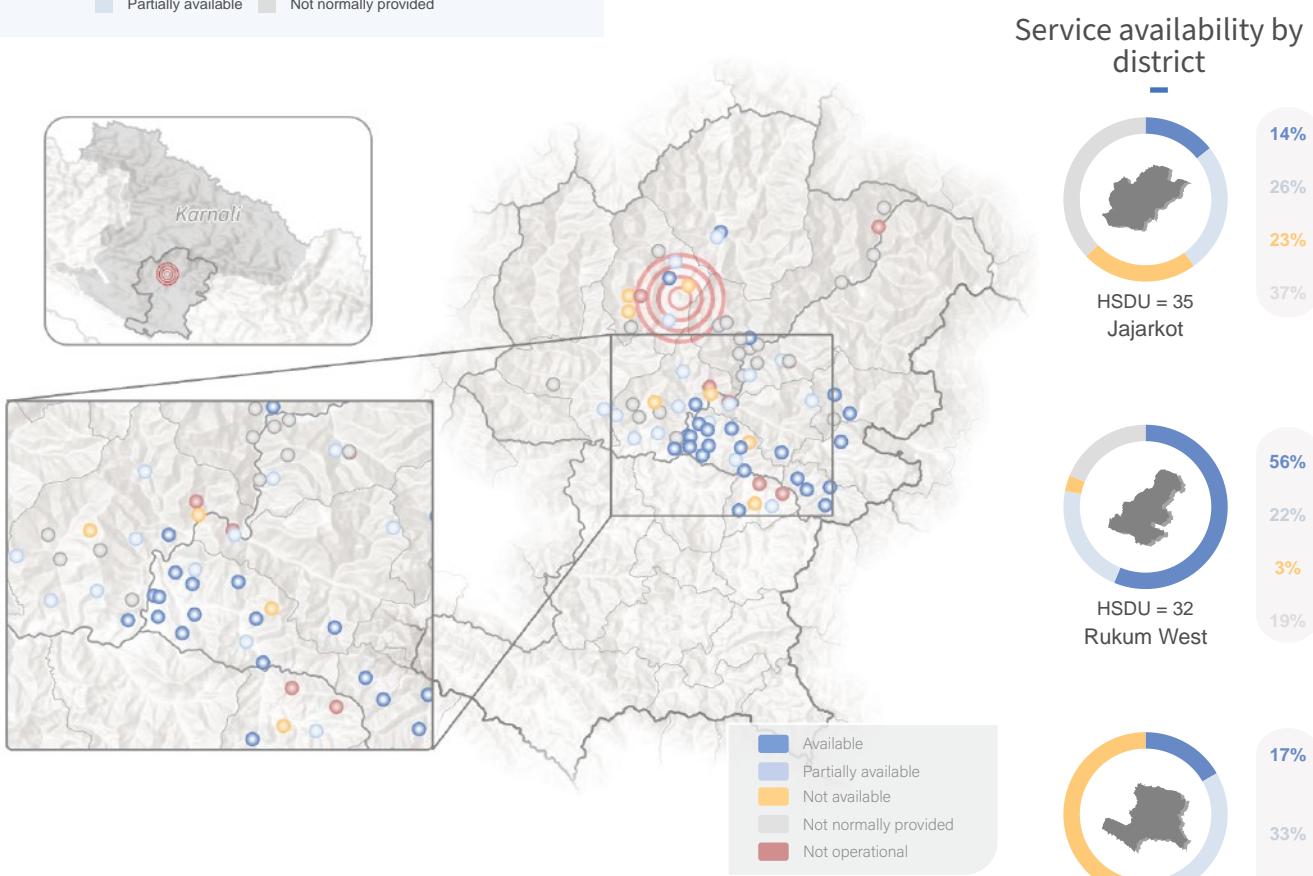
Service availability ⁷



Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



⁷ User-activated dispatch of basic ambulance services from district-level staging center (e.g., ambulance pool).



Jajarkot

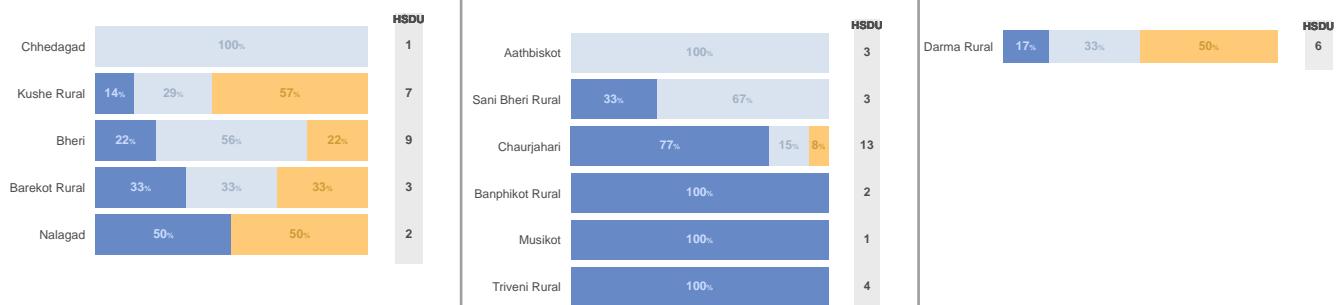


Rukum West

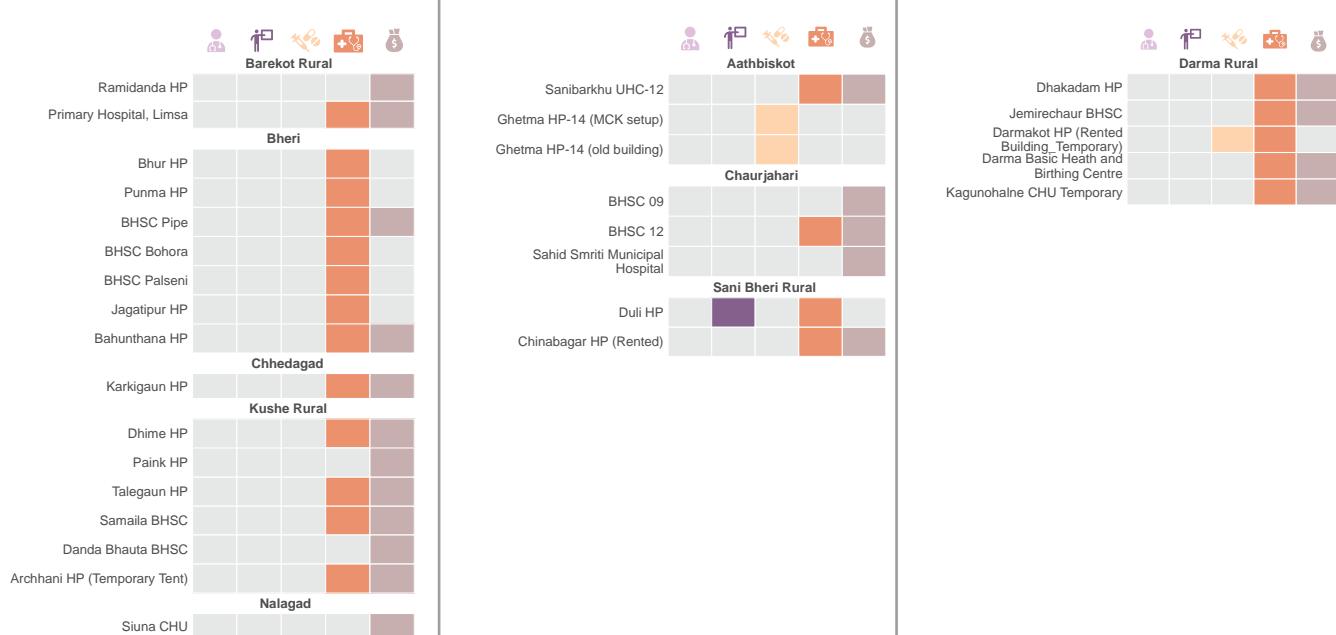


Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU



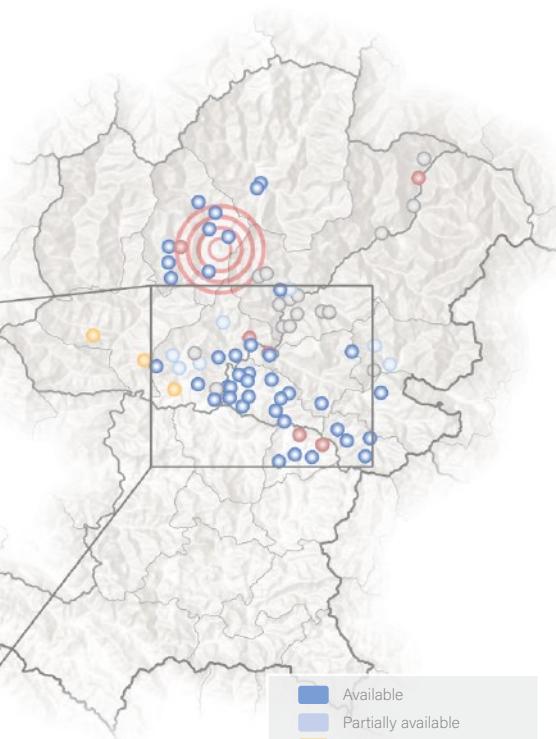
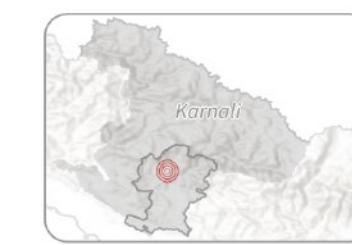
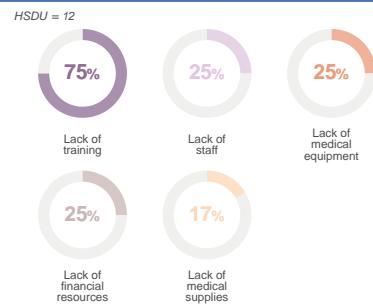
- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

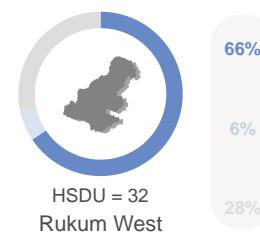
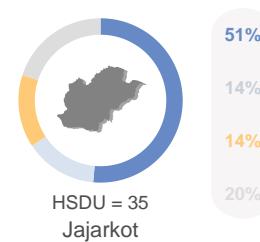
RECOGNITION OF DANGER SIGNS



Main barriers impeding service delivery



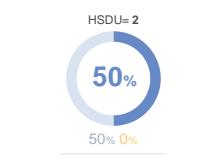
Service availability by district



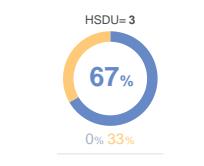
Service availability by HSDU type



District Hospital



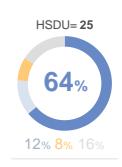
Municipal/Local level Hospital



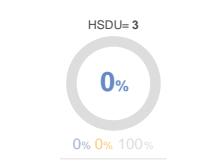
Primary Healthcare Center



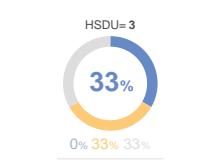
Health Post



Basic Health Service Centre



Urban Health Centre



Community Health Unit

⁸ Recognition of danger signs in neonates, children and adults, including early recognition of signs of serious infection, with timely referral to higher-level care.



Jajarkot

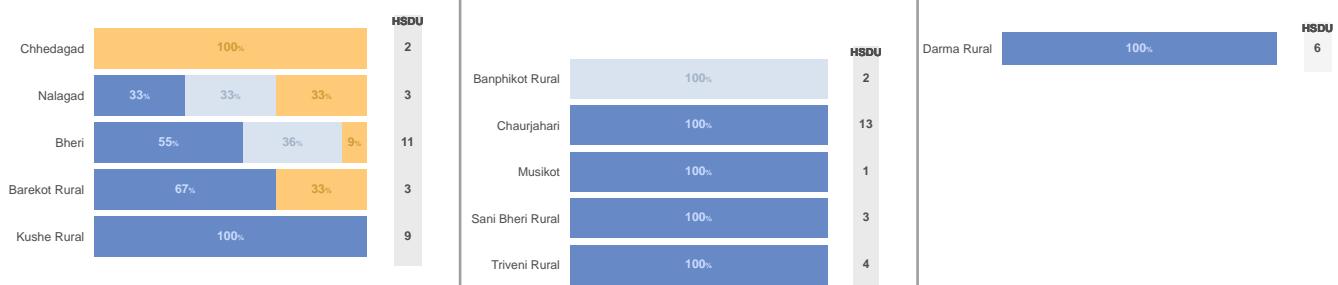


Rukum West

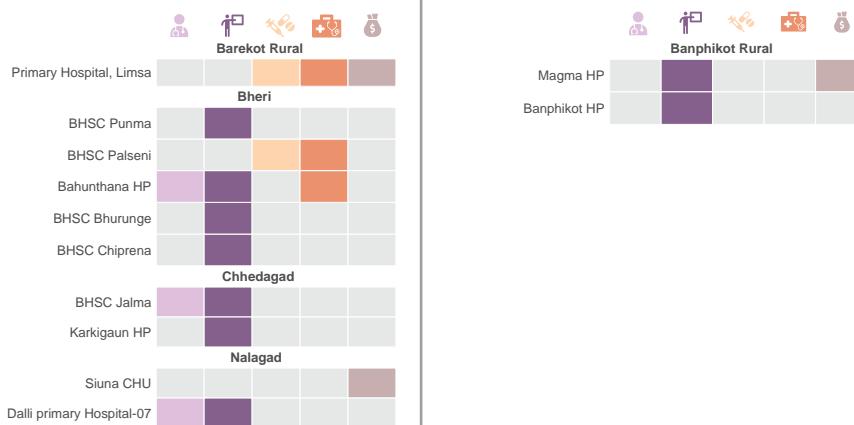


Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU



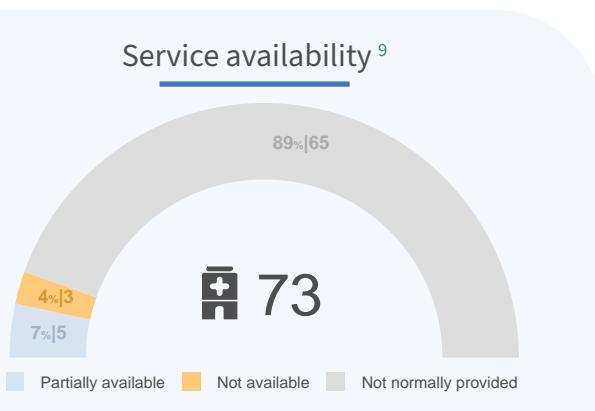
No barriers reported

- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

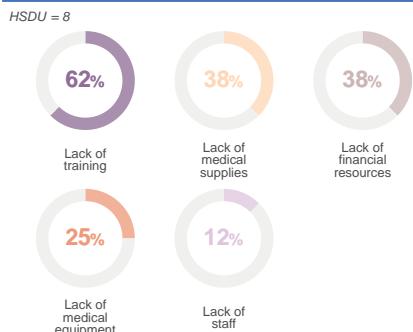
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

ACUITY-BASED FORMAL TRIAGE

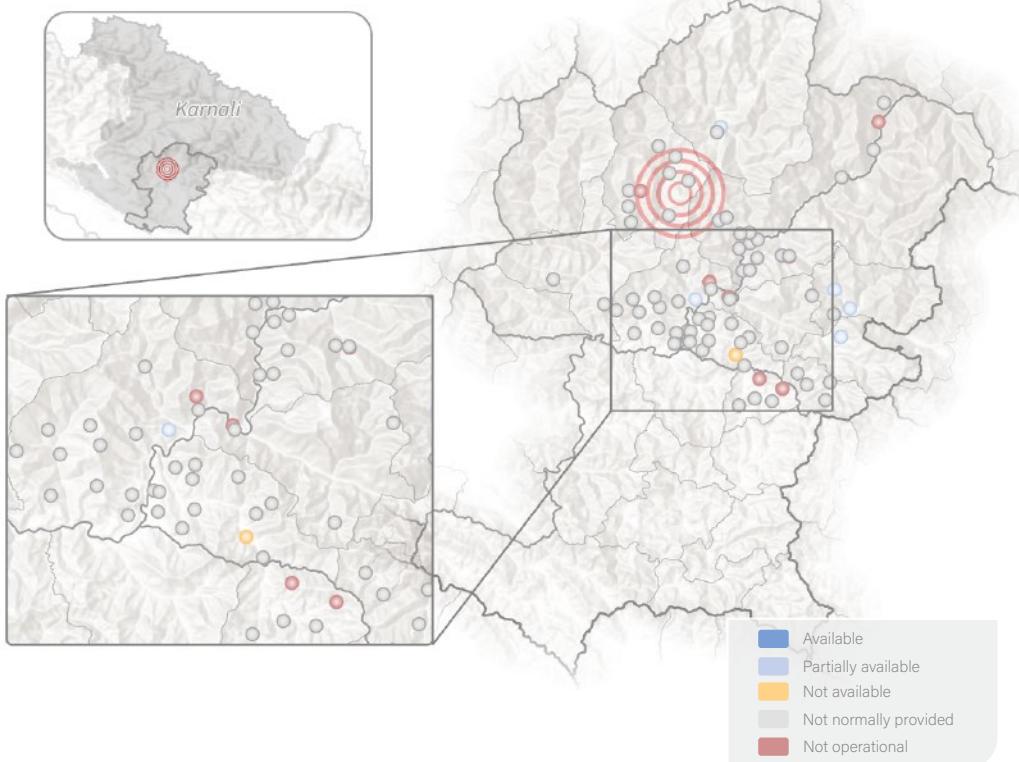
Service availability ⁹



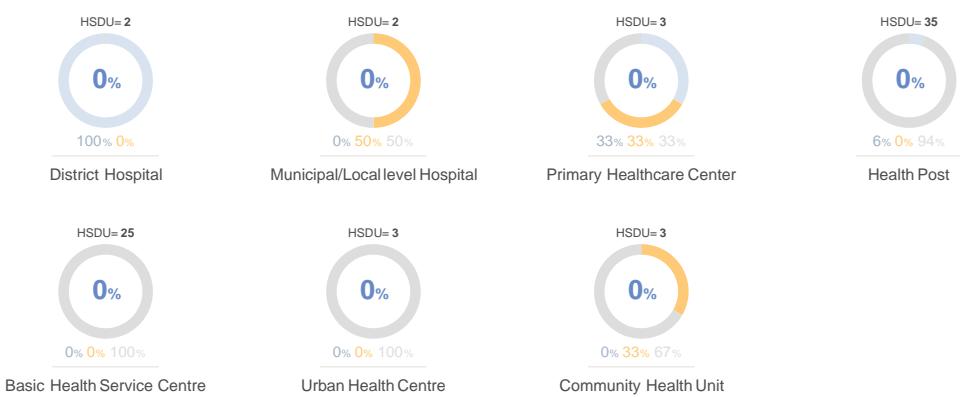
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



⁹ Acuity-based formal triage of children and adults at first entry to the HSDU (with a validated instrument such as WHO/ICRC Interagency Triage Tool).



Jajarkot

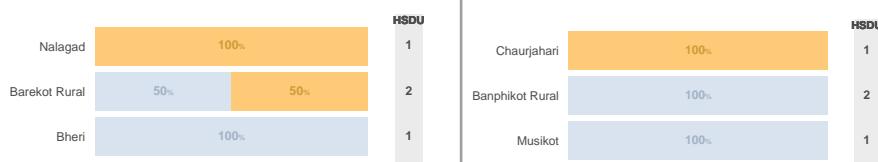


Rukum West



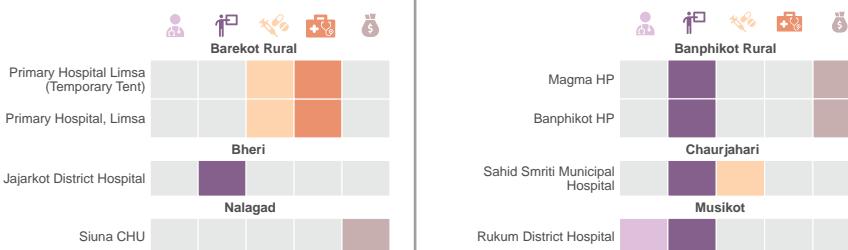
Salyan

Service availability by municipality*



No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU

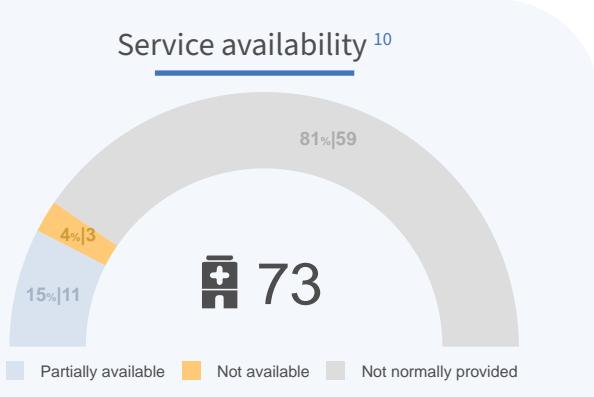


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

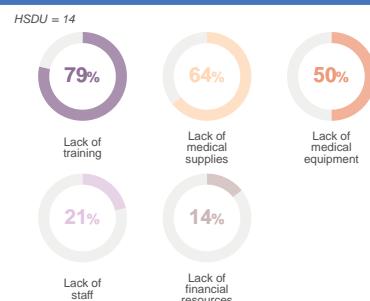
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

WHO BASIC EMERGENCY CARE BY PREHOSPITAL PROVIDER

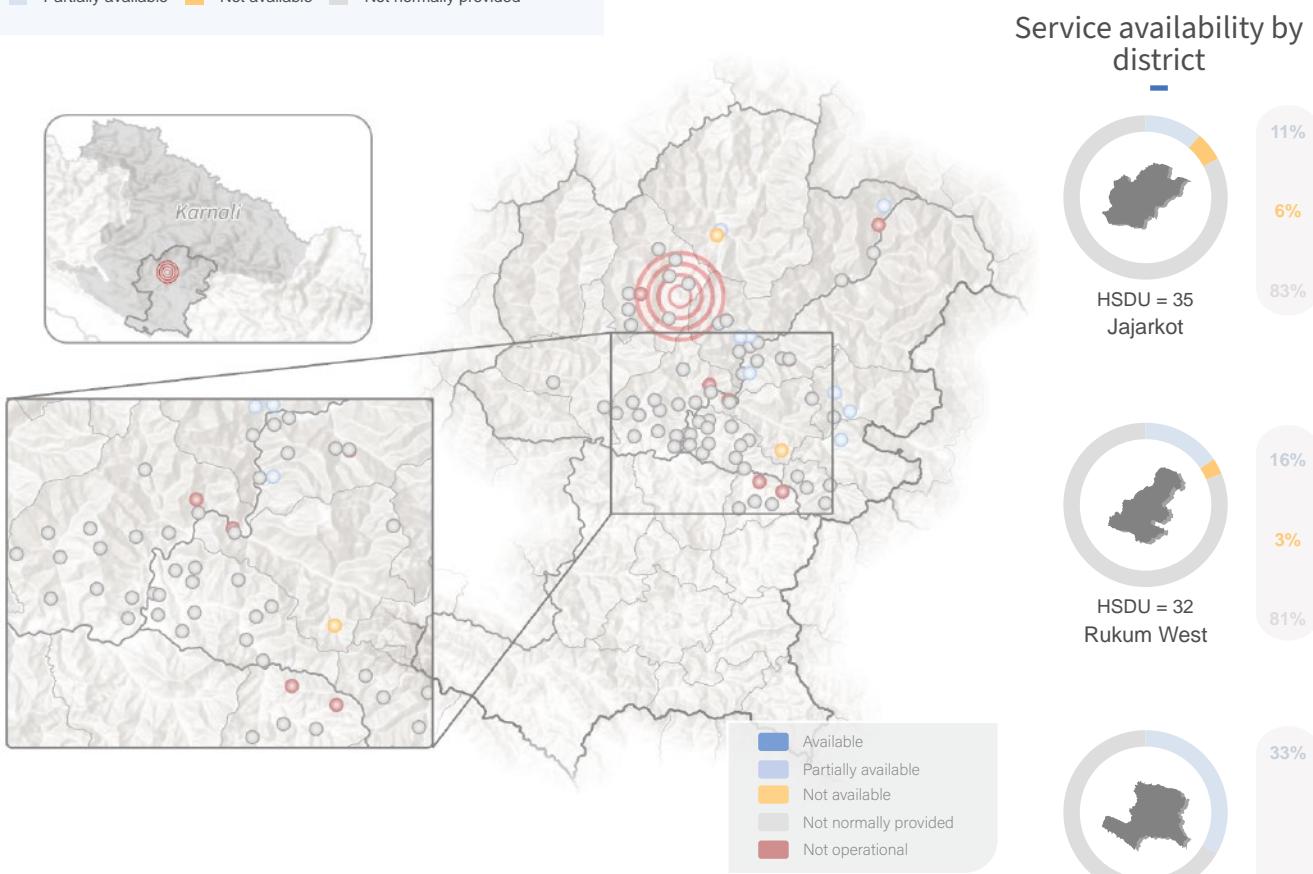
Service availability¹⁰



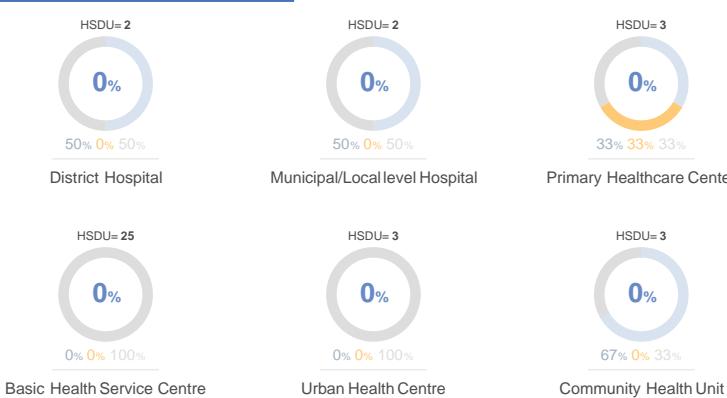
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹⁰ WHO Basic emergency care by prehospital provider: Initial syndrome-based management at scene by prehospital providers for difficulty breathing, shock, altered mental status, and polytrauma.



Jajarkot

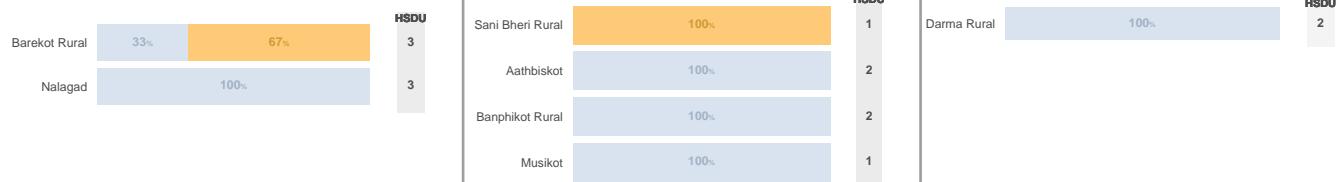


Rukum West

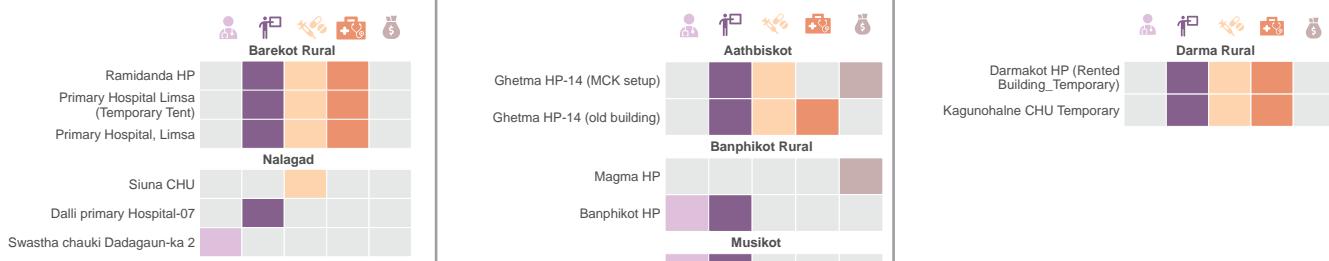


Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU

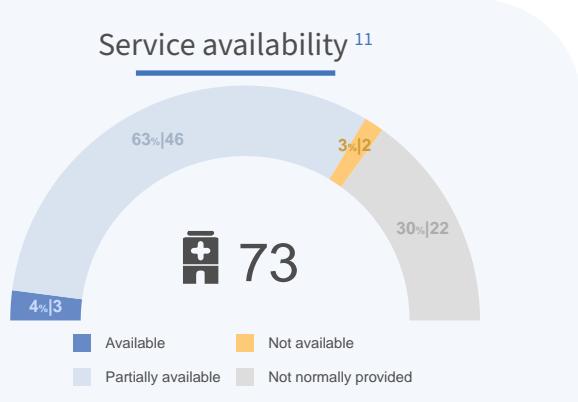


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

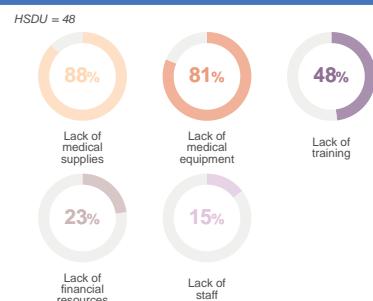
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

WHO BASIC EMERGENCY CARE

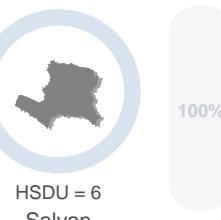
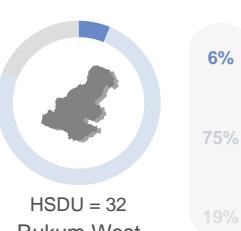
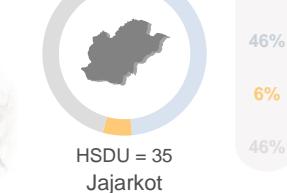
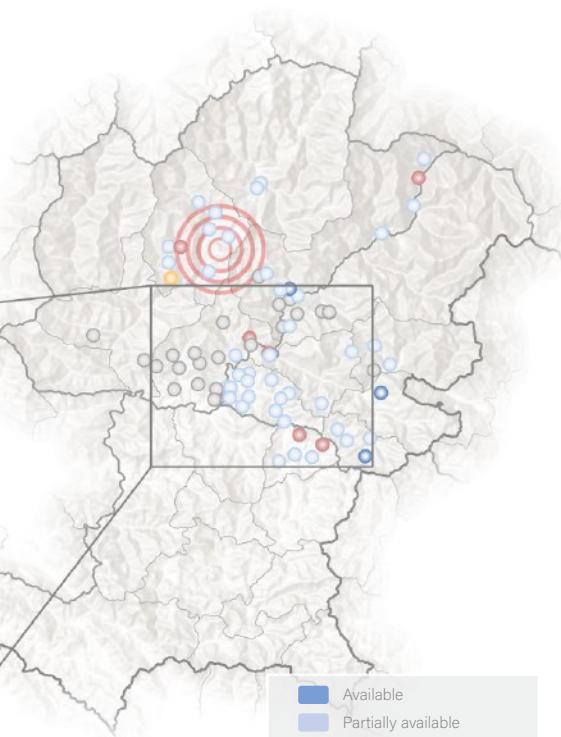
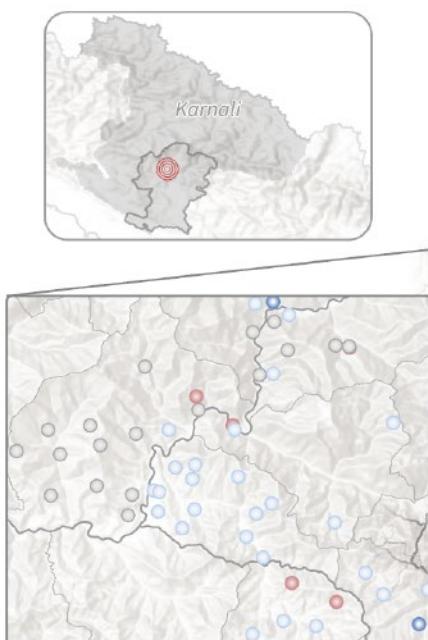
Service availability¹¹



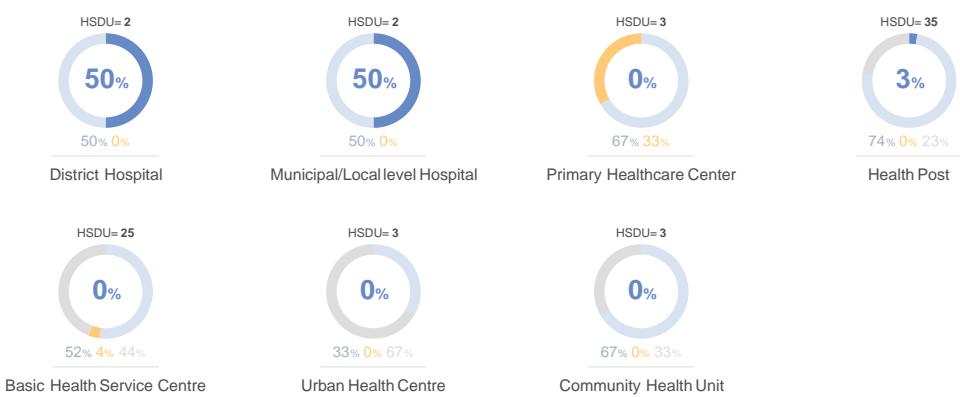
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹¹ Basic syndrome-based management of difficulty breathing, shock, altered mental status, and polytrauma for neonates, children and adults.



Jajarkot

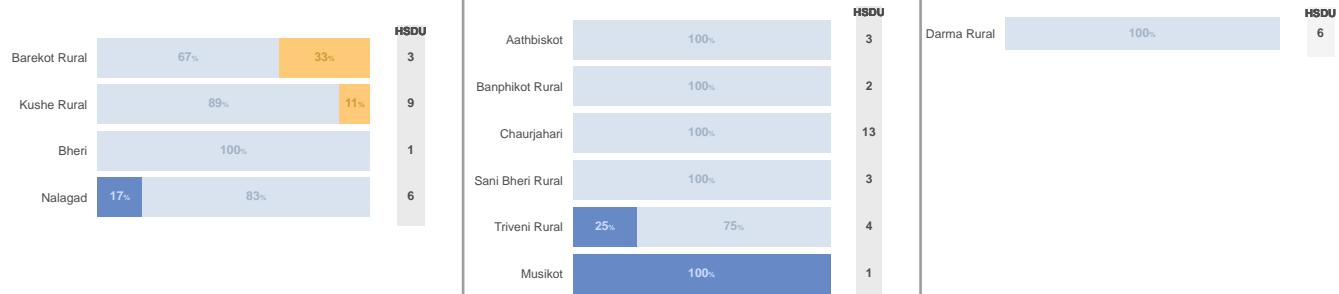


Rukum West



Salyan

Service availability by municipality*



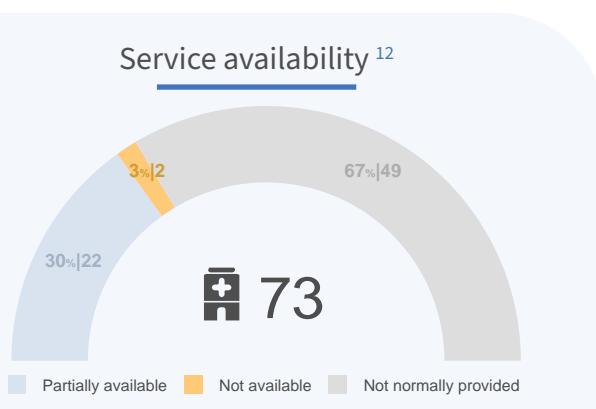
Main barriers impeding service delivery by municipality and HSDU



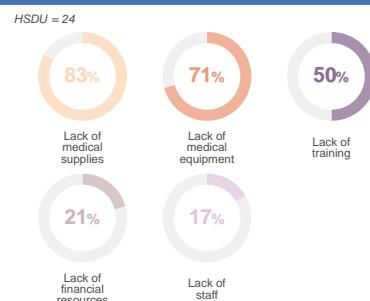
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

ADVANCED SYNDROME-BASED MANAGEMENT

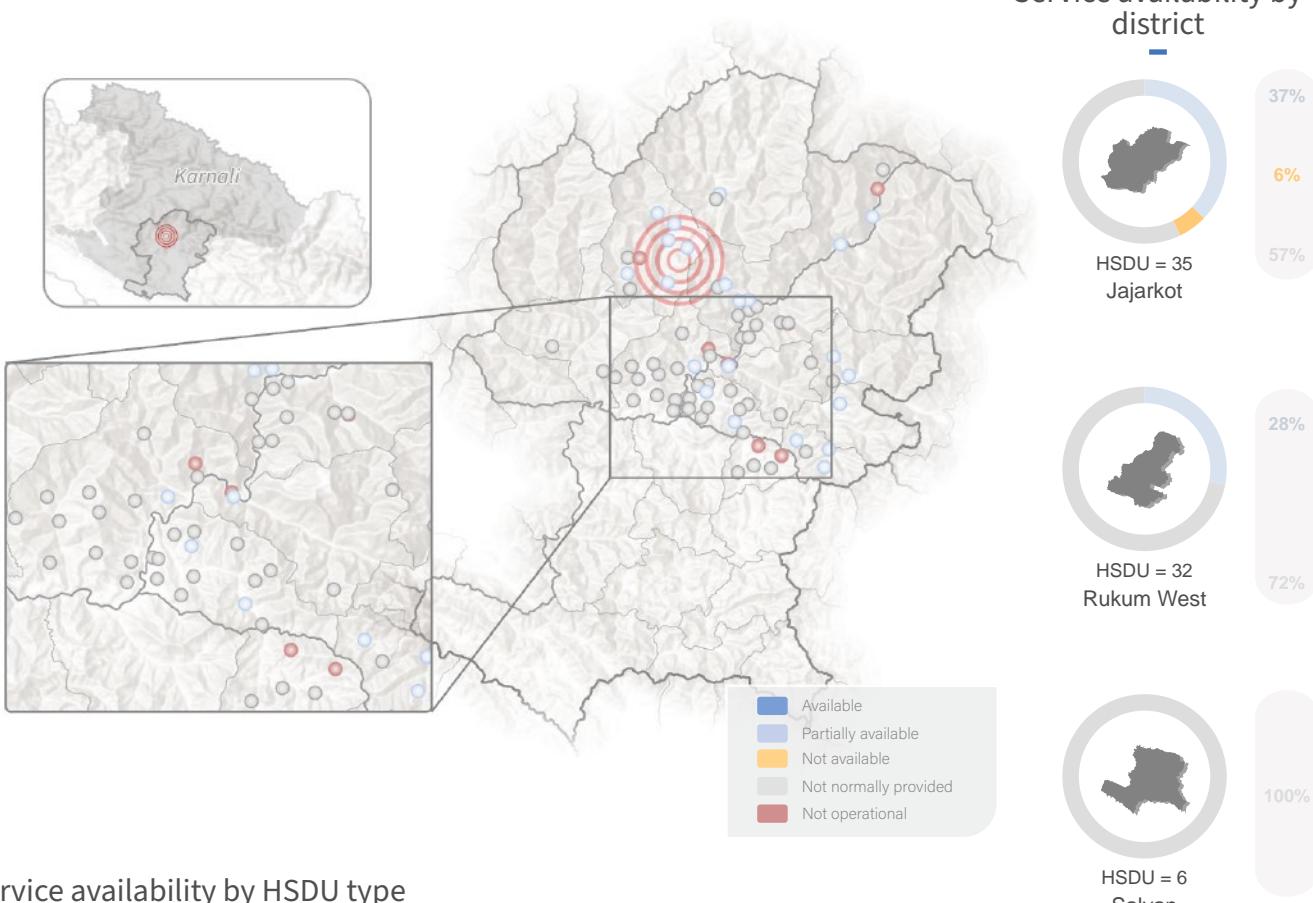
Service availability¹²



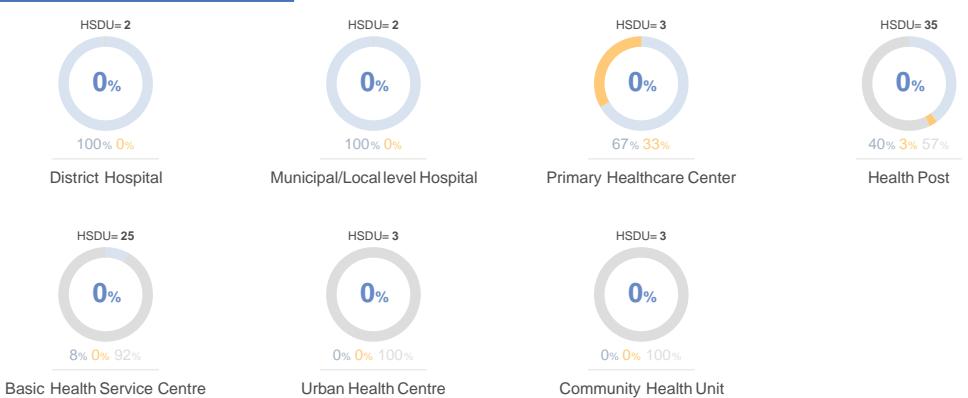
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹² Advanced Syndrome-based management of difficulty breathing, shock, altered mental status, and polytrauma in dedicated emergency unit, including for neonates, children and adults. Interventions include intubation, mechanical ventilation, surgical airway, and placement of chest drain, hemorrhage control, defibrillation, administration of IV fluids via peripheral and central venous line with adjustment for age and condition, including malnutrition; administration of essential emergency medications.



Jajarkot

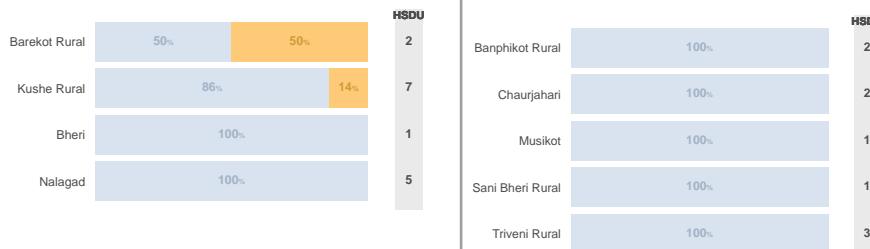


Rukum West



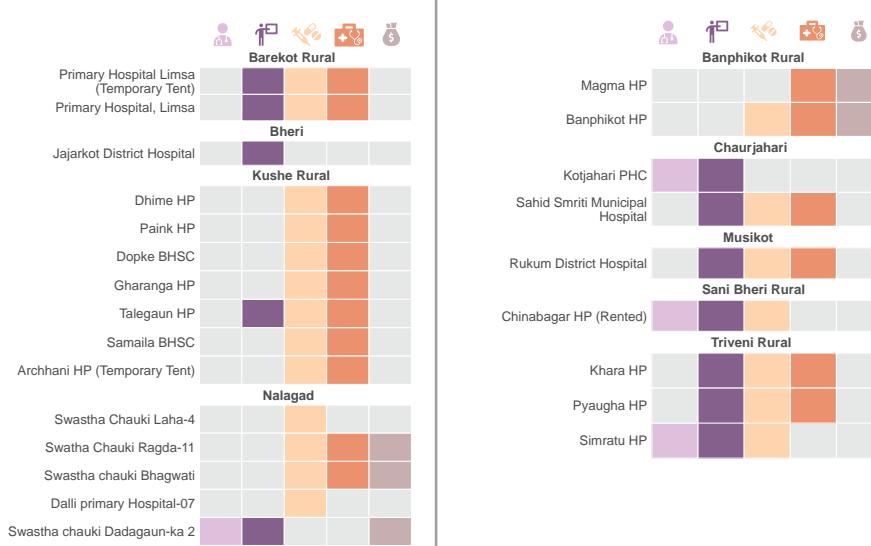
Salyan

Service availability by municipality*



No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU



Lack of staff



Lack of training

Lack of medical supplies



Lack of medical equipment



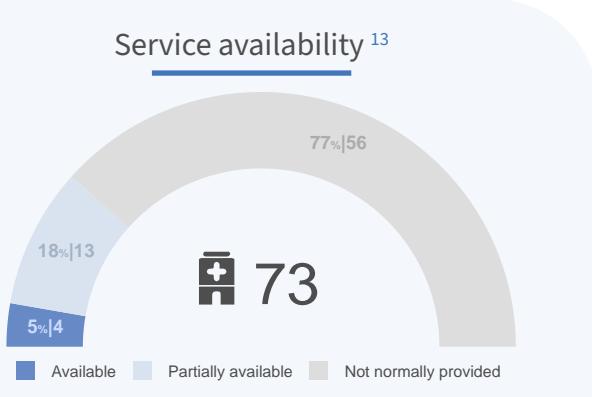
Lack of financial resources

• HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

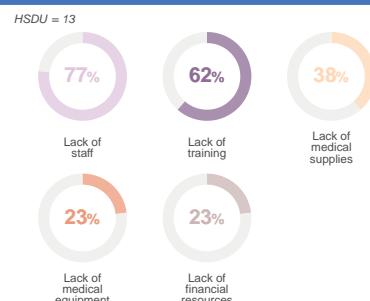


MONITORED REFERRAL

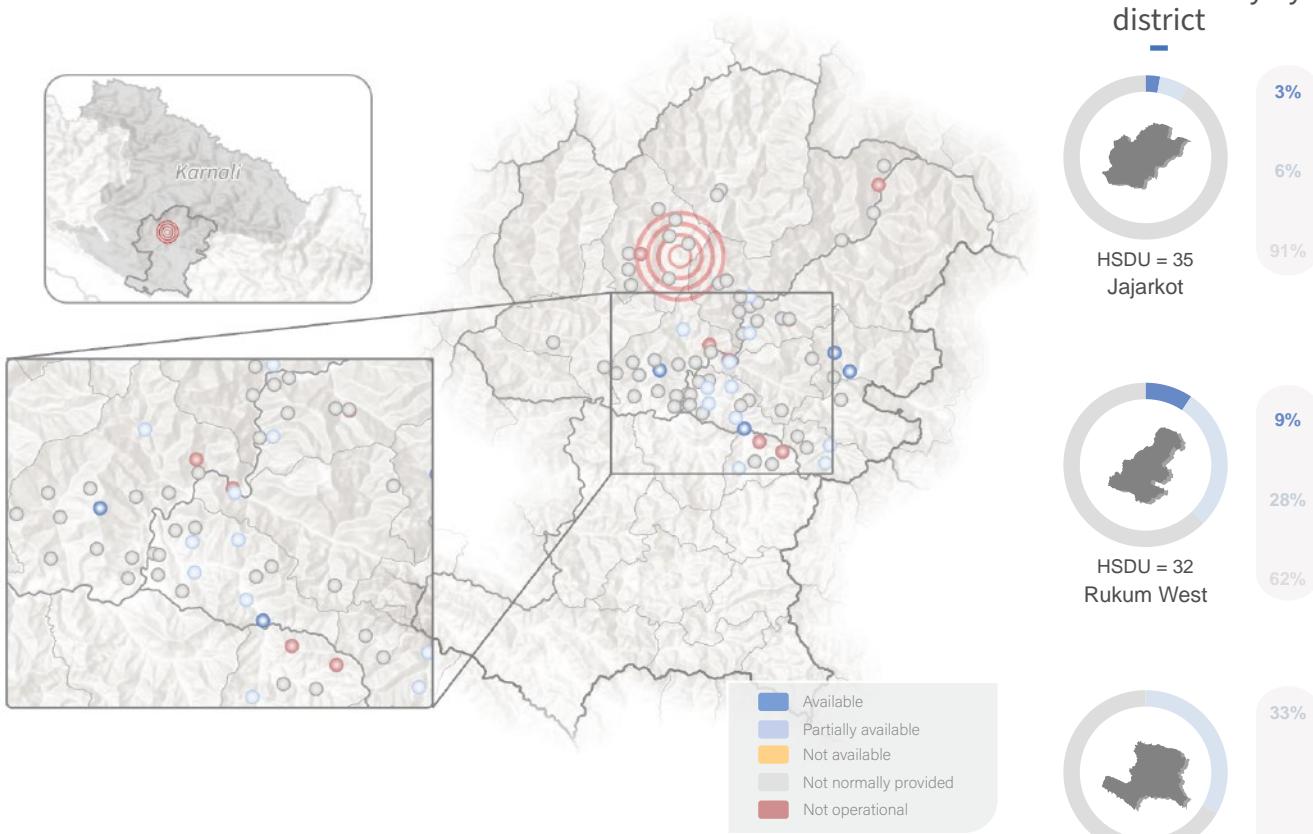
Service availability¹³



Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹³ Direct provider monitoring during transport to appropriate healthcare facility and structured handover to facility personnel.



Jajarkot

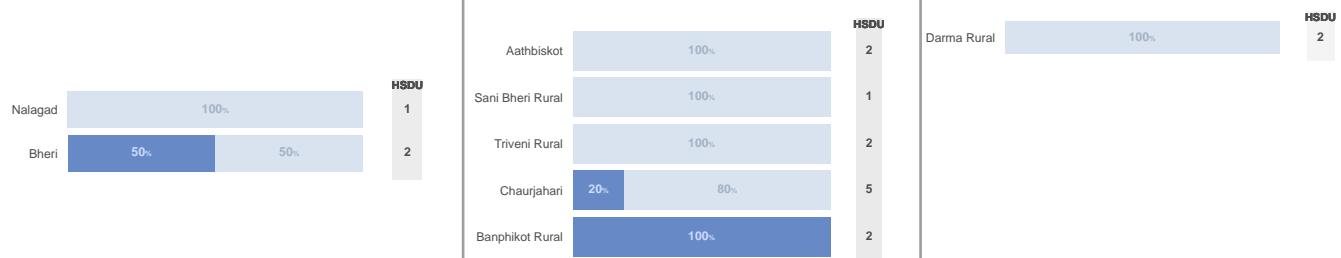


Rukum West

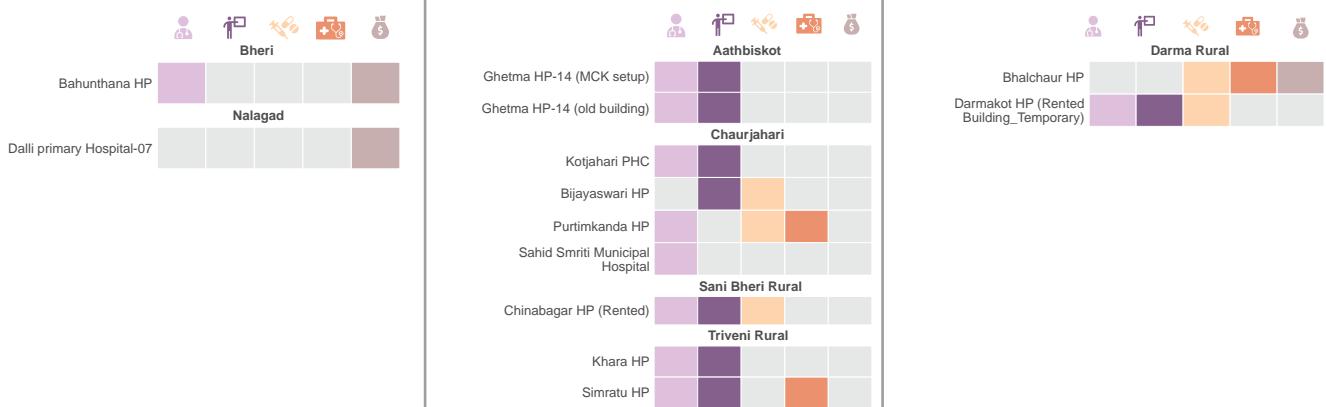


Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU



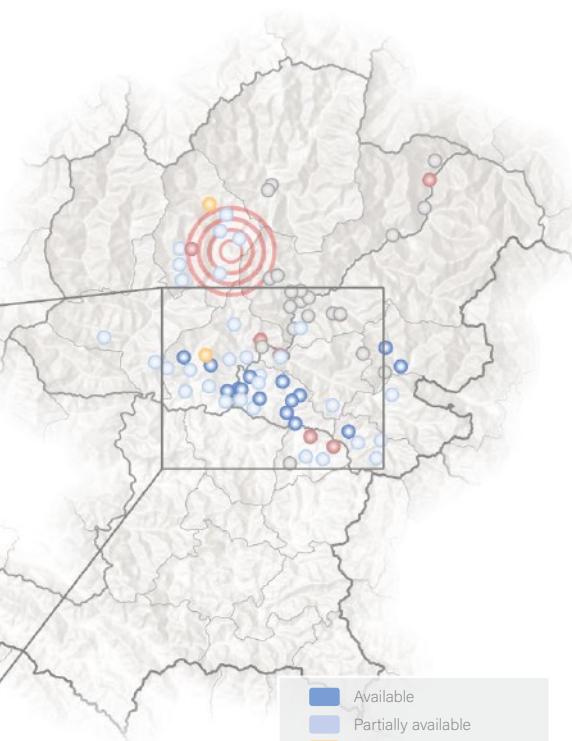
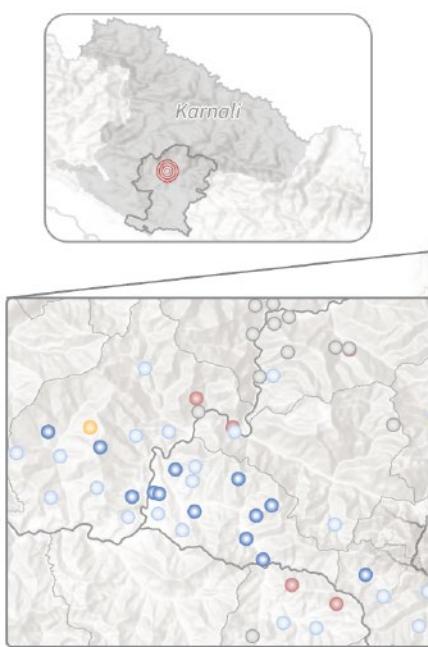
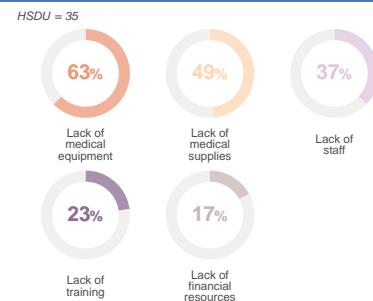
- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

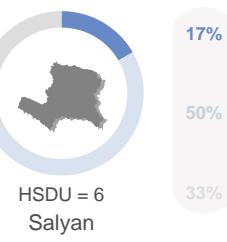
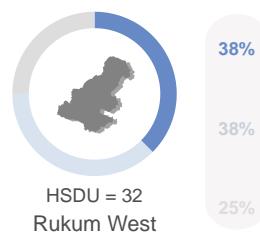
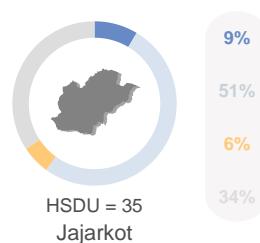
REFERRAL CAPACITY



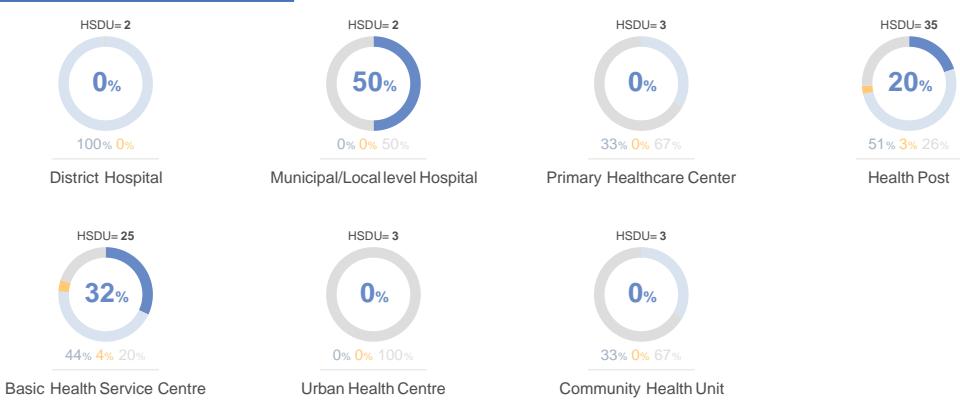
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹⁴ Referral procedures, means of communication, access to transportation.



Jajarkot

	89%	11%	HSDU
Kushe Rural			9
Chhedagad	100%		2

Bheri

25%

67%

8%

	25%	67%	8%	HSDU
Bheri				12



Rukum West

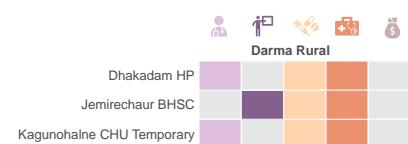
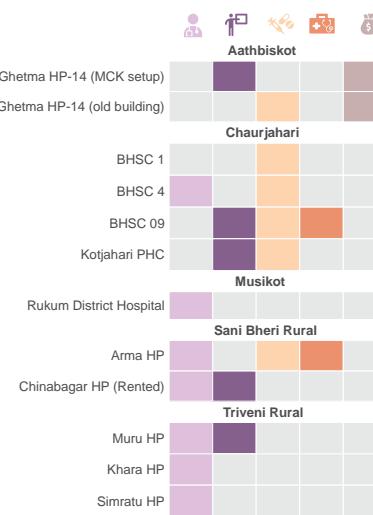
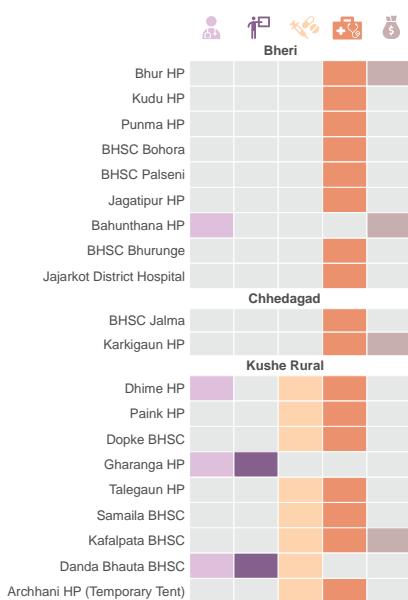
	100%	HSDU
Aathbiskot		2
Musikot	100%	1
Sani Bheri Rural	100%	2
Triveni Rural	25% 75%	4
Chaurjahari	69% 31%	13
Banphikot Rural	100%	2



Salyan

	25%	75%	HSDU
Darma Rural			4

Main barriers impeding service delivery by municipality and HSDU

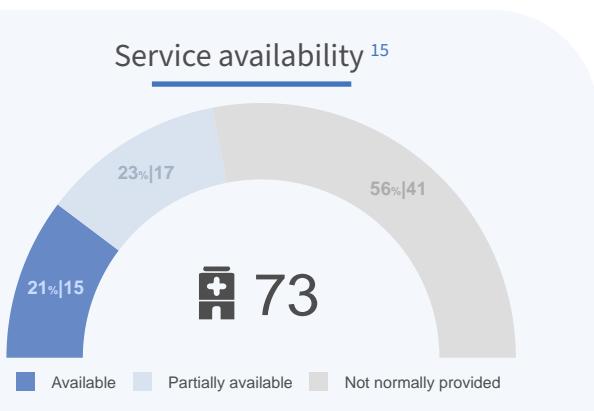


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

ACCEPTANCE OF REFERRALS

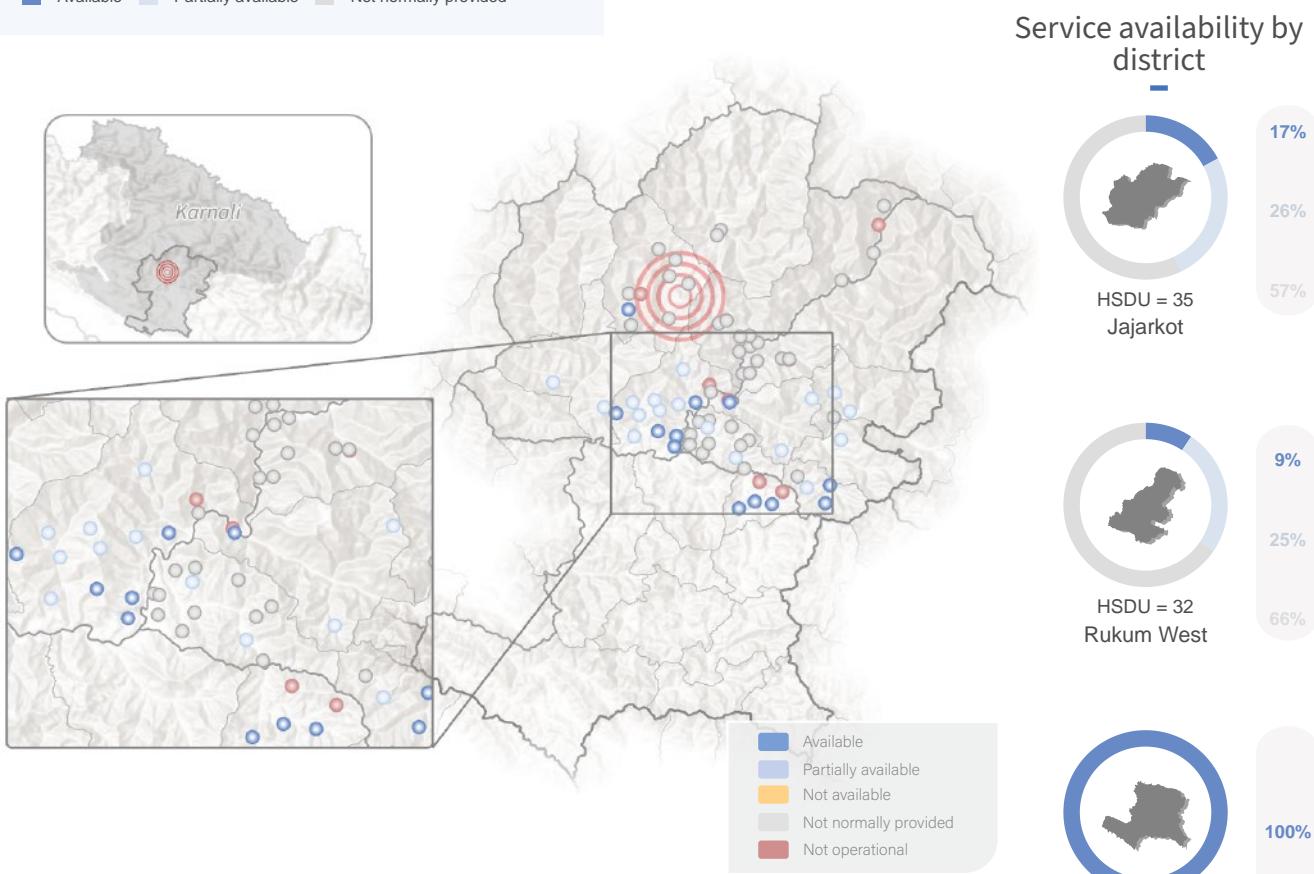
Service availability¹⁵



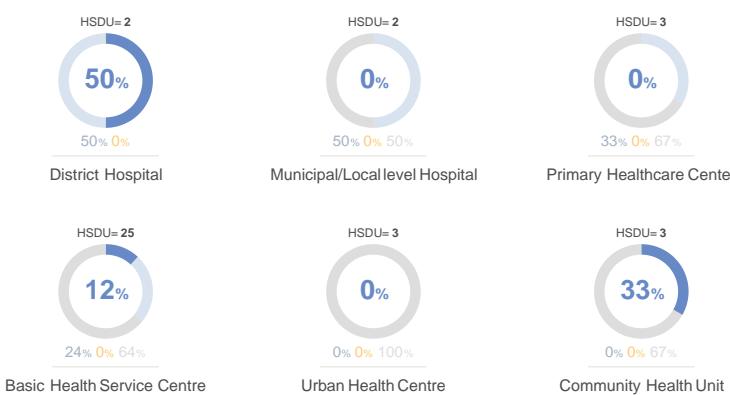
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹⁵ Acceptance of referral with remote decision support for prehospital providers and primary-level facilities, and condition-specific protocol-based referral to higher levels.



Jajarkot

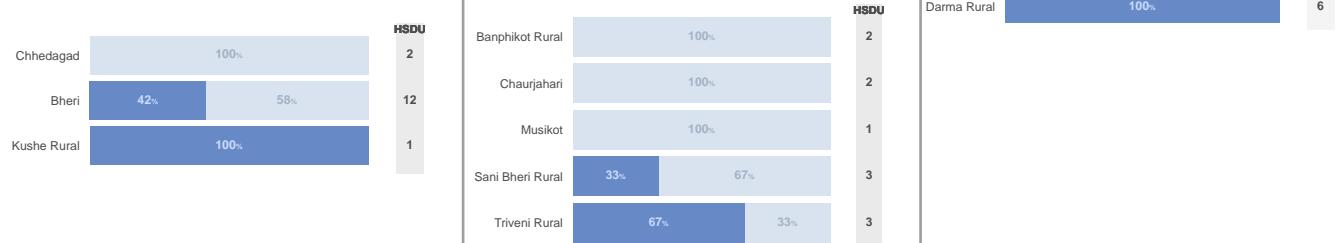


Rukum West

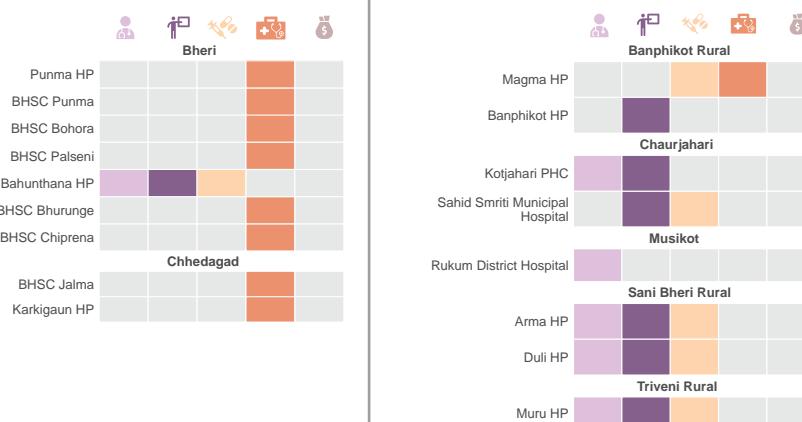


Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU



No barriers reported

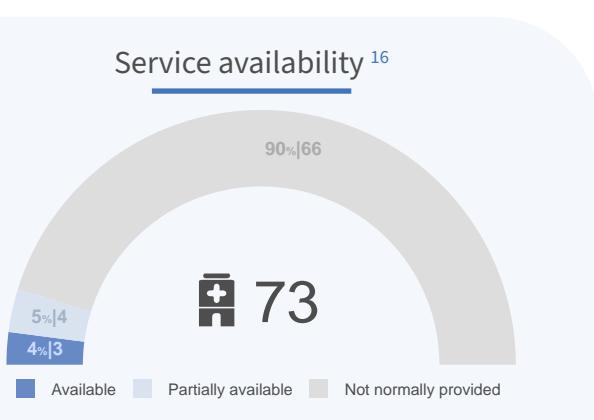
- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.



ACCEPTANCE OF COMPLEX REFERRALS

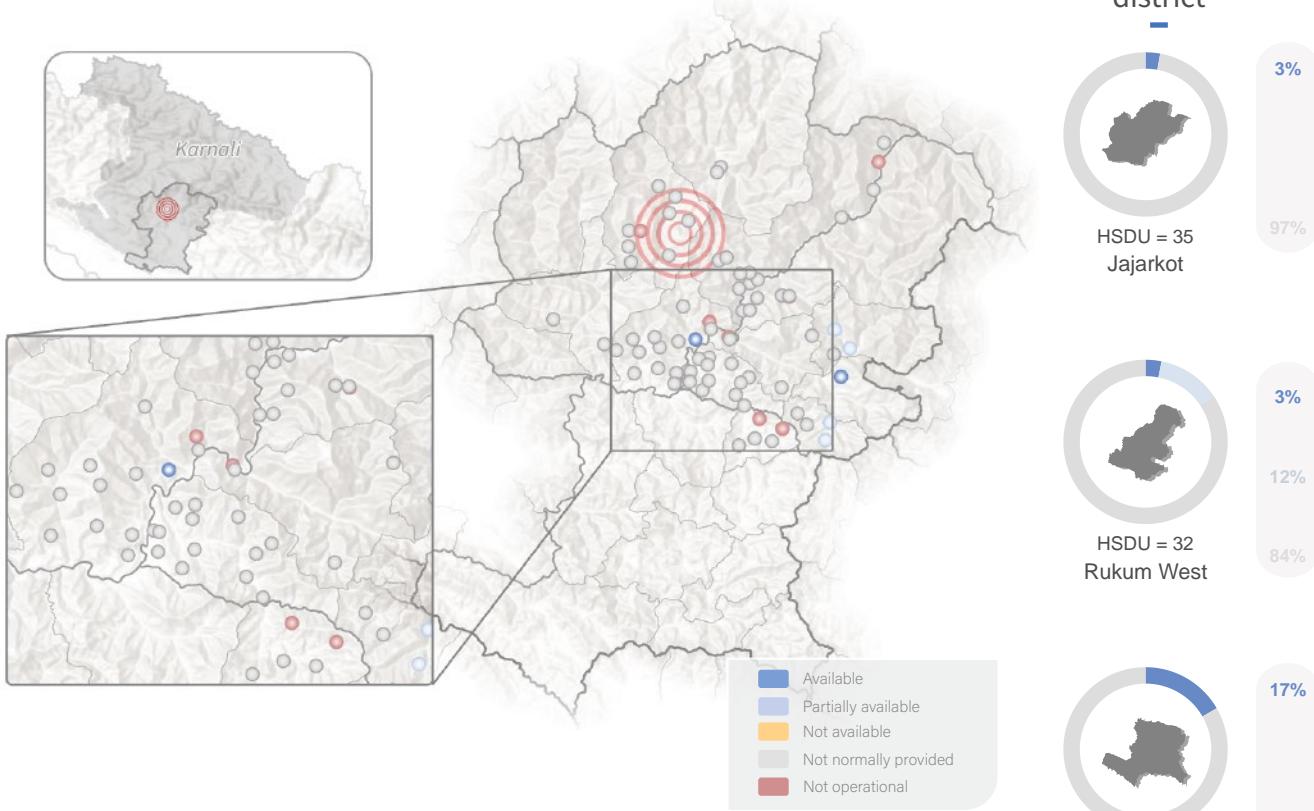
Service availability¹⁶



Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹⁶ Acceptance of complex referrals with remote decision support for prehospital providers and lower-level facilities.



Jajarkot

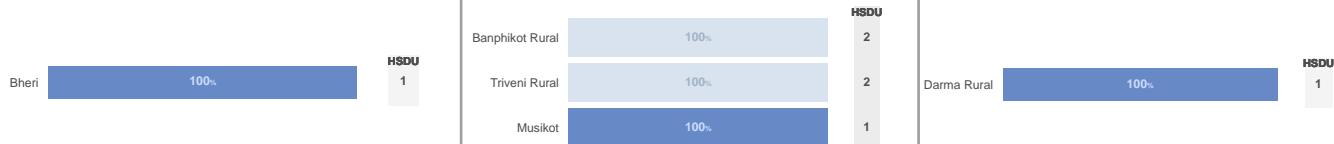


Rukum West



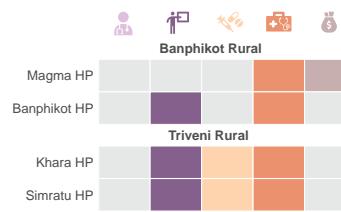
Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU

No barriers reported



No barriers reported

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

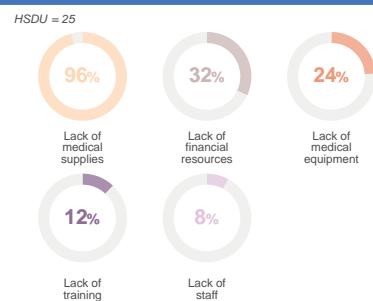


OUTPATIENT SERVICES FOR PRIMARY HEALTH CARE

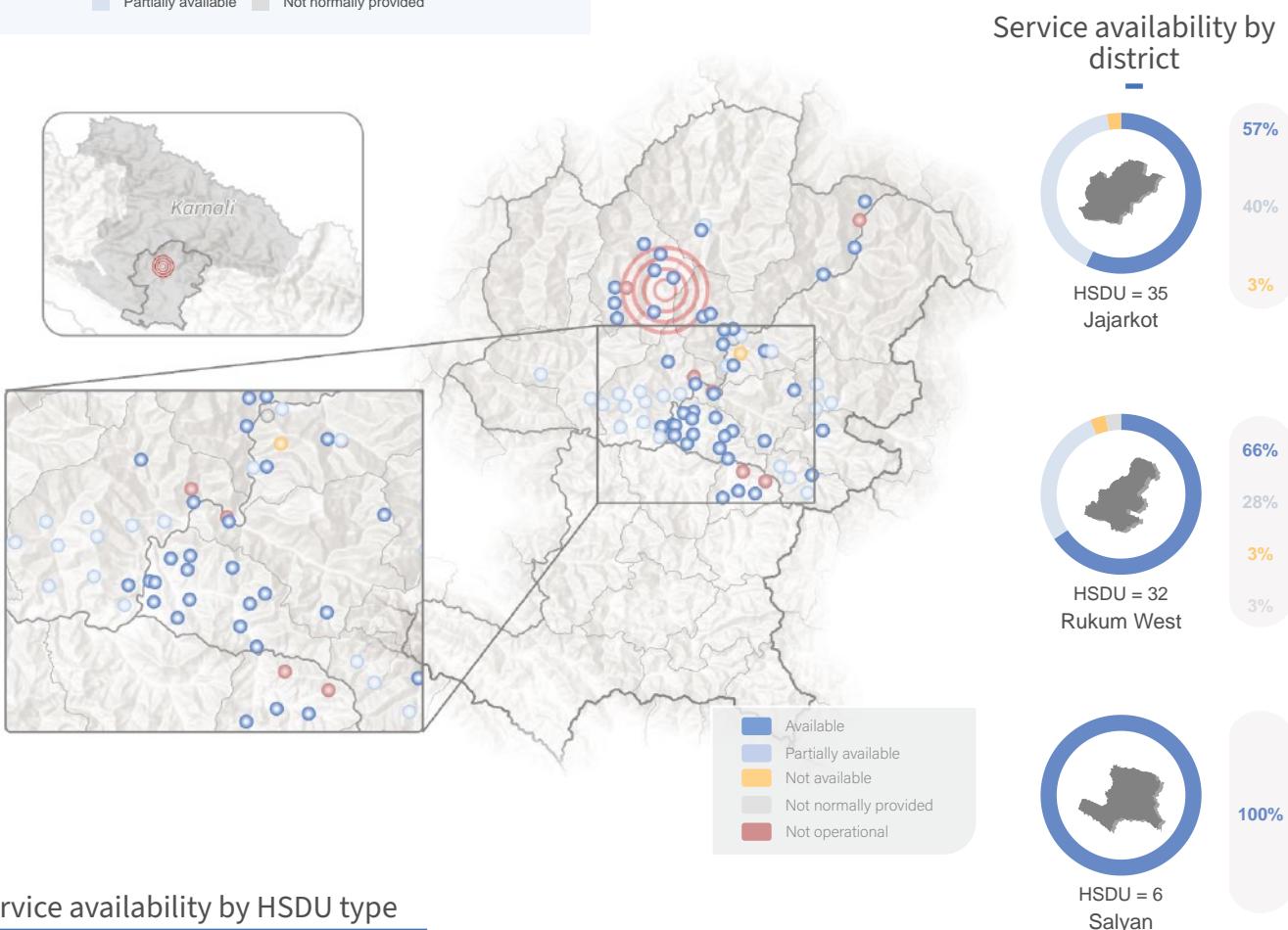
Service availability¹⁷



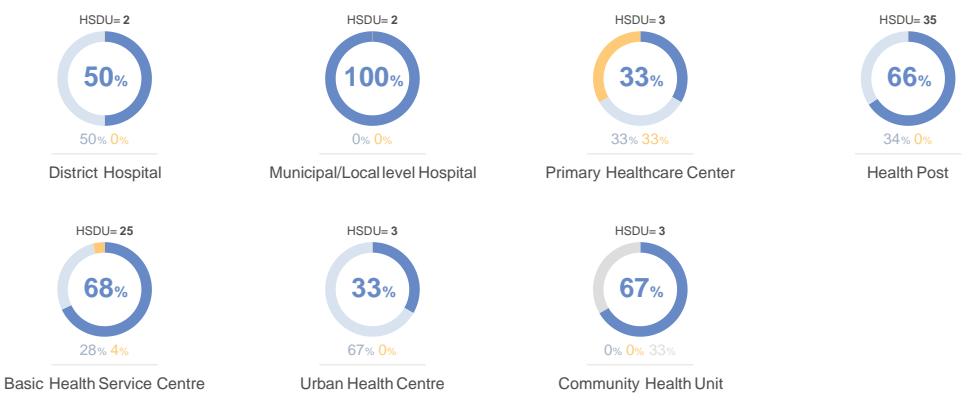
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹⁷ Outpatient services for primary care with availability of all essential drugs for primary care as per national guidelines.



Jajarkot

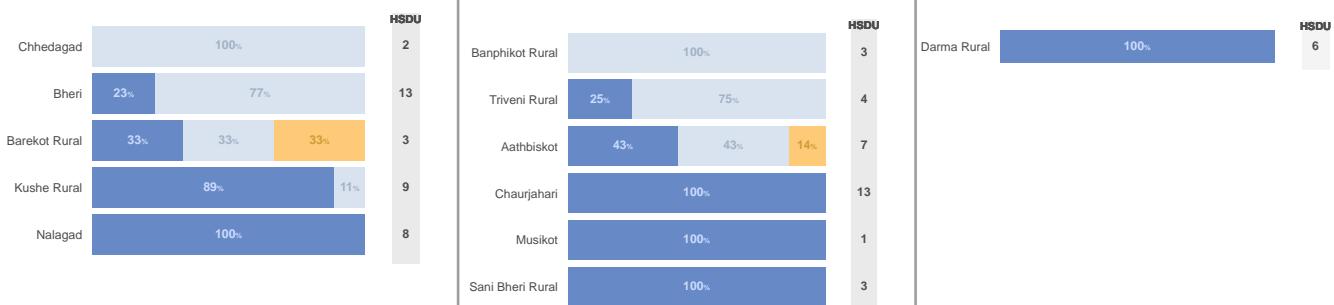


Rukum West



Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU



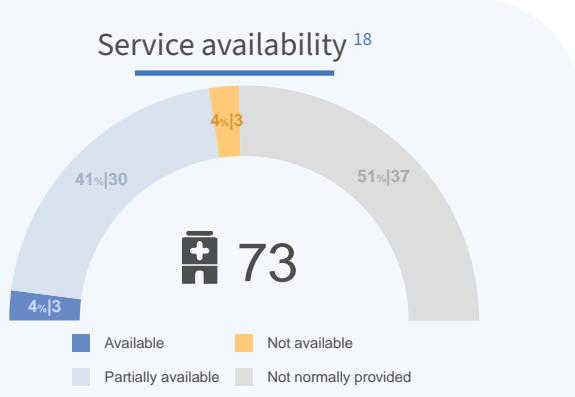
No barriers reported

- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

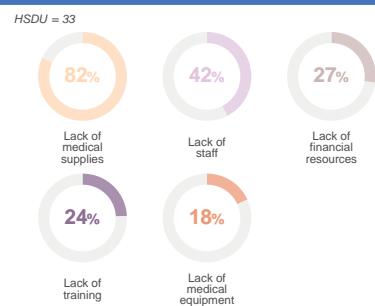
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

OUTPATIENT DEPARTMENT FOR SECONDARY CARE

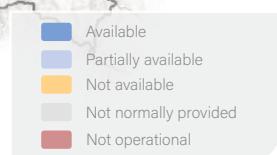
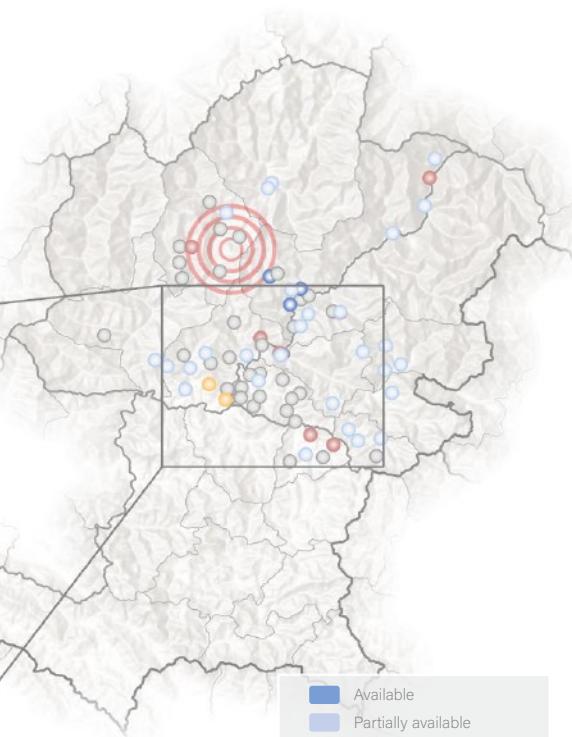
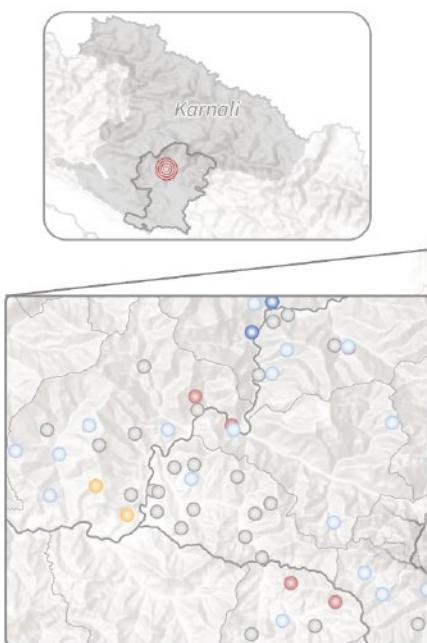
Service availability¹⁸



Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type

Service availability by HSDU type



¹⁸ Outpatient department (OPD) for secondary care with availability of all essential drugs for secondary care as per national guidelines (including NCD and pain management), and at least one general practitioner.



Jajarkot

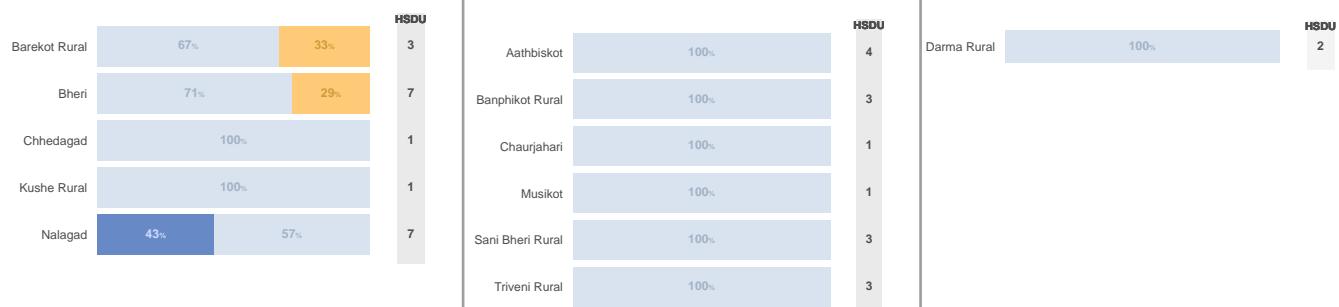


Rukum West

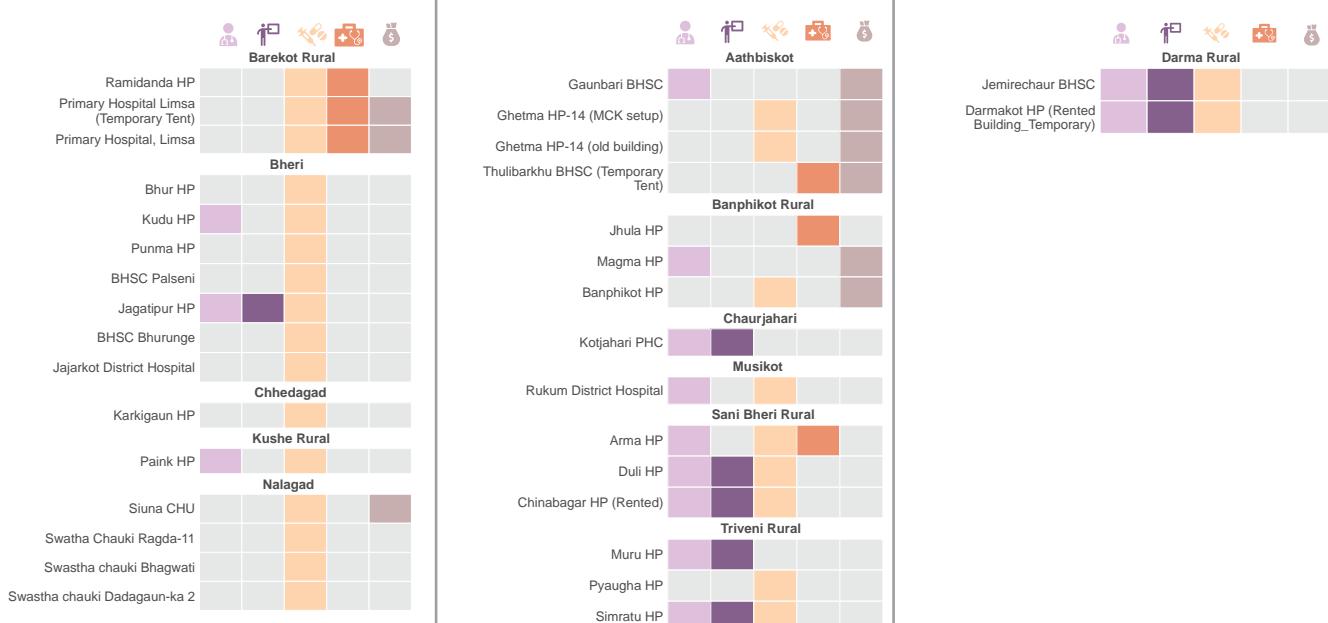


Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU

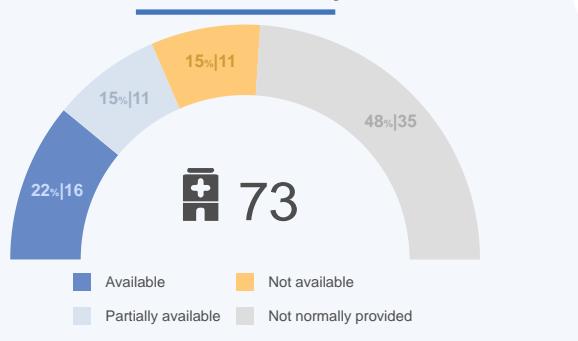


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

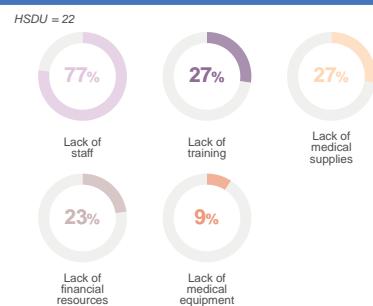
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

HOME VISITS

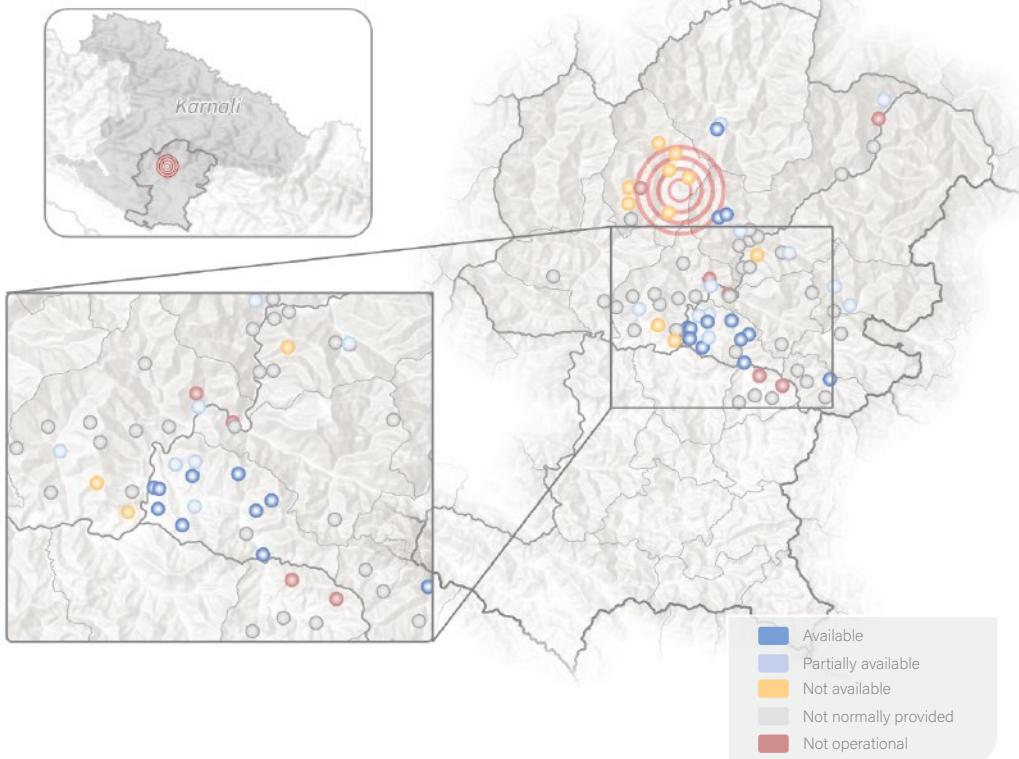
Service availability¹⁹



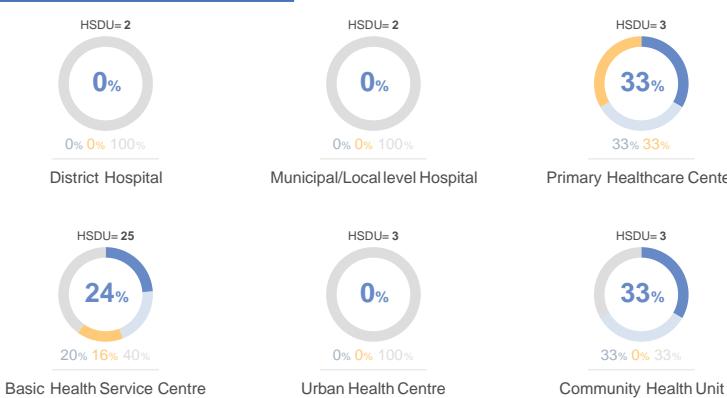
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹⁹ Home visits, including promotion of self-care practices, monitoring of noncommunicable diseases (NCD) medication compliance and palliative care.



Jajarkot

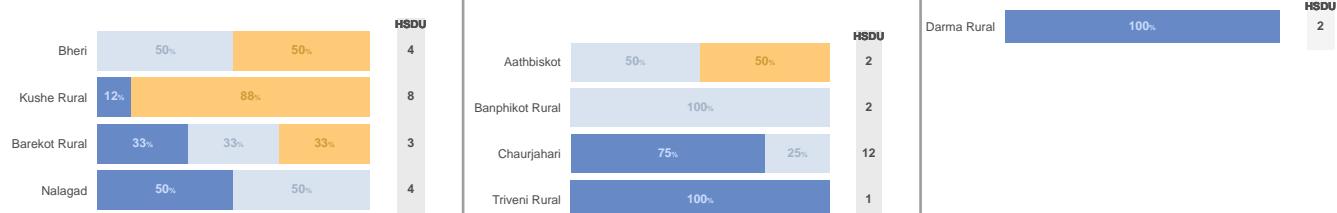


Rukum West

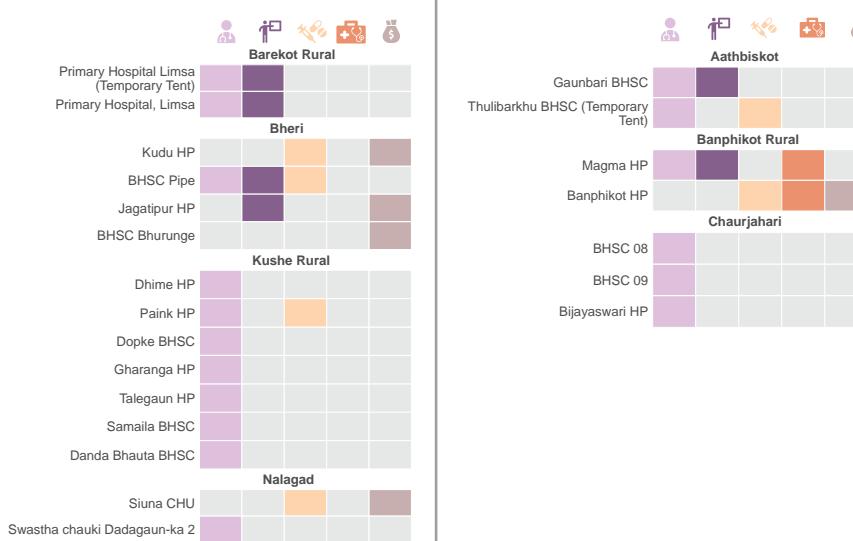


Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU



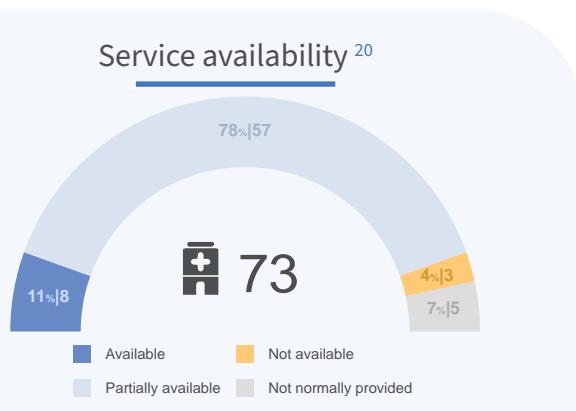
No barriers reported

- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

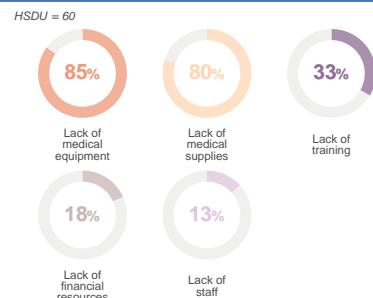
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

MINOR TRAUMA DEFINITIVE MANAGEMENT

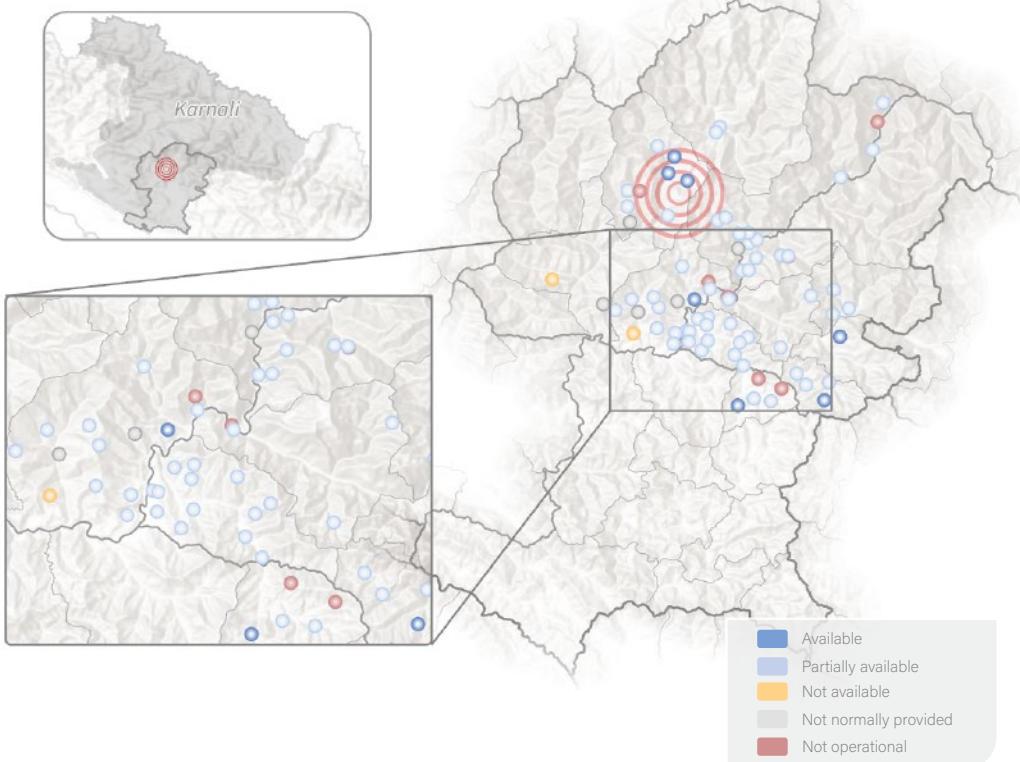
Service availability²⁰



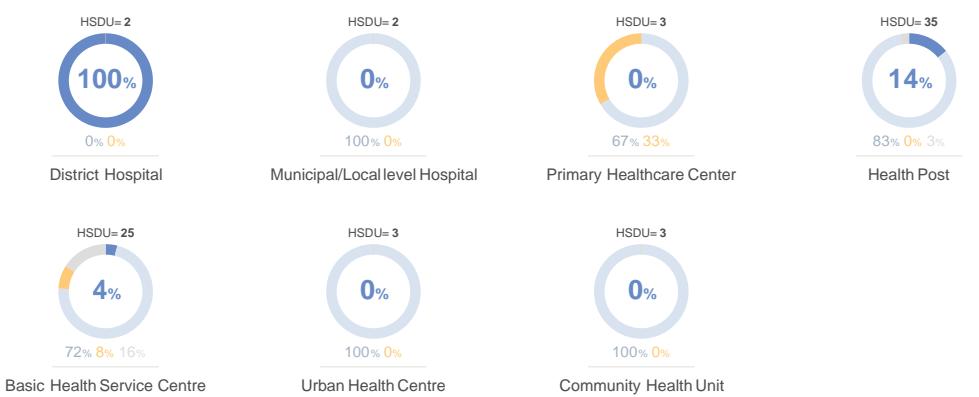
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



¹⁹ Pain management, tetanus toxoid and human antitoxin, minor surgery kits, suture absorbable/silk with needles, disinfectant solutions, bandages, gauzes, cotton wool.



Jajarkot

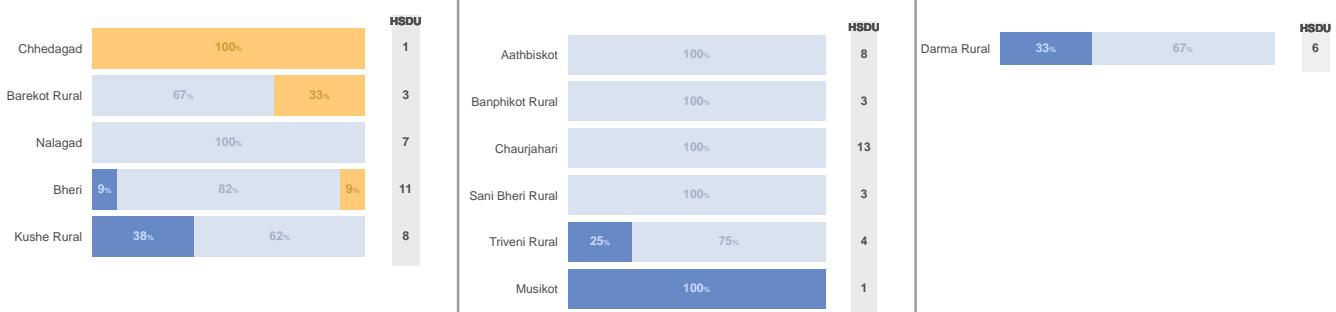


Rukum West



Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU

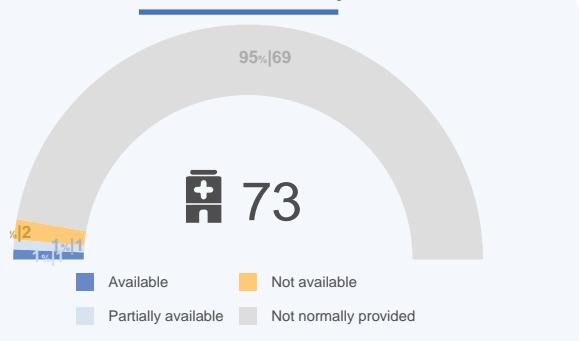


* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

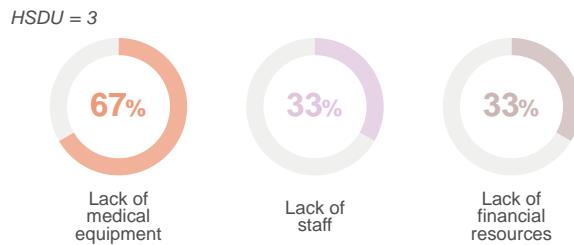


EMERGENCY AND ELECTIVE SURGERY

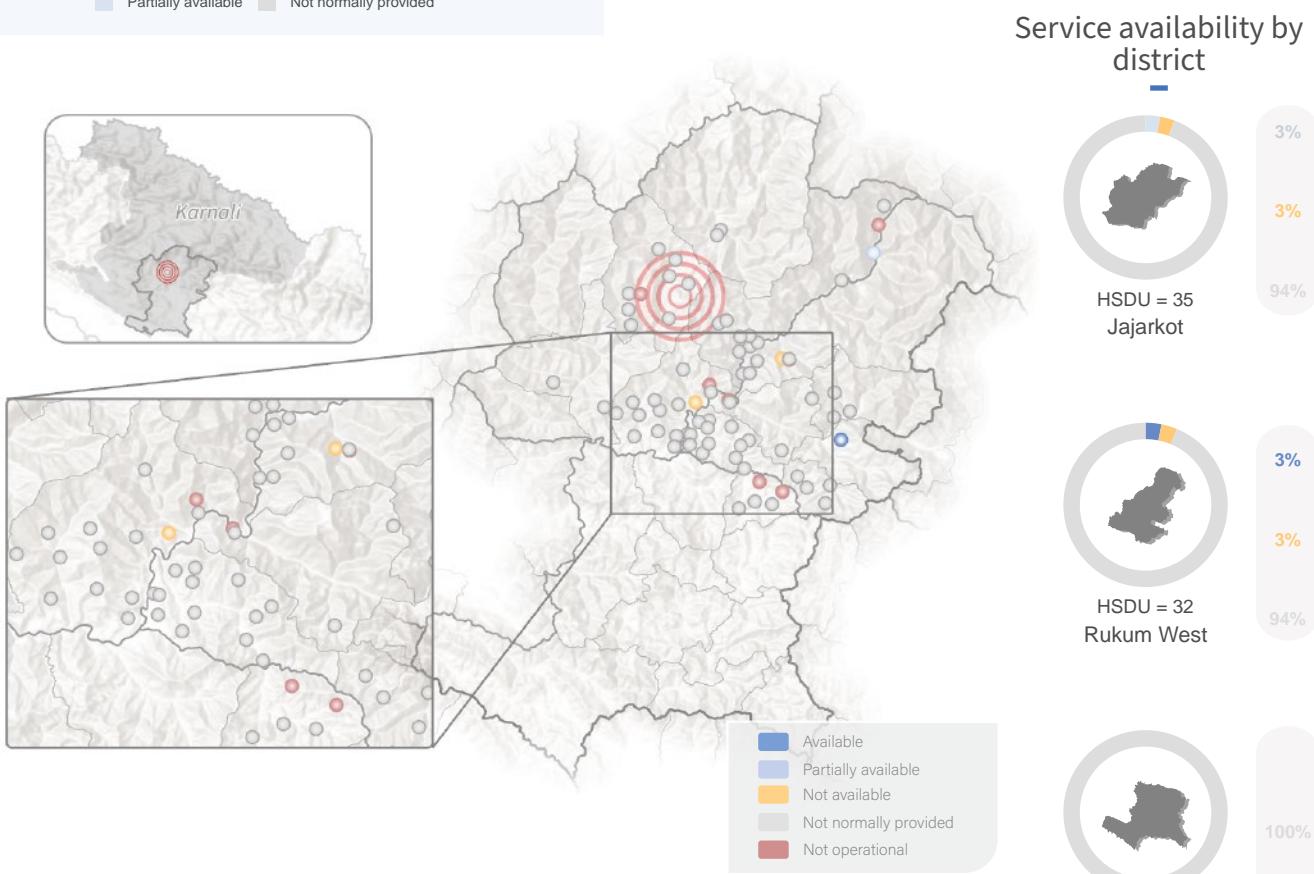
Service availability²⁰



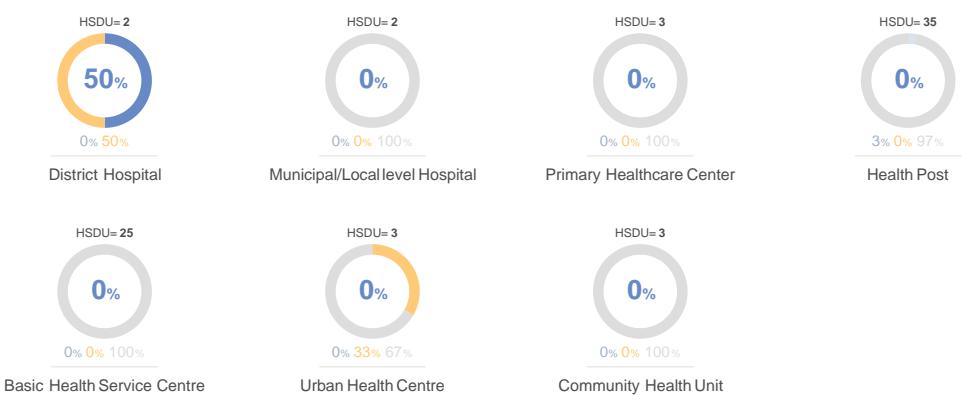
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



²⁰ Full surgical wound care, advanced fracture management through at least one operating theatre with basic general anaesthesia (with or without gas).



Jajarkot



Rukum West



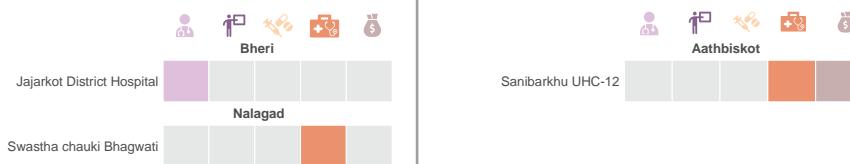
Salyan

Service availability by municipality*



No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU



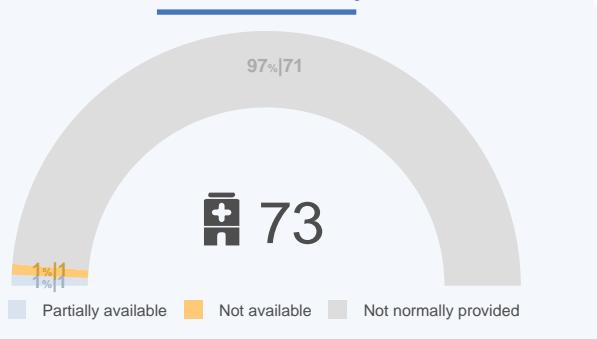
- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

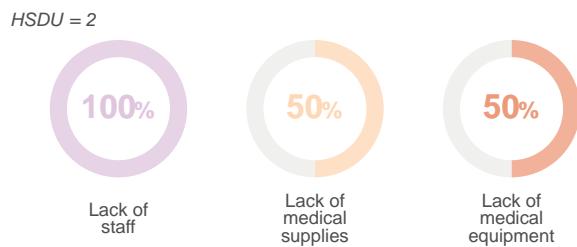


SURGERY WITH AT LEAST TWO OPERATING THEATRES

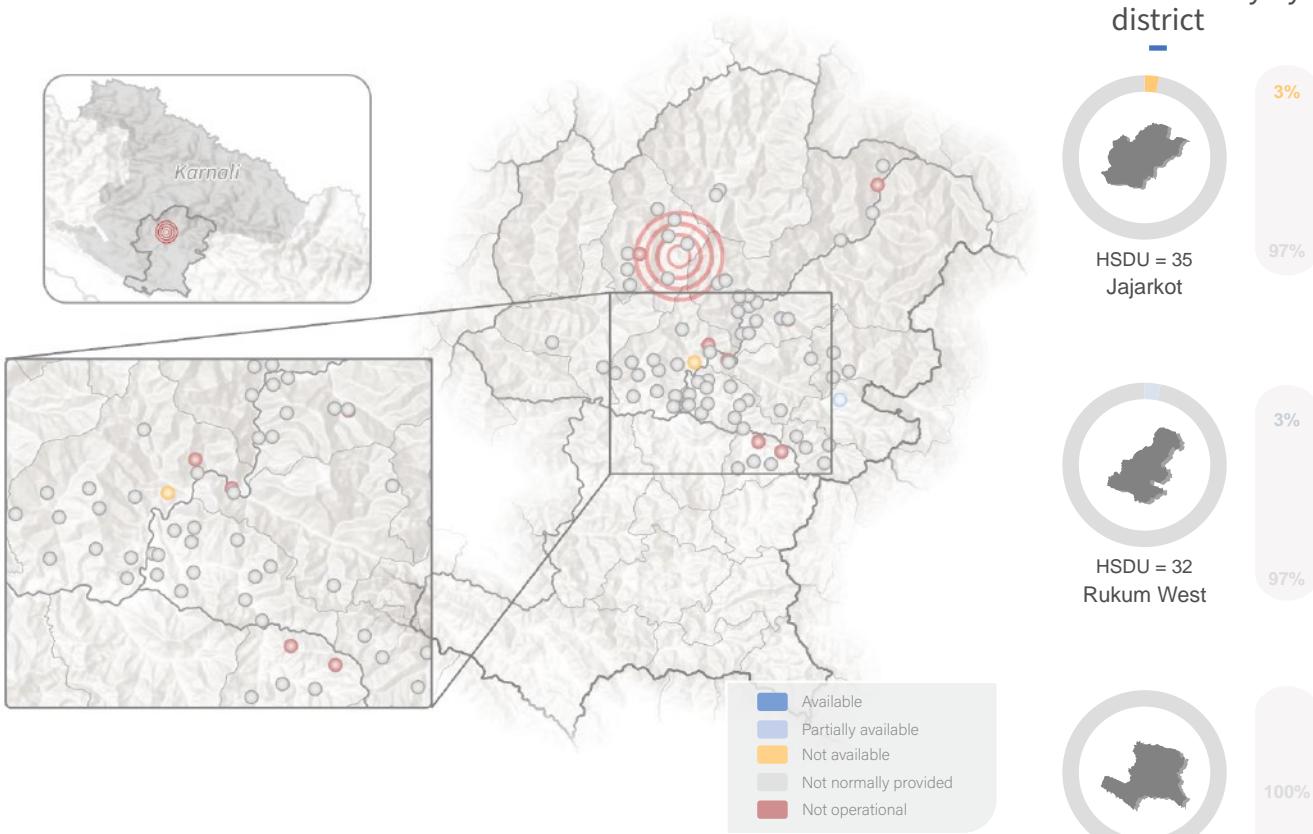
Service availability²¹



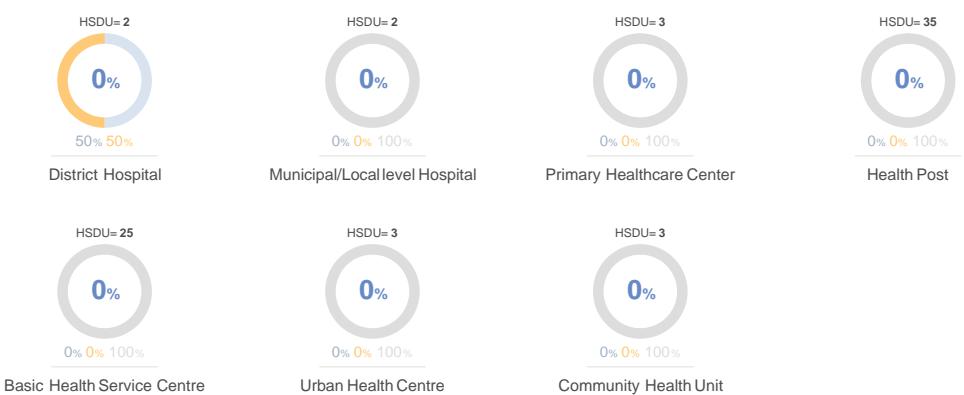
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



²¹ Emergency and elective surgery with at least two operating theatres with pediatric and adult gaseous anesthetic.



Jajarkot



Rukum West



Salyan

Service availability by municipality*



No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU

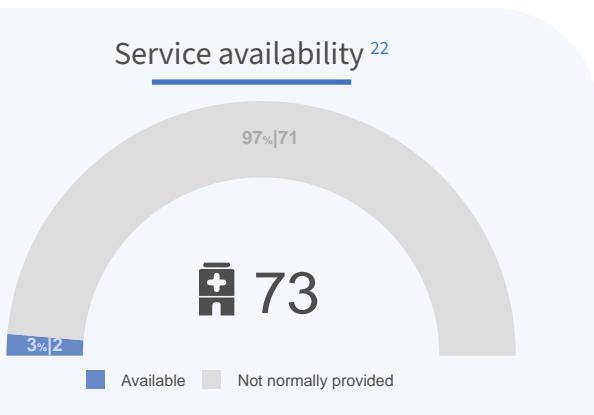


-  Lack of staff
-  Lack of training
-  Lack of medical supplies
-  Lack of medical equipment
-  Lack of financial resources

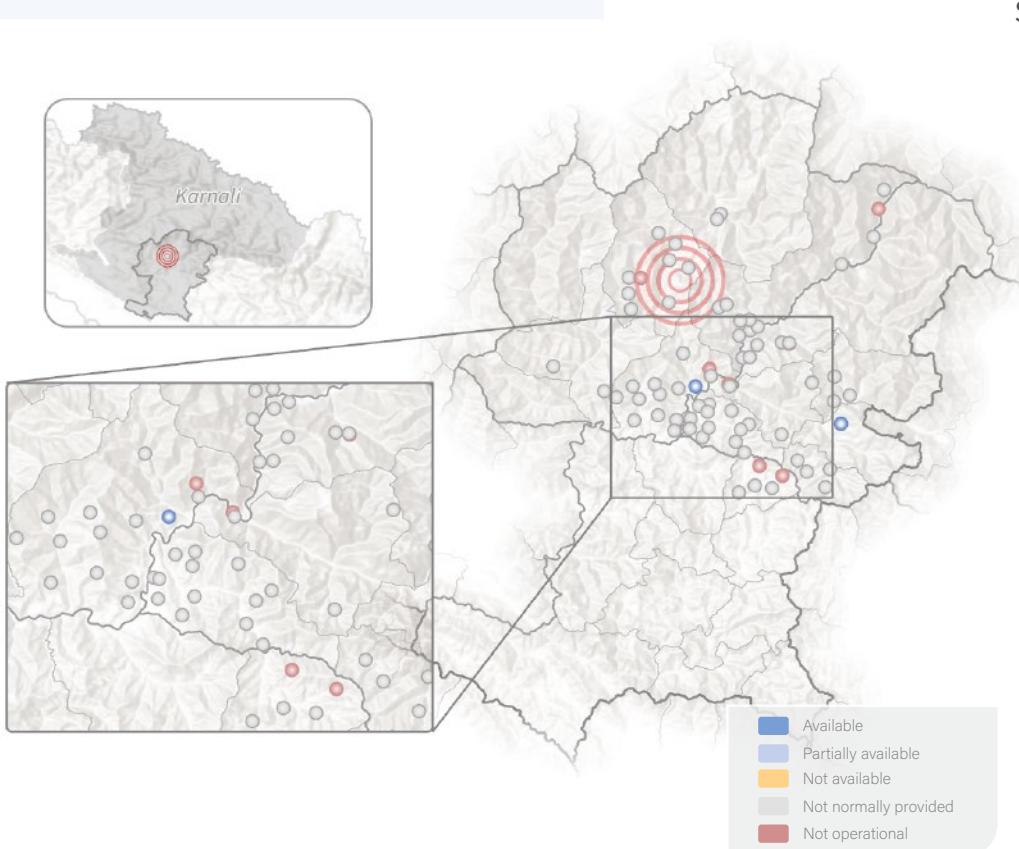
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

ORTHOPEDIC/TRAUMA WARD

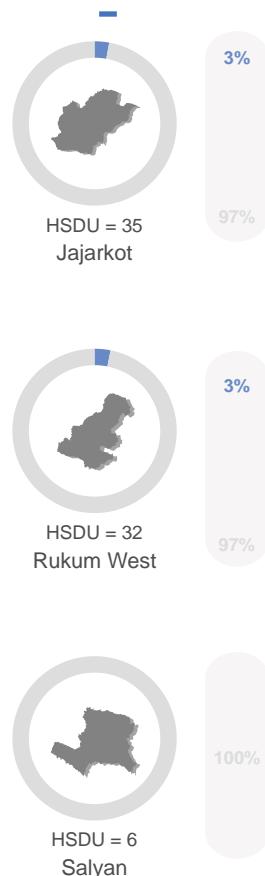
Service availability ²²



No barriers reported



Service availability by district



Service availability by HSDU type



²² Orthopedic/trauma ward for advanced orthopedic and surgical care, including burn patient management.



Jajarkot



Rukum West



Salyan

Service availability by municipality*



No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU

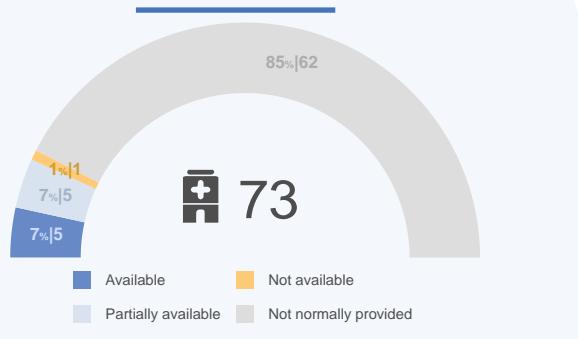
No barriers reported

No barriers reported

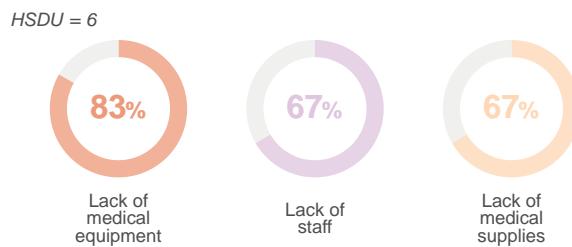
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

SHORT HOSPITALIZATION CAPACITY

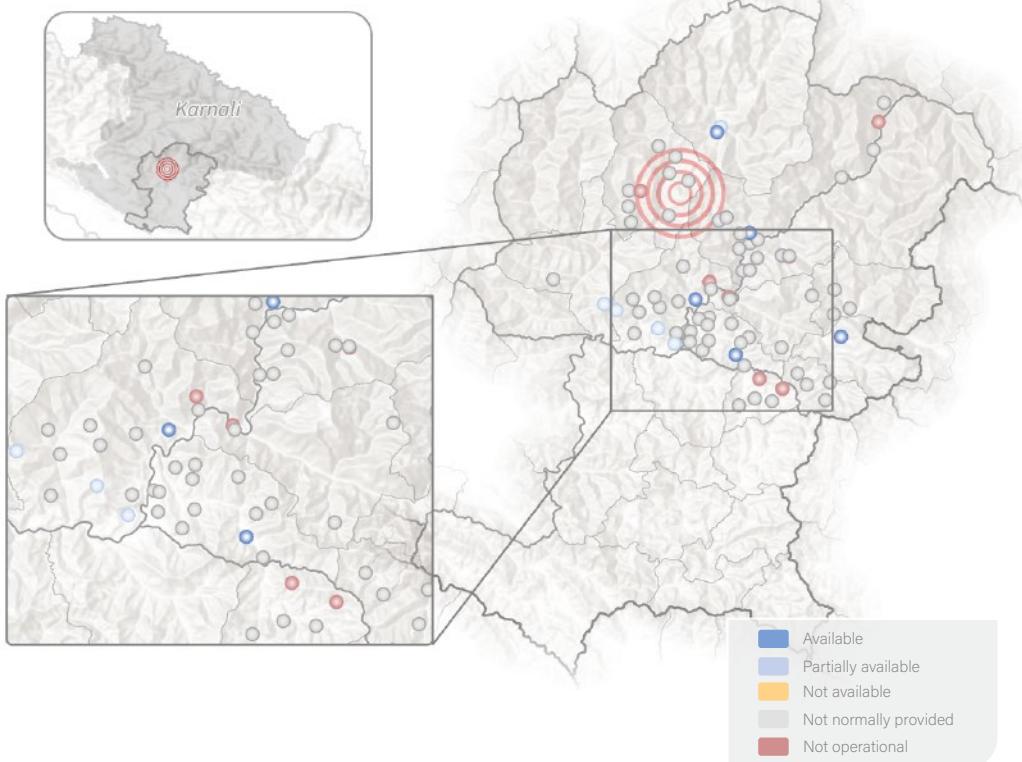
Service availability²³



Main barriers impeding service delivery



Service availability by district



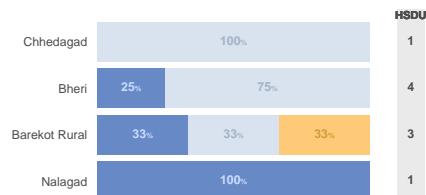
Service availability by HSDU type



²³ Short hospitalization capacity (maximum 48 hours).

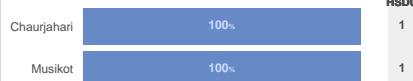


Jajarkot

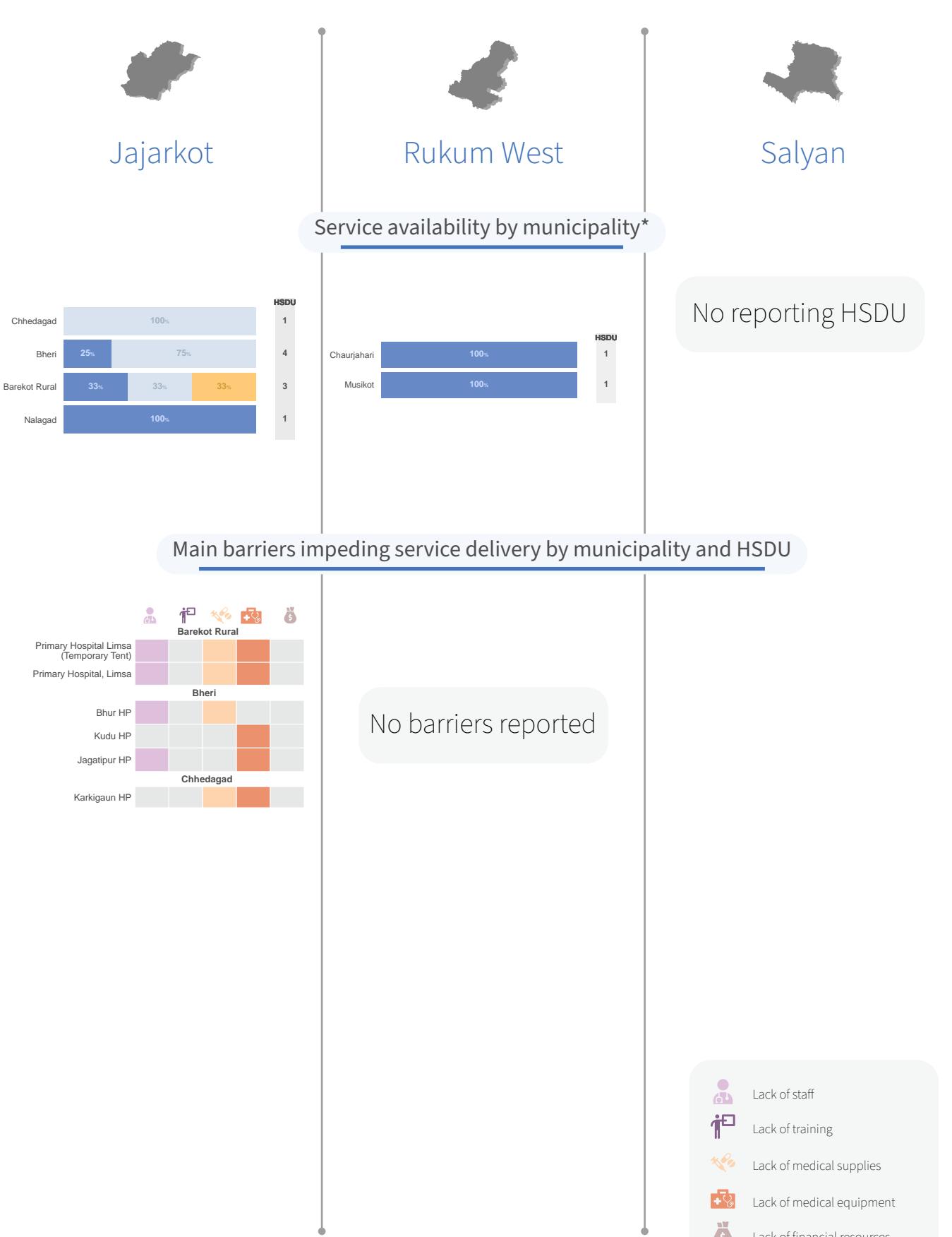


Rukum West

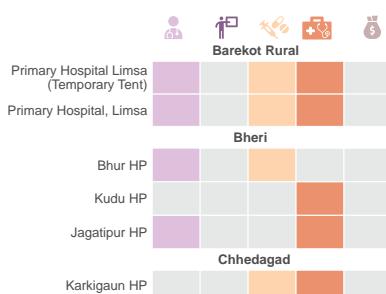
Service availability by municipality*



No reporting HSDU



Main barriers impeding service delivery by municipality and HSDU



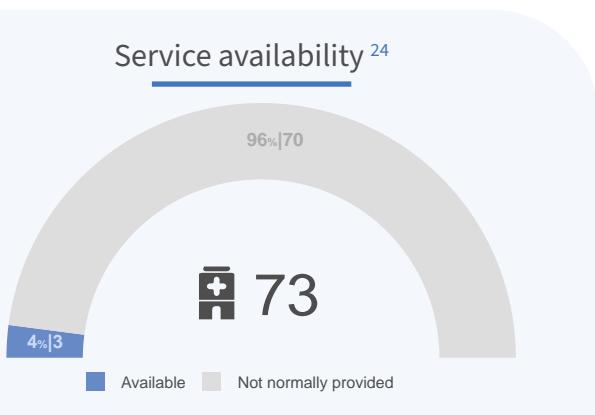
No barriers reported

- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

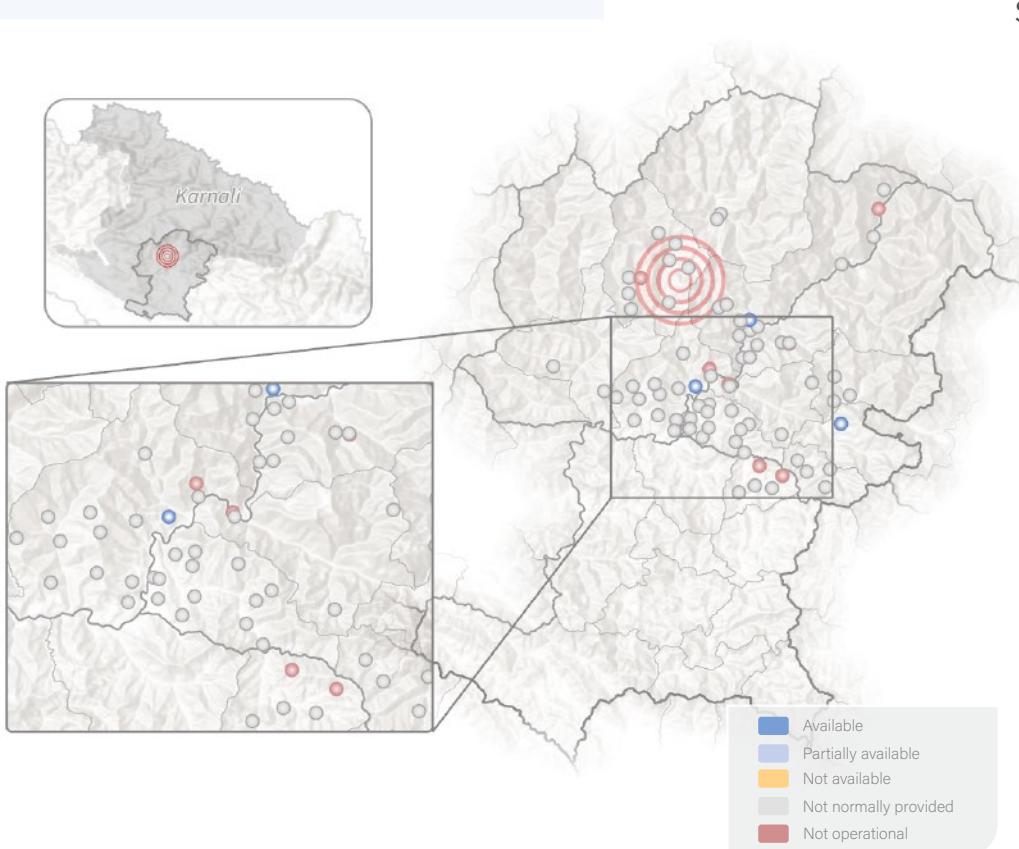
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

20 INPATIENT BED CAPACITY

Service availability ²⁴



No barriers reported



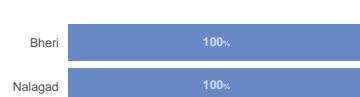
Service availability by HSDU type



²⁴ At least 20 inpatient bed capacity with 24/7 availability of medical doctors (MD), nurses and midwives, and 4–5 beds for short observation before admission, or 24/48-hour hospitalization.



Jajarkot



Rukum West

Service availability by municipality*

Musikot

100%

HSDU

1



Salyan

No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU

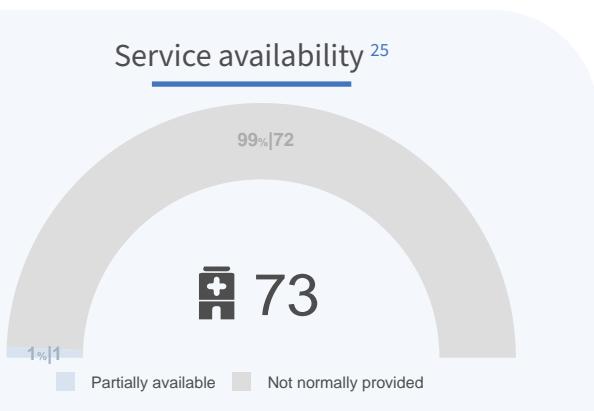
No barriers reported

No barriers reported

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

50 INPATIENT BED CAPACITY

Service availability²⁵

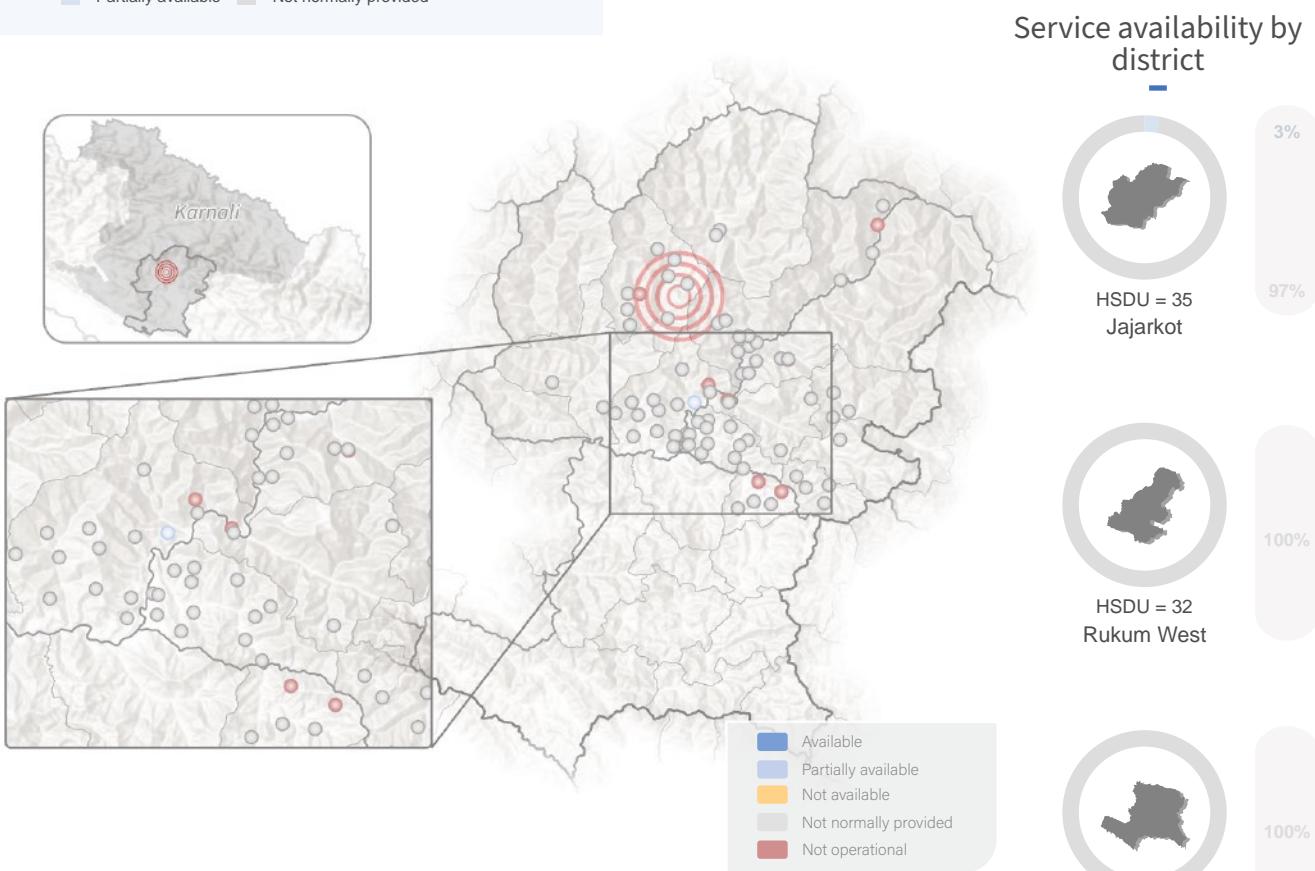


Main barriers impeding service delivery

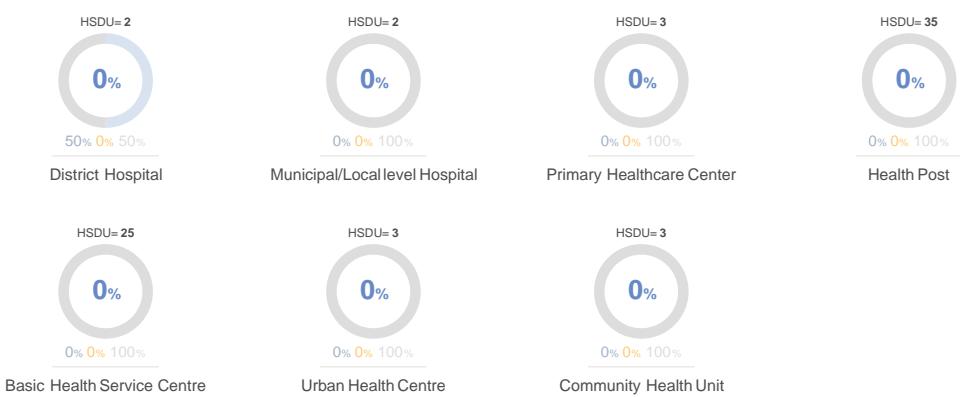
HSDU = 1



Service availability by district



Service availability by HSDU type



²⁵ 50 inpatient bed capacity with pediatric and ob-gyn wards with 24/7 availability of doctors and/or specialists (general surgeon, ob-gyn, pediatrician, others).



Jajarkot



Rukum West



Salyan

Service availability by municipality*



No reporting HSDU

No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU



Jajarkot District Hospital

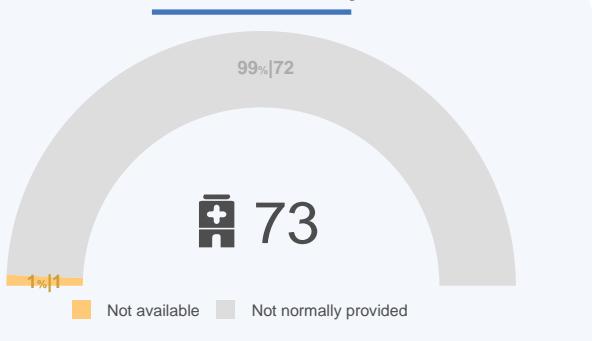
- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

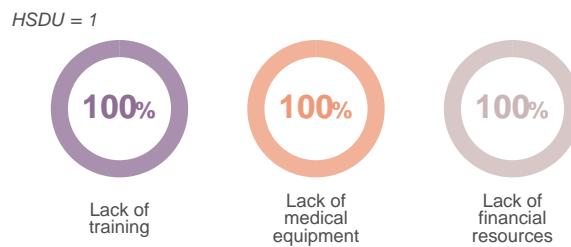


INPATIENT CRITICAL CARE MANAGEMENT

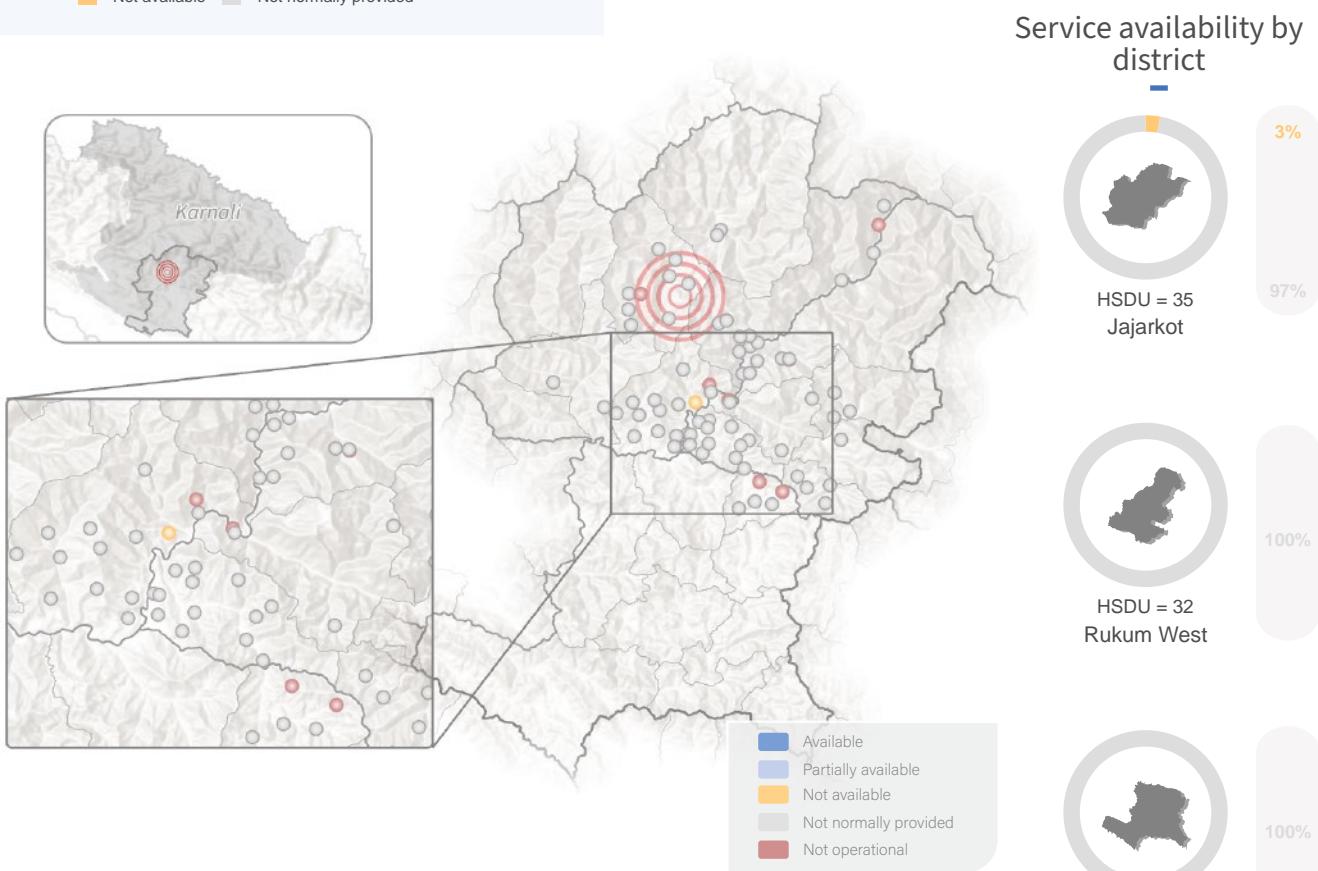
Service availability²⁶



Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



²⁶ Inpatient critical care management with availability of mechanical ventilation, infusion pumps, and third-line emergency drugs.



Jajarkot



Rukum West



Salyan

Service availability by municipality*



No reporting HSDU

No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU

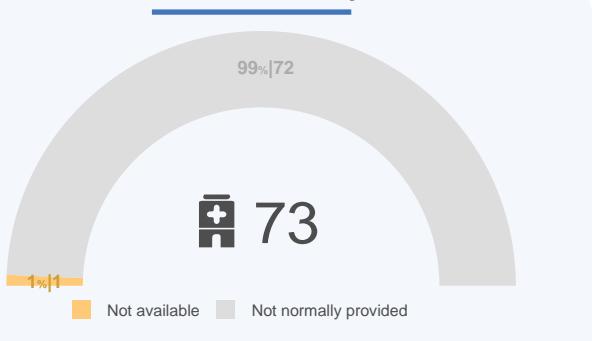


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

INTENSIVE CARE UNIT

Service availability ²⁷



Main barriers impeding service delivery

HSDU = 1



Lack of staff

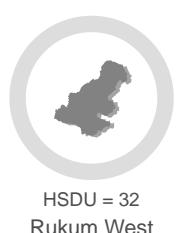
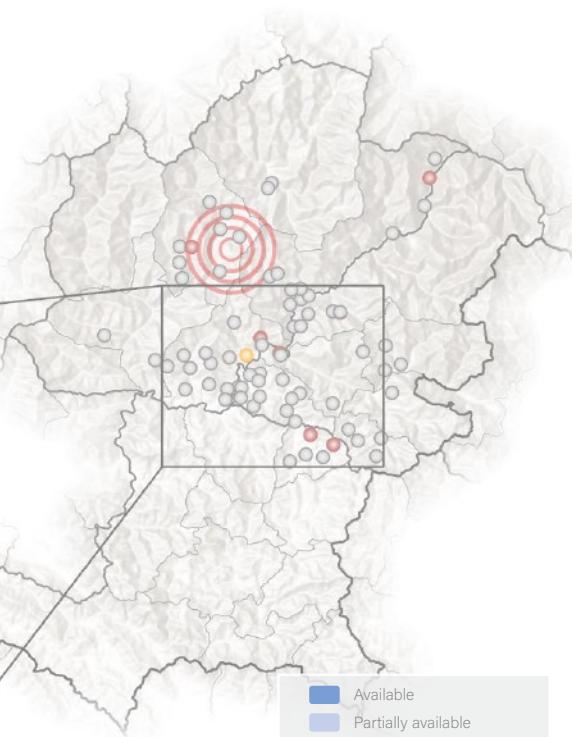


Lack of medical equipment



Lack of financial resources

Service availability by district



Service availability by HSDU type

HSDU= 2



District Hospital

HSDU= 2



Municipal/Local level Hospital

HSDU= 3



Primary Healthcare Center

HSDU= 35



Health Post

HSDU= 25



Basic Health Service Centre

HSDU= 3



Urban Health Centre

HSDU= 3



Community Health Unit

²⁷ Intensive care unit with at least 4 beds.



Jajarkot

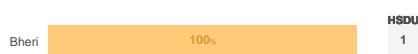


Rukum West



Salyan

Service availability by municipality*



No reporting HSDU

No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU



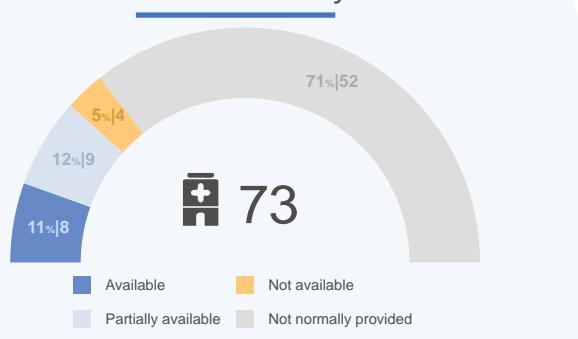
Jajarkot District Hospital

- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

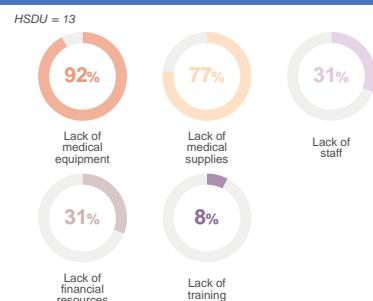
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

BASIC LABORATORY

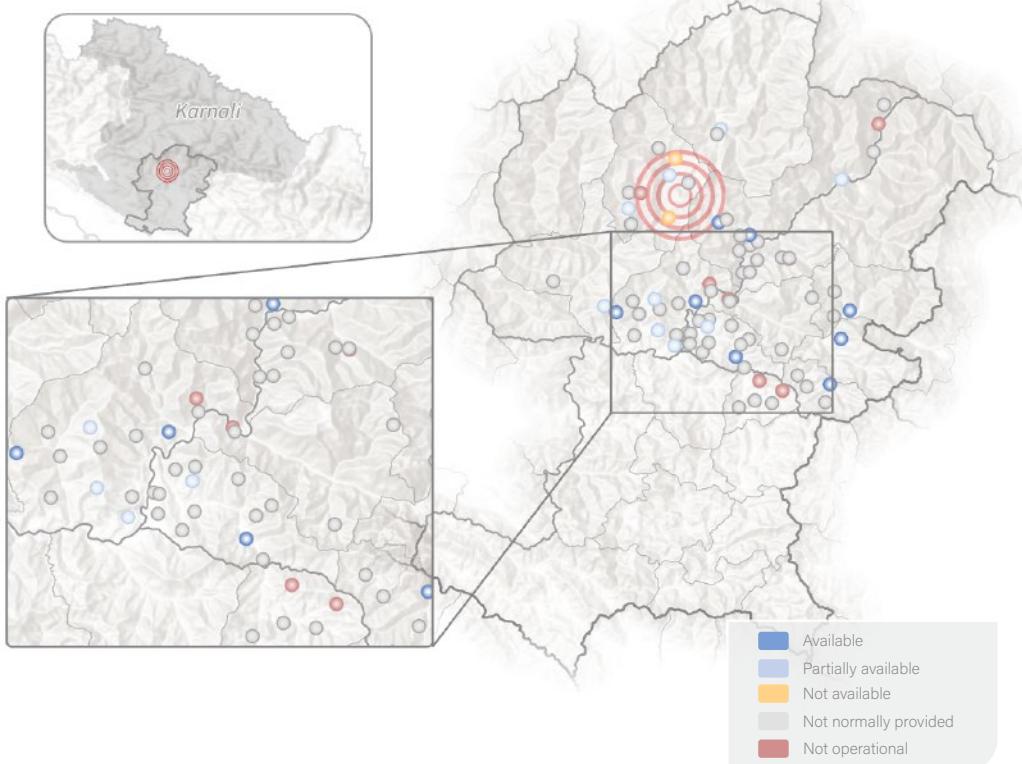
Service availability²⁸



Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



²⁸ Basic laboratory with general microscopy.



Jajarkot

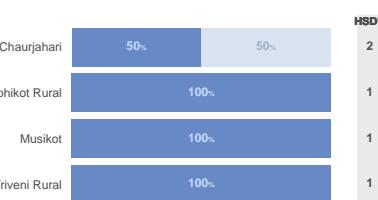
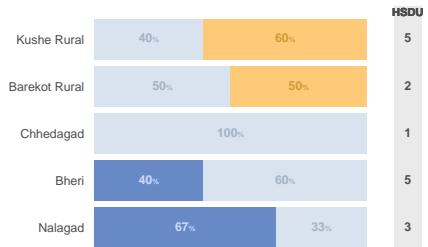


Rukum West



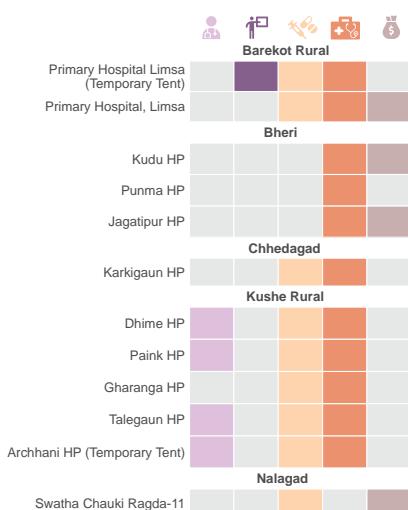
Salyan

Service availability by municipality*



No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU

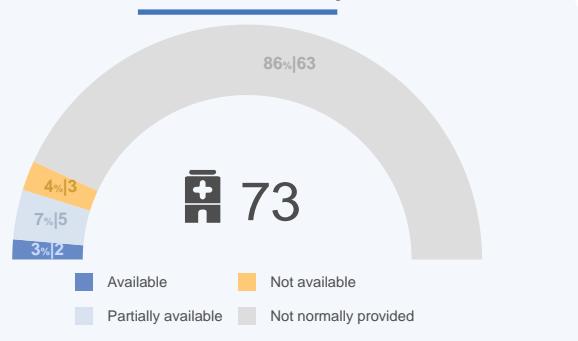


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

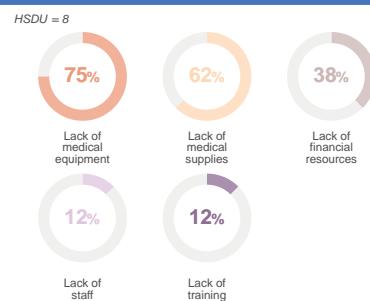
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

LABORATORY SERVICES SECONDARY LEVEL

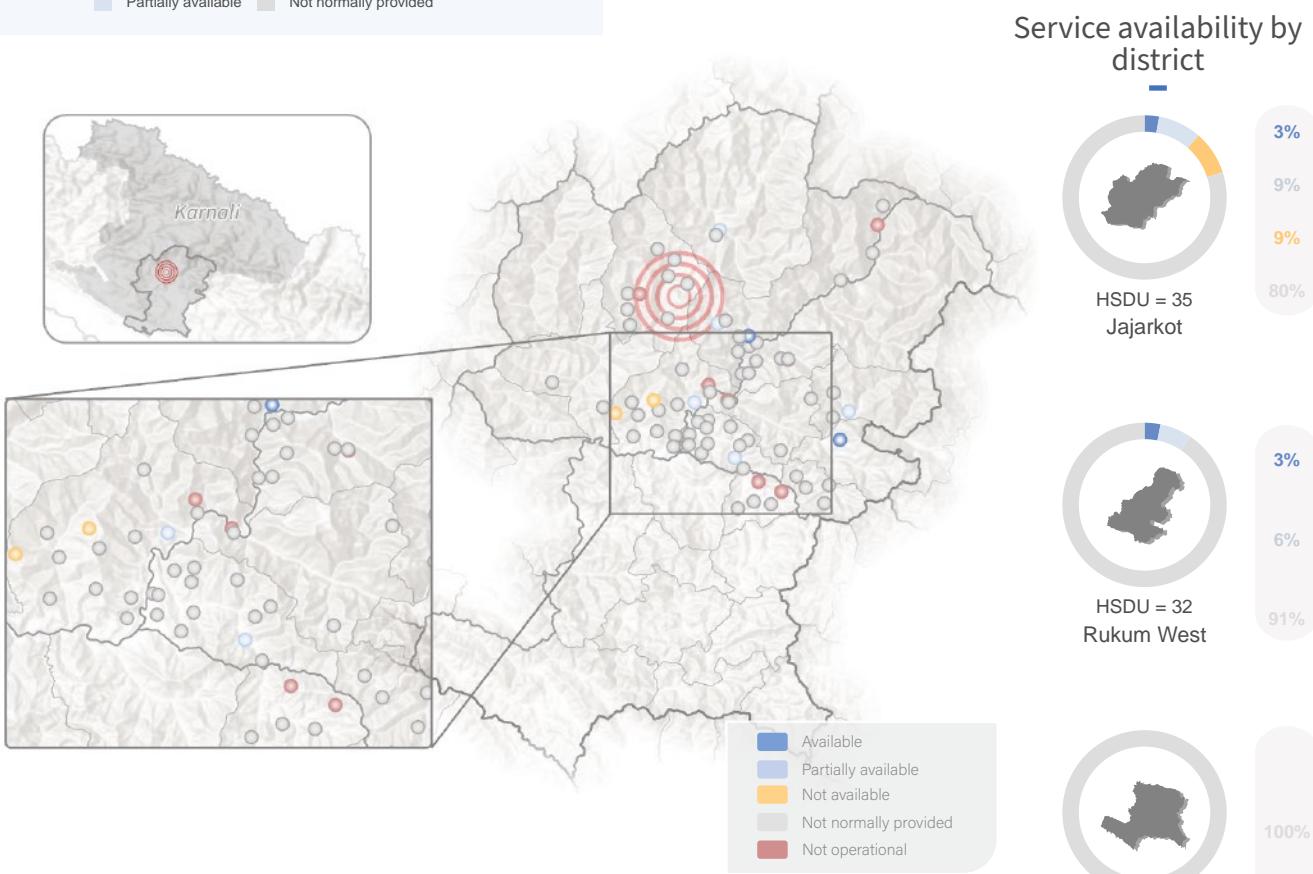
Service availability²⁹



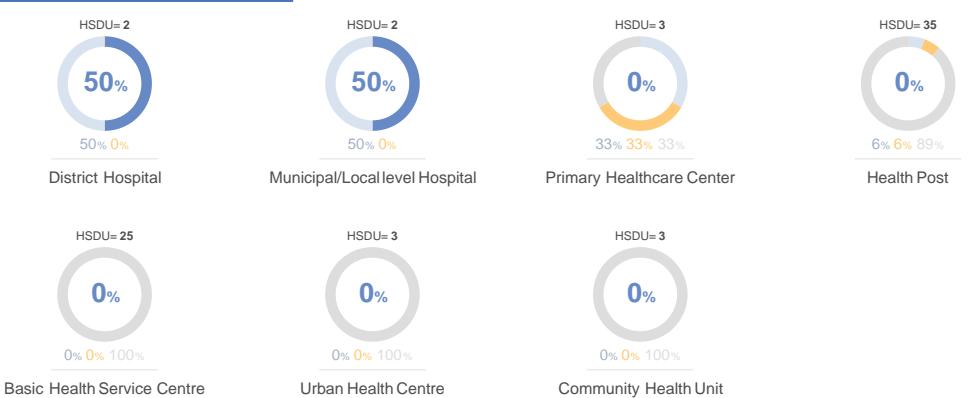
Main barriers impeding service delivery



Service availability by district



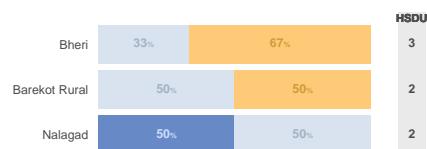
Service availability by HSDU type



²⁹ Laboratory services secondary level.



Jajarkot



Rukum West

Service availability by municipality*

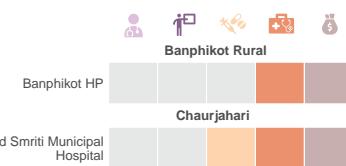
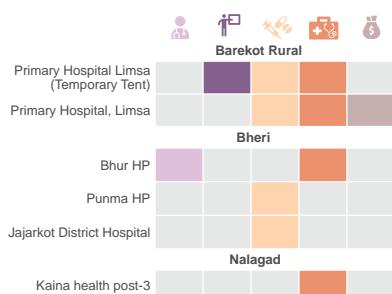
Banphikot Rural	100%	HSDU
Chaurjahari	100%	1
Musikot	100%	1

No reporting HSDU



Salyan

Main barriers impeding service delivery by municipality and HSDU

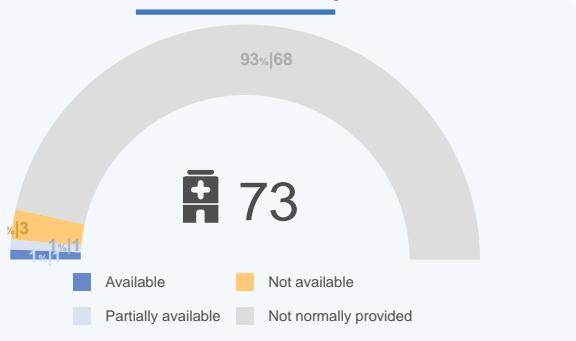


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

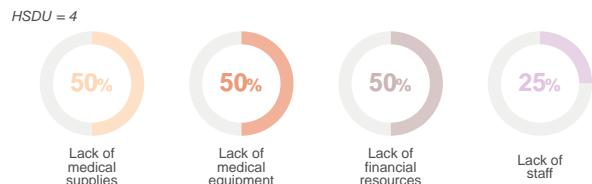
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

LABORATORY SERVICES TERTIARY LEVEL

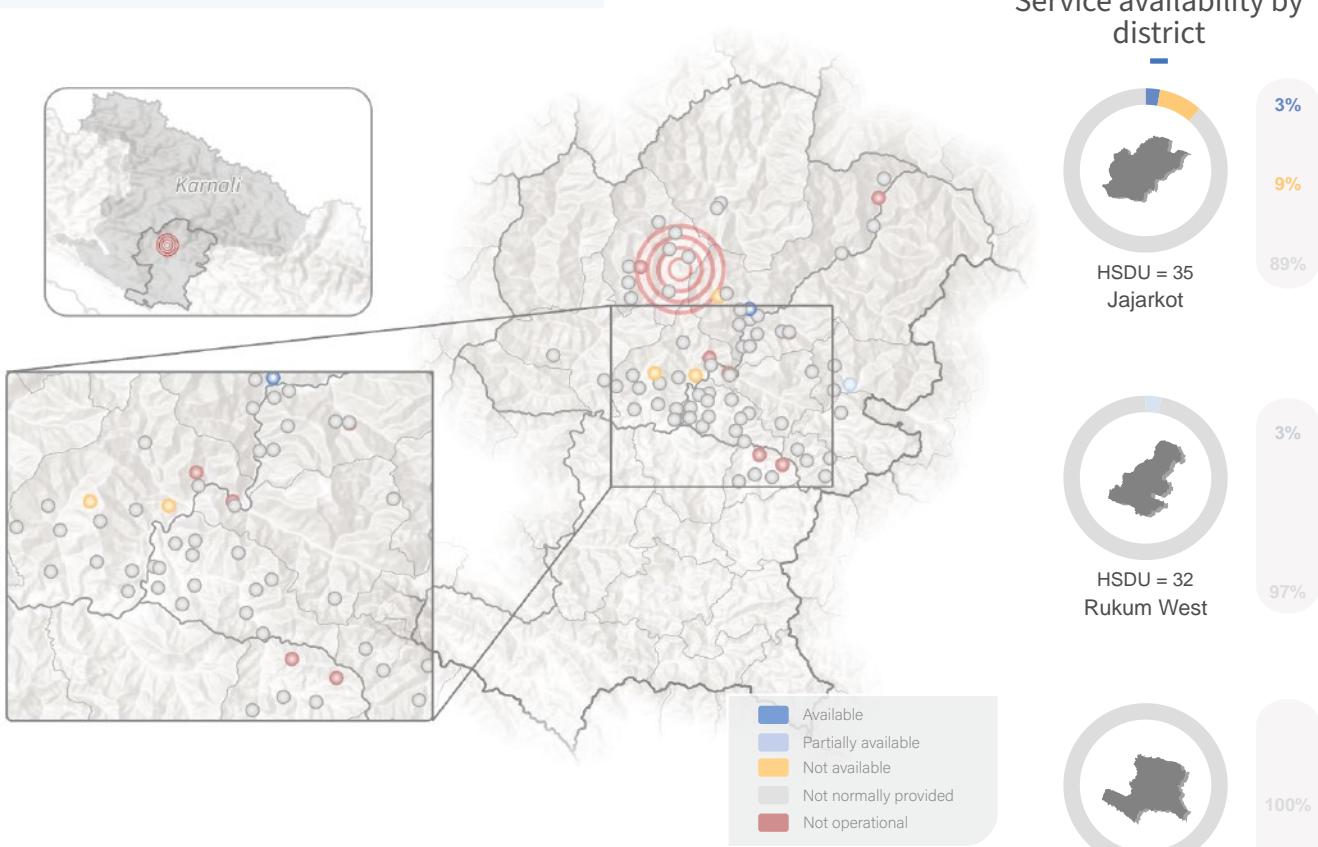
Service availability³⁰



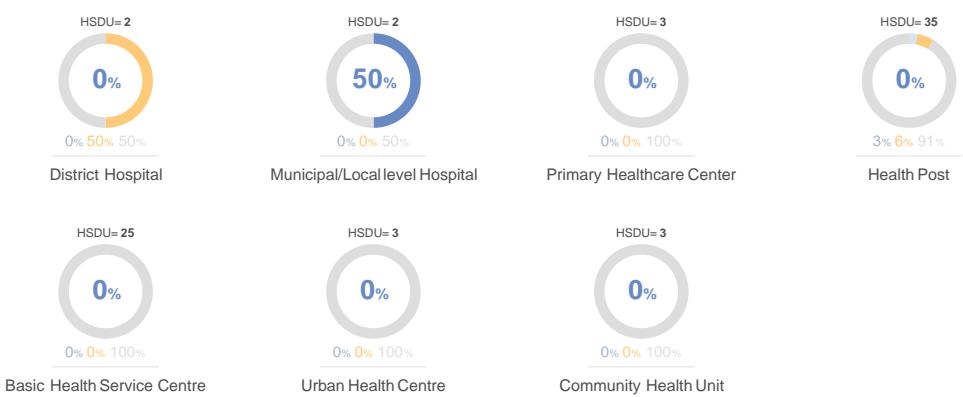
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



³⁰ Laboratory services tertiary level including electrolyte and blood gas concentrations, public health laboratory capacities.



Jajarkot



Rukum West



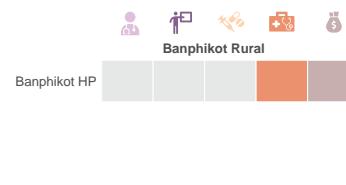
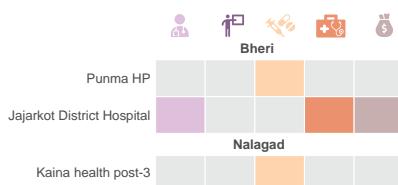
Salyan

Service availability by municipality*



No reporting HSDU

Main barriers impeding service delivery by municipality and HSDU

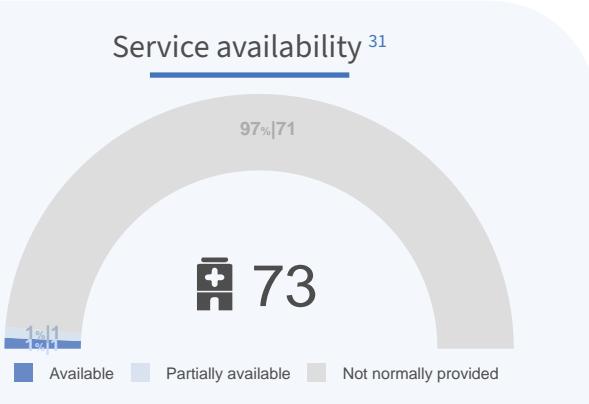


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

BLOOD BANK SERVICES

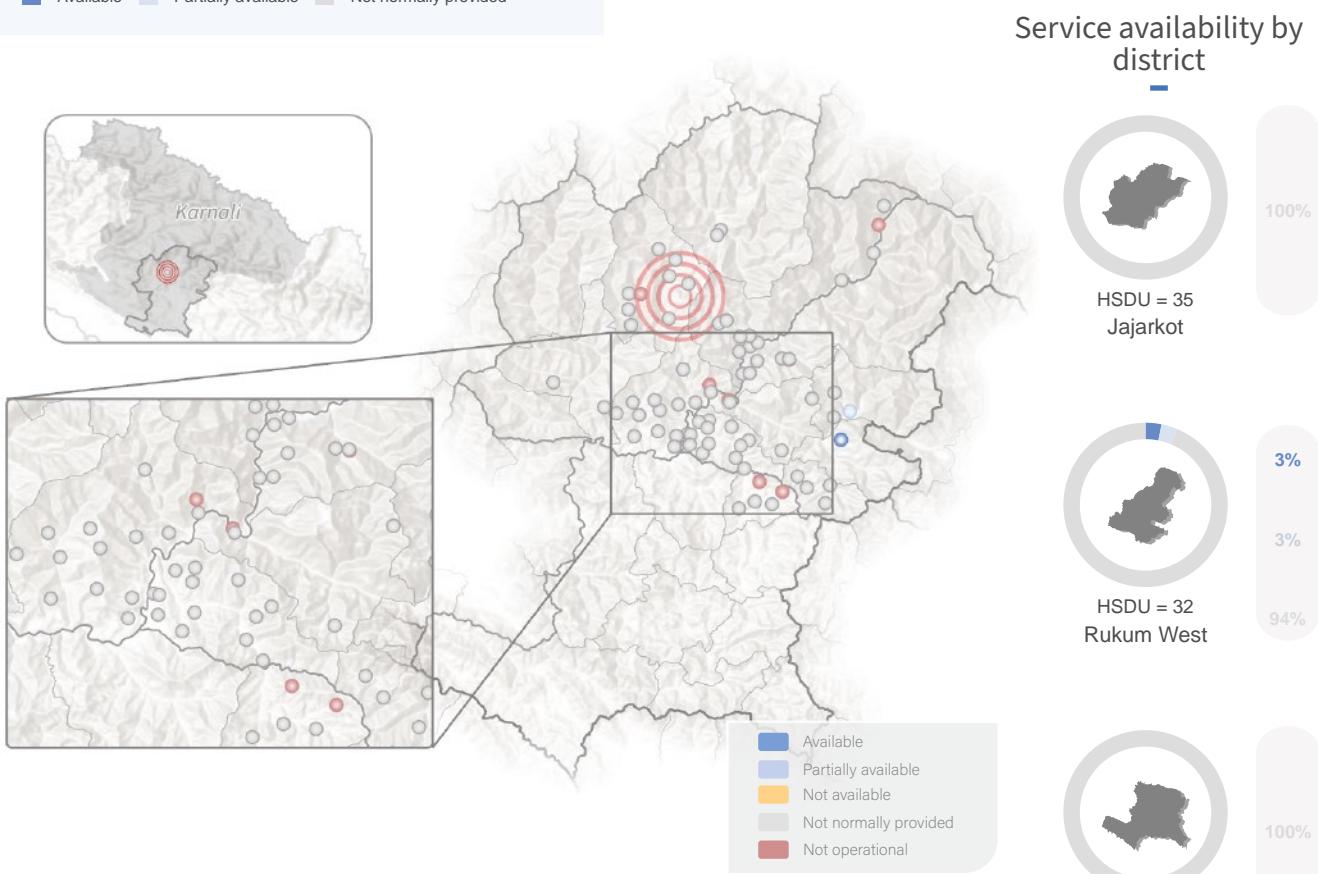
Service availability



Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



³¹ Blood bank services.



Jajarkot



Rukum West

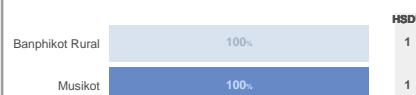


Salyan

Service availability by municipality*

No reporting HSDU

No reporting HSDU



Main barriers impeding service delivery by municipality and HSDU



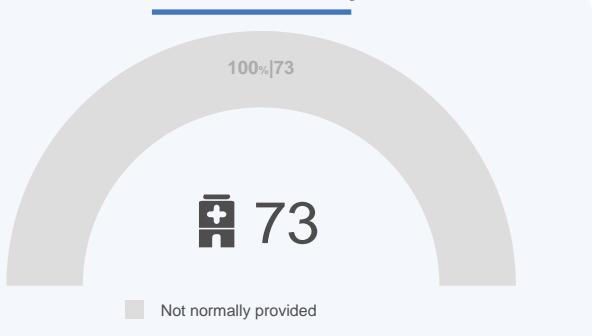
Banphikot HP

- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

HEMODIALYSIS UNIT

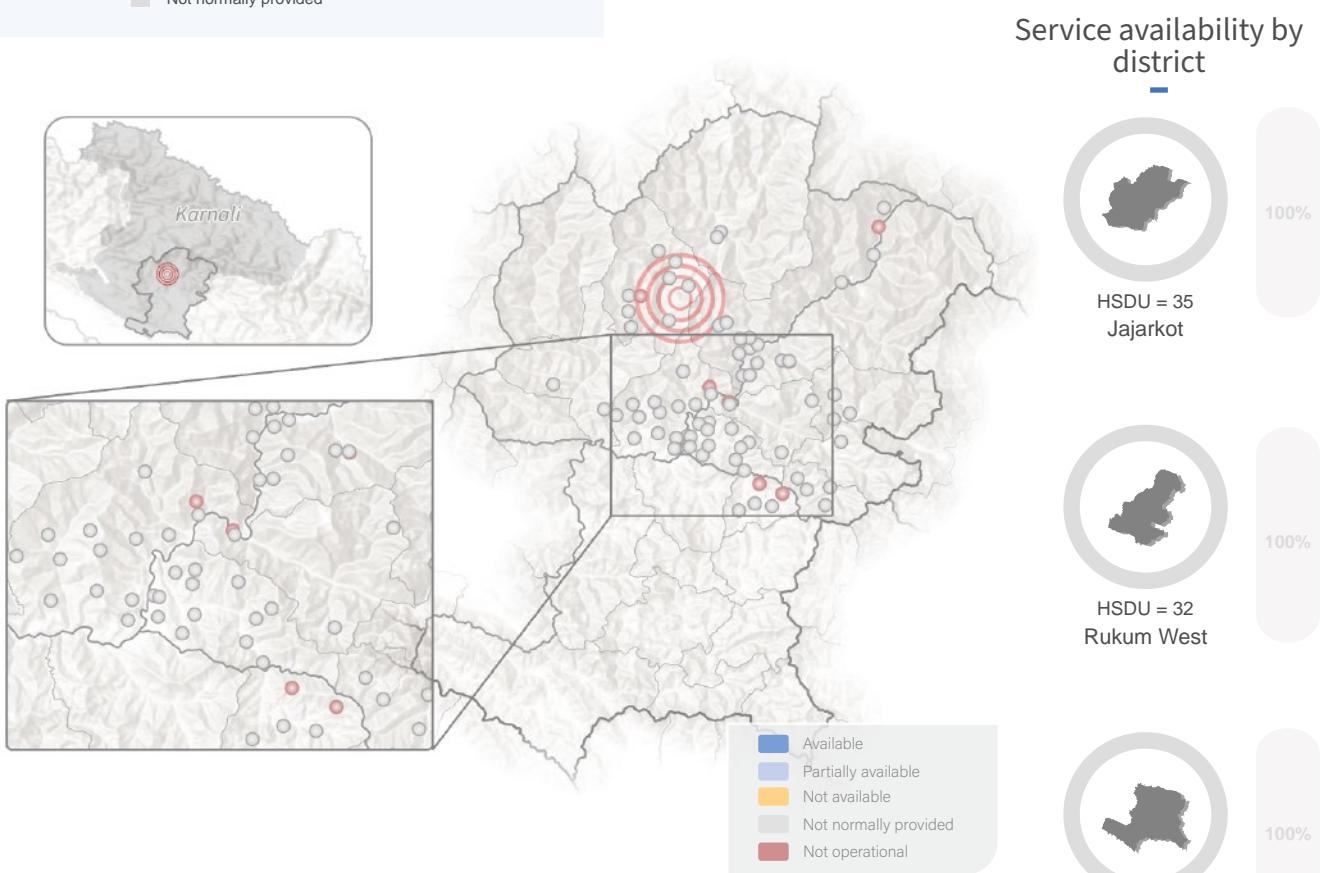
Service availability ³²



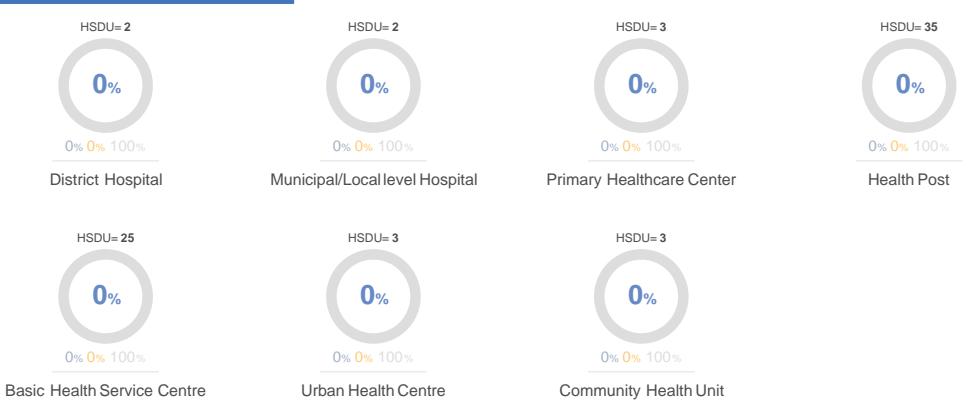
Main barriers impeding service delivery

No barriers reported

Service availability by district



Service availability by HSDU type

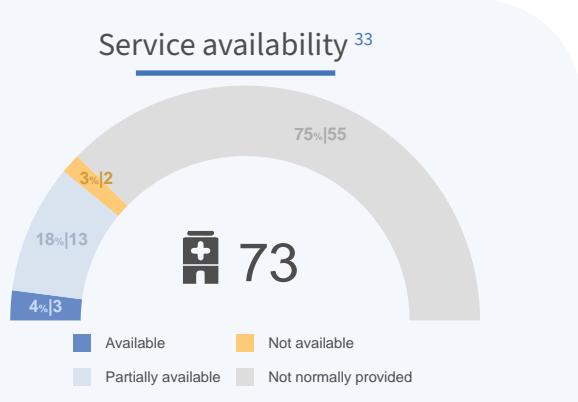


³² Hemodialysis unit.

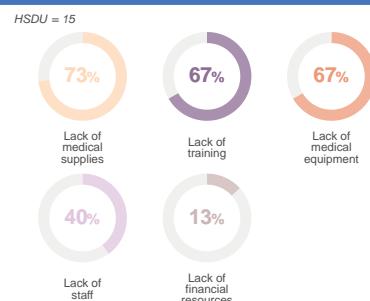


BASIC X-RAY SERVICE

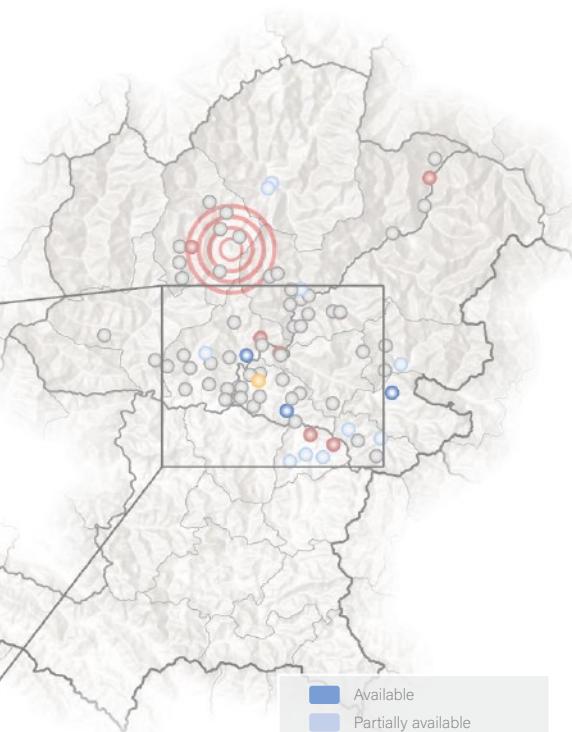
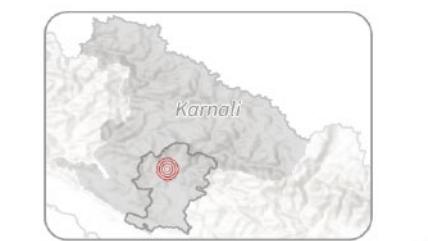
Service availability ³³



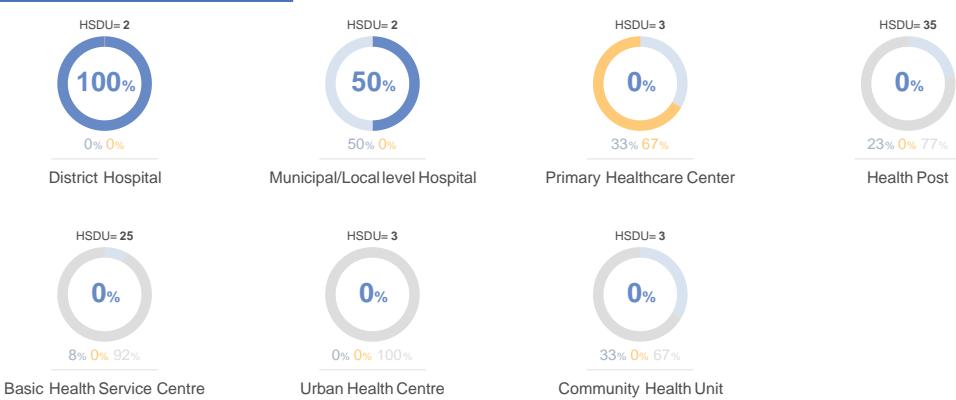
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



⁴⁸ X-ray service (basic radiological unit) and ultrasound.



Jajarkot

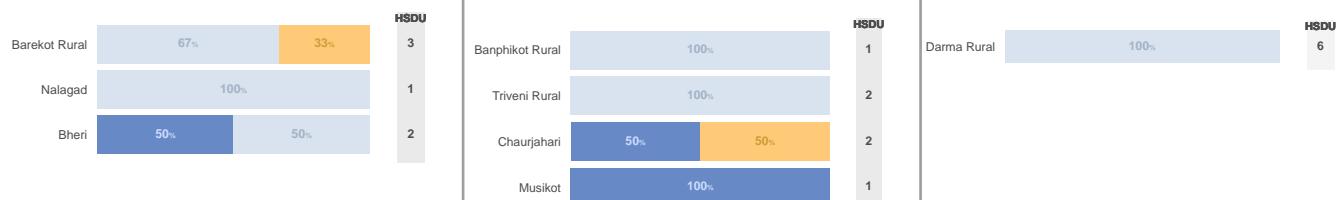


Rukum West

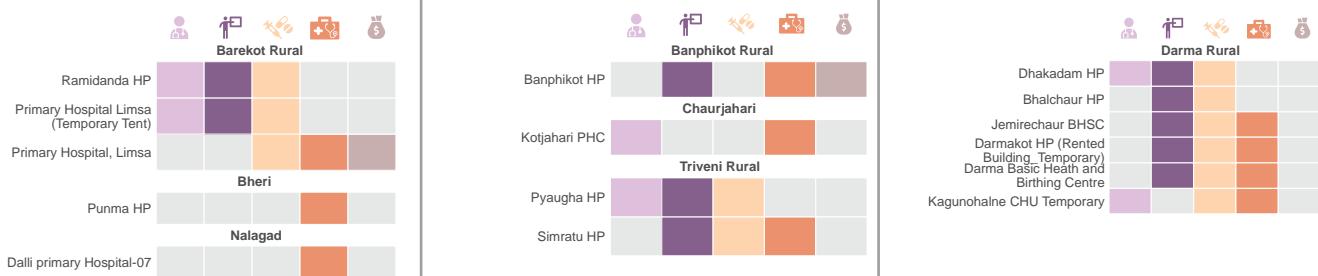


Salyan

Service availability by municipality*



Main barriers impeding service delivery by municipality and HSDU

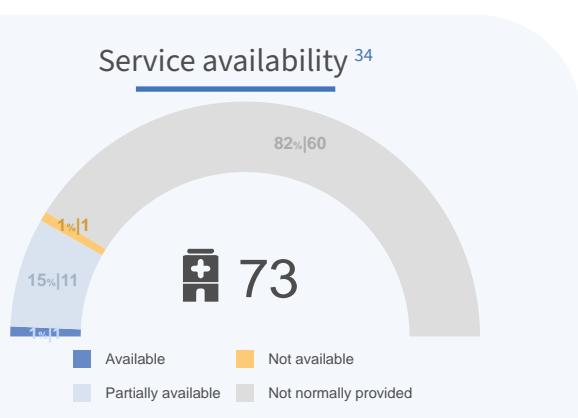


- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

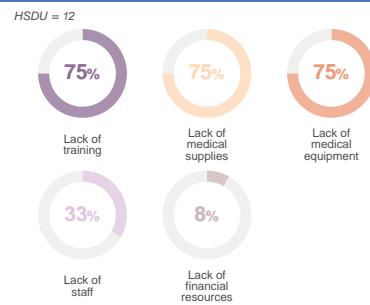
* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

RADIOLOGY UNIT

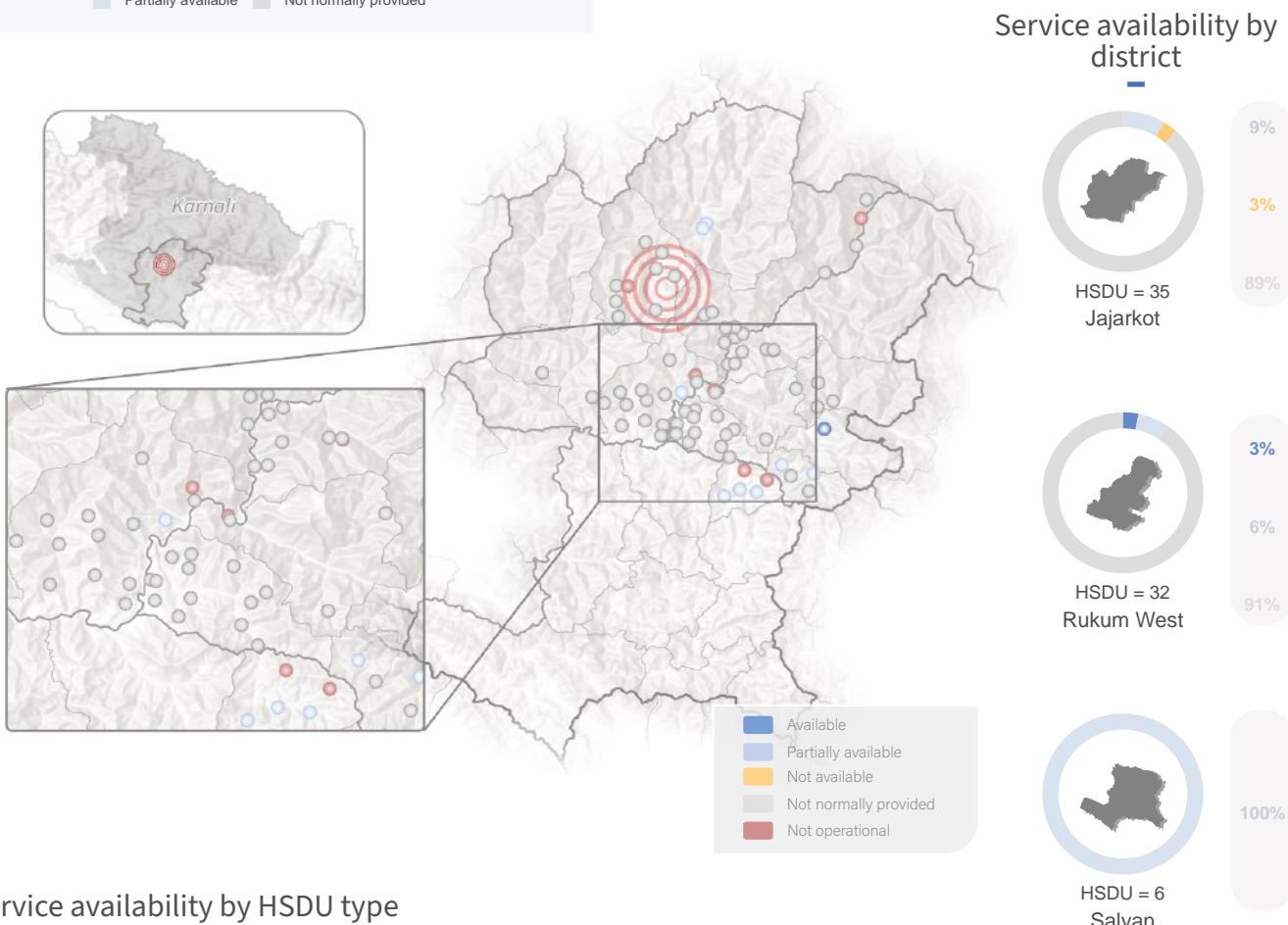
Service availability³⁴



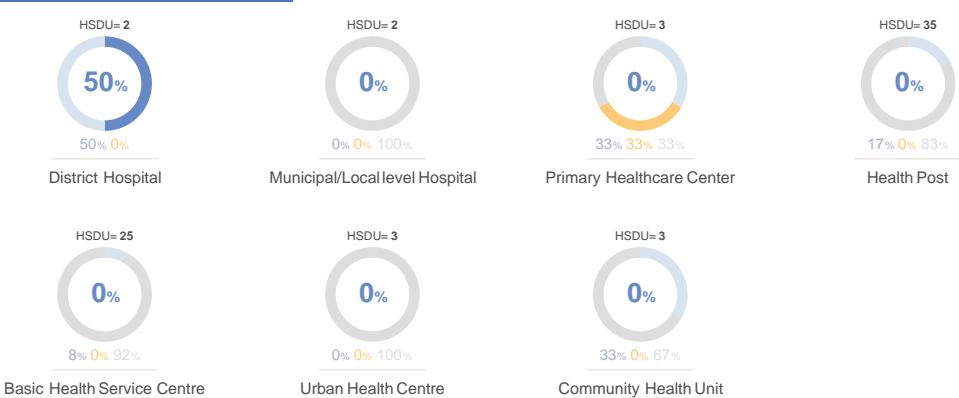
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



³⁴ Radiology unit with X-ray with stratigraphy, intraoperation X-ray intensifier, ultrasound, MRI and/or CT scan.



Jajarkot

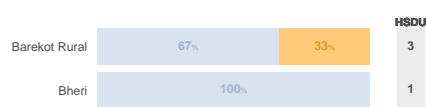


Rukum West



Salyan

Service availability by municipality*



HSDU
3

1

2

1



HSDU

2

1

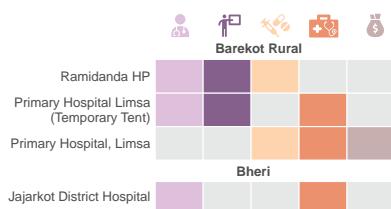
1



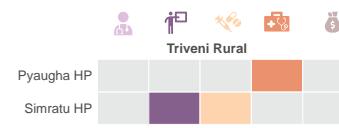
HSDU

6

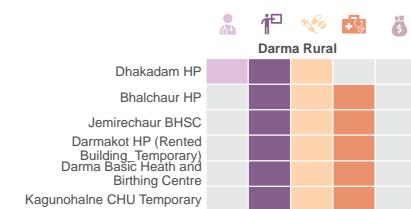
Main barriers impeding service delivery by municipality and HSDU



Barekot Rural



Triveni Rural



Darma Rural

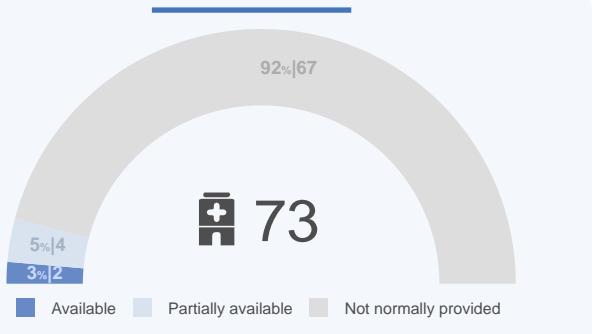
- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.

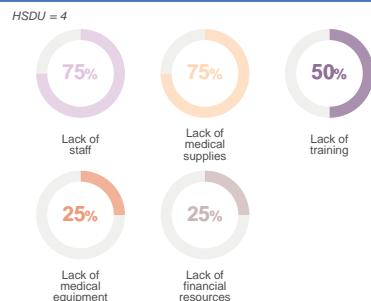


MEDICAL EVACUATION PROCEDURES

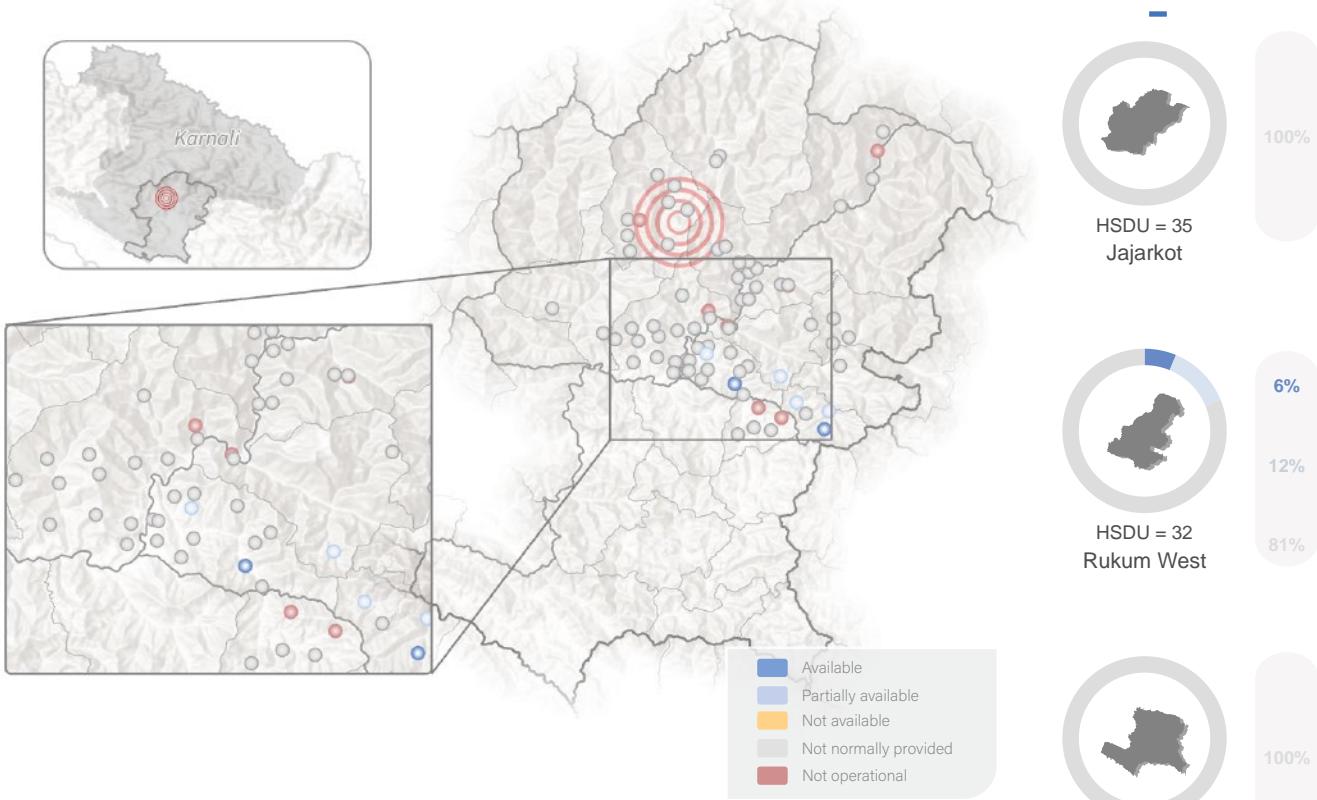
Service availability



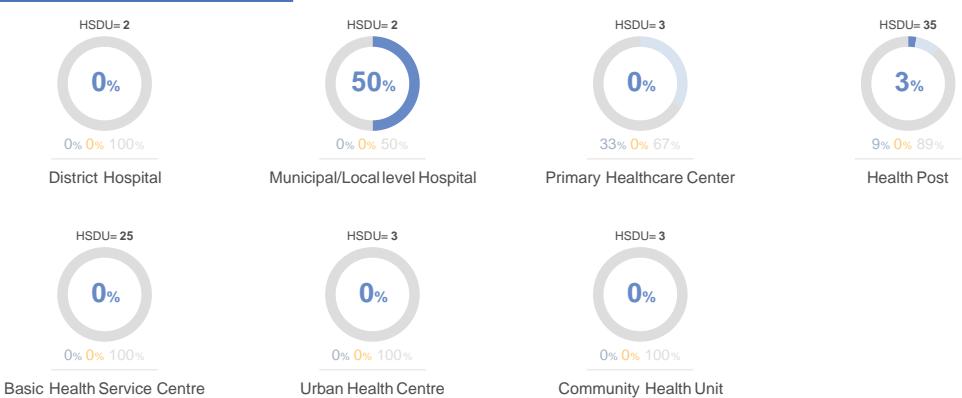
Main barriers impeding service delivery



Service availability by district



Service availability by HSDU type



³⁵ Medical evacuation procedures (medevac) including means of transport and referral network for patients requiring highly specialized care.



Jajarkot



Rukum West

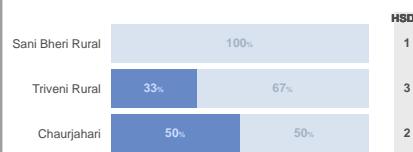


Salyan

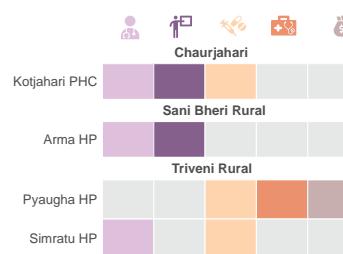
Service availability by municipality*

No reporting HSDU

No reporting HSDU



Main barriers impeding service delivery by municipality and HSDU



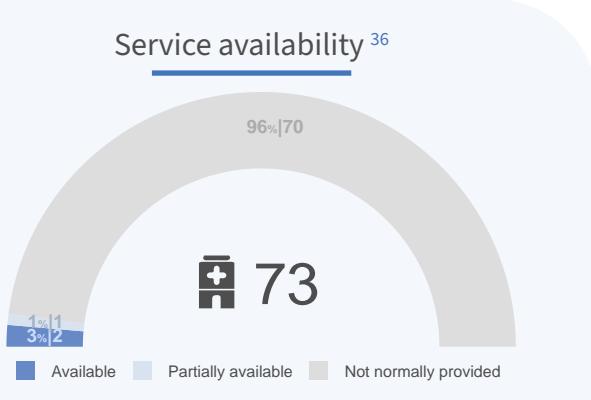
- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.



EARLY DISCHARGE IN MASS CASUALTY SCENARIOS

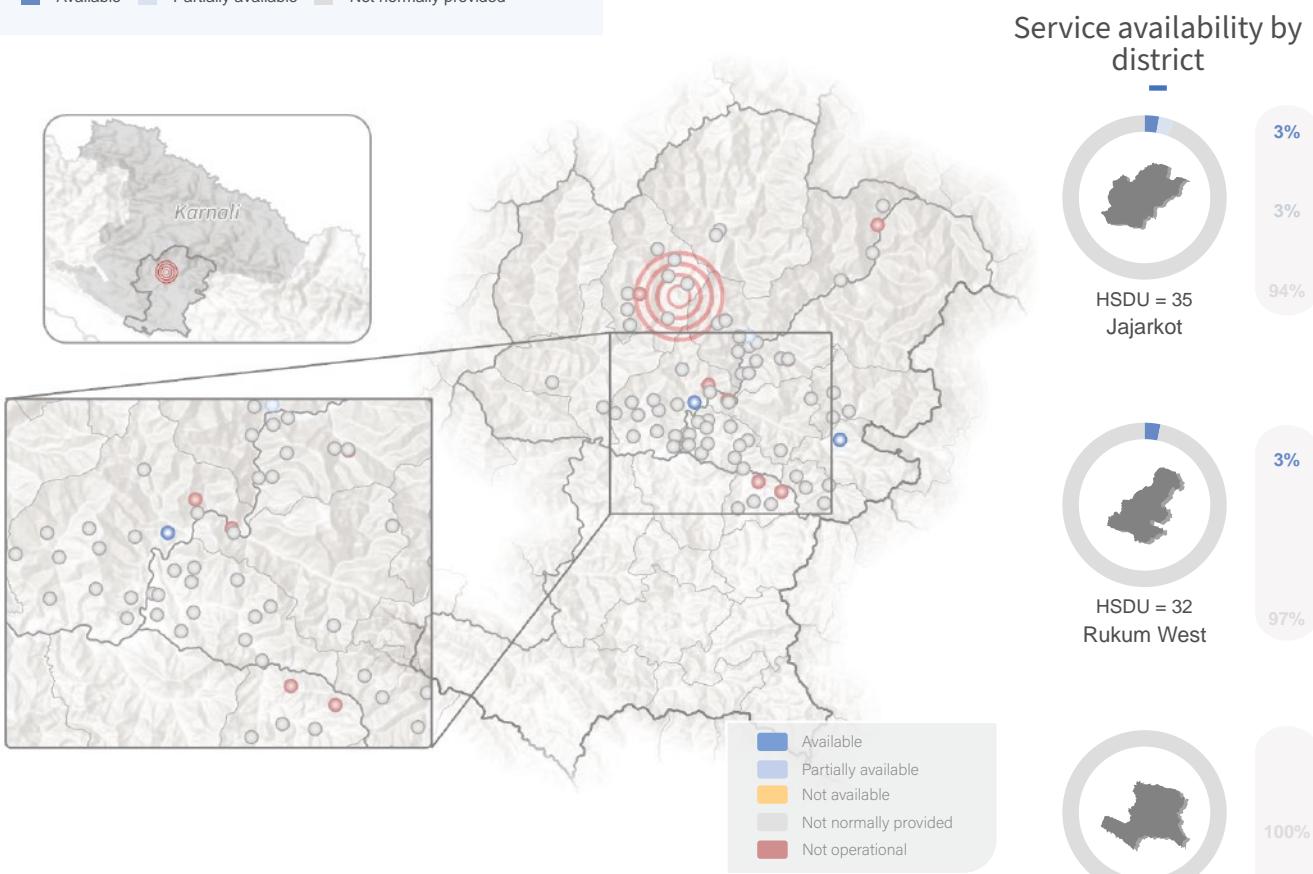
Service availability³⁶



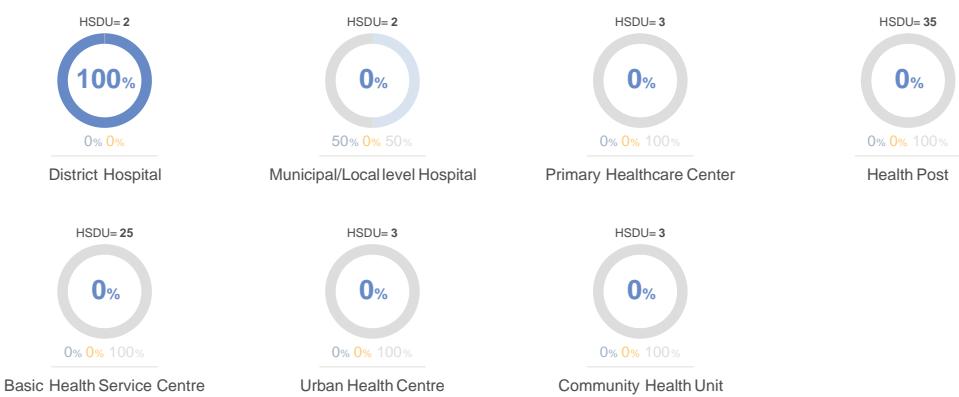
Main barriers impeding service delivery



Service availability by district



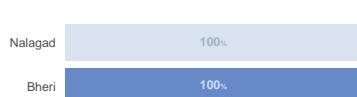
Service availability by HSDU type



³⁶ Procedures in place for early discharge of post-surgery patients through referral to secondary hospitals, in mass casualty scenario.



Jajarkot



Rukum West

Musikot

100%

HSDU

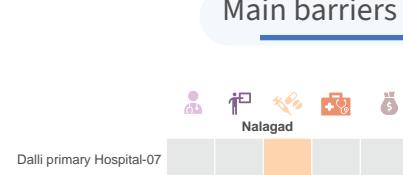
1

No reporting HSDU



Salyan

Service availability by municipality*



No barriers reported

- Lack of staff
- Lack of training
- Lack of medical supplies
- Lack of medical equipment
- Lack of financial resources

* HSDUs that did not report any data or that do not normally provide the service are excluded from the analysis.



HeRAMS

