COUNTRY ACCOUNTABILITY FRAMEWORK

PROGRESS SUMMARY

Breakdown of catalytic funding by priority area (US$ and % of budget)

<table>
<thead>
<tr>
<th>CRVS</th>
<th>MDSR</th>
<th>Monitoring Results</th>
<th>eHealth Innovation</th>
<th>Resource Tracking</th>
<th>Reviews</th>
<th>Advocacy</th>
<th>Total distributed</th>
</tr>
</thead>
<tbody>
<tr>
<td>49,000 (20%)</td>
<td>40,000 (16%)</td>
<td>83,000 (33%)</td>
<td>38,000 (15%)</td>
<td>12,500 (5%)</td>
<td>18,500 (7%)</td>
<td>9,000 (4%)</td>
<td>250,000</td>
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Progress

Civil registration, vital statistics (CRVS) assessment completed, plan developed
- A CRVS assessment was completed, and is serving as the basis for the development of a strategic plan.
- The Ministry of Health and Population (MoHP) will implement a cause-of-death surveillance system and an electronic cause-of-death integrated reporting system (eCODIRS).
- Standard certificates of birth and death have been developed for implementation this year.
- The Ministry of Federal Affairs and Local Development and the MoHP will strengthen CRVS.
- A central level steering and technical working group was formed and meets regularly to discuss CRVS issues.
- District and local level committees were formed and will be activated in this year.
- The MoHP allocated NPR 9 million to mobilize health volunteers, health workers and health facilities for community recording/reporting of births and deaths.

Maternal death surveillance and response (MDSR) system in place
- The Maternal Perinatal and Child Death strategy is being implemented in 21 hospitals; this will expand to 42 hospitals with the MDSR approach incorporated.
- Safe motherhood policy revision incorporates 24-hour maternal death notification.
- MDSR guidelines and operational plan were developed, incorporating the perinatal component at facility level.
- The development of a quality improvement toolkit is in process.
- The MoHP is developing verbal autopsy questionnaires for community maternal deaths based on WHO recommended questionnaires.

Available core 11 indicators monitored
- The current M&E framework of the National Health Sector Programme II (NHSP II) 2010 - 2015 includes all core indicators, with the exception of ARV prophylaxis among HIV-positive pregnant women. However, that indicator is monitored and regularly reported in global AIDS progress reports.
- A monitoring and evaluation strategy is under development, incorporating CoIA recommendations.
- A national steering committee, led by MoHP, has been established to guide the country accountability roadmap.
- The IHP+ country grant was used to support the MoHP in strengthening monitoring and review mechanisms.
- Health Management Information System (HMIS) strengthening is in process to provide disaggregated data as outlined in the M&E framework of NHSP II. A revised HMIS will be migrated into the DHIS-2 platform.

IHP+ compact or equivalent partnership agreement
- A joint financing arrangement was signed by GAVI, USAID, World Bank, AusAID, DFID, KfW, UNICEF, WHO and UNFPA in 2010.

National health sector review
- A Joint annual health review (JAR) was conducted in January 2013, with participation of donors, civil society, NGOs, academic institutions, media, and service organizations.
- New health review guidelines are under development to ensure the participation of major stakeholders.
### Continued Efforts Required

| National eHealth strategy | ✓ The eHealth strategy development process is ongoing; four persons were oriented in a workshop in Bangkok.  
✓ An eHealth steering committee was formed under the leadership of the Chief Specialist of Public Health Administration Monitoring and Evaluation Division of the MoHP.  
✓ An eHealth core group was formed under the leadership of the Division Chief Public Health Administration and Monitoring and Evaluation Division.  
✓ Institutionalization of the eHealth unit is in process and the development of a strategy has been initiated.  
✓ The development of a Hospital Information System prototype is underway, using Open Medical Records System. |
| Country reporting on health expenditure by financing source | ✓ The MoHP conducted a fourth round of National Health Accounts this fiscal year, with technical support from WHO and GIZ. Private sector and NGOs participated in data collection, analysis and preparing estimates and reports. |
| Political leaders engaged in RMNCH | No parliament was present in 2013. Regional, district, national annual reviews discuss achievements and share success stories on RMNCH. |

### Future needs

1. Nepal is developing a proposal for piloting cause of death surveillance system.
2. Nepal is preparing to undertake a Service Availability and Readiness Assessment (SARA) and a local research institute has applied to assist the MoHP in its completion.

### Trends in Maternal Mortality Ratio in Nepal, 1990-2013

![Trends in Maternal Mortality Ratio](image1)


![Trends in Under-5 Mortality Rates](image2)