

# ANNUAL PROJECT REPORT



## RHEA Project Submission Report

**Submitted By:**

**Aasaman Nepal, RHEA Project**

**Submitted To:**

**Ishnath Municipality- Rautahat**



## Annual Submission Report

S.N	Outcomes	Achievements
1.	<p><b>Outcome 1:</b> Strengthened laws, policies, financing, and accountability for SRHR for women and girls, particularly AY, people living with disability and the most vulnerable, at the federal level and in selected provinces/municipalities in the development/humanitarian continuum</p>	<ul style="list-style-type: none"> <li>-Sensitized 26 Executive members on the need to prioritize SRHR/AFHS in their annual planning and budgetary frameworks</li> <li>-Oriented on implementing the five more comprehensive sector draft SRH parts of the yearly planning and budgetary frameworks by the end of the 2 quarter.</li> <li>-Prioritization of budgetary frameworks integrating SRH has been developed and executed .Waiting for publication Red book</li> <li>- health coordinator &amp; sub Health coordinator are oriented on (LMT) .Leadership management training has been successfully completed</li> <li>-A Palika-level MPDSR committee has been formed.</li> <li>- 1(HF) HFOMC members have been functionalized(jathahara HP)</li> <li>-Total 15 members have been oriented on the HFOMC guidelines on 1 respective health facilities.</li> <li>-HFOMC members have been regularly visiting health facilities and addressing challenges.</li> <li>Successfully distributed 9 HF &amp; data displays, each sized 10" x 12", using eco-friendly materials.</li> </ul>
2	<p><b>Outcome 2:</b> Strengthened systems and capacity for delivery and institutionalization of resilient, high-quality SRH information and services for women and girls, particularly AY, people living with disability and the most vulnerable, at the federal level and in selected provinces/municipalities in the development/humanitarian continuum</p>	<p>Total ishnath-40</p> <ul style="list-style-type: none"> <li>- Adolescents are aware of SRHR, and their confidence levels would be high after completing the session</li> <li>- Library showcase distributed in 9 health facilities and 1 Palika Patients and caretakers are receiving information from the library by scanning the showcased QR code.</li> <li>-Action plan has been prepared as per the MSS scored and Some actions from the action plan were immediately implemented after its preparation.</li> </ul>
3	<p><b>Outcome 3:</b> Strengthened systems and capacity to increase awareness and empowerment of women and girls, particularly AY, people living with disability and the most vulnerable, to realize their SRHR at the federal level and in selected provinces/municipalities in the development/humanitarian continuum</p>	<ul style="list-style-type: none"> <li>-The Hindu and Muslim adolescent's understanding of SRHR, harmful social norms and her confidence level were much stronger after attending the Rupantran session. -The adolescents made a promise to stop child marriage in their community and also committed to getting married only after the age of 20.</li> <li>- Parents committed to ensuring their daughters and sons get married only after the age of 20. Simultaneously, they learned</li> </ul>

		<p>about the intergenerational relationship between children and parents.</p> <ul style="list-style-type: none"> <li>- The province-level RH action plan has been prepared, and regular follow-up is being conducted with RH focal persons in the districts</li> <li>- Out of 264 participants (i.e health and education unit), elected representatives, school authorities) (137-Rautaht and 127-Sarlahi) participants were CSE oriented.</li> <li>- The participants have been sensitized on CSE and are cascading the knowledge through various public platforms.</li> </ul> <p>-One day street drama was successfully conducted in 8 RHEA paliaka. Out Approx More than 500 audiences watched the Drama in Auriya Ishnath Palika.</p> <ul style="list-style-type: none"> <li>- Enhanced understanding among community members about reproductive health, Knowledge about gender-based violence (GBV) and its detrimental effects on individuals and families.</li> <li>-Raised awareness regarding anti child marriage and gender equality (between son and daughter)</li> <li>-One day Quiz competition program has been successfully conducted in 8 Palika of Sarlahi and Rautahat District.(Shree Janta Ma Vi pdumariya Paroha and Shree janta Ma vi Auriya)</li> </ul>
4	<b>Evidence based programming</b>	<ul style="list-style-type: none"> <li>- Improved Data Management Skills of Health facilities staff after training and The data of health facility is consistent regularly.</li> <li>- Proper reporting on HMIS system at Health facility level</li> </ul>
		-
	Initiate the process of developing a manual for schools on extracurricular activities like art competition, dramas, and debates on CSE topics	Palika level CSE extra curriculum developed and toady to hand over to Palika soon.
	Orientation to government officials (health and education unit), elected representatives ,school authorities and school nurse on the need for and importance of CSE - including GBV component (9 local level)	Oriented 35 representative for on the need for and importance of CSE - including GBV component
	Establish and strengthen the functioning and work of the CSE technical working groups / at province and local level	
	Support provincial education training center to roll out competency-based teachers training on CSE (20 schools 2 teacher each) i= 40 participants in 2 batch	<p>rolled out competency-based CSE teachers training has been completed at school level</p> <ol style="list-style-type: none"> <li>1. Shree B P Koirala Aadarsh MA VI Jokha Ghiura</li> <li>2. Shree MA VI Mathiya</li> </ol>

		3. MA VI Jatahara
Outreach activities - Mobilization of CSE Peer educators (CSE Saathis)/ Rupantaran facilitators and radio programs to raise awareness and create demand for CSE/SRHR		Conducted 30 session for 20 adolescent gils in Auriya and Dumariya Paroha (Priyanka Kumari and Rinku Kumari).
Radio mobilization (1 radion per 3 district)		-The Radio Jingle reproductive health and adolescent health awareness program was a significant successes, effectively raising awareness and empowering young people to take charge of their health. The collaboration between Radio Jingle, local health authorities, and youth organizations proved to be a valuable partnership in promoting health education. -\$ radio jingles per day have been broadcasting in three corresponding districts i.e. Rautahat, Sarlahi & Janakpur.
Training on basic health logistic, forecasting, quantification and preparing distribution plan including FP/RH commodities and management of overstock (Redistribution) and expired supplies and medicine. District level event, 35 participants in each event for 3 districts		Total 8 government staff) Health facilities have been capacitated on eLMIS & committed to explore their knowledge on eLMIS to enhance the quality of eLMIS report.
Joint monitoring visit for spot check LMIS, RDQA and onsite coaching for store		2 health facilities ( P. Dumariya Health Post and Laxminiya Basic health Post)
RH review Meeting		2 participant ( PHO and PHI )
VIA cervical cancer screening		26 FCHVs mobilized and 6 month data collected

**Jatahara HP of Ishnath Municipality**

Activity	Time Duration	Responsibilities
Regularize HFOMC Meeting	6 <sup>th</sup> day of each month	HF chief/ Chirperson
Manage the nursing staff at health facility	Within Bhadra 5	HF chief/ Chirperson/Health Section
Manage the drinking water	As soon as	HF Chief and Chairperson
Manage the service corners	As soon as	HF Chief and Chairperson
Conduct PHC ORC in Mansari	15/16 and 17 <sup>th</sup> of each month	HF chief and Health Section
Manage the essential medicine	Regular	HF chief and Health section
Instal water tank	Bhadra Last	HF chief and chirperson

Roll Out MSS Action Plan at Laxminiya BHSC-05 Ishnath Municipality					
Sections	Major Problem Identified	Solution to the problem	Time Limit	Estimated Cost	Responsible Persons
Governance and Management	Monthly Meeting of the committee	Every Month	20 <sup>th</sup> day of each month	10,000	HF Chief/ HFOMC Chairperson
	Monthly Level of Meeting of Employee	Every Month	16 <sup>th</sup> day of each month		Head of Health Department.
	Flex Print of HFOMC, FCHV and HF Staff Catalog with photos	To hang	Bhadra 2081-Last		Head of Health Department.
	Citizen Charter	Painting in the outer wall	Bhadra 2081-Last		Aasaman Nepal/ RHEA Program
	Free Medicine Information Board	To hang flex	Bhadra 2081-Last		Head of Health Department.
Clinical Service Management	There is no Autoclave	To provide	Ashoj 2081-last		Head of Health Department.
	ENT Set	To provide	Ashoj 2081-last	5000	Head of Health Department. Ward- Chairperson
	IUCD and Implant Set	To Provide	Bhadra 2081-last		Head of Health Department. Ward- Chairperson
	Dropper Machine	To Provide	Ashoj 2081-last		Head of Health Department. Ward- Chairperson/ To coordinate.
Support Service Management	There is No Stretcher	To Provide	Ashoj 2081-last		Ward Office/ Ward Chairperson

# नगरकार्यपालिकाको कार्यालय

औरैया, रौतहट

मधेश प्रदेश, नेपाल

ईशानाथ नगरपालिका स्वास्थ्य संस्था स्तरमा गरिएको सामाजिक परीक्षण (Social Audit) को नतिजा सार्वजनिकीकरण तथा योजना तर्जुमा कार्यक्रममा उठेका प्रमुख सवालहरुमाथि तयार पारिएको

## विस्तृत कार्ययोजना

क्र. सं.	सुधारका क्षेत्र मुख्य सवाल	कृयाकलाप	सम्पन्न गर्ने समयवधि	जिम्मेवार निकाय या व्यक्ति	कार्य सम्पादनको उपलब्धि सूचक	अनुगमन गर्ने निकाय र व्यक्ति	स्रोत/सह योग उपलब्ध गराउने निकाय	स्वास्थ्य च
	४ पटक गर्भवति जाँच गर्नेको संख्या कमी	गर्भवति जाँच गर्नेको संख्या बढाउने	नियमित	स्वास्थ्य चौकी प्रमुख	संख्या बढेको सूचक	स्वास्थ्य शाखा		३ वटामा
	आमा समूहको बैठकमा तिर्पालको व्यवस्था नहुनु	आमा समूहको बैठकमा तिर्पालको व्यवस्था गर्ने	२०८१ आश्वीन सम्म	स्वास्थ्य शाखा		स्वास्थ्य शाखा	पालिका	जटहारा
	नर्सिङ्ग स्टाफको कमी	नर्सिङ्ग स्टाफको व्यवस्था गर्ने	जति सक्थो चाडो	प्र प्र अधिकृत	कर्मचारीबाट सेवा सुचारु	व्यवस्थापन समिति	पालिका	दुमरिया र जटहारा
	हात धुन साबुन पानीको व्यवस्था नहुनु ।	हात धुन साबुन पानीको व्यवस्था गर्ने	जति सक्थो छिटो	स्वास्थ्य चौकी प्रमुख	हात धुन शुरु	स्वास्थ्य शाखा व्य समिति		औरैया र ज
	सेवाग्राहीलाइ पिउनेको व्यवस्था नहुनु	सेवाग्राहीलाइ पिउने पानीको व्यवस्थापन गर्ने	जति सक्थो छिटो	स्वास्थ्य चौकी प्रमुख	हात धुन शुरु	स्वास्थ्य शाखा व्यवस्थापन समिति		औरैया र ज
	सेवा कर्नरमा डष्चीनको व्यवस्था नहुन	सेवा कर्नरमा ३ रंगको डष्चीनको व्यवस्था गर्ने	जति सक्थो छिटो	स्वास्थ्य चौकी प्रमुख	हात धुन शुरु	स्वास्थ्य शाखा व्य समिति	पालिका स्वास्थ्य शाखा	औरैया
	प्यासेन्टापिट नभएका	प्यासेन्टापिट बनाउनु पर्ने	२ महिना भित्र	स्वा चौकी प्रमुख व्य समिति	प्यासेन्टापीट बनेको	स्वास्थ्य शाखा व्य समिति	पालिका स्वास्थ्य शाखा	औरैया
	सूचनापाटी नहुनु	सूचनापाटीको व्यवस्था गर्ने	नियमित	स्वास्थ्य चौकी प्रमुख र समिति	उपलब्ध	स्वास्थ्य शाखा	पालिका स्वास्थ्य शाखा	३ वटामा
	प्रसुति प्रोत्साहन रकम लिने आमाहरुको नामावली सूचना पाटीमा टाँस नहुनु	प्रसुति प्रोत्साहन रकम लिने आमाहरुको नामावली सूचना पाटीमा टाँस गर्ने	३ महिना भित्र	स्वास्थ्य चौकी प्रमुख	टाँसेको देखिने	स्वास्थ्य शाखा व्य समिति	स्वास्थ्य चौकी	दुमरिया औरैया

सुत्केरी आमाहरुले प्रोत्साहान रकम समयमा नपाएको	सुत्केरी आमाहरुलाई प्रोत्साहान रकम समयमा उपलब्ध गराउने	भाद्र महिना देखि	स्वा चोकी प्रमुख व्य समिति	आमाहरुको हातमा पैसा	स्वास्थ्य शाखा	पालिका स्वास्थ्य शाखा	औरैया
स्वास्थ्यकर्मीबाट घरभेट गरी सुत्केरी जाँच नहुनु	स्वास्थ्यकर्मीबाट घरभेट गरी सुत्केरी जाँच गर्ने	नियमित	स्वास्थ्य चौकी प्रमुख	उपल्ब्ध	स्वास्थ्य शाखा	पालिका स्वास्थ्य शाखा	डुमरिया
अटोक्लेप नभएको	अटोक्लेपको व्यवस्था गर्ने	२ महिना भित्र	स्वास्थ्य शाखा	संस्थामा व्यवस्था	व्यवस्थापन समिति	पालिका स्वास्थ्य शाखा	जटहारा
गर्भवति जांचगर्न बेडको अभाव	गर्भवति जांचगर्न बेडको व्यवस्था गर्ने	जति सक्थो छिटो	स्वास्थ्य चौकी	बेडको व्यवस्था	स्वास्थ्य शाखा	पालिका स्वास्थ्य शाखा	जटहारा
नागरिक बडापत्र नहुनु	नागरिक बडापत्रको व्यवस्था गर्ने	३ महिना भित्र	स्वास्थ्य शाखा		व्यवस्थापन समिति	पालिका स्वास्थ्य शाखा	जटहारा
ह्वीलचियरको व्यवस्था नहुनु ।	ह्वीलचियरको व्यवस्था गर्ने ।	२ महिना भित्र	स्वास्थ्य शाखा	संस्थामा हुने	समिति	पालिका स्वास्थ्य शाखा	डुमरिया
औषधिहरु नियमित रुपमा उपलब्ध नभएको	औषधिहरु नियमित रुपमा गराउने	नियमित	स्वास्थ्य शाखा	उपल्ब्ध	नगरपालिका	पालिका स्वास्थ्य शाखा	३ वटामा
कण्डम र जीवनजलको अभाव	कण्डम र जीवनजलको व्यवस्था नियमित गर्ने	नियमित	स्वास्थ्य चौकी	उपल्ब्ध	स्वास्थ्य शाखा	पालिका स्वास्थ्य शाखा	औरैया
गुनासो पेटीकाको व्यवस्था नभएका	गुनासो पेटीकाको व्यवस्था गर्ने	२०८१ कार्तिक भित्रमा	स्वा संस्था प्रमुख व्य समिति अध्यक्ष	संस्थामा गुनासो पेटीका	स्वास्थ्य शाखा	पालिका स्वास्थ्य शाखा	जटहारा
व्यवस्थापन समितिको बैठक नियमित नभएको	व्यवस्थापन समितिको बैठक नियमित गर्ने	२०८१ आश्वीनबाट	स्वा संस्था प्रमुख व्य समिति अध्यक्ष	बैठक	स्वास्थ्य शाखा	वडा र पालिका	जटहारा
स्वास्थ्य संस्थाको लागि आर्थिक श्रोतको व्यवस्था नहुनु	स्वास्थ्य संस्थाको लागि आर्थिक श्रोतको व्यवस्था गर्ने	नियमित	वडा कार्यालय	श्रोत उपल्ब्ध	प्रमुख प्र अधिकृत	वडा र पालिका	
आर्थिक लेखा परीक्षण नभएको	आर्थिक लेखा परीक्षण गराउने	२०८१ कार्तिक भित्रमा	स्वास्थ्य संस्था व्यवस्थापन समिति	लेखा परीक्षण प्रतिवेदन	प्रमुख प्र अधिकृत	नगरपालिका	डुमरिया र ३

नितेश कुमार

रविन्द्र कुमार भा

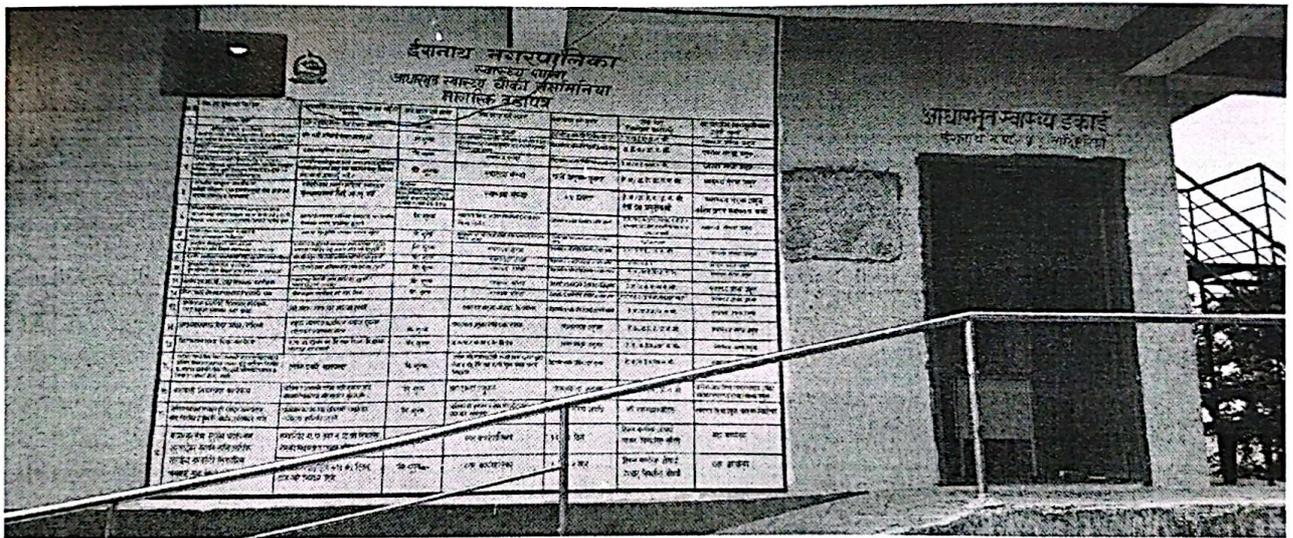
कौशलया देवी  
नगर प्रमुख

स्वास्थ्य शाखा प्रमुख  
ईशानाथ नगरपालिका, रौटहत

नि. प्रमुख प्रशासकीय अधिकृत  
ईशानाथ नगरपालिका, रौटहत

ईशानाथ नगरपालिका, रौटहत

Photos:



Senior citizenship closing remarks have been given during the HFOMC meeting at Laxminiya Basic HP

Photos:



RH review meeting VIA cervical

Sadak Natak

RH review Meeting

Photo



Library Show case

Photos: FGD during Social Audit

