

IMPLEMENTATION AND SCALING UP **THE HIGH IMPACT PRACTICES** OF FAMILY PLANNING IN NEPAL

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SUPPORTED BY:



ORGANIZED BY:



Government of Nepal
Ministry of Health and Population
Department of Health Services
Family Welfare Division

S. N.	Priority Strategic Area	Key Interventions	Time frame	Responsible Agency/People	Resources Needed & Source	Risk Assumptions	Success Indicators	Monitoring Mechanism
1	Registration and renewal	<ul style="list-style-type: none"> •Orient about guideline •Reduce registration and renewal fee 	6 months	Federal, Provincial, Local level government	DOHS	Lack of uniformity in guideline	Updated data of private HFs	Relevant government

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2	Commodity linkage	<ul style="list-style-type: none"> •Linkage with CRS for urban setting with priority •Recording and reporting 	Continue in effective way	<p>CRS</p> <p>Relevant authority</p>	<p>-</p> <p>DHIS portal and HMIS tools</p>	<p>-</p> <p>Insufficiency of HMIS tools</p>	<p>Increased CPR</p> <p>Regular reporting</p>	Relevant authority

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3	Training	<ul style="list-style-type: none"> •Involvement of staffs in training •Should be able to take FP training by paying. 	1year	FWD, NHTC, PHTC, NGOs/INGOs			Increased number of trained human resources in private sector.	NHTC, PHTC, Relevant authority

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4	Regulation of pharmacy	Decentralization of authority to province and local level	within fiscal year	DDA, Relevant authority			Updated data of pharmacy	

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5	Develop business model for private sector (urban area)	Plan to provide services with nominal cost which should be based on the guideline.	-	FWD, PHD, MUNICIPALITY, RMP	Gov/ Partners		Uniform service cost	FWD, PHD, MUNICIPALITY, RMP