

Unofficial Translation

**Operational Guidelines on Incentives for
Safe Delivery Services
2062**

**His Majesty's Government/ Nepal
Ministry of Health and Population
Department of Health Services
Family Health Division
Teku, Kathmandu.
2005**

**His Majesty's Government/ Nepal
Ministry of Health**

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Foreword

Although various programmes are being implemented to reduce the maternal mortality ratio, in line with the Millennium Development Goal, the coverage of skilled attendance at birth still remains very low in the country. Most rural poor women are still forced to follow unsafe delivery practices at their homes because even the minimum costs of travelling to a health facility are beyond their reach. With the aim of improving this situation and increasing the coverage of safer delivery services, His Majesty's Government/Nepal has promulgated this "Operational Guidelines on Incentives for Safe Delivery Services 2062" which outlines the provision of financial incentives to pregnant women and health workers for births assisted by a skilled birth attendant.

I believe that these guidelines will simplify the procedures for providing these financial incentives, and will thus make safe delivery services affordable and accessible to more women, and will also help to improve the quality services. I also expect the active participation of all health institutions and health workers to ensure the successful implementation of the Safe Delivery Services Programme.

Sd. ...

Mr. Lava Kumar Devkota

Secretary

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A few words

The high maternal and neonatal death rates in Nepal are a major health problem. A key reason underlying these tragic statistics is that about 90% of women deliver their babies at home in unsafe conditions. In the high Himalayan and middle hill rural areas, this proportion is even higher because of the inability of families to meet the costs of transport to a health facility and treatment.

Despite the various Maternal and Neonatal Health (MNH) care programmes being implemented by His Majesty's Government of Nepal (HMG/N), aimed at reducing maternal and neonatal mortalities, the utilisation rate of MNH services remains low. These "Operational Guidelines on Incentives for Safe Delivery Services 2062" have been prepared and promulgated to encourage pregnant women to use skilled birth attendants during delivery and to motivate skilled birth attendants to provide safe delivery services to women, either at home or in a health facility.

I hope these guidelines will help care providers and beneficiaries receive the planned financial benefits in an easy and systematic way, enhance the quality of care provided, and increase the utilisation of safe delivery services.

Successful implementation of these guidelines is essential for the increased utilisation of safe delivery services. I hope the active participation of the Department of Health Services, Regional Health Directorates, District Health Offices, Hospitals and all supporting organisations will promote the successful implementation of this programme.

I heartily thank all the staff of Ministry of Health and Population and the Department of Health Services who were involved in the preparation of these guidelines.

Sd...

Dr. Bishnu Prashad Pandit
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Preface

HMG/Nepal has made a provision for incentives to pregnant women and skilled birth attendants according to clauses 27 and 29 of the budget revised estimation ordinance of fiscal year 2061/062, in order to increase the utilisation of safe delivery services (institutional or home based) by pregnant women in Nepal, and thus to reduce maternal and neonatal mortalities. These "Operational Guidelines on Incentives for Safe Delivery Services 2062" have been prepared to aid the proper management of the incentives planned for safe delivery services. A working team was constituted to draft the guidelines, under the chairmanship of Dr. Bishnu Prashad Pandit, Chief of the Medical Services Division, Ministry of Health and Population. Members of the team included representatives from the Accounts Division, Legal Section, Nursing Section, Medical Division, Department of Health Services, and Family Health Division. The draft guidelines were reviewed and refined by different divisions of the Ministry of Health and Population and the Department of Health Services.

The main objective of these guidelines is to guide the process of providing financial incentives to beneficiaries and care providers and subsidies to health institutions for births assisted by a skilled attendant. The government's objective is to have skilled birth attendants providing safe delivery services for all women in all 75 districts of the country.

I hope these guidelines will help managers to implement the scheme in all government district health institutions and hospitals, including systematic distribution of the incentives, effective management of funds and monitoring and evaluation of safe delivery services.

The first section of these guidelines provides basic information about the incentives, the second section explains arrangements for the services and facilities, the third section explains budget management processes, and the fourth section explains how to supervise, monitor and evaluate the work.

Finally, I would like to thank all those who have been involved in the preparation of these guidelines.

Sd.

Peeyooush Kumar " Rajendra"
Director
Directorate of Family Health

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Operational Guidelines on Incentives for Safe Delivery Services 2062

In order to reduce the existing high maternal and neonatal mortality rates in the country, His Majesty's Government of Nepal (HMG/N) has promulgated a cost sharing scheme to increase the access of women to safe delivery services (in health facilities or at home) and to mobilise skilled birth attendants to provide home based delivery services. The scheme will provide incentives to pregnant women and skilled birth attendants (SBA) and subsidies to health institutions for births assisted by SBAs. These guidelines have been developed to facilitate the process of distributing the incentives to beneficiaries, SBAs and health institutions in an easy and systematic way.

Section I

Introduction

1. Name and enforcement

- i) The name of these guidelines is "Operational Guidelines on Incentives for Safe Delivery Services 2062".
- ii) These guidelines will come into force with immediate effect.

2. Definitions

In these guidelines, unless otherwise stated, the meanings of terms will be as mentioned below:

- a) The meaning of "Safe Delivery Services" should be understood as the services provided to the beneficiary women by a skilled birth attendant for a normal delivery at the health institution or at home, complicated delivery service and delivery through caesarian section(C/S).
- b) "Beneficiary Women" means those women who are entitled to access delivery services as mentioned above.
- c) "Skilled Birth Attendant" means those who provide safe delivery services. These include Doctors, Health Assistants, Nurses, Auxiliary Nurse Midwives and Maternal and Child Health Workers.
- d) "Health Facility" means the hospitals, Primary Health Care Centres (PHCC) and health posts owned by the government, where safe delivery services are provided.
- e) "Financial Incentives" means money provided by His Majesty's Government to the skilled birth attendants who provide safe delivery services.
- f) "Transport Allowance" means cash incentives provided to beneficiary women by His Majesty's Government to cover all or part of the transport and other expenses involved in going to a health facility.

Section II

Arrangements Regarding Services and Facilities

3. Incentives for Safe Delivery Services

- i) The following incentives will be provided for safe delivery services:
 - a) Free safe delivery services
 - b) Transport costs for beneficiary women to go to the health facility.
 - c) Cash incentives to skilled birth attendants for providing safe delivery services
 - d) Subsidy grant to health institutions to compensate for the free delivery they provide.
- ii) According to **section (a) sub-clause (1)**, free delivery services will be provided to beneficiary women in the districts mentioned in Annex 1 or to women who are referred from those districts to health institutions in other districts.
- iii) The facilities to be provided, as mentioned in sub-clause (i) section (b), (c) and (d), will be according to Annex 2.
- iv) The subsidy grant provided according to section (d) of sub clause (i) can be spent only for the improvement of health services being provided by the health institutions.
- v) The facilities to be provided according to this clause will be provided in line with the allocated amount for the grant to the concerned health institutions.

For beneficiary women who are referred from one district to another, the transport expenses will be borne by the referring health institution.

Section III

Budget Management and Disbursement

4. Budget Management

- i) The Ministry of Health and Population will manage the required budget amount and source for the safe delivery services incentives.
- ii) The Department of Health Services will allocate an estimated budget to every District Health/ Public Health Office/ Hospital on the basis of number of expected pregnancies and need for safe delivery services.

5. Distribution of Incentives

i) The following criteria apply for the distribution of transport incentives to beneficiaries:

- a) Women who come for delivery services will be provided incentives according to these guidelines only up to two children. However, if a woman has already given birth to two live babies but one child has since died, this benefit will still apply. Similarly, if a woman already has one child and delivers twins from the second pregnancy, she is still eligible to receive the incentive.
- b) This incentive is also given to all women who come to the health institution with obstetric complications and to all women who have delivered their babies at home but have been referred to the health institution due to complications.

Incentive and the safe delivery subsidies will not be given to those women who stay in cabins or paying wards.

ii) The incentives to skilled birth attendants and other service providers and team members for assisting home and institutional deliveries will be distributed proportionately by the health institution management committee.

iii) District Health/ Public Health Offices/ hospitals will be responsible for financial management of the safe delivery incentives for all the health institutions under their jurisdiction as follows:

- a) After receiving the authorisation for expenditure, a sum of money will be given to the health management committees of all the health institutions as an advance for them to manage on the basis of estimated number of women coming for safe delivery services
- b) In line with **section (a)**, the health management committee must spend the advance amount according to these guidelines and send a detailed description of the expenditure to the District Public Health Office for reimbursement. After receiving the detailed description and bills of expenditure the District Health Office will reimburse the spent amount according to the prevailing rules and regulations, and then sanction a further advance amount.

6. The Beneficiary Incentive

i) To receive the facilities as mentioned in these guidelines, the beneficiaries must complete the forms given in the Annex 3 and submit their application to the concerned health institution.

ii) The incentive to be provided to the beneficiary woman will be made available on the basis of the admission and discharge card of the health institution.

iii) While disbursing the incentive amount to the beneficiary woman, the receipt form should be attached.

7. The Service Provider Incentive

- i) To obtain the incentive mentioned in these guidelines, the service provider must complete the form given in the Annex 4 and submit it to the concerned health institution.
- ii) The Chief of the health institution will verify the details according to sub-clause (i) above and recommend payment of the incentive.
- iii) The related District Health/ Public Health Office or the hospital should update the accounts after the payment according to the recommendation of the health institution Chief in line with sub-clause (ii) above.
- iv) The District Health/ Public Health Office should send a quarterly progress report of the incentives distributed to beneficiaries and service providers to the Department of Health Services according to these guidelines, using the format given in Annex 5.
- v) After receiving the description as mentioned above in sub-clause (iv), the Department of Health Services should send a consolidated report to the Ministry of Health and Population.

Section IV

Monitoring Supervision and Evaluation

8. Monitoring and Supervision

- i) The Department of Health Services will be responsible for the management review, publicity, monitoring and evaluation of safe delivery services.
- ii) Supervision and monitoring of incentives for safe delivery services will be the responsibility of the Regional Directorate of Health Services for each region.
- iii) Preparation of the annual work plan, budget estimation, distribution of the financial incentives and monitoring, and supervision of the safe delivery services will be the responsibility of the District Health/ Public Health offices. In the case of those districts where public health offices are separate from the hospital, the hospitals themselves will perform these activities.
- iv) Support will also be sought from donors and NGOs for monitoring and supervision.
- v) The format for supervision and monitoring is as shown in Annex 6.

9. Institutional Arrangements

- i) Policy making and budget allocation for safe delivery service incentives will be the responsibility of the Ministry of Health and Population.
- ii) Local authorities and NGOs will be expected to provide support for raising public awareness about the incentives scheme and facilities for safe delivery services, and assist pregnant women wishing to go to a nearby health institution for safe delivery services.
- iii) According to these guidelines, the incentives scheme should be reviewed at the same time as the regular review of other health service programmes is carried out.

10. Adjustment Addition and Deletion in the Guidelines and Annexes

The Ministry of Health and Population can adjust, add to or delete from these guidelines and Annexes, as deemed appropriate.

Annex 1
(Related to Clause 3(ii))

Remote and mountainous districts with low Human Development Index (HDI), where free Delivery services and Transport incentives are given are:

<u>Sn. No.</u>	<u>Name of District</u>	<u>Physiographic Zone</u>	<u>HDI</u>
1.	Shankuwasabha	Mountain District	0.481
2.	Solukhumbu	Mountain District	0.479
3.	Taplejung	Mountain District	0.467
4.	Dolakha	Mountain District	0.450
5.	Rasuwa	Mountain District	0.394
6.	Sindhupalchowk	Mountain District	0.414
7.	Manang	Mountain District	0.502
8.	Mustang	Mountain District	0.482
9.	Dolpo	Mountain District	0.371
10.	Humla	Mountain District	0.367
11.	Jumla	Mountain District	0.348
12.	Mugu	Mountain District	0.304
13.	Kalikot	Mountain District	0.322
14.	Bajhang	Mountain District	0.311
15.	Bajura	Mountain District	0.310
16.	Darchula	Mountain District	0.424
17.	Jajarkot	Hilly District	0.343
18.	Achham	Hilly District	0.350
19.	Dailekh	Hilly District	0.381
20.	Rolpa	Hilly District	0.381
21.	Baitadi	Hilly District	0.391
22.	Salyan	Hilly District	0.399
23.	Doti	Hilly District	0.402
24.	Pyuthan	Hilly District	0.416
25.	Rukum	Hilly District	0.386

Annex 2
(Related to Clause 3(iii))

1) Transport and other incentives to be provided to the beneficiary women are:

- (a) For **Mountain** Districts: **One Thousand Five Hundred Rupees**
- (b) For **Hill** Districts: **One Thousand Rupees**
- (c) For **Terai** District: **Five Hundred Rupees.**

Mountain Districts	Hill Districts	Terai Districts	
1. Sankhuwasabha	1. Bhojpur	21. Gulmi	1. Jhapa
2. Solukhumbo	2. Dhankuta	22. kaski	2. Morang
3. Taplejung	3. Ilam	23. Lamjung	3.Saptari
4. Dolakha	4. Khotang	24. Myagdi	4.Siraha
5. Rasuwa	5. Okhaldhunga	25. Palpa	5.Sunsari
6. Sindhupalchowk	6. Panchtar	26. Parbat	6.Bara
7. Manang	7. Tehrathum	27. Syangja	7.Chitwan
8. Mustang	8. Udayapur	28. Tanahu	8.Dhanusha
9. Dolpo	9. Bhaktapur	29. Dailekh	9.Mahottari
10. Jumla	10. Dhading	30. Jajagkot	10.Parsa
11. Humla	11. Kathmandu	31. Pyuthan	11. Rautahat
12. Kalikot	12. Kavrepalanchowk	32. Rolpa	12.Sarlahi
13. Mugu	13. Lalitpur	33. Rukum	13.Kapilbastu
14. Bajhang	14. Makwanpur	34. Salyan	14.Nawalparashi
15. Bajura	15. Nuwakot	35. Surkhet	15.Rupandehi
16. Darchula	16. Ramechap	36. Achham	16.Banke
	17. Sindhuli	37. Baitadi	17. Bardiya
	18. Arghakhanchi	38. Dadeldhura	18. Dang
	19. Baglung	39. Doti	19. Kailali
	20. Gorkha		20. Kanchanpur

2) The incentives for **service providers** for safe delivery service are:

- a) **Three Hundred rupees** for each delivery attended at a health institution
- b) **Three Hundred rupees** for each delivery attended at home,

3) a) The subsidy for the **health institutions** of the districts mentioned in Annex-1, a lump sum amount of **One Thousand rupees** for each delivery attended.

b) For health institutions which have provided **delivery services referred from the 25 low HDI districts** mentioned in Annex 1 Clause (3), Sub clause (2) **One Thousand Rupees of grant** assistance will be provided.

Annex 3
(Related to Clause 6)

Application Form

To the Chief
.....

Dear Sir,

I have received safe delivery services/obstetric care for complications/ Caesarian section from this health institution. Therefore I request you to provide me the payment according to the rules and regulations, for transport and other costs I have incurred,

Applicant:

Signature
Name:
Age
Number of Children alive
(Including newly borne)

Address: VDC/ Municipality
Ward No:
Tole:

Service Provider	Attested by the Chief of the Health Institution
Signature Name: designation Date:	Since she has delivered her baby in this health institution I recommend the payment according to the rules and regulations Signature: Post: Date

Annex 4
(Related to Clause 4)

Recommendation form for the distribution of incentives to the service providers for attending home delivery

Name of Pregnant Woman:

Age:

Signature:

Address: District
 VDC

Ward No:

Tole/ Village:

If ANC check up received, number of visits

Description of the delivery services provided (mark the Sign)

- Attended normal delivery
- Attended complicated delivery
- Attended referred case due to complication

Result of the delivery

- Live birth
- Twins
- Still Birth

<u>Service Provider</u>	<u>Recommended by</u>	<u>Chief of Health Institution who verified</u>
Signature: Name: Post Date	Ward Chief/ FCHV Signature: Name: Post: Date	Signature: Name: Post: Date:

Annex 5
(Related to Clause 7 (iv))

Quarterly Progress Report for Safe Delivery Services

District:
 Name of the Health Institution:

Quarterly:
 Fiscal Year:

Description of the Delivery Services	Number, No.	Total Amount Paid to the Service Provider, NRs.	Total Amount Paid to the Beneficiaries, NRs.
Normal Delivery			
Complicated Delivery			
Delivery through Caesarian Section			
Services provided to referred women due to complication			
Delivery attended at home			
Total			

Report prepared by:
 Signature:
 Name:
 Post:
 Date:

Attested by:
 Signature:
 Name:
 Post:
 Date:

Annex 6
(Related to Clause 8 (iv))

Quarterly Progress Report for Safe Delivery Services

Name of the Supervisor: _____ Station: _____
Post: _____ Date: _____

What is to be Supervised **Remarks**

a. Organisation

1. Total number of women who came for delivery services	€			
2. Number of normal deliveries attended		€		
3. Number of complicated deliveries attended		€		
4. Number of caesarian sections conducted		€		
5. Number of deliveries attended by SBAs at home		€		
6. Number of complicated cases which came as referred cases to the health institution	€			

b. Expenditure management by the committee

1. Record of the expenditure are updated	Yes	€	No	€
2. Report sent in time	Yes	€	No	€
3. Transport allowance given to beneficiaries	Yes	€	No	€

c. Interview with the Clients

1. Timely payment of incentives	Yes	€	No	€
2. Difficulties to receiving the incentives	Yes	€	No	€
3. Support from the staff when receiving incentives	Yes	€	No	€
4. Satisfied with the provided service	Yes	€	No	€

d. Problems (if any)

- 1.
- 2.
- 3.

e. Efforts made to solve the problems

- 1.
- 2.
- 3.

f. Advice and suggestions from Skilled Birth Attendants

- 1.
- 2.
- 3.

g. Advice and suggestions from Health Institution

- 1.
- 2.
- 3.

h. Advice and suggestions of the Supervisor

- 1.
- 2.
- 3.

Signature:

Name:

Post:

Date: