

# ANNUAL REPORT

## FY-2078/079



**Kapilvastu Hospital**

**Taulihawa**



**Province Government  
Ministry of Health and Population  
Province Health Directorate  
Lumbini Province Nepal**



**Preface**

It is very rewarding for me to witness the publication of this annual report of the Kapilvastu Hospital for 2078/079. This annual report is representation of the major outcome of annual performance of all major programs and activities carried out by the Kapilvastu Hospital.

This report provides comprehensive information about health care activities, programs and achievements of the fiscal year during 2078/079. The facts and figures contain in this report is the actual reflection of the activities and achievements of the Kapilvastu hospital. This report is will be a great help for improving the planning, monitoring and evaluation of health services delivered by Kapilvastu Hospital. I am sure that this report accumulates and presents the actual performance of the Kapilvastu Hospital.

I am very grateful to Kapilvastu Hospital and teams for providing me an opportunity to put some worthwhile words for this report. I would like to offer my sincere appreciation for the efforts made by all staffs of the Kapilvastu hospital during this fiscal year.

.....  
Dr. Binod Kumar Giri  
Director



प्रदेश सरकार  
लुम्बिनी प्रदेश  
स्वास्थ्य मन्त्रालय  
स्वास्थ्य निर्देशनालय  
**कपिलवस्तु अस्पताल**  
तौलिहवा



## **Preface Message from Senior Medical Superintendent**

It is great time for me to write message in annual report of Kapilvastu Hospital, Taulihawa. Annual report of this hospital is very precious for us because this is the copy of our different activities, movement, progress report, difficulties and opportunity/constraints of this institution.

First of all, I would like to thank respected minister Mr. Indrajeet Tharu (Lumbini province, Health Ministry), Lumbini province health directorate, Kapilvastu hospital staffs and all the supportive hand to make possible to release this report in front of you with many supports and wishes.

There are many very poor, marginalized and low socioeconomic status people living in this Kapilvastu district and they are not much aware about the health service access. This organization is working really hard for those needy people living in this locality. Kapilvastu hospital is the largest government hospital of Kapilvastu district which provides lots of health services including emergency and elective operative services, in patient services, 24hrs OCMC service and 24 hrs maternity services under supervision of consultant gynecologist. Annual report 2078/079 includes the district profile of Kapilvastu district, health services of Kapilvastu hospital, staffing and functions of hospital, captures of different events of hospital and the key indicators of health service system.

In this report, if there is some positive progress in any of health indicators, I would like to thank all of the staff of Kapilvastu hospital, those who are working really hard in their roles and responsibilities. Those indicators which are not in progress in this year definitely we will review and try to gain achievement in coming fiscal year. At last, I would like to thank the people and organization who are supporting in activities of this hospital directly and indirectly.

**Dr Kishor Banjare**  
Medical Superintendent  
Kapilvastu Hospital  
Taulihawa



प्रदेश सरकार  
लुम्बिनी प्रदेश  
स्वास्थ्य मन्त्रालय  
स्वास्थ्य निर्देशनालय  
कपिलवस्तु अस्पताल विकास समिति  
तौलिहवा



## दुई शब्द

मैले यस कपिलवस्तु अस्पतालको आ. व. २०७८/२०७९ को वार्षिक प्रगति प्रतिवेदनमा आफ्नो दुई शब्द राख्न पाउँदा गर्व महसुस गरिरहेको छु। यो वार्षिक प्रगति प्रतिवेदन यस कपिलवस्तु अस्पतालले गत आ. व. मा प्रदान गरेका सेवाहरुको तथा सुविधाहरुको फलक हो। यस अस्पतालले विभिन्न आरोग्य अवरोहका बिच निरन्तर उच्च गुणस्तरिय सेवा तथा सुविधा प्रदान गर्दै आइरहेको छ। पर्याप्त जनशक्तिको अभाव श्रोत तथा साधनको कमी आदि समस्याहरुका बावजुत यस प्रतिवेदनमा उल्लेख भएअनुसार बिगतका वर्षहरुको तुलनामा गत आ.व.मा प्रदान गरिएका सेवाहरु तुलनात्मक रुपमा संख्या तथा गुणस्तरमा समेत अभिवृद्धि भएको देख्दा खुशी लागेको छ। यो प्रतिवेदनले हामीलाई हामीले गरेका कामको समिक्षा गर्ने अबसर प्रदान गरेको छ।

आगामी दिनमा अस्पतालले यस प्रतिवेदनमा उल्लेख भएका कार्यक्रमको लक्षप्रगति समिक्षा गरि अझै उत्कृष्ट सेवादिने अपेक्षा राखेको छु। यस प्रतिवेदनले हामीलाई विभिन्न कार्यक्रममा भएका कमीकमजोरिहरु समयमै पहिचान गरि सुधार गर्ने मौका प्रदान गर्ने अपेक्षा लिएका छु।

अन्तत, मलाई यस वार्षिक प्रतिवेदनमा दुई शब्द राख्ने मौका दिनुभएकोमा वार्षिक प्रतिवेदन बनाउन लाग्नु हुने सम्पूर्ण टिमप्रति म कृतज्ञ छु र आगामी दिनमा कपिलवस्तु अस्पतालले प्रदान गर्ने सेवा तथा सुविधामा निरन्तर सुधार हुने आशा अपेक्षा राख्छु।

धन्यवाद ...

**शिवलाल यादव**

अध्यक्ष  
अस्पताल विकास समिति

## Preface Message from Clinical Co-Ordinator



It is immense Pleasure and honor for me to get an opportunity to express my view and to write message in annual report of Kapilvastu Hospital with the hard work and dedication of all the staffs. Kapilvastu Hospital is dedicated to improve the quality of health services for the people of Kapilvastu district.

Kapilvastu Hospital is 50 bedded hospital which provides quality health services through 10bedded ICU run by competent staffs, Emergency & Elective operative services, 24hrs Emergency, maternity & OCMC services under the supervisor & constant guidance of consultant gynecologist.

Despite of facing lots of obstacles & limited resources we are trying to provide quality & ablaqueate services to the patients. In the last MSS score, we are placed number 1 in Lumbini province and will try to maintain the position by providing more better services to our patients.

I express my since gratitude to Lumbini province social development ministry, health directorate and all the government and Non-government institution of Kapilvastu hospital. I fell indented to all my colleagues who worried restlessly for providing quality services 24hrs.

Finally, I would like to thanks Dr. Kishor Banjade (Sen.Med. superintendent) for his constant guidance and support without his support, we will not be able to provide services what we are providing now.

Best Wishes ahead..  
Thank You!!!

**Dr Javed Ahamad Khan**  
Int Medicine/Clinical Coordinator



## Preface Message

It is immense pleasure and pride that I am writing few words in annual report of Kapilvastu Hospital, Taulihawa. This has become possible with the hard work and dedication of all the staffs of this hospital.

As per my perception and experience, Kapilvastu Hospital is dedicated to improve the health status of this Kapilvastu district by providing the quality service from many departments of this institution. We are always encouraged and motivated to provide health care to disadvantaged, marginalized, very poor and needy people living in Kapilvastu district. Kapilvastu Hospital is the largest hospital of this district and we are always trying to meet the expectation of service receiver by working with honesty, dedicated, disciplined, hardworking and service oriented. In this setting, we are proving 24hrs operative services only for the beneficial of critical patient and those who are really needy. In this hospital we are facing lots of obstacles, limited resources, mentally pressure while working day by day but this has been overcome with the directly support from government organization located surrounding of this hospital. In this report we came to know, there are many indicators we need to improve in upcoming fiscal year. And by the many indicators it is proven that we are doing really well in this setting and locality so I would like to thank and salute to this model team work of Kapilvastu hospital.

Whatever we are doing in this hospital is only possible with the support of Lumbini province Health Ministry, Health directorate and all the government and Non government institution working in Kapilvastu. I really like to thank Dr Kishor Banjade (Medical Superintendent), Mr Shivlal Yadav (Chair, Hospital Development Committee), Ratnakar Shukla (Hospital Manager), Department head and all of the staffs for this management, environment provided to work and dedication. I always expect this effort in future.

Best wishes ahead.

**Dr Ganesh Kshetri**  
Medical Officer (ASBA)



## मन्तव्य

मलाई वार्षिक प्रतिवेदनमा आफ्नो विचार राख्ने अवसर प्रदान गर्नु भएकोमा अस्पताल परिवार प्रति कृतज्ञता व्यक्त गर्दछु । मिति २०२९ साल पौष १ गते तात्कालिन पञ्चापती व्यवस्थामा भारत सरकारको सहयोगमा पृथ्वी वीर अस्पताल कपिलवस्तुको निर्माण भएको थियो । कपिलवस्तु जिल्लाको सदरमुकाम तौलिहवामा अवस्थित यो अस्पताल कपिलवस्तु जिल्लामा रहेको १० वटा स्थानीयतहहरूको एक मात्र स्वास्थ्य क्षेत्रको विश्वासिलो तथा भरोसाको केन्द्र को रूपमा रहेको छ । यस अस्पतालमा जिल्लाका सम्पूर्ण स्वास्थ्य संस्थाहरू बाट रेफर भई विरामीहरू यस अस्पतालमा आउने गर्छन् ।



वर्तमान समयमा देशको संरचना परिवर्तन भए संगै यो अस्पताल संघिय संरचना बाट प्रदेश सरकारको मताहतहुनगई यसको नाम पृथ्वीवीर अस्पताल बाट परिवर्तन भई कपिलवस्तु अस्पताल, तौलिहवा भएको छ । अस्पतालको नाम परिवर्तन भए संगै यसको जिम्मेवारी र क्षमतापनि परिवर्तनभएको छ । अस्पताललाई अब ५० बेडको रूपमा सञ्चालन गर्न आउने समस्या र चुनौतीहरूको सामनागर्दै हामीले कपिलवस्तु वासीहरूलाई गुणस्तरीय स्वास्थ्य सेवाप्रदान गर्न अहोरात्र खटि कार्य गर्नु पर्ने छ ।

अस्पतालमा वर्षयाममा जम्ने पानी को उचित व्यवस्थापन गर्न कठिनाई भएको अब आउने दिनहरूमा पानी उचित व्यवस्थापन गर्न पहलकदमी अगाडि बढाइने छ । ५० बेडको स्वीकृत दरबन्दी अनुसार को जनशक्ति मन्त्रालयबाट समन्वय गरी ल्याउने र अस्पताललाई ५० शैया क्षमतामा सञ्चालन गरी जिल्लावासीहरूलाई स्वास्थ्य सेवाप्रदान हुने गरि भूमिकामा कार्य प्रगति अगाडि बढाइने छ ।

कपिलवस्तु जिल्लामा मध्यमवर्गीय तथा गरिव, अतिगरिव मानिसहरूको जनसंख्या अध्याधिक रहेकोले यस जिल्लाको त्यस्ताबालबालिकाहरू अन्यत्रगई स्वास्थ्य सम्बन्धीप्राविधिकशिक्षाहासिल गर्न असमर्थ रहेको हुदाँ मैले अस्पतालको तर्फबाट एच.ए., स्टाफ नर्स, एक्सरे टेक्निसियन, डेण्टल हाइजेनिकतथाल्याब टेक्निसियन जस्ता प्राविधिकशिक्षाप्रदान गर्ने शिक्षालय स्थापना गरी न्युनशुल्कमा यहाँकाबालबालिकाहरूलाई स्वस्थ समबन्धी प्राविधिक शिक्षाप्रदान गराउने कार्यमा भूमिका निर्वाह गर्नेछु । जसले गर्दा जिल्ला तथा प्रदेशको स्वास्थ्य समयन्त्रको पहुचमा कपिलवस्तु वासीको अहम योगदानहुनेछ । कपिलवस्तु जिल्लाका अधिकांश स्थानीय तहहरूले हाम्रो यस अस्पताललाई सहयोग गरी प्रदेशको उतकृष्ट अस्पताल बनाउन सफल हुनु भएकोम स्थानीय तहहरूलाई हार्दिक धन्यवाद ज्ञपन गर्न चाहन्छु ।

रत्नाकर शुक्ल  
अस्पताल व्यवस्थापक

## EXECUTIVE SUMMARY

According to WHO (1951) “Hospital is defined as an integral part of a social organization, the function of which is to provide for the population complete healthcare, both curative and preventive, and whose outpatient services reach out to the family in its home environment; the hospital is also a center for training of health workers and bio-social research.

Kapilvastu hospital has been running as a 50 bedded hospital however there are almost 66 beds are actually operating in hospital. Despite upgrading of hospital from 15 bedded to 50 bedded hospital the hospital beds are remaining fulfilled all over the time. The reporting status of the Kapilvastu hospital was 100% since three fiscal years. Timely entering and submitting of HMIS report is important for revealing the major indicator a statistic of the hospital and timely correct if any drawback found. The bed occupancy rate of the Kapilvastu hospital is very high. The beds of the Kapilvastu hospital were remaining almost fulfilled all of the year. Due to huge patient flow and lack of adequate human resources large number of cases were getting referred from this hospital. In the fiscal year 2077/78 the bed occupancy ratio was seen highest as 69.7% and seen 55.9 % in the fiscal year 2078/79. The average length of stay of Kapilvastu hospital seems increasing in trend compared to 2.6 in FY 2077/78 to 2.9 in FY 2078/79. Due to operating of surgical cases and other critical cases the hospital length is increased.

In the last FY 2078/079 there was 1 maternal death occur in the hospital. The number of still birth was 80 and the neonatal death after birth is 7. The maternal death number was also in decreasing in pattern compared to the past fiscal years. The availability of the emergency LSCS services and qualified SBA for delivery service had major role to reduce susceptible maternal and neonatal deaths in Kapilvastu Hospital. Total number of clients visiting hospital for getting safe delivery services were increasing from past three fiscal years. According to data



we can see that during the fiscal year FY 077/78 the safe delivery services were getting by 1735, but in this FY 2078/079 is 2238 which is quite better than compared to the previous fiscal year.

The Kapilvastu hospital is also COVID dedicated hospital to fight against COVID-19. It establishes PCR molecular laboratory for the diagnosis of COVID cases to avoid referring cases to Bhairahawa and Butwal. The separate 15 bedded COVID dedicated hospital was also run simultaneously with Kapilvastu hospital to directly manage and treat the COVID related cases.

In the Last FY 2077/078 PCR lab conducted 1619 total RT-PCR test and among them 830 were diagnosed as the COVID-19 Positive cases. The hospital successfully admitted and treated 265 COVID positive cases however among them 186 cases were cured and discharged from hospital in different time. The total 79 deaths due to COVID 19 was reported in hospital. Despite limited physical and human resources the hospital successfully tackled against COVID 19.

The Kapilvastu hospital collected and tested 310 slides of malaria in FY 2077/78 among them no one are positive. There were new tuberculosis cases were diagnosed and HIV patient currently enrolled in ART.

OCCMC service is established in FY 2076/77 in Kapilvastu Hospital since then the OCCMC cases were catching and handling by one door management system. There are large number of sexual assaults, Physical assault, Physical violence and other incidents were increasing day by day. Many of these cases were kept in secret and handled by village leaders. In the fiscal year 2078/079 total 80 OCCMC cases came to hospital for medico-legal treatment other medico-legal cases such as hanging, suicide, physical violence, physical assault, and drunkenness were also addressed by the hospital. In the past fiscal year there were 191 cases were carried out autopsy.

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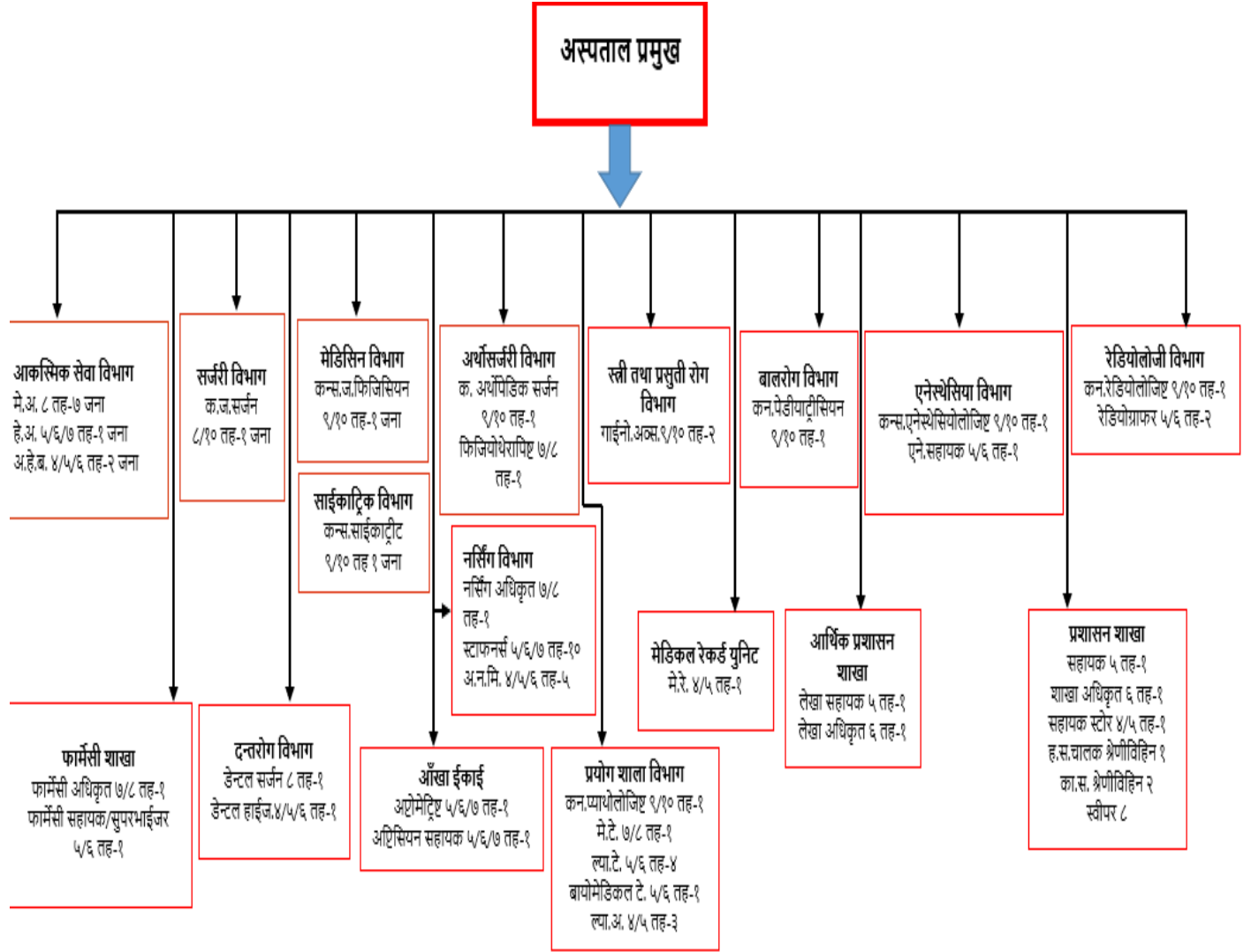
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## Abbreviations

ANM	-	Auxiliary Nurse Midwife
AHW	-	Auxiliary Health Worker
ART	-	Anti Retroviral Therapy
ARV	-	Anti-Rabies Vaccine
ATT	-	Anti-Tubercular Therapy
CBC	-	Complete Blood Count
CRP	-	C-reactive Protein
COVID	-	Corona Virus Disease
CSSD	-	Central Sterile Supply Department
ECG	-	Electrocardiogram
ECHO	-	Echocardiogram
ENT	-	Ear, Nose and Throat
FY	-	Fiscal Year
FCHV	-	Female Community Health Volunteer
HMIS	-	Health Management System
HIV	-	Human Immune Deficiency Virus
HCV	-	Hepatitis C Virus
HBsAg	-	Hepatitis B Serum Antigen
Hb	-	Hemoglobin
HA	-	Health Assistant
ICU	-	Intensive Care Unit
IMNCI	-	Integrated Management of Neonatal and Childhood Illness
HP	-	Health Post
LSCS	-	Lower Section Cesarean Section
MIS	-	Management Information System
MCH	-	Maternal and Child Health
MO	-	Medical officer
MDGP	-	Medical Doctor/ General Practitioner

MSS	-	Minimum Service Standard
NICU	–	Neonatal Intensive Care Unit
OA	-	Office Assistant
OCCMC	-	One Step Crisis Management Centre
OPD	-	Outpatient Department
OT	-	Operation Theatre
PCR	-	Polymerase Chain Reaction
PHCC	–	Primary Health Care Center
RCT	-	Root Canal Treatment
RHD	-	Rheumatic Heart Disease
RTA	–	Road Traffic Accident
SBA	-	Skilled Birth Attendant
SN	-	Staff nurse
TB	-	Tuberculosis
USG	-	Ultrasound (Video X-ray)
WHO	-	World Health Organization

# Organogram



# PART-I

## DISTRICT PROFILE

### 1.1 General introduction of Kapilvastu District

Kapilvastu district is one of the districts of the Lumbini Province Nepal. The district, headquarter is located in the kapilvastu municipality Taulihawa, covers an area of 1,738 square kilometres (671 sq mi). Kapilvastu is bounded by Rupandehi District to the east, Dang Deukhuri District in Rapti zone to the northwest, Arghakhanchi District to the north, Balrampur district, Awadh region, Uttar Pradesh, India to the west and Siddharthnagar district, Purvanchal region, Uttar Pradesh to the south.



Fig.1 Map of Kapilvastu district



Kapilvastu district is one among six district of Lumbini Zone which lies in Western Development Region of Nepal and Taulihawa which is among one of the oldest city of Nepal and the Headquater (Administrative Center) of this District. Taulihawa lies within the area of Kapilvastu Municipality and is located 22KM North East of Lumbini. Kapilvastu Municipality was established with 14 wards in 2039 B.S as a name of Taulihawa Nagarpanchayat which covered full region of baragdawa, maalpara, pipari, kapilvastuadarshGaau Panchayat and partial region of Tilaurakot, Gotihawa and Gobari Gaau Panchayat. But later in 2072 B.S full region of Gotihawa and Tilaurakot were included making total 19 wards within this Municipality. Total area covered by this Municipality is 63.61 Kilometer Square. The municipality lies at an altitude of 107 metres (351 ft) above sea level on Nepal's southern border across from Khunwa, Uttar Pradesh state, India. Buddhist sources present Kapila as a well-known Vedic sage whose students built the city of Kapilavastu Buddhist texts such as the Pali Canon claim that Kapilavastu was the childhood home of Gautama Buddha, on account of it being the capital of the Shakyas, over whom his father ruled.

## **1.2 Most famous tourist places of the Kapilvastu District**

The Kapilvastu is the Historical places it has many popular places to visit and explore. The lord Gautam Buddha was remained in Kapilvastu in his childhood lives.

1. Tilaurakot
2. Kudan
3. Jagadishpur Tal
4. Niglihawa
5. Tillurakot Buddha Musesum
6. Tanastupa
7. Gottihawa
8. Arrurakot
9. Taileshowar Nath Temple Taulihawa

### **1.3 Administrative division of Kapilvastu district**

The district consists of ten municipalities, out of which six are urban municipalities and four are rural municipalities. These are as follows.

- Kapilvastu Municipality
- Banganga Municipality
- Buddhabhumi Municipality
- Shivaraj Municipality
- Krishnanagar Municipality
- Maharajgunj Municipality
- Mayadevi Rural Municipality
- Yashodhara Rural Municipality
- Suddhodhan Rural Municipality
- Bijaynagar Rural Municipality

## **1.3.1 Health and Hospital**

### **Health**

Health has evolved over the centuries as a concept from an individual concern to a worldwide social goal and encompasses the whole quality of life. Health in old age was defined simply as “absence of disease”. Only healthy people can bring prosperity and economic growth. The development of society greatly depends on the quality of health status.

According to WHO- “Health is the state of complete physical, mental and social well being and not merely the absence of diseases or infirmity.”

According to Webster Dictionary -"Health is a complete well-being of mind, body and spirit, especially freedom from physical disease and pain."

Hospital is a part of social system that provides health care services to the needy people. Hospitals are complex and multi faceted organization that consists of heterogeneous group of human resources such as doctor, nurse, paramedics, cleaner. The goal of hospital is to provide best possible patient care. Hospitals provide curative, rehabilitative, promote and rehabilitative healthcare service to the needed people.

### **Definition of Hospital**

According to WHO (1951) “Hospital is defined as an integral part of a social organization, the function of which is to provide for the population complete health care, both curative and preventive, and whose outpatient services reach out to the family in its home environment; the hospital is also a center for training of health workers and bio-social research.

## 1.3.2 Functions of Hospital Administration

Hospital administration functions can be classified into three broad categories:

1. **Medical** - This involves the treatment and management of patients through the staff of physicians.
2. **Patient Support** - This relates directly to patient care and includes nursing, dietary diagnostic, therapy, pharmacy and laboratory services.
3. **Administrative** – Administrative Part is Concerned With the execution of policies and directions of the hospital governing discharge of support services in the area of finance, personnel, materials and property, housekeeping, laundry, security, transport, engineering and board and the maintenance.

## 1.3.3 Functions of hospitals

### Intramural functions

#### 1) Restorative

- Diagnostic
- Curative
- Rehabilitative
- Emergency

#### 2) Preventive

- Health promotion
- Health Education

- Occupational health training

- Immunization

#### 3) Educational

- Undergraduate
- Postgraduate
- Paramedical
- Nursing

### Extramural functions

- Outpatient services
- Home care services
- Outreach clinics

### **1.3.4 National Health policy and programs**

Nepal constitution 2073 make health as a fundamental human right and there will be no discrimination for getting the medical and health care services according to cast, religion and sex. During past decades there was drastic improvement in the health sector . This achievement was achieved due to the huge efforts and diligence of many health professionals from grass root level to the policy maker level.

**Vision:**

Healthy, Alert and conscious citizens oriented to happy life.

**Mission:**

To ensure the fundamental health rights of citizens through optimum and effective use of resources, collaboration and partnership.

**Goal:**

To develop and expand a health system for all citizens in the federal structure based on social justice and good governance and ensures access to utilization of quality health care services.

**Targets:**

1. To make health services free to all people as basic human right.
2. To develop expand and improve all types of health systems as per the federal structure.
3. To establish the effective and responsible health care system equipped with required medicines, equipment, technology and capable human resources for easy accessible of health care.
4. To strengthen social health protection system by integrating the most marginalized section.

5. To ensure ownership of health sector and encourage public participation by involving private and co-operative sector.
6. To transform the health sector from profit-orientation to service-orientation

## **PART-II**

# **HOSPITAL DEPARTMENTS**

### **2.1 Emergency Department**

Emergency department is the main gateway and critical care department of the hospital. Emergency department serves the patient who needs urgent support, care and treatment. There are altogether 6 beds are functional in the emergency department of the Kapilvastu hospital. Mostly RTA, fall down injuries, abdominal pain, poisoning and snake bite cases has been visiting hospital to get emergency medical care. The department is headed by the medical officer and other paramedic staffs. 24Hr services is providing by emergency department under supervision and treatment of medical officer and other paramedics.

### **2.2 Out Patient Department**

The main entry point of hospital to get most of the medical service is OPD department. It is the floor in which patients visit for general health checkup, regular medical checkup, follow up visit etc. During the course of treatment and providing health care services some clients were sent back to home, some were referred to higher center, some were planned to admit in ward for direct observation of medical staff and further treatment. Main hope for the rural and village peoples depends on the OPD department. Scarcity of medical doctor is always prevalent in the hospital and the duration of stay of medical doctor also remained too short therefore patient doesn't rely easily to the government hospital to get medical care. Among all cases presenting in hospital almost 90% cases were handled by OPD department. The major impression towards hospital from general public for getting medical service is OPD. Recently there has been Dental



department providing services and ophthalmic department is also is in functional. Other special services like Surgery, Orthopedic, Pediatric, Medicine and Gyane and Obs departments are also started in this hospital.

### **2.3 Laboratory Department**

Most of the investigation and diagnostic services are performed in laboratory for the identification of disease condition. It is the crucial department for the identifying the disease condition whether they have disease present or not. Sometimes medical doctor also took help laboratory for diagnosing the conditions. Hundreds of diagnostic tests are performed in the laboratory department. Equipment available in Kapilvastu hospital laboratory for diagnostic test are as follows:

1. Electronic Microscope
2. Bio Semi Analyzer
3. Bio fully automatic Analyzer
4. Centrifuge
5. HPLC
6. Coulter counter
7. Electrolyte analyzer
8. Gene X-pert Machine

#### **Major services provided are:**

- 1 Hematology: CBC, HB,
- 2 Parasitology: Malaria,
- 3 Microbiology: Sputum smear,
- 4 Serology: HIV, HBsAg, HCV,
- 5 Endocrine: blood sugar, uric acid,
- 6 Biochemistry: Sodium/Potassium, protein, Iron profile, Lipid profile
- 7 PCR test

## **2.4 Maternity department**

In the Kapilvastu hospital almost 3-6 normal deliveries were performed daily. This department is also providing the maternity services round O clock. It also handles the critical cases of mother and neonate. Complicated cases of mother were send to perform LSCS which is also available in the hospital when needed. Shortage of skilled birth attendants is the main problems of the maternity department.

## **2.5 Indoor/ Ward**

The critical cases who need direct observation and treatment were send to indoor for admission from OPD and emergency department. Kapilvastu hospital serving the patient with 17 indoor beds which are almost fulfilled whole year.

## **2.6 Operation Theater**

In spite of district level Hospital, the Kapilvastu hospital was providing continues surgical services to the patient continuously Emergency LSCS service is available for 24 hour, and other elective cases were performed twice in a week. Hydrocele, Hernia, Appendicitis, Hysterectomy and Other minor cases surgical services is available in the hospital. The operation theater is equipped with advanced medical equipment and apparatus. Recently orthopedic surgeries are also performed once in a week.

## **2.7 Store Department**

This supplies the essential medicine and supplies to the hospital. The medicine provided by the government for free health care services and other supplies were ordered to store and distribute to different department of the hospital and other equipment and materials which is not provide by government were procured and distributed to various the department as per their need.

## **2.8 CSSD**

To deliver high quality care by preventing hospital acquired infection to the public is possible when there is supply of high-quality sterile equipment and materials used during the medical and surgical procedure. This is only possible when CSSD department is working perfectly. Electric autoclave is the best technique to sterilize the linen and instruments used during the procedure.

## **2.9 Administration**

Administration department is the main back bone of the hospital. Beyond medical and clinical task there were many other administrative job needed to carry out on day to day basis. Human resource management, power supply, waste management and other vital role was playing by the administrative department.

## **2.10 X-Ray**

An x-ray is a common imaging test that's been used for diagnosis. It can help doctor view the inside of your body without having to make an incision. This can help them diagnose, monitor and treat medical condition. X-ray of kapilvastu hospital has most advance setting for radiology procedure. Radiology department functions with one 300mA and 100 mA with the combination of DRTECH and CR system.

## **2.11 Miscellaneous**

- I Finance Department established
- II OCMC
- III Dispensary
- IV Pharmacy department
- V USG
- VII House Keeping
- VIII ART center
- IX MCH clinic

## **2.12 newly added services**

- a. Oxygen Plant
- b. Laundry
- c. ICU
- d. ophthalmic
- e. Dental Department
- f. Physiotherapy
- g. PCR Laboratory
- h. COVID hospital
- i. ECHO machine
- j. Cabin ward
- k. SNCU
- l. New staff quarter construction
- m. Ambulance

## PART –III HOSPITAL SERVICES

### 3.1 Availability of Staffs

#### कपिलबस्तु अस्पताल तौलिहवाको दरबन्दी तेरिज

सि.न.	पद	तह	सेवा	समुह	दरबन्दी संख्या	संख्या
१	अस्पताल प्रमुख	११	स्वास्थ्य		१	१
२	कन्सल्टेन्ट जनरल फिजिसियन	९/१०	स्वास्थ्य	मेडिसिन	१	१
३	कन्सल्टेन्ट पेडियाट्रिसियन	९/१०	स्वास्थ्य	पेडियाट्रिक्स	१	१
४	कन्सल्टेन्ट अब्स तथा गार्डनो	९/१०	स्वास्थ्य	अब्स तथा गार्डनो	१	१
५	कन्सल्टेन्ट जनरल सर्जन	९/१०	स्वास्थ्य	सर्जरि	१	१
६	कन्सल्टेन्ट अर्थोपेडिक सर्जन	९/१०	स्वास्थ्य	सर्जरि	१	१
७	कन्सल्टेन्ट एनेस्थेसियोलोजिस्ट	९/१०	स्वास्थ्य	एनेस्थेसियोलोजि	१	०
८	कन्सल्टेन्ट रेडियोलोजिस्ट	९/१०	स्वास्थ्य	एनेस्थेसियोलोजि	१	०
९	कन्सल्टेन्ट प्याथोलोजिस्ट	९/१०	स्वास्थ्य	प्याथोलोजी	१	०
१०	कन्सल्टेन्ट साईकाट्रिष्ट	९/१०	स्वास्थ्य	साईकाट्रि	१	०
११	मेडिकल अधिकृत	८	स्वास्थ्य	ज.हे.स.	७	१०
१२	डेनटल सर्जन	८	स्वास्थ्य	डेन्टिस्ट्री	१	२
१३	फार्मिसि अधिकृत	७	स्वास्थ्य	फार्मिसि	१	१
१४	मेडिकल टेक्नोलोजिष्ट	७	स्वास्थ्य	मेडिकल टेक्नोलोजि	१	१
१५	नर्सिङ्ग अधिकृत	७	स्वास्थ्य	नर्सिङ्ग	१	२
१६	फिजियोथेरापिष्ट	७	स्वास्थ्य	फिजियोथेरापि	१	१
१७	अप्टोमेट्रिष्ट	५/६	स्वास्थ्य	विविध	१	१
१८	प्रशासन सहायक /अधिकृत	५/६	प्रशासन	सामान्यप्रशासन	१	१
१९	लेखा सहायक / अधिकृत	५/६	प्रशासन	लेखा	१	१
२०	ल्याबटेक्निसियन	५/६	स्वास्थ्य	मे. ल्या.टे.	४	२
२१	रेडियोग्राफर	५/६	स्वास्थ्य	रेडियोग्राफी	२	१

२२	एनेस्थेसिया सहायक	५/६	स्वास्थ्य	विविध	१	१
२३	हेल्थ असिस्टेन्ट	५/६	स्वास्थ्य	हे.ई.	१	३
२४	स्टाफ नर्स	५/६	स्वास्थ्य	नर्सिङ्ग	१०	१५
२५	फार्मिसि सुपरभाईजर/सहायक	५/६	स्वास्थ्य	फार्मिसि	१	१
२६	बायोमेडिकल टेक्निसियन	५/६	स्वास्थ्य	विविध	१	१
२७	अप्टिसियन सहायक	५/६	स्वास्थ्य	विविध	१	०
२८	ल्याबअसिस्टेन्ट	४/५	स्वास्थ्य	मे.ल्या.टे.	३	६
२९	मेडिकल रेकर्डर	४/५	स्वास्थ्य	मे.रे.	१	१
३०	अ.न.मी.	४/५	स्वास्थ्य	क.न.	५	६
३१	अ.हे.ब.	४/५	स्वास्थ्य	हे.ई.	२	१३
३२	डेन्टल हाईजनिष्ट	४/५	स्वास्थ्य	डेन्टिस्ट्री	१	०
३३	स्टोर सहायक	४/५	प्रशासन	सामान्यप्रशासन	१	१
३४	हलुका सवारि चालक	श्रेणी बिहिन	इन्जि		१	२
३५	कार्यालय सहयोगी	श्रेणी बिहिन	प्रशासन	सामान्यप्रशासन	२	८
३६	स्वीपर	श्रेणी बिहिन	प्रशासन		८	१३
जम्मा					७१	१००

**Table 1. availability of staff**

Human resources are key to carryout medical and administrative functions of the hospital. Especially in the hospital setting, medical staffs are vital for the quality of health care services. In developed countries the doctor patient, nurse patient ratios remain almost equal in number. However in the country like Nepal, due to lack of sufficient skilled and trained human resources the quality care is in the lowest level. Only one medical officer treat almost 50 patients per day; single nurse take care of more than 20 patient bed during duty hour. Among sanctioned post of 17 government seat currently almost 60% post remained vacant.

### 3.2 Hospital Beds

Kapilvastu hospital had been upgraded as 50 bedded hospital in FY 2077/78. Previously it was running as a 15 bedded hospital. The requirement of increasing bed number is crucial for the easy management of current patient flow. Newly established ICU and COVID ward is also running in this time.

**Hospital Beds**

<b>Description</b>	<b>Total</b>
<b>Sanctioned Beds (Government)</b>	50
<b>Sanctioned Beds (Development committee)</b>	0
<b>Total operational Beds</b>	67
<b>Total inpatient beds</b>	23
<b>Maternity beds</b>	15
<b>ICU beds</b>	10
<b>NICU beds</b>	2
<b>Emergency Department</b>	6
<b>Geriatric</b>	0
<b>Isolation Bed</b>	15
<b>Total</b>	67

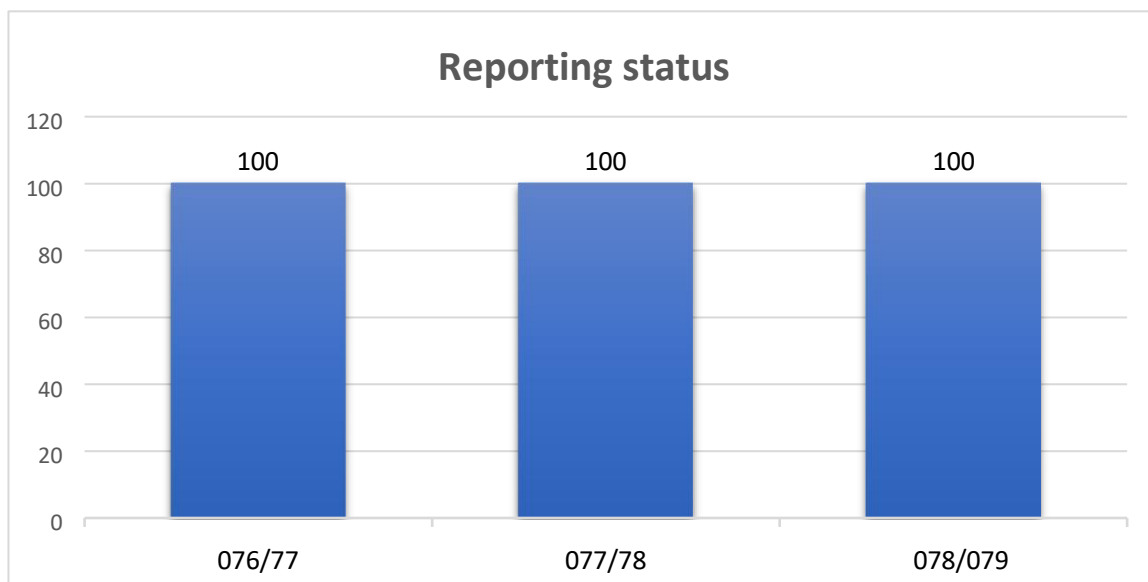
**Table No.2: Hospital Beds**

Still, we lack geriatric beds to handle such types of critical cases. The critical cases were currently referring to Bhairahawa and/or Butwal for further management. All available beds were getting now fulfilled almost all the seasons of the year. Mostly poor and ultra-poor patient who won't be able to go higher center for the treatment are solely depended on the Kapilvastu hospital. The burn cases are also increasing now a day. If separate burn ward is available there would be better for the easy management of burn case.



### 3.3 Hospital HMIS reporting status

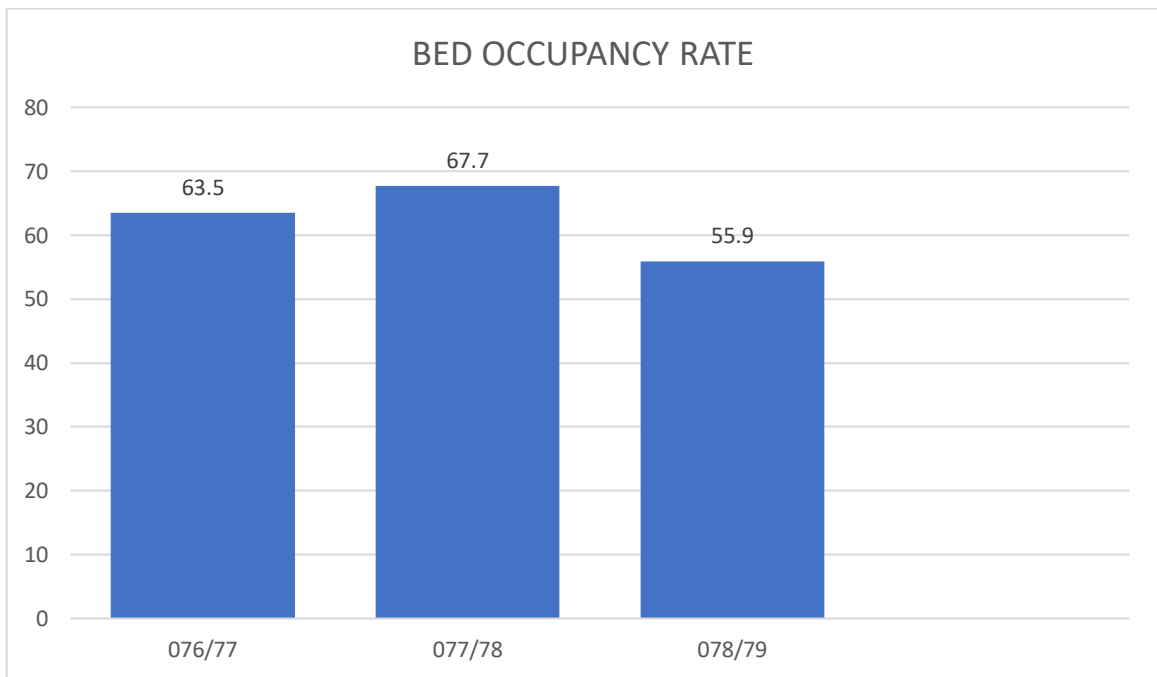
The reporting status of the Kapilvastu hospital was 100% since three fiscal year. Timely entering and submitting of MIS report is important for revealing the major indicator a statistic of the hospital and timely correct if any drawback found. Health indicators are important for measuring the health status of the population. It also helps to measure the hospitals given target vs performance achievement.



**Figure 2. Hospital reporting status**

### 3.4 Bed Occupancy Rate

The bed occupancy rate of the Kapilvastu hospital is very high. The beds of the Kapilvastu hospital were remaining almost fulfilled all of the year. Due to huge patient flow and lack of adequate human resources large number of cases were getting referred from this hospital. Sometime there is no bed left empty during the summer seasons. The bed occupancy rate is high due to large number of cases referring in from nearest PHCCs and Health centers. In the fiscal year 2077/78 the bed occupancy ratio was 67.7% and seen 55.9% in the fiscal year 2078/79.



**Figure 3. Bed occupancy rate**

### 3.5 Average Length of Stay

The average length of hospital stay is different for different cases. The average length of stay of Kapilvastu hospital seems increasing in trend compared to 2.6 in FY 2077/78 to 2.9 in FY 2078/79.

Due to operating of surgical cases and other critical cases the hospital length is increased.

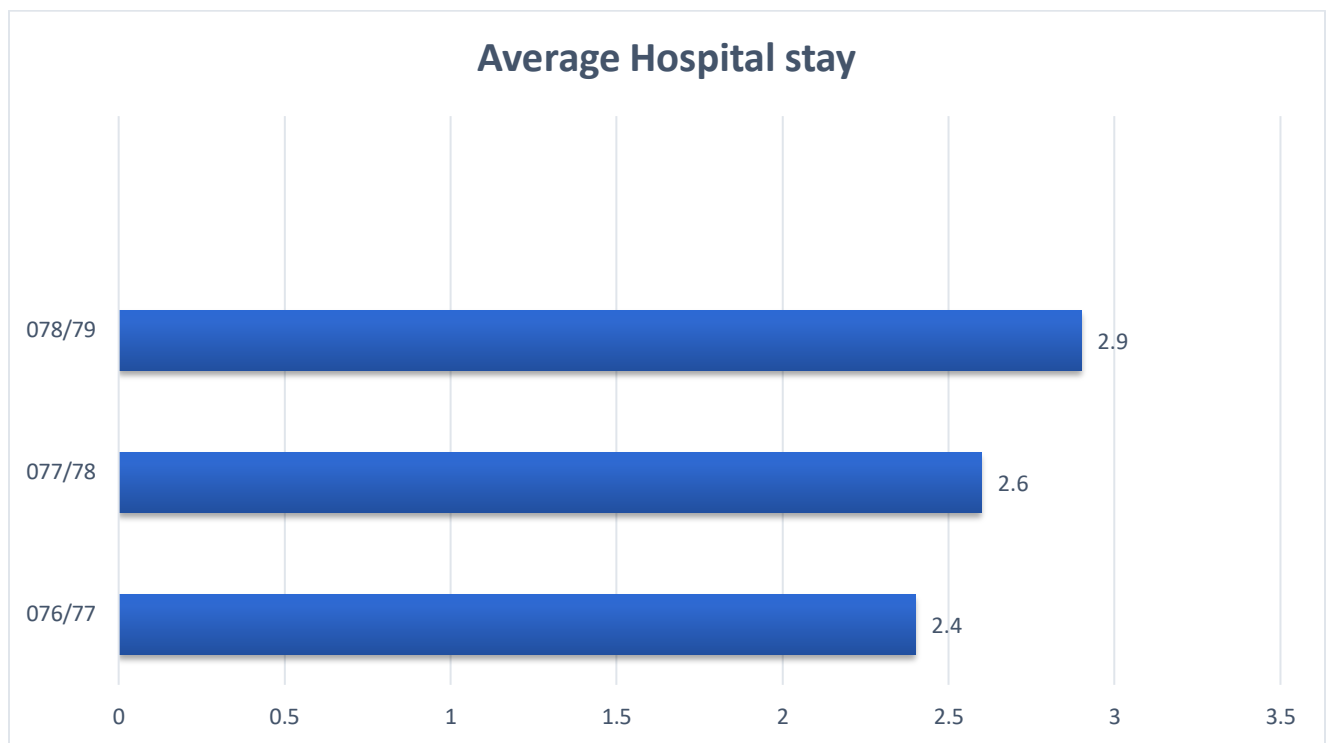


Figure 4: Average length of stay

### 3.6 No of OPD visit

The number of patient and client who were visiting hospital was increasing in trend from FY 2076/77 to 2077/78. However, the increasing trend was paused in FY 2077/78 due to the COVID19 pandemic. Due to increases the knowledge of early diagnosis and timely treatment the OPD visit was in increasing trend. This increasing number was also backed by the health insurance system. The improvement of the OPD token calling system, good toilet facility, adequate waiting area, minimal waiting time and mainly proper medical treatment make them to visit hospital time to time. Increment from 15 bedded hospital to 50 bedded hospital and availability of consultants and medical officer is also responsible for the huge patient flow. MCH and Family Planning Services are also Added in this FY from DHO to District Hospital.

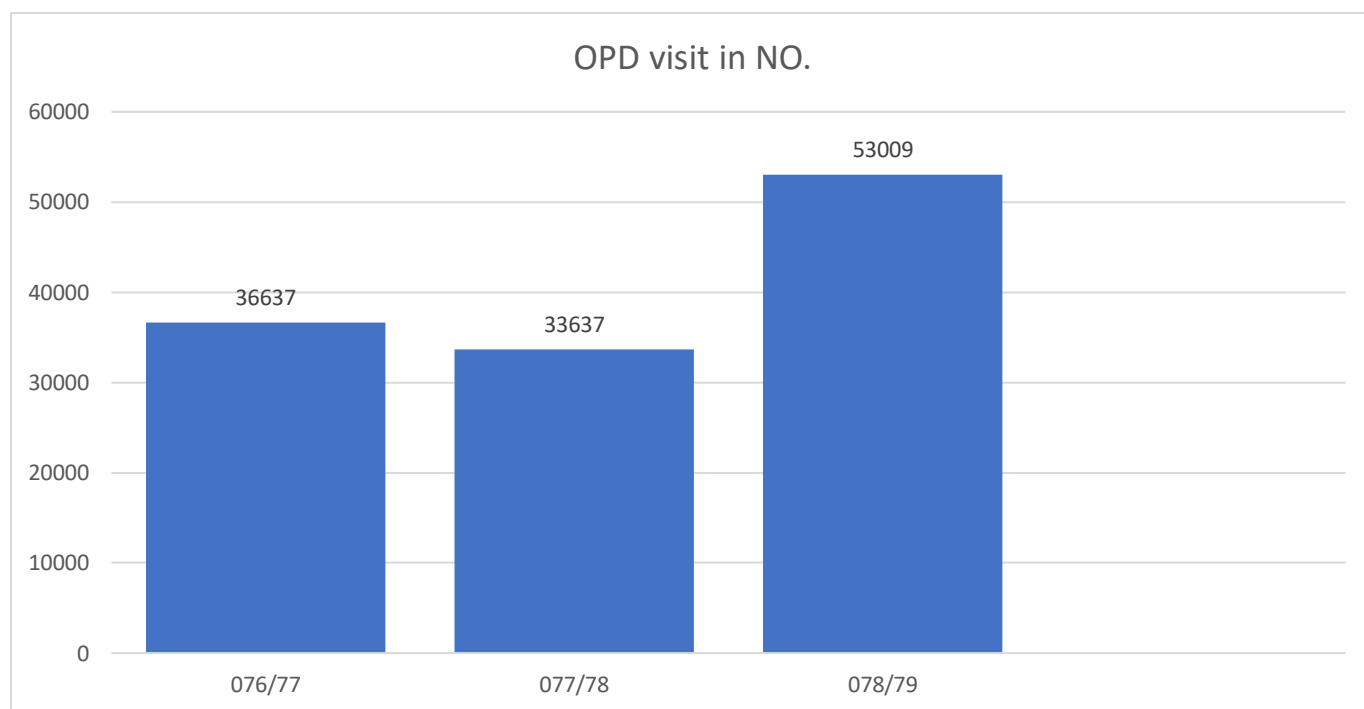


Figure 5. No of OPD visit

### 3.7 OPD proportion

Among total 52918 client served by hospital in FY 078/79 more than 66% of the patient and client were used to visit the OPD department. The trend seems decreasing in number since 2075/76 was 81% to 66% in FY 2077/78.

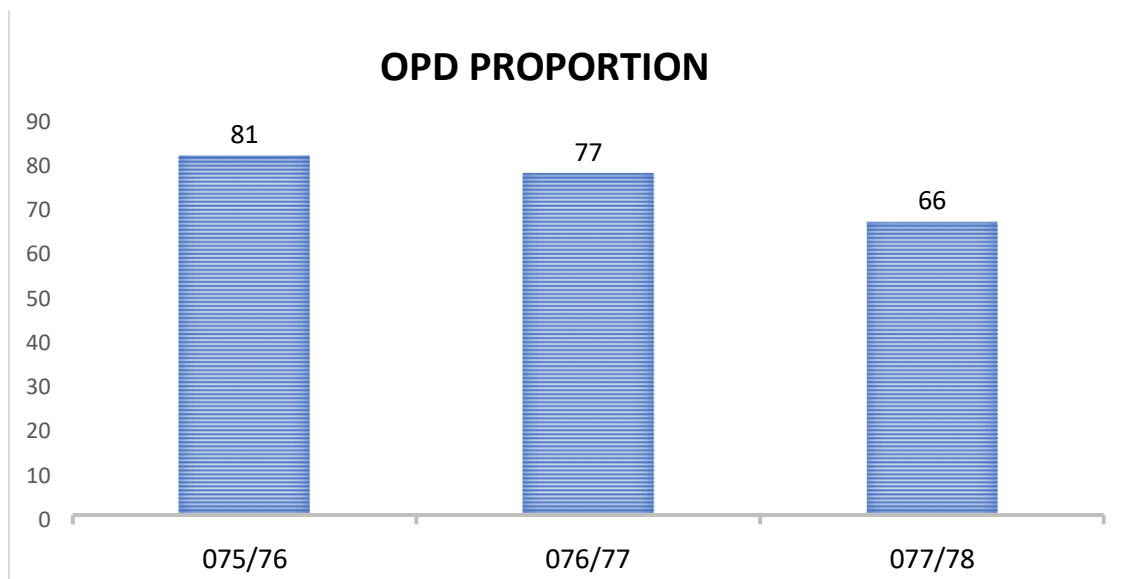


Figure 6. OPD proportion

### 3.8 Top ten OPD morbidity

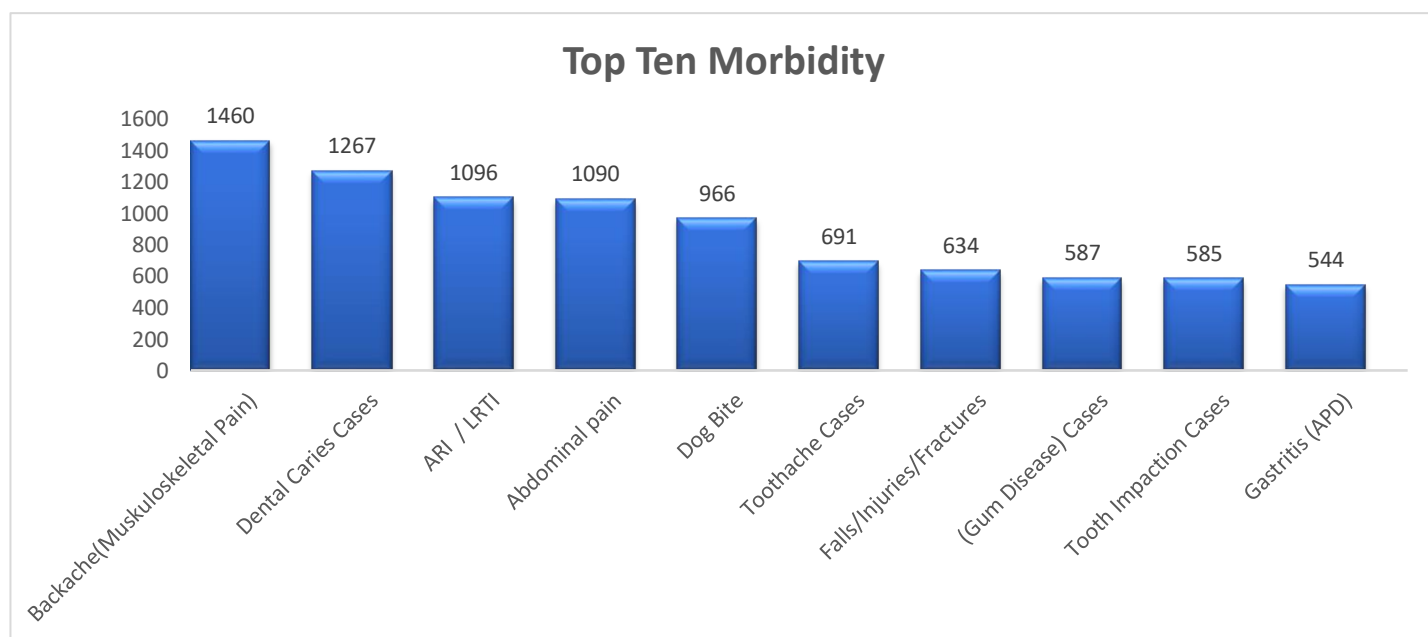


Figure 7: OPD Morbidity

### 3.9 Surgical services:

Surgical procedure done in year 2077/78	Total cases
Minor Procedure-ER	1281
Minor Procedure-IPD	108
Plaster	107
Non-CS (Appendix, Hydrocele, Hernia, Lap & others)	89
LSCS	576
Surgery (Major)	676

Table 3: Surgical Services

#### 3.9.1 Infection among surgical cases

In the Kapilvastu hospital the infection among surgical cases was remained almost 0%. Only in the FY 2075/76 there was minimal post-surgical infection seen among surgery cases. In other FY the infection rate was remained zero. The post-surgical infection is one of the key indicators of the quality of operation services and post-operative care.

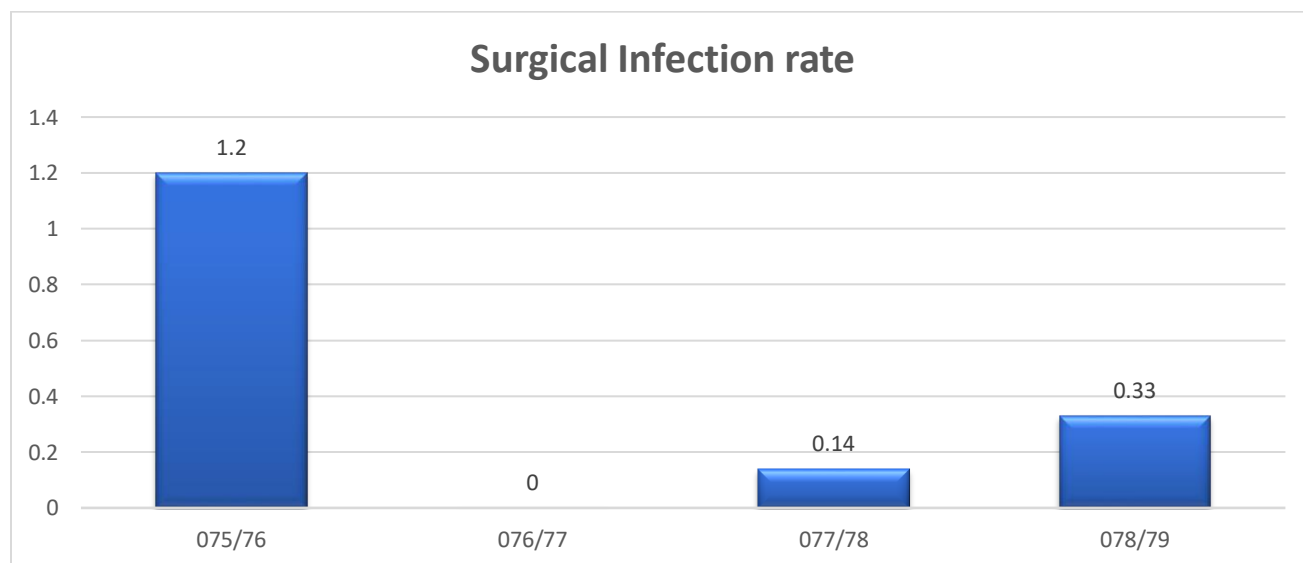
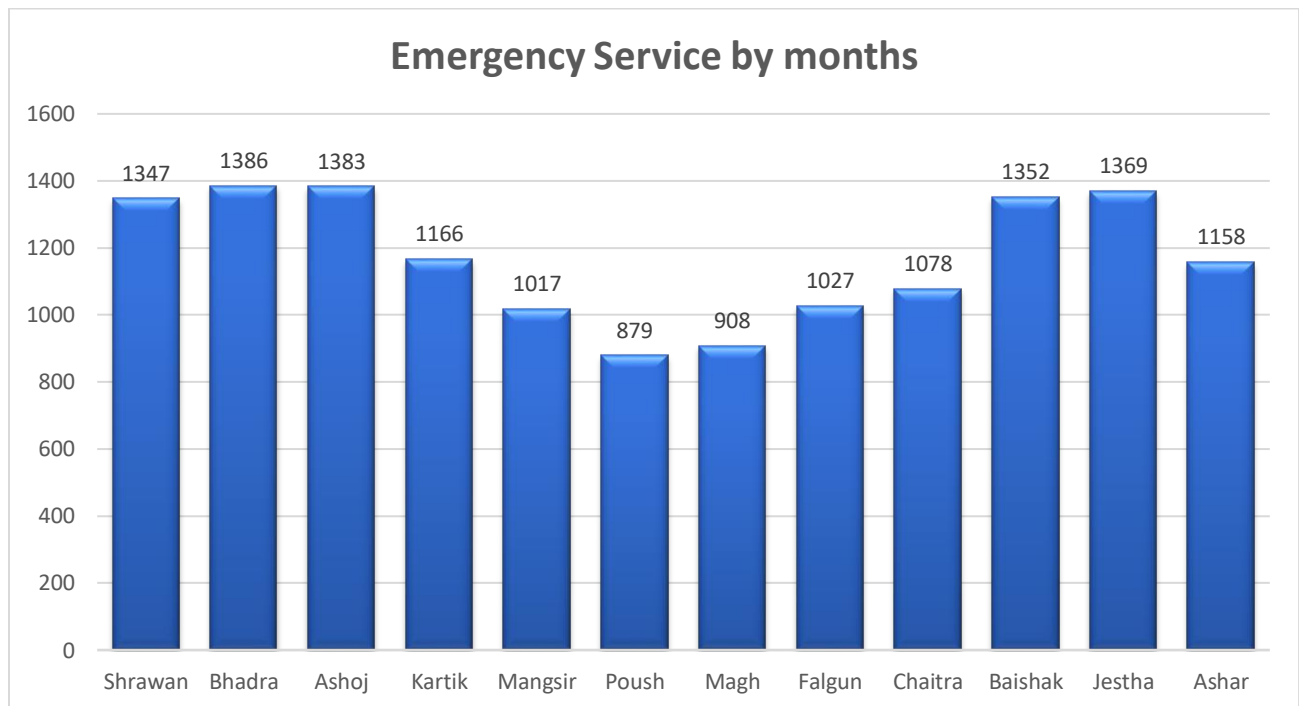


figure 8. Infection among surgical cases

### 3.10 ER service utilization by months

The highest number of emergency service taken from emergency department seen in the month of Jestha followed by Baisakh with 1575 and 1425 respectively. In the month of Bhadra only 614 patients visited to emergency department to get emergency services.



**Figure no. 9: Emergency Service by Months**



### 3.11 Other services provided by hospital

S.NO.	Services provided	2077/78	2078/79
1	USG	6354	8573
2	X-ray	5682	8442
3	ECG	714	1219
4	ARV	5622	6506
5	ICU admission	226	238
6	LSCS	316	572

**Table no.4: Service Provided by Hospital**

### 3.12 Maternity services

Total number of clients visiting hospital for getting safe delivery services were increasing from past three fiscal years. According to data we can see that during the fiscal year 2076/77 the safe delivery services were getting by 1519, In the FY 077/78 safe delivery services is 1733 And the FY 078/079 is 2238 which is quite better than compared to the previous fiscal year. It is also influenced by the incentive provided by the Nepal government. The awareness towards the full institutional delivery policy adopted by the government is also following by the community and people.

<b>Period / Data</b>	<b>Institutional Deliveries Total</b>
<b>Shrawan 2078</b>	201
<b>Bhadra2078</b>	259
<b>Ashwin 2078</b>	200
<b>Kartik 2078</b>	168
<b>Mangsir 2078</b>	155
<b>Poush 2078</b>	156
<b>Magh 2078</b>	188
<b>Falgun 2078</b>	205
<b>Chaitra 2078</b>	166
<b>Baisakh 2079</b>	174
<b>Jestha 2079</b>	186
<b>Asar 2079</b>	180
<b>Total</b>	2238

**Table no.5: Maternity Services**

**No of Delivery and LSCS done FY 2077/78**

<b>Indicators</b>	<b>2076/77</b>	<b>2077/78</b>	<b>2078/79</b>
No of Normal Delivery	1519	1733	2238
Percentage of C/S	8.8%	18.29%	25.55%
No of Abortion (Medical +Surgical)	-	70	153

**Table no.6: No of delivery services performed in hospital**

In the last FY 2077/78 there was no maternal death occur in the hospital. The number of still birth was 57 the neonatal death after birth is very low or none. The maternal death number was also in decreasing in pattern compared to the past fiscal years. The availability of the emergency LSCS services and qualified SBA for delivery service had major role to reduce susceptible maternal and neonatal deaths in Kapilvastu Hospital.

<b>Particular</b>	<b>Number</b>
Number of Maternal Deaths at Hospital	1
Number of Neonatal Death at Hospital	7
Number of Perinatal Deaths in hospital	0
Number of still births / IUFD	80
*Number of early neonatal deaths	7
MPDSR Implementation (Yes/No)	yes
Number of hospital maternal deaths reviewed (MPDSR)	1
Number of hospital perinatal deaths reviewed (MPDSR)	0

**Table no.7: No of maternal and neonatal deaths in Hospital**

### 3.13 Disease control program

#### COVID-19 (SARS-NCOV)

Nobel corona virus is a new variant of SARS-CoV-2 which is new global pandemic and affect whole world in fatal way. It is now becoming the serious obstacle for the health and development. By invention of vaccine the transmission rate of COVID-19 is minimized globally. Some countries like Brazil, USA, India and Italy were hugely affected by this pandemic. Millions of lives were gone and millions were confined in hospitals for a long time. The Kapilvastu hospital is also COVID dedicated hospital to fight against COVID-19. It establishes PCR molecular laboratory for the diagnosis of COVID cases to avoid referring cases to Bhairahawa and Butwal. The separate 15 bedded COVID dedicated hospital was also run simultaneously (2077/78) with Kapilvastu hospital to directly manage and treat the COVID related cases.

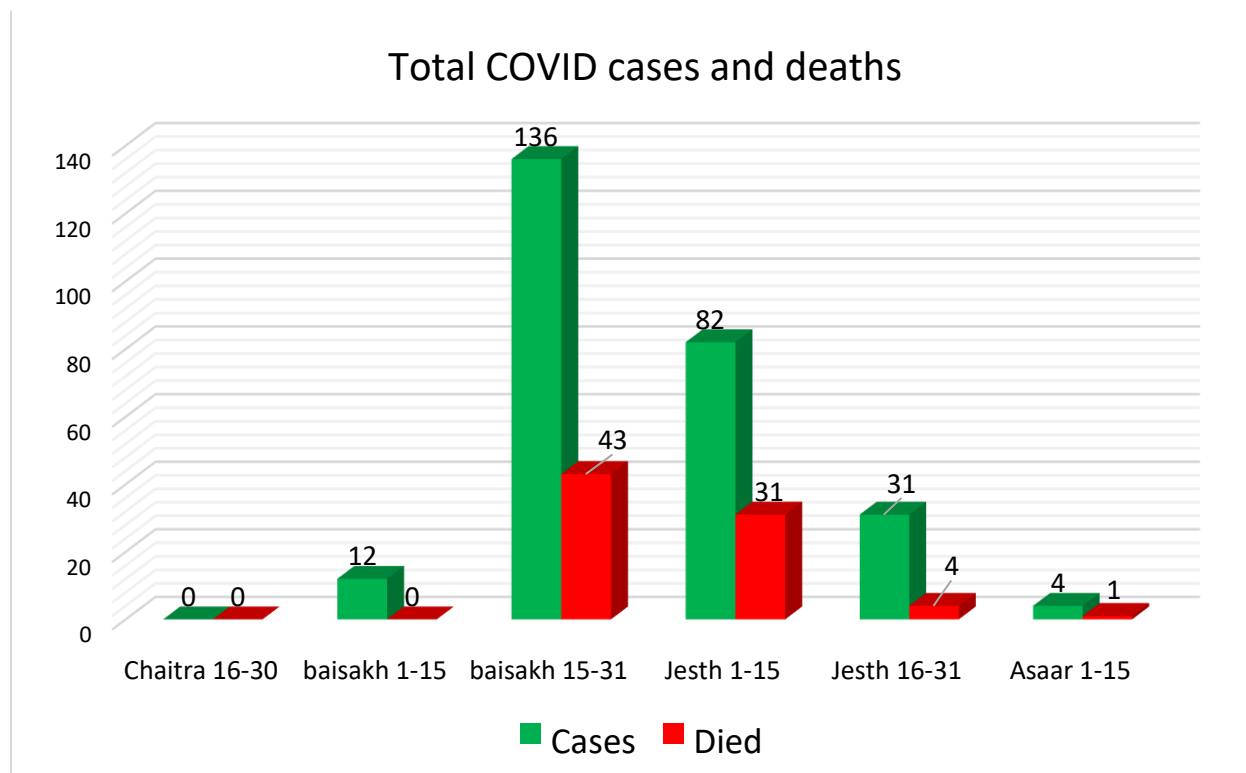
On 2077/78 the PCR lab conducted 1619 total RT-PCR test and among them 830 were diagnosed as the COVID-19 Positive cases. The hospital successfully admitted and treated 265 COVID positive cases however among them 186 cases were cured and discharged from hospital in different time. There were total 79 deaths due to COVID 19 w reported in hospital. Despite limited physical and human resources the hospital successfully tackled against COVID 19.

The Kapilvastu hospital is also involved in fighting against this pandemic since very beginning. The establishment of molecular PCR laboratory and the COVID dedicated hospital is the important achievement of the Kapilvastu hospital.

COVID DATA	TOTAL
TOTAL PCR TESTED	1619
POSITIVE CASES	830

<b>COVID CASES ADMITTED</b>	265
<b>COVID CASES DIED</b>	79
<b>COVID DISCHARGED /CURED</b>	186

**Table no.8: COVID related Facts of Hospital**



**Figure no.10: COVID cases and deaths**

Now a day the patterns of disease are shifting from communicable disease to non-communicable. In the previous decades and centuries large number of communicable diseases exists. However, during the past year, a worldwide pandemic is putting huge impact in the whole world. Millions of people infected and died during this global pandemic. The Kapilvastu hospital collected and Tested 310 slides of malaria in FY 2077/78 among them 0 slides are positive. There were 170 new tuberculosis cases were diagnosed and 422 HIV patient currently enrolled in ART.

<b>Indicators</b>	<b>2077/78</b>	<b>2078/79</b>
Number of blood collected for Malaria test	310	266
Number of slides positive	0	0
Total sputum test	1395	2038
Total Mantoux test	6	150
Total Gene Xpert test	1043	1191
Number of sputum smear positive	170	134
Dengue test	1	-
Total cases of Leprosy	0	4
New HIV cases	18	4177
Total HIV +ve patients on ART	422	455
Total sickle cell anemia patient	0	1049
Total COVID 19 positive cases	830	103

**Table no. 9: Infectious disease cases**

### 3.14 OCMC services

Other medico-legal cases such as hanging, suicide, physical violence, physical assault, and drunkenness were also addressed by the hospital. OCMC service is established in FY 2076/77 in Kapilvastu Hospital since then the OCMC cases were catching and handling by one door management system. There are large number of sexual assaults, Physical assault, Physical violence and other incidents were increasing day by day. Many of these cases were kept in secret and handled by village leaders. In the fiscal year 2078/079 total 80 OCMC cases came to hospital for OCMC services.

Type of Crime	Total number of cases		
	2076/77	2077/78	2078/79
FY			
OCMC site (Yes/No)	YES		
Sexual Assault	76	83	80

**Table no. 10: OCMC services provided**

### 3.15 Medico legal case

Other medico-legal cases such as hanging, suicide, physical violence, physical assault, and drunkenness were also addressed by the hospital. In the past fiscal year there were 163 cases were carried out autopsy.

<b>Medico- Legal Cases</b>														
<b>S N</b>	<b>Service s</b>	<b>Shra wan</b>	<b>Bha dra</b>	<b>Ash oj</b>	<b>K ar</b>	<b>Ma nsir</b>	<b>Po ush</b>	<b>Ma gh</b>	<b>Fal gun</b>	<b>Cha itra</b>	<b>Bais akh</b>	<b>Jestha</b>	<b>As ar</b>	<b>Tot al</b>
1	Autopsy	10	14	14	19	9	12	13	22	17	18	20	23	191
2	Sexual Assault	7	1	1	4	6	17	5	6	1	7	6	3	64
3	Physical Injury	60	34	40	35	24	36	29	38	31	35	58	41	441
4	Drunkenness	10	11	10	13	10	12	10	13	15	10	15	15	145
5	Accident (RTA)	15	12	34	21	28	33	21	17	38	58	42	38	357

**Table no.11: Medico legal cases**



### 3.16 Social service unit

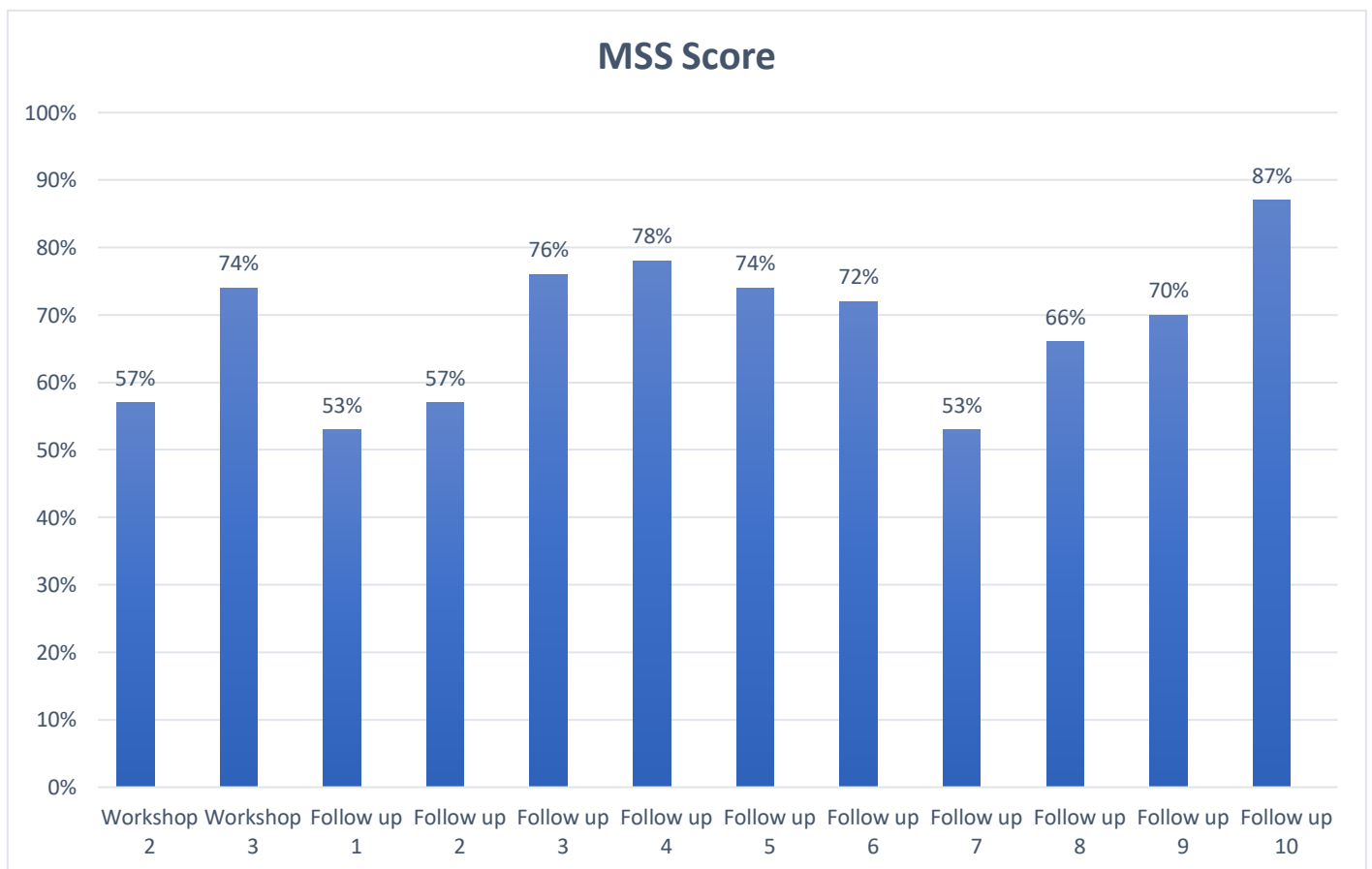
The hospital social service is playing key role to provide the services who could not afford all the services provided by the hospital. The people whose economic status was poor and were marginalized are provided medical examination, laboratory tests and required medicine with free of cost. In the past fiscal year total 451 poor and ultra-poor and 60 FCHV got the medical services from the hospital social service unit.

Target Group	2077/78 TOTAL	2078/79		
		Female	Male	Total
SSU implemented (Yes/No)		YES		
Ultra-Poor and Poor	451	511	247	758
Helpless	47	8	14	22
Person with Disability	80	7	6	13
Senior Citizen	60	20	30	50
OCCMC	97	42	28	70
FCHV	60	7	0	7
PLHIV	76	52	56	108
<b>Total</b>	<b>801</b>	<b>647</b>	<b>381</b>	<b>1028</b>

**Table no.12: Services provided by social service unit**

### 3.17 MSS

The minimum service standard is the standard which necessarily is to be fulfilled by each hospital, assuring they are providing the quality services to the individual. This is the standard set to evaluate and monitor the progress of the hospital in qualitatively and quantitatively. It ensures how the hospital is providing quality of services and provides the right track to achieve the goal. In this year there is no MSS evaluation organized so we included the previous year data. The Kapilvastu hospital achieved highest MSS score which was 87% ( FY 2078/79) Which is the highest Score in Province-5 Sec. A Hospital and minimum score was 46%. The trend shows that the hospital was continuously putting its effort to achieving good MSS score and provide quality of care. There were many task and goals which cannot be achieve by the hospital alone. The Ministry of health, provincial ministry and other sector should need to support to fulfill the highest MSS score.



**Figure no.11: MSS score**

### 3.17.1 Score trend

In some areas the hospital performed great task and achieve highest score such as financial management 88% and governance 85%; Whereas in some areas such as human resource management, hospital support service and organizational management score is 68%, 70%, and 67% respectively. The overall score of MSS obtained by hospital during MSS survey is 70%.

S.N.	Section Name	Number of standards	Maximum score	Obtained score	Obtained percentage
1	Governance	27	27	24	89%
2	Organizational Management	15	15	14	93%
3	Human Resources Management	17	19	15	79%
4	Financial Management	17	17	17	100%
5	Information Management	14	14	13	93%
6	Quality Management	15	17	12	71%
7	Clinical Management	478	682	610	89%
8	Hospital Support Services	138	148	125	84%
	<b>Total</b>	<b>728</b>	<b>939</b>	830	

**Table no.13: MSS score**

### 3.18 Financial Status of Hospital Development Committee

कपिलवस्तु अस्पताल

तौलिहवा कपिलवस्तु

तौलिहवा अस्पताल विकास समितिको वार्षिक आर्थिक विवरण

आ.व.२०७८/०७९

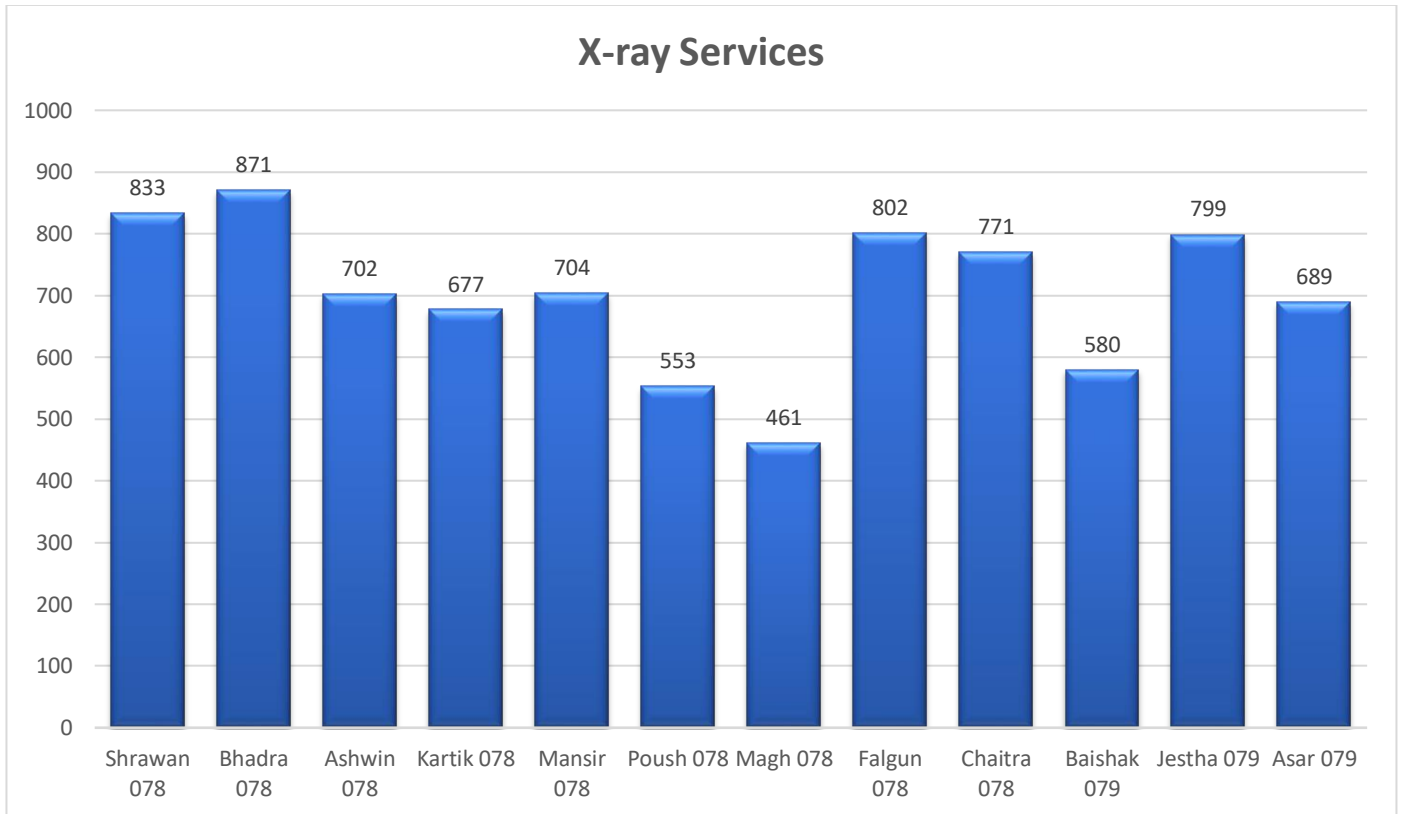
हि.नं.३११०१००२०७०००७०१

रा.वा.बैंक तौलिहवा

क्र.स.	विवरण	आय			व्यय	बाँकी	बाँकी मध्ये			कै.
		गत आ.व.को मौज्दात अ.ल्या.	यस वर्षको आय	जम्मा आय			बैंक स्टेटमेन्ट अनुसार मौज्दात	आ.व.०७८/०७९ साट्न बाँकी रहेको चेकको रकम	खुद मौज्दात	
१	तौलिहवा अस्पताल विकास समिति तर्फ	7027726/82	58092893/77	65120621/19	60196218	4924403/19	4924403/19		4924403/19	
	जम्मा	7027726/82	58092893/77	65120621/19	60196218	4924403/19	4924403/19		4924403/19	

### 3.19 X-Ray

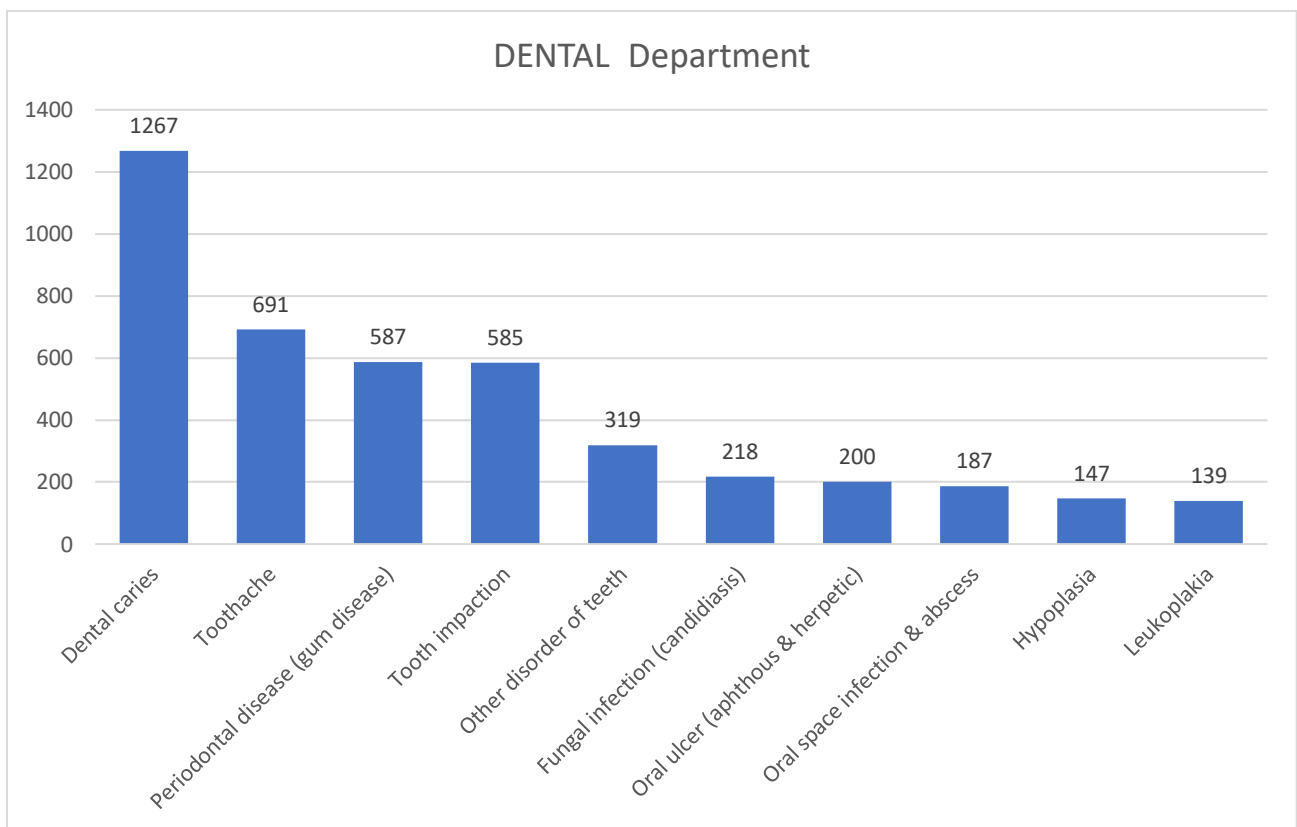
The highest number of X-ray services taken from X-ray Department was seen in the Month Bhadra Followed By Shrawan with 871 and 833 respectively. In the month of magh 461 Patients visited to the X-ray Department to get the Services. The following figure shows the trend of X ray service according to months of F/Y 2078/79.



**Figure no. 12:X-ray Services**

### 3.20 Dental:

Kapilvastu hospital also have dental department which works in the field of oral health of client which serves in curative and preventive means. In the FY 2078/79 The service Provided by the Dental Department is as shown in the Diagram:



**Figure no.13: Dental Department**

### 3.21: IMMUNIZATION:

Maternal and Child Health (MCH) refer to a package of comprehensive Health care services which are developed to meet promotive, preventive, curative, rehabilitative needs of pregnant women before, during and after delivery and Infant, pre-school children from Birth to 5 years. In FY 2078/79 the service provided by MCH about IMMUNIZATION is shown in the diagram.

खोपको प्रकार	बि.सी.जी.	डी.पी.टी हेप वि -हिब.	पोलियो	पी.सी.भी	रोटा	एफ.आइ.पी.भी	दादुरारूबेल	जे.ई.१२ महिना	Typhoid	
खोप पाएका बच्चाहरूको संख्या	७९४	१७५५	१७५७	१७३८	१२४८	१६३६	१०२६	४९९	१२४	
खोप( डोज)	प्राप्त भएको	१२२०	१९४०	१९३०	१८४६	१२५१	१३६५	१३३०	६००	१३०
	खर्च भएको	१२२०	१९४०	१९३०	१८४६	१२५१	१३६५	१३३०	६००	१३०

Along this cholera medicine & elephantids medicine also distributed.

**Table no.14: immunization**

### 3.22: Tuberculosis:

Tuberculosis (TB) is a communicable disease that is major public health problem in this region. Kapilvastu hospital also serve as a DOTS center and also acts as diagnostic function for tuberculosis. Here shows the progressive work of kapilvastu hospital in this FY 2078/79.

New TB cases		Medicine Taken		Total curried
New	Relapese	New	Replese	
45	3	26	22	14

**Table no.15: Tuberculosis**

### 3.23: Family Planning:

Family planning is one of the public health services provided by Kapilvastu hospital to the community people. Here we serve by counseling, service providing and after care for all five types of family planning methods. The following chart shows client served by family planning department in the F/Y 2078/79.

**Condom : 8100**

Short Term				LARC			
Pills		Depo		Iplant		IUCD	
New user	Current user	New user	Current user	New user	Current user	New user	Current user
<b>46</b>	<b>53</b>	<b>118</b>	<b>193</b>	<b>133</b>	<b>1504</b>	<b>6</b>	<b>845</b>

Table no.16: Family Planning

### 3.24: HIV

#### PMTCT

Counseling	Tested	Positive	Negative
<b>648</b>	<b>648</b>	<b>0</b>	<b>648</b>

New client	Current client	Medicine Taken	
<b>30</b>	<b>454</b>	1 <sup>st</sup> line	2 <sup>nd</sup> line
		<b>442</b>	<b>12</b>

Table no. 17: HIV



## PART IV

### कपिलबस्तु अस्पतालमा कार्यरत कर्मचारीहरुको बिबरण

क्र.स.	कर्मचारीको प्रकार	नाम	पद	फोन न
1	स्थायी कर्मचारी	डा. किशोर बन्जाडे	अ.दशौ	
2	स्थायी कर्मचारी	त्रिपुरी चाई	अ.छैठौ	
3	स्थायी कर्मचारी	बिसर्जन शर्मा	अ.छैठौ	
4	स्थायी कर्मचारी	खिमाकुमारी पौडेल	अ.छैठौ	
5	स्थायी कर्मचारी	आशा थापा	स. पाचौ	
6	स्थायी कर्मचारी	राकेश कुमार शाह	स. पाचौ	
7	स्थायी कर्मचारी	योगेन्द्र नाथ चौधरी	स. पाचौ	
8	स्थायी कर्मचारी	प्रियंका चौधरी	स. पाचौ	
9	स्थायी कर्मचारी	कान्ती डफाली	का.स.पाचौ	
10	स्थायी कर्मचारी	भरत कहार	का.स.पाचौ	
11	स्थायी कर्मचारी	विश्वम्भर रैदास	का.स.पाचौ	
12	स्थायी कर्मचारी	रामधनी यादव	का.स.पाचौ	
13	स्थायी कर्मचारी	जगदीश कहार	का.स.पाचौ	
14	स्थायी कर्मचारी	सरिता उपाध्याय	का.स.पाचौ	
15	स्थायी कर्मचारी	सुरेन्द्र सिंह	का.स.पाचौ	
16	स्थायी कर्मचारी	लक्ष्मी न्यौपाने	का.स.पाचौ	
17	कार्यक्रम / अस्थायी दरवन्दी	डा. गणेश क्षेत्री	आ.आठौँ	
18	अस्थायी दरवन्दी	डा.अभिषेक श्रीवास्तव	आ.आठौँ	
19	अस्थायी दरवन्दी	डा.रमित पाण्डेय	आ.आठौँ	
20	अस्थायी दरवन्दी	सन्दीप कुमार यादव	हे.अ.	

21	अस्थायी दरवन्दी	उमेश कुमार चौधरी कुर्मी	स. पाचौ	
22	अस्थायी दरवन्दी	संगीता छतकुली	स. पाचौ	

23	अस्थायी दरवन्दी	पुजा थापा	स. पाचौ	
24	अस्थायी दरवन्दी	रबिना क्षेत्री	स. पाचौ	
25	अस्थायी दरवन्दी	आयूष्मा आर्याल	स. पाचौ	
26	अस्थायी दरवन्दी	समिक्षा चौबे	स. चौथो	
27	अस्थायी दरवन्दी	रागिनी पाण्डेय	स. चौथो	
28	अस्थायी दरवन्दी	सबिता श्रीमाला	स. चौथो	
29	अस्थायी दरवन्दी	मधु पाण्डेय	स. चौथो	
30	अस्थायी दरवन्दी	अबिदा खातून	स्वीपर	
31	अस्थायी दरवन्दी	रानी वालमिकी	का.स.	
32	अस्थायी दरवन्दी	राज कुमार पासी	का.स.	
33	अस्थायी दरवन्दी	घनश्याम कान्दु	ह.स.च	
34	स्तर उन्नती	डा.जावेद अहमद खाँ	आ.नवौ	
35	स्तर उन्नती	डा.अजय कुमार चौधरी	आ.नवौ	
36	स्तर उन्नती	डा.शाहजाद मोहम्मद खाँ	आ.नवौ	
37	स्तर उन्नती	डा.सददाम हुसेन खाँ	आ.आठौँ	
38	स्तर उन्नती	डा.खरेन्द्र चौधरी	आ.आठौँ	
39	स्तर उन्नती	डा.अमूल्य कुमार पाठक	आ.आठौँ	
40	स्तर उन्नती	डा.सबिना खान	आ.आठौँ	
41	स्तर उन्नती	डा.प्रतिक्षा पौडेल	आ.आठौँ	
42	स्तर उन्नती	धर्मेन्द्र उपाध्याय	आ.सातौँ	
43	स्तर उन्नती	बिरेन्द्र प्रसाद गुप्ता	आ.सातौँ	

44	स्तर उन्नती	लिला शर्मा	आ.सातौं	
45	स्तर उन्नती	सुमित लाल कर्ण	आ.सातौं	
46	स्तर उन्नती	अंकिता चौधरी	स. पाचौ	
47	स्तर उन्नती	राहुल कुमार चौधरी	स. पाचौ	

48	स्तर उन्नती	शैलेन्द्र तिमिल्सेना	स. पाचौ	
49	स्तर उन्नती	अनुषा सुबेदी	स. पाचौ	
50	स्तर उन्नती	पूजा चौधरी	स. पाचौ	
51	स्तर उन्नती	बन्धना उपाध्याय	स. पाचौ	
52	स्तर उन्नती	सृष्टी आचार्य	स. पाचौ	
53	स्तर उन्नती	पुनम यादव	स. पाचौ	
54	स्तर उन्नती	अम्बिका चौधरी	स. पाचौ	
55	स्तर उन्नती	दिनेश यादव	स. पाचौ	
56	स्तर उन्नती	सीमा पटहर	स.चौथो	
57	स्तर उन्नती	अनिता गुप्ता	स.चौथो	
58	स्तर उन्नती	नीलम चौधरी	स.चौथो	
59	स्तर उन्नती	सम्झना बरौले	स.चौथो	
60	स्तर उन्नती	राम कुमार तेली	स.चौथो	
61	छात्रवृत्ति	डा.प्रशंसा गुरुड	आ.नवौ	
62	छात्रवृत्ति	डा. द्रोणा कार्की	आ.आठौं	
63	छात्रवृत्ति	डा.सुर्य प्रताप रैदास	आ.आठौं	
64	अन्य	धिरेन्द्र प्रसाद पाठक	हेल्पर स्वीपर	
65	अन्य	विजय कुमार यादव	हेल्पर स्वीपर	
66	अन्य	गोबिन्द पाठक	हेल्पर स्वीपर	

67	अन्य	विनोद कुमार चाई	हेल्पर स्वीपर	
68	अन्य	त्रिबेणी यादव	हेल्पर स्वीपर	
69	अन्य	बलिराम यादव	स. चौथो	
70	अन्य	सीमा चौधरी	स. चौथो	
71	अन्य	आरती के.सि.(आचार्य)	स. चौथो	
72	कार्यक्रम तथा ज्यालादारी	दुर्गेश पासी	हेल्पर स्वीपर	
73	कार्यक्रम तथा ज्यालादारी	राम विनोद पसी	हेल्पर स्वीपर	
74	कार्यक्रम तथा ज्यालादारी	गुड्डु पासी	हेल्पर स्वीपर	
75	कार्यक्रम तथा ज्यालादारी	सकुरुन निशा	हेल्पर स्वीपर	
76	कार्यक्रम तथा ज्यालादारी	ओम प्रकाश वाणीया	हेल्पर स्वीपर	
77	कार्यक्रम तथा ज्यालादारी	सहसराम धोबी	हेल्पर स्वीपर	
78	कार्यक्रम तथा ज्यालादारी	अमर दिप गुप्ता	का.स.	
79	कार्यक्रम तथा ज्यालादारी	सुनिता उपाध्याय	हेल्पर स्वीपर	
80	कार्यक्रम तथा ज्यालादारी	राजेश कुमार डफाली	हेल्पर स्वीपर	

समिति अन्तर्गत कार्यरत कर्मचारिहरुको बिबरण

सि.नं.	नामथर	दर्जा	फोन नं.
1	रत्नाकर शुक्ला	आ.व्या.	
2	बिरेन्द्र बहादुर सिंह	ह.स.च.	
3	मनबहाल धोबी	धोबी	
4	बजरंगी वि.क.	का.स.	
5	शैलेन्द्र कुमार गुप्ता	सि.अ.हे.व.	
6	सुकमाया थापा	सि.अ.न.मी.	
7	बृजेश पाण्डेय	सि.अ.हे.व.	
8	सक्टू चौधरी	सि.अ.हे.व.	
9	प्रवीण कुमार मिश्र	सि.अ.हे.व.	
10	उग्रसेन मुराऊ	सि.अ.हे.व.	
11	महेश रानाभाट	फार्मेसी स.	
12	दुर्गेश रैदास	का.स.	
13	दिलीप कुमार धवल	ल्याब अ.	
14	राजेश कुमार कुर्मी	फार्मेसी स.	
15	सरोज चौधरी	यू.एस.जी.स.	
16	विनोद बरई	काउन्टर स.	
17	पशुपति प्रसाद चौधरी	हे.अ.	
18	सीता ठाकुर	अ.हे.व.	
19	विष्णु कुमार केवट	फार्मेसी स.	
20	रीता दफाली	स्वीपर	
21	सन्दीप कुमार दुबे	का.स.	

22	शैलेन्द्र कुमार खरबिन्द	अ.हे.व.	
23	लक्ष्मी के.सी.	हे.अ	
24	आनन्द सागर यादव	एक्सरे स.	
25	सत्य देव प्रसाद द्विवेदी	का.स.	
26	कविता कुर्मी	ल्याब अ.	
27	इरबान खॉन पठान	अ.हे.व.	
28	सन्तोष कुमार चौधरी	स्टोर स.	
29	सोनु चाई	लेखा स.	
30	भिमा कुमारी खत्री	फिजियो स.	
31	कमल कहाँर	भान्सा	
32	यमुना भण्डारी	काउन्टर. सहयोगी	
33	वेद प्रकाश गैरे	ईले.स.	
34	ओम प्रकाश गुप्ता	का.स.	
35	हलिमा खातुन	हे.अ.	
36	दीपक कोहार	का.स.	
37	जगराम धोबी	स्वीपर	
38	प्रिती त्रिपाठी	फार्मेसी स.	
39	मनिषा सिंह	प्रशासन. स.	

## PART V

### Photo Gallery / Appendix

**Ticket counter and Cash counter**



**OPD checkup**





## Dental Department



## General Ward



Picture 1





Picture 2

**Doctor demonstrating Nebulization**



Picture1



Picture 2



**Physiotherapy**



Picture 1



Picture 2

ICU



Picture 1



Picture 2



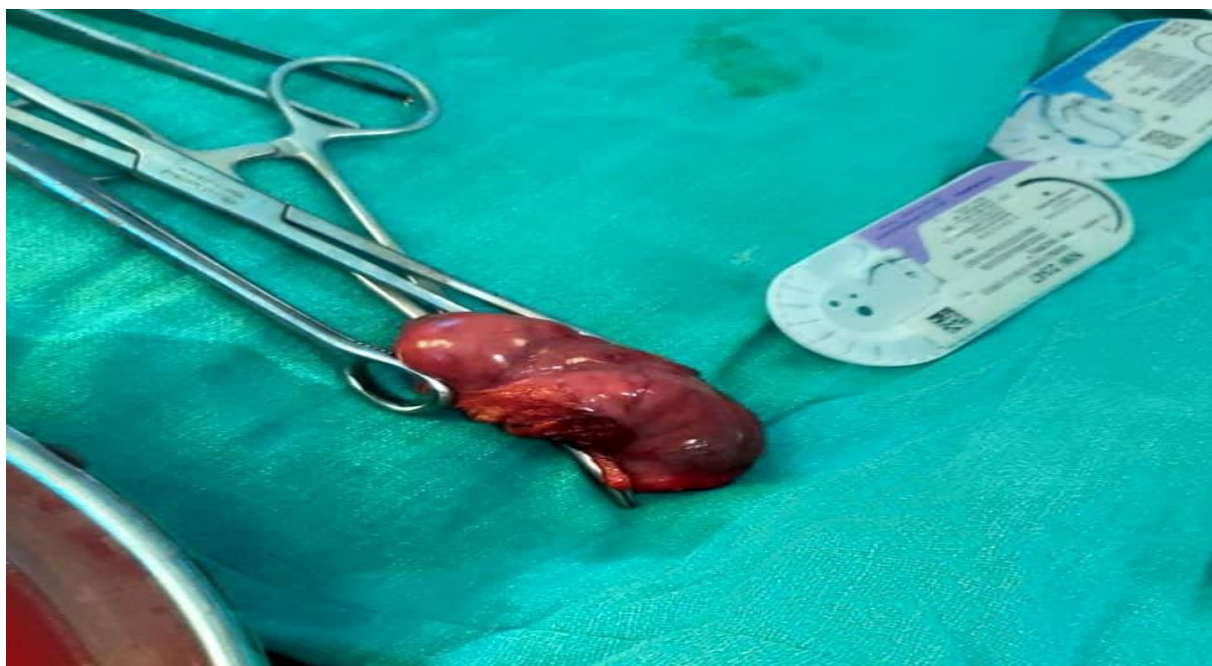


**Orthopedic OT**

## Open Cholecystectomy Done successfully



**Picture 1**



**Picture 2**



**(Previous 3 LSCS mother) 4<sup>th</sup> LSCS done successfully**



## Newly constructed Staff Quarter



कोरोना संक्रमितआमाको शल्यक्रिया हुँदै





बिदाई तथा स्वागत कार्यक्रम



अस्पताल फार्मसी



## Lab Services Reporting



## Lab Services





## Emergency Department with Triage



Picture 1



Picture 2

## Ultrasound (USG)



कोरोन संक्रमित कर्मचारी बाट प्लाज्मा दान कार्यक्रम





## X-ray Department



## MCH Clinic



Picture 1



Picture 2

## Oxygen Plant



Picture 1





Picture 2

**First Triplet Babies born by LSCS**



Picture 1





Picture 2







**ओ.पि.डी. चिकित्सकहरु** कपिलवस्तु अस्पताल



**नर्सिङ्ग कर्मचारीहरू** कपिलवस्तु अस्पताल

