Need Assessment and recommendation for development of Human Resource Information Management System in Health Sector

1. Background

The Constitution of Nepal has set health as a fundamental right of the people and ensures universal health coverage. Three tiers of governments have responsibilities to make the health services available to all the citizens of Nepal. The consolidated and coordinated effort of the three tiers of government to operationalize the health plan is explicitly mentioned in the schedules of the constitutions. Nepal National Health Policy, 2014 has been introduced to promote, preserve, improve and rehabilitate the health of the people by preserving the earlier achievement, appropriately addressing the existing and newly emerging challenges and by optimally mobilizing all necessary resources through a publicly accountable efficient management. Similarly Nepal Health Sector Strategy (2016-20) has emphasized the equitable distribution of human resources in health as well as overall HR development.

To this end, human resource management in health plays crucial role to materialize the vision of health policy and the constitution on top. Being a building block of the health system, Human Resource in Health (HRH) has to be documented, distributed, developed, retained and projected well for sustainable, efficient and effective health services. Reliable data on the health workforce is a prerequisite for evidence-informed policy making and decisions. Ministry of Health and Population (MoHP) is facing challenges in reporting and publishing a full account of the HRH situation essentially needed for HR management.

In present scenario of federal context, the functions of Ministry of Health and Population has been decentralized mainly on policy and planning, human resource management, financing and financial management and monitoring and evaluation. The regulations for HR management are in process of formulation. The institutional structure of health system is developed but part of HR management remained under consideration. Thus, new laws and regulations will elaborate the overall management of HRH including norms for distribution complying to federal structure.

Human resources are being produced within and outside the country. Various agencies are interlinked and exchange human resources. There are three tiers of health service governing institutions namely federal MoHP, autonomous councils and institutions, Provincial Ministry of Social Development, division/district levels and Local Municipalities. Service delivery institutions include disease or service specific centres, hospitals, community HFs, diagnostic centres, laboratories and pharmaceutical agencies. Health professionals are also shared among public, private and NGO sectors.

In regard to information systems there are routine information systems that provide data on health service use and utilization, HR management, logistics and infrastructure. HR management information is partially computer based. Health Facility Survey provides information on HR situation in general, but-ad hoc in nature. Human Resource Information System (HuRIS) is operating in the MoHP but under-utilized.
National Health Workforce Registry, initiated by Ministry of Health and Population (MoHP) Nepal is an health intervention aimed to collect, manage, disseminate and use HR information in Health to satisfy information need for HR planning, management, monitoring and project HR needs for health sector and monitor to advance Universal Health Coverage, Sustainable Development Goals and other health objectives.

This need assessment aims to support invent or re-invent the technology based human resource management in the health sector. It also aims to identify current practice of HR management and recommend solutions for use of ICT in health sector for sustainable HRM.

2. **Objectives**

2.1 **General Objective**

The broad objective of this assessment is to explore current and future needs of information for HR management and recommend feasible and viable IT based solutions for HR data management and process simplification and automation.

2.2 **Specific Objectives**

- To audit Human Resource Information Management Systems developed and rolled out in the past and examine their relevancy and compatibility in the three tiers of public health system.
- To assess end user’s requirement and find the solutions for establishing HRM information system at all three tiers of the government complying with rules and regulation for the staffs.
- To find solutions for HR data sharing among public, private and NGO sectors.
- To design structural framework for development of integrated software system, data management system and roadmap for rolling out.
- To adopt eHealth vision regards to inter-operability with HF and Service Registries.
- To Suggest solution for all levels of government in use of technology for HR management.

3. **Scope of the work**

The scopes of the work to be focused are;

- Situation and system analysis of existing HR information management in the MoHP and its network and data sources.
- Review of existing rules, regulations and norms on HR management in health and civil service wherever health system relates.
- Recommend for the feasible and workable model for IT based HR management information system, software and IT infrastructure.
- Develop model for integrating HR data from Health Workforce Registry, Civil Personnel Records, councils and academic institutions and solutions for health sector HR inventory development, projection and management
- Develop model for HR information system to facilitate system automation to manage routine work on HR management, remuneration and financial arrangement.
- Suggest model for HRH data sharing among governance and service delivery layers of the health system
- Support with advice the implementation of recommendations made in the assessment.
4. **Deliverables**

- Inception report
- Interim report
- Three copies of hard copy final reports
- Soft copies of the reports
- Presentations used during dissemination

5. **Methodology**

Human resource in health is one of the building blocks as defined by WHO. A large portion of public sector employee is shared by health system. MoHP is managing human resources amidst complexity caused by diverse professionals and large number of health institutions spatially distributed across the country. A large number of HR is also shared by private sectors. Educational and academic institutions in the country and beyond are producing HR absorbed by the health system. Thus there is wide network of HR producer and employer in the health. Thus, combination of methodology, methods and techniques has to be applied for accomplishing the work.

1. Document review (Health policy, NHSS, HR rules, regulations, norms, organizational structure and other relevant)
2. Observation of IT infrastructure, HR capacity in IT and information management systems
3. Key informant interview
4. Meeting and interviews with key persons in MoHP, provinces, selected municipalities and stakeholders
5. Site visits to MoHP, DoHS, MoFAGA, Provincial MoSD, Line Ministries, Staff college, sampled municipalities, councils and training and academic institutions
6. Consultation meetings
7. Workshops
8. Dissemination meeting

6. **Timeframe**

The duration of the assessment is four months effective from October, 2018 to January, 2019.

7. **Institutional competency and experts**

The service provider institution should have;

- Better understanding and proven experience of HR and organization assessment;
- Better understanding of electronic environment;
- Excellent understanding of server management and cloud storage;
- Understanding of HR software architecture and functionalities;
- Understanding of federal governance and service delivery structure of the health system;
- Roaster of experts (minimum five mentioned below);
- Experienced team leader;
- Readiness to take responsibility of viability, feasibility and applicability of the recommendations;
Service provider institution should have a team lead having excellent academic background and sufficient relevant experience. A mix of professionals is needed for the work due to cross-cutting nature of the work extending from public health, medicine, IT, HR, finance and public policy. Following are the minimum categories of team members in needed to accomplish the work.

- Public Health System Expert
- Hospital management expert
- IT Expert
- Database Expert
- Human Resource Expert
- Legal Expert on civil service and health services HR management
- Finance expert

8. **Budget and Payment modalities**

World Health Organization will bear the cost of the assessment. The payment will be done in three installments. First installment of 25% will be provided when inception report is received and justification for initial payment provided through Ministry of Health and Population (MoHP). Second payment of 50% will be done when interim report is approved by MoH and recommended. Last payment of 25% will be made when final report is received after completion of work. The MoH focal point for HRM should recommend for the payment.

9. **Evaluation Criteria**

An evaluation team in WHO country office will evaluate the technical and financial proposal on the basis of ToR, other specific criteria and the following documents;

**Technical Evaluation:**
1. Institutional profile
2. Institutional experience
3. Work plan and team mobilization plan
4. Qualification and experience of at least eight professionals including team lead
5. CVs of all personnel proposed

**Financial Evaluation**
1. Professional fees
2. Software development and testing cost
3. MTot participation cost
4. Total cost (taxes separately mentioned)
5. Mode of payment (if mentioned other than ToR)

Other terms and conditions are applied as per terms of reference and WHO’s rules and regulations.