

Nepal Asset Map (At-a-Glance)

Simulation Exercise (n/a)

Transition plan expected by Q4 2017

Below is a summary of Nepal's polio programme's resources and the contributions made by the GPEI to this and other health initiatives in the country: It provides overview of the GPEI funding rampdown for Nepal from 2016 to 2019, and a summary of a stakeholder mapping exercise conducted in 2015 that identifies potential donors for Nepal. This page also provides a summary of all GPEI funded assets in the country supporting polio programme activities, including human resources and physical assets

General Information Overview

GPEI Funding Ramp Down information	Stakeholder Mapping: Donors that have prioritized Nepal											
<p>Funding Amount (USD)</p> <table border="1"> <caption>Funding Amount (USD)</caption> <thead> <tr> <th>Year</th> <th>Funding Amount (USD)</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>3,504,000</td> </tr> <tr> <td>2017</td> <td>3,036,000</td> </tr> <tr> <td>2018</td> <td>1,129,000</td> </tr> <tr> <td>2019</td> <td>1,044,000</td> </tr> </tbody> </table>	Year	Funding Amount (USD)	2016	3,504,000	2017	3,036,000	2018	1,129,000	2019	1,044,000	1. Confirmed prioritization of polio transition in this country	n/a
	Year	Funding Amount (USD)										
	2016	3,504,000										
2017	3,036,000											
2018	1,129,000											
2019	1,044,000											
2. Overall donor prioritization of health outcomes in this country, not necessarily specific to polio transition	United States, Germany											
<p>GPEI budget for polio eradication efforts in Nepal from 2016-2019 shows a decrease in the budget from \$3,504,000 to \$1,044,000, which is an 70% decrease in funding from 2016 to 2019</p>												

Asset Mapping Data Overview

As of February 2017

The WHO Program for Immunization Preventable Diseases (IPD) in Nepal is was originally established in 1998 for polio eradication, concentrating on active surveillance. In 2003 IPD expanded its area of work to include in addition to surveillance for suspected measles and rubella, acute encephalitis syndrome (suspected Japanese Encephalitis), and neonatal tetanus. WHO IPD Central is situated in an office in the Child Health Division building of the Ministry of Health, at Teku, Kathmandu, and in the field in selected districts. The total extent of the network is shown below:

A. Polio Funded Personnel

Job title/Functions	Number	Location
Technical Officers	6	WHO Central Office- Teku
Support Staff	6	WHO Central Office- Teku
Drivers	4	WHO Central Office- Teku
Totals	16	
Surveillance Medical Officers	15	Field offices
Drivers	15	Field offices
Administrative and finance officers	11	Field offices
Totals	41	11 field offices

B. Physical Assets

Offices	Number	Location	Comment
Kathmandu WHO IPD Central Office	1	Teku	n/a
Field offices	11	selected districts	staffed with 1 SMO, 1 admin staff, 1 driver
In 4 of the 11 field offices, there are two SMOs sharing the office facilities and allocated to different districts			
Other Physical Assets			
Vehicles with radio sets			
Motorbikes			
IT Equipment- desktop, laptop, printers, faxes, servers , backup systems photocopiers and Acs			
Communication equipment – telephone, GPN, smartphone , satellite phones and VHF and hand radio sets			