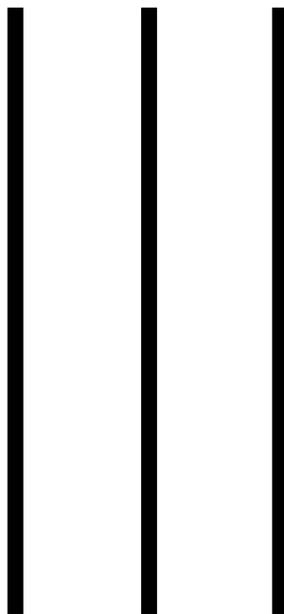


**Geriatric Health Service Strategy
2078/79 to 2086/87 - (2021-2030)”**



Government of Nepal
Ministry of Health and Population
Ramshah Path, Kathmandu
2022

1. Introduction

1.1 Background

Increasing life expectancy and the ageing structure of the population in Nepal reflects progress in human development, and has humanitarian, social and health implications. The Constitution of Nepal has made provision for equal access to health services for all citizens and provides senior citizens the right to special protection and social security from the State.

In 2004, the Government initiated the state-funded senior citizen healthcare service programme. This programme included free medical services for senior citizens and the “Senior Citizens Health Facilities Fund”. The Senior Citizens Act of 2006 includes provisions for the protection and social security of senior citizens including health services.

In 2010, “*Aarogya Ashram*” for senior citizens was introduced, but achieved limited coverage. Constrained financial resources, weak institutional and service delivery capacity has left the health needs of senior citizens largely unmet.

An equitable and inclusive health system is a Government priority and reflected in the National Health Policy, 2019, the Fifteenth Plan (2019/20 to 2024/25) and the Gender Equality and Social Inclusion (GESI) Strategy of the Health Sector. These policies provide for improving the access of senior citizens to quality health services, and strengthening health service delivery to be inclusive and responsive to the needs of senior citizens.

In recognition of the vulnerability and rights of senior citizens, the Ministry of Health and Population decided to develop a Geriatric Health Service Strategy. The Ministry has enforced this strategy in accordance with the powers entrusted to the Ministry by the Government of Nepal (Allocation of Business) Rules, 2018 and the prevailing Governance (Management and Operations) Act, 2007.

1.2 Need and Rationale of the Strategy

This strategy provides direction and accountability for improving health services for the aged in Nepal. It recognizes that senior citizens face increased risk of chronic conditions and multi-morbidities, with reduced functional capacity, and that health services have to account for these limitations and needs.

It sets out a comprehensive framework for planning, funding and providing health care and health protection services to the elderly. The strategy encompasses population-based and service delivery strategies for healthy ageing and covers prevention, resilience building and primary health care, living well with long-term health conditions, better support for senior citizens with high and complex health needs and improving recovery and rehabilitation from acute episodes.

The strategy prioritizes, guides, and sets standards for geriatric health services. It mainstreams geriatric health issues in the national health system, allocates accountability, and recognizes that adaptation of the strategy will be required at provincial and local levels to be relevant and effective.

This strategy reflects the commitment of the government to ensuring comprehensive health care services to all senior citizens of Nepal, as part of the progressive realization of Universal Health Coverage. The strategy supports other related policy interventions and is intended to be complementary and reinforcing, and not to replace or undermine them. This strategy will inform and support synergies, collaboration and complementarities with partner organizations and stakeholders engaged in the field of geriatric health in the country.

1.3 Priorities of the Strategy

Nepal's constitutional and policy commitments provide a firm basis for healthy ageing. Healthy ageing is the process of developing and maintaining the functional ability that enables well-being in older age. This strategy builds state capacity to support healthy ageing and provide quality health care to senior citizens. As part of Nepal's pursuit of Universal Health Coverage, this strategy has the following priorities:

1. Easy access to, and availability of quality health services for senior citizens;
2. Competent execution and strengthening of health promotion and protection, quality health care service delivery and social health insurance for senior citizens;
3. Multisectoral advocacy for sensitization and awareness of health ageing;
4. Strengthening and expansion of family and community support systems for healthy ageing;
5. Capacity enhancement of health facilities at all levels engaged in delivering basic curative services, long-term care, community-based and home-based curative services for senior citizens;
6. Strengthening the development and utilisation of integrated information management system for the health of senior citizens;
7. Planning, management and development of appropriate human resources for ensuring quality health service delivery for senior citizens;
8. Guaranteeing gender equitable and inclusive health care services for senior citizens and ensuring accountability;
9. Effective implementation, and the strengthening and expansion of financially sustainable social health insurance system for senior citizens;
10. Institutional integration and development of geriatric health services at provincial and local levels.

2. Vision, Purpose, Goal, Objectives and Strategies

2.1 Vision

“A meaningful, quality and healthy life for all senior citizens”

2.2 Purpose

To protect the health rights of senior citizens by means of their health promotion and protection, effective delivery of health services and an improved system of social health insurance.

2.3 Goal

To enable senior citizens to lead active and quality lives on the basis of optimum health protection and effective health service delivery.

2.4 Objectives

The Geriatric Health Service Strategy has the following main objectives:

1. To provide lifelong health promotion and protection services to senior citizens.
2. To build an effective, inclusive and accountable health service delivery system for senior citizens.
3. To promote multisectoral coordination, harmony, collaboration and partnerships to achieve effective geriatric health services.

2.5 Strategies

1. Motivate senior citizens for healthy living and enhance awareness at family and community levels to reinforce health promoting actions. (Objective 1)
2. Strengthen and expand the health protection system for senior citizens. (Objective 1)
3. Increase access to, and the affordability and utilization of quality health services and assistive devices by senior citizens. (Objective 1)
4. Develop a senior citizen-inclusive health system to address the health needs of senior citizens in an appropriate manner. (Objective 2)
5. Motivate and enhance the professional and technical competence of health personnel to provide quality geriatric health services effectively and efficiently. (Objective 2)

6. Expand and strengthen innovative and implementable social health insurance reform measures to respond to the needs of senior citizens and their family members. (Objective 2)
7. Mainstream and institutionalize the health concerns of senior citizens into the health system at all levels. (Objective 3)
8. Strengthen coordination and harmonization across spheres of government and across sectors for the effective delivery of geriatric health services. (Objective 3)

2.6 Working Strategies

Strategy 1: Motivate senior citizens for healthy living and enhance awareness at family and community levels to reinforce health promoting actions

1.1 Develop and implement information-education-communication strategies to enhance health awareness of senior citizens and their family members.

Programmes and actions

1. Create public awareness of policies, laws, guidelines and operating procedures related to the health rights of senior citizens.
2. Carryout campaigns to increase trust and break down barriers between generations, and challenge negative aspects of ageism and the associated health implications.
3. Conduct short trainings for family caregivers to improve their knowledge and skill in caring for the health of senior citizens at home.

1.2 Sensitize and educate primary healthcare workers about the specific health needs of senior citizens with disabilities and serious illnesses.

Programmes and actions

1. Develop a toolkit for health workers on measures for geriatric health assessment, disease prevention and health promotion.
2. Conduct orientation and sensitization sessions for health workers and Female Community Health Volunteers (FCHVs) on geriatric health care.
3. Provide primary health care workers with necessary skills to assess the health needs of senior citizens.
4. Provide training on hypertension, diabetes and cervical cancer screening to primary health care workers and carry out regular screening services for senior citizens to detect cases as early as possible.

Strategy 2: Strengthen and expand the health protection system for senior citizens

2.1 Strengthen the existing health management information system to identify the health situation and unmet health needs of senior citizens.

Programmes and actions

1. Conduct assessments to identify unmet needs of senior citizens, and the social and financial factors affecting health, elder abuse and elderly care-related low-cost interventions.
2. Measure the coverage and access deficits of senior citizens to quality healthcare services.
3. Expand the services by prioritizing senior citizens of underserved areas to ensure their affordability in an equitable manner.

Strategy 3: Increase access to, and the affordability and utilization of quality health services and assistive devices by senior citizens

3.1 Expand vaccination services for senior citizens.

Programmes and actions

1. Assess in a timely way the vaccination needs of senior citizens by health institutions.
2. Carry out vaccination services against influenza, Pneumococcal, Shingles/Zoster and Tetanus to prevent and mitigate health risks of senior citizens.

3.2 Increase the capacity of senior citizens to afford quality health care services.

Programmes and actions

1. Promote integrated allopathic and traditional medicine services for the care of older people at all levels.
2. Establish system for periodic community-based screening and timely prevention of non-communicable diseases (NCDs) among the population over the age of 40 years.
3. Provide free medical care services for senior citizens suffering from Alzheimer and geriatric-related diseases like Parkinson, asthma, heart disease, kidney disease and cancer.

3.3 Ensure gender equality and social inclusion for the healthy and decent ageing of senior citizens.

Programmes and actions

1. Collect and analyze socially disaggregated data on the basis of sex, age, poverty, geographical settings, ethnicity, caste and religion to inform evidence-based plan formulation and health care delivery and utilization of services.
2. Formulate preventive and curative health programmes for senior citizens on the basis of the Leave No One Behind (LNOB) Budget Marker.
3. Implement inclusive health programmes for protecting sexual and reproductive health rights of all senior citizens including women, men and sexual and gender minorities.
4. Ensure programmes are gender equal and inclusive, that they are free from discrimination and bias, and include and respond to the health needs of senior citizens of sexual and gender minorities and other particularly vulnerable populations so that they can access their health rights.

3.4 Establish an effective and efficient system of medication delivery and response system for the prevention and mitigation of the health risks of senior citizens.

Programmes and actions related

1. Assess the possible health hazards of senior citizens in response to the use of multi-medication.
2. Provide free medication delivery to senior citizens.
3. Provide free care services to senior citizens for the treatment of high blood pressure, diabetes, heart disease, kidney disease and cancer.
4. Assess the impact of medication services provided to senior citizens and continue strengthening on an as and when required basis.
5. Provide free health care and health protection services for physically and mentally incapable, helpless and unprotected senior citizens.

Strategy 4: Develop a senior citizen-inclusive health system to address the health needs of senior citizens in an appropriate manner

4.1 Prepare system for resource projections and develop an investment framework for making geriatric health services effective.

Programmes and actions

1. Set up budgetary priorities by internalizing the perspective of senior citizens for investing in geriatric healthcare programmes with a dedicated investment framework.
2. Collaborate with professional agencies, civil society organizations and private sector agencies for supporting mainstream geriatric health issues into national plan and budget.

3. Advocate and sensitize the authorities for mobilizing adequate financial resources for geriatric health services.
4. Develop activity-based costing framework with basic health care service norms for ensuring the geriatric health system is evidence-based and objective from the perspectives of programme budget and financial investment.

4.2 Strengthen health care services of the health system at all levels, including community-based health care services to senior citizens and make them compatible from geriatric health perspectives.

Programmes and actions

1. Develop and adopt minimum service standards and clinical protocols on health care services to senior citizens having physical and mental illnesses for ensuring the health services are systematic, standardized and consistent.
2. Establish and operate well-equipped and resourced hospital department with a geriatric specialty in at least one hospital in each province.
3. Construct and operate special hospital care room for senior citizens in all the hospitals with more than 50-bed capacity.
4. Set up and operate separate ward for the care of senior citizens in the health institutions with the capacity of more than 100 beds.
5. Improvise and calibrate the healthcare technology and service infrastructure to cater for the health needs of senior citizens.
6. Develop appropriate referral mechanisms for ensuring quality and special medical service to address the health needs of senior citizens.
7. Strengthen the institutional capacity of the Social Service Units in terms of adequate human resource, programme and budget to deliver free medical services to senior citizens.

4.3 Develop a sustainable and equitable system for providing long-term healthcare services to senior citizens.

Programmes and actions

1. Develop guidelines to implement and improve the quality of long-term care services with a focus on less-resourced and less-facilitated health service settings.
2. Provide technical and institutional assistance and support to provinces and local levels that introduce and expand long-term care services to senior citizens.
3. Introduce polypharmacy mechanism for medication safety of senior citizens in reducing the consequences of multiple medications.
4. Strengthen and expand health service delivery targeting senior citizens by means of telemedicine and a digitized treatment system.

5. Create a cadre of nurses, nursing assistant and social workers/volunteers to cater for long-term care, including palliative care to senior citizens in institutional settings.
6. Build partnerships for a long-term care system between older people, families, communities, care providers and senior citizens' organizations.
7. Establish mechanism for referral of care from proximate home/long-term care center to nearby health institutions with geriatric health facilities.

4.4 Ensure and strengthen accountability in the geriatric health service system.

Programmes and actions

1. Integrate healthy ageing indicators for monitoring and evaluation along with learning frameworks and periodic health performance reviews at all levels.
2. Develop monitoring and evaluation framework for geriatric health service performance with an integrated reporting system.
3. Develop a mechanism to share and network information on healthcare of senior citizens between the government authorities and stakeholders.
4. Conduct 'geriatric health service' social auditing to examine performance and compliance and pave the way for improving the geriatric health accountability of health service institutions.
5. Integrate performance results of the geriatric health service with the existing periodic and annual performance review mechanisms of the health sector.
6. Conduct independent action research on the appropriateness and impact of the geriatric health services for timely improvements in the quality, efficiency and equity of the system.

4.5 Integrate and align indicators on the health services used by senior citizens into the integrated Health Management Information System.

Programmes and actions

1. Develop a system of integrated health mapping of senior citizens by local health institutions.
2. Integrate and strengthen the age-specific, sex disparity-based, socioeconomic disaggregated information in the HMIS to inform and use in the process of geriatric health planning, programming and budgeting.
3. Strengthen programme responses to geriatric health concerns based on evidence and analysis.

Strategy 5: Motivate and enhance the professional and technical competence of health personnel to provide quality geriatric health services effectively and efficiently

5.1 Provide healthcare response and necessary health services to senior citizens to mitigate and reduce the health risks of COVID-19 and other pandemics.

Programmes and actions

1. Launch mass media campaigns like radio shows, television programmes, and online events promoting education and awareness on geriatric wellbeing, self-care, and preventive measures in response to COVID-19.
2. Initiate telemedicine services and remote health consultations for vulnerable senior citizens.
3. Educate and empower informal caregivers to older adults to promote preventive practices and improve access to health services for older adults.
4. Improve collaboration among community health centers and advanced care facilities for effective referral and clinical care for senior citizens during the pandemic.
5. Provide dedicated ambulance services for transporting the affected senior citizens, suspected or diagnosed cases of COVID-19 to the nearest health care facility.
6. Plan and execute for vaccinating all senior citizens against COVID-19.

5.2 Implement human resource plan for making professionally competent human resource adequately available in the field of geriatric health.

Programmes and actions

1. Assess and analyze the human resource capacity of the existing health institutions in the service of geriatric health.
2. Approve and fill positions of medical professionals with geriatric expertise for the federal and provincial hospitals.
3. Build persuasive partnerships with the medical institutions and professional organizations to leverage geriatric health professionals.

5.3 Motivate and build morale of the geriatric health personnel for their effective utilization.

Programmes and actions

1. Prepare competency profile of geriatric specialist medical professionals available in the country.
2. Formulate career development plan for geriatric professionals working in the government as well as private sector hospitals and health institutions.

5.4 Develop human resource capacity for an effective geriatric health service delivery.

Programmes and actions

1. Develop and implement a human resource training and development plan for geriatric health service.
2. Strengthen training facilities and impart training to healthcare professionals/personnel of the identified health institutions to upgrade skills in geriatric health.
3. Develop curriculum on geriatrics in post-graduate training and start MD/MN in Geriatric Medicine/Nursing in the government-run health institutes/Universities of Nepal.
4. Ensure inclusion of geriatrics in in-service training (MBBS as well as bachelor and proficiency certificate level nursing) and continuing professional development initiatives.
5. Start fellowship programme on Geriatric Medicine for MDGP health professionals to cover the current gap created by the scarcity of geriatric medical professionals for running the established geriatric services at various levels of health facilities.
6. Develop tools and training packages to enhance the knowledge and skill of formal and informal caregivers (including those of traditional medicine).
7. Train medical officers and nursing staff in Geriatric Care to support geriatric medical services in federal and provincial hospitals.

Strategy 6: Expand and strengthen innovative and implementable social health insurance reform measures to respond to the needs of senior citizens and their family members

6.1 Develop social health insurance service management capacities of hospitals and health institutions.

Programmes and actions

1. Assess insurance management capacities of hospitals and health institutions to address the needs of senior citizens.
2. Evaluate the health insurance performance of hospitals in relation to health insurance delivery to senior citizens and their families.
3. Conduct action research on the effectiveness of the present system of social health insurance for senior citizens and prepare recommendations for reform.
4. Implement a programme to build the capacity of hospital management to institutionalize social health insurance for senior citizens.

6.2 Encourage and motivate senior citizens and their families to participate in the social health insurance programme.

Programmes and actions

1. Conduct campaigns to raise awareness and motivate senior citizens and families to enroll in the social health insurance programme.
2. Conduct independent study to assess the barriers to the enrollment of senior citizens and their families in the social health insurance scheme.
3. Make a plan to increase access and encourage senior citizens of deprived and marginalized communities to enroll in social health insurance.

6.3 Develop an affordable and sustainable financing mechanism to fund social health insurance schemes for senior citizens.

Programmes and actions

1. Assess and analyze the existing financing mechanism of social health insurance for senior citizens.
2. Explore alternative financing measures for health insurance programmes to increase and expand the benefit amount.
3. Explore possible alternative financial measures to utilize the funding arrangements made under the government and public contributions or adopt free premium servicing measures for the expanded social health insurance programmes for senior citizens.
4. Provide free health care services to all senior citizens above seventy years of age under the health insurance programme.

Strategy 7: Mainstream and institutionalize the health concerns of senior citizens into the health system at all levels

7.1 Create an enabling environment for assuming multi-sectoral responsibilities and ensuring strengthened and extensive participation of all sectors and the government of all levels for healthy ageing.

Programmes and actions

1. Adopt necessary techniques and measures for mainstreaming geriatric health into the health system.
2. Address and integrate critical concerns of senior citizen-targeted health care at all stages of health service planning, programming and budget formulation.
3. Improve processes and practices for senior citizens and their representative organizations to participate in health policy and law making and setting standards, designing the monitoring system and reforming the health system.
4. Advance measures to include the issue of promoting healthy ageing in the academic curriculum of medical science at graduate and post-graduate levels.

7.2 Strengthen coordination and harmonization capacity to mainstream and institutionalize geriatric health services at the provincial and local levels.

Programmes and actions

1. Organize periodic joint planning meetings with the participation of health officials of federal, provincial and local levels to build necessary coordination and harmonization for geriatric health services.
2. Provide technical assistance from the Ministry to formulate and implement the plan for strengthening geriatric health services under the health systems of provincial and local levels.
3. Conduct consultative and review meetings on a regular basis at the provincial and local levels, including inter-sectoral level for sharing knowledge, practices and measures related to the health of senior citizens.
4. Provide necessary technical and health management support to institutionalize and enhance capacity of the local level health management system.

Strategy 8: Strengthen coordination and harmonization across spheres of government and across sectors for the effective delivery of geriatric health services

8.1 Promote multilateral collaboration and partnerships for making geriatric health service management participatory.

Programmes and actions

1. Set up a mechanism for delivering integrated health services to senior citizens by building coordination and harmonization between the federal, provincial and local levels.
2. Develop standard operating procedures on multilateral collaboration and partnerships in the field of geriatric health.
3. Prepare an inventory of agencies working in the field of geriatric health service to support coordination.

8.2 Promote collaboration and partnerships for expansion of the senior citizen-targeted health insurance programme.

Programmes and actions

1. Collaborate with the provincial and local governments along with the private sector to expand and strengthen the present capacity of social health insurance.
2. Explore innovative approaches to improve and expand coverage of social health insurance for senior citizens across the country with equity and inclusion.

3. Collaborate with local government, health institutions, private sector and community organizations for increasing the participation of senior citizens and their families in social health insurance schemes.
4. Mobilize local government, CSOs, senior citizens' network and community-based organizations to encourage the participation of senior citizens in health insurance programme.

3. Implementation of the Strategy

The Ministry of Health and Population shall make every effort to create the enabling environment for strategy implementation. This includes: mainstreaming the issue of geriatric health into the health service delivery system, build institutional capacity, improve coordination and harmonization, provide programme and budgetary supports, human resource capacity development, improve results-based monitoring and develop accountability tools.

As an integral component of inclusive health services and the progressive realization of Universal Health Coverage, the objectives of this strategy are a health sector priority. The strategy is the basis for ensuring geriatric inclusive health services in health sector planning and programming including the budgetary allocation.

This strategy will also be made applicable to the private sector health institutions

3.1 Coordination and Steering Mechanism

For effective implementation of the strategy, the coordination and steering mechanisms comprise of the following:

1. The existing inter-ministerial Gender Equality and Social Inclusion Committee set up by the Ministry of Health and Population will be responsible for oversight of this strategy. It will lead coordination and harmonization of sectors related to geriatric health, and between the federal, provincial and local governments to ensure the effective implementation of this strategy.
2. The Ministry of Health and Population will facilitate the provincial and local health sectors to form Gender Equality and Social Inclusion Coordination Committees at their respective levels. These committees will lead the coordination and the integration and facilitation of geriatric health at their respective levels.
3. Focal points in the federal Ministry and in the provincial Ministry will be assigned to support coordination and facilitation at the respective levels.
4. The Social Service Units of different hospitals shall be made responsible to work as focal units of the hospitals in geriatric health service.

5. Coordination will empower the local level to prioritise operation of geriatric health services by strengthening care centers, day care centers and clubs set up for senior citizens.
6. The officially run homes for the aged and senior citizen homes shall be made capable and aligned to the appropriate referral mechanism for delivering specialty medical care services.

3.2 Protocols and Standards to be developed

For the systematic and uniform implementation of the Strategy, the Ministry of Health and Population shall develop and put into force necessary clinical protocols for quality geriatric health service. Likewise, the Ministry will include geriatric health into the existing minimum service standards.

3.3 Capacity Development and Technical Support

The Ministry of Health and Population shall provide necessary technical and logistic support to the provincial and local health governing agencies in institutionalizing geriatric health services at the respective levels. The Ministry shall develop the technical and professional capacity of the health workforce engaged in geriatric health service at the provincial and local levels.

3.4 Phased approach to Implementation

Since this strategy has an implementation period from 2078/79 to 2086/87 (2021/22 to 2029/30), a phased approach will be adopted. This approach recognizes the need to establish and strengthen geriatric health services based on experiential learning, harmonization, integration and continuous improvement. The phased approach will allow for learning from implementation problems, solutions and risk mitigating measures, to be translated into action and adaptation.

The phases of strategy implementation will be as follows:

First Phase: 5 Years (2078/79 to 2082/83 - 2021/22 to 2025/26) - Laying the foundation for geriatric health services: This phase includes conducting reviews and assessments, standard-setting, human resource capacity development, and optimized and strengthened use of existing systems and operating measures and strengthening institutional capacity.

Second Phase: 4 years (2083/84 to 2086/87 - 2026/27 to 2029/30) - Strengthening and scaling up geriatric health services: This phase includes continued strengthening of institutional capacity, infrastructure development and harmonization, technology enhancements, expansion in the systems of healthcare, continued human resource development, and stronger accountability systems for rights-based health service.

3.5 Categorization of Senior Citizens for free health service

For the purpose of this Strategy, senior citizens shall be categorized on the basis of the following criteria:

1. **Age-Specific Categorization:** All senior citizens with seventy years of age or above shall be entitled to enjoy free health care services and fully paid social health insurance from the government/public health institutions.
2. **Physiology-specific Categorization** – All senior citizens with sixty-five years of age or above and those who are helpless, physically handicapped and mentally ill shall be entitled to enjoy free healthcare services and fully paid social health insurance from the government/public health institutions.
3. **Gender and Intersectional Categorization:** –
 - (i) All single women with sixty years of age or above shall be entitled to enjoy free healthcare services and fully paid social health insurance from the government/public health institutions;
 - (ii) All senior citizens with sixty years of age or above who are from deprived, marginalized and excluded groups shall be entitled to enjoy free healthcare services and fully paid social health insurance from the government/public health institutions.

4. Strategy Implementation Plan

For the planned, systematic, accountable and objective implementation of the Strategy, the strategy implementation plan outlines the priority programmes and actions necessary to translate the goal and objectives of the strategy into results and drive to success.

The strategy implementation plan is presented in Annex-I.

5. Monitoring and Evaluation

1. The Ministry of Health and Population shall monitor and evaluate the implementation effectiveness of the strategy at the federal level. The Ministry of Social Development or the Provincial Health Ministry responsible for the health sector shall monitor and evaluate the implementation effectiveness of the strategy at the provincial level. The Local executive body shall monitor and evaluate the implementation effectiveness of the strategy at the local level. For carrying out planned and objective monitoring and evaluation of the strategy implementation, the respective level will formulate a monitoring and evaluation plan with a clear framework of output, outcome and impact indicators.
2. For ensuring evidence-based monitoring and evaluation, information mapping and integrated management of information on geriatric health shall be done. For this purpose, a system of sex-disaggregated and intersectionally-constructed data will be used by drawing on data from the integrated HMIS.

3. Documentation and information capacity at all levels shall be developed and institutionalized to provide evidence-based evidence and up to date information on geriatric health.
4. The performance of the strategy's implementation will be reviewed and monitored in an integrated way aligned with the regular health sector periodic and annual progress reviews along with the federal and provincial level meetings of development action committees.
5. A programme-wise result matrix with objectively verifiable performance indicators shall be designed and framed to ensure results-based monitoring and evaluation of key result areas of the strategy on the basis of result monitoring framework and performance indicators included in the Implementation Plan of Annex-1 and Result Monitoring Framework of Annex-2.
6. The provincial-level health directorate shall prepare an integrated performance report of the local levels within the provincial health constituency and share them with the federal level so as to pave the way for preparing nationally integrated performance status on strategy implementation.
7. An independent evaluation shall be done after the completion of the first phase of implementation of the strategy and the learning outcomes shall be used to enrich and improve the strategy implementation in the second phase.
8. Social audit of the strategy implementation shall be planned after the completion of each phase of strategy implementation to examine social accountability towards geriatric health service in terms of performance and compliance.

6. Operational Research to Optimize Healthy Ageing

Operational research will be undertaken to support the continuous improvement in the quality and effectiveness of geriatric health services. This will include:

1. Assessing the effectiveness of policy and legal interventions, programmes and services for geriatric healthcare;
2. Assessing the impact of interventions on reducing health inequities among senior citizens from gender and social inclusion perspectives;
3. Utilization of the learning, including enhanced continuation and sustainability related to institutional strengthening, technological modernization and system improvements in geriatric health.

7. Results Monitoring Framework

The results monitoring framework will be used to measure the outputs and outcomes of the priority interventions and key result areas of the strategy. This ensures accountability for results

with the specification of indicators of performance, phase-wise targets and means of verification. The results monitoring framework of the Strategy is presented in Annex-2.

8. Guideline for Strategies and Actions of Provincial and Local Governments

This strategy shall be used as a guiding document for adapting the geriatric health service strategy at the provincial and local levels under the responsibilities and powers mentioned in the unbundling of health sector by the Government of Nepal provided that the provincial and local levels are empowered to customize their respective role, responsibilities and jurisdiction provisioned by the constitution.

The Ministry of Health and Population shall provide technical and management support in the strategy adaptation process at the provincial and local levels.

9. Review and Revision

This strategy shall endure as a dynamic document. After completion of the first phase of implementation of the strategy, the Ministry will review performance and results to identify critical gaps. On the basis of the identification of priority areas of reform, the Ministry will make necessary revisions in the strategy.

The Ministry, upon the recommendations of the Gender Equality and Social Inclusion Committee, will make timely revisions to the strategy. Such revisions shall be done on the basis of implementation experiences and reflections at the federal, provincial and local levels, and feedback received from the respective experts and stakeholders.

Annexes

Annex-1: Strategy Implementation Plan*

Programmes and Action	Implementation Phase		Indicators of achievement
	First Phase 2078/79 – 2082/83 (2021/22 - 2025/26)	Second Phase 2083/84 -2086/87 (2026/27 – 2029/30)	
Objective 1: To provide life-long health promotion and protection services to senior citizens.			
Strategy 1: Motivate senior citizens for healthy living and enhance awareness at family and community levels to reinforce health promoting actions.			
<i>Working Strategy</i> 1.1 Develop and implement information-education-communication strategies to enhance health awareness of senior citizens and their family members.			
<i>Programmes and Actions</i>			
Create public awareness on policies, laws, guidelines and operating procedures related to the health rights of senior citizens.	√	√	Awareness raised on health rights of senior citizens
Carryout campaigns to increase trust and break down barriers between generations, and challenge negative aspects of ageism and associated health implications.	√	√	Positive attitude towards ageism
Conduct short trainings for family caregivers to improve their knowledge and skill in caring for the health of senior citizens at home.	√	√	Family caregivers trained
<i>Working Strategy</i> 1.2 Sensitize and educate primary healthcare workers about the specific health needs of senior citizens with disabilities and serious illnesses.			
<i>Programmes and Actions</i>			
Develop a toolkit for health workers on measures for geriatric health assessment, disease prevention and health promotion.	√		Toolkit developed and used

Conduct orientation and sensitization sessions for health workers and Female Community Health Volunteers (FCHVs) on geriatric health care.	√	√	FCHVs oriented and sensitized in geriatric health care
Provide primary health care workers with necessary skills to assess the health needs of senior citizens.	√	√	Skills of primary health care workers enhanced
Provide training on hypertension, diabetes and cervical cancer screening to primary health care workers and carry out regular screening services for senior citizens to detect cases as early as possible.	√	√	Skills of primary health care workers enhanced

Strategy 2: Strengthen and expand the health protection system for senior citizens.

Working Strategy

2.1 Strengthen the existing health management information system to identify the health situation and unmet health needs of senior citizens.

Programmes and Actions

Conduct assessments to identify unmet needs of senior citizens, and the social and financial factors affecting health, elder abuse and elderly care-related low-cost interventions.	√		Assessments to identify unmet needs of senior citizens conducted
Measure the coverage and access deficits of senior citizens to quality healthcare services.	√		Coverage and access deficits of senior citizens to quality healthcare services measured
Expand the services by prioritizing senior citizens of underserved areas to ensure their affordability in an equitable manner.	√	√	Senior citizens of the underserved areas prioritized

Strategy 3: Increase access to, and the affordability and utilization of quality health services and assistive devices by senior citizens.

Working Strategy

3.1 Expand vaccination services for senior citizens.

Programmes and Actions

Assess in a timely way the vaccination needs of senior citizens by the health institutions.	√		V
Carry out vaccination services against influenza, Pneumococcal, Shingles/Zoster and Tetanus to prevent and mitigate health risks of senior	√	√	S v c

citizens.			
Working strategy			
3.2 Increase the capacity of senior citizens to afford quality health care services.			
<i>Programmes and actions</i>			
Promote integrated allopathic and traditional medicine services for the care of older people at all levels.		√	Integrated medicinal services for senior citizens
Establish system for periodic community-based screening and timely prevention of non-communicable diseases (NCDs) among the population over the age of 40 years.		√	Periodic community screening system operated
Provide free medical care services for senior citizens suffering from Alzheimer and geriatric-related diseases like Parkinson, asthma, heart disease, kidney disease and cancer.	√	√	Free medical care services for senior citizens provided
Working strategy			
3.1 Ensure gender equality and social inclusion for the healthy and decent ageing of senior citizens.			
<i>Programmes and actions</i>			
Collect and analyze socially disaggregated data on the basis of sex, age, poverty, geographical settings, ethnicity, caste and religion to inform evidence-based plan formulation and health care delivery and utilization of health care services.	√		Data for gender and social inclusion of senior citizens collected and analyzed
Formulate preventive and curative health programmes for senior citizens on the basis of the LNOB Budget Marker.	√		LNOB Budget Marker applied in preventive and curative health for senior citizens
Implement inclusive health programmes for protecting sexual and reproductive health rights of all senior citizens including women, men and sexual and gender minorities.		√	Programme implemented for protecting sexual and reproductive health rights of all senior citizens including women, men, and sexual and gender minorities
Ensure programmes are gender equal and inclusive, that they are free from discrimination and bias, and include and respond to the health needs of senior citizens of sexual and gender minorities and other particularly vulnerable		√	Programme implemented for protecting health rights of all senior citizens including sexual and gender minorities

populations so that they can access their health rights.			
Working Strategy			
3.2 Establish an effective and efficient system of medication delivery and response system for the prevention and mitigation of the health risks of senior citizens.			
<i>Programmes and Actions</i>			
Assess the possible health hazards of senior citizens in response to the use of multi-medication.	√		Possible health hazards assessed
Provide free medication delivery to senior citizens.	√	√	Medication services delivered
Provide free care services to senior citizens for the treatment of high blood pressure, diabetes, heart disease, kidney disease and cancer.	√	√	Free care of heart disease provided
Assess the impact of medication services provided to senior citizens and continue strengthening on as and when required basis.		√	Impact of medication supports assessed
Provide free health care and health protection services for physically and mentally incapable, helpless and unprotected senior citizens.	√	√	Free health care and protection services provided
Objective 2: To build an effective, inclusive and accountable health service delivery system for senior citizens.			
Strategy 4: Develop a senior citizen-inclusive health system to address the health needs of senior citizens in an appropriate manner.			
Working Strategy			
4.1 Prepare system for resource projections and develop an investment framework for making geriatric health services effective.			
<i>Programmes and Actions</i>			
Set up budgetary priorities by internalizing the perspective of senior citizens for	√		Priority-based investment framework

investing in geriatric healthcare programmes with a dedicated investment framework.			prepared
Collaborate with professional agencies, civil society organizations and private sector agencies for supporting mainstream geriatric health issues into national plan and budget.	√	√	Multilateral collaboration promoted
Advocate and sensitize the authorities for mobilizing adequate financial resources for geriatric health services.	√	√	Advocacy and sensitization on the importance of funding geriatric health services
Develop activity-based costing framework with basic health care service norms for ensuring the geriatric health system is evidence-based and objective from the perspectives of programme budget and financial investment.	√		Activity-based costing framework developed
<i>Working Strategy</i>			
4.2 Strengthen health care services of the health systems at all levels, including community-based health care services to senior citizens and make them compatible from geriatric health perspectives.			
<i>Programmes and Actions</i>			
Develop and adopt minimum service standards and clinical protocols on health care services to senior citizens having physical and mental illnesses for ensuring the health services are systematic, standardized and consistent.	√		Minimum standards and clinical protocols on geriatric health put into force
Establish and operate well-equipped and resourced hospital department with a geriatric specialty in at least one hospital in each province.		√	Geriatric department institutionalized
Construct and operate special hospital care room for senior citizens in all the hospitals with more than 50-bed capacity.	√		Special hospital care system operated
Set up and operate separate ward for the care of senior citizens in the health institutions with the capacity of more than 100 beds.	√	√	Set up and operate separate geriatric ward
Improvise and calibrate the healthcare technology and service infrastructure to cater for the health needs of senior citizens.		√	Calibration done to meet geriatric standards
Develop appropriate referral mechanisms for ensuring quality and special medical		√	Referral system executed

service to address the health needs of senior citizens.			
Strengthen the institutional capacity of the Social Service Units in terms of adequate human resource, programme and budget to deliver free medical services to senior citizens.	√	√	Institutional capacity of the Social Service Units strengthened
<i>Working Strategy</i>			
4.3 Develop a sustainable and equitable system for providing long-term healthcare services to senior citizens.			
<i>Programmes and Actions</i>			
Develop guidelines to implement and improve the quality of long-term care services with a focus on less-resourced and less-facilitated health service settings.	√		Guidelines developed for long-term care
Provide technical and institutional assistance and support to provinces and local levels that introduce and expand long-term care services to senior citizens.		√	Provincial and local level capacity developed in long-term care
Introduce polypharmacy mechanism for medication safety of senior citizens in reducing the consequences of multiple medications.	√		Polypharmacy mechanism put into force
Strengthen and expand health service delivery targeting senior citizens by means of telemedicine and a digitized treatment system.	√	√	Expansion of telemedicine services
Create a cadre of nurses, nursing assistant and social workers/volunteers to cater for long-term care, including palliative care to senior citizens in institutional settings.		√	Human resource capacity for senior citizens' long-term care developed
Build partnerships for a long-term care system between older people, families, communities, care providers and senior citizens' organizations.		√	Partnerships for long-term care developed
Establish mechanism for referral of care from proximate home/long-term care center to nearby health institutions with geriatric health facilities.		√	Referral system established
<i>Working Strategy</i>			
4.4 Ensure and strengthen accountability in the geriatric health service system.			
<i>Programmes and Actions</i>			

Integrate healthy ageing indicators for monitoring and evaluation along with learning frameworks and periodic health performance reviews at all levels.	√		Geriatric indicators for M&E
Develop monitoring and evaluation framework on geriatric health service performance with an integrated reporting system.	√		M&E framework developed
Develop a mechanism to share and network information on healthcare of senior citizens between the government authorities and stakeholders.		√	Information network made functional
Conduct 'geriatric health service' social auditing to examine performance and compliance and pave the way for improving the geriatric health accountability of health service institutions.		√	Social audit report prepared
Integrate performance results of the geriatric health service with the existing periodic and annual performance review mechanisms of the health sector.	√		Integrated review of geriatric health performance done
Conduct independent action research on the appropriateness and impact of the geriatric health services for timely improvements in the quality, efficiency and equity of the system.		√	Independent action research conducted

Working strategy

4.5 Integrate and align indicators on the health services used by senior citizens into the integrated Health Management Information System.

Programmes and Actions

Develop a system of integrated health mapping of senior citizens by local health institutions.	√		Integrated mapping of senior citizens done
Integrate and strengthen the age-specific, sex disparity-based, socioeconomic disaggregated information in the HMIS to inform and use in the process of geriatric health planning, programming and budgeting.	√		Socially disaggregated data management capacity developed
Strengthen programme responses to geriatric health concerns based on evidence and analysis.	√		Evidence-based analysis strengthened

Strategy 5: Motivate and enhance the professional and technical competence of health personnel to provide quality geriatric health services effectively and efficiently.

Working Strategies

5.1 Provide healthcare response and necessary health services to senior citizens to mitigate and reduce the health risks of COVID-19 and other pandemics.

Programmes and Actions

Launch mass media campaigns like radio shows, television programmes, and online events promoting education and awareness on geriatric wellbeing, self-care, and preventive measures in response to COVID-19.	√		Mass media campaigns launched
Initiate telemedicine services and remote health consultations for vulnerable senior citizens.		√	Telemedicine services initiated
Educate and empower informal caregivers to older adults to promote preventive practices and improve access to health services for older adults.	√	√	Informal caregivers empowered
Improve collaborations among community health centers and advanced care facilities for effective referral and clinical care for senior citizens during the pandemic.	√		Improved collaboration between healthcare institutions
Provide dedicated ambulance services for transporting the affected senior citizens, suspected or diagnosed cases of COVID-19, to the nearest healthcare organization.	√		Dedicated ambulance services improved
Plan and execute for vaccinating all senior citizens against COVID-19.	√	√	All senior citizens vaccinated against COVID

Working Strategies

5.2 Implement human resource plan for making professionally competent human resource adequately available in the field of geriatric health.

Programmes and Actions

Asses and analyze the human resource capacity of the existing health institutions in the service of geriatric health.	√		Human resource capacity assessment conducted
Approve and fulfil positions of medical professionals with geriatric expertise for the federal and provincial hospitals.	√		Positions for geriatric medicine approved and allocated
Build persuasive partnerships with the medical institutions and professional organizations to leverage geriatric health professionals.		√	Persuasive partnership built

<i>Working Strategy</i>			
5.3 Motivate and build morale of the geriatric health personnel for their effective utilization.			
<i>Programmes and Actions</i>			
Prepare competency profile of geriatric specialist medical professionals available in the country.	√		Competency profile developed
Formulate career development plan for the geriatric professionals working in the government as well as private sector hospitals and health institutions.		√	Career development plan formulated
<i>Working Strategy</i>			
5.3 Develop human resource capacity for an effective geriatric health service delivery.			
<i>Programmes and Actions</i>			
Develop and implement a human resource training and development plan for geriatric health service.	√		Training plan developed
Strengthen training facilities and impart training to elderly healthcare professionals/personnel of the identified health institutions to upgrade skills in geriatric health.	√	√	Training capacity improved for geriatric health
Develop curriculum on geriatrics in post-graduate training and start MD/MN in Geriatric Medicine/Nursing in the government-run health institutes/Universities of Nepal.		√	Curriculum developed for geriatric health training
Ensure inclusion of geriatrics in in-service training (MBBS as well as bachelor and proficiency certificate/10 plus 2 level nursing) and continuous professional development initiatives.	√	√	Geriatrics included in in-service training
Start fellowship programme on Geriatric Medicine for MDGP health professionals to cover the current gap created by the scarcity of geriatricians for running the established geriatric services at various levels of health facilities.	√	√	Fellowship programme started on geriatric medicine
Develop tools and training packages to enhance the knowledge and skill of formal and informal caregivers (including those of traditional medicine).	√	√	Training package developed
Train medical officers and the nursing staff	√	√	Skilled medical officers at

in Geriatric Care to support geriatric medical services in federal and provincial hospitals.			all levels
Strategy 6: Expand and strengthen innovative and implementable social health insurance reform measures to respond to the needs of senior citizens and their family members.			
<i>Working Strategy</i>			
6.1 Develop social health insurance service management capacities of hospitals and health institutions.			
<i>Programmes and Actions</i>			
Assess insurance management capacities of hospitals and health institutions to address the needs of senior citizens.	√		Capacity assessment done
Evaluate health insurance performance of hospitals in relation to health insurance delivery to senior citizens and their families.	√	√	Health insurance performance evaluated
Conduct action research on the effectiveness of the present system of social health insurance for senior citizens and prepare recommendations for reform.	√		Action research conducted
Implement a programme to build the capacity of hospital management to institutionalize social health insurance for senior citizens.		√	Capacity of hospitals strengthened
<i>Working Strategy</i>			
6.2 Encourage and motivate senior citizens and their families to participate in the social health insurance programme.			
<i>Programmes and Actions</i>			
Conduct campaigns to raise awareness and motivate senior citizens and families to enroll in social health insurance programme.	√	√	Awareness and motivation among senior citizens
Conduct independent study to assess the barriers to enrollment in social health insurance by senior citizens and their families.	√		Independent study report prepared
Make a plan to increase access and encourage senior citizens of deprived and marginalized communities to enroll in social health insurance.	√		Plan formulated to increase the inclusive access to social health insurance

<i>Working Strategy</i>			
6.3 Develop an affordable and sustainable financing mechanism to fund social health insurance schemes for senior citizens.			
<i>Programmes and Actions</i>			
Asses and analyze the existing financing mechanism of social health insurance for senior citizens.	√		Financing mechanism assessed
Explore alternative financing to expanding health insurance programmes and ensure sustainability.		√	Alternative financing measures explored
Explore possible alternative financial measures to utilize the funding arrangements made under the government and public contributions or adopt free premium servicing measures for the expanded social health insurance programmes targeted for senior citizens.		√	Alternative funding for social health insurance of senior citizens explored
Provide free health care services to all senior citizens of above seventy years of age under the health insurance programme.	√		Free health insurance for senior citizens over 70 years of age
Objective 3: To promote multisectoral coordination, harmony, collaboration and partnerships to achieve effective geriatric health services.			
Strategy 7: Mainstream and institutionalize the health concerns of senior citizens into the health service system at all levels.			
<i>Working Strategy</i>			
7.1 Create an enabling environment for assuming multisectoral responsibilities and ensuring strengthened and extensive participation of all sectors and the government of all levels for healthy ageing.			
<i>Programmes and Actions</i>			
Adopt necessary techniques and measures for mainstreaming geriatric health into the health system.	√		Techniques adopted for mainstreaming geriatric health
Address and integrate critical concerns of the senior citizen-targeted health care at all stages of health service planning, programming and budget formulation.		√	Critical health concerns of senior citizens addressed and integrated
Improve processes and practices for senior citizens and their representative organizations to participate in health policy and law making and	√	√	Participation of stakeholders ensured

setting standards, designing the monitoring system and reforming the health system.			
Advance measures to include the issue of promoting healthy ageing in the academic curriculum of medical science at graduate and post-graduate levels.		√	Inclusion of healthy ageing in the academic course of medical science
Working Strategy			
7.2 Strengthen coordination and harmonization capacity to mainstream and institutionalize geriatric health services at the provincial and local levels.			
<i>Programmes and Actions</i>			
Organize periodic joint planning meetings with the participation of health officials of federal, provincial and local levels to build necessary coordination and harmonization for geriatric health services.	√		Joint planning system initiated
Provide technical assistance from the Ministry to formulate and implement the plan for strengthening geriatric health service under the health systems of provincial and local levels.	√		Capacity development plan implemented
Conduct consultative and review meetings on a regular basis at the provincial and local levels, including inter-sectoral level for sharing knowledge, practices and measures related to the health of senior citizens.	√	√	Sharing of knowledge and practices realized
Provide necessary technical and health management supports to institutionalize and enhance capacity of the local level health management system.		√	Technical and health management support provided to local level
Strategy 8 Strengthen coordination and harmonization across spheres of government and across sectors for the effective delivery of geriatric health services.			
Working Strategy			
8.1 Promote multilateral collaboration and partnerships for making geriatric health service management participatory.			
<i>Programmes and Actions</i>			
Set up a mechanism for delivering integrated health services to senior citizens by building coordination and harmonization between the federal, provincial and local levels.		√	Inter-level coordination and harmonization improved

Develop standard operating procedures on multi-lateral collaboration and partnerships for promoting collaboration and partnerships in the field of geriatric health.		√	Operating procedures for multilateral collaboration and partnerships developed
Prepare an inventory of agencies working in the field of geriatric health service to support coordination.	√		Inventory developed and used
<i>Working Strategy</i>			
8.2 Promote collaboration and partnerships for expansion of the senior-citizen targeted health insurance programme.			
<i>Programmes and Actions</i>			
Collaborate with the provincial and local governments along with the private sector to expand and strengthen the present capacity of social health insurance.		√	Collaboration enhanced for expansion
Explore innovative approaches and expand coverage of social health insurance for senior citizens across the country with equity and inclusion.		√	Equity and inclusiveness of social health insurance enhanced
Collaborate with local government, health institutions, private sector and community organizations for increasing the participation in social health insurance schemes.		√	Multisectoral collaboration enhanced
Mobilize local government, CSOs, senior citizens' network and community-based organizations to encourage for participation of senior citizens in health insurance programme.	√	√	Multisectoral collaboration expanded

*Since all the above-mentioned programmes and actions fall under the responsibility of the Ministry of Health and Population, no specific responsibility matrix has been proposed. The Ministry shall prepare responsibility matrix on the basis of internal exercise for the purpose of programming and budgeting across the Department/Divisions/Centers and other subordinating agencies.

Annex 2: Result Monitoring Framework*

S.No.	Key Performance Indicators/Result Areas	Unit of Performance	Quantifiable Targets		Source of Verification
			First Phase 2078/79 – 2082/83 (2021/22- 2025/26)	Second Phase# 2083/84 – 2086/87 (2026/27- 2029/30)	
Objective 1: To provide life-long health promotion and protection services to senior citizens.					
1.	Train primary health care workers on geriatric health	Per cent	25	50	Annual report of the NHTC and Nursing and Social Security Division, MoHP, HMIS
2.	Vaccine against Influenza, Pheumococcal, Shingles, Zoster and Tetanus for senior citizens	Per cent	25	50	Annual report of the MoHP
Objective 2: To build an effective, inclusive and accountable health service delivery system for senior citizens.					
3.	Build and operate well-equipped and facilitated hospital with geriatric specialty department at least one in each province.	Number	3	7	Annual report of MoHP
4.	Construct and operate special hospital care room for senior citizens in all the hospital with more than 50-bed capacity.	Per cent	50	90	Annual report of MoHP, Impact Evaluation Report
5.	Set up and operate separate ward for the care of senior citizens in the health institutions with the capacity of more than 100 beds.	Per cent	50	90	Annual report of MoHP, HMIS
6.	Conduct impact evaluation of ‘geriatric health service’	Number / Frequency	1	2	Annual report of MoHP, Social Audit Report
7.	Vaccine services to all senior citizens against COVID-19.	Per cent	90	95	Annual report of MoHP, HMIS
8.	Produce and allocate geriatric medical doctor	Number	15	40	Annual report of MoHP, HMIS
9.	Availability of trained medical doctors in geriatric medicine	Number	150	300	Annual reports of NHTC and MoHP, HMIS
10.	Availability of qualified and trained	Number	250	500	Annual report of MoHP, Annual

	geriatric nurses.				report of NHTC HMIS
11.	Annual coverage of hypertension screening services for senior citizens	Per cent	40	60	Annual report of MoHP, HMIS
12.	Conduct independent evaluation of the ongoing social health insurance programme targeted to senior citizens.	Number	1	1	Annual report of MoHP, Annual report of the HIB, IMIS
13.	Increase the enrolment of senior citizens in health insurance schemes.	Per cent	30	50	Annual report of MoHP, Annual report of the HIB, IMIS

Objective 3: To promote multisectoral coordination, harmony, collaboration and partnerships to achieve effective geriatric health services.

14.	Institutionalize geriatric health service at the provincial level	Number of Province	3	7	Reports of the Ministry of Social Development/ Ministry of Health
15.	Institutionalize geriatric health service at the local level	Percent of local level	60	80	Reports of the Ministry of Social Development/Ministry of Health

*The baseline data has not been presented because no baseline information is yet set for the geriatric health service indicators by the Ministry of Health and Population.

#Total target of Second Phase is cumulative of the first phase target.

*** *** ***