Kerauja Dispensary Construction Project

General context

Kerauja, a high-altitude village in Ward 2 of the rural municipality of Darche (Gorkha), is home to approximately 3,200 residents who rely entirely on a prefabricated health post erected as an emergency measure after the 2015 earthquakes. Designed as a temporary solution, this building has now far exceeded its intended lifespan. After eleven years of continuous use, it exhibits advanced structural deterioration: recurring leaks, subsidence in certain sections, inadequate thermal insulation, corrosion of metal components, and general material fragility. These deficiencies compromise the safety of patients and staff, disrupt the vaccine cold chain, and prevent the maintenance of a reliable clinical environment. The cramped and poorly laid-out rooms make it impossible to provide confidential consultations, effective infection prevention, or adequate management of emergencies, maternal care, or chronic illnesses.

Access to the nearest referral health center, Khorla Besi Hospital, is a major obstacle. To reach it, residents must trek for more than three hours along a steep, unstable, and physically demanding path. This journey is particularly dangerous for pregnant women, the elderly, children, and patients with respiratory distress or injuries. During the monsoon season, landslides completely cut off the paths, isolating the village for several weeks. The lack of a road that is passable at all times prevents any emergency evacuation, even when a patient's life depends on rapid treatment. Under these conditions, the "golden hour"—the critical first hour during which medical intervention significantly increases the chances of survival—is systematically missed, t ransforming treatable conditions into potentially fatal situations.

Strategic justification

The project addresses three major challenges:

- Breaking the geographical trap by providing local emergency care in an area where access to medical services is extremely limited.
- Replace an obsolete structure with a permanent reinforced concrete (RCC) building, conforming to seismic and climatic standards.
- Responding to the official community request, supported by the Health Facility Management Committee (HFOMC) and the Women Community Health Volunteers Network (FCHV).

The project aligns with Article 35 of the Nepalese Constitution, the 2019 National Health Policy and Gandaki's provincial strategy to ensure one health center per neighborhood.

Project description

The new health post will be a single-story reinforced concrete structure, designed to withstand earthquakes and the extreme weather conditions that characterize the Gorkha region. It will include eight functional rooms meeting national standards: a delivery room equipped with a sterilization chamber to ensure a safe environment during births, a room dedicated to prenatal and postnatal care,

An emergency room for the immediate stabilization of traumatized or distressed patients, an outpatient consultation room, a secure pharmacy, a sterilization room, an administrative office for managing files and reports, and a secure storage area for medical equipment and sterile linens. The infrastructure will be complemented by a modern outdoor sanitary block and universal access ramps, facilitating access for the elderly, patients with reduced mobility, and stretchers.

The existing annex buildings on the site will be repurposed to house healthcare staff. This reorganization will ensure a continuous medical presence, essential in an isolated village where emergencies can arise at any time and where travel to the referral hospital is particularly difficult. By providing functional and secure accommodation for healthcare workers, the project strengthens the health post's capacity to provide 24-hour services and effectively meet the needs of the population.

Human resources and operational capacity

Six government-approved staff members are already in place: a health assistant, two healthcare assistants, two auxiliary nurse-midwives, and an administrative assistant. This team is fully operational and ready to move into the new premises immediately.

Accessibility and logistics

Two logistical routes are being used: an emergency link via the suspension bridge to Machhakhola, allowing for the transfer of patients to ambulances, and an alternative route via Kashi Gaun for transporting heavy materials. The latter will be used for supplying construction materials.

Budget, contributions and sustainability

The project budget is based on a technical estimate prepared specifically for Kerauja, taking into account geographical constraints, difficult site access, and the seismic requirements specific to the Gorkha region. The total cost of constructing the new health post is CHF 65,000, covering all the work necessary to build a permanent reinforced concrete structure. This amount includes earthworks, foundations, load-bearing structure, masonry, interior finishes, roofing, electrical and plumbing installations, as well as the logistical costs associated with transporting materials in a mountainous environment where access roads are limited and seasonally unstable. A contingency fund is included to account for adverse weather conditions, landslides, and fluctuations in material prices.

This budget ensures the construction of a building that meets national standards, equipped with eight functional rooms, an outdoor sanitary block, and universal access ramps. It also covers the technical supervision of the construction site and quality control, essential for guaranteeing the infrastructure's durability in an area exposed to natural hazards. Thanks to this clearly defined and realistic financial allocation, the project provides a robust, sustainable, and appropriate response to the healthcare needs of Kerauja's 3,200 residents.

The financing is based on a tripartite model:

- Rural municipality of Darche: Provision of land, medical equipment and allocation of staff;
- Local community: logistical participation and mobilization;
- Namasté Gumda Switzerland: construction financing and supervision.

Sustainability is ensured by an annual maintenance plan, stock management via the national e-LMIS system, the involvement of the HFOMC and the FCHV, and a permanent structure resistant to natural hazards.

Conclusion

The Kerauja health post construction project addresses a vital need for the 3,200 inhabitants of t his isolated village, where access to healthcare remains a key factor in survival. By replacing a dilapidated prefabricated structure with a permanent, safe building that meets current health standards, the project finally guarantees essential, maternal, and emergency healthcare services i n a region where every minute can mean the difference between a positive outcome and an avoidable tragedy. This transformative intervention will permanently enhance the local system's capacity to protect the most vulnerable populations: pregnant women, newborns, the elderly, and patients with chronic illnesses.

Beyond infrastructure improvements, the project is fully aligned with Nepal’s national public health priorities, including the constitutional right to basic and emergency care, the provincial strategy to equip every neighborhood with a functional health center, and federal post-earthquake reconstruction guidelines. It also strengthens the health system’s resilience to natural hazards by offering a design adapted to earthquakes, landslides, and the extreme weather conditions that characterize the Gorkha region.

The initiative enjoys strong local ownership, evidenced by a formal request from the community, the commitment of the health facility management committee, and the mobilization of the network of women community health volunteers. This support ensures sound governance, o ptimal use of services, and long-term sustainability. Thanks to this combination of community engagement, health relevance, and compliance with public policies, the project constitutes a sustainable, strategic, and high-impact intervention capable of significantly improving the health and safety of the entire population of Kerauja.