

ANNUAL
REPORT 2021-22



**HERBERTPUR
CHRISTIAN
HOSPITAL**

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Our “Catchment Area” “The community we serve”



Strategically placed border town in Uttarakhand with neighbouring states Himachal Pradesh, Haryana & Uttar Pradesh

HERBERTPUR CHRISTIAN HOSPITAL

P.O. Herbertpur, Dist. Dehradun-248 142 (Uttarakhand)

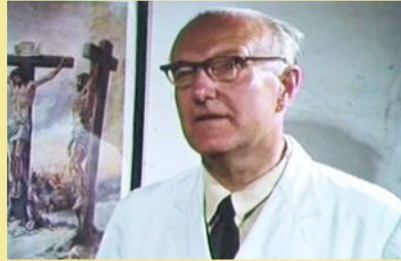
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Beginning of Herbertpur Christian Hospital

1934: Dr. Geoffrey Lehmann, a young British Missionary doctor, recently married, came to India with his wife, Monica (who was born in Nainital and grew up in Kanpur) and joined Kachhwa Christian Hospital, near Varanasi.



1936: With newly acquired Hindustani language and experience in tropical medicine, Dr. & Mrs. Lehmann were praying where God would lead them. Their vision was to start a pioneer work where the Gospel would be preached along with medical mission work.

While praying over a railway map, they discovered a place called "Herbertpur" even though it was 40 km from the nearest railway line. Convinced by the Holy Spirit, they visited Herbertpur in the Western Doon Valley and quickly concluded that this was the place God was calling them to do pioneer mission. Herbertpur was reached by a 35 km dirt road, along the valley from the Indian Military Academy in Dehradun. In the vicinity of Herbertpur there was not a single allopathic doctor. Only some Veds and Hakims practiced their traditional healing arts. Similarly the Gospel of Jesus Christ had not been preached.

front of the hospital, from the Gospel of Luke, Ch 9 verse 2, "Preach the Kingdom of God and heal the sick".

The fame of the hospital grew even though Dr. Lehmann was away serving in the Indian Army during World War II. Dr. Lehmann was concerned that so many patients with eye disease went untreated, so he qualified as an Ophthalmologist and began his well known program of Eye Camps as well as the eye program at the hospital. Along with the great numbers of eye patients seeking new sight, came TB patients who often traveled many miles across the mountains from the villages of Tehri Garhwal and Uttarkashi.

1946-1973: As the Lehmanns got older they continually prayed for missionaries from the west to come and take up the work. The medical mission grew and treated more and more patients. Patients

came from Delhi, Chandigarh and beyond especially for Ophthalmology, TB treatment, and maternity cases. Dr. Lehmann served for most of 40 years as the only doctor in



1936 - 1938: The Lehmanns quickly got to work in a tea planter's bungalow and held a clinic each morning on the verandah. At the same time Dr. Lehmann discovered a plot of land where three tea estates met. He bought the land and began to build what has become known for hundreds of kilometers around as "Lehmann Hospital".

1938-1946: The passion of the Lehmanns was to serve the poor and marginalized and to see the Kingdom of God established in the Doon, the surrounding Districts and hill areas. Their concern was encapsulated in the Bible text they placed on the

the 120 bedded hospital.

1973- present God had other plans, exciting plans. Emmanuel Hospital Association was formed as an Indian Medical Mission and the future of Herbertpur became secure. On 1st July 1973, Dr. Lehmann joyfully handed over "Lehmann Hospital" to EHA's management and leadership.

His last request to his successors was "that no patient be turned away because they cannot afford the treatment and no patient should leave the hospital without hearing the Gospel of Jesus Christ".

Managing Director's *Report*



Dr. Mathew Samuel

*See, I am doing a new thing...
I am making a way in the desert and streams in the wasteland.*

Isaiah 43:19

The theme for the new year was New Beginnings with Christ - Rev Dr. Simon Samuel spoke from the gospel of John and encouraged us to see that with Christ there's always a new beginning. The new year began with gloom in the economy due to the widespread effects of COVID lockdowns. The second wave of COVID hit India hard with unprecedented deaths. HCH was called to become a COVID hospital in the 3rd week of April and within 2 days all the 40 beds were occupied. The wards and ICU were full of very sick patients- we did only emergency obstetrics apart from COVID treatment for almost 6 weeks. Many people from the surrounding villages succumbed to the illness, in 6 weeks we saw about 65 deaths of the 210 COVID inpatients treated here. We are thankful to God for protecting all staff from serious illnesses and loss on the campus. It was indeed tragic that 4 staff lost their parents in their hometown.

The 8-hour shifts in full PPE were a nightmare. Initially, we had to even ask patients to get BIPAP machines from outside. The government did provide concentrators and Ventilators later. Apart from the heavy work, the high mortality in patients took a huge toll on the staff. We greatly appreciate the young doctors, nurses, paramedics, and support staff who gave their best in the most challenging situations. All

patients and relatives appreciated the selfless and compassionate care they received at HCH.

The Community health team deserves special mention as they worked hand-in-hand in giving excellent patient care food, water, and emotional support to the inpatients whose relatives were not allowed in as per protocols. They brought cheer and encouragement to the clinical staff. The State government ensured a steady and adequate supply of oxygen during the 2nd wave. The later announcement from the government that all COVID patients will be covered under the Ayushman scheme brought much relief to many and we are proud to have been able to honor the government's decision. However, this did mean there was lesser remuneration and loss of revenue.

As many patients could not access the hospital for treatment- the hospital along with the CH team arranged for teleconsultations and medicines were sent across to patients across the State borders through volunteers. This was a boon to several patients on psychiatric medications in the Saharanpur district. The footfall in the hospital increased after the 2nd wave but was about 30% lower than pre COVID years. The elective surgeries opened up sometime in August. The people had suffered a great deal of financial loss and could not afford

to pay for their medical expenses. The Ayushman scheme was a great help to many especially those coming from Uttarakhand. We have been running the scheme now for 3 years and are happy to be part of it.

Post 2nd wave we received much funding to upgrade Critical care facilities. The way in which many individuals, companies, and organizations came forward with funding and equipment was overwhelming- we could see that God could use even a calamity to bring in blessings. We are thankful to Azim Premji Foundation, Tata Trust, Cipla Foundation, Fundacion Heres, Tear Australia, DVN, Goodnews for India, and many others who gave generously for COVID relief and response. We could procure an ACLS capable Ambulance, Oxygen generating plant, and a lot of critical care equipment in the Operation Theatre and ICU and also give away food and other relief to many needy families. We praise God that even though many institutions faced challenges we could end the year with some savings and vastly improved medical infrastructure.

We also could meet the requirements for qualifying for NABH – entry-level certification.

A big thank you to Dr. Viju and the Quality team who worked hard in training and putting all SOPs in place.

We remain thankful to many who prayed and partnered in different ways to encourage us in continuing the work. I want to thank our central office leaders Dr. Saira Paulose and Mrs. Margaret Kurian for their timely advice and guidance. We are grateful to Dr. Jiji, of CMC Vellore for sending Dr. Greeshma and Dr. Rhoda to manage the Ob&Gyn department over the last two years. I would like to acknowledge the excellent teamwork of the senior leaders at HCH - am truly fortunate to lead such a committed team. In the coming year, we enter with great anticipation that we would be able to have the School of Nursing upgraded to a College of Nursing, a fully established Rehab unit, a New NICU, a Blood bank and new staff quarters - these are all plans pending for a long time. We believe God Almighty will make all things beautiful in his time.

With prayers and gratitude, I submit this report.

Dr. Mathew Samuel

Medical Director's Report

Dr. Samuel Barnabas Sikha



*Trust in the Lord with all your heart and lean not on your own understanding
In all your ways submit to him, and He will make your paths straight.*

Proverbs 3:5-6

For all of us, the year 2021-22 was eventful, owing mostly to the COVID pandemic. The second wave of the COVID pandemic struck in the first quarter of the year, and had a significant impact on the hospital and all the staff. Our hospital was designated as a COVID care center by the government, and it was a challenging experience for all of the personnel to operate in such a hostile environment. By His incredible grace, God kept us all safe and carried us through the crisis. As the staff were already aware of the PPE guidelines and the COVID task force was constituted during the first wave, reinforcing the protocols and activating the task force for additional action was simple. Despite the fact that some of our staff tested positive for COVID, they all recovered with only little illness and no long-term health problems. We continued to give COVID care services in improvised wards. During this trying time, I want to recognize the work of the entire medical team, paramedical team, nursing team, community team, and support staff.

In the following quarters, we noticed a gradual increase in patient numbers. Despite the fact that we are still a non-COVID hospital, we have prepared for the next wave of the pandemic.

Our hospital receiving NABH entry-level

certification was a huge highlight of the year. This accreditation aids us in sustaining high quality patient care standards. I would like to express my gratitude to our hospital's Quality Steering Committee and Quality Training Team for their work in ensuring that all of our employees adhere to proper quality standards in patient care.

The launch of palliative care services was the next big event of the year. Dr. Molly Thomas led the formation of the palliative care team, which is currently caring for patients with terminal illnesses and other long-term illnesses.

Dr. Greeshma from CMC Vellore helped in the Obstetrics & Gynecology department last year, and we appreciate her dedication to the department. Dr. Rhoda Anusha from CMC, Vellore, has taken up the responsibilities of the OBG department as Dr. Greeshma left the institution to pursue her higher education. We would like to express our heartfelt gratitude to Dr. Jiji Mathew, Professor of Obstetrics & Gynecology, CMC, Vellore, for always providing us help to manage the OBG department.

We would also want to express our gratitude to Dr. Alex Abraham of Trivandrum, who assisted us in organizing the Arthroscopy camp and to Dr. Neeraj, who helped us during a Gynecology Laparoscopy Camp.

Dr T. K Biswas, our senior pediatrician retired this year after serving for more than 30 years. We want to thank him for his faithful service to the hospital and also for continual guidance to the medical team in various roles throughout his service.

New consultants are expected to join the medical team in the coming year. Dr. Mariya Jacob, a general surgeon, and Dr. Joel Mathew Thomas, a general physician, will be joining the team, bolstering our services. The work on the blood bank has begun, and the services will be available in 4-6 months. The PMR – rehab unit plan has been finalised, and construction will begin soon. This year, we will also remodel and expand the Neonatal Intensive Care Unit (NICU). Our Emergency Room expansion proposal is also in the works.

I want to recognize and thank our Medical Officers, who serve as our frontline caregivers, for their hard work in providing the best possible care to our patients. I want to express my gratitude to all of the consultants for their unwavering support throughout the year.

Dr. Viju John, our paediatric surgeon, stepped down as Medical Director in November 2021, resulting in a year of leadership change and transition in the medical team. I want to express my gratitude to Dr. Viju for all the guidance and support during this time of change. I would also like to express my gratitude to Dr. Ajit Mathew, our orthopaedic surgeon, and Dr. Annie Prashanthi, our pathologist, for sharing the Medical Director's office responsibilities as Deputy Medical Directors.

I want to express my gratitude to all of the staff who worked tirelessly throughout the past year. I express my gratitude to all of our friends and well-wishers throughout the world for their prayers and support.

To HIM be the glory forever.

Respectfully submitted,

Dr Samuel Barnabas Sikha

Administrator's *Report*

Mr. Thomas Kurian



The year began with the second wave of COVID-19, which had gripped our country. This time, the Government declared Herbertpur Christian Hospital (locally and popularly known as Lehmann Hospital) as one of the COVID Hospitals, which enabled us to treat COVID patients. We acknowledge the support of the State government and those philanthropic organizations from within the country and overseas, who rose to the occasion to partner with us to provide the best possible care to the COVID patients.

Both medical and non-medical staff provided genuine compassionate care to the patients. Non-medical staff were posted in the COVID ward to assist the patients in the daily care and moral support they needed, as their relatives were not allowed in the Ward. The staff Mess along with the children on the campus, provided food to the patients. Local well-wishers provided water and some food free of cost to the patients. We thank them for their partnership in caring for the patients. The testimonies of relatives were encouraging and humbling. Many of them were treated under the Ayushman Bharat Bima Yojana Scheme (a national medical insurance scheme). Many other patients were given a sizable amount as charity as they could not afford the treatment cost.

Though the year was a difficult one, many good things also happened and the wonderful care of our creator God was our experience. Some of these highlights are:

- The purchase of a much-needed Advanced

Cardiac Life Support (ACLS) Ambulance.

- The acute shortage of Oxygen during the peak of the pandemic necessitated an Oxygen Generator. Though delayed, a 320 LPM Oxygen Generator has been purchased, installed, and is now in use.
- The Laundry work had considerably increased due to the constant use of Scrubs and PPE Kits etc. Due to several breakdowns of the old machines, they were replaced with a new fully automatic IFB Machine and a Dryer.
- The old ultrasound machine was replaced by a Philips Machine.
- With additional buildings, the allotted electricity load increased and with a view of future expansion, a 250 KVA transformer has been procured.
- With the installation of the Oxygen Generator and additional Centralized Air Conditioning in the Intensive Care Unit (ICU), it was necessary to invest in a 320 KVA Generator with Automatic Panel.
- PPE Kits were received from TATA Trust.
- Generous funds from Azim Premji Foundation enabled the purchase of Standard Ventilators, Monitors, Syringe Pumps, PPE Kits, Sanitizer and to provide food and bottled water for poor patients. Besides, their magnanimous donation in kind was ten Bipap Machines.

The liberal donations from well-wishers and friends made the purchase of the various

equipment possible. We acknowledge their generosity with very grateful thanks.

This year God opened doors to tap Corporate Social Responsibility (CSR) Funds within the country, on having obtained the CSR registration from the Ministry of Corporate Affairs.

Through its CSR wing, CIPLA Foundation extended its help through funds which enabled the purchase of an Anesthesia workstation, OT light and an OT Table.

All requirements for the National Accreditation Board for Hospitals (NABH) were met and the final Assessment was completed on 31st August 2021. We are happy to report that the NABH entry-level accreditation has been received.

Renewal of the Pollution Control Board recognition which had been pending for a couple of years was done and a certificate for 3 years has been received.

Departmental meetings and staff training - Periodic departmental meetings continued with the various departments under Administration. In addition, on Thursday afternoons the staff were given training in the vision and mission of EHA, hospital policies, and related matters.

Financial administration – We thank God for providing us with adequate resources for all our needs. We were blessed to be able to help some of the other EHA Units.

It was possible to provide on-the-job training to an EHA Hospital Administration trainee and internship for two Management trainees, who received ample exposure to our administrative systems.

The various sections of the Administration department worked very hard, as always. I take this opportunity to thank the various sections of the Administration department – supplies/stores (Mr Ambedkar and team); maintenance and house-keeping (Mr Ashok Kumar and team); HR (Dr Khushboo Nand); finance (Mrs Asha Reddy and team); the staff Mess and accommodation for visitors (Mr Abhishek Singh and team); transport,

biomedical and Information Technology (Mr. Ameen Reddy) and counselling (Mr Bijo Sunny).

Special appreciation to each staff in this department for their commitment through the year and for having put themselves out particularly during the second wave of COVID-19, which involved tireless support to the medical and nursing frontline staff.

Plans for the coming year:

- Staff quarters: 12 Staff families are staying in very old staff quarters. There is an urgent need to rebuild this Block along with an additional 12 staff quarters. Besides, accommodation for single staff is a dire need, for which plans are underway.
- Construction of classrooms and guest accommodation for the trainees of the Community Based Integrated Development (CBID) course recognized by the Central Government.
- Blood Bank: Relocation of the Administration Block to pave the way for Infrastructure changes to house the Blood Bank.
- Construction of additional Nursing Hostel facilities to accommodate another 30 Nursing students (a total of 120), when the Nursing College is approved.
- A ramp to connect the Inpatient block and the Operation Theatre expansion area.
- The present Emergency service area is too small to care for the patients who need to be seen in Casualty. Expansion of the same has become a necessity. Plans are being made for the Trauma Care and Training Center.
- Physical Medicine and Rehabilitation Center (PMR): This was planned a couple of years back. This Block has now become a necessity, which we trust will happen during the coming year.

"We praise God for all that is past and trust Him for all that is to come."

Respectfully submitted

Thomas Kurian

Nursing Superintendent's Report

Mrs. Bharati Mohapatra

(Acting Nursing Superintendent)



And whatever you do, do it heartily, as to the Lord and not to men, knowing that from the Lord you will receive the reward of the inheritance, for you serve the Lord Christ.

Colossians 3: 23-24

We thank God Almighty for His guidance and strength to carry out all the activities throughout last year. The Nursing leadership was handed over from Ms. Jasper Damaris to Mrs. Bharati Mohapatra as Acting- NS and Mrs. Bela Singh, Mr. Suresh Habil, Mrs. Tenzin Metok, Mrs. Jintu Marina Mathew being assigned as supervisors for daily affairs, laundry, CSSD, Nursing HR and Quality respectively.

We have received the glorious gift of grace unearned, undeserved favor from above. The team effort of Ms. Mary Nima, Mr. Arun Karthik, Mrs. Nutan Kumar, Ms. Rekha Das, Ms. Lakshmi Kumar, Mrs. Hemalatha N, Mrs. Karuna Singh, and Mrs. Anita Masih the entire staff who work in Nursing Service tirelessly 24*7 is greatly appreciated. Special thanks to the School of Nursing team who help and support us.

COVID-19 Second Wave

- The hospital was declared as a COVID Centre on 23rd, April 2021.
- The new IP building was designated as COVID wards. The patients were admitted to three wards based on the severity of sickness (Level 1, Level 2, and the ICU as Level 3)
- The COVID Labor room and COVID OT were new departments that were started during

the pandemic (Flu clinic, COVID point, testing center, HDU - 8 beds, COVID labor ward - 5 beds with 1 OT bed, COVID ICU-10 beds, level 1- 13 beds and level 2 - 26 beds and 4 isolation rooms)

- From April to 23rd June 1,400, patients were provided with emergency care and 50 % of these patients were found to be COVID positive.
- 210 patients got admitted to the COVID ward and the ICU during this period.
- There were 65 COVID deaths.
- HCH partnered with a private lab to provide RTPCR and antigen tests to patients.
- The institution supported the nursing staff by providing food for all staff who were working in COVID wards.
- The Nursing School was temporarily suspended and the tutors were able to help out in the wards during this time.
- Recreational programs were given for those staff who worked in COVID wards as a means of therapy.

Challenges of the Second Wave

- There was a shortage of staff since nursing

staff were placed on shift duties with a shorter time period.

- New graduates experienced a steep learning curve as they were directly placed in critical areas without prior training due to the staff shortages.
- The shortage in PPE, supplies and medications during the pandemic.
- Implementing and tracking the frequent changes in protocols and guidelines during COVID 19

Nursing Highlights:

- New Scrubs were provided to all nurses in July 2021
- ICU bed strength increased to 10 beds
- Increased overall Retention Rate of Clinical Nurses'
- Restarted CNE programs and conducted conferences

- Nurses day was observed on 12th May 2021 and different activities were conducted.
- Nurses have begun the Palliative care Home visits.
- Introduced well-defined Nurses Induction Program for Newcomers for 2 days.

Future Plans:

- To improve nursing care through NABH standards.
- To initiate Evidence-Based Practice in ICU settings.
- To restart CNE programs and conduct conferences.
- To empower nurses professionally and spiritually.

Respectfully Submitted,

Mrs. Bharati Mohapatra

Principal's *Report*

School of Nursing

**Mr. Shailendra Ghosh**

Think that the greatest education in the world is the education that helps one to be able to do the right thing at the time it has to be done.

The School of Nursing, Herbertpur Christian Hospital is the youngest of all the nursing schools of EHA. This is a temple where through nursing studies, God is revealed to the students who step in, through their every move up and down the ladder of training. Every year 30 young girls step out to serve the poor and needy in various health care settings.

The year 2021- 2022 was full of challenges, troubles, innovations, and blessings. The year started with the second wave of COVID - 19. The School was physically closed again. Virtual classes began, uncertainty prevailed, the admission process was delayed, late examinations; students with enormous doubts and immense stress; Frequent turnover of faculty; sudden council exam schedule, and lack of adequate preparation time for students – all this affected the performance of the School adversely. But we felt God's omniscient presence guide us through these difficult times and He taught us many lessons. Despite the challenges, God rewarded us with good academic results.

Classroom teaching switched from physical to virtual mode. The quote: "Necessity is the mother of invention" becomes true. Nursing education is now moving speedily towards digitalization, simulation, YouTube videos, learning mobile apps, and evidence-based practices. It is a challenge for us to stand shoulder to shoulder in the changing context of

nursing education. The need for simulation labs to be built-in with advanced nursing learning aids and simulation resources along with trainers needing to be sent for training, stands as an evident prominent need of the hour.

It is a joy to see the completion of the extension of the academic block of the School of Nursing by the generous help extended by EHA Canada, Luke 4 foundation, and many other. Now we are looking forward with hope for the residential block extension plan of the School of Nursing.

The future of the school lies in the dream of a grand college of nursing in the coming year. The proposal for B.Sc. nursing college has already been submitted to respective government officials to avail a no-objection certificate and is in anticipation of an inspection.

I congratulate and appreciate my team. Their love, concern, passion, commitment, and dedication have been a powerful influence in making the living sweeter and lighter than it ought to be. I am blessed to lead and be a part of the team.

I thank God for everything. His love and mercy endure forever. We owe all our successes and failures to God alone! "In Him, we live and move and have our being" - Acts 17:28

Submitted by

Shailendra Ghosh

Project Director's *Report*

Community Health Department



Mr. Robert Kumar

In God's Garden of grace, even a broken tree can bear fruit.

If you ask people about the last two years of their life, many will share about the pain and discouragement they went through. Yet, amidst all this, we have witnessed His grace very differently.

The Community Health and Development department of Herbertpur Christian Hospital experienced His grace through the lives we engaged with. Despite the pain, we saw many people experiencing His grace by bearing fruits even in difficult situations. I am very glad and humbled to present the Community Health Development report for the year 2021-22.

Anugrah Program (Disability Programs)

God is faithful to His promise. Our small beginning has become a channel of blessing for many. The dream many of us had a few years ago to become a training center finally came true this year when we were accredited by the Rehabilitation Council of India (RCI) to become one of the training institutes to provide community-based inclusive development (CBID) training. During the reporting period, we have completed the first batch of training of 30 people from different locations. Due to the COVID pandemic, most of the Anugrah centers were closed and we were not able to function at full capacity. This year we are able to resume all our activities in the field and are happy to see our children back at the center. Through the Orthotics and Carpentry department, we were able to help 472 people with disabilities to improve their quality of life.

Community Homes (Independent living for women with disability in the community)

We have seen the women in the Community Homes growing in their potential this last year. We have completed 3 years cycle and are happy to see the transformation in these 8 women.

Community College (One-year Diploma course on health assistant)

After almost 2 years we resumed Community College this year and the students completed their internship.

SHIFA & Burans (Community based Mental health programs)

We have work on community-based mental health happening in 2 different locations – in Uttar Pradesh through the Shifa project and in Uttarakhand, through the Burans project. Both Burans and SHIFA team have achieved their targets and we have witnessed many new learnings and transformation of lives.

Nari Niketan (Government Project for women with Psychosocial disability)

We completed 6 years of managing Nari Niketan Kedarapuram, Dehradun through the support of the Uttarakhand government. We have submitted a 5-year plan to the State government so that we can bring many more desired changes to Nari Niketan.

We are very grateful to all our partners and well-wisher to support us in our journey.

Respectfully submitted:

Robert Kumar

HERBERTPUR CHRISTIAN HOSPITAL

Leadership 2021-22

Unit Officers

1.	Dr. Mathew Samuel	-	Managing Director
2.	Dr. Samuel Barnabas Sikha	-	Medical Director
3.	Mr. Thomas K Kurian	-	Administrator
4.	Mr. Robert Kumar	-	Project Director (Community Health)
5.	Mr. Shailendra Ghosh	-	Principal (School of Nursing)
6.	Mrs. Bharati Mohapatra	-	Acting Nursing Superintendent
7.	Dr. Ajit Mathew	-	Deputy Medical Director (Training)
8.	Dr. Annie Mary Prashanth	-	Deputy Medical Director (Para-Medical)

Unit Management Committee (UMC)

1.	Dr. Mathew Samuel	-	Chairman/Managing Director (Ex-Officio Member)
2.	Dr. Samuel Barnabas Sikha	-	Medical Director (Ex-Officio Member)
3.	Mr. Thomas K Kurian	-	Administrator (Ex-Officio Member)
4.	Mr. Robert Kumar	-	Project Director (CHD, Ex-Officio Member)
5.	Mr. Shailendra Ghosh	-	Principal (School of Nursing, Ex-Officio Member)
6.	Mrs. Bharati Mohapatra	-	Acting Nursing Superintendent (Ex-Officio Member)
7.	Dr. Ajit Mathew	-	Deputy Medical Director (Training, Ex-Officio Member)
8.	Dr. Annie Mary Prashanth	-	Deputy Medical Director (Para-Medical, Ex-Officio Member)
9.	Mr. Arun Karthik	-	Staff Representative
10.	Mr. Paramjit Singh	-	Staff Representative
11.	Mr. Arputh Martin Sam	-	Staff Representative

Herbertpur Christian Hospital Society

Society Members/Board Members 2021-22

1.	Dr. Saira Paulose	-	Chairman
2.	Dr. Mathew Samuel	-	Secretary/Treasurer
3.	Dr. Uttam Mohapatra	-	Co-opted Member
4.	Dr. Daniel Rajkumar	-	Co-opted Member
5.	Dr. George Clarence	-	Co-opted Member
6.	Mr. Abhishek Lyall	-	Ex-Officio Member
7.	Mrs. Helen Paul	-	Member
8.	Dr. Viju John	-	Member
9.	Mr. Robert Kumar	-	Member
10.	Mr. Thomas K Kurian	-	Member
11.	Mr. Shailendra Kumar Ghosh	-	Member
12.	Mr. Neeti Raj Nand	-	Member
13.	Mrs. Ava Topno	-	Member
14.	Dr. George Varghese	-	Member
15.	Dr. Arpit Mathew	-	Member
16.	Dr. A. Jesudoss	-	Member
17.	Mr. Shankar Ramachandran	-	Member
18.	Dr. Prabhu Joseph	-	Member

Major HIGHLIGHTS



Ambulance services Inaugurated



NABH Entry level certificate



Oxygen Generator Plant



Initiation of CBID course



Initiation of Palliative care services



Dedication of Palliative care team



School of Nursing Infrastructure renovation

Staff of Various Departments



 **NICU Team**



 **Medical
Surgical
Ward Team**



 **ICU Team**



 **Maternity
Block Team**



 **OT Team**



 **OPD Team**



 **CSSD Team**



 **Audiologist**



 **ICTC**



 X-Ray Team



 Laboratory Team



 Pharmacy Team



 Administrative Office Team



➞
**Ayushman Bharat
Services Team**



↶
**Billing
Department
Team**



➞
**Biomedical &
Transport Team**



↶
**Medical
Records &
Registration
Department
Team**



Central
Stores Team



Front Desk



Librarian



House
Keeping
Team

➔
**Maintenance
Team**



↶
**Mess and
Guest Room
Team**



➔
**Outsourced
Security
Team**



↶
Unit officers





CHDP Team



Nursing Team



Medical Team

Clinical Services Overview

Focus area: The Emergency Department

We had another fruitful and blessed year as a department, enjoying God's goodness on a daily basis. Work was busy as always, as ours is one of the few Emergency departments in the locality functioning round the clock with qualified personnel. The second wave of COVID brought an added burden to the emergency team as we also had to run a COVID triage room to categorize the COVID positive patients referred from other hospitals for admission. The daily load of patients in the emergency room also sky-rocketed, and we were found wanting for beds many a time. It is highly commendable how the entire team stood up to the challenge, working overtime in PPEs in the heat of summer. Many of the staff did not escape the deadly virus but the work continued unabated.

Under the able leadership of Mrs. Bela Singh and the supervision of Mr. Arun Karthik, we could cater to a vast number of patients in dire need of emergency care. We had a good number of trauma patients from road traffic accidents, falls from height, workplace injuries, and assaults. We had an equal share of medical cases like cardiac emergencies, stroke patients, poisonings, snake bites, and those in respiratory distress. There was a surge in the cases of fever after the rains last year. Hypertensive emergencies, diabetic complications, tuberculosis complications, and acute gastroenteritis patients added to the numbers. Surgical emergencies included acute gastritis, acute appendicitis, intestinal perforations, and acute pancreatitis. We also had an increased number of pediatric emergencies with many sick neonates being referred from the nearby

hospitals. ENT and Ophthalmic emergencies were also attended to.

The up-gradation of the department to a NABH entry-level compliant one saw many changes brought in. The most important change was the introduction of triaging of patients. Training the staff in code blue protocol and other emergency procedures was a great help. We could add a few equipment to the Emergency Room which included a portable ventilator, two BiPAP machines, a new defibrillator, and new sets of laryngoscopes. The addition of an ACLS ambulance was a major up-gradation to our services, mainly for patients who were intubated and had to be referred to a higher center for further management.

Crowd management has always been a challenge and we thank the Lord that He saved us from any major untoward events in the last year. We are also thankful to the security personnel and to management in this regard. Our future plans include revamping the whole department into a new building with the addition of facilities for CT scan and other emergency diagnostic techniques. As we look forward to the new year, we hope to continue to be a beacon of hope to those in distress, upholding Christ's mandate of 'not to be ministered unto but to minister'.



Department of DERMATOLOGY

Dr. Molly Thomas
Dermatologist

We thank God for enabling us to provide another year of services to our community near and far. The OPD load is now gradually rising after the ebbing of the pandemic. Tele-dermatology has become more relevant and useful during the last year. We have formed a WhatsApp group of doctors in the different units of EHA to resolve difficulties encountered in the management of dermatological patients in the units. Even though visits to Landour Community Hospital have not been restarted, many patients could be evaluated through teledermatology.



Department of PEDIATRICS

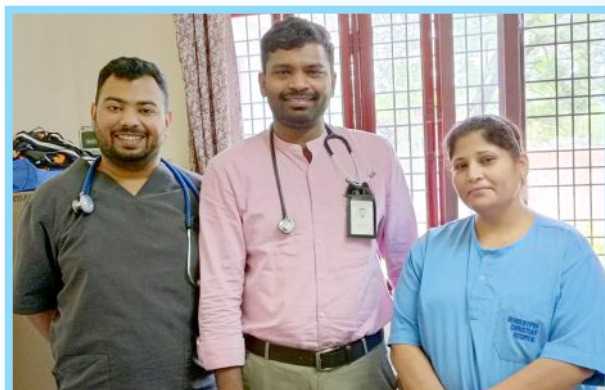
Dr. Vinod Kumar
Pediatrician

But thanks be to God, who always leads us in triumph in Christ, and through us spreads and makes evident everywhere the sweet fragrance of the knowledge of Him

2 Corinthians 2:14

Managing pediatric work has been challenging during last year but a great learning experience for us. During the second wave of COVID, we continued general and intensive pediatric services in the make-shift ward and ICU. It was a challenging time as many sick children with non-COVID illnesses were brought to us. We were short of beds and resources however we could customize intensive care with good outcomes.

Last year we could upgrade 3 ventilators with neonatal ventilation software. There was a time when we used all the three ventilators simultaneously. From the time we started pediatric intensive care services we ventilated 46 children of whom 35 were successfully managed. One of the ventilators has nasal CPAP mode which we use for both neonates and children. We have been praying for a Bubble CPAP unit for neonates with respiratory distress syndrome.



The immunization card was updated as per current recommendations. We started giving birth dose vaccines to all the inborn babies prior to discharge which avoids them being to be brought back only for the purpose of vaccination, thereby reducing the time and cost of travel for those who come from far off places. All the recommended vaccines were brought into the schedule and information was given to parents at each visit.

Dr. Ruth our Medical Officer published a case report in tropical doctor journal on primary varicella encephalitis without cutaneous manifestations in a 4-month-old child. The link for the article is <https://doi.org/10.1177/00494755211056180>.

Challenges - Our present nursery is old and

cramped, not accessible for a portable X-ray. A new area for the nursery has been allotted but it would take time to build it. Our prayer is that the nursery would be shifted to another makeshift area that is accessible for X-ray and infant warmers can be placed properly.

Over the last 1 year, we had 22 children with newly diagnosed tuberculosis. Diagnosing TB has been a challenge, especially in children. We pray and hope that we could get TB Gene Xpert machine in the future which can greatly aid in

the rapid diagnosis thereby reducing the cost and time for diagnosis.

We are also praying for the up-gradation of the blood culture system. We currently have a conventional culture system using glucose broth. Even with profound clinical sepsis we never had any positive cultures. An automated blood culture system became a necessity which can help in diagnosis which also helps us to formulate hospital antibiogram.

Department of **DENTISTRY**

Dr. Anu Mathew
Dental Surgeon

As I reflect on the past couple of years, my heart fills with gratitude for God's goodness and faithfulness in the functioning of the dental department. The advent of COVID was unprecedented. I remember the time when slowly the patients had stopped coming and there was silent fear in the air. Appointments given to patients had to be cancelled as our department was going to be closed for the next 5 weeks. As the healthcare sector was grappling and adapting to the 'new normal', God helped us also to make the required changes to cope with the COVID protocols. In general, dentists were asked to stop their work for several months but I am thankful to God for being able to work, and taking all necessary precautions.

Last year, when COVID was at its peak, the number of patients reduced considerably for a few weeks but otherwise, the work has definitely increased. There were a few challenges but God sustained us each day.



More than 2000 patients visited us last year. This year we could buy a new x-ray machine. I could complete an online course on Palliative Care.

Another dentist would be joining shortly which would ease the workload. We look forward to conducting dental camps.

In the coming year, we hope to engage with people more and be an agent of transformation to the community around us.

Department of **OPHTHALMOLOGY**

Dr. Femi K Sam
Ophthalmologist

The last two years were a roller coaster ride for the whole world, and was for us too. The lockdown in 2020 brought with it a complete travel ban and therefore, an inability to access tertiary care. It also saw the end of the organised eye camps which offered free

cataract surgeries. The local population could have ocular emergencies catered to, because our services continued uninterrupted.

The three COVID waves slowly and steadily made many people lose their livelihood. The extremely subsidized rates of our cataract

surgery made vision an accessible necessity in the midst of a worsening economy. Though the numbers rose and fell in tandem with the rise and fall of the disease, we knew that we were sticking our necks out in order to deliver specialized care to those who had no other means.

Many patients would hear of the meagre rates we offered and promptly fix a date to get their mature cataract removed but would return after many weeks with phacolytic glaucoma and other irreversible damage. On being probed, they would confess that they had not been able to arrange the money, which we were convinced was measly. Many evenings, there would be this sense of burden that only the lower middle class and up are able to access our care. The poorest, the widow, the fatherless seem non-existent in the humdrum of our routine.

Life seems to have almost returned to normal. OPD numbers have started going up again. Free camps have restarted wherever institutions have the resources to offer the same. The gnawing ache to reach out to the downtrodden also seems to be becoming numb as life falls back into its comfortable routine again.



I hope I will not forget the elderly gentleman who had recently lost his son and was raising his orphaned grandchildren. The dense cataract in his eye needed to be removed. We told him to pay the 100Rs to register his name, so that we could proceed, promising to help in every possible way. "If I have Rs.100/-, I would rather buy my grandchildren some wheat", he said obstinately. I have never seen him again. In today's Uttarakhand, can people still not afford Rs.100/-? Was he pulling a fast one? Should I have gone another mile? Are there many more like him out there? The questions haunt as we wait. The successful cataract surgeries, healed corneal ulcers, or even us surviving the pandemic does not ease the ache.

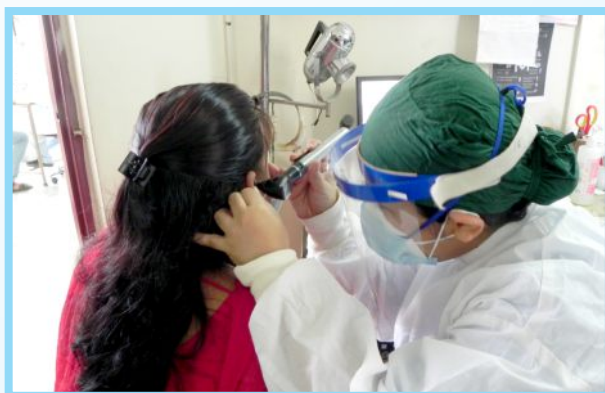
Department of ENT

Dr. Miria Mathews
ENT Surgeon

Rejoice always, pray continually, give thanks in all circumstances.

1 Thessalonians 5:16-18.

As a department, we are thankful to God for leading us thus far. Post pandemic, the OPD numbers increased to 3600. We performed a total of 200 procedures (13 major and 187 minor). We have completed a total of 256 audiograms, 7 speech audiograms, 45 tympanometry, 64 speech assessments, 619 neonatal hearing screening and 3 swallowing therapy sessions as of March 2022. We are providing 21 regular therapy sessions for children with speech and language disorders in Anugrah Program and at the hospital.



We thank Mr. Daniel Hendrix, our visiting audiologist who has been a source of great encouragement and support in training the young audiologists to diagnose and manage complex cases. We also extend our gratitude to

Dr. Regi Thomas, CMC Vellore who has been a constant source of encouragement and support.

Future plans:

- 1) Audiology testing area, which is soundproof and sound treated.
- 2) Electrophysiological testing of Hearing disorders (BERA).
- 3) Establishment of a Government approved Centre for disability certification for the hearing impaired.
- 4) Setting up an exclusive ENT Scopy room.

Department of ANESTHESIA

Dr. Anu Thomas Anesthetist

The operation theatre of Herbertpur Christian hospital is the nidus around which a major part of hospital work takes place. A large bulk of cases in the operation theatre caters mostly to Obstetrics, General Surgery and Orthopedics. Other services include ENT, Ophthalmology and endoscopic procedures.

I joined the Operation Theatre (OT) team after Dr Davis Cherian, who led the OT team for the last couple of years left for higher studies. The OT team led by Mr. Suresh Habil comprises of Mr. Ajay Jonathan, Mrs. Karuna, Mr. Siva, Mrs. Kavita Raj, Mr. Anil, Ms. Sangeeta, Ms. Komal, Ms. Simran, Mrs. Tara Parveen and Ms. Reena. The hard work and efficiency of the team has enabled many a challenging and long day to go by smoothly. We acknowledge the unique place each member has in the team and praise God for each and every member of the team.

Blessings

- Throughout the last one year we experienced the unseen presence and protection of God.
- We were blessed to have Mrs. Karuna, our nurse anesthetist join back after completing her PBBSc nursing and our senior staff, Mrs. Kavita join back after completing her GNM.
- Last year the OT was blessed with a lot of new equipment which includes 3 LED surgical lights, 3 anesthesia workstations (2 GE, 1 Penlon), 1 operating table, a COVIDien cautery machine, Ligasure, new laparoscopic instruments, a McCoy laryngoscope, a few new infusion pumps



and pediatric monitors.

- All the OT rooms underwent major maintenance work with false ceiling and 4 new OT doors.

Challenges

Caesarean sections formed the bulk of cases with the OT staff always willing to come in the middle of the night for emergencies. Orthopedic trauma cases formed the other bulk with the theatre running into late hours of the day, thanks to the OT team who are always willing to work for long hours.

We encountered a number of challenging and interesting cases.

- In spite of many limitations, we could manage such cases befitting a tertiary center like a thoracotomy for hydatid cyst, geriatric trauma which included a 100-year-old lady with atrial fibrillation for inter trochanteric fracture fixation, complex trauma, and neonatal surgeries like tracheoesophageal fistula, and gastroschisis.

- A 2-day Arthroplasty and Arthroscopy camp was organized by the Orthopedic team.
- We also had a 3-day Gynecology camp where we had laparoscopic surgeries including hysterectomies for some of our staff.

Future Plans

- We plan for a fully functional recovery room inside the OT in the coming year.
- Expansion of the OT complex with the addition of a septic theatre is on the cards as well.

- The procurement of narcotic license is a major help and we seek to use opioids for better intra op and post op pain management.
- We need more manpower, especially on the side of the anesthesia team.
- We are in need of equipment as well, like advanced patient monitors, nerve stimulator for nerve blocks.

We need earnest prayers to continue to cater to a vast array of challenging situations each and every day. May the operation theatre remain as a center for transformation – both physical and spiritual. We seek the Lord's providence in the new year towards this.

Department of ORTHOPEDICS & PHYSIOTHERAPY

**Dr. Mathew Samuel,
Dr. Ajit Mathew**
Orthopedicians

The year 2021-22 has been unusual due to the COVID second wave. In the initial few months we did very little ortho work as the hospital was a COVID dedicated center and also due to lockdowns – much less trauma occurred. Being an Ayushman center meant that cases started coming as soon as the second wave abated. Often, it was a challenge to operate on the suspected COVID patients (those with symptoms suggestive of COVID but tested negative). But the theatre team held their nerves and extended their full support during those trying times. We are thankful to God for the immense faith the people have placed in HCH as we see patients from far off places and even cities, come to us for consultations and surgeries.

The Lord enabled us to manage many complex trauma cases. We could do a few joint replacements also under Ayushman scheme which has been a boon for many patients. We continue to dialogue with the government to increase the remuneration so that it would be viable for us to run it in the long run.

We were able to operate on many patients who were otherwise unfit for surgery with excellent



backing from the Anesthesia team. This included a 100-year-old lady with hip fracture and a middle-aged man with triple vessel cardiac disease.

We had Dr. Alex Abraham visiting us from Trivandrum, during which we did a bilateral knee replacement, and arthroscopic surgeries for knee and shoulder. We also had spine surgeries, including discectomies and posterior instrumentation. We continued to have total hip replacements and shoulder rotator cuff repairs. There was an equal load of pediatric cases including deformity corrections and growth modulating treatments apart from trauma cases.

None of this would have been possible without an able OPD team manned by Mr. Samuel George and assisted by Mr. Tarun, and the contribution from the physiotherapy team including Mr Paramjit and Mr Anup. They gave a helping hand in post op rehabilitation, following up patients and ensuring that patients are catered to not only in their physical ailments but in their psychological and wholeperson care as well.

As we look to the new year, we hope and pray to expand our arthroplasty and arthroscopy services. Towards that, we seek to get new arthroscopy equipment. We also hope to procure a new C-arm machine so that there would be seamless services in the theatre. We trust in God's enablement to carry on the good work that He has started to its completion.

Case report:

Mr. A came to us with a complex proximal humerus injury due to a Road Traffic Accident. He had consulted many hospitals and specialists and all had given a guarded prognosis. Finally, he decided to have his surgery with us – it was challenge and a privilege to be able to handle such a case. He had an excellent result and we too are amazed that he has a functional shoulder and upper limb. We praise God for the excellent team in theatre and physio therapy which helps us to do such cases.



Pre operative CT scan 3D reconstruction showing the extent of injury



Post operative x-ray showing the fracture fixed with long plate and screws

Transformation Story:

Mrs M was suffering for quite some time due to pain in her knees, secondary to long standing rheumatoid arthritis. She was unable to walk with support, to an extent that she had to stop going for work. On assessment, she needed total knee replacement on both sides. There were financial constraints which were taken care of, and she had both her knees replaced in the same sitting. It was a time for the family to be counselled as well and she recovered well from the incapacitating pain that had held her captive for years.



Department of OBSTETRICS & GYNECOLOGY

Dr. Vanka Rhoda Anusha
Obstetrician and Gynecologist

Faithful is He that calleth you.

1 Thessalonians 5:24

As we look back through the past year our hearts are filled with gratitude remembering God's faithfulness.

God sustained us through the COVID 2nd and 3rd waves. Our OPD and labour room staff had been exceptional in delivering quality healthcare services with love and care. God helped us to have a separate labour room and operation theatre for COVID suspect/positive pregnant women.

We thank Dr. Greeshma who continued to work beyond the agreed time. After she left, the department was taken over by Dr. Rhoda, who was sent by CMC Vellore for her service obligation. We especially thank Dr. Jiji Mathews, HOD of Obstetrics & Gynecology, CMCV for her continuous support and for sending people to help with the department.

The labour room staff had been very enthusiastic and quick in learning under the able leadership of Sis. Bharati and Sis. Rekha. We could improve sterility during deliveries, surgeries, and other procedures because of which our wound infection rates have drastically come down. We could take many high-risk patients, especially early preterm deliveries with support from our skilled pediatrician Dr. Vinod.



Our OPDs have continued to be busy with the rising number of gynecology patients. More of these had been Infertility patients and those with genital infections. We could restart Hysterosalpingography services and hope to improve the scope of infertility treatment. Our OPD staff are efficient in managing the crowd and identifying high-risk obstetric patients.

We could organize a gynecology laparoscopy camp with the help of Dr. Neeraj, an alumnus of CMC Vellore. Our theatre team has been very helpful in managing many emergencies and complicated cases.

Our efficient Medical Officers are quick to learn and assist the department.

We want to thank our surgeon Dr. Viju John and other colleagues for their support in managing our patients. We also thank the management for all the help that we received in streamlining the services.

Department of SURGERY

Dr. Viju John
Pediatric Surgeon

Dr. Uttam Mohapatra
General Surgeon

The hospital continued to cater to a lot of surgical patients similar to the trend in preceding years. The surgical team comprising of the anesthetist and the OT team was always efficient and prompt.

Last year we could do many complicated pediatric surgical cases with the help of Dr. Vinod Kumar, our pediatrician.

We were fortunate to upgrade our infrastructure. We have procured a very high-

end, state-of- art energy source with a vessel sealer/cutting facility. This has made surgeries easier.

We are thankful for the Part-time Consultancy services of Dr. Uttam Mohapatra and the help rendered by Dr. Daniel Rajkumar from Landour Community Hospital.

We are thankful to the Lord for answering our prayers as a new junior consultant Dr. Mariya Jacob joins the department in the coming financial year.

A surprising trend was the increase in surgical OPD numbers with some days crossing 100 in a day.



In the future for the surgical department, we would like to have equipment for endo urological services.

Department of **ULTRASOUND**

Dr. Viju John
Pediatric Surgeon

This year we could buy a new USG machine. The previous machine served us for a good 10 years. The new machine has provisions for scanning small parts, doppler and echo.

Sister Shelly keeps all the records in place and deals with patients very well.



Department of **MEDICINE**

Dr. Allan John Samuel
Physician

The year was the aftermath of the COVID crisis which showed the resilience of the human spirit and especially those who placed their trust in the omnipotence of the Lord.

Isaiah 40:31:- "yet those who wait for the Lord will gain new strength. They will mount up with wings like eagles. They will run and not get tired, they will walk and not become weary"

The grace of the Lord helped the team to come through the difficult period without getting tired or weary beyond tolerance. The unchanging faithfulness of the Lord and His



promises were once again demonstrated. In contrast, we were humbled by the lack of trust

and the unnecessary anxieties which had wearied our limited minds, like concerns for our own safety and the struggle for PPE or resources, to name a few. Like the Israelites who kept grumbling in the desert despite having known God's mighty power, the past year in retrospection showed that we are also not very far from them.

The clinical services had slowly but surely gone back to normal. The OPD services have become busier along with the ICU services. The increased number of ventilators purchased during COVID was judiciously employed for

patients in need. To follow up few of the survivors of the COVID as they returned to OPD was a great encouragement.

So to conclude, this past year showed God's immense grace and faithfulness on one side while demonstrating the tunnel vision we all are prone for, when the worries of the world crowd out the past mighty deeds of our mighty God from our immediate sight. About the future, as the famous song says, "*Because He lives, I can face tomorrow.....And life is worth the living, Just because He lives.*"

Department of PHYSICAL MEDICINE & REHABILITATION

Dr. Samuel Barnabas Sikha
Physiatrist

But those who trust in the Lord will find new strength. They will soar high on wings like eagles. They will run and not grow weary. They will walk and not faint.

Isaiah 40:31 (NLT)

The department experienced a rollercoaster ride in the year 2021-2022, owing mostly to the second and third waves of the COVID epidemic. During the second wave of COVID, when our hospital became a COVID care center, the department's function was severely hampered, both OPD and IPD. God's grace was the only thing that kept us safe and supported us all during this trying period. Due to the lockdowns, individuals with disabilities had a difficult time getting to the hospital for rehabilitation. We provided Teleconsultation services to all patients who were unable to visit the hospital. The OP and IP figures, which had dropped significantly during the second wave, have steadily improved as the COVID situation has improved. By the grace of God, we were able to care for and rehabilitate patients with spinal cord injuries even during the pandemic. We continued to offer both children and adults rehabilitation services, as well as pain clinic. We could provide rehabilitation services to patients with spinal cord injuries and stroke with the



help of a dedicated team of physiotherapists, occupational therapists, P&O technicians (Prosthetist and Orthotist), and speech therapist. Community Based Rehabilitation (CBR) services were continued by us and our Community Health and Development (CHDP) team.

The plan to build a dedicated rehabilitation therapy facility for patients with spinal injuries and stroke is nearing completion, and civil work will begin soon.

We hope and pray that once this rehab centre is operational, it will be a blessing for patients with spinal cord injuries and stroke who would otherwise have to travel more than 85 kilometres to obtain a decent treatment facility. The rehabilitation programme is designed to

assist people with physical disabilities in realizing their full potential and overcoming their limitations. We express our gratitude to Mr Felix, a Chennai-based architect who is assisting us with the design of the rehabilitation center.

Future plans:

- 1) Establishing a dedicated rehabilitation therapy unit for patients who have suffered spinal cord injury or have had a stroke.

- 2) Educate the public about the dangers of spinal cord and head injuries, as well as the significance of early treatment.

Throughout the year, we thank God for His abundant grace and guidance. Please remember our department in your prayers, particularly the financial and human resources needed for the rehab therapy unit.

To Him be all the glory and honour.

Behind a smile, the world always appears to be brighter

'Beta, Zindagi itni aasaan nahin hai,....'
(Son, life isn't always easy,...)

Mr. P was sick of hearing this sentence from his village elders every time they climbed uphill to go home. But he had no idea that this life lesson from his elders would hit him so hard on that fateful day.

Life is certainly not simple for those who live in the rugged terrains of the Himalayan foothills. Mr. P hails from a remote interior village in Uttarakhand's Uttarkashi district, where effective logistics are a key concern. He lives with his wife and children, as well as his ageing parents and his brother's family. He worked as a truck driver. He would also trek into the jungles to get firewood, which helped them stay warm in the freezing conditions. On one of these days, he went to cut firewood and fell down from a tree, injuring his back.



**Mr P at his home
before injury**

He was sent to our hospital right away and discovered to have a spine fracture, which was operated immediately. He had a total spinal cord injury and was unable to feel or move any of his limbs below the waist, as well as losing control of his urinating. The

entire family was taken aback by the news, and they quickly understood that life would never be the same again. Patients with spinal injuries and their families often find it difficult to accept their condition because their circumstances change dramatically in a single day. Mr. P was expected to do the same. We were surprised, however, to see him greet us the next day in rounds with a wide smile and say he understands the issue and is willing to follow any instructions from our side. We were taken aback by this and asked him to come in for a consultation for rehabilitation, after we taught him some basic exercises.

After a month, he returned to the PMR department for the next step in his rehabilitation. His neurological condition has not improved substantially. He, on the other hand, never failed to smile. Our physiotherapists and occupational therapists put him through a rigorous rehabilitation program. He was taught how to use a wheelchair and eventually became self-sufficient in conducting all of his daily activities using it. He was given calipers by the Prosthetics & Orthotics (P&O) team, with which he began standing and walking for a few steps. He received training in Clean Intermittent Catheterization, a technique for treating urinary incontinence. Mr P's metamorphosis restored hope to his family, who had been depressed due to his infirmity.

Mr P received vocational training from the

Anugrah CBR team, and after returning home, he started a small grocery store in his front yard and began financially supporting his family. He progressed from being an income-burner, as his family regarded him, to becoming an income-earner. Despite his impairment, Mr P is currently independent on wheelchair and self-sufficient in all of his activities.

wonderful experience for our entire team, and we could sense God's assisting hand over Mr P and the rest of the team throughout the process. Mr P's contagious, never-say-die, million-dollar smile kept us all going on this voyage.

"Beta, Zindagi itni aasaan nahin hai, but ek muskaan ke saath ham pahaadon ka saamna kar sakte hain,"

(Son, life isn't always simple...But we can face mountains with a grin.)



With our therapists



**During rehabilitation
in our hospital**

We are happy to be a part of Mr. P's complete journey, from injury to surgery to rehabilitation. Walking with his family was a



Mr P in his grocery shop

Department of **PALLIATIVE CARE** Dr. Molly Thomas

The palliative care services kickstarted in September 2021 when Sr Leela was deputed to HCH. She was the one man army who initially did much of the ground work, venturing out single handedly into the villages to seek out patients requiring palliative care. A palliative care team was later constituted in December comprising of doctors who have completed the foundational course in palliative care (Dr Annie Mary Prashanthi, Dr Anu Mathew, Dr Femi K Sam, Dr Molly Thomas, Dr Karen and Dr Jephanya), Sr Leela Pradhan , Medical Director and Managing Director.

We acknowledge the role of Dr Savita Duomai, ex Palliative Care Coordinator of EHA, for getting HCH to think of starting the service of



Palliative Care, several years back. Mr Rajendra Dutt, the liaison person for Pallium India deserves special appreciation for his role in initiating palliative care services at HCH. He was a source of constant guidance and support

in chartering unknown waters related to organising a totally new service like Palliative care in HCH. He visited us once to appraise the HCH team about the way forward for starting palliative care services, especially with regard to getting exposure for doctors and pharmacists in nearby institutions like Ganga Prem Hospice and Mahant Indresh and most importantly for procuring the narcotic drug license.

The palliative service was officially inaugurated on March 1st 2022 and Dr Uttam Mahapatra dedicated the new palliative care team. The palliative team was expanded to include Mr Mukesh Kumar, Sr Chandrakala Jeyachandran (who would be carrying the baton from Sr Leela Pradhan), Mr Bijo Sunny (Counsellor and Social worker), Mr Paramjit Singh (PT), Mr Pramod and Mr Ashutosh (Pharmacists). HCH received the Recognised Medical Institution (RMI) status for stocking and dispensing narcotic drugs like morphine for pain relief on 05.05.2023. Currently we have 43 patients in our master list of whom 9 have passed away. The spectrum of patients include malignancy, organ failure, stroke and paralysis. We primarily provide home-based palliative care, in addition to outpatient and inpatient care. We strive to

function as a team so that the patient can benefit from the expertise of each member of the team. We also conduct awareness programs in villages and schools on cancer awareness for prevention and early detection. Presently one doctor (Dr Mani Kumar, Medical Officer) and seven nurses have enrolled for the foundational course in palliative care. Our two pharmacists have already completed this course. It is our desire to encourage all staff to undergo this short training course by Pallium India. We would like to place on record our sincere gratitude to Dr Ashitha who heads the Palliative Care team in EHA for her constant encouragement and support. Few of us could attend the annual EHA cross learning conference in Palliative care at Torch Bearers in March 2022, which was a refreshing to the body and the spirit. It was inspiring to listen to stories of journeying with patients across the country to relieve the "totality of pain" to a significant extend. We look forward to networking with government officials/agencies, like minded NGO's and layleaders to expand our services to provide comfort and care to those patients who travel a lonely path after being diagnosed with a life threatening or debilitating illness.

Department of COUNSELLING

Mr. Bijo Sunny
Counsellor

On May 11, 2022 :- The Pioneer, leading newspaper in India reported a devastating news, "Alcohol taking one life every second: WHO"..

World Health Organization studies shows that, "A youth is dying every second due to alcohol consumption". A disproportionate number of these alcohol – related deaths occur among younger people, with 13.5% of all deaths among those who are 20 – 39 years of age. These reports substantiate the cases which we look after day by day. The number of Road Traffic Accidents, Suicide cases and other trauma crisis related cases affirm and reflect the grave need for mental health interventions in the North West Region of Uttarakhand.

The Psychiatry and Mental Health services at HCH were initiated by Dr Raja Paulraj in the year



2012. As we look back to the past 10 years, God has helped in marvelous ways to carry out Mental Health Services. All these years, many godly Psychiatrists and Counsellors served in this department. By the grace of God, the flame which was ignited in 2012 is being carried on. At

present the baton is carried by Dr Samuel Barnabas, consultant - Physical Medicine Rehabilitation, who has a keen interest in mental health and has completed specialized studies in Mental Health and by Mr Bijo Sunny who is a trained Psychotherapist.

Each suicide is a personal tragedy that prematurely takes the life of an individual and has a continuing ripple effect, affecting the lives of families, friends and communities. Every year, more than 1,00,000 people commit suicide in our country. Every day, there are many DSH (deliberate self-harm) cases reports in our Emergency. Pesticide Poisoning, medicine overdose, hanging etc are among the cases. We provide primary and secondary psychological as well as psychiatry support to the suicidal patients. As mentioned above, alcoholism is the major reason for this devastating societal evil.

Regular outpatient and inpatient services run throughout the week providing the following services:-

- Treatment of serious and common mental illness

- Detoxification and de-addiction services
- Counselling the patients and their relatives
- Counselling the patients who have attempted suicide

Transformation Story

A 40 year old, chronic alcoholic whose wife is a health care worker, and who have two small children. He was a senior employee of a reputed organization. Due to his alcoholism, he lost his job. His family began suffering. His wife took initiative to admit him twice in a de-addiction centre but unfortunately all the support system became worthless as soon he had a relapse. As a last anchor of hope, they approached Herbertpur Christian Hospital for counselling and de addiction treatment. The timely approach of systematic psychotherapy, medical support and care enabled the patient to return to his normal life both in the family and society.

As the Psalmist declares in Psalms 118:23, we also declare along with him that "This is the LORD's doing, and it is marvellous in our eyes".

Department of **MENTAL HEALTH**

Dr. Samuel Barnabas Sikha

We witnessed a continuous increase in the number of persons with mental health difficulties accessing our OPD clinic in the years 2021-22. Despite a large decline in patient numbers during the COVID 2nd wave period, OPD numbers increased in the months afterwards. Many people's mental health was also damaged by COVID, and many came to our OPD with Post-COVID anxiety and other mental health problems. Patients with Common Mental Disorders (CMD) such as depression and anxiety, as well as those with Severe Mental Disorders (SMD) such as psychosis and delusional disorder, could be treated. A large percentage of people who had attempted suicide were brought to our Emergency department. For these individuals, we have developed a standardized procedure in which they all participate in frequent counselling

sessions. Mr Bijo Sunny, our Counsellor, provides frequent counselling to these patients as well as other SMD patients. He is a huge asset to the mental health team.

Due to lockdown and cross-border logistics challenges, the SHIFA project beneficiaries and fortnightly community mental health clinics were severely impacted during COVID 2nd wave. We continued "Tele-consultation" services for all mental health patients with the help of the SHIFA team. We spoke with all the patients over the phone, and the essential drugs were packed and handed to them free of cost by the SHIFA team. We began our fortnightly clinics and home visits after the second wave. The SHIFA team have also launched a mental health initiative in a new village in Uttar Pradesh, where we are currently

identifying new mental health patients.

We maintained our collaboration with the Uttarakhand government by attending to the health requirements of inmates at 'Nari Niketan,' a government center for poor women run in a public-private partnership between our hospital and the Uttarakhand Government's Ministry of Health and Family Welfare. We proceeded to provide necessary care to all 'Community Homes' members.



Future plan:

- Organizing a public awareness campaign about the suicide prevention and the necessity of mental health.
- As part of the Alcohol Detox Program, organizing Alcohol Detox Camps.
- Collaborating with local educational institutions to raise student understanding of the dangers of drug abuse and addiction.

Transformation Story

It was a bright afternoon, and the mental health facility was bustling. This is a community clinic that our "SHIFA" mental health team hosts every two weeks. It was really hot, and we were all working quickly to finish the clinic and return to the hospital for some relief from the oppressive heat. A group of people came in and brought a young man (Mr P) with a behavior problem for 6 months. One of them was the young man's father, who appeared despondent and concerned about his son. Mr P appeared to be in good health six months ago, but his family noted a gradual shift in his behavior. He began speaking insanely and made allegations that were far from the truth. He stopped socialising and used to talk to himself. His parents were upset because he is the family's sole breadwinner. They did not want to take him to a hospital for care since mental health concerns are stigmatized in the community. The family, on the other hand, brought him to our community clinic, which is actually run in their hamlet. Mr P was diagnosed with

SMD – Delusional Disorder after the initial evaluation and was started on the right medication. Our 'SHIFA' community team and community volunteers kept tabs on him around the neighborhood on a regular basis. We could watch Mr P's personality changing over time. His irrelevant talking improved, and his behaviour improved as well. When he felt better, he returned to work and began supporting his family financially. The parents are overjoyed that their son has grown into a healthy, self-sufficient adult. We want to thank God for this wonderful learning experience with Mr P, where we, as a mental health team, were able to observe the prevalence of societal stigma around mental health in the community as well as the impact of having a community clinic to treat patients like Mr P. "When people cannot come to the health care centre, it is better to move the health care centre into the neighbourhood near people," as correctly stated. With programmes like this, we can all work together to achieve 'Health for All.'

Paramedical Services Overview

Give thanks to the Lord, for he is good his love endures forever

Psalm 107:1

We thank God for His immense grace and mercy upon the entire Paramedical team throughout the year 2021- 2022. God has protected and enabled us to tide over another surge of COVID pandemic last year.

Medical Laboratory Services - By God's grace we were able to restart our Histopathology services from mid-February which were almost stopped for the past 11 years. We believe and pray that this will be a good diagnostic help for our clinical services. We appreciate and thank the management that we could procure, i CHROMA iii machine (performs multiple biochemical and hormonal tests), which is very helpful and effective in our daily routine. We were able to obtain the government approval to conduct COVID Rapid Antigen testing. We also thank God for our new employee Ms. Neha who has completed her BSc Microbiology, and is a bonus for the existing microbiological services. Compared to last year, there is an overall rise in lab tests with a total of 1,25,634 tests, which included Histopathology, Cytopathology, Clinical Pathology, Clinical Biochemistry, Clinical Microbiology, and serology tests. Apart from these, as a part of quality management, along with HICC we do regular surveillance cultures in needed areas. For the year, 2022-2023, we look forward to start blood bank services and automation in microbiology. In future, we are also looking forward to restart the DMLT course.

The Pharmacy continued to render their good services during the last year and especially

during the surge of the COVID pandemic inspite of the crisis regarding to the man power. We praise God for the faithful services of Mr Autar Singh who retired on March 31st 2022 and will continue to pray for his post retirement life. Two of our pharmacy staff were able to take part in the palliative workshop and are now eligible to handle the narcotic drugs which is a major help to our institutional palliative medicine department. In the coming days, we are planning to start an I.P. Pharmacy exclusively for the inpatients in the new I.P building.

We praise God for the smooth functioning of our Radiology services throughout the year. A total of 12,211 X-rays were performed. The C-arm services were available in the operation theater throughout the year. We also thank God for our new employee,

Mr Anand Paul. In future, we are look forward to rendering contrast and other higher quality services.

We want to praise God for the constant and good efforts of the entire paramedical team and will pray for more opportunities to serve God in our workplace. May our faithful God continue to be with us and guide us in the coming year too.

Dr. Annie Mary Prashanthy

Deputy Medical Director (Paramedical)

School of Nursing overview

Opportunities are usually disguised as hard work, so most people don't recognise them.

The journey of the family of the School of Nursing from April 2021 to March 2022 was a long, slow walk. Thorny bushes lined the paths, yet miracles paved the way. The milestones were difficult to set up, yet God in His Glory dug

up the obstacles and planted them in. Marbles we had opted for the walk, but mud and slime did its prime display. Designs impossible came to life and patterns clearly charted out stood outdated and undone.



Students' Picnic



Students' retreat on Instructed ear



Online CMAI conference-attended by students and faculty



Anatomy quiz time



New wineskins!



The ESCALADO 2021



Basic Life Support Workshop



Life Skill Development

Special Moments that make us Proud:

- Our institution has become the pioneer in Nurses Registration and Tracking System (NRTS) work for the graduates.
- Biometric attendance method has been started.



- The school building has been completed after a long wait and a path clearly paved by faith and trust in unseen provision!
- Faculty Retreat – a time for the teachers to



reflect, retreat and be refreshed for the strenuous journey ahead – led by Miss. Jubin Varghese at the River View Resort, Paonta.

- Virtual training programs have been attended round the year by faculty and students. We even played a large role in the organization of the first ever EHA nursing workshop.
- Mrs. Leena Ajay and Mrs. Reena S. Habil joined us again after their postgraduate studies.

Future Prospects

Watching the School bloom into a College of Nursing is again a wait with fingers crossed!

Seeing the College of Nursing branch into an International Simulation Training Collaboration Centre for high fidelity simulation nursing is a dream that seems beyond the stars, yet we believe that God is still on the throne and when He wills to execute His plans, no one can stop Him.



Photo Courtesy: Internet

The IMPULSE magazine has been created and it will be the first annual magazine which will be officially released by the school.

The Hostel building needs to be extended and built new with accommodation for the B.Sc. candidates.

We have a large group of students now and anticipate having another batch of undergraduate students which may require of us separate facilities for cooking and serving food for the students. We look forward to having a separate place and team to help us with the cafeteria for students.

Stones We Stumble Over:

The frequent turnover of staff has been a challenge. We have seen more than 3 faculty join and leave in the last one year due to various challenges.

Residential deficit has been a challenge on the recruitment of efficient staff for the school of nursing. We pray that the needs of the faculty will be met in God's wonderful ways.

CURIOUS TO HELP – Here's a way!

- a. SPONSOR A SEED scheme (a scheme to sponsor a needy candidate)
- b. FILL IN THE BLANKS scheme (A scheme to help buy a thing that the school needs most – Eg: LCD projector screen, 10 chairs, reference books for library, etc)
- c. SEND AN ARROW prayer scheme (A scheme to pray 10 minutes every day for the services of the school)



 **School of Nursing Team**

Community Health Department

The Community Health & Development Department of (CHDP) of Herbertpur Christian Hospital (HCH) is delighted to present the annual community projects and initiatives report for the year 2021-2022. The information contained here within is the witness of His faithfulness and grace. We are grateful for the communities and families who trusted us and have given us the opportunity to journey together.

This report provides an overview for each of our projects. Demonstrating our achievements, we identify key highlights and stories of successes for each respective project. We outline ongoing challenges associated with some of our projects that we are actively working on to resolve the same.

Anugrah Program:

Where there seems to be no way, He works in ways we cannot see

Though uncertainties and perplexities had hovered over the initial part of this year, the Anugrah program has remained a ray of hope to about 950 families affected by a disability in the last year. Here is a glimpse of the various involvements the Anugrah team has had in reaching out to people with disabilities.

Training Programs: It has been a dream of the Anugrah program since a long time to be a place that equips people at grassroot level to respond to the needs of people with disabilities. This year, we had the privilege to witness those prayers and desires come to pass, as the Rehabilitation Council of India recognized Herbertpur Christian Hospital as one of the centers to run a six-month certificate program in community based inclusive development (CBID). We have had 29 students (picture attached) in the first batch from various local organizations. We are excited about the pool of rehabilitation workers this could potentially

generate to empower our local communities.

In addition, team members of Anugrah have also been doing the 'Beyond Suffering' course, which is a one-year program on what our response to disability needs to be.

Therapy Services: One of the objectives of this phase of our program was to strive to make Anugrah into a resource center for community-based rehabilitation activities. Despite the restrictions caused by the pandemic, an additional 220 individuals with disabilities have received services this year. Our learning center services had to be adapted due to the pandemic, thus 64 children were reached out to by providing home-based care. This had enabled families to meaningfully and therapeutically engage their children at home. The fact that we could not meet in groups, also enabled our team to provide intense one on one rehab services to 46 children. In the picture is Ansh during his therapy session. This child had autism and was brought in with severe behavioral problems and lack of speech. After a 4-month period of regular therapy, he now goes to a local school and is independent in his self-care tasks.



Orthotics And Carpentry: It's been a joy to watch lives being touched and changed by the use of an assistive device. Our orthotic and carpentry workshops have been working hard to fabricate affordable and effective devices. A total of 274 orthosis, 15 prosthesis, 28 corrective devices and 24 mobility devices have been delivered over the past year. The carpentry

team were able to design 148 postural supportive devices and about 124 commercial and décor products. More than these numbers, the impact created by these devices have made this workshop a very sought-after service in this area. In the picture is Mr. Dinesh fitted with a below the knee prosthesis. He was a labourer who after his accident had lost his job and the family struggled to make ends meet. Now, with an artificial limb he is back to business and has reintegrated back into his community.



Covid Relief: The program was involved in relief activities during the pandemic by providing dry ration, financial support and first aid materials to about 500 families who were affected because of the lock down. Local stakeholders had also supported the program in this initiative.

Community Mobilization: Anugrah has established partnerships with a number of local stakeholders over the years. It has also been a desire of the program that these local stakeholders take ownership of the services provided to people with disabilities in their communities. This year during the international day for persons with disabilities, around 45



stakeholders were invited and requested to facilitate children with disabilities from their communities with gifts. It was encouraging to witness their active involvement and its our hope that they step up as active ambassadors for this cause. In the picture are members of the Disabled People's Organization and the local ward member giving gifts to our children.

Disability Outreach: In addition to the various activities of our project, the team had the opportunity to journey alongside the needs of people with disabilities in other mission hospitals. Children with disabilities from Broadwell Christian Hospital, Fatehpur, Uttar Pradesh, were assessed and provided with tele-rehabilitation. Our teams were also privileged to visit and support the Asha Kiran Society, as they begin to set up a disability program amongst the rural and tribal communities they serve.



New Additions: Mr. Anandharaj, Ms. Sruthy, Ms. Charis, Mrs. Reshma and Mr. Pappu have joined our team as physical therapists, Occupational Therapist, Psychologist and Orthotic technician respectively.

Cherishing Hope:

Mrs. B had been told by her neighbor to try going to the Anugrah center in 'Lehman' hospital. Mrs. B is a mother of two children with disabilities and the pursuit of availing treatment for her children only brought her despair as she found no tangible answers. She had come to Anugrah quite desperate presenting multiple problems; her family wanted her to throw the children and she was constantly blamed for their disability. On assessing, the children were

found to be anemic and the pediatrician at the hospital immediately provided the required medical interventions. Once medically stable, the children began therapy at the center. The CBR team visited their home and supported the mother emotionally and also identified the necessary home modifications that needed to be done. They were also given assistive devices to enhance their posture. Over a few months, there was a significant change in the mother's perspective. Her children had begun to slowly progress and she no more came to the center weeping and tired as she used to. She now wears a big smile and encourages the other mothers there to stay cheerful and hopeful. On being asked about her joy, she quotes that for the first time her children were given value in a hospital; from the wards to the disability center and that she was treated with love and dignity. On seeing what the hospital is doing, her family who once did not want the children have also begun to value them. All is not well yet for Mrs. B, but we believe that this hope that she cherishes will stay ignited as she journeys alongside her children and encourages other families who come her way.



While the Anugrah family extends its heartfelt gratitude to all those who have made this journey with us in the last year, we continue to trust God to reach out to many more in need of such services.



SHIFA Mental Health and Disability Project – Overview

The recent COVID pandemic has further raised the importance for good mental health which is absolutely fundamental to overall health and wellbeing!

It has been a decade that Community based "SHIFA Mental Health" is being operational in Sadholi Kadim Block of Saharanpur District (UP). From last year, the Project planned to extend its interventions in the nearest block of Muzaffarabad with the coverage of 30-Gram Panchayats and plans to fully exit from Sadholi Kadim community. Till date Project has been funded by DFAT-Australia through TEAR Australia.

The diagram depicts SHIFA's narrative of interconnected pathways to improve Quality of life of people with psychosocial disabilities (PPSDs).



Key Highlights of 2021-22:

The highlight mentioned below have been at the two fronts: one at Sadholi Kadim community (the project plans to exit by end of September 2022) and second is at Muzaffarabad Community (Newly demarcated project target and project plan to upscale its interventions).

1. **10-Caregiver Support Groups formed alliance with Disabled People Organisation.:** As part of the exit plan strategy for Sadholi Kadim Community, the project initiated the strategy in the formation of a stable alliance with Disabled People's Organization named "Ghosala Divyang Sewa Samitee". The Caregivers Support Groups are the informal groups

where "Caregivers" of Person with Psychosocial Disabilities (PPSDs) come together on a monthly basis and vent out their struggles, joys and seek collective courage for navigating issues and building resilience among themselves. Over the last 5 years, the DPO has been playing the vital role of community dialogue, monitoring and advocacy. Hence, as the project plans to exit, it is imperative for the DPO to have the Community/clientele base increased (in the form of target community) thereby, standing with the Caregiver groups, working collectively in the upliftment of vulnerable people and improving the quality of life.



- 2. Creation of Helpline #9568488525 service under DPO banner:** The telephonic helpline service has been initiated under the banner of "Ghosala Divyang Sewa Samitee" (DPO). The phone helpline service is managed by the Disabled People's Organization and counselling related matters are handled directly by a Community Mental Health Volunteer who is thoroughly equipped-on-job in the role of "Task-shifting". The community Task-Shifting role is performed by volunteers similar to the role performed by professionals. The creation of local service by local organisation in the community will help the project in smooth transitioning from Sadholi area.
- 3. Meaningful and Gainful connection:** This reporting year, the project was able to connect 21-persons with Psychosocial Disability and 02-Persons with Disabilities. This is being done so that it will help

individuals to cope well with their long-term illness and perhaps speed up recovery process. In the family, these individuals are now considered to be the valuable member of the household and are treated with dignity and respect. The community based interconnected pathways of mental health emphasize the importance of supporting the improvement of economic resilience.

Story Title: **SHIFA has been instrumental in shaping the lives of the lay Community Health Volunteers in developing and nurturing the leadership role and creating the assured asset for the community at large!**

Name: Mrs. M

Age: 38-yrs,

Family: Husband name: Sadhi Tiyaagi with 03 children.

Profession: Mental Health Volunteer cum ASHA Worker

Village: Raipur, Sadholi Kadim Block, Saharanpur (UP))



Early Days: The family comes from a low income status. Mrs. M's literacy was up to 08th grade. She is dedicated to her family and her husband by being a house wife. Apart from a homemaker, she had a desire to study and to be an influencer in reaching out to help people in her community. However, she did not have a confident, courageous and positive outlook. She had a low perception about herself.

During Project Times: In 2012, when SHIFA project started, Mrs. M was taken in as a Mental Health volunteer. Since then, Mrs. M has been undergoing various capacity building trainings and handholding to be an effective volunteer. One time, when the project initiated, "Resilience

curriculum" called "Communication for Life" among youth and adult groups. In the process, the course helped her to improve her Self-esteem! This led her to finish her 10th Grade through correspondence. In order to move up the ladder of success, Mrs. M took her mental health volunteering role very seriously and went the extra-mile in performing her role of assisting the affected individuals and families in care and support.

Since, Mrs. M's family was making the difference in people's lives the project helped the local network. The project, helped the attendees to approach various community problems in a holistic and inclusive way. This helped to balance their work in a meaningful way and establish new connections with vulnerable people groups.

The Change: The Change in Mrs. M's life is enormous. By staying connected with the SHIFA project, she not only finished her 12th grade but during November 2021, she was selected and appointed in the position of an ASHA worker for her own community where she resides currently. At the same time, she completed CBID (Community Based Inclusive Development) course run by Herbertpur Christian Hospital through RCI "Rehabilitation Council of India" affiliation. The change was the result of SHIFA's input in the life of Mrs. M, as boldly told by her.

The story show cases about pathways of how SHIFA has been shaping the lives of the lay community leaders in developing and nurturing the leadership role and creating an assured asset for the community at large!

Burans Project

For the past several years, we have been working with people with the experiences of mental health problems who help us develop programs and are engaged in resource building and relationship building in the community. The Dehradun chapter of Burans is actively working on the following projects; Nae Umeed and Financial inclusion - a 12 module programs for community-based groups of caregivers of people with

disabilities, District Jail program, and working with people with psychosocial disability in the communities to increase access to care. We registered 1480 new cases and we also worked with 492 caregivers, through the Nae Umeed Program.

The Yamuna Valley program funded by Mariwala Health Initiative has completed its third year in the region. The remotely located team worked with the far-off villages, strengthening relationships with community members, government authorities, and local leaders. The team is working on; community outreach and awareness activities in remote villages, Nae Umeed, networking with local partners, and improving access to care, and Nae Disha among school going adolescents in Purola and Naogaon. All of this is also being documented and written up for wider outreach in the research community. The Yamuna Valley project team worked with more than 50,000 people across 95 villages with its host of intervention and awareness programs in the region. The team registered 969 people with mental illness through hundreds of in-centres and door to door counselling. Burans Yamuna Valley celebrated Mental health day by spreading awareness to 40,000 locals in the remote district.

We faced many challenges last year due to the second wave of the COVID-19 pandemic, which delayed group sessions. However, things got on track as lockdown restrictions were eased off. Some women got married and shifted to a new place and could no longer attend the sessions, while male participation in the carers' group was negligible.

Despite these challenges, teams were able to do quick problem solving, adapting to situations rapidly. The Nae Umeed group sessions saw some innovative problem solving with group members joining sessions through WhatsApp. Additionally, we are seeing a drastic change in the State mental health system with increased networking and relationship building.

In the coming year, we are planning to facilitate Nae Umeed groups with

Community Health Global Network (CHGN) partners, and also continue to scope for ongoing work with the Prison program.



Prison Program



Nae Umeed Program



Award by State Mental Health Institute

We are also planning to start Parwarish - parenting program in Dehradun area with young people and their parents.

Outcome story

We were invited to be representative NGO for State mental health committee and district mental health committee through the National Mental Health Program/District Mental Health

Program. The State mental health institute requested our team to take nursing students on field exposure visit leading to excellent relationship building and involvement on World Mental Health Day. This was an intense month of visits during monsoon.

Community Homes Project

About Us!

In our work, from 2019-2021, we have assisted Women with developmental disability to leave the shelter home at Nari Niketan, to be able to live more independently. Altogether, the 8 women we serve have spent 75 collective years locked away in institutions, where they are unable to grow, develop, and contribute to society. This small project sets the stage for high quality residential services that are based on the concept of "home" rather than "facility".

Major accomplishments

The major accomplishment of transitioning 8 women from Nari Niketan to a typical community successfully has been our major work.

- As proven by the data taken pre- and post-de-institutionalisation with Quality of Life Perception Scale (Conroy,2017), and at regular intervals, we have measured real growth in independent living, functional skills, earning, personal choice and autonomy, perceived quality of life, and integrative activities.
- We have successfully advocated for the women – resulting in them receiving all the benefits to which they are entitled, including disability pension, ration, insurance, and some of the institutional costs re-directed to the community. Through careful work, we have assisted





Before



Now

three of the women to reunite with their families. This has been incredibly meaningful and rich, not only for the three women, but for the staff and management as well.

- Our methods have resulted in pride in contribution, as most of the women are contributing to household expenses and purchasing their own needed items. Besides, each are using their own local bank accounts, and getting experience in planning the use of their own money.
- In terms of community integration, many doors have been opened in the community in an amazing way. Ladies are invited for birthdays, weddings, festivals in the Community. They are now well known and often visited by neighbours, villagers, Pradhan, ward members and local Businessmen and many more.

Nari Niketan Project

Description: The MoU for operationalization & providing services at Rajkiye Mahila Kalyan Evam Punarvas Kendra (Nari Niketan)

Dehradun, Uttarakhand was signed in Feb. 2016 and we have successfully completed six years. The MoU for the current year is submitted to the authorities for further consideration. We are thankful to the authorities of the Women & Child Welfare Department Government of Uttarakhand, for providing us opportunity to continue our services at Rajkiye Mahila Kalyan Evm Punarvas Kendra (Nari Niketan), Dehradun. Over the last six years both the parties had trusted and supported each other. This created a wonderful environment in Nari Niketan. We could observe many positive changes in the women we are serving. Staff have also mingled well and are giving their best to make this place better.

Right now we have 120 women (minor and adults) who are mentally challenged as well as some are deaf/mute. 106 women are on Psychiatric medication and almost all are doing well. We have three very tough cases. IPD/Hospitalization is very rare.

Over the last six years we have reunited 127 women with their families which is a huge achievement for all of us. Additional 170 women got admitted in total during these years.

COVID-19 management in 2020 & 2021 (First & Second Wave):

It is impossible here to wear masks all the time and maintain social distancing but our COVID-19 management was excellent. Staff made extra effort and stayed in the campus 24*7 turn by turn. The result was very satisfactory.

First wave (2020) - No COVID 19 cases

Second wave (2021)

- 17 positive cases and 21 with seasonal flu
- No IPD admissions/ Hospitalization
- No complications were seen and everyone completed their quarantine period and got better

Our Medical & Psychiatric Services:

Doctors from HCH (Dr. Samuel) and Dr. Nisha Psychiatrist assist the inmates for their regular health and wellbeing.

Nutrition and mess services are also managed by HCH and the things have improved a lot.

The journey continues and we are very thankful for all associated with this project for their guidance and prayers.



Success Stories: There are many success stories in the last six years but here I want to share a recent one of Name- Ms S:

When we took over Nari Niketan in February 2016, we had four PPSDs (Ms R, Ms. K, Ms. G & Ms. S) who had very poor health. It was a struggle to bring them back to normal. These women were malnourished and Ms. G and Ms. S had a tendency to eat their stool (poo) which developed serious gastro diseases in them.

Ms. S's condition was horrible. She was almost on her death bed, but with compassionate care she improved tremendously during these years and one day she could recall the name of her village. Can you imagine! She was from a village which is just 35 KMs away from Dehradun City near Ranipokhari. So close yet so far! and it took 20 years. But all is well that ends well. A huge

family gathering was there at Nari Niketan as she had five children, all grown up now with grandchildren of Ms. S. Her husband died in the year 2005. Her brother loved her dearly and told us that he had tried several times to locate her before giving up. The family took her with them.



Community Based Inclusive Development (CBID)

Community based rehabilitation workers play an important role in reaching persons with disabilities in the community. However, they did not have access to formal training other than the foundational course on the education of children with disabilities provided by the Rehabilitation Council of India (RCI). There is a stark difference between the need in the community and the number of professionals serving them. The CBID training program is a relevant and feasible initiative to bridge the gap, striving to increase the quality of life of persons with disabilities in remote areas.

Herbertpur Christian Hospital was one of the 16 institutes (7 National institutes and 9 NGOs) in India chosen to conduct the RCI accredited 6-month Certificate program in Community Based Inclusive Development that was developed by the University of Melbourne in collaboration with the RCI.

The 1st batch of the course was from 16th September 2021 to 19th March 2022. We received 79 applications from across Central and North India. We enrolled 32 candidates out of which 29 took admission. We have a total of 12 faculty with 2 core faculty and 10 guest faculty with expertise in various areas.

The course focuses on three key performance areas, namely inclusive community development, Assessment & Intervention, and Professional behavior & Reflective practice.

Concepts were taught and practiced through theory classes, field visits, and field placements. The candidates were taken for field visits to local places to better understand and practice what was learnt in the class. They were also sent on field placements to their respective localities

to help them understand community work in their villages. It also allowed them to understand the challenges they would face while working in their communities.

Though some of the candidates have been working in the field of disability, the CBID course has given them a wider perspective of the various aspects of disability and helped them build their network. They have also started implementing in their communities what they have learned in the course, like referring persons with disabilities to therapists, identifying needs for assistive devices, and preparing to conduct camps in their localities. Meeting persons with disabilities throughout the duration of the course challenged the



candidates and enabled them to have a felt experience of the empowerment of persons with disabilities and the effect of barriers in the community.

Partnership

The Community Health Department partners with various groups in Himachal Pradesh, Pachwa Doon and Saharanpur.

Key Highlights:

1. We organized Leadership training in HCH which was led by Dr.Dinesh, 60 leaders were involved in the training.
2. We conducted a parenting workshop in Agra and then later they facilitated the similar workshop in Saharanpur.



Local Leader Strengthening



Family Strengthening



Building Palliative Care knowledge

3. Regular monthly discussions were conducted.
4. 31 couples participated in Leaders Couple retreat.
5. Regular Patient care and counselling were done by leaders.
6. During the pandemic Dr.Ashok Chako conducted whatsapp training for leaders in which 40 leaders were involved.
7. Palliative care training was provided to 20 leaders which enabled them to provide care for the terminal cancer patients.

Testimonials

I have been working for the last 4.5 years in this profession as a nurse and have seen hundreds of patients with multiple diagnoses where some have recovered and others had to leave us forever from this world. Being a nurse is not only about rendering care to the patients but also made us realize the importance of life and witnessing death very closely. I have faced and emotionally suffered different kinds of patient's illnesses and sometimes was hopeless with their poor prognosis, but each time God has blessed and helped me to continue my care for them. This time I have seen and experienced that God is a miracle worker.



In the month of December 2021, we had one patient called Master H of 3yrs old boy who was admitted to the ICU with the diagnosis of meningoencephalitis shock. He was intubated and was on 13 days of ventilator support. Each time when we saw this boy, we were broken emotionally several times and went clueless due to his poor condition. We did not find his sensorium level and always sought to see at least a single movement but could not. We could see the hope and faith every new day in their parent's eyes and hence we have worked for it. After several days of hard work, we the ICU team could extubate the boy and transfer out successfully and later the child was discharged with the grace of God. After one month, our baby boy himself walked and came for a follow-up in OPD with his father. This time we had tears of joy; we are so grateful that God has given us this opportunity to care for this beloved child.

Therefore, this roller coaster experience has taught me a lot of things to see from a brighter perspective and always believe that God is a miracle worker.

From **ICU NURSE**

Baby of Pramila

A baby was born at 6 am on 13/Feb/2022 in the Government hospital Vikasnagar, Dehradun whose intestine was out from the body. The parents of the baby mistook it for the umbilical cord that had been stretched out and did not understand that this could be a major problem. The parents brought the baby to our emergency and after initial assessment by Dr. Viju John, our pediatric surgeon and Dr. Vinod, our pediatrician, the baby was diagnosed to have Gastroschisis – a birth defect where there is a hole in the abdominal wall beside the belly button. The required surgery was done for the baby immediately the next day and was shifted to NICU for further post operative management.



After admitting to NICU, the baby was found to have low sugars and low temperature readings which were managed accordingly. The baby was given appropriate antibiotics and was started on intravenous nutrition. Baby's parents' financial condition was also not that good and the government's Ayushman scheme was a big help for them. The baby got better slowly and was discharged after a total stay of 39 days in NICU. This whole journey or experience was a miracle that we saw and experienced in front of our eyes. We trusted the Lord and when everyone lost hope God has again shown us that there is nothing impossible in front of him. It was a very critical condition that we have encountered in our career that has taught us lots of valuable lessons and experience.

We are fortunate of being a nurse that we got a chance to serve people in the fear of the Lord.

From **NICU NURSE**

PROFESSIONAL DEVELOPMENT OF STAFF DURING THE YEAR 2021-2022

S.No.	Name	Course	College
1	Mr. Suresh Singh Panwar	General Nursing and Midwifery	CIHSR Dimapur
2	Mr. Bhikari Kirsani	BSc Medical Lab Technology	CIHSR Dimapur
3	Ms. Rashami Pandey	PB BSc Nursing	CMC Vellore
4	Mr. Ravi Kumar	Polytechnic (Electrical & Electronics)	Dev Bhoomi Polytechnic College, Dehradun

Retirements

We are very thankful to our senior staff who faithfully served at Herbertpur Christian Hospital for many years



Mrs. Susamma Singh with family



Mr. Mohd Iltaf with family



Dr. T.K. Biswas with Unit officers



Mr. Autar Singh with Unit officers

Electives, Volunteers & Visitors:

1. Dr. Saira Paulose, Executive Director EHA
2. Dr. Alex Lea MD from Birmingham, USA
3. Dr. Sherin Lea MD from Birmingham, USA
4. Dr. Rubin Varghese MD from Birmingham, USA
5. Mrs. Merin Varghese Health IT Professional from Birmingham, USA
6. Dr. Deepak Singh, Regional Director EHA
7. Mrs. Elizabeth Neuville Key stone India
8. Mrs. Geeta Mondol Key stone India
9. Mrs. Mangala Honawar Marital Foundation
10. Mr. Daniel Hendrix, Audiology Specialist from the USA
16. Heights Cumberland Presbyterian Church, USA
17. Hope Presbyterian Community Church, USA
18. Inter Aid, Switzerland
19. Joni and Friends, USA
20. Jubil Thomas, UK
21. Kiku Trust, UK
22. Micha Pfaehler, Switzerland
23. Mr and Mrs. Paul East, UK
24. Raddiata Foundation Ltd, Australia
25. Rajkumar Samuel, USA
26. Rural India Supporting Trust, USA
27. Stitching De Verre Naasten, Netherlands
28. Susanne Gerber Hoffer, Switzerland
29. TATA Trust, Mumbai, India
30. Tear Australia Inc, Australia
31. The Archbishop of Sydney's Anglican Aid, Australia
32. William Victor Rutherford, UK

Epilogue**Partners/ Donors**

1. Anugrah Association, Switzerland
2. Azim Premji Foundation, India
3. Cathy Sandars, USA
4. Cipla Foundation, India
5. Development Associates International, USA
6. Dr Karen Ruth Mathias, Newzeland
7. Dr Sabu Thomas, Australia
8. Dr. Nathan Grills, Australia
9. E.I. Program Ltd, Australia
10. Emmanuel Hospital Association, Canada
11. Emmanuel Hospital Association, USA
12. Entrust Foundation, Australia
13. Fundacion Heres, Spain
14. Global Service Sponsors Inc, Australia
15. Good News for India, USA

HERBERTPUR CHRISTIAN HOSPITAL

Financial Statement

THREE YEARS REVENUE EXPENDITURE AND REVENUE BUDGET 2022-23

REVENUE & EXPENDITURE	Actuals 2019-20	Actuals 2020-21	Budget 2020-21	Actuals 2021-22	Budget 2022-23
REVENUE					
Revenue from patients					
OP Income	62,599,884	57,225,732	65,077,551	63,664,768	6,53,76,000
IP Income	55,225,819	64,807,186	80,298,537	96,060,489	10,69,64,000
Income through Outreach services	-	-	-	-	-
Total Revenue from Patients	117,825,703	122,032,918	145,376,088	159,725,257	17,23,40,000
Revenue from other sources					
GRANTS AND DONATIONS					
"Restricted local Donations (Grants)Excluding research"	9,250,538	7,055,680	5,000,000	10,422,993	1,00,00,000
"Restricted local Donations (Grants)Research"	-	50,000	50,000	269,237	-
Undesignated Local Donation	2,356,932	1,913,173	500,000	3,052,580	950,000
Total Grants & Donations	11,607,470	9,018,853	5,550,000	13,744,810	1,09,50,000
OTHER INCOME					
Income from training (School of Nursing)	10,746,398	10,984,625	11,000,000	11,130,190	12,600,000
Bank Interest	380,571	148,828	150,000	566,657	400,000
Eye Income	-	-	-	-	-
Other Income	-	-	-	90,783	20,000
Miscellaneous	473,133	211,459	50,000	51,463	75,000
Total Other Sources	11,600,103	11,344,912	11,200,000	11,839,093	13,095,000
TOTAL REVENUE	141,033,275	142,396,683	162,126,088	185,309,160	19,63,85,000
EXPENSES					
Establishment Expenses					
Staff Salaries	51,367,689	51,323,236	61,150,000	53,351,445	70,023,310
PF Administrative charges	356,899	414,768	497,722	254,853	307,217
PF Employer Contribution	5,329,637	5,843,145	6,500,000	6,309,070	7,596,862
Gratuity Contribution	2,663,720	1,076,576	1,550,000	1,479,855	1,783,128
Children Education Scheme	1,720,710	726,377	2,000,000	1,773,191	2,039,170
Total Establishment Expenses	61,438,655	59,384,102	71,697,722	63,168,414	81,749,686
ADMINISTRATIVE EXPENSES					
Assessment & Affiliation	15,000			-	-
Bank Charges	98,537	102,893	135,000	143,150	150,479
Communication expenses	90,140	79,856	120,000	106,550	124,676

Travel & Conveyance	332,376	363,119	370,000	462,439	484,803
Legal & Professional charges (Consultancy)	169,050	135,540	170,000	152,440	179,302
Audit Fees	63,160	63,160	65,000	64,930	68,177
Interest	508,070	152,346	-	-	-
RGB/RAC	139,654	-	25,000	-	47,455
Publicity & Advertisement	-	2,400	20,000	-	20,000
Total Administrative Expenses	1,415,987	899,314	905,000	929,509	1,074,892
HRD EXPENSES (Staff Benefit)					
EHA Medical Indemnity	78,840	-	-	-	-
EHA Mutual Health Fund	247,300	272,300	299,000	287,900	308,672
Staff Health Scheme	2,682,755	2,544,171	2,750,000	3,389,179	3,196,470
Home Travel Allowance	733,741	207,516	800,000	924,105	964,064
Professional Development of staff	419,581	196,641	300,000	436,386	496,857
Staff Welfare	1,287,619	958,631	1,500,000	2,249,916	2,413,459
ESIC Employer Contribution	991,813	950,171	1,150,000	954,161	1,010,892
Total HRD Expenses	6,441,649	5,129,430	6,799,000	8,241,647	8,390,413
SUPPLIES					
Pharmacy supplies	21,574,673	18,281,330	20,800,000	26,493,400	28,935,223
Medical & surgical supplies	3,420,780	2,146,983	4,500,000	3,210,788	4,812,333
Lab Supplies	4,283,036	3,360,330	4,250,000	4,480,038	4,941,779
Radiology Supplies	521,797	388,268	572,000	413,772	530,150
Linen & Bedding	355,084	291,575	500,000	671,542	789,801
Printing & Stationery Supplies	1,302,839	899,564	1,500,000	1,291,231	1,342,760
Laundry supplies	44,012	80,040	100,000	108,019	121,786
Housekeeping Supplies	338,156	500,954	600,000	708,250	760,642
Total Supplies	31,840,376	25,949,044	32,822,000	37,377,039	42,234,473
MAINTENANCE EXPENSES					
General Maintenance + STP	1,256,808	1,119,186	1,100,000	1,854,521	1,533,760
Electrical Maintenance	619,849	212,705	550,000	677,498	826,651
Equipment maintenance	1,085,029	967,776	1,250,000	1,305,343	1,660,255
Computer Maintenance	77,475	11,608	25,000	16,223	25,000
Building Maintenance	640,916	259,297	750,000	803,962	792,000
Furniture Maintenance	10,291	92,929	25,000	64,891	50,000
Total Maintenance Expenses	3,690,368	2,663,502	3,700,000	4,722,438	4,887,666
VEHICLE EXPENSES					
Vehicle Maintenance	101,815	64,411	150,000	97,760	122,652
Vehicle Running	82,734	77,982	100,000	245,064	253,324
Vehicle Insurance	103,808	78,218	100,000	119,706	141,456
Total Vehicle Expenses	288,357	220,611	350,000	462,530	517,432

UTILITY					
Electricity Charge - Commercial	2,239,145	1,980,663	2,400,000	2,282,026	2,718,937
Electricity Charge - Domestic	143,577	268,387	300,000	420,350	365,623
Generator Running and maintenance	950,736	1,094,655	1,200,000	1,193,002	1,323,576
Gas & K.Oil	21,567	6,280	40,000	29,343	45,000
Total Utility Expenses	3,355,025	3,349,985	3,940,000	3,924,721	4,453,137
CHARITY					
IP Charity	2,683,984	6,311,050	6,450,000	15,267,980	1,60,48,857
OP Charity	546,235	500,971	600,000	493,735	519,801
Total Charity	3,230,220	6,812,021	7,050,000	15,761,715	1,65,68,658
DONATIONS GIVEN (to 12AA registered organizations)					
EHA Coordination Contribution	1,219,860	859,500	1,383,261	1,252,370	1,476,392
Donation HDF	160,000			-	-
Mutual Assistance Expense	349,750	351,694	500,000	572,715	1,047,104
Total Donations given	1,729,610	1,211,194	1,883,261	1,825,085	2,523,496
TAXES & FEES					
Land Tax/ water Tax	766	893	1,200	893	561
Fees for registrations, licences	31,896	30,400	100,000	156,965	161,331
Total Taxes	32,662	31,293	101,200	157,858	161,892
TRAINING EXPENSES					
School of Nursing/College of Nursing	10,786,765	10,378,933	10,500,000	12,882,177	12,570,254
Community College	-	-	-	-	-
Other Training	-	-	-	-	-
Total Training Expenses	10,786,765	10,378,933	10,500,000	12,882,177	12,570,254
EXPENSES FOR COMMUNITY BASED INTERVENTIONS					
Palliative Care	-	-	250,000	4,470	250,000
CHDP Project	-	-	-	-	-
Total Community Based Interventions	-	-	250,000	4,470	250,000
DESIGNATED PROJECTS (for which Grants were received)					
Research Projects	-	-	-	-	-
Any other Projects - CHD	6,304,322	6,961,880	5,000,000	6,359,693	7,000,000
Total Expense of Designated Projects (Grants Local)	6,304,322	6,961,880	5,000,000	6,359,693	7,000,000
OTHER EXPENSES					
Garden & Ground	48,725	57,586	62,000	39,552	62,000
Boarding & Kitchen	8,916	85,179	86,000	33,974	86,000
Waste Disposal Expenses	539,842	616,313	732,000	728,427	800,000
House Keeping for Non Clinical	-	-	-	-	-
Security Outsourced	3,129,836	3,341,127	3,700,000	3,672,709	4,000,000
Software Development	-	-	-	-	1,200,000

Outsourced Consultancy	-	272,000	300,000	-	-
Creche Expenses	-	-	-	-	120,000
Amount written off	489,774	2,396,860	-	-	-
Covid-19 Expenses	-	143,881.00	100,000.00	329,188.00	100,000.00
Azim Premji Covid Expenses	-	-	-	884,507.00	-
Miscellaneous Exps	272,621.37	363,046.55	50,000.00	287,524.03	35,000.00
Total Other Expenses	4,489,715.23	7,275,992.14	5,030,000.00	5,975,881.03	64,03,000.00
TOTAL EXPENSES	135,043,712.06	130,267,301.00	150,028,183.00	161,793,178.83	18,87,85,000.00
Surplus/Deficit	5,989,563.18	12,129,382.08	12,097,905.04	23,515,981.04	76,00,000.00
Capital Expenditure	20,288,026.97	1,148,350.00	2,900,000.00	13,697,931.00	1,200,000.00
Depreciation	5,138,546.00	4,929,515.00	5,300,000.00	6,460,246.00	64,00,000.00
NET SURPLUS / DEFICIT	(19,437,009.79)	6,051,517.08	3,897,905.04	3,357,804.04	(0.00)

HERBERTPUR CHRISTIAN HOSPITAL
CAPITAL EXPENDITURE
01 APRIL 2021 - 31 MARCH 2022

Capital Items	Budget 2021-22	Actual 2021-22	From Own Funds	From FC
MEDICAL EQUIPMENT				
1. Arthroscope and Instrumnets	500,000	-	-	-
2. Autoclave	600,000	-	-	-
3. Paediatric Ventilator	800,000	-	-	-
4. Bubble CPAP	150,000	-	-	-
5. Baby Warmers and Phototherapy Machince	100,000	-	-	-
6. Histopathology Equipment	300,000	-	-	-
7. Electrolyte Analyser	180,000	-	-	-
8. Ultrasound Machine	2,800,000	2,306,104	-	2,306,104
9. Digital X-Ray for Dental Lab	200,000	134,400	-	134,400
10. Oxygen Generator	3,500,000	3,138,800	-	3,138,800
11. New Oxygen Points		560,250	-	560,250
12. CTG wireless		340,000	-	340,000
13. Syringe & Volumetric Infusion Pumps (8+4)		452,480	-	452,480
14. Humidifier Base		190,000	-	190,000
15. Cautery Machine		1,100,000	-	1,100,000
16. Washer extractor and Tumble dryer (Laundry machine)		1,351,852	-	1,351,852
17. I Chroma Dry Chemistry		249,629	-	249,629
18. Neo natal software for Ventilator		554,600	-	554,600
19. Pulse oximeter		152,000	-	152,000
20. S.S. Dressing Trolley with Bowel & bucket, Fully S.S. Three Shel instrument trolley		39,813	39,813	
21. Foetal Monitor (CTG Machine)		95,200	95,200	
22. Hi-Lo hand pressure gauze manometer		12,775	12,775	
23. Fetal Monitor		19,942	19,942	
24. Foetal Doppler FD9713N		6,800	6,800	
25. Instrument Trolley (4 nos) & shelf		110,920	110,920	
26. Emergency & Recovery trolleys (2 nos)		107,380	107,380	
27. Fogging Machine		38,350	38,350	
28. Tool kit		35,840	35,840	
29. Surgical Lighting System (LED Lights) with OT Table		1,146,095	1,146,095	
30. Hot air incubator		45,725	45,725	
31. Ventilator with circuit (1 no) Monitor (2 no)		890,400	890,400	
32. Ventilator circuits (25 No)		61,040	61,040	
33. Hose pipe (3 nos)		12,390	12,390	
34. Syringe Pump (5 nos)		123,200	123,200	
35. Patient monitor 8 no		788,480	788,480	
36. Monitors (8 nos)		22,656	22,656	
37. Ventilator (3 nos)		3,410,400	3,410,400	
38. Syringe Pumps (2nos)		80,000	80,000	
39. Anesthesia Workstation		960,120	960,120	
40. Crash Cart		28,615	28,615	
41. Ventilators		2,400,000	2,400,000	
42. Oxygen Concentrator		740,000	740,000	
43. Bipap Machines		807,206	807,206	
44. Others		56,111	56,111	
Total Medical Equipment	9,130,000	22,569,573	12,039,458	10,530,115

INFRASTRUCTURE				
1. College Of Nursing	20,000,000	10,965,144	-	10,965,144
2. Staff Quarters	24,000,000			
3. Blood Bank & PMR, Dental, ENT	3,000,000			
4. Emergency Room expansion	1,000,000			
5. Ramp - Work in Progress	4,500,000	157,705	-	157,705
6. Building Compounding and Master Plan		236,000	236,000	
7. Architectural & Interior design	-	356,360	356,360	
8. Room for Oxygen Plant, Hospital Transformer etc.	-	142,874	142,874	
9. Anugrah Building	-	3,000,000	-	3,000,000
Total - Infrastructure	52,500,000	14,858,083	735,234	14,122,849
VEHICLES				
1. Traveller Ambulance	2,600,000	2,301,000	-	2,301,000
2. Bolero/SUV	1,000,000	-	-	-
3. Aactiva 125CC	-	99,900	99,900	
Total - Vehicles	3,600,000	2,400,900	99,900	2,301,000
IT/COMMUNICATION				
1. Computer (Desktop)	600,000	1,309,493	43,359	1,266,134
2. Laptop	-	210,378	116,951	93,427
3. Application Server	-	192,045		192,045
Total - IT Communication	600,000	1,711,916	160,310	1,551,606
ELECTRICAL/UTILITY				
1. Generator - 320kv	2,000,000	1,888,000	-	1,888,000
2. ICU - UPS 20KV	400,000	-	-	-
3. Vacuum Circuit Breaker	-	361,080	-	361,080
4. Step Down Transformer (250 kva)	-	337,480	-	337,480
5. Cable etc for Transformer	-	216,223	-	216,223
6. Fire Alarm Panel & Others	-	173,708	173,708	-
7. Airconditioner	-	242,500		242,500
Total - Electrical/Utility	2400000	3218991	173708	3045283
FURNITURE				
1. Rack	-	7,080	-	7,080
2. Almirah & Book Case	-	121,680	105,225	16,455
3. White Board	-	11,620	-	11,620
4. Library Chairs, table, racks-School of Nursing	300,000	110,875	-	110,875
5. Faculty room - School of Nuring	200,000	-	-	-
6. Chairs & Tables	-	167,091	167,091	-
Total - Furniture	500000	418346	272316	146030
ANY OTHER				
1. Advanced Skill Lab - SON	600,000	308,682	-	308,682
2. Digital Classroom - SON	150,000	-	-	-
3. Audio System	-	151,755	-	151,755
4. Oxygen cylinders	-	28,320	-	28,320
5. Refrigerator, Fan & others	-	331,861	85,505	246,356
6. LED Projector	-	56,048	-	56,048
7. Tablet		30,500	30,500	
8. Mobile Phone		56,200	56,200	
9. Printer		44,800	44,800	
Total - Any Other	750,000	1,008,166	217,005	791,161
Total Capital Expenditure	60,350,000	23,616,402	1,658,473	32,488,044

HERBERTPUR CHRISTIAN HOSPITAL CAPITAL BUDGET 2022-23

Capital Items	Budget 2022-23	From Own Funds	From FC
MEDICAL EQUIPMENT			
1. Baby Warmers	300,000	-	300,000
2. Histopathology Equipment	400,000	-	400,000
3. CT Scan	15,000,000	-	15,000,000
4. Trauma Centre Equipment	3,000,000	-	3,000,000
5. Rehab equipment	1,500,000	-	1,500,000
6. Physiotherapy equipment	100,000	-	100,000
7. Bactec Machine	700,000	-	700,000
8. Xray Machine - 500ma	900,000	-	900,000
9. EMG/NCV	1,500,000	-	1,500,000
10. TB Gene Xpert Machine	800,000	-	800,000
11. Automated blood culture System	500,000	-	500,000
12. Advanced Patient monitor	300,000	-	300,000
13. Nerve simulator	50,000	-	50,000
14. New Arthroscopic Equipment	500,000	-	500,000
15. C Arm	1,500,000	-	1,500,000
16. Equipment for endo urological Services	700,000	-	700,000
Total - Medical Equipment	27,750,000	-	27,750,000
INFRASTRUCTURE			
1. Additional Nursing Hostel	10,000,000	-	10,000,000
2. Staff Quarters	25,000,000	-	25,000,000
3. Trauma Centre	20,000,000	-	20,000,000
Total - Infrastructure	55,000,000	-	55,000,000
VEHICLES			
1. Four Wheeler	1,200,000	1,200,000	-
Total - Vehicles	1,200,000	1,200,000	-
IT/COMMUNICATION			
1. Computers , Desktops	600,000	-	600,000
2. CCTV	200,000	-	200,000
Total - IT Communication	800,000	-	800,000
ELECTRICAL/UTILITY			
1. Electrical Panels and Cables	500,000	-	500,000
Total - Electrical/Utility	500,000	-	500,000
FURNITURE			
1. Library Chairs, Table, Racks- School of Nursing	500,000	-	500,000
Total - Furniture	500,000	-	500,000
Summary of Capital Expenditure			
Total - Medical Equipment	27,750,000	-	27,750,000
Total - Infrastructure	55,000,000	-	55,000,000
Total - Vehicles	1,200,000	1,200,000	-
Total - IT Communication	800,000	-	800,000
Total - Electrical/Utility	500,000	-	500,000
Total - Furniture	500,000	-	500,000
TOTAL CAPITAL EXPENDITURE	85,750,000	1,200,000	84,550,000

HERBERTPUR CHRISTIAN HOSPITAL
PATIENT STATISTICS
THREE YEARS COMPARISON AND PROJECTION FOR 2022-23

PARTICULARS	Actuals 2019-20	Actuals 2020-21	Projected for 2021-22	Actuals 2021-22	Projection 2022-23
IN PATIENT SERVICES					
Total bed strength	120	120	120	120	120
Operational bed strength	100	100	100	100	100
Number of available bed days	36500	36500	36500	36500	36500
Number of occupied bed days	17551	13898	14000	16344	17000
Bed Occupancy rate	48%	38%	38%	45%	47%
Average Length of Stay	3	3	3	3	3
ADMISSIONS					
Admission through Outpatients	3348	2924	3450	2999	3250
Admission through Emergency/Causalty	1363	968	1400	1145	1250
New born admissions (inborn and sick)	558	517	580	452	600
New born admissions (born outside only)	30	38	80	74	100
Total Admissions	5299	4447	5510	4670	5200
OUT PATIENT SERVICES					
New Patients	36023	26368	27000	26756	28000
Repeat Patients	69630	51213	60000	55978	57000
Emergency Patients	9990	9916	12500	10749	11000
Total Out Patients	115643	87497	99500	93483	96000
Average Out Patients per day	371	280	319	300	308
SURGICAL SERVICES					
General Major	224	191	200	247	235
General Minor	421	352	400	290	280
Total General Surgeries	645	543	600	537	515
OBGY SURGERIES					
OBGY Major	609	649	725	638	625
OBGY Minor	122	138	140	49	70
Total OBGY Surgeries	731	787	865	687	695
ORTHO SURGERIES					
Ortho Major	303	392	425	444	450
Ortho Minor	386	433	430	385	415
Total ORTHO Surgeries	689	825	855	829	865
OPHTHALMIC SURGERIES					
Ophthalmic Major	37	82	95	38	50
Ophthalmic Minor	1	24	35	11	5
Total Eye Surgeries	38	106	130	49	55
ENT SURGERIES					
ENT Major	30	18	30	13	20
ENT Minor	300	145	175	97	100
Total ENT Surgeries	330	163	205	110	120
OTHER SURGERIES					
Other Major	4	0	2	0	0

Other Minor	13	4	5	3	5
Total Other Surgeries	17	4	7	3	5
TOTAL SURGERIES	2450	2428	2662	2215	2255
MATERNAL SERVICES					
Normal	876	819	965	785	860
LSCS	475	512	550	511	525
Breech	17	3	4	2	0
Vacuum	0	0	0	0	0
Forceps	29	30	25	25	25
Total Deliveries	1397	1364	1544	1323	1410
CRITICAL MATERNITY INDICATORS					
Live Births	1394	1358	1534	1302	1395
Still Birth/IUD	3	6	10	21	15
Perinatal Mortality	0	0	0	5	0
Early Neonatal Mortality (Inborn Only)	0	0	0	4	0
Late Neonatal Mortality (Inborn Only)	0	0	0	0	0
Neonatal Mortality(Inborn Only)	0	0	0	0	0
Low Birth Weight	188	193	210	256	270
Very Low Birth Weight (<1500 gm)	28	0	15	19	25
Maternal Mortality	0	0	0	0	0
Early Neonatal Mortality (Outborn Only)	0	0	0	0	0
Late Neonatal Mortality (Outborn Only)	0	0	0	0	0
Neonatal Mortality (Outborn Only)	0	0	0	0	0
No. of deaths of Infants from 28 days to 1 year	0	0	0	0	0
No. of deaths of children from 1 year to 5 years	0	0	0	0	0
DEATHS					
With in 4 hours	22	22	30	59	145
4-24 Hours	15	11	10	22	25
After 24 hours	21	7	13	82	25
Total Deaths	58	40	53	163	195
Percentage of Deaths	1%	1%	1%	3%	3.75%
LABORATORY					
Clinical Biochemistry	67092	50069	60000	66990	69200
Clinical Microbiology	7364	4237	6500	5531	5500
Serology	19904	19604	19500	21610	22250
Outsourced tests	366	311	450	494	490
Crossmatching tests (Blood Bank /Blood Storage center)	0	0	0	0	0
Blood Borne Virus screening (Blood Bank /Blood Storage center)	0	0	0	0	0
Total Lab Tests	138905	103191	124450	125634	132440
RADIOLOGY					
X-ray	12812	10920	12000	12211	12500
ECG	5269	3357	5000	3788	3700
Ultrasound	1662	1428	1600	1394	1340
CT Scan	0	0	0	0	0
ENDOSCOPY					
Scopies	15	5	10	5	5
OUTREACH					
Total camps conducted	41	17	20	28	20
Total villages covered	72	50	70	41	41
Total patients treated through outreach services	1964	975	1000	1340	1400

HERBERTPUR CHRISTIAN HOSPITAL
Community Health and Development Project
FC Account (1st April 2021 to 31st March 2022)

PROJECT NAME	Budget 2021-22	Opening Balance on 01 Apr 2021	Total Receipts	Total Payments	Closing Balance on 31 March 2022
Shifa MH Project	2,856,732.00	(592,927.00)	3,685,734.00	2,833,873.00	258,934.00
Anugrah Project	2,887,092.00	174,080.00	1,992,372.00	2,123,637.00	42,815.00
Anugrah Orthotic Workshop	2,388,650.00	3,567,416.00	1,251,082.00	1,838,718.00	2,979,780.00
Anugrah Learning Center Sahaspur	884,906.00	1,048,398.37	1,000,000.00	578,136.00	1,470,262.37
Anugrah Learning Center Vikasnagar	782,230.00	926,687.00	1,205,452.00	530,645.00	1,601,494.00
Burans Project	4,620,265.00	6,193,505.45	3,328,450.00	3,452,121.00	6,069,834.45
HCH - CHGN	53,131.00	53,131.00	-	53,131.00	-
Community Home Project	3,776,960.00	2,473,301.00	1,910,995.00	3,928,752.00	455,544.00
Joni & friends	800,000.00	390,906.00	1,733,334.00	622,873.00	1,501,367.00
CH Dermatology	173,156.00	173,156.00	354,041.60	-	527,197.60
Dental Library	10,000.00	10,000.00	-	-	10,000.00
Grant for Equipment	319,792.00	319,792.00	-	319,792.00	-
MCH/RCH Project	15,851.00	15,851.00	-	-	15,851.00
Poor patient fund	200,000.00	304,421.89	-	239,195.00	65,226.89
SON Building (Expansion)	3,000,000.00	2,915,137.56	-	2,915,138.00	(0.44)
Anugrah Building Fund	500,000.00	786,604.60	-	3,105,175.00	(318,570.40)
Engage Disability Fund	100,000.00	577,107.00	330,222.00	-	907,329.00
ALCD	1,090,978.00	1,090,998.00	1,023,502.00	568,106.00	1,546,394.00
Anugrah Shifa Project Fund	2,500,000.00	7,316,298.69	4,207,987.00	1,138,938.00	10,385,347.69
CBM Project Fund	-	542,235.00	-	-	542,235.00
Community College Fund	-	274,861.00	-	-	274,861.00
Covid 19	2,500,000.00	(98,430.00)	7,160,981.92	3,551,442.00	3,511,109.92
Engage Disability Beyond Suffering	100,000.00	245,879.00	-	-	245,879.00
Mainstreaming Disability Fund	-	87,426.00	-	-	87,426.00
Relief Project Fund	50,000.00	195,198.00	-	-	195,198.00
Palliative Care	250,000.00	-	227,448.00	123,560.00	103,888.00
CBID	1,200,000.00	-	1,114,120.00	551,613.00	562,507.00
Joni & Friends Other Fund	-	-	652,000.00	-	652,000.00
Anugrah Carpentry	-	-	502,991.00	-	502,991.00
Total	31,059,743.00	28,991,033.56	33,680,712.52	28,474,845.00	34,196,901.08

Note : Covid donations not included

TOTAL NUMBER OF STAFF AS ON 31/03/2022
BREAK UP STATUS WISE (FIVE YEARS COMPARISON)

STATUS	2017-18	2018-19	2019-20	2020-21	2021-22
Confirmed	112	114	105	98	99
Probationary	7	7	6	1	0
Service Obligation	26	37	31	39	25
Contract	83	113	127	144	149
Out sourced staff	14	16	19	20	21
Trainees	3	2	0	0	3
Volunteers/Daily wages staff	14	16	20	15	19
Total staff	259	305	308	317	316

TOTAL NUMBER OF STAFF AS ON 31/03/2022
BREAK UP CATEGORY WISE (FIVE YEARS COMPARISON)

CATEGORY	2017-18	2018-19	2019-20	2020-21	2021-22
Medical Staff	19	22	22	22	24
Nursing Staff	65	81	73	74	68
Nursing Education Staff	10	12	10	12	13
Administrative Staff	18	20	22	25	29
Allied Health Staff	18	24	24	24	30
Technical Services Staff	4	4	4	4	11
Community Health Staff	36	47	49	47	38
Support Staff	58	61	66	74	63
Security outsourced	14	16	19	20	21
Daily wages staff/Trainees	17	18	19	15	19
Total Staff	259	305	308	317	316

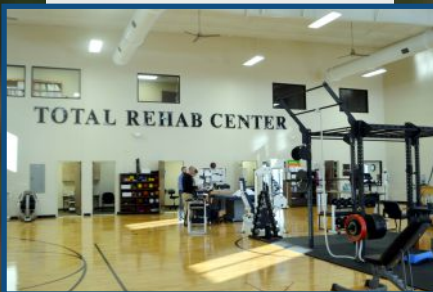
HOW YOU CAN PARTNER WITH HERBERTPUR CHRISTIAN HOSPITAL (HCH)

	Indian Rupees (INR)	US Dollars
Cost of 1 year of Medicines for Psychiatric Patient - Shifa village clinic	7,000.00	89
Cost of treating a patient in Intensive Care Unit (ICU) per day	5,000.00	63
Cost of dietary need for a patient per day (Nutritional diet)	250.00	3
Cost of treating a patient in general ward per day	1,500.00	19
Cost of treating a patient of snake bite - Anti Snake Venom and Hospitalisation	25,000.00	316
Sponsoring one Nursing Student for one year (Tuition and boarding fees)	120,000.00	1,519
Cost of a Wheel Chair	17,000.00	215
Rehabilitation of Spinal cord injury patient per day cost	3,500.00	44
Anugrah Day care (150 Children), cost of one child per year	75,000.00	949
Furniture for Staff Quarters, for one quarter	120,000.00	1,519
Palliative Care Expenses - Travel Per day to visit Patients	1,000.00	13

HERBERTPUR CHRISTIAN HOSPITAL
LICENCES & ACCREDITATIONS

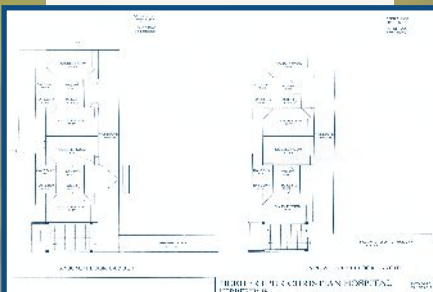
S.No.	Particulars	Yes/No	Licence/Certificate No.	In Whose Name	Valid Till (dd-mm-yyyy)
1	Society Registration	Yes	UK06008102021007016	Herbertpur Christian Hospital Society	6/27/2026
2	CEA Registration	Yes	DRA/CEA/PVT/109/MAY/2018	Herbertpur Christian Hospital Society/ 1 Dr Mathew Samue	5/18/2023
3	USG Machine Registration	Yes	PCPNDT/Reg. renewal/299/173/2021/881	Herbertpur Christian Hospital	22-02-2026
4	USG License	Yes	PNDT/Sanction letter/2017/2983	Dr Viju John	One time
5	Pharmacy License	Yes	Licence No. 112020 and 112021	Herbertpur Christian Hospital	12/4/2025
6	Drug Store License	Yes	Licence 20B. 109596 and 21B. 109597	HCH and Mr Ambedkar	09/10/2024
7	Registered Pharmacist License	Yes	1502, 6502 and 6150	Rajeev, Ashutosh and Pramod	12/4/2025
8	Pollution Control Certificate	Yes	UKPCB/HO/BMW-19/2021/1259	Herbertpur Christian Hospital	3/31/2024
9	BMW Management Approval	Yes	Nil	Herbertpur Christian Hospital	1/8/2025
10	Certificate from Fire Department	Yes	20/706/21-22	Herbertpur Christian Hospital	8/2/2022
11	Generator Permissions	NA	Nil	Herbertpur Christian Hospital	Safety certificate
12	Narcotic License /NDPS Morphine	Yes	26/1/Drug/Narcotic/73/2022/951	Herbertpur Christian Hospital	5/4/2024
13	Radiation Certificate from BARC	Yes	21-RSO-639328	Herbertpur Christian Hospital	7/12/2024
14	AERB Approval	Yes	17-LOEE-214252	Herbertpur Christian Hospital Society	9/12/2022
15	Income Tax PAN	Yes	AAAAH1426Q	Herbertpur Christian Hospital Society	One time
16	GST	Yes	05AAAAH1426Q1ZO	Herbertpur Christian Hospital Society	One time
17	FCRA	Yes	347900066	Herbertpur Christian Hospital	9/30/2022
18	INC Recognition	yes	FN0.18-37/7640-INC	Herbertpur Christian Hospital	One time
19	Uttarakhand State Council	Yes	Herbertpur/06/2013/431	Herbertpur Christian Hospital	One time
20	80G	Yes	AAAAH1426QF20214	Herbertpur Christian Hospital Society	2022-23 to 2026-27
21	12 A - IT Exemption	Yes	AAAAH1426QE20216	Herbertpur Christian Hospital Society	2022-23 to 2026-27
22	Blood Bank	No	-	Herbertpur Christian Hospital Society	Process is on
23	Import Export code	Yes	6116900283	Herbertpur Christian Hospital Society	valid and active
24	Controllor of Explosives (Medical Oxygen)	Yes	S/HO?UC/03/182(S57534)	Herbertpur Christian Hospital	30/09/2023

Future PLANS



Rehabilitation Center

HCH plans to have a Rehabilitation Centre in the near future, as we have a PMR resident consultant and the infrastructure being developed on the campus.



Working Men's & Women's Hostel

Present situation to accommodate the new (Bachelors and Spinsters) staff looking into the future expansion seems very difficult. Hence proposed to have new accommodation facilities.



Nursing Students' Hostel

Upgradation of the present School of Nursing requires more hostel facility to accommodate 120 more students.



Staff Quarters

We have an age old quarter accommodating 12 families, the replacement of this building with accommodating more staff is important.



Trauma care and Training center

With the number of accident cases we receive at HCH, the present Emergency set up with 8 Beds is not adequate, hence we require a larger set up to avoid Patients referral to higher centers.



HERBERTPUR CHRISTIAN HOSPITAL

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