



BROADWELL CHRISTIAN HOSPITAL, FATEHPUR

Biannual Report 2024



Vision

Fellowship for transformation through caring

Motto

Spreading the fragrance of Christ to the world in need.



Our Mission

We exist to transform communities through caring, with primary emphasis on the poor and the marginalized.

We care through

Provision of appropriate health care

Empowering communities through health and development programs

Holistic ministries

Leadership development

We serve people and communities in and around Fatehpur, UP regardless of race, caste, creed or religion .

We do this in the name and spirit of Jesus Christ so as to manifest Him through word and deed.

Core Values

Compassion

Diversity and Inclusion

Trust

Excellence

Team work

Sustainability

Respect

Accountability

Servant Leadership

Our love for mankind is founded upon the Rock which can never be shaken nor destroyed. Just as the hospital was moving past the Covid pandemic and its effects, another major crisis struck. OPD and IPD services were affected, hospital had downsized and many predicted that the hospital would be shutdown. Our well wishers and supporters, sister units and EHA central office stood with us. Many people supported us with prayers around the world. The hospital is still on the path of recovery and is beset with challenges.

BCH initiated a strategic planning process to work on the hospital's first post-traumatic phase plan in the month of January 2024. The strategic planning included refining and aligning on a refreshed vision, mission, values, strategic directions and objectives to set the foundations for BCH's role as a holistic health care provider in the Fatehpur. As we look to a new era for BCH, the current team is committed to work together to understand the needs of the community and advance the health situation of those we serve. We restarted the community health work as it is the core and essence of who we are and what we do. In the remote places far away from the reach of healthcare, there will be many who are desperate, in need and helpless. This may be a pregnant lady who is swelling up and becoming breathless day by day, because she has nutritional anaemia, a young man who has recurrent seizures and is pronounced to be demon possessed by the local faith healer, but a course of antihelminthic would help him; a patient with advanced cancer writhing in pain all by himself and hopeless because everyone has given up on him, a young tot who is an unspoken "burden" to his family because of development issues except for his mother who continues to faithfully nurse him. The love of the Saviour can touch each one of these and more , because He cares....we care!

The new strategic plan which is alignment with the EHA Strategic Objectives is expected to position BCH to innovate how we serve patients and the community to advance a seamlessly integrated, high quality wholistic health system and to work with government and community partners to solve the unique health equity challenges in the community.



Expanded the scope of services with the addition of USG ,Physical Medicine and Rehabilitation and Home based care

Dr. Rajeev Nayan Giri, honorable CMO, and Mr. Pradeep Raman, honorable SDM, inaugurated our physical medicine and rehabilitation (PMR) services on November 25th. With this expansion, we hope to cater to many more children and adults with various needs, including cerebral palsy, neuro rehabilitation and pain relief physiotherapy.

Dr. Ishtiaq Ahmad, ACOMO, inaugurated our ultrasound and home based care services in the month of August. The addition of ultrasound has been a much awaited boon for our medical team and it has enhanced our medical capabilities, especially for our pregnant patients. Home based care is a relatively new concept, where patients can get their medical care in the convenience of their homes.



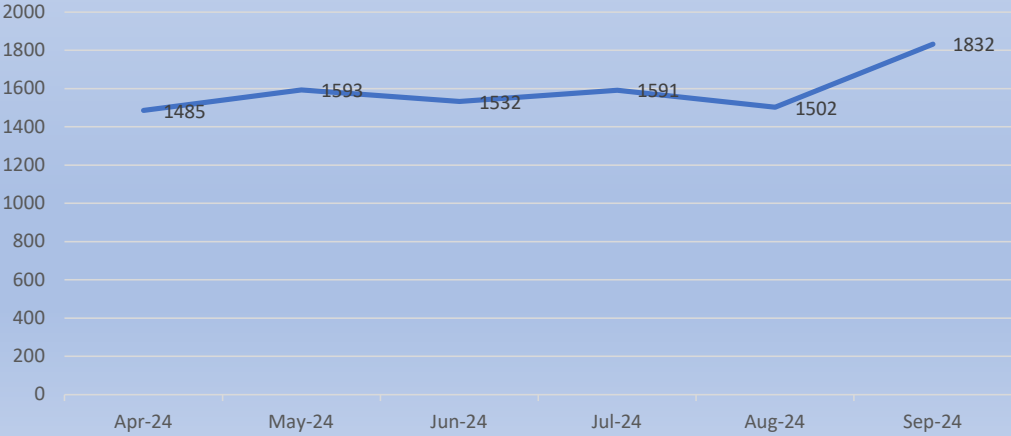
Performance



IP Admissions

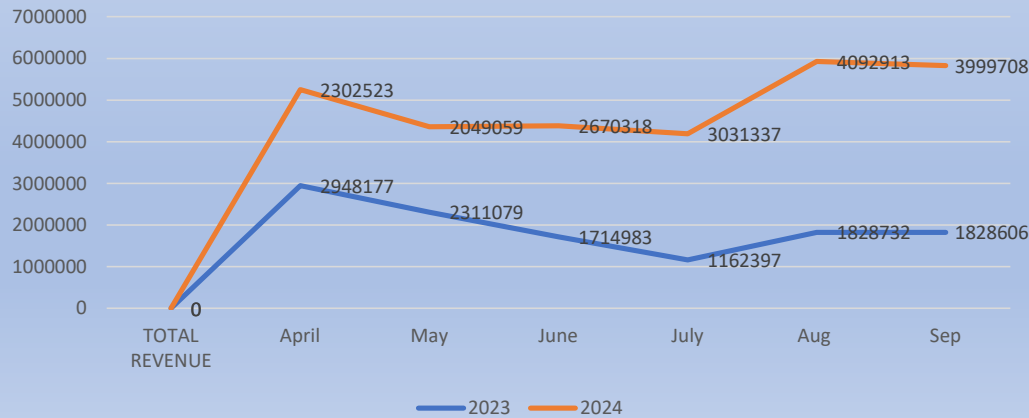


Out- Patients

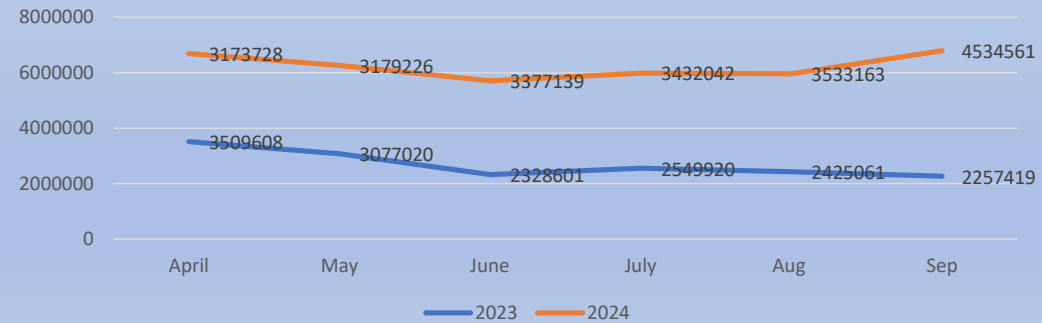


| Financial Status As on 30 th September 2024 | Amount (Rs.) | Remarks |
|--|--------------------|----------------------------|
| Total Funds available as on 30/09/2024 | 1350946.55 | |
| Liabilities | | |
| Sundry Creditors | 1882025 | Due from June 24 till date |
| Salary Arrear & other | 2028631 | Due from June 24 |
| Mutual Health Fund | 3650 | Aug-24 |
| Gratuity | 2718180 | Due from Feb 20 |
| Salary Payable+Medical Exp to other Units | 94689 | |
| Children Education Asst.(Oct-23- March 24) | 87011 | |
| Total Liabilities | 6814186 | |
| Cash Deficit | -5463239.45 | |

Total Revenue



Total Expenses



PMR DEPARTMENT & INCLUSIVE PLAY AREA INAUGURATION

Accessibility to rehabilitation, inclusion and empowerment are our three focus points when it comes to disability initiatives.

A dedicated physiotherapy hall had been established in 2015 by a CMC trained physiotherapist. Even after he left, an assistant trained by him has been continuing the services all these years. These services have been useful to many children with disability including cerebral palsy, hereditary spastic paraparesis, autism and also adults with paralysis due to acquired brain injury and spinal cord injury. In addition, many patients with musculoskeletal pain and post-operative or post-fracture stiffness have benefitted from pain relief modalities.

We are looking forward to expanding the scope of PMR services in the coming years due to high demand of disability care need . As keeping this center as a base facility we will be planning to reach the needy in five of our blocks through PHCs focusing on training the care givers and volunteers.

Even with the availability of numerous super-specialty hospitals and other centers in urban areas, care of the disabled is an often-neglected area. This need is especially greater in a place like ours where even basic health care is neglected and those who are disabled and suffering are left to their own.



PALLIATIVE CARE

Our palliative care team provides home care, OPD and IP care to patients. We have around 160 patients with us, most of whom suffer from advanced oral cancer, which is primarily due to tobacco chewing which is rampant. There is an unimaginable lack of value for life, and many such patients are left to fend for themselves in a corner of the house, or sometimes even outside, being exposed to the extremes of weather in very difficult circumstances. Our team visits these homes, spread over 70 plus villages in the district, braving difficult terrains, extremes of weather and even ignorance and stiff opposition from the family (who would rather go for unscientific traditional methods of healing, in the search of an elusive cure). They provide, during the course of their visits, often the only human touch and compassion to these neglected, shunned by their own loved ones. They do dressing of wounds, other basic nursing care, pain management and also offer bereavement care. Patients requiring further care are directed to our hospital where they can be seen by specialist doctors and treated.

Objectives

- To provide relief of symptoms such as pain through provision of available drugs;
- To provide psychosocial support to patients and their families;
- To raise awareness in the community regarding palliative care,
- To network with like minded organisations and the public health system to promote the palliative care movement in the community.



PATIENT STORY

Mr Ram Milan, a 45 year old man, from Bragav Villiage, Block Bahua, District Fatehpur. He had a habit of chewing tobacco. In July 2022, he developed an ulcer in the oral cavity. He went to show multiple clinics and later he was diagnosed with carcinoma buccal mucosa. He started his treatment in King George Medical College, Lucknow, where 3 doses of chemotherapy was given and he was advised surgery. But surgery was postponed due to low Hb; our staff helped in arranging blood for him. He got enrolled in our palliative care. Slowly his wound enlarged and we taught his family how to do dressing and how to take care of him properly. As his pain increased, we started him on Morphine for pain relief and Bisacodyl was added as laxative. His condition deteriorated day by day and they tried alternative medicine in search of cure. We continued visiting his home and providing care. On 6th October 2024 , he died peacefully.



STATISTICS

| | 2023-24 | April 2024 – October 2024 (7 months) |
|--------------|---------|--|
| Master List | 694 | 789 |
| Current List | 126 | 171 |
| Death | 52 | 54 |
| Awareness | 256 | 287 |
| In Patients | 5 | 15 |
| OPD | 150 | 149 |
| Home visits | 909 | 529 |
| | | |

PALLIATIVE DAY CELEBRATIONS

We celebrated World Hospice and Palliative care day on 19th October 2024 with our staff and relatives of our dear patients. Dr. Benjamin George from Helping Hands for Hospitals, ENT Consultant, graced the occasion and lauded the selfless efforts of the team. We had a short awareness session followed by planting of saplings in remembrance of our palliative patients.



CP DAY CELEBRATIONS

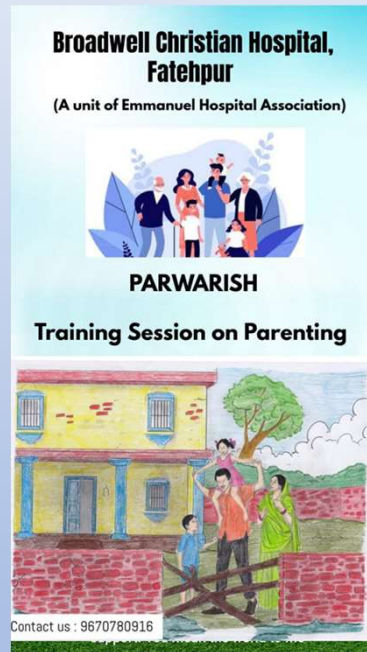
We celebrated Cerebral Palsy Day on 9th October with our specially abled kids. The theme for this year is #UniquelyCP. Dr. Sherina Santhosh, Consultant PMR gave an awareness talk on CP.

Our objective is to share knowledge and reaffirm our commitment to provide hope and support to families of specially abled persons including children with cerebral palsy. We have been providing support to them through our physiotherapy services. This year we were able to expand our services by opening PMR department, inclusive play area and an universal accessible washroom.



Psychosocial Resilience Program

As a healthcare delivery institute, we strongly believe that for healthy living there is a need for a good mindset and relationship within the family and community to address this we conduct training sessions on developing a Psychosocial resilience program with the existing module on “**Parenting**” (PARWARISH) and “**Nae Disha**” training (for parents and young people). This will help to build good relations and healthy relations within the family and community.



BCH made equipment for PMR department

- Multi textured tactile sensory panel for Hand**
 - Sensory integration tool
 - Provides variety of nine different textures for tactile sensory stimulation
- Cerebral Palsy Chair**- a chair designed for children with disabilities with removable lapboard and height adjustable head rest and footrest and straps for support and safety. For positioning of children with special needs and upright feeding and other activities.
- Corner chair**- For corner sitting
 - to enable a child who cannot sit on his own
 - Offer support in seating a child at floor level
 - Helps to maintain erect trunk alignment
- Positioning and therapy wedge**
 - Used for developmental positioning of a child with developmental delay
 - Improve tolerance to prone lying and develop head control
 - To practice gross motor activities
 - Help to improve sitting balance
- Door latch training set for ADL** - Includes different types of latches
 - Helps hand eye coordination, improve dexterity of hands
 - Also helps in learning on how to use these locks which we usually encounter on a daily basis.
- Mirror box**- For mirror therapy
 - Improves motor performance in upper limb in stroke patients
 - Also helpful in reducing pain in amputee patients
- Universal cuff**- for patients with impaired hand functions
 - helpful to do activities of daily living especially self-care activities
- Bolster**- For stretching exercises and positioning



Cerebral Palsy Chair, Positioning and therapy wedge, Bolster, Corner chair, Door latch training set for ADL, Multi textured tactile sensory panel for Hand



Mirror Box



Universal Cuff for Hand

Community High Risk Consultancy Clinics

Community initiative aims to address awareness and education generation programs, prevention, early diagnosis, treatment and rehabilitation. Over several years of experience it is found that the district's poor health infrastructure, road conditions, and lack of health awareness among the community are major barriers to effective health delivery therefore, awareness, education, and home-based/community visits approach is effective in addressing the health challenges in this region.

In partnership with Government health sector, we have been providing high risk ANC clinics in PHCs belonging to five blocks in the district. Along with this we also provided awareness to the health care staff in the areas of maternal and Child health, NCDs and Palliative care. It is our hope and goal that through this partnership we can facilitate awareness, early diagnosis and treatment, prevent complications, provide rehabilitation services and promote health seeking behavior.



A testimony

28 year old Shalini (name changed) was pregnant with her third child. She had already gone through the trauma of her first newborn dying very soon after birth. Her second child was born via caesarean section. Towards the end of the current pregnancy, she was brought to our emergency department, on a wheel chair, unable to stay still because of severe pain. As she lay on the cot and our doctors examined her, they felt that her weak scar would give away soon and they took her for an emergency caesarean section. When they went into the abdomen, they found to their shock that the scar had already given way, and the head was out of the uterus. The baby though, to the joy of the team, threw a shrill cry soon after it was brought into this world. After delivering the baby, the bleeding continued and they had to decide on hysterectomy (surgical removal of the uterus) because the placenta was "stuck" to the uterus and the bleeding would stop only with this life saving procedure.

Her Hb was a meagre 5 g/dl before the surgery, and the heavy bleeding meant that blood was crucial to keep her heart and vital organs perfused. We do not have an in house blood bank and the locals here are dead against donating blood, even for their dear ones because of the prevalent false beliefs that donating blood causes damage to the body and impotence. Even as the relatives tried to arrange blood, our hospital team swung into action, and within an hour we got the needed units of blood. One of our staff too donated blood to save the patient. The doctors proceeded with the hysterectomy, and even though the BP fell low for a while, it picked up soon after. The entire team breathed a sigh of relief and thanked God after the surgery, when they found out that both the mother and the baby were alive, and not just that, quite healthy.

The story of Shalini once again highlights the plight women face even now in some parts of the country, despite all the advances in health care services and delivery. If she had got her check ups regularly, she would have delivered safe at least a week prior without all the theatrics that we witnessed. But our God remains constant throughout with His faithfulness and providence that He strengthens the feeble arms and bodies that work for Him in remote places, removed from the luxuries, far from the modern, sophisticated health care that is lavished upon in the cities. And when we care for patients like Shalini, we once again get a glimpse of Him and His abundant grace that is ever available for us in our times of need! Glory to our Lord!



SCHOOL WELLNESS PROGRAM

The objectives of our School Wellness Program:

1. To educate students about the importance of maintaining a healthy lifestyle.
2. To provide information on nutrition, exercise, mental health, and preventive healthcare.
3. To organize workshops, seminars, and interactive sessions with healthcare professionals.
4. To promote healthy habits and practices among students and staff.
5. Preventive and curative health care.



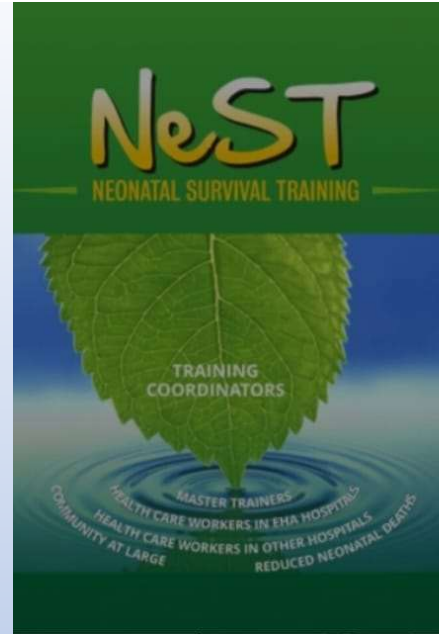
CHILDREN'S SUMMER CAMP PROGRAM



NeST PROGRAM

NEONATAL SURVIVAL TRAINING

With the aim to reduce the high rates of newborn deaths in rural India, the NeST project aims to reduce neonatal deaths by teaching the knowledge and skills needed to care for the sick newborn baby. Special emphasis is placed on neonatal resuscitation. Thirty two nurses and doctors including staff from government sector attended the training .Mr. Vinay John, Project Director and Dr. Ricky Mathew conducted the classes.



EMMANUEL HOSPITAL
ASSOCIATION
Broadwell Christian Hospital
Fatehpur

Neonatal Survival Training

Programme

November 04-15, 2024



“All health care workers in EHA hospitals have the knowledge and skills to take care of neonatal problems so as to reduce neonatal deaths in the geographic area”.



SALINE TRAINING –Equipping for providing Wholistic Care!



The Saline Process is a focused educational intervention designed to give healthcare professionals specific tools to address the holistic needs of patients in a clinical setting. Thanks to Dr. Nirmal John and Dr. Latha for conducting Saline training session: spread over two days. Staff from three of our sister units also participated in the same. Saline reinforced the importance of communication, sensitivity, and respect in patient care.

FELLOWSHIP & GET TOGETHER



AWARENESS PROGRAMS



NURSES TRAINING



CAMPAIGN AGAINST VIOLENCE ON HEALTHCARE WORKERS



Partners in Charity

- Contribute to the hospital's poor patient fund for supporting those in need. Free or concessional treatment is provided to needy patients, who cannot afford it. The extent of concession is based on the socio economic status of the patient.

- Palliative bed per day cost (including medicine and food)- Rs. 2000/-

- To feed a poor patient - Rs. 250/day

- Therapy cost for a child with development needs- Rs 160/day

- Support by contributing to the capital needs.

**For further details contact broadwell@eha-health.org
or on +91 9670780916**

Prayer Matters

- Pray for our work to continue in the district.
- Pray for the current situation in Fatehpur.
- Pray for the internal and external challenges which may hinder our work.
- Pray for our palliative patients, their families and our team.
- Pray for our community initiatives: palliative, NCD, home based care and disability.
- HR needs: We are in need of surgeon, anaesthetist, physiotherapist, counsellor, HR assistant, occupational therapist.
- Financial needs: Our current liabilities amount to around Rs. 80 lakhs (inclusive of staff salaries, money due to vendors, children education fund)
- Equipment: Cautery machine (for OT), OT Light, neonatal ventilator, labour beds and patient beds.
- Pray for all our well wishers and donors.

OUR GENEROUS SUPPORTERS

Emmanuel Hospital Association
The Savitiri Wanney Charitable Trust
Emmanuel Hospital Association USA
Dr. Mina Mackenzie Memorial Trust Fund (Mina Fund)
CMC Vellore
CMC Ludhiana
Bangalore Baptist Hospital
VR Logistics
Mr Jobin I Joseph
Dr Shiny Nirupama
Mr Amal Jose
Mr Nathan Robinson Andrews
Mr. Edwinson Ebenezer
Mr Anil Pandurang Shirke
Dr Tony Roy

Mrs Shilpa Mariyam Jose
Mr Abel Abraham Cherian
Mrs Merlin Sarah John
Mr Charley John
Mrs Leena Thomas
Mr George A Philip
Mr John Daniel
Mrs Anne Benni Kuruvilla
Dr. Saira Paulose
Mrs Sherry Susan Abraham
Mr Paul Thomas
Mrs Melissa Christenson
Mrs Daralyn Schafers

A generous person will prosper; whoever refreshes others will be refreshed. Proverbs 11:25



*THANK YOU FOR
SUPPORTING US!*

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Psalm 100:5 For the Lord is good and His love endures forever; His faithfulness continues through all generations.