



EMMANUEL
HOSPITAL
ASSOCIATION

2022 2023

ANNUAL REPORT

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ABOUT EHA

The Origin, History and the Future

The 1940s was the Golden period of Indian medical missions, as every third bed in the country was a mission hospital bed! EHA began in the minds of a few, at a time when mission institutions were losing expatriate medical staff to stringent visa regulations in the 1950s and 60s. Thus, arose the need to have **an indigenous-run medical organization** overseeing mission hospitals from various missions.

The key question - **“Would it be possible to attract Indian doctors with the necessary level of Christian motivation to renounce job prospects and to bury themselves in Village India?”** Though considered impossible during a major consultation in 1968, the Emmanuel Hospital Association was nevertheless registered in November of 1969, with no hospitals as yet under its banner! That several different missions decided to ‘throw their hats in the ring’ and commit to the concept of an organization that had no track record to fall back on, is in itself a clear indication of the hand of God in the birth of EHA, as described by Rev. Dr. Thirumalai, a founding member, as **“more than a miracle”!**

The nucleus of EHA formed around 6 hospitals in the early 70s, with high quality dedicated professionals, meticulous accounting systems, code of Christian work ethics and close fellowship, among other benefits. More hospitals joined the Association with time.

The first major community health initiative based out of 7 EHA hospitals – the ambitious yet unique **Master Plan** - was launched in 1976, paving the way for the EHA model of comprehensive healthcare.

The 1980s ushered in a new model of community outreach in EHA which could best be described as **stand-alone community programs**. These ran independent of hospitals for more efficient and effective management of these health initiatives and proved successful in providing good services as well as being good examples to emulate.

In an initial environment of far-flung locations, poor means of transportation and communication, difficulty in recruiting appropriate staff and uncertain funding, the associated hospitals necessarily had to fend for themselves, often dependent on an individual or a couple to ensure their survival in an uncertain time.

The Origin, History and the Future

As the work of coordination progressed over the years and more institutions were added to the group, the potential of such an organization was harnessed through a consultative process on the "Future Directions of EHA" in 1997. **Clear vision and mission statements being prayerfully articulated**, along with the attendant values to guide EHA - that we would be a **"FELLOWSHIP FOR TRANSFORMATION"** with a deliberate focus on the poor and marginalized in rural North India.

Right from its inception, the founding members were clear that:

- EHA would be an on-going, self-propagating indigenous Christian Medical society - the first of its kind in mission history!
- The organization would, besides facilitating fellowship, cooperation and coordination among hospitals, also resume full responsibility for the operation and management of the institutions and their related facilities.
- EHA would move from just the provision of curative services to the then-revolutionary paradigm of capacity building of local communities towards holistic health and development, as per their felt needs.

With the articulation of Vision and Mission statements, the idea of thinking and moving strategically took root at both the central and unit levels, guided by the documented statements and non-negotiable values such as a commitment to **fellowship, servant-leadership, teamwork, quality, focus on the poor and marginalized**. Significant strides forward included the introduction of computerization in our hospitals, human resource, financial systems and common reporting formats, that were progressively refined over time.

Nevertheless, the single most important factor that has kept the organization going and growing has been the unwavering emphasis on spiritual nurture and fellowship centred around its God-given vision, setting EHA apart from most other service-oriented organizations.

Governance & Ethos

EHA is a national Society registered in New Delhi, with its various hospitals, each being a locally registered Society, incorporated into the organization through a Deed. The Board of the central Society is responsible for the vision, mission and direction of the organization, through policies formulated by a

The Origin, History and the Future

participatory process involving all incorporated members and implemented uniformly across the board.

For ease of governance, the units are divided into five regions, each under a Regional Director, overseen by a central team of officers and thematic directors headed by the Executive Director. EHA strives to ensure that each hospital unit is self-sufficient in terms of running expenses, with large capital expenditure and the bulk of the community projects supported through external means.

It is part of the underlying ethos of EHA as an organization that ***no patient will be turned away for lack of finances***, while deliberately focusing on the socio-economically weakest sections of communities served through integrated community health and development initiatives. The locations of most EHA units are intentionally in most of the backward, least-developed States, where a multi-pronged approach is most needed and effective.

The Future: Where is EHA headed?

A great challenge will be the paradigm shift of ***incorporating appropriate professionalism and modern technology*** into the routine functioning of EHA, even while ensuring that the values that have sustained and guided EHA are not diluted.

The wealth of experience acquired by the organization in integrated initiatives can be fully utilized in ***developing holistic models of community care*** that address much-neglected aspects such as mental illness, suicide prevention, care of the elderly, the disabled and terminally ill, and the inculcation of value systems in the youth of today.

The opportunity to utilize EHA's acquired expertise in training could potentially be an effective ***platform for working alongside the government*** in fulfilling the aim of effective promotive, preventive and primary health at the grassroot level, especially in the newly-designated Empowered Action Group (EAG) States in the country, keeping in mind our core calling – to be a transformative influence through our collective thinking and functioning for the glory of God.

OUR VISION

Fellowship for transformation through caring

OUR MISSION

Emmanuel Hospital Association (EHA) is a fellowship of Christian institutions and individuals that exists to transform communities through caring, with primary emphasis on the poor and the marginalized.

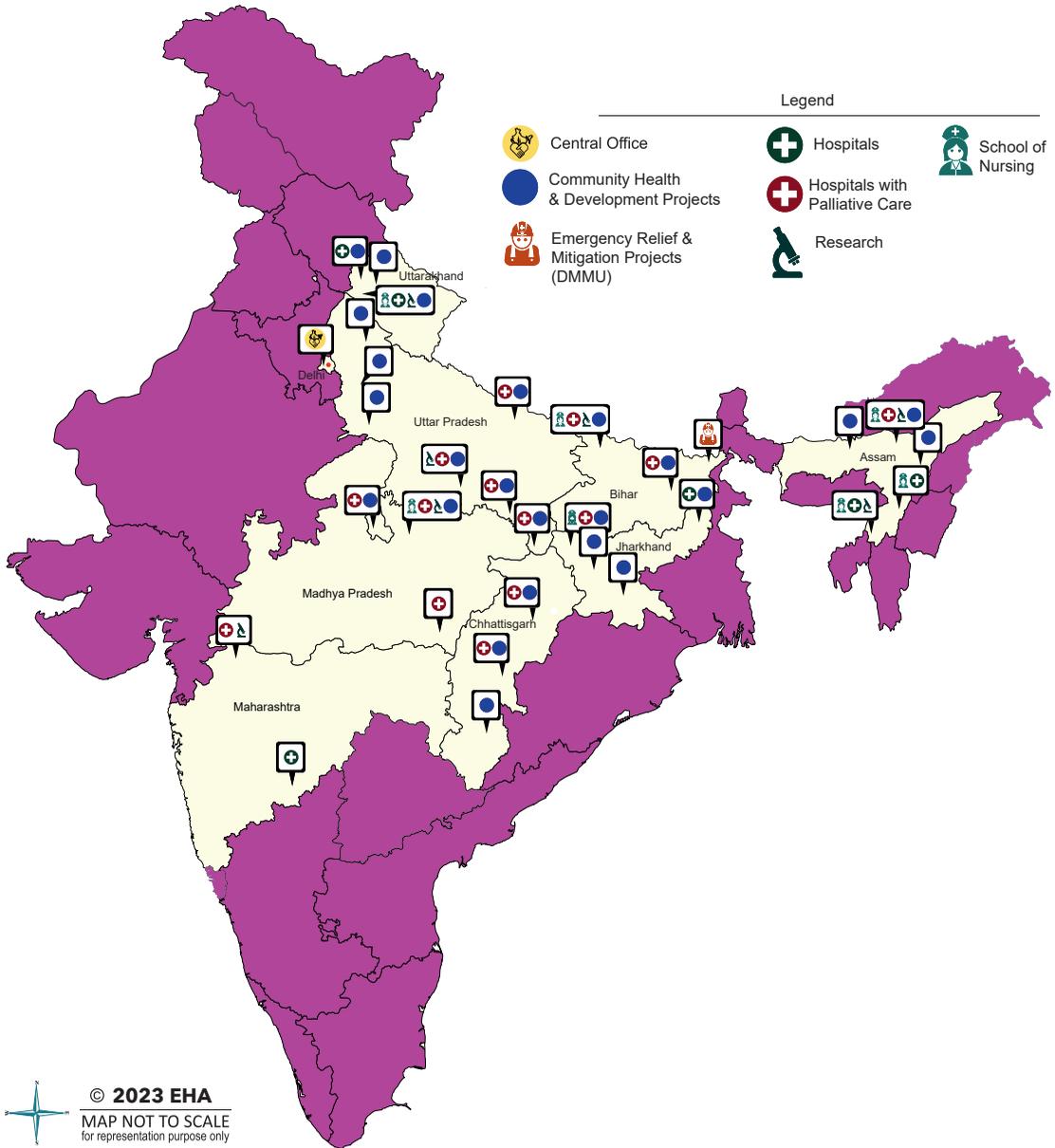
WE CARE THROUGH

- Provision of appropriate health care
- Empowering communities through health and development programs
- Leadership development
- We serve people and communities regardless of race, caste, creed or religion with a geographical focus of North, North East and Central India.
- We do this in the name and Spirit of Jesus Christ so as to manifest Him through word and deed.

CORE VALUES

- We strive to be transformed people and fellowships
- Our model is servant leadership
- We value teamwork
- We exist for others especially the poor and marginalized
- We strive for the highest possible quality in all our services
- We maintain integrity at all levels
- We strive to be a transparent organization
- We focus on accountability

EHA LOCATIONS



HIGHLIGHTS 2022-23



19 Hospitals

47 Projects

Community Health Development Programs (CHDP)



5 Nursing Schools

878345 People gained access to healthcare through hospital Out-patient services



79517 People received appropriate healthcare and treatment through In-patient services

21460 Women in rural communities had access to safe and adequate hospital based maternity care services and safe deliveries



34822 People received surgical interventions

Executive Director's Report



It is my joy and privilege to present the Annual Report of Emmanuel Hospital Association for the year 2022-2023.

EHA is not just an organization, but a movement of people dedicated to making a positive difference in the lives of those we serve. We embody a Fellowship for Transformation Through Caring, and this experience continues to shape our work.

The past year has presented its share of challenges, particularly in one of our hospitals. However, we have witnessed God's protection in the midst of adverse circumstances.

We are grateful to God for the FCRA renewal of some of our hospitals, while eagerly awaiting the same for others.

We express our gratitude to our Board and all our Partners, both within India and Overseas, for their unwavering support.

As we enter the next year, we do so with the assurance that the One who initiated this work has proven faithful thus far and will continue to be faithful.

This report provides a glimpse into our journey as EHA during the reporting year.

Dr. Saira Paulose
Executive Director

Message from The Chairman



Winds of Change

Winds of change whip through our land, reflecting turbulence from around the world. Wars, rumours of wars. Man set against his brother. These winds whistle through the internet, tweeting and blaring through phones and computers. News channels have metamorphosed from reporting issues to opinionating on every issue, leaving listeners confused about the original colour of truth. Who can we believe?

"Health services have exchanged the towel and basin for computers and glitzy reception areas, touted as the greatest in health care."

The WHO still estimates 5 billion people worldwide have no access to safe surgical care. 40% of our Indian children are malnourished. Life style diseases outstrip infectious disease as the major causes of morbidity and mortality. Older wraiths of tuberculosis and malaria still dance their dervish dance on the stage of active health issues confronting our people. What is worse is that the atmosphere of trust, once sacrosanct between the doctor and patient, is now being polluted with the acerbic odour of distrust and malcontent.

The Emmanuel Hospital Association has weathered a lot this last year yet has doggedly continued to provide essential health care and solace to remote areas in need. It's an army of dedicated staff who continue to serve selflessly despite contrary winds. The organization has faced considerable difficulty this last year with concerted action directed against some of its member hospitals. *"Braving false allegations and threats, it is commendable that the staff stay true and strong to their commitment to serve."*

There is a pressing need amongst Christian organisations for concerted prayer, solidarity and determination to hold values we cherish. Service will have to follow our Master's injunction to be *"wise as serpents, but harmless as doves."*

I would like to commend, encourage and thank each person involved with EHA for their courage in staying the course in the face of many storms. May His presence in our vessel be our peace to sail with the winds of change.

Dr Philip Alexander



“
**REPORT FROM
THE HOSPITALS**
”



“
Poverty friendly services draw patients from as far as 300 kms
 ”

Chinchpada Christian Hospital

Chinchpada Christian Hospital is strategically located in the Nandurbar District of Maharashtra, where 66% of the population is from tribal communities. The hospital's poverty-friendly services attract patients by word of mouth, not only from approximately 90% of the surrounding villages but also from distant locations as far as 300 kilometers away. The hospital was incorporated into Emmanuel Hospital Association in 1976. A small but dedicated staff of consultants and junior medical officers provides OP (Outpatient) and IP (Inpatient) facilities, 24/7 emergency care, as well as laboratory and x-ray services. The hospital is blessed with a well-equipped high-dependency unit with seven available ventilators and a new isolation ward with air handling units

Major Highlights

- Ongoing partnership with the National Tuberculosis Elimination Program, providing free molecular testing, TB drugs, and financial support to all TB patients.
- Partnership with MAI (Medic Assist International), UK and The Enhanced Community Engagement through Palliative Care Program which includes hospital and community programs for Palliative care, Disability, Sickle Cell Disease, Tuberculosis and Alcohol addiction.
- MAI has also contributed to the construction of a new isolation ward. Additionally, our partnership with 'Life for A Child,' Australia, offers comprehensive care for children with type 1 Diabetes mellitus up to the age of 21 years. Currently, 18 children benefit from this program.
- Introduction of new initiatives, including a new ward, an ICU (Intensive Care Unit), the installation of solar lamps, and the implementation of a sewage treatment plan.
- Implementation of a mortgage redemption plan to assist poor patients.
- Provision of training for hospital staff serving impoverished communities.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	50	50	50	50
OPD Numbers	20999	15021	17976	25000
IP Numbers	2910	2331	2454	3000
Deliveries	74	18	16	60
Surgeries	505	300	402	620



“ Plans to be a 100-bedded hospital from a 75-bedded hospital in the coming years ”

Champa Christian Hospital

Champa Christian Hospital was started by the Mennonite Mission USA in 1926. Located in Champa, a tribal dominated district of Chhattisgarh, the hospital provides healthcare services to the community through both its hospital facilities and community-based programs. In 1974, the hospital became an incorporated member of EHA (Emmanuel Hospital Association). Presently, the hospital has 75 beds and is actively working towards expanding to 100 beds in the upcoming years.

Major Highlights

- We have established partnerships with various government departments, including Police, Agriculture, Excise, Labour, CWC (Child Welfare Committee), ICDS (Integrated Child Development Services), Social Welfare, DALSA (District Administration of Legal Services Authority), Churches, and Pastors. Additionally, we have collaborated with international organizations such as Tear Australia
- We are currently planning new initiatives, including ventures into organic farming and mushroom cultivation.
- Furthermore, we have plans to increase the capacity of our hospital facilities by adding more beds to both the Isolation ward and the General ward.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	75	75	75	75
OPD Numbers	22464	16351	14369	16300
IP Numbers	3211	2574	1894	2340
Deliveries	2022	1330	994	1442
Surgeries	971	612	467	848



Lakhnadon Christian Hospital

“ Clinical services were resumed with joining of new team of doctors ”

Lakhnadon Christian Hospital, located in the Seoni district of Madhya Pradesh, was established by missionaries from the Free Church of Scotland who arrived in India in the early 1920s. They recognized the pressing need for medical facilities in an area that lacked adequate healthcare services. In the 1970s, Dr. D.M. MacDonald, a surgeon from Scotland, transformed this hospital into a surgical unit and expanded its capabilities. The hospital became part of EHA (Emmanuel Hospital Association) in 1974. In 2019, the hospital faced a temporary closure due to a shortage of doctors. However, in January 2022, a new team of doctors joined, and clinical services resumed.

Major Highlights

- The hospital serves as the sole Psychiatry Care center in the area.
- Palliative Care services have been restarted and are operating successfully.
- The hospital has received Biomedical Waste and Pollution Control certificates, valid for 5 years.
- Future plans include the construction of a new nurse’s hostel

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	30	20	20	20
OPD Numbers	0	987	9330	15000
IP Numbers	0	15	80	350
Deliveries	0	0	15	150
Surgeries	0	0	36	105



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**Sole referral
 centre for cardi-
 ology and radi-
 ology services
 in Odisha**
 ”

Sewa Bhawan Hospital

Sewa Bhawan Hospital (SBH) had its beginnings in 1928 when it started as a dispensary, dedicated to serving the people of Mahasamund district in Chhattisgarh. In 1974, Sewa Bhawan Hospital was incorporated into EHA. Currently, SBH operates as a 50-bedded unit, offering secondary-level healthcare services in fields such as Internal Medicine, Pulmonology, General Surgery, Obstetrics and Gynaecology, and Cardiology. The hospital boasts a well-equipped 24/7 operation theatre, ensuring continuous access to surgical and obstetric services. Notably, SBH serves as the sole referral center for cardiology and radiology services within a radius of approximately 160 km, encompassing the border districts of Odisha. We provide secondary-level cardiac and critical care services, complete with well-equipped ECHO and USG machines.

Major Highlights

- SBH has established partnerships with various organizations, including a collaboration with the Oxford-based research platform Maathri for Maternal Child Health, iron deficiency, and heart diseases in pregnancy.
- Additionally, SBH has partnered with CMC Vellore for research in sickle cell disease.
- SBH is engaged in a partnership with the State government to support the health insurance scheme under Ayushman Bharat.
- Our future plans include the development of a comprehensive diagnostic center, the establishment of a dialysis center, the initiation of a community health and development program, and the construction of new residential quarters and guest rooms."

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	50	50	75	50
OPD Numbers	8218	14855	15066	17150
IP Numbers	2307	4456	3625	4300
Deliveries	974	1733	1446	1562
Surgeries	758	1755	1252	1695



Duncan Hospital

“ Providing essential health care services, community health services & training ”

The Duncan Hospital, located at the Indo-Nepal border, is now 93 years old and continues to faithfully serve the people of the East Champaran district in Bihar and the surrounding areas. The hospital provides essential healthcare services primarily in the domains of healthcare, community health services, and training. The hospital was incorporated into EHA in 1974.

Major Highlights

- Well-equipped facilities including ICU, NICU, HDU, Labour room, and OT.
- A comprehensive Community Health department offering a wide range of programs.
- Excellent training programs for Nursing and DMLT
- Engagements with local and international partnerships, including a Public Private Partnership with the government ART Centre and allied services with PATH India.
- Support from EMMS and the DHCT for the construction of the new College of Nursing and Healthcare Careers project.
- Ongoing support from numerous other partners for various community projects.
- Initiatives to create awareness and reduce discrimination among the transgender community under the Nayi Roshni Project this year.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	200	200	200	200
OPD Numbers	108933	124156	137162	157050
IP Numbers	10861	11700	11922	13542
Deliveries	3093	3069	3043	3239
Surgeries	2441	2345	2154	2730



“ Seeking to bring wholistic transformation to people of Madhepura ”

Madhipura Christian Hospital

Established in 1954, Madhipura Christian Hospital (MCH) has served as the primary healthcare provider for Madhepura and its surrounding districts for decades. In 1974, MCH was incorporated into EHA. Situated in the interior of North Bihar, approximately 6 hours from Patna, this area ranks among the most economically disadvantaged regions in India. The healthcare facilities in this region are abysmal, compounded by a lack of trained personnel, exacerbating an already dire demographic situation. MCH actively engages in community development projects, primarily focused on livelihood improvement, especially among the large Mahadalit population, often referred to as the Musahars – or rat eaters. MCH seeks to provide healthcare and educational opportunities to this community, with the goal of initiating transformation, at least for the next generation. Currently operating with 100 beds, the hospital aims to bring wholistic transformation to the people of Madhepura and the surrounding districts through a variety of activities.

Major Highlights

- MCH serves as the main healthcare provider in one of the country's most economically challenged districts.
- The hospital's community work has been recognized and designated by Tear Fund as a Centre for Community Health and Development.
- Other initiatives include the operation of 11 non-formal schools, the SHRISHTI Community College, the Rupantran women's entrepreneurship program, participation in the Ayushman PM JAY Scheme, and a telemedicine program.
- Future plans include the establishment of a Mahadalit Residential School and a Nursing School."

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	100	100	100	100
OPD Numbers	20513	27912	37392	47000
IP Numbers	2686	3157	3932	4500
Deliveries	963	998	1214	1360
Surgeries	728	784	1118	1410



“
Serving the communities where there is lack of affordable healthcare
 ”

Nav Jivan Hospital

Nav Jivan Hospital, situated in Palamu district, Jharkhand, was founded in 1961 by Mennonites from the United States. The hospital was incorporated into EHA in 1974. It currently operates as a 100-bedded hospital, dedicated to serving the communities of Palamu, Latehar, and Garhwa districts in Jharkhand. These districts suffer from a lack of accessible and quality healthcare services. The available healthcare facilities in these areas are sub-optimal, expensive, and primarily concentrated in urban centers rather than rural areas. In August 2022, there was a change in leadership, with Dr. Ashly John and Mr. Dinesh taking over as Managing Director and Administrator, respectively, from Mrs. Helen Paul. Mrs. Helen Paul had played a crucial role in sustaining the hospital during challenging times, taking the helm in 2014 when the hospital faced the possibility of closure. With determination and prayer, she navigated the hospital's path, making tough decisions and sacrifices to secure its future.

Major Highlights

- Renovation of the general ward to better serve poor patients.
- Renovation of staff quarters to enhance living conditions.
- Installation of high-quality machines for the Laundry and Ultrasound units.
- Community services, including Palliative Care and Mental Health Services, to address broader healthcare needs.
- Future plans encompass the implementation of a paperless IPD system, the establishment of a Community College, and Go Green initiatives to promote environmental sustainability."

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	100	100	100	100
OPD Numbers	37258	44460	54440	54800
IP Numbers	3820	4304	5518	5600
Deliveries	1318	1527	1857	1870
Surgeries	1867	1651	1613	1680



“ Only hospital within 60km radius with 24-hour emergency critical care ”

Prem Jyoti Community Hospital

Prem Jyoti Community Hospital (PJCH), with a total bed capacity of 30 beds, is located in Chandragodda village, a predominantly tribal area in Jharkhand. PJCH was established in 1996 as a community health project to address the medical needs of the Maltos, a diminishing tribal group. Over time, it has evolved into a general hospital offering various services, including Medicine, Maternal care, Emergency and Critical care, Radiology, Laboratory services, and Pharmacy. Notably, PJCH is the sole hospital within a 60-kilometer radius, providing 24-hour emergency and critical care facilities.

Major Highlights

- Partnerships with the government, including Tubectomy services under the JSYS scheme and designation as a Microscopic cum Treatment Centre under NTEP (National Tuberculosis Elimination Program).
- Implementation of a Palliative Care Program within a 30-kilometer catchment area.
- New infrastructure additions for the year, including an Erba fully automated biochemistry analyzer, ventilators with compressors, a USB machine, and a vehicle (Bolero).
- Future plans encompass the establishment of a new Neonatal Intensive Care Unit (NICU), a staff sick room, and a Dharamsala for patients' relatives.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	30	30	30	30
OPD Numbers	7129	7624	8745	11000
IP Numbers	898	1067	1101	1500
Deliveries	350	327	230	600
Surgeries	225	221	180	445



“
**40-bed facility
 with modernized
 OPD with round-
 the-clock casualty
 services**
 ”

Broadwell Christian Hospital

Broadwell Christian Hospital, located in Fatehpur, Uttar Pradesh, had its humble beginnings in 1909 when it was established by the Women's Union Missionary Society. Dr. Mary and Jemima Mackenzie in response to God's call arrived in Fatehpur, initially providing medical care to the poor and needy through a small dispensary and roadside clinics. In 1973, the hospital was handed over EHA. Currently, the hospital operates as a 40-bed facility, boasting a modernized Out-patient Department (OPD), modular Operation theatres, well-equipped Labor rooms, and a High Dependency Unit (HDU), all complemented by round-the-clock casualty services. Broadwell Christian Hospital offers essential services in Reproductive and Child Health, Surgery, General Medicine, and Community Health and Development.

Major Highlights

- A year marked by experiencing God's love and faithfulness, despite numerous challenges.
- Acquisition of new CTG machines and infusion pumps (for oxytocin drops) for the labour room. Renovation of the laundry area and the acquisition of a new set of washing machines and dryers.
- Revamping of the CSSD (Central Sterile Services Department) area, complete with the installation of a new autoclave machine. An RO system was also installed for use with the washing machine and autoclave.
- While hospital services may have experienced some challenges, the commitment to Palliative Care continued, demonstrating the unwavering dedication to the community's well-being."

Fact & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	40	40	40	40
OPD Numbers	22683	32969	22868	19000
IP Numbers	1639	2821	2015	1550
Deliveries	1601	1437	1140	1000
Surgeries	655	786	547	800



**Well known for its
Eye & Obstetrics
& Gynaecology
services in UP**



Jiwan Jyoti Christian Hospital

Jiwan Jyoti Christian Hospital (JJCH) is a 100-bedded hospital situated in the Sonbhadra district of Uttar Pradesh. In 1976, the hospital became a member of EHA (Emmanuel Hospital Association). JJCH is renowned for its exceptional Eye and Obstetrics & Gynaecology services, serving a wide catchment area that includes Sonbhadra, Chandauli, and Mirzapur districts of Uttar Pradesh, as well as the neighbouring states of Jharkhand, Bihar, Chhattisgarh, and Madhya Pradesh. Despite the challenges posed by the Covid-19 pandemic, which impacted the country's economic growth, industrial progress, and overall morale, JJCH has remained steadfast in its commitment to providing high-quality and compassionate healthcare at affordable rates to all who visit our OPD clinics and hospital. This achievement is a testament to the sincere hard work and dedication of our staff.

Major Highlights

- JJCH's work on the artificial intelligence-based X-ray program was highlighted in a recent edition of BMJ, a reputable medical journal.
- The hospital has introduced an e-learning facility, providing access to electronic library resources at CMC Vellore.
- JJCH is now empanelled under the Ayushman Bharat Scheme, enabling access to government dynamic care facilities.
- The hospital's registration has been renewed under CERR (Clinical Establishments Registration & Regulations Act 2010), and it has received USG License Renewal, which was long pending.
- JJCH has introduced a digital payment avenue, "Paytm," for patients, streamlining transactions and making them quick and convenient.
- Future plans include offering diabetes counselling services for patients and establishing an online platform for sharing patients' stories.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	75	75	75	75
OPD Numbers	64736	69959	76640	83798
IP Numbers	3874	3512	3956	4400
Deliveries	448	391	528	580
Surgeries	4309	3507	3211	3164



“ Hospital famous for its snake-bite management & attracts patients from afar ”

Kachhwa Christian Hospital

Kachhwa Christian Hospital (KCH), located in Kachhwa Bazar in the Mirzapur district of Eastern Uttar Pradesh, stands as one of the oldest hospitals within the EHA network. This venerable institution, with a history spanning 125 years, was founded by Dr. Robert Ashton in 1897. Dr. Ashton dedicated nearly three decades to serving the people of Kachhwa and the surrounding villages. In 1974, KCH was incorporated into EHA. Under the leadership of the renowned surgeon Dr. Neville Everard (BCMS), KCH flourished, growing to a 120-bedded hospital with the addition of a Nursing School. Today, KCH operates as a 25-bedded secondary care hospital, offering services in Medicine, Eye care, Surgery, Dentistry, and Community Health and Development. The hospital has a fully equipped 4-bedded High Dependency Unit (HDU) complete with five ventilators. KCH has earned a reputation in the region for its expertise in snake bite management, attracting patients from distant areas seeking treatment for snakebites.

Major Highlights

- The hospital's community outreach programs include Palliative Care, Disability Work, Women Empowerment initiatives, Adolescent Groups, Education Projects, Class to Career programs, a Veterinary Project, and Project Safal for TB elimination.
- A significant development this year is the initiation of a Day-care center for Banwasi (Musahar) children from nearby villages.
- Future plans include the introduction of physiotherapy services.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	20	20	20	20
OPD Numbers	25999	26201	25563	30700
IP Numbers	3871	2540	3714	4000
Deliveries	28	17	25	85
Surgeries	383	348	518	660



“
Hospital known for its Maternal and Child Health care & Eye care services
 ”

Prem Sewa Hospital

Prem Sewa Hospital, which began as a small dispensary in 1956, officially opened its doors as an 8-bedded hospital in 1966. It was incorporated into EHA Emmanuel in 1974. Today, the hospital offers a range of clinical services, including General Surgery, Obstetrics and Gynaecology, Ophthalmology, Radiodiagnosis, Dentistry, Palliative Care, Infertility Clinic, and General Services. The hospital has a total of 35 beds, with 25 currently in operation. This reporting year witnessed slight improvements in patient visits, services, and finances compared to the previous year.

Major Highlights

- The hospital is renowned for its Maternal and Child Health (MCH) care and Eye services.
- The Community Health team actively engages in providing Community Palliative Care, Disability programs, MCH programs, and Livelihood initiatives.
- Challenges faced by the hospital include the replacement of old buildings.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	35	35	35	35
OPD Numbers	38080	45259	50827	51000
IP Numbers	935	1513	1507	1600
Deliveries	329	556	412	390
Surgeries	922	1102	1423	1585



“ Hospital providing secondary health care services to the communities in Assam ”



Baptist Christian Hospital

Baptist Christian Hospital, located in Tezpur, Guwahati, was established in April 1954 with 30 beds. Over time, it gradually expanded, and today, it stands as a 130-bedded institution providing secondary healthcare services to the communities in the North Bank region of the Brahmaputra River, spanning the States of Assam and Arunachal Pradesh. The hospital has a specific focus on serving the poor and marginalized populations. Its clinical services are recognized by both the district and state government. Notable milestones in the hospital's history include the appointment of its first indigenous Doctor, Dr. S K Barla, in 1961, who served until April 1969. Dr. R. N. Baidya followed in March 1990, serving as the Medical Superintendent until 1990. In October 2004, BCH was incorporated as a unit of EHA. It is the only private hospital partnering with the government in the district to implement government schemes tailored for the disadvantaged.

Major Highlights

- Signing a Corporate Agreement with USAID for ASHA Grant for the College of Nursing and Training Centre.
- Memorandum of Understanding signed with the Assam State AIDS Society for initiating Targeted Intervention (TI) projects.
- Renewal of FCRA granted for 5 years.
- Partnership with German Dental Carehood International for dental camps.
- Partnering with Friends of Vellore UK to construct a Dharamsala.
- Collaboration with Joni and Friends for a Disability program.
- Establishing a Digital Dispensary at Amjuli village in partnership with American Towers Foundation CSR (Corporate Social Responsibility) Foundation of India

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	130	130	130	130
OPD Numbers	52332	62461	68715	78048
IP Numbers	4791	6243	5841	7025
Deliveries	258	215	76	200
Surgeries	2338	3033	3218	3957



“ Hospital has a wide catchment population including rural communities ”

Makunda Christian Leprosy & General Hospital

Makunda Christian Leprosy and General Hospital (MCL&GH) is a nationally accredited 205-bedded hospital, recognized by the National Accreditation Board for Hospitals (NABH). MCL&GH serves a diverse catchment population, including rural communities from neighbouring districts and other states. As a member of Emmanuel Hospital Association, the hospital maintains a primary focus on serving the poor and marginalized. Additionally, the hospital operates a branch hospital in Ambassa, Dhalai District of Tripura. Medical services were temporarily suspended for 10 years, but they were reinstated in 1993 after MCL&GH became a member of EHA in November 1992. As the hospital celebrates 30 years of service, it continues to thrive in its mission to serve the communities.

Major Highlights

- A primary focus on providing healthcare to the poor and marginalized.
- Extensive catchment areas encompassing rural populations from bordering regions of Assam, Tripura, and Mizoram.
- The presence of a branch hospital in Ambassa, Dhalai District of Tripura.
- Diversification of services, including a Nursing School, Higher Secondary School, Community College, Community Health & Research initiatives, and Agriculture & Fisheries programs.
- Future plans include the establishment of a BSc College of Nursing and the introduction of a Commerce stream in the Community College.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	205	250	250	250
OPD Numbers	90939	119024	124296	133500
IP Numbers	13021	13496	17038	18600
Deliveries	6029	4510	6058	6361
Surgeries	7693	8023	10318	11461



**Provides
compassionate
care at primary,
secondary and
tertiary level**



Burrows Memorial Christian Hospital

Burrows Memorial Christian Hospital (BMCH) stands as the first well-established hospital in Cachar District, Assam, dating back to its founding in 1935. Dr. Crozier, a World War veteran, made the choice to serve in a region grappling with tuberculosis and leprosy patients. BMCH is dedicated to providing compassionate healthcare at primary, secondary, and tertiary levels to the people of Northeast India, regardless of caste, creed, or religion, with a primary focus on the poor and marginalized. Today, the 70-bedded hospital boasts a comprehensive surgical and medical facility. It offers a range of services in Medicine, Surgery, Obstetrics and Gynaecology, as well as educational initiatives such as the School of Nursing and various training programs for the surrounding community.

Major Highlights

- BMCH extended its outreach by providing flood relief to numerous communities during recent floods, in partnership with the Disaster Management & Mitigation Unit (DMMU) EHA, New Delhi.
- The hospital installed an oxygen plant and a solar energy plant under Corporate Social Responsibility (CSR) funding through the World Resources Institute (WRI).
- The School of Nursing at BMCH is now registered under Minority Educational institutions.
- The School of Nursing continues to provide GNM (General Nursing and Midwifery) training, with the construction and inauguration of two additional classrooms.
- A new autoclave machine was purchased to enhance sterilization capabilities.
- BMCH has established a Public Private Partnership with the National Health Mission, Government of Assam, for the Mother & Child Health Care Program.
- Future plans include the establishment of a blood storage facility, with support and guidance from the National Health Mission, Government of Assam.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	70	70	70	70
OPD Numbers	16243	17348	27806	30900
IP Numbers	1817	1902	2858	3150
Deliveries	719	699	1009	1105
Surgeries	850	956	1388	1510



“Hospital provides quality care with a special focus on the poor & marginalized”

Christian Hospital Chhatarpur

Established in 1930, Christian Hospital Chhatarpur in Madhya Pradesh has evolved into a 120-bedded hospital that is committed to providing quality healthcare, with a particular emphasis on serving the poor and marginalized populations in the Bundelkhand region. The hospital was incorporated into EHA in 1971 and has earned NABH (National Accreditation Board for Hospitals) accreditation. It serves as a secondary care provider and offers a comprehensive range of medical services, including General Medicine, Obstetrics and Gynaecology, Anaesthesia, Paediatrics, Orthopaedics, Physiotherapy, Ophthalmology, ENT, Dentistry, Palliative Care, and Community Health & Development.

Major Highlights

- A successful leadership transition, ensuring continuity in the hospital's mission.
- Partnership with the Thankamma Ithapiri Memorial Trust (TIMT) for vaccination drives.
- Participation in the Ayushman Bharat Scheme to provide care to poor patients.
- Inclusion in the Employees' State Insurance Corporation (ESIC) scheme for staff.
- Offering rural exposure to interns from Believers Church Medical College Hospital, Thiruvalla.
- A strong focus on Community Health, addressing disability, Maternal & Child Health, adolescent health, and promoting organic farming.
- Active programs in Palliative Care and Mental Health.
- Implementation of Nai Disha (new pathways) and Parvarishi (parenting) training programs.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	120	120	120	120
OPD Numbers	53848	51197	53001	59672
IP Numbers	6670	5371	5939	6745
Deliveries	1620	1646	2202	2800
Surgeries	1306	991	2040	2769



“
Received patients from 3 different states namely Uttarakhand, UP & HP
 ”

Herbertpur Christian Hospital

Herbertpur Christian Hospital (HCH) was founded in 1936 in the Doon Valley of Uttarakhand, with the mission to provide medical services to the public, with a special emphasis on serving the poor and marginalized. On July 1st, 1973, the hospital's founder, Dr. G D Lehmann, joyfully handed over HCH, affectionately known as 'Lehmann Hospital' locally, to EHA management and leadership. Thanks to its strategic location, the hospital attracts patients from three different states: Uttarakhand, Uttar Pradesh, and Himachal Pradesh. Today, HCH operates as a 130-bedded hospital with various specialties and a range of additional services.

Major Highlights

- Obtained a Narcotic License as a Recognized Medical Institute to dispense Morphines for Palliative Care patients.
- Received the Best Performance Award from the Private Sector for the Ayushman Bharat Scheme.
- Preparing to upgrade the Nursing School to a College of Nursing to offer a BSc Nursing Course.
- Initiated 'Nari Niketan,' a safe home for women with mental diseases, in partnership with the State government.
- Plans in progress for establishing a Rehabilitation Centre for patients with spinal cord injuries.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	120	120	120	120
OPD Numbers	87497	99483	103743	106250
IP Numbers	4447	4670	4834	5025
Deliveries	1364	1323	1175	1160
Surgeries	2428	2215	2332	2435



“
A family friendly hospital, remains committed to providing care to the patients
 ”

Harriet Benson Memorial Hospital

Harriet Benson Memorial Hospital, located in Lalitpur within the Bundelkhand region, serves one of the poorest areas in the country, characterized by very low agricultural and industrial productivity. Medical work in this region commenced in 1932 when Dr. Ruth Greishamieur initiated the first medical services, including the construction of the first permanent medical structures. Dr. Carrie I. Hearn arrived in 1933 and established a women's and children's hospital, which was formally dedicated in 1934. This hospital was named in honour of Ms. Harriet S. Benson, an American philanthropist whose legacy had endowed the original mission. In 1973, the HBM Hospital was incorporated into EHA. The hospital is dedicated to community transformation by empowering community-based organizations and fostering partnerships with the government and like-minded groups. Despite facing a shortage of human resources, the hospital team remains committed to providing care to the patients who seek their services.

Major Highlights

- A family-friendly hospital actively engaged in community transformation through partnerships with the government and like-minded organizations.
- The Hospital successfully concluded its longstanding community project, the 'Barr Watershed Program,' after many years.
- Another significant initiative is the Palliative Care Program, in collaboration with the Savitri Waney Foundation.
- Partnership with the State government includes participation in the Ayushman Bharat Scheme PMJAY (Pradhan Mantri Jan Arogya Yojana).

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	40	40	40	40
OPD Numbers	11968	9976	8328	11800
IP Numbers	668	357	391	800
Deliveries	331	0	0	180
Surgeries	345	222	195	410



“
**35-bedded
 multi-speciality
 hospital providing
 primary & second-
 ary care**
 ”

Landour Community Hospital

The Landour Community Hospital (LCH) was started by Dr. (Ms.) E. J. Robinson in 1931 as a 12-bedded facility to address the local healthcare needs of the picturesque town of Landour, situated just 2 kilometers away from Mussoorie, a well-known tourist destination in North India. Over the years, the hospital has expanded into a 35-bedded multi-speciality primary and secondary care facility. It offers round-the-clock emergency services, intensive care, and specialty services in areas such as family medicine, surgery, orthopaedics, psychiatry, dentistry, and optometry. The hospital also provides 24-hour pharmacy, laboratory, and radiology services.

In addition to serving the local villages, LCH caters to the medical needs of migrant laborers, the local business community, numerous tourists visiting Mussoorie, and some residential schools and government institutions in the region. Over time, the hospital has continuously expanded its diagnostic and specialty care services.

Major Highlights

- Empanelment for the Ayushman Bharat Scheme PMJAY (Pradhan Mantri Jan Arogya Yojana).
- The hospital's flagship Community Health program, known as 'Samvedna' (Empathy), focuses on working with children with disabilities in Tehri Garhwal district of Uttarakhand.
- Future plans include the provision of Palliative Home-based Care.

Facts & Figures

Particulars	Actuals 2020-2021	Actuals 2021-2022	Actuals 2022-2023	Projections 2023-2024
Bed Strength	35	35	35	35
OPD Numbers	18097	19344	22078	25760
IP Numbers	481	606	898	1050
Deliveries	12	5	20	32
Surgeries	1920	1820	2410	2692

CLINICAL STATISTICS OF HOSPITALS

Hospital Name	Total Bed Strength	Operational Bed Strength	OPD Numbers	IP Numbers	Deliveries	Surgeries
Makunda Cristian Leprosy & General Hospital	250	205	124296	17038	6058	10318
Baptist Christian Hospital	130	130	68715	5841	76	3218
Burrows Memorial Christian Hospital	70	70	27806	2858	1009	1388
Duncan Hospital	200	170	137162	11922	3043	2154
Madhepura Christian Hospital	100	60	37392	3932	1214	1118
Nav Jiwan Hospital	100	76	54440	5518	1857	1613
Prem Jyoti Community Hospital	30	30	8745	1101	230	180
Prem Sewa Hospital	35	35	50827	1507	412	1423
Jiwan Jyoti Christian Hospital	75	75	76640	3956	528	3211
Broadwell Christian Hospital	40	30	22868	2015	1140	547
Kachhwa Christian Hospital	20	20	25563	3714	25	518
Herbertpur Christian Hospital	120	100	103743	4834	1175	2332
Christian Hospital Chhatarpur	120	120	53001	5939	2202	2040
Harriet Benson Memorial Hospital	40	10	8328	391	0	195
Landour Community Hospital	35	35	22078	898	20	2410
Champa Christian Hospital	75	75	14369	1894	994	467
Sewa Bhawan Hospital	75	50	15066	3625	1446	1252
Lakhnadon Christian Hospital	20	20	9330	80	15	36
Chinchpada Christian Hospital	50	50	17976	2454	16	402
Total	1585	1361	878345	79517	21460	34822

The image features a solid orange background with several thin, white, overlapping circles of varying sizes. The text is centered within one of these circles.

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**NURSING
IN EHA**

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NURSING IN EHA

Transforming People through Education & Care

Prologue

I feel honoured to present the Nursing in EHA Annual Report. I wish to express our gratitude to God for His ongoing grace, strength, and wisdom toward us throughout the year. I am delighted to be a member of the EHA nursing team, which is vibrant, creative, and kind. I appreciate the nurses' dedication and for using their nursing knowledge on a daily basis to provide good quality care for the patients. We pray that our nursing team will continue to shine for God's glory today and in the future.

EHA Nurses

The nursing profession is the backbone of the healthcare delivery system; nurses are vital in organizing and applying health initiatives at the front-line and managerial levels. Nurses play a critical role in providing quality, comprehensive care to patients and their families in hospitals, communities, and beyond. In addition, it is impressive to see the nurses' cordial relationships with patients and their families; this fosters a positive work environment and helps the hospital build a trustworthy reputation. The EHA hospitals strive to provide effective, systematic, and quality care at affordable costs. EHA also aspires to foster nurses' personal and professional development. EHA's nursing staff number has remarkably increased over the year, according to the increasing nursing demands of the hospitals.

Nursing accounts for 42% of the health workforce in EHA; we have around 850 nurses responsible for nursing services and education. The EHA nurses hold the transformative ability and serve as torchbearers for providing quality care, advocating for patient's rights, and driving innovative changes that result in positive outcomes.

Nursing Registration

The nursing qualification requires registration, and nursing registration provides both the nurse and the general public with legal protection by preventing nursing practice from ineligible and incompetent individuals.

Therefore, EHA is committed to recruiting nursing professionals who only hold accredited certificates and are facilitated to register in the State where they serve.

Global Association

We have an excellent relationship with EHA USA and EHA Canada, Dignity Health USA, and a few individuals from the UK, USA, Canada, DVN-VIAA University of Applied Sciences in the Netherlands, and Healthcare India Training and Support (HITS) New Zealand. EHA India engages with these supporters by participating and learning from their leadership on technical and healthcare systems.

Neonatal Survival Training Program

The EHA-NeST program focuses exclusively on Neonatal Survival Training to facilitate reducing neonatal deaths in rural India. This year, the Neonatal Survival Training Program was a success; despite the Covid-19 restrictions and post-covid period, we conducted workshops to train the Government and EHA's professionals in implementing better care for neonates. As a result, we have had 19 workshops, trained 513 professionals, and targeted government and EHA healthcare professionals.

Nursing Education

About 140 new nursing students become part of the EHA family each year. New nurses were fully formed after three years of education and practice. God's profound grace, the perseverance of the nursing faculty and staff, the EHA hospitals' cooperative efforts, and the students' openness to change are all responsible for this remarkable development. Nursing schools aim to create a rich learning environment and program that will allow students to achieve and graduate with the essential abilities.

EHA Nursing Workshop

The EHA nursing workshop on Paediatric nursing and best American nursing practice was held in March, and over 55 senior nurse leaders attended to learn the importance of these skills and procedures. The nurses are the hospital's backbone and must be groomed with skills to deliver quality care. We have noticed a positive learning attitude in the nurses, and are ready to continue to render quality patient care.

Year's Events

- Makunda Hospital has been certified as a breastfeeding-friendly hospital.
- EHA nurses are actively participating in research alongside the medical and community health teams.
- Several staff members and students attended the Trained Nurses Association of India and the CMAI Biennial conferences.
- The infrastructure development for Makunda and Herbertpur College of Nursing is in progress. Construction is underway at Duncan and Tezpur, and Chhatarpur is planning a Skills Laboratory for the nursing college.
- Nurses are advancing their careers by enrolling in advanced nursing programs and specialized courses. They are also participating in Continuing Nursing Education and receiving on-the-job training for using ventilators, defibrillators, and resuscitation equipment.
- Nurses are directly involved in developing guidelines for NABH (National Accreditation Board for Hospitals & Healthcare Providers).
- Nurses are actively contributing to the Community Lay-Leaders' Health Training Certificate Course (CLHTC) to educate lay leaders in the community.
- Some nurses have earned certifications from the Trivandrum Palliative Science ECHO Program for introductory palliative nursing courses.
- A few nurses have completed levels one and two of the Christian Medical College Vellore College of Nursing Research course.
- The DilSe program is training competent Christian nurses to provide high-quality patient care.
- Annual alumni meetings have been held in several nursing schools.
- Faculty members have attended Indian Nursing Council skill-upgradation and simulation training in Delhi. Some have also attended Pronto International simulation training organized by MIBE/CMAI.
- Some senior nursing leaders have undergone inclusiveness training at EHA-Drishti.
- Nursing Superintendents, Principals of Nursing Schools, ward managers, and in-charges are monitoring quality indicators. Nursing audits are conducted in some hospitals to ensure that nursing care, patient safety, and documentation meet high standards.
- A two-to-three-month preceptorship program has been implemented for low performing students after their training.

- The ground-breaking ceremony was held on March 13, 2023, at Baptist Christian Hospital, Tezpur, for the College of Nursing and Training Centre.
- The integration of nursing services and nursing education has achieved a considerable degree of success, although some challenges were encountered in ensuring the timely completion of the nursing students' curriculum.

Transforming and Inspiring Stories

This is the remarkable story of a security guard who dedicated five years of service at Duncan Hospital. During his tenure, he keenly observed every action performed by the nurses on duty. Their unwavering dedication and compassionate care deeply inspired him to pursue a career in nursing. Undeterred by initial setbacks, he embarked on a journey to secure financial sponsorship for his nursing studies. In 2021, his efforts did not yield success, but he persevered and tried again in 2022. This time, his determination bore fruit as he achieved the top position in an internal unit evaluation.

Recognizing his exceptional hard work and unwavering dedication, the hospital's management was thoroughly impressed. They awarded him a scholarship to study nursing at Duncan Hospital. This story is a testament to the power of inspiration, hard work, and resilience. The Duncan Hospital team, through their actions, ideas, attitude, and mindset, played a pivotal role in transforming this security guard into a future nurse. It serves as a reminder that our actions can inspire and uplift others, even in unexpected ways. As the saying goes, "Someone, somewhere will gain something from you." Therefore, let us always strive to be role models and follow the path that God has laid out for us.

Challenges

1. Shortage of experienced nursing staff and faculty.
2. Investment required for recruitment and orientation.
3. Managing the expectations and needs of the new generation.
4. Meeting the growing demand for infrastructure and human resources in compliance with the Indian Nursing Council (INC) standards.

A Way forward

1. Strengthening the capacity of nursing services and education, along with enhancing leadership skills among nurses.
2. Ensuring a competent nursing workforce for the future by providing clinical-specific skills, improving academics, and fostering research.
3. Implementing exchange programs both within and beyond the organization to facilitate learning and growth.
4. Establishing local training programs for nurse anaesthetists to meet specific healthcare needs.
5. Upgrading Nursing Schools to Colleges and considering expanding GNM (General Nursing and Midwifery) intake from 20 to 30 students if required.
6. Implementing a systematic approach to integrate technological elements into the classroom.
7. Integrating nursing service and education to efficiently utilize staff and faculty while providing valuable training to students.
8. Incorporating palliative care modules into the teaching curriculum.
9. Preparing for Nursing Excellence Certification by NABH (National Accreditation Board for Hospitals & Healthcare Providers) to elevate the nursing standards.
10. Empowering nurses to excel in various roles, including caregiver, educator, administrator, manager, researcher, and counselor.
11. Exploring task shifting and task sharing among healthcare workers to optimize resources and improve patient care.
12. Planning to adopt a Shared Governance model in EHA hospitals

Conclusion

Together, let us continue to work tirelessly to foster the growth and development of nursing services within EHA. Our heartfelt gratitude goes out to all our sponsors and donors, both in India and around the world, for their generous contributions. We also extend our thanks to the Executive Director, Regional Directors, EHA central team, Units, CHDP (Community Health and Development Programs), Nurses, Visiting Lecturers, Nurse Consultants, and Guests for their unwavering support and prayers. Lastly, we humbly acknowledge God's divine provision and the steadfast support that sustains the EHA nursing department on its journey of service and excellence.

Mr. Vinay John
Nursing Director



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**EHA IN THE
COMMUNITY**

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EHA IN THE COMMUNITY

Community Health Development Program (CHDP)

The focus of Community Health Development Program (CHDP) has been on “Mental Resilience and Inclusion” through a multi-diversified approach in the changing context of the communities that are served. Through 47 community health and development projects implemented through 14 units, CHDP was able to reach a population of around 7,69,069 population covering 32 districts in 8 States of India. These projects were funded by the Units and through our partners.

Staff development and skill building

- Through the CHD Annual and Half Yearly meetings, much focus was provided on cross-learning and skill building for the CHDP staff. Last year 45 CHDP leaders were sent for training focused on “On the process of Reflection and Project Cycle Management”.
- Mainstreaming Pleroma Module has been initiated in which selected CHDP leaders are being trained.

CHD Strategic Direction (2021-25)

- The focus on CHD's strategic Direction has been slowed down as EHA was in the process of updating its strategic direction. The main reason was to see if the operational function would change and if changes were to be made in the context of EHA's strategic direction. Last year the focus was on Mental Health. This has been mainstreamed through “Parvarish” and “Nai Disha” as a pilot in Agra, Ranchi, Lalitpur, Fatehpur and Chhatarpur.
- Engage Disability Persons with disabilities led the third national conference of the Engage Disability held from 24-26 November 2022 at Henry Martin Institute, Hyderabad. About 400 delegates came together from all over the country, to listen to the voices of persons with disabilities in the various fellowships and move towards making the fellowships disabled friendly. True to its objective, the conference opened a space for persons with disabilities to express their intent to be a visible part of the fellowship and called on the various fellowships to embrace all disabilities.

- A core team within CHD has been formed, to build a second line of leadership within the organization. The core team will be trained and empowered to mainstream the CHD strategic direction within the organization once EHA strategic direction is completed.

Program Vice – Population Coverage

Reproductive, Maternal, New-born, Child and Adolescent Health	38,556
Disability	16,261
Climate Change and Disaster Risk Reduction	60,890
Prevention of human trafficking and child Abuse	1,24,016
Mental Health	1,65,429
Non-Communicable Disease	40,480

Projects

- Project Evaluation was conducted for the Baar Watershed Project of Harriet Benson Memorial Hospital and the Udan Project of Champa Christian Hospital.
- EHA had to close the CHDP department at 2 units, due to various factors. The CHD staff were absorbed to work in hospital setting and most of them were transferred to other units of EHA.

Plans for 2023-24 (FY)

- Revise and strengthen the Programme Information System and Standard Operating Procedures for CHDP
- Review and Reflection on the Framework of CHD Strategic Direction.

Mr. Robert Kumar

Community Health Director



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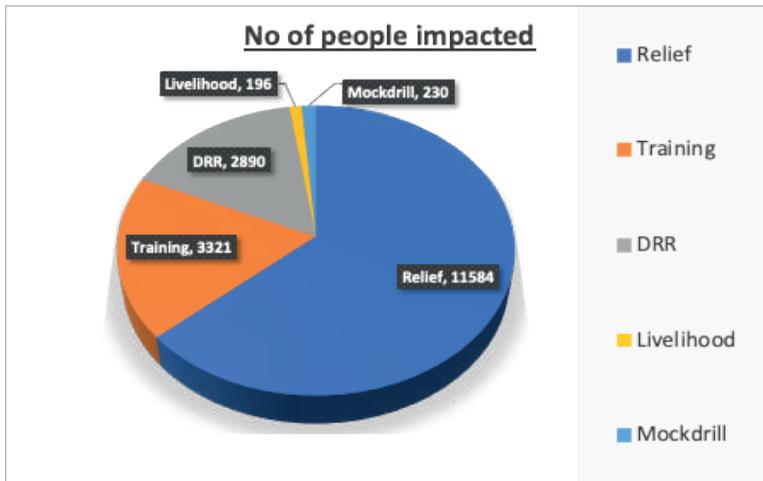
**DISASTER MANAGEMENT
& MITIGATION UNIT
(DMMU)**

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Disaster Management & Mitigation Unit (DMMU)

EHA continued to be relevant in this fast-changing nation with our commitment to serve and transform the community through caring. This year EHA-DMMU completed its 16th year of service to humanity and going strong toward building safer communities today and a sustainable future. EHA's approach to disaster management is inclusive and sustainable and in alignment with national and global commitments.

Sneak peek of DMMU's work from April 2022 – March 2023



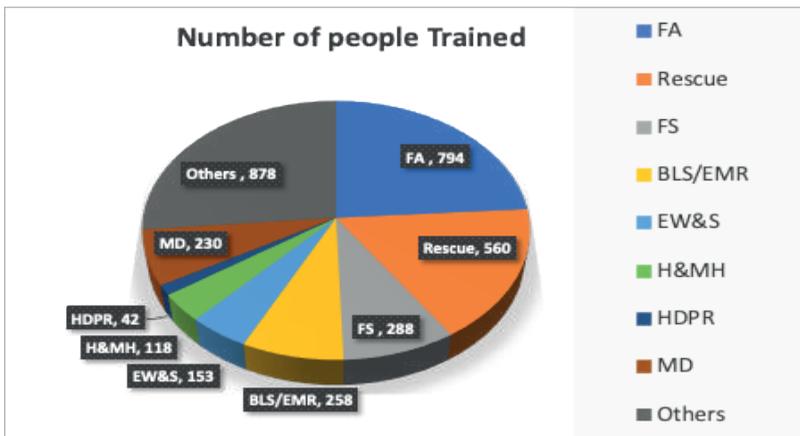
Emergency Relief – Immediate and interim relief is provided to the disaster affected people under the emergency relief program. EHA's DMMU operates wherever there is a disaster in India, with its committed team based in New Delhi with the support of its Disaster Response Network (DRN) partners and trained volunteers across the country.

EHA's response to the Assam flood in 2022 was appreciated by the local communities and the district authority of Cachar. Altogether 11, 584 people affected by the flood from 56 villages were provided food, medical, and hygiene & dignity kits.

The aid was provided to those badly affected families belonging to ST/SC, Tea Garden community, and other backward classes, people with disabilities, sick and neglected groups of people. Health camps were conducted in the flood affected areas providing medical assessment and treatment, health education, personal hygiene and counselling.

Training & Capacity Building: Disaster Education & Emergency Medicine (DEEM) training programs impart lifesaving skills, safety measures, disaster management, evacuation & drill, personal health & hygiene, and menstrual health for adolescent girls. Altogether 3321 people were trained.

New venture: Training for staff of Elderly Home-care for people with Alzheimer and Dementia. EHA provides lifesaving skills training which includes fire safety, rescue technique, evacuation & mock drill and basic disaster management lessons to the care givers and staff of such homes.



DRR (Disaster Risk Reduction):

Disaster Risk Reduction program continues to impact the local community by creating mass awareness and bringing understanding on existing local disaster risks, hazards and vulnerability. The program helps in building local capacity through training and equipping them for effective preparedness and response.

Village Disaster Management Committee and task forces are formed. Health & personal hygiene especially menstrual health for the adolescent girls were taught. Communities are much aware about climate change, weather related crisis, health & nutrition, literacy, existing government schemes, and RTI Act.

Livelihood & Sustainability: Tailoring training for women, mason training for local construction workers, livestock keeping, training on farming and cultivation along with distribution of high yielding seeds like paddy, ginger and corn were carried out.

Risk transfer – EHA addresses reducing disaster risk by shifting the disaster losses of community through having livestock insurance, crop insurance, LPG and Life insurance.

Networking:

EHA values teamwork, and we continued to work in partnership with government relevant line departments, local NGOs, INGOs, and others, like District Authority/Block Offices, Krishi Vigyan Kendra (KVK), Agriculture & Animal husbandry department, bank, Self Servicing Banking (SSB), police, fire brigade, hospital, Institutions, local club, driver association, and local organization/bodies.

Voices from the community

Mina (name changed), a 25 years old girl from Kashibari village said, I never thought that I could one day support my family financially but in fact, today I am. Moushumi attended EHA's three months tailoring course training and learned wholeheartedly. Later, she bought a sewing machine with the help of her brothers and today she is earning about Rs.300 to 400 per month.

She set a good example to the community and people respect and admire her for her efforts and dedication. She has also started saving a small amount every month from her income for emergency purposes. We pray and hope that her work will be blessed and grow even bigger in the days to come.

Poona (name changed), a young mother from Dhokodpet Mushortola said, I am very much thankful to the EHA team for educating us on personal health and menstrual hygiene. Now, I started taking baths daily and washing clothes regularly which has reduced the itchiness and rashes on my skin and I am feeling very good. I am telling my son and husband also to bathe everyday whether they are at home or away.

Future Plans:

- Timely and effective Emergency response
- Capacity building and disaster management through training
 1. Institutions (Hospital & Schools)
 2. Homes (Elderly & Children)
 3. Community, Corporate and others
- Sustainable livelihood program
- Interventions in disaster risk management
- Strengthening partnership, collaboration and network

EHA's work focus on disaster preparedness, prevention, mitigation, response and recovery. We build local capacity through training and imparting relevant knowledge, lifesaving skills, hands-on practice and equipping them with basic response kits and resources. Every trainee is expected to snowball the learning and spread the skills to save lives and reduce risk.

Mr. Shem K Raomai



PALLIATIVE CARE

EHA's palliative care services first began under the visionary leadership of Dr. Ann Thyle in March 2010 at Harriet Benson Memorial Hospital, Lalitpur. Since then, there have been many strides in scale, quality, and impact through the work of palliative care across EHA, for which we give all glory to God.

The goal of palliative care is to affirm the dignity of those who suffer with life-limiting illnesses by optimizing their quality of life through relief of physical symptoms, as well as a holistic approach that seeks to bring multidimensional comfort. The desire to provide this holistic care with dignity is grounded in the conviction that each human being is created in the image of God and therefore is of inestimable worth.

Over the past year, home-based palliative care was provided by 15 EHA units. Two new home care services were added during the year. Many staff including doctors, nurses and social-workers in the organization have been empowered through training in palliative care through various platforms. We currently have about 60 staff across the units engaged in palliative care.

This year, 68 staff were trained in various online courses in palliative care, and 138 staff attended various in-person trainings in different aspects of palliative care run by EHA's palliative care service. These opportunities for training help to improve both the scale as well as the depth of the palliative care movement in the organization, equipping staff in different spheres to engage more practically with the important palliative care approach that should rightly characterize all care of our large number of patients with life limiting illnesses and serious health related suffering who access care through our hospital units, including through the home-based palliative care programs.

We are very grateful to our various partners for their friendship and support which makes it possible for us to continue and build this sacred, growing work as evidenced by the statistics below.

Key achievements for the year 2022-23

1	Number of patients who received Home Based Palliative Care	1378
2	Number of new enrolments during the year	859
3	Number of home visits	7482
4	Number of telephonic consultations and support	4925
5	Number of family training sessions	1958
6	Number of hospital outpatient visits of home care patients to EHA hospitals	978
7	Number of hospital inpatient admissions of home care patients at EHA Hospitals	540
8	Number of families of home care patients who received bereavement care	353
9	Number of awareness meetings held during the year	1393
10	Number of people who participated in the awareness meetings	49736
11	Number of networking meetings with stake-holders in palliative care	358
13	Number of staff enrolled in online courses in Palliative care	68

Plans for the coming year:

We plan to continue the strengthening of palliative care delivery at EHA through the ongoing home care programs, holistic hospital-based palliative care, and continued wide-based training of EHA staff in various aspects of palliative care. We also look forward to improving visibility and influence of EHA's unique rural palliative care model through engaging with platforms for palliative care outside the organization.

Dr. Ashita Singh
Director, Palliative Care



RESEARCH

Origin and History of the Department

The first Institutional Review Board (IRB) of EHA was formed as per guidelines of the Indian Council of Medical Research (ICMR), which continues to be functional. A number of senior doctors working in EHA were identified to help emerging researchers to identify research topics and give technical help in research.

Team Strength

The EHA Institutional Ethics Committee (IEC) chaired by Dr. Jacob Puliyel, continued to use the online platform to assess research protocols. We are immensely grateful to Dr. Jacob Puliyel, Dr Savita Duomai, Dr. Susheel John, Ms. Imtinenla Aier for taking out time of their busy schedules and contributing towards reviewing of protocols. As Mr. Siju Thomas (Legal Member) planned to withdraw from the EHA IEC due to his busy work schedule, we would like to acknowledge his contribution towards the reviewing of protocol and want to express our gratitude to him. We are thankful to our new legal member Mr. Abraham Mathew who recently joined the team.

Highlights of the reporting year

During the year there were three IEC meetings, and 11 new protocols were reviewed. The following projects and hospitals had new protocols - Baptist Christian Hospital- one, Makunda Christian Leprosy and General Hospital- two, Madhepura Christian Hospital- two, The Duncan Hospital- two, Chinchpada Christian Hospital- one and Chhatarpur Christian Hospital- one, and 2 multi-centric studies. Various EHA hospitals are actively involved in doing good researches, the outcome of which is quite promising. It will be encouraging to see other EHA units and projects to also actively participate in doing research. We would like to express our immense gratitude for the collaboration of many organizations, agencies, and hospitals with EHA in conducting research.

Future Plans:

- 1) Conducting need-based workshops on Research protocol writing, Research report writing and Research ethics for doctors, nurses and other staff and School of Nursing students in all units
- 2) Encouraging more staff to be involved in research in units

Dr. Khusboo Nand



SHALOM

A Palliative Care Unit of EHA

SHALOM in Delhi is a palliative care unit of EHA, that provides holistic care for patients with HIV and terminal cancer. Its various components include a hospital clinic with inpatient and outpatient facility, home care programs for patients with HIV and cancer, an adolescent program, a transgender program, mental wellness program, support groups and a livelihood program called “Kiran.”

Activities and update of our services for the past 1 year:

Home Based Care HIV:

A total of 492 home visits were made to HIV-infected families, and 277 visits were made to transgender individuals' homes (TG). 17 families and 6 TGs were enrolled in the Home-Based Care program. Ration hampers were given to 76 families and 48 TGs. 14 Regional Get-togethers for families, 8 Regional Get-togethers for TGs, 1 couples' get-together, 1 parenting workshop cum adolescent program orientation, 1 Widow's get-together, and 1 stabilized family get-together were conducted for families, TGs, and adolescents cared for by Home-Based Care HIV/AHD (Advanced HIV Disease). 1 Peer Leader and 1 Peer Educator leading Character Development program Batch 9, and 2 Peer Leaders leading Batch 19a and 19b of Life Skills Education program successfully completed their leadership training offered by Shalom. Currently, 16 adolescents, including 1 Peer Educator and 2 Peer Leaders, are enrolled in Batch 10 of the Character Development program, and 20 adolescents, including 2 Peer Leaders, are enrolled in Batch 20 of the Life Skills Education program. 2 girls from Shalom were sponsored to pursue their GNM (General Nursing and Midwifery) training at the School of Nursing at Herbertpur Christian Hospital, and 1 girl was sponsored to complete her primary teacher training course.

This year also marked the successful initiation of a support group for HIV positive widows struggling with loneliness. 10 support group sessions were conducted for the widows. 12 support group sessions were conducted for HIV positive older adolescent girls who are fully aware of their HIV status. 18 mental wellness-related training sessions were conducted for the following groups: Kiran Artisans (9 sessions), Shalom staff (5 sessions), Adolescents (2 sessions), Families (1 session), and Transgenders (1 session).

Home Based Care Cancer and NCD:

Home Visits: A total of 441 visits were made to our Home-Based Care Cancer and NCD families, with 24 of these visits being bereavement visits. Additionally, 912 calls were placed to our families to assess their needs and provide medical consultations. Among these calls, 25 were made to our bereaved families to offer supportive care.

Networking Visits: We conducted 49 visits to government and private hospitals, as well as NGOs.

Awareness Program: We organized 55 awareness programs, with a total of 602 participants.

Family training: 385 family training courses were given to 905 patients and caregivers. On World Hospice Day we organized a “Bereaved family’s get-together”.

Support Group Meetings: Nine support group meetings were held, with 143 participants attending.

Food Provision: We distributed 115 food hampers to our neediest patients.

Livelihood Program: We welcomed two new artisans to the center and provided skill training to 10 new trainees. Throughout the year, we conducted 20 sales events. The first batch of skill trainees graduated from the 6-month Skill Training Program. Additionally, mental health classes were conducted monthly for the artisans, and Shalom nurses provided health awareness classes on various topics.

Hospital Care: Outpatient: 1052 patients were seen in the OPD, of which 698 were HIV positive patients which also include 74 transgenders.

Inpatient: 92 patients availed inpatient care.

Partnerships: We established new partnerships with India Collaboration and the Swedish Chamber of Commerce.

Challenge:

Our main challenge remains raising local funds.

Future Plans:

- Initiate training programs for other NGOs.
- Explore avenues for raising local funds and resources to sustain ongoing programs on a long-term basis.
- Search for a permanent location for Shalom's relocation and establishment.

Dr. Rajni Herman



FINANCIAL STATEMENTS

Earmarked fund to the extent utilised

EMMANUEL HOSPITAL ASSOCIATION 808/92, Deepali Building, Nehru Place, New Delhi - 110 019 Consolidated Account Income and Expenditure Account for the Year Ended 31st March 2023			
(In INR)			
Particulars	Schedule	For the Year ended 31st March 2023	For the Year ended 31st March 2022
INCOME			
Voluntary Contributions		1,97,70,957	2,04,47,566
Earmarked fund to the extent utilised		5,54,83,386	4,43,03,630
Interest Income			
Saving Bank		6,77,525	9,16,262
Fixed Deposit		55,35,886	41,48,762
Interest from Income Tax Refund		3,79,476	2,68,421
Other Income	8	3,27,90,545	41,31,501
Total (A)		11,46,37,775	7,42,16,142
EXPENDITURE			
Project Expenses	9	5,87,59,725	4,66,94,131
Administrative Expenses			
Salaries & Allowances		1,80,49,684	1,79,10,830
Travelling Expenses		10,89,455	2,10,762
Office & Other Supplies		4,35,477	59,099
Printing and Stationery		1,81,561	1,58,320
Repairs & Maintenance		9,28,860	5,74,890
Communications		3,10,725	1,93,573
Conference, Meetings and Workshops		11,40,863	7,040
Hospitality		1,79,731	49,858
Legal and Professional Expenses		21,28,880	11,15,658
Utility		4,85,496	3,01,199
Rent		9,65,438	30,000
Bank Charges		39,235	78,028
Membership and Affiliation Fee		1,45,000	1,05,000
Taxes & Duties		1,41,173	1,06,438
Loss on Sale of Assets		-	1,170
Audit Fees		4,42,500	4,42,500
Amount Written off		7,19,148	-
Depreciation		21,38,424	20,88,547
Total (B)		8,82,81,375	7,01,27,043
Balance being Excess /(Deficit) of Income over expenditure (A-B)		2,63,56,399	40,89,099

FINANCIAL STATEMENTS

EMMANUEL HOSPITAL ASSOCIATION 808/92, Deepali Building, Nehru Place, New Delhi - 110 019 Consolidated Account Balance Sheet as at 31st March 2023			
(In INR)			
Particulars	Schedule	As at 31st March 2023	As at 31st March 2022
LIABILITIES			
General Fund			
Reserves & Surplus	1	8,48,91,169	5,67,43,951
Fund Balances	2	4,01,12,348	4,01,12,348
Funds & Liabilities			
Earmarked Project Funds	3A to 3E	4,15,02,335	4,40,04,062
Other Current Liabilities			
Other Payables	4	15,35,558	2,33,90,012
Total		16,80,41,410	16,42,50,373
ASSETS			
Fixed Assets			
	5	3,43,58,914	3,78,98,892
Current Assets			
Cash & Bank Balances	6	13,10,31,846	12,25,76,706
Other Current Assets			
Others	7	26,50,650	37,74,775
Total		16,80,41,410	16,42,50,373

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Statutory Reporting

Annual Report of the Internal Complaints Committee (ICC) for Prevention of Sexual Harassment at Workplace of Emmanuel Hospital Association Central Office and Central office run projects.

During the period from January 01, 2022 to December 31, 2022, there were no cases of sexual harassment referred to the Internal Complaints Committee of EHA's Central Office and Central office run projects, by any staff or volunteers.

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