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Full Legal Organization Name Ek Ek Paila Nepal

Organizational Mission Statement

To conduct comprehensive medical outreach service in remote areas of Nepal.

The team will comprise of VOLUNTEERS - The responsibility of volunteer doctors will be to provide the best available medical care while the other volunteers will assist in every possible way.

Brief Description of Organization

Ek Ek Paila, a campaign to provide medical aid to earthquake affected victims got formally registered in Social welfare Council in 2016 as non for profit organization. Since then 16 free of cost health services have been successfully organized in different remote areas of Nepal:

No.	PLACE, DISTRICT	DATE
1	Chanute, Sindhupalchowk	May 2015
2	Bhadrutar, Nuwakot	June, 2015
3	Sailung, Dolakha	July, 2015
4	Thulo Shyapru, Rasuwa	Aug, 2015
5	Humde, Chame, Manang	Sept, 2015

6	Maina Pokhari, Dolakha	Oct, 2015
7	Dhola. Dhading	Nov, 2015
8	Sinkhupali, Kavre	Dec, 2015
9	Dudhekuna, Lamjung	Jan, 2015
10	Ryale, Kavre	Feb, 2016
11	Halchowk, Kathmandu	Mar,2016
12	Gyachok, Gorkha	Apr, 2016
13.	Manang	October 2016
14.	Mugu	March 2017
15.	Humla	October 2018
16.	Jumla	March 2018

These clinics provide comprehensive medical care in general medicine, surgery, orthopedics, pediatric medicine, gynecology, dermatology, ear nose and throat diseases, ophthalmology, hematology, radiology, dentistry and public health related matters.

Apart from outpatient department services, patients may also undergo, eye (cataract), ENT, dental surgery, general surgery, gynecological procedures, orthopedic surgery whenever indicated. The operations are conducted at the district hospitals and the patients are left to follow up with the stationed medical doctors. Patients can also undergo a full blood examination. Patients screened in these clinics that require more medical attention, are referred to specialized hospitals in Kathmandu where members of EEP work. Here they will receive treatment at subsidized rates or free of cost.

Working Principles

All patients will receive the best medical care possible. Those in need of further treatment will be referred to hospitals in Kathmandu where they can be offered subsidized or free of cost treatment.

We will work under one name / banner.

We will not promote individual institutions to which we are affiliated - whether it is not for profit or profitable organizations.

We will not affiliate with any political party.

Every volunteer will contribute NPR. 3000 each per trip. This money will be collected and used for direct overhead costs while on the field – such as food, water etc.

All doctors will carry their own equipment and will bring as much medication as possible.

We will depend on local donors, friends, family and other well - wishers to help us buy medications, tents, sponsor for transport etc.

Friends from abroad can donate directly to the bank account of EEP. Similarly, the grant awards can be used in bearing the clinical cost of the health service which includes medicine costs, lab test costs, rent of medical and surgical devices.

(The entire activity can be viewed on Facebook – Ek Ek Paila, and/ [www. ekekpaila.org](http://www.ekekpaila.org)

Population Served

The organization does not have a physical space or office - as it is a not for profit organization where all service providers volunteer to fulfill mission goals .

The upcoming health services in 2019 are planned to be conducted in western part of Nepal which have the poorest health indicators. a. Dolpa district, October 2018

b. Accham district , March 2019 (Grant is requested to support medical cost for this health service project) c. Bajura district, November 2019

Accham District

The total population of Accham District was 257,477 in 2011 of which 53% were female. The population is projected to be 321,734 in 2031. Of total population in 2011 more than half (55%) were under 20 years of age. Life expectancy of people living in Accham is around 67.1 years which is very close to national figure (68.80 years). However percapita income is around half of national average (\$536) which is a major barrier in accessing quality and super speciality health services. Every one out of two people in Accham are living people the poverty line as per national report in 2011. In Accham around 3.3% of people are disabled (more than 1.5 times the rate in Nepal: 1.94%) of which around 43% are physically disabled.

In Accham 60% of children under age five are malnourished which is around 1.5 times the rate in Nepal. Only 56% of people have access to safe drinking water. In Accham, the highest level o health care infrastructure is district hospital.

The health service is provided free of cost to the patient. The estimated number of people to be examined are 2000. While EEP raises money to cover for 90 % of the cost of treatment of patients and 100 % logistics, organizations that are affiliated with EEP such as Impact Nepal (ENT), Geta Eye Hospital (Eye), Sparsh Nepal (screening for HIV and Hepatitis) help by providing free surgery and screening. EEP brings these organizations under one umbrella to provide comprehensive health care. Yeti Airlines will be providing discounted air tickets to EEP as part of their Sustainable Development Goals in partnership with the United Nations.

Report of previous health service

THE GAMGADHI (MUGU) HEALTH REPORT

Gamghadi is the capital of Mugu District in Far-Western Nepal.

DATE OF SERVICE April 10-12, 2017

ENT:

OPD consultation: 550

Surgery total : 20

Myringoplasty : 13

Ventilation tube : 2

Split ear repair : 2

Preauricular sinus:1

Examination under microscope: 1

Ear Fb removal :1

DENTAL

Check ups / Screening / Counselling: 728

Fluoride Application: 196

Atraumatic Restorative Treatment: 112

Extractions: 180

Oral Health Education and Toothbrush and Paste Distribution: 900

GYNAECOLOGY

Examined Patients:538

in which 10 antenatal (pregnancy),

Cervical Cancer screening above 30 years: 340, among this 11 positive cases counselled - referred for cryotherapy.

Group counselling done prior examination for cervical cancer, Family Planning and Awareness to stop early marriage.

ORTHOPAEDICS + GENERAL SURGERY

Total patients examined: 730

Orthopedics Surgery under Local Anesthetics: 1

Under General Anesthesia: 1

DERMATOLOGY

Dermatology Consultations: 526

with counselling on skin hygiene, skin care and photo protection

RADIOLOGY:

Number of patients who were examined with Ultrasound: 221

Full Reporting

PAEDIATRICS:

470 patients were seen in Pediatrics Department. Quite significant proportion of patients had Chronic suppurative otitis media and had ENT evaluation as well, similar was the scenario for dental caries. A few patients required work up for possible tuberculosis. Two cases of congenital heart disease were identified, one in failure and the other cyanotic, one case of mitral regurgitation possibly of rheumatic origin was found. A case of Nephrotic Syndrome and a case of severe pneumonia was sent to district hospital. Not a single case of obesity was found, on the contrary overwhelming majority of the patients were stunted. Many of those requiring evaluation in higher centers refused referral citing economic constrains.

EYE

Patients Screened: 824

Cataract Surgeries Performed: 12

GENERAL MEDICINE:

Total Consultations: 948

First time diagnosis of COPD and bronchial asthma ~ 100

Liver cirrhosis: 3

Ascites - 3 ? Tubercular

Pleural effusion: 3

Pulmonary tuberculosis : 1

Disseminated tuberculosis: 1

Valvular heart disease: 5

Congenital heart disease: 2

IBS: 5

Gilbert's syndrome: 3

Renal disease: 2

PATHOLOGY

FNAC:5

Blood Grouping: 20

Blood Tests: 202 TESTS:

HIV: 190

Hepatitis B/C Sample Collection: 155

Urine for Pregnancy: 3

PHARMACY:

Medicines were distributed as per the prescriptions from all the departments.

EK EK PAILA TEAM

General Medical Consultations by Dr Sudhamshu KC and Dr Subodh Dhakal

Pathology (Blood Tests / FNAC) by Dr Ganesh Parajuli, Sakka Bahadur Shahi and Madhu Ghale

Radiological Services (Ultrasound) by Dr Amit Shrestha

Ophthalmological Services (Screening/Tests/Cataracts) by Himalayan Eye Care Hospital Pokhara led by Dr Indra Maharjan along with the Dr Suman S. Thapa and

Pradeep Banjara

Dental Services (Screening/Counselling/Preventive/Fillings/Extractions) by Dr Rajeena Pradhan, Dr Sabin Giri, Dr Aquila Shrestha, Dr Neil Pande

and Priyanka Singh

Ear Nose Throat Services (Consultations/Surgeries) by Dr Kun Jan, Dr Rabindra Pradhananga and Impact Nepal Team with Anisha Prajapati and Nisha

Bhashima

Skin and STD by Dr Sabeena Bhattarai and Dr Shristi Shrestha

Orthopaedic (Consultations/Emergencies/Fixations) by Dr Raj Rana

9. Paediatrics by Dr Bishnu Rath Giri

10. Gynaecology (Consultations/Cervical Cancer Screening/Pre and Ante-Natal Counselling by Dr Sapana Amatya Vaidya, Sudha Bista and Pushpa Maharjan 11. General Surgery by Dr Bikash Bikram Thapa

Pharmacy Services by Bishnu Pandey, Ramesh Neupane and Sneha Shrestha

HIV Screening by Sparsha Nepal led by Parbat Thapa and Dolkar Ghale

14. Logistics by Ashish Bhattarai, Sekhar Chettri, Prajwal Aryal, Prabhakar S Thapa

Chief Coordinator on the ground - Sashi Praetorius, EEP member and GMP Foundation

Volunteers Samyam Kc and Amodini Thapa

Local organizers Lightening Nepal led by Nishinta Bhatta, Prakhyat Jung Thapa, Ashim Pandey Kaka, Sugam Shakya, Avdhesh Pant, Adeshna Gurung

We would also like to take this opportunity to thank the Chief District Officer of Mugu and his team, Nepalese Army and Major Paras Bikram Shah and the Nepal Police for their kind support and facilitation. Our gratitude to all the doctors and staff of Mugu District Hospital for all their help.

Program / Project Name

Ek Ek Paila Nepal: Free Health Service in Accham, March - April 2019

Proposal Summary

Ek Ek Paila (EEP) is a group of volunteers (medical doctors, paramedics and friends) that have come together to deliver the best possible medical service free of cost to people residing in remote areas of Nepal. The mega earthquake of 2015 led to the formation of this group of volunteers. From May 2015- April 2016, EEP committed to provide one free medical service every month to areas that were devastated by the earthquake. After the completion of 12 health services in various districts of Nepal, the organization was formally registered in 2016 at the Social Welfare Council of Nepal.

The primary focus of EEP is to provide two major comprehensive health services in remote areas of the country in a year. After its registration in 2016, EEP has conducted free health services in western Nepal in areas such as Humla, Jumla, and Mugu. In 2018, EEP will deliver service to Dolpa and in 2019 to Accham and Bajura districts in western Nepal.

Statement of Need and Background

The mega earthquake of a magnitude of 7.8 measuring on the Richter scale, hit Nepal on 25th April 2015, killing over 8,856 people. A total of 447 public health facilities including 5 hospitals, 12 primary health care centers, 147 Health Posts and 16 health facilities were completely destroyed. The total damage from disaster towards the health sector was estimated to be NPR 7.54 billion. There was an estimated need of around 3,278 million US\$ in the health sector. The overall effect on the health spectrum has led to many long term challenges which will have a direct impact on the development goals. (National Planning Commission, 2015).

In Nepal around a quarter its population live below the poverty line, and one out of ten suffer from a disability. The state of health care in Nepal is abysmal; millions of Nepalese do not have reasonable access to adequate health services. The disparity in health status between urban and rural populations is particularly shocking. Many of the rural government health posts lack basic equipment, and some have not been staffed for years. Inhabitants of the large regions that are not accessible by road may have to walk for days in order to receive treatment from a doctor. The rural areas of Nepal have one doctor for every 150 000 people, compared to one for every 850 people in the Kathmandu valley. Most of the doctors and health care professionals who accept positions at rural health care facilities leave these jobs prematurely. Although several new medical schools have recently opened in Nepal, they have not taken up the challenge of encouraging students to improve the plight of the rural population. Of the more than 1000 doctors produced in Nepal each year, between 40 and 50% leave the country soon after graduation in search of better opportunities. It is beyond the scope of EEP to address these problems. EEP, however works to set an example that volunteerism can be adopted by some of the privileged citizens of Nepal to serve those in need of help.

The main objective of EEP then was to conduct mobile outreach medical clinics in remote parts of the country that had been devastated by the earthquake. This would contribute towards minimizing the immediate medical need to the disaster hit areas. EEP clinics would provide comprehensive medical care in general medicine, pediatric medicine, gynecology, dermatology, ear nose and throat diseases, ophthalmology, dentistry and public health related matters. As an immediate action plan, 12 clinics were conducted in one year in earthquake affected areas. Patients screened in these mobile outreach clinics requiring more medical attention, were referred to specialized hospitals, where they received treatment at subsidized rates or free of cost.

Thus, EEP was registered in 2016 with a commitment of providing 2 health services in 1 year in remote hilly and mountain areas of Nepal. The health services would include comprehensive medical care including the basic operation procedures.

What are the goals of the program?

Goal

To deliver free health services to people living in remote areas of Nepal by specialized medical doctors of Nepal.
Plan to achieve goal

. Preparation of health services

i. Decision on health service site

After services provided during the year of the earthquake (2015- 2016), EEP has focused its health service delivery to the western region of Nepal, which has the poorest health indicators. In the year 2017 and 2018, three health services were conducted in Mugu, Humla and Jumla districts. The next health service will be held from 1-3 October 2018 in Dolpa district. In 2019, the two health camps will be organized in Accham in March and Bajura in November.

ii. Local collaborating partners

The duties of local collaborating partners are identification and mapping of the area of service, local advertisement and coordination of the event. They also guide the EEP team in obtaining permission from local stakeholders.

iii. Financial and logistics management

EEP conducts a chain of fundraising events that include national and international charity concerts, writing of grant requests, voluntary donation from Nepalese citizens etc. All costs for the health service are raised through such activities. The organization promotes volunteerism. All EEP members also have to contribute NPR 3000 each to partially cover the overhead cost of travel, food and accommodation.

The logistic arrangements including transportation management, procurement of medicine, taking permission from the local government are all carried out by EEP volunteers

Delivery of health services

The team provides specialized health service such as, general medicine, ENT, pediatrics, gynecology, ophthalmology, dermatology, orthopedics, general surgery, radiology and pathology.

Post health services reports

The total number of patients receiving the services at the site are recorded and analyzed in a report. Challenges and plan to overcome them

Expected Challenges	Plan to overcome challenges
Budgetary constraints for the health service	Fundraising concerts are organized. Grants are requested from different funding organizations. Voluntary donations from Nepalese donors are promoted. Voluntarism is promoted in the organization. The service providers have to pay a part of their overhead costs, bring medical equipm and medications as possible.
Dissemination of information among service recipients	Advertisements are broadcasted in local radio, FM. Pamphlets are distributed. Local collaborators are involved at their best.
Cooperation from the local government	Working as partners to serve the community. Seeking permission from the local government.

How will you evaluate success or failure for each goal?

The evaluation of the organization is independently done by the Social Welfare Council.

After every health service, a report is prepared about the service delivery and submitted to the local municipality. Similarly the follow and post evaluation of cases are handed over to the local health care providers in the district who reports to the EK EK Paila team.

Total Program Budget

23802

Requested Amount

12931

Grant Period From 02-01-2019

Grant Period To 04-07-2019