I take this opportunity to extend my deepest appreciation to all the team members who worked for developing the annual report for the financial year 2019-2020. My special appreciation to all the staff members who contributed to the shaping of the report in a collaborative mode, especially Mr. Mohammed Mateen, Dr. Radhika Rohini, Mr. Prashant Janjal, Dr. Sameer Valsangkar, Ms. Jessy Joy, Ms. Theophine Venard, and Mr. Manesh Thomas. I am also grateful to all the Regional Units of CHAI for sharing their progress for updating the report. Thanks to all the programme managers and departmental heads for consolidating their reports and extending timely support to the team to bring out this issue on time. A special thanks to Mr. George K Paul who designed the report.

The report is a reflection of the work of our member institutions, partner organisations and project staff in our respective thematic areas. My heartfelt thanks to our valuable donors, supporters and network members for their unconditional and longstanding support to deliver health care services, especially to those at the margins of the Society.

Happy reading!

Rev. Dr. Mathew Abraham C.Ss.R, MD  
Director – General, CHAI
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Vision

The Catholic Health Association of India upholds its commitment to bring ‘health for all’. It views health as a state of complete physical, mental, social and spiritual well-being, and not merely the absence of sickness. Accordingly, CHAI envisions an INDIA wherein people,

• are assured of clean air, water and environment;
• do not suffer from any preventable disease;
• are able to manage their health needs;
• are able to control the forces which cause ill health;
• enjoy dignity and equality and are partners in decisions that affect them, irrespective of caste, creed, religion or economic status, and
• respect human life and hold and nurture it to grow into its fullness.

Mission

In order to realize the vision, CHAI endeavors to

• Promote COMMUNITY HEALTH, understood as a process of enabling the people, especially the poor and the marginalized, to be collectively responsible to attain and maintain their health and demand health as a right, and ensure availability of quality health care at reasonable cost.
• Prevent and control communicable and non-communicable diseases as they cause a huge public health burden as well as take a heavy toll of human life in the country.
• Ensure relief and rehabilitation to persons with disabilities.
• Provide relief to disaster victims in the country and bring the affected to normal level of functioning.
• Sustain advocacy for the cause of poor and needy.
Born on June 23rd, 1887, in Australia.

Graduated with MBBS Degree from the Melbourne University in 1910.

The first medical woman-doctor at the Christ Church Hospital, New Zealand.

The first General President of the Catholic Women’s Social Guild, Melbourne in 1916.

M.D. in Gynaecology, Obstetrics and Ophthalmology in 1919.

Reached India on 11th February 1920.

Joined JMJ on 28th November, 1920.

The first nun-doctor missionary in India.

Founded Catholic Hospitals’ Association on 29th July, 1943 and became its first president.

Sr. Dr. Mary Glowrey left for her heavenly abode on May 5th, 1957, in Bangalore.
“It is my hope that, by joining the principles of solidarity and subsidiarity, efforts will be made to cooperate in ensuring that everyone has access to suitable treatments for preserving and restoring their health.”

Pope Francis
Message from the Ecclesiastical Adviser to CHAI

At one hand, the world is changing faster with new technology, products, services and even mind-set and perspectives of people. It is said that expectancy of life has increased due to the several scientific and medical advances. Treatment for most of the diseases and ailments has become easy. However, the common man still continues to face same old challenges of affordable and quality healthcare.

At the other hand, the private and corporate hospitals continue to identify newer avenues to ensure that there is year-on-year increase in the profits. Treatment for covid-19 with absolutely unaffordable charges is the latest example for this. Despite being unable to afford, people still prefer to avail the services from these hospitals mainly because along with the high-end packaging and marketing, hope and trust is also added as an additional advantage gained from these services.

It is in these multifaceted challenging scenario the Catholic healthcare facilities continue their work. The Catholic Health Association of India is the largest network of non-profit healthcare facilities providing comprehensive services. The network, though not highly visible, like other corporate hospitals, is the solution for making healthcare services accessible to common man. The journey has been one of faith, courage and resilience. We have worked together in serving the people. I’ am grateful to Lord for making me part of this journey.

The Church, adhering to the mandate of Jesus has always attended to the sick and the suffering; and my message to all the members of CHAI quoting the words of Our Holy Father Pope Francis: “Jesus bestowed upon the Church his healing power... The Church’s mission is a response to Jesus’ gift, for she knows that she must bring to the sick the Lord’s own gaze, full of tenderness and compassion.” Let us collectively make efforts trusting the words of Our Lord, “Do not be afraid... I am with you till the end of time.”

With very good wishes to everyone in CHAI and imploring the blessings of God,

+ Prakash Mallavarapu
Archbishop of Visakhapatnam,
Chairman for CBCI Office for Health Care &
Ecclesiastical Adviser of CHAI
Message from the President

Dear friends, we are fortunate to carry out the healing ministry of our Lord Jesus, the Divine Physician. I appreciate the commitment of CHAI Family for rendering selfless service through its vast network, especially during this COVID-19 pandemic crisis. The Corona Virus outbreak and lockdown has affected most of us causing fear and anxiety. However, at the same time it evoked positive and brave responses. The current situation is still difficult, but we are confident that we can win the battle, as long as we stand in solidarity with one another. The crisis also reveals our vulnerability, interdependence and connectedness, forcing us to figure out a new normal for the feature.

As we analyse our healthcare services, for individuals and families from low as well as middle economic background, availability of quality and affordable medical services is a difficult proposition. This difficulty is bound to continue because of covid-19. The Member Institutions of CHAI have been providing and will continue to provide affordable, accessible, compassionate quality care to these individuals and families. Provision of such services has been made possible, despite several challenges, because the mandate is compassionate and affordable. The uniqueness of the services extended to the people is to lay equal emphasis on preventive, promotive and primary care.

As usual, thousands of people have benefitted this year also from the services offered by the Member Institutions of CHAI. The Membership of CHAI comprises of health centres, hospitals, medical colleges, care and support centres, educational institutions and social service centres. These Member Institutes have various cadres of healthcare providers including sister-doctors, sister-nurses, social workers, paramedics and support staff. I am one of these thousands of committed and professional workforce and feel privileged to lead this unique institution, which is a large network and a non-government organization (NGO).
I am pleased with the Annual Report of Catholic Health Association of India for the financial year 2019-2020. Besides the continual implementation of various programmes this year, conscious and consistent efforts were being undertaken to benefit the members of the network. The most note-worthy of these network initiatives have been the Common Procurement Portal, Medigate, CHAI Academy and the Helpdesk. Relentless efforts are being made to make these initiatives reach out to a greater number of hospitals. Along with the implementation of programme and network initiatives, one important aspect of the priorities was Quality maintenance. Various measures were used to ensure that all the activities of the Central Office were of best quality.

I feel privileged to be part of the CHAI family and to contribute for the growth and welfare of the organization by being with the Executive Board Members, Director-General, Member Institutions and the staff. I place on record my appreciation and gratitude for all the professionals of the Member Institutions, Regional units, Diocesan units, fellow-members of the Board, Director-General and staff of central office for their commitment and perseverance. May the Lord Almighty bless our organization, successfully to reach out to many more in the years to come with compassionate, affordable and qualitative care.

Sr. Victoria Narichitti, JMJ
President, CHAI
We are facing an unprecedented situation across the globe and few have remained untouched by the COVID-19 pandemic. Mere statistics and numbers in the initial stages of the pandemic have translated into known faces with virtually everyone being in touch with someone who has been infected. The pandemic continues to grow unabated and as the global community races in search of a cure or a vaccine, anxiety and uncertainty prevail.

**CHAI response to the COVID situation**

There is however a glimmer of hope as the CHAI network and its unsung champions swung into swift action to provide support and relief. CHAI immediately assessed the situation and intervened in three areas immediately.

1. **Provision of food and hygiene kits to migrants and vulnerable families affected by the lockdown**

2. **Capacity building of community health providers and hospitals in COVID-19 management**

3. **Provision of personal protective equipment to healthcare providers**

With the support of trusted partners and donors, CHAI was able to raise resources to support 1750 vulnerable families and 1500 children living with disabilities. Most of the programs were supported for a period of six months with food and hygiene kits. COVID awareness messages were shared across the community. CHAI used a novel digital geo tagging platform to ensure transparency and accountability of these programs.

CHAI organized webinars to promote the financial sustainability of the hospitals since many of the hospitals were affected by the pandemic. CHAI also formed partnerships with organizations such as University of Melbourne, Tata Trust and CMC Vellore.
to provide training to doctors, nursing, paramedical and community health workers on COVID-19 management. CHAI has supported over 49 hospitals with PPE kits for a period ranging from 3-9 months. CHAI is in the process of contacting more donors to sustain and expand this support.

Across the network, Catholic healthcare workers selflessly devoted their services to COVID-19 management and took up care of patients while endangering themselves. Many among our network themselves acquired COVID-19 infection while taking care of their patients. Their selfless service and stories of toil have inspired millions.

**Maintenance of directorate functions and projects**

Despite the circumstances, essential health services and projects needed to be maintained. The Directorate adapted to a digital mode of working and novel mechanisms were evolved for teamwork and maintenance of the directorate. Projects are being restructured to ensure essential health services and COVID care remains the priority.

During the year 2019 - 2020, CHAI has reached out to 29,29,231 people and 5,40,576 households through awareness activities. 1,44,619 people were tested in the community and 21,163 were referred for medical care. 39,173 patients were reached through health services through various programs and 3,727 patients were linked to various government schemes.

130 CHAI MIs, 53 Non-Governmental Organisations partnered with CHAI in reaching out to these people. These partners have 1,236 trained local volunteers engaged in grass roots work.

1,592 members underwent capacity building, which helped in honing the skills of our staff, partner organisations staff, our Sisters and various volunteers.

**Way forward**

The situation remains uncertain and the number of COVID 19 cases continues to grow. In this critical situation, it is essential to reassure people by providing quality, affordable and accessible healthcare. CHAI is piloting a tele-health platform which can provide solution in these unprecedented times. Our network continues to walk the path of the divine healer by providing healing to the most vulnerable.

In the 77th year since the founding of CHAI, we seek the guidance and blessings of our founder Sr Dr Mary Glowrey to continue in the mission of healing and cope with this pandemic.

Rev Dr Mathew Abraham C.Ss.R., MD.
Director-General, CHAI
Programmes at a Glance

Intervention Areas

Community Health

Communicable Diseases

Non-Communicable Diseases

Disability

Network Strengthening

Solar Energy

Health Systems Strengthening

Community Health

- 55,211 people were reached with messages on maternal and child health, sanitation, communicable and non-communicable diseases, social issues, etc.
- 3,909 pregnant women were followed up by Community Health Volunteers (CHVs) and out of them 1,752 underwent institutional deliveries.
- 19,403 immunization sessions were supported by CHVs in their operational areas.
- 20,497 people were referred for various diagnostic tests (HIV, TB, Malaria, Filariasis, Diabetes and Hypertension) and out them 4,637 were found positive and referred for further treatment.
- 2,039 people were linked to social security schemes and 908 were linked to income generation programmes.

Communicable Diseases

Tuberculosis

- 26,94,803 people were reached with awareness on TB through various activities.
- 1,10,488 potential TB cases were identified through various activities and were referred for TB testing.
- 1,08,305 cases were tested for TB.
- 16,730 cases were diagnosed with TB.
- 14,374 TB cases were initiated on Directly Observed Treatment Short course (DOTs).
- 3,268 TB patients were sensitized on Patient Charter-Rights and Responsibilities.
- 1,200 community volunteers were timely reviewed through 121 review meetings to improve their skills in proper case notifications.

Children Affected and Infected By HIV/AIDS (CABA)

- A total of 1,487 children infected and affected by HIV/AIDS were provided with care and support services.
- 342 children including both HIV/AIDS infected and affected were enrolled in schools for primary and higher education.
- 1,200 community volunteers were timely reviewed through 121 review meetings to improve their skills in proper case notifications.
- Overall Rs. 3,80,206 cash donations were mobilized which were used to support the children.
- 328 sponsors provided cash or in-kind support to the children.
- 443 children under institution-based care received accommodation, nutrition and holistic care.
- 204 children were given vocational training on various trades (shoemaking, tailoring, computer, mushroom cultivation, candles making, washing powder-making, bag-making, wall-painting and Karate) for fostering entrepreneurship.
- All of the children in institution-based care
Non-communicable Diseases

Diabetes and Hypertension
- 318 patients with diabetes and hypertension were followed up three times during the project period to assess the control of blood glucose and blood pressure.
- A District Advisory Meeting with officials from state and district health department and project partners was organized to review the status of implementation and to plan next steps.
- Trainings for Outreach Workers (ORWs) and Frontline Health Workers (FLWs: ASHAs, Aanganwadi workers and ANMs) on the 'SALT' (S-stimulate, A-appreciate, L-listen, learn, T-Transfer) and CLCP (Community Life Competence Process) (SALT-CLCP) approach were organized.
- The ORWs were facilitated to practise the SALT-CLCP approach among the beneficiaries.
- Patient Support Group (PSG) meetings were organized by ORWs to discuss the need for adherence to medicine and lifestyle modification to control diabetes and hypertension.

Palliative care
- 1,675 patients were provided with inpatient services.
- 3,034 patients were provided with home-based care services.
- 29,328 people were sensitized about palliative care through 322 awareness programmes.

Disability

Eye-care programme
- 26,192 people were made aware on common eye problems and eye diseases.
- 15,817 persons were screened for eye problems.
- 3,714 persons were operated for Cataract surgery.
- 302 community health workers [ASHAs, Aanganwadi workers and other allied health workers] were sensitized on eye care.
- 196 persons were trained on disability inclusive eye health.

Digital Reach programme
- 10 children underwent corrective surgeries for deformity, after assessment.
- 41 children received assistive aids and appliances, depending upon needs.
- Community Based Rehabilitation (CBR) workers transferred functional rehabilitation skills to parents and developing adaptive devices with locally available resources.
- Field based videos were uploaded on “CHAI Digital Reach” YouTube channel, so that CBR workers could use it as reference for functional rehabilitation and for making adaptive devices by using local resources.

Relief and Rehabilitation of the Persons with Disability
- Overall, 6,870 children and youth with
disabilities were reached in the year.
• 4,669 children and youth with disabilities were assisted with health-care support.
• 3,934 children and youth with disabilities were assisted with education support.
• 1,029 families having children and youth with disabilities were assisted with livelihood opportunities.
• 6,885 children and youth with disabilities were supported for social inclusion.

Network Strengthening

Liliana Foundation Inclusion Network (LINC-Asia Network)
CHAI as the Secretariat of LINC-Asia Network has successfully implemented the below activities;
• Organized face to face meeting in Ulaanbaatar, Mongolia (July 2019).
• Developed a strategic plan for LINC-Asia Network from 2019-2025.
• Annual Plan for 2019 was developed.
• LINC-Asia Network was represented in the International Conference – AP CBID Congress in Ulaanbaatar, Mongolia.
• LINC-Asia hosted Post-Congress workshop with like-minded networks after the International Conference – AP CBID Congress in Ulaanbaatar, Mongolia.
• Published the Physical Access Audit findings in the International Newsletter by UN-ESCAP.

Engage Disability
CHAI as the Secretariat of Engage Disability has successfully implemented the below activities;
• Organized one face to face meeting of core group members in Mumbai.
• Annual Plan for 2019-2020 was developed.
• Secretariat hosted a regional conference in Mumbai.

Revisit, Rediscover & Reposition Healthcare Ministry
• Meeting of the National Steering Committee comprising of representatives from 45 congregations was organized.
• 46 sisters (30 sister-doctors and 16 sister-nurses and administrators) were trained in hospital administration and leadership at St. John’s Medical College, Bangalore.
• 29 sister-nurses and social workers were trained as Community Health Enablers through a six-weeks training programme.
• For the benefit of CHAI network members, a common procurement portal (Medigate), CHAI Academy and Helpdesk were launched.
• 7,000 people were reached for awareness on various diseases and 2,000 people were reached through health camps by sisters as part of Community Health Interventions.

Solar Energy
• Solar equipment was installed at 6 Member Institutes.

Health Systems Strengthening

Innovation & Learning Centre for Comprehensive Primary Health Care (ILC)
• A base-line study focused on infrastructure, training needs, availability of medicines, equipment and diagnostic services was conducted at PHCs and Sub-Centres in Mahbubnagar district, Telangana.
• ASHAs were felicitated on collecting data on incidence of non-communicable diseases as part of the ILC.
• School health activities were coordinated by imparting training to teachers of Government schools for promoting healthcare awareness among children.
• Mid-level Health Professionals (MLHPs) were facilitated during village health & nutrition days and encouraging participation of other sub-centre and PHC level activities.
Covid-19 pandemic has halted lives and created unprecedented crises. CHAI has been involved in providing relief services to people highly affected with covid-19 crises since March, 2020. Though the relief work being done in response to the pandemic is out of timeline in-terms of the reporting period, a brief description is included in this annual report with the intention of information sharing. CHAI has been supporting the relief services as part of response to covid-19 with specific focus on the following areas:

1. Socio-economic support to migrant and vulnerable families
2. Supporting in procurement and supply of Personal Protective Equipment (PPE) kits to member hospitals of CHAI for safety of the frontline healthcare workers providing both covid-19 as well as non-covid-19 services.
3. Training to various cadres of healthcare providers on provision of covid-19 services.
4. Information and knowledge sharing among Member Institutes of CHAI; and also other healthcare facilities in mitigating the crises created due to outbreak of covid-19.
5. Facilitating collaboration of MIs with Government for provision of covid-19 services.

Socio-economic Support

The national lockdown imposed by Government to control the spread of corona virus caused tremendous suffering, particularly among people from low economic background mainly migrant workers and daily wage labourers. With no source of income and accommodation lakhs of people across the country faced severe challenges for basic survival.

In order to provide immediate relief to these people, relief kits comprising of dry ration and hygiene material including soaps and masks to protect from transmission of corona virus were provided. Apart from this, people were also reached with awareness on prevention practices.

In order to ensure that the most affected families are served, a systematic and transparent process was followed comprising of the following major steps:

- **Expression of Interest (EoI):** CHAI called for an EoI from Member Institutions and existing...
partners to be able to support these families across states.

- **Selection:** 26 implementing partners were selected from 67 applications. For the Lilliane Foundation project 30 implementing partners were selected from 57 partner organisations using selection criteria.
- **Orientation:** The selected implementing partners were oriented on the project through Zoom meetings. This covered selection of vulnerable families, financial procedures, documentation & reporting through geo-tagging.
- **Vendor Selection:** Each implementing partner was required to obtain three quotes from local vendors to supply the food kits. The Procurement Committee selected the most appropriate vendors and money was transferred directly to the vendors.

In order to ensure integrity, CHAI has introduced new geo-tagging software to monitor and report on the impact of funds received. The software pushes reporting to another level by providing real time data on the status of projects across the nation.

Relief kits were provided to 3,250 vulnerable families in 17 states of the country through 56 implementing partners. In most of these places, CHAI will continue to support these families over the next 6 months.

**Personal Protective Equipment (PPE) Kits Support**

With the number of positive cases and resulting deaths rising in India every day, a lot more people are in need of support and care. In addition, building resilience of the care givers is crucial to sustain the battle. To address this situation, CHAI had conducted a rapid survey among the hospitals within the network, in order to figure out the capacity to provide care to patients, and the materials required for the same.

To ensure the safety of the healthcare providers including doctors, nurses and other support staff working in the MIs, PPE kits were being provided to 49 hospitals for three to six months. Vast majority of these hospitals were involved in providing services for covid-19. The PPE kits
Training for Healthcare Providers

CHAI Academy and Medical Learning Hub (MLH)

Given the need to practice preventive measures of social distancing and lockdown associated travel restrictions; and the need to acquire knowledge and skills to manage the healthcare facilities and for patient management training is being provided to various cadres of healthcare providers on covid-19 through online courses.

Separate courses for doctors, nurses and allied healthcare workers, community workers and administrators/directors are offered. These were self-paced courses that could be done at convenience and were divided into chapters and various units. Certificates are issued to the participant on the successful completion of the course. The online courses are drawn from the materials from WHO, MoHFW and various universities. Below are the durations of each course:

1. Hospital Directors, Administrators and management team (7 Hrs)
2. Nurses and allied healthcare providers (6 Hrs)
3. Doctors (8 Hrs)
4. Community health providers (6 Hrs)

Online Course by University of Melbourne: “Communicating: COVID 19”

CHAI in partnership with the University of Melbourne facilitated the roll-out of online course for sister doctors, titled “Communicating: COVID 19”. This course is designed to help clinicians communicate with patients, caretakers and the community effectively regarding the COVID pandemic. 52 sister-doctors have enrolled for the course.
Covid-19 Preparedness

CMC-Vellore in collaboration with Tata Trusts has created two online courses for Covid-19 preparedness. These two courses helped to build technical knowledge and skills of various cadres of healthcare workers including doctors, nurses and technicians. The courses are in online format, are self-paced and tailor made for healthcare workers to work in various types of covid-19 facilities including CCC, DCHC and DCH. The courses are in two categories:

1. Covid-19 Integrated Short Course
2. Covid-19 Advanced Course in Critical Care

CHAI in partnership with Sister Doctors Forum of India [SDFI], Tata Trust and CMC Vellore is facilitating the enrolment of healthcare providers from its MIs into these two courses.

Crises Mitigation

After the initial few webinars on how to prepare the hospitals for the COVID crisis, CHAI organized a series of webinars on long-term sustainability, mostly for those who are in healthcare leadership of the network. Eminent speakers from within and outside the CHAI network spoke on a range of topics in order to sensitize the leadership on innovation, sustainability and optimization, especially in the midst of the COVID crisis. A summary of the webinars launched thus far include:

• Webinar 1: Preparing your Hospital for COVID 19: Basic Steps
• Webinar 2: Preparing your Hospital for COVID 19: Basic Steps – Part 2
• Webinar 3: How to work with local governments
• Webinar 4: Financial sustainability of CHAI hospitals
• Webinar 5: Tele-Health solutions
• Webinar 6: Smart Procurement
• Webinar 7: Leveraging Data
• Webinar 8: Covid – 19 Preparedness
• Webinar 9: Theology and the Pandemic of COVID-19

Collaboration with Government

Collaboration with Government at state and district levels was facilitated with MIs for provision of covid-19 services. Most of the MIs have entered into a MoU and are involved in providing various services including screening, fever clinics, quarantine/isolation, and treatment of mild and moderate cases and referral of critical cases to designated tertiary care facilities.

Summary

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Type of Support</th>
<th>Hospitals/Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Socio-economic support through relief kits comprising of dry ration and hygiene material</td>
<td>3,250 families</td>
</tr>
<tr>
<td>2</td>
<td>PPE kits</td>
<td>50 hospitals</td>
</tr>
<tr>
<td>3</td>
<td>Trainings</td>
<td></td>
</tr>
<tr>
<td>3.1</td>
<td>Online courses through Medical Learning Hub</td>
<td>1,462 healthcare providers [doctors, hospital administrators, nurses and allied health workers]</td>
</tr>
<tr>
<td>3.2</td>
<td>University of Melbourne</td>
<td>52 sister-doctors</td>
</tr>
<tr>
<td>4</td>
<td>Webinars [5 webinars]</td>
<td>790 participants</td>
</tr>
<tr>
<td>5</td>
<td>Member Institutes providing covid-19 services</td>
<td>72 MIs</td>
</tr>
</tbody>
</table>
### Project 1

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Enhancing Collaborations with Government and Scale up Services of Community Health Interventions in 6 RUs of CHAI from 2017-2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Misereor</td>
</tr>
<tr>
<td><strong>Duration</strong> [start and end dates of the project]</td>
<td>October 2017 to September 2020</td>
</tr>
<tr>
<td><strong>Operational Area</strong> [states of implementation]</td>
<td>6 Regional Units of CHAI: RUPCHA, CHAAP, CHAMP, CHAT, OCHA and WBCHA</td>
</tr>
<tr>
<td><strong>Target Group</strong></td>
<td>Marginalized population particularly women, adolescents and children in the operational areas.</td>
</tr>
<tr>
<td><strong>Partners</strong></td>
<td>30 Member Institutions (MIs)</td>
</tr>
<tr>
<td><strong>Objectives</strong></td>
<td>• To establish linkages with Government departments and CHAI MIs to implement government programmes/schemes.</td>
</tr>
<tr>
<td></td>
<td>• To empower the communities in safeguard their health through health and developmental activities in 150 villages through 30 MIs in 6 RUs.</td>
</tr>
</tbody>
</table>
Project Brief

The programme works towards strengthening the Member Institutions by facilitating the collaboration with government, NGOs, Corporate Social Responsibility (CSR) components of companies and other partnerships. In addition to this community health interventions were implemented in the select villages to increase the accessibility of health services by improving the health seeking behaviour through health education and awareness among the communities.

Accomplishments

- 55,211 people were reached with messages on maternal and child health, sanitation, communicable and non-communicable diseases, social issues, etc.
- 3,909 pregnant women were followed up by Community Health Volunteers (CHVs) and out of them 1,752 underwent institutional deliveries.
- 19,403 immunization sessions were supported by CHVs in their operational areas.
- 20,497 people were referred for various diagnostic tests (HIV, TB, Malaria, Filariasis, Diabetes and Hypertension) and out them 4,637 were found positive and referred for further treatment.
- 2,039 people were linked to social security schemes and 908 were linked to income generation programmes.

Project 2

Project Title “Axshya” - Ensuring universal access to TB prevention and care services for all

Funding Agency

The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) and The International Union Against Tuberculosis and Lung Disease (The Union)

Duration

January 2018 – March 2021 (New Grant)
Operational Area | 32 districts covering 4 states – Madhya Pradesh, Uttar Pradesh, Maharashtra and Jharkhand
---|---
Target Group | Key Affected Population (High Risk Group)
Partners | Direct Implementation – (39 NGO, 272 NGO Community Volunteers, 641 Independent Community Volunteers)
Objectives | To enhance access to quality TB-curative and preventive services through community participation and engagement of all healthcare-providers with specific focus on `marginalized and vulnerable populations.
Project brief | Project “Axshya” aims to promote Active Case-Finding (ACF) efforts across 4 states and 32 districts of India. Project will provide technical assistance in developing the capacity of states and districts in undertaking active case-finding interventions among the Key Affected Population and linking them with quality-assured TB services.
Accomplishments | • 26,94,803 people were reached with awareness on TB through various activities.  
  • 1,10,488 potential TB cases were identified through various activities and were referred for TB testing.  
  • 1,08,305 cases were tested for TB  
  • 16,730 cases were diagnosed with TB  
  • 14,374 TB cases were initiated on Directly Observed Treatment Short course (DOTs).  
  • 3,268 TB patients were sensitized on Patient Charter-Rights and Responsibilities.  
  • 913 community volunteers were timely reviewed through 121 review meetings to improve their skills in proper case notifications.

Project 3

**Project Title** | “Swalambhan”- Empowering Children Affected/Infected By HIV/AIDS (CABA) through Formation, Linkages and Sponsorship services in India
---|---
**Funding Agency** | Misereor
**Duration** | April 2018 - March 2021
**Operational Area** | Andhra Pradesh, Bihar, Jharkhand, Karnataka, Madhya Pradesh, Tamil Nadu and Telangana
**Target Groups** | Children Infected and Affected by HIV/AIDS (CABA)
**Partners** | 10 Member Institutions (MIs)
**Objectives** | • 1043 children from 10 target areas receive holistic medical and social support as well as have access to rights and government entitlements (including health insurance schemes).  
  • By the end of the funding period, a local sponsorship system will be established comprising approximately 500 sponsors.  
  • 355 CABA are capacitated in essential life-skills and have better prospects for their future.
**Project brief** | The programme aims at enhancing the quality of life of children by linking them to medical and social support services including ART medicines, mobilizing resources to sustainable support the growth of these children and empower them with accurate information, knowledge, psychological and psycho-social support.
Currently, the programme serves 1,487 children who are either infected with HIV/AIDS or affected by it. From among the total of 1,487 children, 60% of them (888 children) are HIV infected and 40% (599) are affected by HIV. The programme, through partnership of 10 MIs of CHAI is offering services to children both institution-based and home-based care. From among the total of 1,487 children, 361 of them are availing institution-based care and 1,126 are availing home-based care.
The following accomplishments have been segregated as per the objectives:

**Linkages:**
- Around 400 HIV infected children who were enrolled into the programme this year were linked to Antiretroviral Treatment (ART) Centres.
- 438 HIV infected children were linked with Social Security Schemes including ART pension, double ration and free bus pass for travel.
- 342 children including both HIV/AIDS infected and affected were enrolled in schools for primary and higher education.

**Sponsorship:**
- Overall Rs. 3,80,206 cash donations were mobilized which are used to support the children.
- 328 sponsors provided cash or in-kind support to the children
- 443 children under institution-based care received accommodation, nutrition and holistic care.

**Empowerment:**
- 204 children were given vocational training on various trades (shoemaking, tailoring, computer, mushroom cultivation, candles making, washing powder-making, bag-making, wall-painting and Karate) for fostering entrepreneurship.
- All the children in institution-based care were provided with Life Skills education with the help of modules.
Project 4

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Health Rise</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Medtronic Foundation and Mamta Health Institute for Mother and Child</td>
</tr>
<tr>
<td>Duration</td>
<td>July 2019 – July 2020</td>
</tr>
<tr>
<td>Operational Area</td>
<td>Udaipur district, Rajasthan</td>
</tr>
<tr>
<td>Target Groups</td>
<td>Patients with Blood Pressure &amp; Diabetes Mellitus; and Frontline Health Workers</td>
</tr>
<tr>
<td>Partners</td>
<td>Mamta Health Institute for Mother and Child, Constellation, Ramaiah International Centre for Public Health Innovations (RICPHI) and District Health Department, Udaipur</td>
</tr>
</tbody>
</table>
| Objectives      | • To demonstrate effectiveness of SALT-CLCP approach in capacitating FLHWs for enhanced community engagement in NCD management.  
• To demonstrate effectiveness of SALT-CLCP approach in empowering patients i.e. showcasing improved self-care practices and improved treatment adherence. |
| Project Brief   | Health Rise Project promotes SALT-CLCP approach: 'SALT' (S-stimulate, A-appreciate, L-listen, learn, T-Transfer) and CLCP (Community Life Competence Process) in five villages in Udaipur to improve adherence to medication and maintenance of healthy life style for control of diabetes and hypertension. |
## Accomplishments
- 318 patients with diabetes and hypertension were followed up three times during the project period to assess the control of blood glucose and blood pressure.
- A district advisory meeting with officials from state and district health department and project partners was organized.
- Trainings for ORWs and FLWs on the SALT-CLCP approach were organized.
- The ORWs were facilitated to practice the SALT-CLCP approach among the beneficiaries.
- Patient Support Group (PSG) meetings were organized by ORWs to discuss the need for adherence to medicine and lifestyle modification to control diabetes and hypertension.

## Project 5

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Enhancing Access to Holistic Palliative Care and End-of-Life Care, especially in Resource Limited Settings, Incorporating Principles of Primary Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>MISEREOR</td>
</tr>
<tr>
<td>Duration</td>
<td>January 2019 – December 2021</td>
</tr>
<tr>
<td>Operational Area</td>
<td>Telangana, Chhattisgarh, Tamil Nadu, Maharashtra, Jharkhand, Andhra Pradesh, Punjab, Rajasthan &amp; Karnataka</td>
</tr>
</tbody>
</table>
| Target Groups | • Marginalized palliative care patients and their families  
• Healthcare providers: Sister-Doctors, sister-nurses, counsellors and volunteers working for palliative care patients |
| Partners | 6 Member Institutes |
| Objectives | • To provide institutional and home based holistic palliative care for 4000 patients in three years  
• Capacity building in pain management and psycho-spiritual care for 4000 family care givers and 34 professionals care givers in three years  
• Mobilizing additional resources of 10% of the total budget in three years, for the cause of palliative care.  
• Quality assurance through digitalised data management and regular field validations. |
| Project Brief | The programme focuses not only on the medical model of pain and symptom management but also looks at the patient in a holistic manner with emphasis on compassionate psycho-spiritual and natural care. The approach is to provide dignity to the end of life and to provide a peaceful joyful transition without causing a dire financial or psychological impact on the patient or caregivers.  
Apart from providing inpatient and home-based palliative care services, community awareness is an important aspect of the programme where all community members are made aware of palliative care diseases, its management and referral. |
| Accomplishments | • 1,018 patients were provided with inpatient services  
• 1,672 patients were provided with home-based care services  
• 29,328 people were sensitized about palliative care through 322 awareness programmes |

## Project 6

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Capacity Building and Formation of Healthcare Providers for Holistic Palliative Care through CHAI Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Italian Bishops Conference (IBC)</td>
</tr>
<tr>
<td>Duration</td>
<td>March 2019 – February 2021</td>
</tr>
<tr>
<td>Operational Areas</td>
<td>Andhra Pradesh, Telangana, Tamil Nadu, Karnataka, Gujarat, West Bengal, Uttar Pradesh, Jharkhand, Assam, Maharashtra and Kerala</td>
</tr>
</tbody>
</table>
Target Groups
- Marginalized palliative care patients and their families
- Healthcare providers: Sister-Doctors, sister-nurses, counsellors and volunteers working for palliative care patients

Partners
20 Member Institutes

Objectives
- Set up 20 Holistic Palliative Care Units (HPCUs), with 5 to 7 bed capacity, utilizing a portion of the existing hospitals/health centers in interior areas.
- Capacity build and provide formation to sister doctors/nurses/social workers and their lay collaborators of parish communities in palliative care with a ‘whole person’ approach.
- Undertake measures to build a national network of palliative care initiatives being run by Catholic Institutions.

Project Brief
The programmes works towards capacity building of healthcare providers on palliative care. Alongside, the programme provides palliative care services to marginalized families through 20 MIs. The services include both in-patient and home-based care.

Accomplishments
- 657 individuals were provided with in-patient services
- 1,362 patients were provided with home-based care

Project 7

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Disability Inclusive Eye Health Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Christopher Blindness Mission (CBM)</td>
</tr>
<tr>
<td>Duration</td>
<td>January – December 2020</td>
</tr>
<tr>
<td>Operational Areas</td>
<td>Bihar, Madhya Pradesh and Uttar Pradesh</td>
</tr>
<tr>
<td>Target Group</td>
<td>Poor patients with eye problems</td>
</tr>
<tr>
<td>Partners</td>
<td>4 Member Institutions</td>
</tr>
</tbody>
</table>
### Project 8

<table>
<thead>
<tr>
<th>Project Title</th>
<th>“Digital Reach” for Community Based Rehabilitation (CBR) Workers to improve health care services among children with Disabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Liliane Foundation</td>
</tr>
<tr>
<td>Duration</td>
<td>January 2018 – December 2020</td>
</tr>
<tr>
<td>Operational Area</td>
<td>Telangana, Andhra Pradesh, Maharashtra, Karnataka, Kerala, Tamil Nadu and Gujarat</td>
</tr>
<tr>
<td>Target Group</td>
<td>400 children with disabilities</td>
</tr>
<tr>
<td>Partners</td>
<td>20 Partner Organizations</td>
</tr>
<tr>
<td>Objectives</td>
<td>Children with disabilities are having independent functionality with support of therapeutic services.</td>
</tr>
<tr>
<td>Project Brief</td>
<td>The project works through using digital platform to provide home based services to 400 children with disabilities in the community. This is realized through online skills building sessions of 40 CBR workers.</td>
</tr>
</tbody>
</table>
| Accomplishments | • 10 children underwent corrective surgeries after assessment.  
    • 41 children received correct Aids and Appliances  
    • CBR workers are transferring functional rehabilitation skills to parents and developing adaptive devices with locally available resources.  
    • Field based videos are uploaded on “CHAI Digital Reach” YouTube channel, so that CBR workers can use it as reference for functional rehabilitation and for making adaptive devices by using local resources. |
### Project 9

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Relief and Rehabilitation of the Persons with Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Liliane Foundation</td>
</tr>
<tr>
<td>Duration</td>
<td>January to December, 2020</td>
</tr>
<tr>
<td>Operational Areas</td>
<td>8 States of India (Telangana, Andhra Pradesh, Gujarat, Karnataka, Kerala, Maharashtra, Orissa and Tamil Nadu)</td>
</tr>
<tr>
<td>Target Groups</td>
<td>Children and youngsters with disabilities, below the age of 25 years</td>
</tr>
<tr>
<td>Partners</td>
<td>MIS: 26, NGOs: 7, Social Service Societies by Religious Congregations &amp; Dioceses: 25</td>
</tr>
</tbody>
</table>
| Objectives    | • To provide support to Children/Youth with Disabilities (C/YwDs) through inclusive disability support for education, health, livelihood and participation  
• To provide support to partner organizations to acquire transportation and communication facilities to benefit C/YwDs |
| Project Brief | The programme provides holistic rehabilitation in health, education, livelihood and social inclusion towards improving their quality of life of Children/Youth with Disabilities aged up to 25 years, belonging to marginalized families. |
| Accomplishments | • Overall, 6,870 children and youth with disabilities reached in the year  
• 4,669 children and youth with disabilities were assisted through health-care support  
• 3,934 children and youth with disabilities were assisted through education support  
• 1,029 families having children and youth with disabilities were assisted through livelihood opportunities  
• 6,885 children and youth with disabilities supported for social inclusion |

### Project 10

<table>
<thead>
<tr>
<th>Project Title</th>
<th>MIVA Block Grant (for transport and means of communication)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Liliane Foundation /MIVA</td>
</tr>
<tr>
<td>Duration</td>
<td>April – December, 2019</td>
</tr>
<tr>
<td>Operational Area</td>
<td>Andhra Pradesh, Kerala, Maharashtra, Tamil Nadu and Telangana</td>
</tr>
<tr>
<td>Target Groups</td>
<td>Organizations working for disability specific and disability inclusive programme in the communities</td>
</tr>
<tr>
<td>Partners</td>
<td>Total 7 partner organisations received transport or communication support</td>
</tr>
<tr>
<td>Objectives</td>
<td>To facilitate an inclusive society through usage of transport and communication means aiming to enhance the services in rehabilitation of the persons with disabilities.</td>
</tr>
<tr>
<td>Project Brief</td>
<td>MIVA is financing transport and communication means to pioneers who work in the local community-based organisation which had an aim to help marginalized and disadvantaged people in resource poor communities.</td>
</tr>
</tbody>
</table>
| Accomplishments | • Vehicles were used during Covid-19 pandemic in transporting patients.  
• Vehicles were used in creating awareness in the community about people with disabilities  
• The vehicles had helped in improving the quality of services through reach and frequent monitoring visits  
• Mobility of children with disabilities had improved through regular transportation of children to the rehabilitation centre |
## Project 11

<table>
<thead>
<tr>
<th><strong>Project Title</strong></th>
<th>Liliane Foundation Inclusion Network (LINC-Asia Network)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Funding Agency</strong></td>
<td>Liliane Foundation</td>
</tr>
<tr>
<td><strong>Duration</strong></td>
<td>January to December, 2020</td>
</tr>
<tr>
<td><strong>Operational Areas</strong></td>
<td>India, Bangladesh, Indonesia, Philippines and Vietnam</td>
</tr>
<tr>
<td><strong>Target Groups</strong></td>
<td>Children and Youngsters with Disabilities</td>
</tr>
<tr>
<td><strong>Partners</strong></td>
<td>1. Catholic Health Association of India (CHAI), India</td>
</tr>
<tr>
<td></td>
<td>2. Disabled Rehabilitation and Research Association (DRRA), Bangladesh</td>
</tr>
<tr>
<td></td>
<td>3. Jan Vikas Samiti (JVS), India</td>
</tr>
<tr>
<td></td>
<td>4. NLR Indonesia</td>
</tr>
<tr>
<td></td>
<td>5. Rehabilitation Centre for Inclusion, Vietnam</td>
</tr>
<tr>
<td></td>
<td>6. NORFIL Foundation, Philippines</td>
</tr>
<tr>
<td><strong>Objectives</strong></td>
<td>• Building a strong network</td>
</tr>
<tr>
<td></td>
<td>• Mobilizing expertise of LINC Asia members for advocacy and awareness raising at National, Asian and International levels</td>
</tr>
<tr>
<td></td>
<td>• Building capacity of the network by utilizing expertise, skills, experience of members</td>
</tr>
<tr>
<td><strong>Project Brief</strong></td>
<td>LINC-Asia is a network of disability-oriented organizations supported by LF that intends to pool resources and expertise in order to become stronger in addressing exclusion of children with disabilities and their families in the society. It aspires to build an inclusive society where children, youngsters and adolescents with disabilities can enjoy their rights in a dignified manner and in equal conditions.</td>
</tr>
</tbody>
</table>
### Project 12

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Engage Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Core Group Members of Engage Disability</td>
</tr>
<tr>
<td>Duration</td>
<td>January to December, 2020</td>
</tr>
<tr>
<td>Operational Area</td>
<td>India</td>
</tr>
<tr>
<td>Target Groups</td>
<td>People with disabilities and their families</td>
</tr>
<tr>
<td>Partners</td>
<td>Churches of all denominations</td>
</tr>
</tbody>
</table>
| Objectives    | • To create a Christian network at a local and national level  
• To equip the Christian community to evolve in their accompaniment of people with disabilities and their families  
• To be the Christian voice on disability in dialogue and consultations with the government, health sector, NGO community, theological institutions and the general public. |
| Project Brief | Engage Disability is a movement to strengthen the Christian response to disability in India. It is a coalition of societies, different denominations of churches and individuals working together towards being and growing a Church that is inclusive of people with disabilities.  
The Engage Disability movement was catalysed through a national conference held in 2014, which was an historic event for disability in India, creating powerful dialogue and unity across several sectors. |

#### Accomplishments

CHAI as the Secretariat of Engage Disability has successfully implemented the below activities;  
• Organized one face to face meeting of Core Group Members in Mumbai (October 2019).  
• Developed annual plan for 2019-2020  
• Secretariat hosted a Regional Conference in Mumbai.
Project 13

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Revisit, Rediscover &amp; Reposition Healthcare Ministry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Conrad N. Hilton Foundation and Hilton Fund for Sisters</td>
</tr>
<tr>
<td>Duration</td>
<td>August 2019 – July 2022</td>
</tr>
<tr>
<td>Operational Area</td>
<td>Nation-wide intervention</td>
</tr>
<tr>
<td>Target Groups</td>
<td>Catholic Sisters working in the Health Care Ministry</td>
</tr>
<tr>
<td>Partners</td>
<td>Intent Health, Tech Care for All (TC4A), Misereor and Sister Doctors Forum of India (SDFI)</td>
</tr>
</tbody>
</table>
| Objectives                    | • To build the capacity of Sisters and thereby sustain and strengthen the congregations  
                                 • Scaling-up of Human Development Healthcare Services through Catholic Sisters  
                                 • Collaboration across congregations and other stakeholders to improve health practices and visibility |
| Project Brief                  | The project aims to build the capacities of sisters, strengthen the healthcare facilities, assist sisters in delivery of human development services and improve their visibility. For the purpose of capacity building, the sisters are provided training in leadership and to work as Community Health Enablers. As part of these trainings, sisters working at various levels such as administration, community outreach are trained to further build their knowledge and skills.  
                                 In order to strengthen the health care institutions multiple initiatives are being implemented and include CHAI Academy, Common Procurement Portal (Medigate), Helpdesk and Doctors for India. Besides, training of sisters and network strengthening initiatives, sisters are assisted in providing human development services. |
| Accomplishments               | • Meeting of the National Steering Committee comprising of representatives from 45 congregations was organized  
                                 • 46 sisters (30 sister-doctors and 16 sister-nurses and administrators) were trained in hospital administration and leadership  
                                 • 29 sister-nurses and social workers were trained as Community Health Enablers through a six-weeks training.  
                                 • Network initiatives: Common Procurement Portal (Medigate), CHAI Academy, Doctors for India and Helpdesk are functional and MIs of CHAI are making use of these initiatives.  
                                 • 9,000 people were reached by sisters through Community Health Interventions. |
Project 14

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Installation and Usage of Solar Energy Systems in CHAI’s Member Institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>Misereor</td>
</tr>
<tr>
<td>Duration</td>
<td>September 2019 – March 2021</td>
</tr>
<tr>
<td>Operational Area</td>
<td>Telangana, Andhra Pradesh, Madhya Pradesh, Chhattisgarh, Jharkhand, Bihar</td>
</tr>
<tr>
<td>Target Groups</td>
<td>34 Member Institutions i.e., located especially in rural, remote and tribal areas.</td>
</tr>
</tbody>
</table>
| Objectives    | • An uninterrupted electricity supply from renewable sources is in place for 34 health institutions.  
                • The 34 health institutions have developed into ecological model institutions promoting the sustainable use of renewable energies. |
| Project Brief | The project aims to make provision for adequate power to tide over frequent power disruptions and maintain uninterrupted supply while reducing dependence on conventional energy which in turn reduces the emission of poisonous gases from the use of generators. |
| Accomplishments | The solar equipment is currently installed at 6 MIs. |
### Project 15

<table>
<thead>
<tr>
<th>Project Title</th>
<th>Innovation &amp; Learning Centre for Comprehensive Primary Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Agency</td>
<td>National Health Systems Resource Centre (NHSRC)</td>
</tr>
<tr>
<td>Duration</td>
<td>February 2019 – April 2020</td>
</tr>
<tr>
<td>Operational Area</td>
<td>Mahbubnagar district, Telangana</td>
</tr>
<tr>
<td>Target Groups</td>
<td>Mid-level Health Promoters and Frontline Health Workers</td>
</tr>
<tr>
<td>Partners</td>
<td>National Health Mission-Telangana, NHSRC, District Health Department (Office of District Medical and Health Services), Mahbubnagar district</td>
</tr>
</tbody>
</table>
| Objectives                 | • To support the state in rolling out the key elements of Health & Wellness Centre.  
                            | • To promote community awareness and health promotion to ensure continuum of care.  
                            | • To support state in generating evidence of good practices and acting as a learning laboratory |
| Project Brief              | As an Innovation and Learning Centre (ILC), the major responsibility of CHAI is to assist in roll-out of Health & Wellness Centres (HWCs). As part of Ayushman Bharat, the existing Sub-Centres were upgraded into HWCs which would provide services for non-communicable diseases including diabetes, hypertension and cancer. The ILC assisted the Government in trainings, organizing community awareness activities, streamlining reporting and division of duties between the MLHPs and FLWs. |
| Accomplishments            | • Base-line study focused on infrastructure, training needs, availability of medicines, equipment and diagnostic services was conducted.  
                            | • Data collection by ASHAs on incidence of non-communicable diseases was facilitated.  
                            | • School health activities were coordinated by training teachers of Government schools for health promotion among children  
                            | • Participation of MLHPs was facilitated during Village Health & Nutrition Days and other Sub-centre and PHC level activities. |
National Health Convention & 76th Annual General Body Meeting

"Health Care at the Margins - Innovation for Quality Care"

The two-day National Health Convention (NHC) and 76th Annual General Body Meeting (AGBM) was held on 17th & 18th October 2019 at Holy Family Hospital, Okhla Road, Delhi. The programme started with the Holy Mass presided by Most Rev. Anil Joseph Thomas Couto, Archbishop of Delhi and concelebrated by Most Rev. Prakash Mallavarappu, the Archbishop of Visakhapatnam & Ecclesiastical Advisor of CHAI; along with more than 20 priests who participated in the NHC. After the Holy Mass, the delegates gathered outside the hall, and in their presence, Most Rev Prakash Mallavarappu hoisted the CHAI flag while the delegates sang the CHAI Anthem.

HEALTHCARE AT THE MARGINS – INNOVATION FOR QUALITY CARE

The theme for the NHC was “Healthcare at the Margins - Innovation for Quality Care” and several crucial network initiatives were set in motion during the NHC. The conference featured the roll out of Vision 2030, a ten-year transformation plan for CHAI to provide affordable, compassionate and quality care at the margins. Digital innovations to improve the quality of healthcare were also rolled out. These included a Common Procurement
Portal for the network and the CHAI Academy, an e-learning hub to facilitate online capacity building in healthcare. The event was attended by about 200 participants including 160 hospital directors and administrators from all over India.

**INAUGURAL FUNCTION**

Sr Victoria Narichitti, JMJ, President of CHAI and Principal, St Joseph College of Nursing, Guntur, welcomed the dignitaries and delegates and appreciated the yeoman service of CHAI in healthcare, especially for the poor.

After welcoming the participants, the dignitaries were invited on stage to light the ceremonial lamp.

**Highlights and Releases**

Most Rev Anil Joseph Thomas Couto, Archbishop of Delhi released the CHAI Annual Report 2019 in the presence of the delegates and dignitaries. He appreciated the efforts and activities of all the Member Institutions and the central office in the health care scenario.

Messages of commendation and solidarity were given by Dr William Bhatti, Director, Christian Medical College, Ludhiana, and Dr. Priya John, General Secretary, Christian Medical Association of India (CMAI). Fr. P A George, Director, Holy Family Hospital, Delhi provided the venue and was instrumental in making the event a success. He released the Herbal Calendar 2020 and welcomed and gave his good wishes to all the delegates. The CHAI Visual Identity was released by Mr. Girish Rao, Chair, FICCI; after which Fr George Kannanthanam,
Secretary, CHAI, presented the upcoming highlights of the NHC. With this, the inaugural function was concluded with a vote of thanks by Sr. Lizzy Abraham, President, RUPCHA, the host region whose team did a lot of work towards preparation of the event.

**CHAI VISION 2030**

Vision 2030, a ten-year transformation vision and plan for the CHAI network was released by Archbishop Prakash Mallavarapu, Ecclesiastical Advisor, CHAI, who said that a long-term vision plan would help the organization to focus on its priorities.

This was followed by a presentation on Vision 2030 by Rev Dr Mathew Abraham, Director General, CHAI who shared that this was the result of a long term planning with various stakeholders; and was done with technical assistance from Tech Care for All (TC4A), a global tech company based in Paris. The vision document has a ten-year transformation program for CHAI to provide compassionate and quality care while keeping it affordable for the nation.

A spot online survey was conducted to take feedback from the participants on Vision 2030. This was also an opportunity to familiarize the participants with the usage of the online survey tool.

**TECHNOLOGY INNOVATIONS**

Mr Sachin Malhotra, CEO, TC4A, India, and Ms Hima Kher, Chief Technical Officer, TC4A, presented on the importance of technology for...
the CHAI network, concepts such as Telemedicine and the online club.

Dr Piet Reijer, Public Health Consultant, Medical Mission Institute, gave the concluding remarks on technology innovations highlighting that while technology is a very valuable tool, it should be used with necessary caution.

**COMMON PROCUREMENT PORTAL**

Mr John Santhosh, Director, Billion Lives and Mr Rajkumar Pentapalli, AVP-Provider Partnerships, Vidal Health demonstrated the use of Medigate, the Common Procurement Portal which facilitates ease of medical and surgical procurement through a digital platform and promotes collective savings for the institutions. They shared the results of the pilot and the benefits already being received by Member Institutions who are using the platform. A spot online survey was conducted to get immediate feedback and comments from the participants.

Rev Fr Thomas Vaikathuparampil, Vice President, CHAI gave the concluding remarks for the session saying that collaborating on common initiatives like the portal would be beneficial to the whole network.

**MESSAGE**

Shri Alphonse Kannanthanam, Member of Parliament and Former Union Minister of State for Culture and Tourism was the guest of honour for the event. He called for a proactive role in collaborating with the Government and filling up the gaps in the implementation of various government
projects which are beneficial to the poorer sections of the society.

He said that “Christian health care institutions have played a major role in alleviating the suffering of the people in the margins.” He praised CHAI for being the largest not for profit healthcare network in India with more than 3500 Member Institutions ranging from primary health care canters to medical colleges.

CHAI ACADEMY

Ms Rosemary Thomas, Consultant, CHAI, presented about the importance of capacity building for the network and the areas in which immediate attention is required. This was followed by a demo on the CHAI academy by Mr Sachin, CEO, TC4A, India.

Sr Sarla Macwan, FC, President, Catholic Nurses Guild of India (CNGI) gave the concluding remarks on CHAI Academy, saying that an e-learning hub would be extremely helpful for all member institutions.

GOVERNMENT POLICIES & SCHEMES

This was followed by a presentation by Ms Anuvinda Varkey, Executive Director, Christian Coalition for Health in India (CCHI), on healthcare policies and initiatives and how the network can collaborate with the government. The discussion was continued on the next day in a panel discussion with eminent panellists including Mr. Varun Jhaveri from Ayushman Bharat, Dr. Rashmikanth Dave from National Board of Examinations, Mr. Ashish Jain from Healthcare Sector Skills Council, Dr. Sunil Abraham and Dr. Jachin Velavan from CMC Vellore.

Fr Joe Mannath SDB, Secretary, Conference of Religious India (CRI) gave the concluding remarks and Sr. Denin, Director, CHAAP, summarized the panel discussion and thanked all the panellists for their valuable inputs.

CULTURAL EVENT

Students from St. Francis College of Nursing, Ajmer and Holy Family Hospital, Delhi entertained the guests with their beautiful performances which the participants enjoyed and appreciated. The young performers were felicitated by Fr. James Raj, II Vice President of CHAI, and he distributed gifts to all of them.

DAY 2

The second day started with the Holy Mass presided by
Rev Dr Sebastian, Director, RUPCHA, concelebrated by the priests who were participating in the NHC.

Dr. Ermanno Pavesi, representing the World Federation of Catholic Medical Associations (FIAMC), shared regards from FIAMC Office Bearers and gave his good wishes to all the participants of the NHC.

QUALITY & ACCREDITATION

Ms. Rosemary shared the results of the survey conducted in the network regarding NABH accreditation. Then there was a presentation on quality beyond accreditation by Fr. Johnson Vazhappilly, CMI, Executive Director, Rajagiri Hospital followed by a panel discussion among NABH accredited hospitals within the network moderated by Sr Dr. Beena MD, UMI, President, SDFI. The panel included Sr. Dr. Roslin Jayarani FSJ; Associate Director, St. Thomas Hospital; Sr. Lilly Mathew SABS, Administrator, Josgiri Hospital; Sr. Elizabeth Rani K JMJ, Administrator, St. Philomena’s Hospital; Sr. Grace Poomkudy SH, Administrator, Sacred Heart Hospital; and Fr. Binu Kunnath, Director, Caritas Hospital. They shared their experiences of accreditation and are willing to facilitate and help other hospitals in the network. Fr. Julius Arackal, CMI, Health Secretary, CBCI summarized the session and highlighted again the value and importance of accreditation.

BUSINESS SESSION

The business session started with Sr Victoria Narichitti, President of CHAI, on a brief introduction, and the agenda
was approved by the General Body. The Minutes of the 75th AGBM was read by Fr. George Kannanthanam, Secretary, CHAI, proposed by Sr Cletus Daisy and seconded by Sr Bertillia, the minutes were passed by the General Body.

Fr. Mathew Abraham, Director-General, presented the Annual Report 2019. Sr. Bhavya Scaria, Treasurer, then presented the Audited statements for the financial year 2018-19 and budget for the upcoming financial year 2019-20. After a brief discussion, Sr. Nirmala, CHABIJAN proposed the financial statements and budget to be passed and seconded by Sr. Denin. The General Body approved and passed the same.

Appointment of Auditor
Sr Victoria, the president, on behalf of the Board, suggested to the General Body, to consider Mr Amal Raj the current Auditor, to be appointed as the statutory auditor for the financial year 2019-20. After a brief discussion, the General Body gave consent regarding the appointment.

Endorsement of Vision 2030
As requested by the chair, the Director General shared that the Vision 2030 will have greater value if the General Body endorses it. This was followed by a discussion. Since the Vision document was shared with the participants in advance, and the key points were explained during a session on the first day of the NHC, the General Body endorsed the same.

AGBM Participation
This was followed by a clarification regarding the participation in the AGBM, especially regarding the absence of the smaller centers. It was clarified that the actual and legal component of the AGBM is only the 3-hour Business session towards the end of the NHC. All the 3500 plus member institutions of CHAI have a right to attend the AGBM. However, as per the rules of CHAI, the minimum quorum required for the AGBM to be valid is only 60 members. For the past several years, even though formal notice and information of the AGBM is sent to all the members well in advance, only about 400 members attended the meeting. Usually, the attendees are from a large range of institutions – health centers, care centers, smaller and bigger hospitals.

For various reasons, this year the Board had decided to conduct the NHC for hospitals above 50 beds and topics were chosen accordingly. Therefore, the participants for this NHC were mostly from hospitals above 50 beds, even though the invitation for the business session was sent to all the 3500 members of CHAI. This was followed by a discussion and a proposed solution that evolved was the following: given the complexity of the membership of CHAI, if possible conduct 2-3 NHCs in the coming years, for various categories like hospitals, care centers, health centers, social service societies and so on. This may help the participants to have relevant input sessions, according to their ministry, at least once a year. The AGBM could be clubbed with one of the NHCs, every year. The General Body requested the Board to work on it further.
Any other matter

The details of the NHC expenses was also presented to the General Body. Since the participant fee has been highly subsidized, there is a financial burden on the CHAI Directorate. For the past few years this burden was handled to some extent through sponsorships. However, the sponsorship is coming down every year. There was a brief discussion on this. Since the discussion was inconclusive, the General Body requested the Board to figure out solutions for the same.

PRESENTATIONS FROM REGIONAL UNITS

Presentations from each regional unit were done by displaying videos showing their activities for the year. Following that, the challenges faced by each region were shared by the regional members which include Fr Simon Palupetta, CHAKE; Fr Kiran Olakkengil, CHAMP; Fr Sebastian, RUPCHA; Sr Antonia, WBCHA; Sr Anslem Treasa, CHAT; Fr Santhosh Dias, CHAKA; Sr Sarita, CHAAPT; Sr Marina Abraham, NECHA; SrNirmala, CHABIJ; Sr Teresa Lakra, OCHA; and Sr Lucy, CHAW. Sr Victoria thanked everyone and appreciated all the regional board members for their valuable contribution and effort.

CONCLUDING REMARKS

Sr Victoria Narichitti, President of CHAI, thanked all the members for their presence and active participation in all the sessions. The meeting concluded by saying vote of thanks by Rev Dr Sebastian, Director, RUPCHA and the Pledge & National Anthem by the participants.
Internship Placement

CHAI provides the students with an opportunity to apply their knowledge to practical work and develop skills in development work. The internship is usually a combination of community/rural placements as well as placement in the CHAI head office. The students start their internship with an orientation programme to familiarize themselves with the various programmes and the interventions that CHAI is currently implementing.

National Internships

Students from the following colleges visited CHAI as part of their study tour:
- Students pursuing Master’s in Public Health (MPH) from Indian Institute of Public Health, Hyderabad, Telangana
- Students and faculties from JMJ College of Nursing, Sanathnagar, Hyderabad, Telangana
- Students and faculties from Mercy College, Pallipuram, Palakkad, Kerala

International Internships

Australian Catholic University

Eleven Nursing students and two faculties from Australian Catholic University underwent internship at CHAI to develop understanding on the nursing practices in Indian health care system from 24 January to 8 February 2020. As part of the internship, Observation Visits were organized for the students at the following facilities:
- Pratyasha: Holistic Palliative Care Centre, Medchal run by CHAI
- Primary Health Centre, Mahabubnagar
- Vijay Marie Hospital, Hyderabad
- St Theresa’s Hospital, Hyderabad
- Fernandez Hospital Foundation, Hyderabad
Observational visits to the above facilities gave the students an opportunity to understand the duties, work settings and other differences of nurses working in various types of healthcare facilities.

**University of Melbourne**

Five students pursuing Masters in Music Therapy from the University of Melbourne and a faculty underwent internship at CHAI from 18th November to 13th December, 2019.

Music therapy is the intentional use of music to facilitate the achievement of many different goals. It is built on research that incorporates ideas from psychology, neuroscience, education, sociology, and medicine.

Interns were placed for four weeks at two partner organizations under the guidance of Prof. Dr. Melissa Murphy. They were divided into two batches, one placed in Dilasagram, Ballarshah, Maharashtra, and the other was in Loksamagraha, Ballarshah, Maharashtra, Community Based Rehabilitation (CBR) workers from Society of Sisters of St. John, Wardha and Kisanwadi, Gomini. The remaining days were spent on mentoring the techniques learnt during the training session and guidance to the CBR staff at both community level visits and day care centre visits.
### CAPACITY STATEMENT OF MEMBERSHIP
(As on March 31, 2020)

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<th>NSG</th>
<th>ASM</th>
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|total| 3543 |

### MEMBERSHIP AT A GLANCE

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<tr>
<td>Associate/Individual</td>
<td>316</td>
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<td>TOTAL</td>
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REGIONAL UNITS
OF CHAI

CHAAP - Catholic Health Association of Andhra Pradesh
CHABIJ - Catholic Health Association of Bihar & Jharkhand
CHAKA - Catholic Health Association of Karnataka
CHAKE - Catholic Health Association of Kerala
CHAMP - Catholic Health Association of Madhya Pradesh
CHAT - Catholic Health Association of Tamil Nadu
CHAW - Catholic Health Association of Western Region
NECHA - North-Eastern Community Health Association
OCHA - Odisha Catholic Health Association
RUPCHA - Rajasthan, Uttar Pradesh Catholic Health Association
WBCHA - West Bengal Catholic Health Association
During the year 2019-2020, among the programmes implemented by CHAI Secretariat, some of them were implemented in collaboration with respective regional units and some were implemented directly. However, the Member Institutes were involved as field-level implementing partners of several programmes. This section briefly describes the projects and special events implemented directly by the respective regional units.
CATHOLIC HEALTH ASSOCIATION OF ANDHRA PRADESH & TELANGANA

Projects & Special Events

- As part of Jana Shikshana Sansthan Project, CHAAPT provided training to 80 women in collaboration with Government of Andhra Pradesh. After completing the course, certificate was provided by the Government. This will facilitate them to apply for a loan to start a new tailoring unit under self-employment.
- Training in home nursing was provided to 45 women in collaboration with Life Circle Health Services Private Limited, Hyderabad.
- Financial scholarships were facilitated to three girl students for under graduation studies.
- CHAAPT Office building is being used as Entrepreneurship Development Training Centre for organizing trainings on Entrepreneurship Development to rural youth and SHG women in integrated agriculture and allied sectors.
CHAKA
THE CATHOLIC HEALTH ASSOCIATION OF KARNATAKA

States: Karnataka
Number of MIs: 327
No of Districts Covered: 30
Established in the year 1992

<table>
<thead>
<tr>
<th>Regional Unit</th>
<th>State</th>
<th>Social Service Society</th>
<th>Nursing School/ College</th>
<th>Associate Member</th>
<th>Health Centre Bed Capacity</th>
<th>RU Total</th>
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Projects & Special Events

- As part of the project HIV/AIDS Care and Support Network in rural villages / communities of Karnataka, awareness programmes on HIV/AIDS were organized in 30 villages and 60 MIs were provided with training.
Projects & Special Events

- CHAI Kerala board meetings were held on 24th April 19th June 30th July and 24th August, 2019.
- Certificate programme on infection control was held on 4th and 5th July 2019 at Ernakulam in collaboration with Lisie Hospital and 3M India Ltd. 35 candidates were successfully completed the certificate programme.
- CHAI-Kerala in association with Becton Dickinson (BD) organized Nursing Leaders Excellence Programme for its MIs on 3rd July 2019. 50 Nursing Leaders participated from different hospitals.
- The State Conference of Catholic Nurses Guild of India (CNGI) was held on 31st January to 2nd February 2020 in collaboration with CHAI-Kerala.
- In 2019, 10 MIs were fully accredited by NABH and 30 hospitals were accredited by Entry Level NABH.
- Around 150 representatives from different hospitals attended the seminar on Solar Energy and Nano Solar Energy.
CHAMP
CATHOLIC HEALTH ASSOCIATION OF MADHYA PRADESH & CHHATTISGARH

Projects & Special Events

- 1,540 People Living with HIV/AIDS (PLHIV) were provided with care and support services as part of Vihaan Programme.
- As part of project Samarth: Empowering ASHAs through capacity building of 50 ASHAs from four districts of Madhya Pradesh.
CHAT

CATHOLIC HEALTH ASSOCIATION OF TAMILNADU

States: Tamil Nadu and Pondicherry
Number of MIs: 520
No of Districts Covered: 32
Established in the year 1997

<table>
<thead>
<tr>
<th>Regional Unit</th>
<th>State</th>
<th>Social Service Society</th>
<th>Nursing School/ College</th>
<th>Associate Member</th>
<th>Health Centre Bed Capacity</th>
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Projects & Special Events

As part of Comprehensive Community Health Care project, the program was implemented in Madurai District. The following services were provided:

- 1,431 people had been referred to various health facilities.
- 242 people were linked to socio-economic welfare schemes of Government
- Nutritional support was provided to 748 persons.
- Through various camps, 3,209 people had undergone medical checkup freely. Out of which 1,122 were diagnosed with diabetes, 697 with hypertension, 12 with cancer and 140 with severe anemia.
CHAI

Annual Report

2020

77 Years of Healing & Hope

THE CATHOLIC HEALTH ASSOCIATION OF WESTERN REGION

States: Maharashtra, Gujarat, Goa, Dadra & Nagar Haveli
Number of MIs: 296
No of Districts Covered: 72
Established in the year 2001

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Projects & Special Events

- Four general body meetings were held on 27th April, 16th July 2, 13th Sep and 7th February, 2020 respectively.
NECHA

THE NORTH EASTERN COMMUNITY HEALTH ASSOCIATION

States: Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland and Tripura
Number of MIs: 325
No of Districts Covered: 107
Established in the year 1985

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Projects & Special Events

- As part of the project, Education for Children, NECHA was involved in facilitating education among children in the states of Assam and Meghalaya.
ORISSA CATHOLIC HEALTH ASSOCIATION

Projects & Special Events

As part of the project Community Empowerment for Sustainable Reproductive and Child Health in Sundargarh and Kandhamal districts the following activities were implemented:

- 3,122 pregnant women were facilitated to avail ANC and PNC at Government healthcare facilities.
- 1,500 children were provided with homemade nutrition mix.
- 555 severe acute malnourished children received treatment for various ailments.
- 4,068 youth (2381 girls and 1687 boys) participated in adolescents training programmes.
- School Health Education Programmes were conducted wherein 2,484 children attended.

The following activities were implemented as part of the project, Improved Maternal, Neonatal and Child Health Services for Disadvantaged Community of 450 Villages of Odisha:

- Awareness on ANC and PNC was provided to 2,132 women
- A total of 920 malnourished children were identified and provided with home-made nutrition mix.
- 611 Severe acute malnourished children received treatment for various health ailments.
- 1,120 school children were oriented about various health issues.
CHABIJAN
CATHOLIC HEALTH ASSOCIATION OF
BIHAR, JHARKHAND & ANDAMAN

States: Bihar, Jharkhand and Andaman Nicobar Islands
Number of MIs: 323
No of Districts Covered: 65
Established in the year 1993

<table>
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<tr>
<th>Regional Unit</th>
<th>State</th>
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<th>Nursing School/College</th>
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<th>Health Centre Bed Capacity</th>
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Projects & Special Events

- Infants, children, pregnant women and lactating mothers from 80 villages from the districts of Ranchi, Hazaribagh, Gumla, Jamshedpur, Daltonganj were provided with medical services. Besides this health awareness activities were organized for children in Aganwadi Centre and Primary Schools for women and men during various occasions such as Women’s Day, World Health Day and PRI meetings.

- Trainings for tribal women in 600 villages of 8 districts of Jharkhand were conducted to avail government support in order to reduce maternal and neonatal mortality.

- 2,632 youth from 60 villages across three districts of Jharkhand were sensitized on skill development.

- As part of the project Improving Health Outcomes in Bihar and Jharkhand using sustainable energy, installation of solar equipment was done at 18 health centres.
RUPCHA
RAJASTHAN UTTAR PRADESH
CATHOLIC HEALTH ASSOCIATION

States: Uttar Pradesh, Rajasthan, Punjab, Haryana, Delhi, Himachal Pradesh, Jammu & Kashmir, Uttarakhand & Chandigarh (UT)
Number of MIs: 306
No of Districts Covered: 211
Established in the year 1988

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</tbody>
</table>

Projects & Special Events

- As part of the project Integrated approach to Community Empowerment & Health Among the Slum Dwellers and Migrant Workers of Jahangirpuri slum, Delhi, awareness about communicable and non-communicable diseases, healthcare, health rights, hygiene, sanitation and formation of grassroots organizations were organized.
- Enrolment in Nurses Registration & Tracking System (NRTS) - NRTS has been developed by Indian Nursing Council for the purpose of maintenance and operation of the Indian Nurses Live Register. Through the system it registered the data of RN & RM, RANM & RLHV upon Aadhar based biometric authentication. RUPCHA facilitated the registration of 586 nurses in NRTS. Several meetings with MIs were organized to generate awareness on
NRTS. Area-wise registration process was arranged in eight MIs in the region.

- Central Procurement System of RUPCHA - As part of this initiative, best/reduced prices were negotiated with vendors and also companies for supply of consumables, small equipment and surgical items to a large number of MIs. Currently, around 70 MIs are participating / benefitting through this initiative. RUPCHA organizes regular meetings with MIs wherein feedback on the material provided by various vendors is shared making it easier to finalize best quality products with negotiated prices.

- With the purpose of networking and updating information on MIs, the RUPCHA team visited 64 MIs during the year and six diocesan meetings were conducted. These meetings brought together the MIs in various dioceses and also gave an overall picture of health activities of the dioceses.

- In February 2020, a series of riots and violent incidents happened in the Jaffrabad area of North East Delhi. 53 people lost their life and more than 5,000 people were injured. The riot spread swiftly and continued for several days and there was widespread destruction of properties & lives. RUPCHA had extended its helping hand in collaboration with other likeminded NGOs by providing medical team, medicines, counselling in the relief camps, visiting the affected personnel at their home and other manpower needed activities.
WBCHA
THE WEST BENGAL CATHOLIC HEALTH ASSOCIATION

States: West Bengal and Sikkim
Number of MIs: 130
No of Districts Covered: 131
Established in the year 2000

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<th>Regional Unit</th>
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<td>1 to 10 11 to 30 31 to 50 51 to 100 101 to 200 201 to 300 301 to 400 401 to 500 &lt;500</td>
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</table>

Projects & Special Events

- Awareness programmes were conducted in seven primary schools and nearby villages. Vitamin A tablets provided by Vitamin Angels were administered to 3,944 children.
- For the benefit of people with diabetes, various services were provided including free blood sugar testing camps, micro-albuminuria testing camp for severe diabetes cases, Neuropathy testing camps and Uric Acid testing camp. Treatment, education and medicines were provided to the patients based on the results of the various tests.
- Special Days including World AIDS Day, Health & Healing Week, World Day of the Sick, De-worming Day, World TB Day were observed. During these days, awareness activities, special prayers and free medical services were provided to the people.
Partnerships

Liliane Foundation, The Netherlands
MIVA, Austria
Conrad N. Hilton Foundation, USA
Conrad N. Hilton Fund for Sisters, USA

Misereor, Germany
Missio, Aachen, Germany
Missio, München, Germany
Medtronic, USA

The Italian Episcopal Conference’s Committee for Charitable Initiatives in Favour of the Third World
ChristoffelBlindenmission / Christian Blind Mission, Germany
MAMTA-HIMC
Project Vision, Bangalore, India

AmeriCares India Foundation
Vitamin Angels, USA
Pallium India, Thiruvananthapuram
Center for Mission, USA

Centre for Palliative Care, c/o St Vincent’s Hospital
The Augustine Stewardship Fund
National Health Systems Resource Centre
The Union Against Tuberculosis and Lung Disease
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<tr>
<th>Catholic Bishops Conference of India</th>
<th>Sister Doctors Forum of India</th>
<th>Catholic Nurses’ Guild of India</th>
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<td>Billion Lives</td>
<td>Tech Care for All</td>
<td>Alliance for Immunisation &amp; Health (AIH)</td>
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<td>CBCI Coalition for AIDS and related Diseases (CBCI-CARD)</td>
<td>Christian Medical College (CMC) Vellore &amp; Ludhiana</td>
<td>Christian Medical Association of India</td>
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<td>Emmanuel Hospital Association (EHA)</td>
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**Membership – International**

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<tr>
<th>F I A M C</th>
<th>Global Coalition of TB Activists</th>
<th>International Committee of Catholic Health Care, Rome</th>
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Fédération Internationale des Associations de Médecins Catholiques
Special Status / Accreditation

CHAI has been enjoying special consultative status with the Economic and Social Council (ECOSOC) since 1st August 2013. Tata Institute of Social Sciences (TISS) accredited CHAI as an empaneled partner of the National CSR Hub. Government of Telangana

MoU for Technical Collaboration for Research, Student Internship & Training

Two Worlds Cancer Collaboration Foundation, Canada
University of Melbourne, Australia
St Vincent’s Hospital, Australia
Australian Catholic University, Australia
The George Institute for Global Health

Secretariat

Liliane Foundation Inclusion Network (LINC)
Engage Disability
MANAGEMENT & TEAM
GOVERNING BOARD

Archbishop Prakash Mallavarapu
Ecclesiastical Advisor, CHAI

His Grace Archbishop Prakash Mallavarapu took charge of the pastoral governance of the Archdiocese of Visakhapatnam in 2012. His Grace was ordained bishop of Cuddapah Diocese in 1998 and took charge of the Diocese of Vijayawada in 2002. He was also the Apostolic Administrator of Eluru Diocese. His Grace is currently the Ecclesiastical advisor to CHAI. He has his Doctorate in Indian Philosophy from Jnana Deep Vidyapeeth, Pune; and master’s degree in Theology from Loyola University of Chicago. Archbishop Prakash was the Secretary-General of the Conference of Catholic Bishops in India.

CHAAP
Sr. Victoria Narisetti, JMJ
President

Sr Victoria has done M.Sc. Nursing, and holds Ph.D. in Hospital Management-Patient Centered Care. She served in St. Joseph’s Hospital, Guntur, from 1988 to 2008, in various capacities like HOD of CCU, Administrator, Professor, College of Nursing, and Principal of MPHW (F) Training School. Currently she is the Provincial Councillor of Guntur Province, of the JMJ Congregation, holds the responsibility of Coordinator for Healthcare and Social Ministries of the Province, and is the Principal, St. Joseph’s College of Nursing, Nallapadu.

CHABIJ
Sr Bhavya CHF
Treasurer

Sr. Bhavya CHF has done GNM and B Sc Nursing. She served as ICU In-charge in Holy Family Hospital, Patna, from 2004-2009. She was tutor and Associate Administrator in Mercy Hospital, Godda, Jharkhand. She continues as a Nurse in Holy Family Health Centre, Bhagalpur & Bihar. She is also the President of the Bihar & Jharkhand Regional unit of CHAI.

CHAKA
Fr George Kannanthanam
Secretary

Fr. George is a Claretian priest with a Master’s in Social Work and Doctorate in Sociology. He founded the HOPE Society in 1988 to work among alcoholics and drug addicts. He lived with the leprosy-affected persons at the Sumanahalli Centre for 12 years. Fr George has written a book named ‘THE EMPTY NEST’, on the rehabilitation model for leprosy. He was conferred National Award by the Government of India in 2003, Mother Award for selfless service in 2012, and Best Citizen of Bangalore Award from Namma Bengaluru Foundation in 2013.
GOVERNING BOARD

CHAKE
Fr Thomas Vaikathuparambil
Vice President I

Fr Thomas Vaikathuparambil is the Director of Lisie Medical Institution, Ernakulam, and Chairman of Confederation of Private Hospitals Association (CPHA). He is also the member of Kerala State IRC, Ethics Committee of Cardiological Society of India. He is a promoter of Kidney and Organ Donation. He is also the President of CHAKE.

CHAT
Fr G James Raj
Vice President II

Father G James Raj holds a Master’s in History as well as Social Work. He is the Director of Pudukkottai Multipurpose Social Service Society. He has also served as Director of Social Service Society, Thanjavur Diocese. He has also worked as a priest in many parishes.

RUPCHA
Sr. Lizy Abraham MSA
Joint Secretary

Sr Lizy Abraham, MSA, is also the president of RUPCHA, the Regional Unit of CHAI. She did GNM, BSc Nursing and MSc in Gynecology and Obstetrics. Presently she is the Principal of St Francis Hospital College of Nursing since 2013, and General Medical Councillor of Mission Sisters of Ajmer, from 2016 onwards.

CHAMP
Fr Kiran Olakkengil
Councillor

Fr. Kiran has a Master’s in Hindi Literature as well as Social Work. He also has a B.Ed. He is pursuing Ph. D in Community Development. He is the Director of MPSSS. He has worked as Finance Officer in Diocesan Social Work at Sagar. Was also Principal of St Thomas, Senior Secondary School, Sagar; Parish Priest of Santhome Church, Ashok Nagar; and Associate Director, Pushpa Service Society, Sagar, Madhya Pradesh.
GOVERNING BOARD

CHAW
Fr. Mathew Nirappel
Councillor
Fr. Mathew Nirappel holds a Master’s in English and a diploma in Health Care Administration. He served for 16 years as Administrator of Christianad Hospital, Brahmapuri, Maharashtra, and as Finance Officer in Bishop’s House for three years. He is also the Secretary of Christ Hospital, Chandrapur.

NECHA
Sr Lizzie Mathew
Councillor
Sr. Lizzie Mathew did B Sc in Nursing and Hospital Administration. She worked in the Health Centres of Meghalaya and Nagaland villages for more than 10 years. She has been working with St John’s Hospital, Assam, since 2009.

OCHA
Sr Suchita Muriankary
Councillor
Sr Suchita has done courses in Agriculture, Pharmacy and Alternative Medicine. She worked in the Bathlagundu Holy Cross Hospital in Tamil Nadu as well as dispensaries in Odisha, Jharkhand, U.P, and Uttaranchal. Currently she is with Deogarh Holy Cross Health Centre.

WBCHA
Sr Antonia, FC
Councillor
Sr Antonia belongs to the Congregation of the Daughters of the Cross. She has done M.Sc in Nursing and has done MBA in Hospital Administration. She taught in various Nursing Schools and worked as Asst Professor and Administrator in a few institutions. Presently working in Jesus Ashram as Nursing-Coordinator as well as Tutor in Navajeevan School of Nursing, and Dr Chhang’s Super-speciality Hospital. She is also the President of WBCHA.
Regional Units Presidents & Directors

Sr. Arockia Mary
President, CHAAP
Sr. Arockia Mary worked in St. Ann’s Hospital, Gollapudi, Vijayawada for 3 years. Worked as Administrator in St. Ann’s Hospital, Warangal for 12 years. At present she is sister-in-charge for aged sisters in St. Ann’s Convent, Bolarum. She has 35 years of working experience. Previously she was Vice-president of CHAAP.

Sr. Daisy Kunnathuparambil
President, CHAKA
Sr. Daisy JMJ, has completed B.Sc MLT and MSc MLT from St John’s Medical College, Bengaluru; and is pursuing her PhD in Biochemistry at REVA University, Bengaluru. Presently, she is Lecturer at Philosophy’s College of Nursing, Bengaluru as well as St. Joseph’s College of Nursing Dargamitta, Nellore.

Sr. Anselm Treasa FIHM
President, CHAT
Sr. Anselm Treasa, a nurse by profession, did her Hospital Administration Course in the US. She has been the Administrator of Sahay Annai Hospital, Coimbatore from 2013. She has worked in the US and many Mission stations in Northern India like Bihar for 20 years.

Fr. Thomas PA
President, CHAMP
Fr Thomas PA is a graduate in Business Management and also holds a Master’s in Sociology. He was Secretary of Catholic Mission Society for Tribal Education for some time. Presently, he holds various posts like Director of Jeevan Jyothi Hospital, Health Service; Director, Jeevan Jyothi Hospital, Meghanagar; Project Manager, Catholic Diocese, Jhabua; Project Manager, Childline Alirapur.

Sr. Bhavya CHF
President, CHABIJAN
Sr. Bhavya CHF has done GNM and BSc Nursing. She served as ICU in-charge in Holy Family Hospital, Patna, from 2004-2009. She was tutor and Associate Administrator in Mercy Hospital, Godda, Jharkhand. She continues as a Nurse in Holy Family Health Centre, Bhagalpur.

Sr. Marina Abraham SCC
President, NECHA
Sr Marina Abraham SCC, who completed GNM in 1994 served as In-charge of the Holy Cross Health Centre at West Siyang Kying. She was also in charge of the Holy Cross Health Centre. Presently, she is In-charge of Holy Cross Dental Care Centre, Harmuty, Lakhipur.

Sr. Beena Varghese
President, CHAW
Sr Beena Varghese did GNM and BSc Nursing along with Master’s in Hospital Administration. She was In-charge Laboratory and Blood Bank at Holy Spirit Hospital, Mumbai; and Administrator in Holy Spirit Hospital, Mysore. Presently she is Asst Executive Director of Holy Spirit Hospital, Mumbai, since 2015.

Sr. Teresa Lakra
President, OCHA
Sr. Teresa Lakra is a graduate in BSc Nursing. She has more than 25 years’ experience in the field of nursing both in academics as well as clinical side. Sr. Teresa mostly worked in Rourkella Diocese of Odisha. She also serves as State Coordinator for improving networking with Catholic Member Institutions (MIs), advocacy with Local and State Governments and linkages with other NGOs.

Sr. Lizy Abraham MSA
President, RUPCHA
Sr Lizy Abraham did GNM, BSc Nursing and MSc in Gynaecology and Obstetrics. Presently she is the Principal of St Francis Hospital College of Nursing since 2013, and General Medical Councillor of Mission Sisters of Ajmer, from 2016 onwards.
Sr. Antonia FC
President, WBCHA

Sr. Antonia belongs to the Congregation of the Daughters of the Cross. She has done M.Sc in Nursing and has done MBA in Hospital Administration. She taught in various Nursing Schools and worked as Asst Professor and Administrator in a few institutions. Presently working in Jesus Ashram as Nursing Coordinator as well as Tutor in Navajeevan School of Nursing.

Sr. Denin Mary
Director, CHAAP

Sr. Denin Mary holds a Master’s in Social Work and has worked as Programme Coordinator with JMJ Community Care Centre, Sambalpur, for five years, and as Resident Superintendent with Women and Child Development Department for three years.

Sr. Maria Anita
Director, CHAT (outgoing)

Sr Maria Anita did BA in 2006 and MSW in 2012. She was Formator of Franciscan Sisters of St. Thomas from 2004-2006 and worked as Coordinator in Madurai Social Service Centre 2007-2010. She was also the Administrator in Society of Planet Hope. She is currently the Director, TEEM Social Service Society, Trichy.

Sr. J. Jerald Sahaya Janci
Director, CHAT (Incoming)

Sr. J. Jerald Sahaya Janci, belongs to the congregation of Franciscan Sisters of St Thomas. She did her General Nursing & Midwifery (GNM) and also holds Master’s in psychology. She has 14 years of experience in the field of Administration & Nursing Care and enjoys singing as well as playing the keyboard. She is presently with Sagayamath Health Centre, Pudhukkottai, Tamil Nadu.

Sr. Nirmala
Director, CHABJAN

Sr Nirmala has done GNM as well as BSc Nursing, and is presently the Secretary of Health Commission of JHAAN. She was the Principal of Amala Annai Community College, Jharkhand. She has also served as Centre-in-charge at different places of Bihar and Jharkhand.

Fr. Simon Pallupetta
Director, CHAKE

Fr. Simon Pallupetta holds Master’s in Health Administration and Diploma in Management. He has served as Joint Director in Lizy hospital, Kerala, and is the Secretary of KCBC Health Commission from 2015 onwards and Director of CHAKE since 2014.

Fr. George Kandathinkara
Director, NECHA

Fr George has done Diploma in Development Spirituality at Holy Ghost College, Dublin, Ireland. He served as Parish Priest in St Joseph’s Parish, Suggu, Manipur; St Paul’s Parish, Pallel, Manipur; and St Paul’s Parish, Imphal. He is the founder of NECHA in 1986 and also was part of the CHAI Executive Board from 1986 to 1997. He also served at the Pastoral Audio-Visual Centre from 1999 to 2002.

Sr. Jerald Sahaya Janci
Director, CHAP

Fr. Kiran Olakkengil
Director, CHAMP

Fr. Kiran has a master’s in Hindi Literature as well as Social Work. He also holds a B.Ed. He is pursuing Ph.D in Community Development. He is the Director of MPSSS. He has worked as Finance officer in Diocesan Social Work at Sagar & Indore. He was also Principal of St Thomas, Senior Secondary School.

Sr. J. Jerald Sahaya Janci, belongs to the congregation of Franciscan Sisters of St Thomas. She did her General Nursing & Midwifery (GNM) and also holds Master’s in psychology. She has 14 years of experience in the field of Administration & Nursing Care and enjoys singing as well as playing the keyboard. She is presently with Sagayamath Health Centre, Pudhukkottai, Tamil Nadu.
CHAI Directorate

Rev. Dr. Mathew Abraham C.Ss.R, MD
Director – General

Fr. Mathew is a Redemptorist Priest with an MBBS from Kottayam Medical College and an MD in Community Medicine from CMC Vellore. He has held positions in the leadership of the Catholic Healthcare Network as Secretary, CBCI Office of Healthcare from 2008 to 2015; as Secretary, CBCI CARD from 2009 to 2015 and as the Chairman of the TRG instituted by the National AIDS Control Organization. He also holds the position of President of the Christian Coalition for Health and is the Chair for both Engage Disability and LINC Asia, which are Indian and pan-Asian Disability Inclusive Networks. Fr. Mathew is passionate about affordable and compassionate care and has instituted significant initiatives to strengthen Member Institutions through networking and collaboration.
Senior Management Team & Project Managers

**Dr. Sameer Valsangkar**
Dr Sameer Valsangkar has a Master’s in Public Health from USA, and an MD in Community Medicine from India. He has been working in research and public health development since 16 years. He has designed, operationalized and implemented public health projects in close collaboration with the government in several regions in India. He has developed and deployed information management systems for monitoring and evaluation with relevant frameworks, indicators and dashboards for several public health initiatives.

**Ms. Maji Manesh**
Maji Manesh is a Commerce Graduate. Also holds a Higher Diploma in Software Engineering. She has over 17 years of experience in accounting and financial management in the NGO sector. Worked for 3 years as Accounts Officer in Dharma Bharati Foundation - Hyderabad. Since 2006, she has been with CHAI. Presently she is the Finance Manager, facilitating the financial management of the organization and over 20 projects being implemented by CHAI across the country.

**Dr. S. Bharat Kumar**
Dr. S. Bharat Kumar has been associated with CHAI as National Programme Manager since last four years. He is an MD in Community Medicine. He has expertise in epidemiology, public health management, programme management, monitoring and evaluation. He worked in different national-level programmes with reputed bodies like NACO, CDC, RNTCP. Currently he is looking after the Axshya programme of TB under GFTAM.

**Ms. Jessy Joy**
Ms. Jessy Joy Joseph has been working in CHAI since 32 years. Presently she is the Programme Manager. Handles Project Desk as well as Directorate. She also has the skills to write project proposals. She had coordinated various projects mainly V-Guard-funded projects like Free Dialysis to the poor kidney patients; Prevention and Control of Diabetes; and Prevention & Control of Cancer in India. Also managed projects like Holistic Community Care Services funded by Misereor, Nutritional Support to Children Infected and Affected with HIV/AIDS funded by Augustine Stewardship Fund Trust, USA, Kindermissionswerk, Germany etc.

**Mr. Vishal Gupta**
Mr. Vishal Gupta has been with CHAI for more than 11 years and is currently Senior Programme Manager. He is a development professional with over 12 years of experience with supporting qualifications of management and social work. He is a certified Disability expert and a Fulbright Scholar. He is having vast experience and practical exposure on the inclusion of vulnerable and marginalized groups, especially persons with disabilities, children and women into civil society.

**Mr. Mohammed Mateen**
Mr Mohammed Mateen comes with an educational background of Bachelors in Social Work (BSW), Masters in Social Work (MSW) and Masters in Business Administration (MBA). He has work experience of over 17 years and has worked with national and international NGOs including SAATHII, Alliance India, CRY and Futures Group International. Mateen has been associated with CHAI for over 10 years. His core expertise are programme management, strategic planning, and technical and grant writing. Currently, he is working as Senior Programme Manager at CHAI.
Ms. Indira Rani
Ms. Indira Rani is associated with CHAI since 2015 as Programme Manager for Community Health programmes. She did her post-graduation in Arts. She has over 21 years’ experience of working in the development sector, across both national and international organizations like PATH, LEPRA and Alliance South Asia Regional Technical Support Hub. She is also experienced in implementing Public Health Programmes like STI/HIV/AIDS Prevention, Care & Support, Maternal & Child Health, Communicable & Non-Communicable diseases and WASH.

Dr. Radhika Rohini
Dr. Radhika is working with CHAI as Programme Manager for “Pratyasha: A Holistic Palliative Care” initiative of CHAI. She worked in both grassroots and INGOs in healthcare sector (FIAN, IYF, PHFI, PVRI, George Institute of Global Health, NHM, SAHARA, etc.), in various capacities in clinical care, administrative responsibility and implementing public health programs including surveys, advocacy and project implementation.

Mr. John Rajeesh N
Mr John Rajeesh N is working with CHAI as Programme Manager for Solar Project. He has a Master’s Degree in Computer Applications from Madurai Kamaraj University and Bachelor’s Degree in Mathematics from Annamalai University. He is a Professional with 14+ years of experience in Business Operations and Project Management with special focus on the Training and Development Industry, with a well-established history of propelling critical Business, Project, Stakeholder, and Team Management initiatives towards guaranteed success.

Mr. Prashant Janjal
Mr Prashant Janjal has been associated with CHAI as Program Manager CABA Project. He comes with educational background of Public Health and Physiotherapy. He worked with Ministry of Health and Family Welfare in Health Policy & Planning Division both at Centre and State Government levels. With his Centre level experience, he has successfully implemented Health and Wellness Centres (HWC) programme in Andhra Pradesh for which the State ranked first in the country with respect to implementation of number of HWC’S across India. His main areas of expertise include Health Systems Strengthening, Programme Implementation, Decentralized Planning, Capacity Building, Monitoring and Evaluation.

Mr. Soumya Prakash
Mr Soumya Prakash is working with CHAI as Manager-Resource Mobilization. He is a Physics graduate and has a Master’s in Rural Marketing from Berhampur University. He has worked with Infosys, Wipro and Capgemini as sales and BD role before getting into social sector. He has more than 21 years of experience in corporate, social sectors, health sectors and CSR partnership roles. He raised funds for programmes from leading CSR foundations like Coal India, SAIL, Aditya Birla, NHPC, Tata Steel, HDFC Bank, NHA etc. Soumya has worked as PMO for INVENT program which is world’s largest social sector seed funding program.

Mr. Ravikanth Pala
Mr. Ravikanth is the Manager - Administration. He has done his Master’s in Business Administration and has over 11 years of experience in the areas of General Administration, Facility Management and Vendor Management. Earlier he was associated with JK Agri Genetics Ltd and Bee Corp Pvt Ltd.
Consultants

**Mr. John Santhosh, Technology Consultant**
Mr John Santhosh is an entrepreneur focused on enabling large organizations to achieve their business objectives through effective use of technology. In 2010, he set up GIEOM Business Solutions, with a software product that is used by over 40 institutions globally to achieve Operational Excellence and Compliance Assurance. He founded Billion Lives, a social impact technology company to develop software products for social good. He has worked with the Pregnancy Aid Scheme of GoI, Village Social Transformation Project of Maharashtra Govt and the TB Eradication project of GoI (e-Nikshay).

**Ms. Rosemary Thomas, Management Consultant**
Ms. Rosemary Thomas is a management professional with specialization in Human Resource Development. After her MBA, she worked for 5 years with organizations like The Times of India Group and Tally Solutions Pvt. Ltd. She then shifted to the Development Sector working with the GFATM Project in HIV/AIDS for 4-5 years. She is now with CHAI as a Consultant. She has worked extensively with the Catholic Healthcare network, particularly with Sisters in the “Action 2020: Repositioning Healthcare” initiative.

**Mr. George Paul, Communication Consultant**
Mr George Paul holds an MDes degree in Visual Communication from IIT Bombay and has worked on a wide range of projects in print, identity and UX design. From 2004 to 2012, he founded and managed a full-service graphic design agency with a team of design professionals as design lead and director. Currently, he is the principal of a solo design practice focusing on information design, UI design and print media working mostly with non-profit organizations.

**Mr. Roy Alex, Disaster Management Consultant**
Mr Roy Alex, with his extensive experience in emergency response, facilitating community disaster preparedness and mobilization of resources during several disasters over the past three decades, is a thought leader in humanitarian assistance programming in India. He holds a Postgraduate degree in agricultural economics and rural development. Previously worked with the Government of Kerala and leading national Non-Governmental organizations like the Indian Social Institute, Emmanuel Hospital Association and ESAF. While working with ESAF Microfinance, he mainstreamed the NPS (the National Pension System), the social security scheme of the Government of India for the unorganized sector.
Projects
Dr. Sameer Valsangkar
Dr. Bharat Kumar
Mr. Vishal Gupta
Ms. Indira Rani
Dr. R. Radhika Rohini
Dr. G. Jagan
Mr. Kiran Kumar Marneni
Ms. Jessy Joy Joseph
Mr. T Prashanth Kumar
Mr. Chiranjeevi
Dr. Rekharani Sharma
Ms. P. Beulah Subha Chakra
Mr. Raju M.K
Mr. Ramesh Raparthi
Mr. Amit Kumar
Mr. Soma Shaker M
Dr. Arti Mishra
Ms. Sarita Jesse
Mr Mohammed Mateen
Mr John Rajee N
Mr Prashant Janjal
Mr Soumya Prakash
Ms. Bharati Dasgupta
Mr. Dileep Kumar
Mrs. Sahay Mary

Finance
Ms. Maji Manesh
Mr. Kommu Sreeramulu
Ms. Sudha Reddy
Mr. Areth Raj
Mr. G.Sreenivas Rao
Mr. B. Rajasekhar
Ms. TN Lata
Mr. Venkanna Vanguri

Admin & HR
Sr Gracy Abraham
Ms. Theophine Venard
Mr. Ravikanth Pala
Ms. Swapna Tungala
Mr. Sunder Raj
Mr. Naveen Kumar

Mr. Johnson Horo
Mr. PK George
Ms. Molly George
Mr. N T Sebastian
Ms. Margeat Ekka
Ms. Priyanka Ekka
Ms. Shanti Minj
Ms. Sonam Kujur
Ms. Olibha Lakra
Ms. Santana Dawson
Mr. E Jagan Kumar

Communication
Mr. N. Vasudevan Nair
Mr. M. S. Nanda Kishore
Mr. T. K. Rajendran
Mr. Manesh Thomas

CHAI Training Centre Staff
Fr. Sarath Maddineni C.Ss.R
Fr. Allam Chinnapa Reddy C.Ss.R
Sr. Sudeepa Ann
Sr. Hiramani Toppo
Sr. Alma Lakra
Ms. Devi Chamundeswari
Mr. Linus Surin
Ms. Blanch Surin
Mr. Nirmal Jatte
Ms. Jyoti Lakra
Mr. Kotesh Shankar
Ms. Laxmi Kotesh
Ms. Madhuri Lakra
Ms. Sujita Lakra
Mr. Naveen Shankar
Ms. Albicia Kalko
Ms. Susila Lakra
Ms. K. Neelaveni
Ms. Anima Barla
Ms. Asha Toppo
Mr Sanjay Munda
Ms Lakshmi Munda

Field Staff
Mr Suraj Sanjay Mali
Mr Kambale Sushil Bhaskar
Mr Vaibhav Vijay Howal
Mr Nobin Salose
Mr Sunil Dungdung
Mr Laxmidhar Singh
Mr Jinesh Lal
Mr Chandrashekar Gaurkhede
Mr Amol Prabhakar Gore
Mr Ishwar Koli
Mr Shasikant Bhise
Mr Bharat Awale
Mr Sandip Bhaskar Pandit
Mr Vishal Karbhari Jadhav
Mr Balaji Algulwad
Mr Raju Channappa Kamble
Mr Rakesh Jagdish Paliwal
Mr Pravin Vishwanath Manohare
Mr Motilal Patil
Mr Mukesh Singh Thakur
Mr Kamlesh Singh
Mr Krapal Singh
Mr Harish Jha
Mr Tapan Kumar Laha
Mr Rajesh Ranjan
Mr Krishna Raut
Mr Kalyan Kumar Lima
Mr Dilip Kumar Badshet
Mr Kishore Kumar Lugun
Mr Dwijendra Mandal
Mr Anil Kumar Sinha
Mr Pankaj Kumar Sharma
Mr Rajib Soreng
Mr Christ Roshan Topno
Ms Gurpreet Kaur
Mr Vivek Mishra
Mr Rishabh Kumar Pal
Mr Shivam Mishra
Mr Brijendra kumar
Mr Shadhab Ansari
Mr Daroga Yadav
Mr Shiv Shankar
Mr Vikash Singh
Mr Atul Kumar Gupta
Mr. Shobhit Dubey
Religious Staff

Sr. Sudeepa Ann
Director, Pratyasha and CHAI Training Center
Sr. Sudeepa belongs to the Society of Sisters of St Ann, Luzern. Completed her general nursing and post-graduation in administration. She has 31 years of experience in the field of nursing and 16 years of experience in the field of administration.

Sr. Hiramani Toppo
Sister-Nurse
Sr. Hiramani belongs to the Society of Sisters of St Ann, Luzern. She completed her Nursing in 2012 and has worked as a nurse for 6 years. At present she is working as staff nurse in Pratyasha.

Sr. Alma Lakra
Sister – Nurse
Sister Alma belongs to the Society of Sisters of St Ann, Luzern. She completed her General Nursing and has 6 years of experience in nursing.

Sr. Gracy T. Abraham
Asst. Manager-Admin
Sr. Gracy is a member of the Congregation of the Sisters of Our Lady of Fatima. She has completed GNM in 1995. She has 23 years of experience in health care and administration.

Sr. Lily Joseph
Sr. Lily has done her MSW from St. Francis college, Begumpet. She has experience working with HIV/AIDS Programme as a counsellor (Assisi Snehalaya, Coimbatore) and as a Project Coordinator (Promoting Access to Care & Treatment for HIV/AIDS in Hunagadh, Gujarat).

Religious Staff who transitioned
We gratefully acknowledge the services of Sr. Lily Joseph who has contributed to the urban health project of CHAI.

Fr. Sarath Maddineni C.Ss.R
Chaplain
Rev. Fr. Sarath Maddineni C.Ss.R, is a Chaplain who holds a Doctorate in Canon Law. He is the Superior of the Redemptorists, Medchal Community. Fr Sarath teaches Canon Law, directs and preaches in parishes for religious sisters and seminarians. He has seven years of experience working in Kenya, Africa as parish priest for 3 years and started a school and was the Manager for the same for 4 years.

Fr. Allam Chinnapa Reddy C.Ss.R
Chaplain
Fr. Allam Chinnapa Reddy C.Ss.R, is a Chaplain with the Redemptorist Community at Medchal. He holds a bachelor’s degree in Education apart from Philosophy, Arts, and Theology. He is a good preacher with excellent communication and interpersonal skills. He preaches both in English and Telugu languages. He served as Asst Parish Priest, Parish Priest, Rector in Guntur, Mumbai, Visakhapatnam etc.
AUDITOR'S REPORT

Leo Amalraj & Associates
Chartered Accountants,
5-9-1111/7, 3rd Floor,
King Koti Road,
Hyderabad -500 029
Tel: 23244221

To

The members of Catholic Health Association of India, Secunderabad

The members of Catholic Health Association of India, Secunderabad
We have audited the accompanying financial statements of Catholic Health Association of India, which
comprise the Balance Sheet as at March 31, 2020, and the Income & Expenditure Account for the year then
ended.

Management is responsible for the preparation of these financial statements that give a true and fair view
of the financial position and financial performance. This responsibility includes the design, implementation
and maintenance of internal control relevant to the preparation and presentation of the financial statements
that give a true and fair view and are free from material misstatement, whether due to fraud or error.
Our responsibility is to express an opinion on these financial statements based on our audit. We conducted
our audit in accordance with the Standards on Auditing issued by the Institute of Chartered Accountants
of India, which require that we comply with ethical requirements and plan and perform the audit to obtain
reasonable assurance about whether the financial statements are free from material misstatement.
An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the
financial statements. The procedures selected depend on the auditor’s judgment, including the assessment
of the risks of material misstatement of the financial statements, whether due to fraud or error. In making
those risk assessments, the auditor considers internal control relevant to the Society’s preparation and
fair presentation of the financial statements in order to design audit procedures that are appropriate in
the circumstances. An audit also includes evaluating the appropriateness of accounting policies used and
the reasonableness of the accounting estimates made by management, as well as evaluating the overall
presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our
audit opinion.

In our opinion and to the best of our information and according to the explanations given to us, the financial
statements give the information required in the manner so required and give a true and fair view in
conformity with the accounting principles generally accepted in India:

a) in the case of the Balance Sheet, of the state of affairs of the Society as at March 31, 2020;

and

b) in the case of the Income & Expenditure Account, of the excess of income over expenditure for the year
ended on that date.

Place: Secunderabad
Date: 29.09.2020

For Leo Amalraj & Associates
Chartered Accountants
FRN: 001862S

A. Leo Amalraj
(Partner)
Membership No: 022073
Notes forming part of accounts for the year ended 31.03.2020

1. **Basis of preparation of financial statements**: The financial statements are prepared in accordance with the generally accepted accounting principles in India and in accordance with the historical cost conventions.

2. **Fixed Assets**: The Fixed Assets have been recorded at the historical cost less depreciation.

3. **Depreciation**: Depreciation on fixed assets has been provided at the rates prescribed under the Income Tax Act, 1961.

4. **Investments**: Investments are stated at cost unless there is a permanent reduction in value.

5. **Recognition of Income/Grants**: The grants received from various agencies are accounted only on actual receipt basis. The interests on fixed deposits are considered either on maturity or whenever the banks consider the accrued interest for tax deduction purposes, whichever is earlier.

6. **Retirement Benefits**: Retirement benefits to employees are not provided in the accounts and the same are accounted as and when the payments are made.

7. **Contingent Liabilities**: No contingent liabilities have come to the notice of the management.

8. **Confirmation of Balances**: The confirmations of balances have not been obtained in the case of debtors and creditors of the society.

9. Previous year’s figures have been re-grouped wherever necessary.

Place: Secunderabad
Date: 29.09.2020

For Leo Amalraj & Associates
Chartered Accountants

A. Leo Amalraj
[Partner]
Membership No: 022073
### Balance Sheet as at 31st March 2020

<table>
<thead>
<tr>
<th>Source of Funds</th>
<th>Amount (in INR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital Fund and others</td>
<td>38,34,95,412.21</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>38,74,83,718.82</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Application of Funds</th>
<th>Amount (in INR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed Assets</td>
<td>6,42,61,883.95</td>
</tr>
<tr>
<td>Current Assets, Loans &amp; Advances</td>
<td></td>
</tr>
<tr>
<td>1. Current Assets</td>
<td></td>
</tr>
<tr>
<td>a. Cash &amp; Bank Balances</td>
<td>3,31,71,350.89</td>
</tr>
<tr>
<td>b. Fixed Deposits</td>
<td>27,86,66,866.00</td>
</tr>
<tr>
<td>2. Loans &amp; Advances</td>
<td>1,13,83,617.98</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>38,74,83,718.82</strong></td>
</tr>
</tbody>
</table>

Place: Secundrabad
Date: 29.09.2020

As per our report of even date
For Leo Amalraj & Associates
Chartered Accountants

Director General

A. Leo Amalraj
(Partner)
Membership No: 022073
## Income & Expenditure Account for the year ended 31.03.2020

<table>
<thead>
<tr>
<th>Income</th>
<th>Amount (in INR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>By Foreign Grants Received</td>
<td>14,41,19,099.81</td>
</tr>
<tr>
<td>By Local Grants Received</td>
<td>5,07,39,562.00</td>
</tr>
<tr>
<td>By Interest received</td>
<td>2,19,60,991.75</td>
</tr>
<tr>
<td>By Interunit &amp; Other receipts</td>
<td>4,88,39,635.30</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>26,56,59,288.86</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenditure</th>
<th>Amount (in INR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>To Foreign Projects Expenditures</td>
<td>13,39,06,588.05</td>
</tr>
<tr>
<td>To Local Projects Expenditures</td>
<td>4,36,67,505.35</td>
</tr>
<tr>
<td>To Administrative &amp; Other Expenses</td>
<td>4,56,88,783.46</td>
</tr>
<tr>
<td>To Depreciation</td>
<td>70,99,159.01</td>
</tr>
<tr>
<td>To Excess of Income over Expenditure</td>
<td>3,52,97,252.99</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>26,56,59,288.86</strong></td>
</tr>
</tbody>
</table>

Place: Secundrabad  
Date: 29.09.2020  
As per our report of even date  
For Leo Amalraj & Associates  
Chartered Accountants  

Director General  
A. Leo Amalraj  
(Partner)  
Membership No: 022073
Local Receipts and Payments Account for the year ended 31.03.2020

<table>
<thead>
<tr>
<th>Receipts</th>
<th>Amount (in INR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening Cash and Bank balances</td>
<td>1,57,77,155.60</td>
</tr>
<tr>
<td>Local Grants Received</td>
<td>5,07,39,562.00</td>
</tr>
<tr>
<td>Interest Received</td>
<td>1,29,80,952.75</td>
</tr>
<tr>
<td>Interunit &amp; Other receipts</td>
<td>4,88,39,635.30</td>
</tr>
<tr>
<td>Increase in Current Liabilities</td>
<td>17,45,144.09</td>
</tr>
<tr>
<td>Decrease in Current Assets</td>
<td>8,01,614.89</td>
</tr>
<tr>
<td>Income Tax Refund Received</td>
<td>16,08,670.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>13,24,92,734.63</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Payments</th>
<th>Amount (in INR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Project Expenses</td>
<td>4,36,67,505.35</td>
</tr>
<tr>
<td>Administrative Expenses</td>
<td>4,56,88,783.46</td>
</tr>
<tr>
<td>Purchase of Fixed Assets</td>
<td>3,74,847.00</td>
</tr>
<tr>
<td>Fixed Deposited Invested</td>
<td>1,86,69,015.00</td>
</tr>
<tr>
<td>Closing cash &amp; bank balances</td>
<td>2,40,92,583.82</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>13,24,92,734.63</strong></td>
</tr>
</tbody>
</table>

As per our report of even date
For Leo Amalraj & Associates Chartered Accountants

A. Leo Amalraj
[Partner]
Membership No: 022073
THE CATHOLIC HEALTH ASSOCIATION OF INDIA  
SECUNDERABAD, Telangana

Foreign Receipts and Payments Account for the year ended 31.03.2020

<table>
<thead>
<tr>
<th>Receipts</th>
<th>Amount (in INR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening Cash and Bank balances</td>
<td>1,25,49,546.91</td>
</tr>
<tr>
<td>Foreign Grants Received</td>
<td>14,41,19,099.81</td>
</tr>
<tr>
<td>Interest Received</td>
<td>66,37,538.00</td>
</tr>
<tr>
<td>Increase in Current Liabilities</td>
<td>5,576.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16,33,11,760.72</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Payments</th>
<th>Amount (in INR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreign Grants Expenses</td>
<td>13,39,06,588.05</td>
</tr>
<tr>
<td>Purchase of Fixed Assets</td>
<td>1,80,794.00</td>
</tr>
<tr>
<td>Fixed Deposit Invested</td>
<td>1,03,89,460.00</td>
</tr>
<tr>
<td>Increase in Current Assets</td>
<td>97,56,151.60</td>
</tr>
<tr>
<td>Closing Cash &amp; Bank Balances</td>
<td>90,78,767.07</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16,33,11,760.72</strong></td>
</tr>
</tbody>
</table>

Place: Secunderabad  
Date: 29.09.2020  
As per our report of even date  
For Leo Amalraj & Associates Chartered Accountants

Director General  
A. Leo Amalraj  
(Partner)  
Membership No: 022073
We know only too well that what we are doing is nothing more than a drop in the ocean. But if the drop were not there, the ocean would be missing something.

Mother Teresa
77 Years of Healing & Hope

Contact Us
Address
The Catholic Health Association of India
157/6, Staff Road, Gunrock Enclave,
Secunderabad – 500009, Telangana

Phone
+91-40-27848293, 27848457

Email
directorgeneral@chai-india.org