Hospice Nepal

Since 2000

Our dream project

Annual Report

2023 July -2024 July

(BS 2080 -2081)

Prepared by Rajesh N Gongal

Introduction

In the year 1999, four friends came together to unite for a cause – the initiation of palliative care in the country; a humble beginning- four beds in a private hospital with the help of four sponsors. Working as doctors in a busy hospitals, we realized that there were many patients who presented with advanced cancer whose only option was palliative care but were having to suffer in silence as there was no such service in the country.

Soon we realized that we had to move out of a hospital to a more homely environment. So we leased a land near Patan Hospital and built a 8- bedded independent unit. The building was built for us by CE Construction and Comfort Housing, companies which were led by one of the four founding members , Mr Om Rajbhandary. This was completed in year 2000 where we moved as 'Hospice Nepal', a Non-profit Non -Government Organization duly registered with the Government.

To provide care for patients who prefer to be cared at home, we started home care services in 2005 with the help of a van donated by INCTR.

In 2003, Prof. Max Watson, a palliative care specialist who had worked as a General Practioner in Tansen Hospital in Nepal ran the Princess Alice Palliative Care Course at Patan Hospital. We modified this course to suit the context of Nepal and started running this course on a regular basis. Since 2005, we have trained more than 1500 health professionals.

80% of the population live in rural areas of Nepal. Therefore, it becomes imperative for us to develop palliative care in rural areas of the country. To this end, we have been working in rural area of Makwanpur, a hilly district 5 hours drive from Kathmandu since 2014 to develop a rural model of palliative care. Initially we started home based service in one municipality with two local health care workers who were trained in Hospice Nepal following which we expanded the service to whole of Makwanpur District in collaboration with Patan Academy of Health Sciences , training the local Government employed Health Workers. Last year we have engaged new districts of Dhading and South Lalitpur.

Inpatient service

This year we admitted 93 patients in the inpatient Unit. **This service is provided free for patients.**

Disease

Disease	No of patients
Ca Of GB and Liver	7
Ca Pancreases	3
Ca Lungs	27
Ca Uterus & Cervix	8
CaColan	4
Ca Breast	3
Ca Stomach	7
Others Cancer	34

Age group

Age group	No of patients
1- 10	
11-20	
21 -40	6
41-60	36
61-80	44
81 and above	7

Bed days

days	**No of patients**
1-7	65
8-14	14
15-21	7
22-28	4
More than 28	3

Community service in Kathmandu Valley

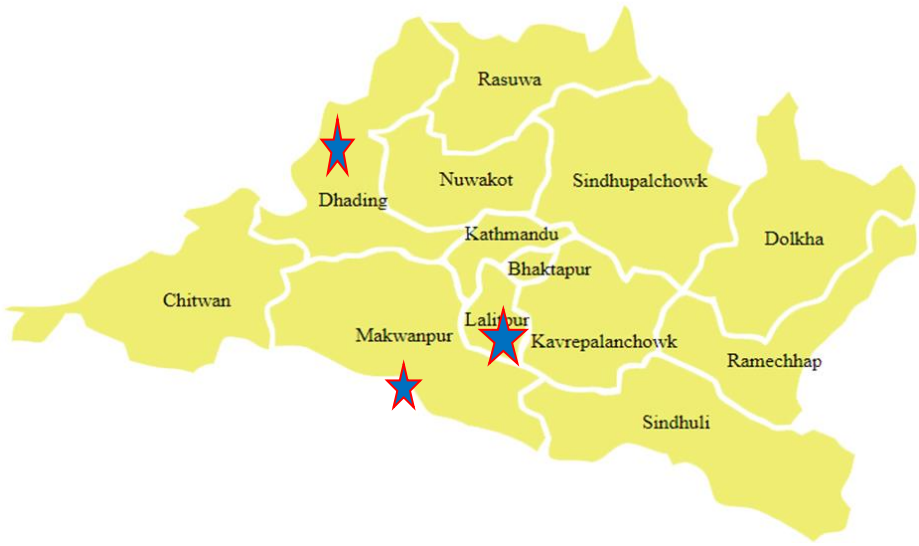
This year we cared for 206 patients in the community. This service is provided free for the patients.

Disease	No of patients
Ca Of GB and Liver	20
Ca Pancreases	16
Ca Lungs	44
Ca Uterus & Cervix	15
CaColan	10
Ca Breast	15
Ca Stomach	11
Others Cancer	75

Age Group

Age group	No of patients
1- 10	0
11-20	3
31 -40	14
41-60	52
61-80	114
81 and above	23

Rural community service



Makwanpur

The district consists of 10 Municipalities, out of which one is a sub-metropolitan city, one is an urban municipality and eight are rural municipalities with a total population of slightly over 400,000.

Since 2014, we have been working to develop a rural palliative care model based on the model of ' **For the locals , by the locals**'. We have been advocating with the local elected leadership for taking ownership of the program.

We are happy to report that as of last year all municipalities have taken ownership of the palliative care program and care is provided in all municipalities by trained health professionals employed by the local municipalities. This program is conducted in collaboration with Patan Academy of Health Sciences.

This fiscal year care was provided for **305 cancer patients** of which 195 were new.32 patients died under our care during this fiscal year. Similarly, **510 non-cancer patients** were cared for in the community of which 396 were new patients. 31 non-cancer patients died at home under our care.

No. of consultation	Home Visits	Telephone consult	Total
Cancer	1364	1504	**2868**
Non-cancer	2293	1408	**3701**
Total	**3657**	**2912**	**6569**

Conditions	new	Old	total	death
cancer	**195**	**110**	**305**	**32**
Non-cancer	**396**	**114**	**510**	**31**
Total	**591**	**224**	**815**	**63**

Dhading

One Rural Municipality was inducted in palliative care service in Yr 22-23. In last fiscal year, we added three more municipalities of Dhading , training 16 more Health Workers.

No. of consultation	HomeVisits	Telephone consult	Total
Cancer	45	78	**123**
Non-cancer	340	154	**494**
Total	**385**	**232**	**617**

Conditions		new	Old	total	death
	cancer	**13**	**0**	**13**	**3**
	Non-cancer	**66**	**9**	**75**	**5**
	Total	**79**	**9**	**88**	**8**

Lalitpur

The three rural municipalities of Lalitpur (Bagmati, Mahankal and Konjysom Gaun palika) were inducted in the service in Yr 22-23 training health professionals from these areas.

No. of consultation	Home Visits	Telephone consults	Total
Cancer	**30**	**51**	**81**
Non-cancer	**68**	**58**	**126**
Total	**98**	**109**	**207**

Conditions		new	Old	total	death
	cancer	**12**	**6**	**18**	**1**
	Non-cancer	**31**	**1**	**2**	**2**
	Total	**79**	**9**	**88**	**3**

Myagdi

Myagdi is one of the districts in Gandaki Province. Health Workers from one (Dhaulagiri) municipality in Myagdi were trained at the request from the municipality leaders.. They have started providing community based service in their area.

No. of consultation	Home Visits	Telephone consults	Total
Cancer	**16**	**14**	**30**
Non-cancer	**23**	**8**	**31**
Total	**39**	**22**	**61**

Conditions	new	Old	total	death
cancer	**2**	**0**	**2**	**0**
Non-cancer	**6**	**0**	**6**	**1**
Total	**8**	**0**	**8**	**1**

In Total, **999 patients and families** in rural Nepal have benefited from the community based palliative care services. **4179 home visits** were made by the Health Workers and **3275 telephone consults** were conducted to support the patients. Some home visits take 4hours walk to reach patient's home and 4 hours walk back along the hilly slopes.

Other activities in Rural areas of Makwanpur, Dhading and Lalitpur

- Community orientation activities in Thaha Municipality. Participants were teachers, bachelor level students, social volunteers, community people, Jaycees and local cultural group.

- Palliative Care orientation to newly elected representatives of Lalitpur, Dhading and Makwanpur

- Palliative Care orientation to community stakeholders and FCHvs of Thaha-2

- Rotary Club of Kasthamandap donated medical equipments and supplies to Rural Community Based Palliative Care to improve quality of palliative care to the needed people in the community

- WHO team visited Thaha Municipality to observe and learn the community level challenges while providing palliative care in rural areas of Nepal

- Visit by the team from INF, Pokhara in Thaha Municipality on 2081/03/09-10.

- Annual Review and Refreshing Program of palliative care health workers of Makawanpur district held on 2081/02/23 to 2081/02/25.

Educational Visit by Chiniya Lama and Kiweta Bista to Pallium India, Kerala

Chiniya Lama and Kiweta Bista, Supervisors for the Rural Palliative care program, visited Pallium India in Kerala to learn about community engagement and volunteers program. Pallium India , under the leadership of Dr M Rajagopal is a NGO established in 2003 and is known the world over for its innovative ways of engaging the community to provide palliative care for people where they are and when needed. It is a World Health Organization Collaborating Centre (WHOCC) for Training and Policy on Access to Pain Relief.

They have come back inspired and wiser and with lots of ideas to mobilize the local communities.

We are grateful to Mr Raju Bhai Pradhan for supporting and making this educational visit possible .

<u>Training the Health Care Professionals</u>

Two days Palliative Care Training

This year we conducted **10 training sessions for 280** participants of which one training was conducted in Green Pasteur Hospital, Pokhra.

Palliative Care training for Rural Health Care Professionals

This year we conducted one four weeks training for rural health care professionals from 11th February to 8th March 2024. There were **29 participants** : 5 from Makwanpur, 16 from Dhading ,4 from Rural municipalities of Lalitpur and 4 from Myagdi District. All of them have now started working in their local area.

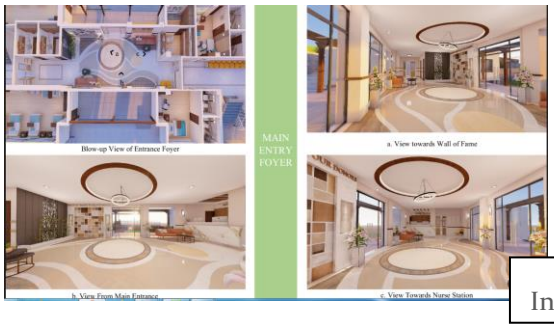
The training was conducted in collaboration with Patan Academy of Health Sciences with training being conducted at Patan Hospital, Hospice Nepal, Bhaktapur Cancer Hospital and in respective local communities.

The New Building Project

Fund raising for the building is continuing both in the country and outside. The Challenge Fund in UK and Fairfield Rotary in New Zealand are working hard to raise fund for the building.

SOUTH-WEST VIEW

SOUTH ELEVATION



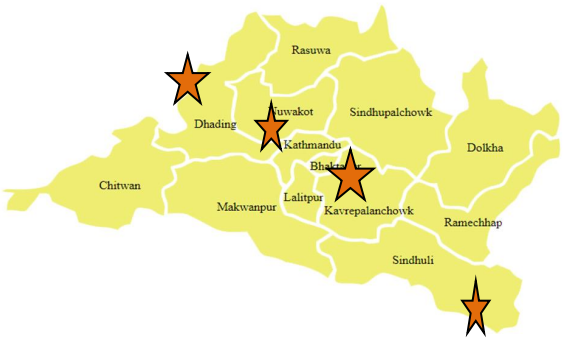
Interior : the foyer

The Lalitpur Municipality has granted approval for design and drawing of building**.** We now **have approval from Social Welfare council** for the project to go ahead. **Contractor for the building has been finalized** and construction will now begin soon. We aim to start construction and continue with fund raising.

Plan for the 2024-2025

Besides continuing the usual care of patients in Hospice and community, Hospice Nepal envisage to execute the following plans for the next Fiscal year:

- To work with PAHS to train the Health Workers of following districts of Bagmati Province
  - Dhading
  - Sindhuli
  - Kavrepalanchok
  - Nuwakot



(MoU with the Health Ministry of Bagmati Province has already been signed for this purpose)

- To start construction of the new building and continue to raise fund for completion.
- To conduct two days training program to train 300 Health Professionals
- To develop rural community volunteer training program and pilot this in Thaha Nagarpalika and develop modalities of inducting , mobilizing and retaining community volunteers.

Numbers do not tell the full story…

Our annual report consists of number of patients cared for in the hospice as well as the urban and rural community. The numbers cannot even begin to do justice of the immense suffering some of these patients are going through, especially in the villages of Nepal.

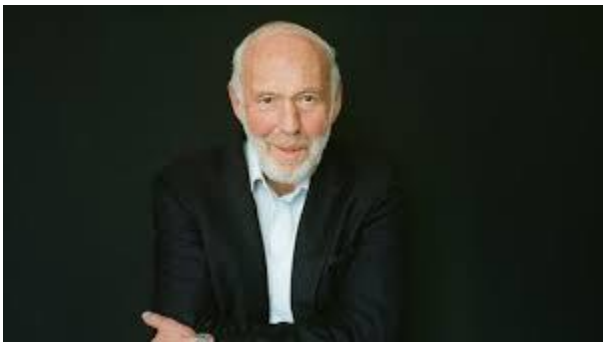
One such patient was a lady of 63 with end stage COPD with severe shortness of breath requiring 24 hours oxygen supplementation. She lives with a 40year old son who himself is disables due to global development disorder. They manage three oxygen cylinders which require frequent replenishment, which is an ordeal as they live in a hilly area. Trained palliative health care worker reached her . Change in some medications helped her breathing, a long oxygen tubing allowed her to come out to the verandah and she was able to see the greeneries again after two years. We managed to provide her with oxygen concentrator which removed the ordeal of transporting oxygen cylinders.

64 years old gentleman from Bakayia , a village in Makwanpur was diagnosed of lymphnode cancer 10months back. He has come back to the village and was in lot of pain , had foul smelling wound in the neck. He was managed by our health worker who put hin on Morphine for pain and cleaned his wound and taught the family members to do the dressing . His pain and foul smell improved. He died few weeks later peacefully at home with his family around him.

There are many such patients in our villages all across the country. Therefore, it is matter of urgency that home based care be expanded across the country.

James Harris Simons

1938-2024



We are saddened by the loss of our friend, Jim Simons, earlier this year, a man with extraordinary brilliance and heart- warming humility. Jim along with Marilyn has been supporting Hospice for a long time Of particular importance is their gift for the land without which we wound not be where we are today in achieving our dream of building the new Hospice Building.

We remember, on the day of Foundation stone laying ceremony, how he insisted on going down the slippery slope to the pit where the stone was to be laid . After worshipping, he laid the foundation stone. We shall cherish this forever.

Smiles like this keep us going.....