



Viseisei Sai Health Centre
LOVE ALL, SERVE ALL

Viseisei Sai Health Centre

Annual Report 2015



TABLE OF CONTENTS

VSHC Trust	4
Chairman's Report	4
Message from Stakeholders	5
Administration & Finance Report	8
VSHC Clinical Report	10
NCD & SRH Outreach Project Report	13
Package of Essential NCDs (PEN) Report	16
Mobile Clinic Bus	17
Health Promotion Report	20
CAP 2 Project Report	23
Waste Management Report	25
Trainee Interns Public Health Attachment Report	25
Young Mothers Project Report	27
Significant Events	28



Staff photo 2015 – Viseisei Sai Health Centre

Back row (L – R): Seremaia Koroi, Trainee Intern, Ashna Chand, Chandarrah, Lachman, Social Work Student - Mereaise, Jeffrey So, Lauren Houston, Markareta, Warsha Prakash, Lucy Thallon, Neeraj Chand, Trainee Intern, Shane Heath, Jyotishna Naidu

Front row (L- R): Dr Adi Latu Finau Dansey, Sr Kris Naidu, Dr Swaran Naidu, Professor Gyaneshwar, Moses Baseisei, Ishwar Chand

Right hand Corner – Achu, Sr Akisi, Pa, Jokapeci)

Viseisei Sai Health Centre (VSHC) is a community based charitable CSO set up in 2011 to contribute to the primary health care (PHC) needs of the community particularly those who

are underserved. It has a Memorandum of Understanding with the Ministry of Health and the Fiji National University. It is innovative in its approach and works in close consultation with the community and other stakeholders. It espouses human values of compassion, dignity, respect and equity. It believes in equality of race, gender, religious affiliation and social status and provides care to all without discrimination. VSHC has a strong commitment to clinical governance and a high level of management accountability. It seeks to provide effective, affordable, quality health care with an emphasis on prevention of disease and promotion of physical, mental, spiritual and social health. All services provided at the Health Centre are free. VSHC ensures that all its programs emphasizes on gender equality, social inclusion and child protection.

Mission

"To provide a community health service by mobilizing resources and collaborating with the community, government and NGO's to provide free quality health service with an emphasis on health promotion and disease prevention."

Vision

"To make quality, comprehensive health care accessible to all regardless of race, religion or socio economic status so that everyone can enjoy good physical, mental and spiritual health."

Viseisei Sai Health Centre Trust

Chairman:

Professor Rajanishwar Gyaneshwar

MBBS, MH Ed, DRCOG, FRANZCOG

Professor of Obstetrics & Gynaecology

Fiji National University and Lautoka Hospital

Secretary/ Treasurer:

Mr. Ashok Kumar

Finance Director

TCG Group of Companies, Sydney, Australia

Associate Professor Swaran Naidu

DSM, Dip Obs, FRANZCOG

Associate Professor of Obstetrics & Gynaecology

Fiji National University and Lautoka Hospital

Mr Vinod Patel

Director

Vinod Patel & Company Ltd

Fiji

Mr Dev Mishra

Director

Western Diesel Services

FIJI & Australia

CHAIRMAN'S REPORT

The Viseisei Sai Health Centre has been in existence for 5 years. The founders and trustees had a clear vision and mission. In this report I will reflect on our progress so far.

Our vision was "To make quality, comprehensive health care accessible to all regardless of race, religion or socio economic status so that everyone can enjoy good physical, mental and spiritual health". We now realize that the enjoyment of good physical, mental and spiritual health is not about providing "quality, comprehensive health care" but it is about empowering the community to embrace wellness by improving the quality of their own lives. To enjoy a fulfilling life one must be healthy in body, mind and spirit and one must respect the environment that one lives in. Individuals need the support of their neighborhood, communities and political leadership for this to happen.

The current NCD crisis and reproductive health issues have arisen because individuals are disempowered to take control of their life styles and avoid health risk factors. We eat the wrong food, drink alcohol and kava to excess, exercise less and smoke. We fail to understand our responsibilities to our children, engage in gender violence, and seem to lead a stressful, troubled life in an environment which we pollute on a daily basis both as individuals and as a country.

It is in response to these perspectives that VSHC is putting a lot of effort into empowering the community to enjoy wellness by embracing a life style which is nurturing to children, provides an environment in which people can live, work and age with dignity, mutual respect and compassion.

We have found that community engagement requires a good understanding of how the community functions and to identify the catalysts which will encourage them to become motivated, self-reliant and resilient. The 17 active Community Health Workers are vital for this engagement and in this report we will highlight their activities. We have also learnt that engagement with the existing structures such as the Ba Provincial Council, the District Administration of Government, and other Government sectors such as the Ministries of Education, Youth and Sport, Women, Children and Poverty Alleviation is important.

In this report we will also highlight our partnership with the Department of Foreign Affairs and Trade (DFAT) funded Fiji Community Development Program. We have just concluded a program which has extended over two and half years during which VSHC has learnt to become more effective in bringing about change in the community. This partnership has contributed to the change in VSHC's vision and mission. VSHC is also beginning to work with a more responsive community and multi sectorial partners.

We are also grateful for the support from UNFPA in commissioning a purpose built mobile clinic which will allow VSHC to continue with its outreach work in NCDs and SRH. However, to do this successfully we will need to find funds to run and maintain the bus. We must also be grateful for the opportunity to work with the EU in the Empowerment of Rural Women

and Girls in Reproductive Health. This project covered the Province of Ba in which VSHC strengthened rights of rural women and girls by providing them with knowledge, access and control of their reproductive health. There was a detailed report on this project in our last annual report.

Our other partners, the Ministry of Health and the Fiji National University have added a clinical and educational dimension to our work. We would not be able to run the clinical services without the help of MOH which provides a doctor, 2 nurses and some consumables. FNU has continued to send trainee interns for part of their rural attachment in community health and they have based a doctor to supervise the trainees.

Much of our work would not be possible without a dedicated team. They are recognized in this report and VSHC is grateful to them. The assistance, guidance and support from our Board of Trustees has been vital for our successes so far and plans for the future. Swaran and I say a big thankyou to everyone who has joined us in this journey.

Professor Rajanishwar Gyaneshwar
Chairman
VSHC Trust

MESSAGES FROM STAKEHOLDERS

1. Ministry of Health & Medical Services

*"Team VSHC,
Wellness to you
May I thank Viseisei for your great contribution to NCD prevention and control in 2015. You remain the PHC model of NCD delivery and I greatly look forward to working with you in 2016"*

Dr Isimeli Tukana
National Advisor NCD
Head of National Wellness Centre
Ministry of Health & Medical Services

2. Ba Provincial Council

"The Ba Provincial Council, under the iTaukei Affairs Board has been honored to operate co jointly with Viseisei Sai Health Centre. The Centre has made its presence felt in the District of Vuda and onto the neighboring district of Sabeto in issues concerning health, social and other relevant topics affecting our rural communities today.

They have never ceased to throw light on issues of national importance and they have always backed it up with data derived from extensive research which they have conducted over the years. The Centre has been a blessing for the people of Vuda and their innovative approach and new ideas have created new dimensions in how the Ba Provincial Council perceives and analyses issues. We will always be thankful and are indebted to the centre for their enormous contributions and tireless efforts."

Sa loloma tu yani.
J Toganivalu
PAS



VSHC AND MOH Team with the Roko Tui, Ba Provincial Council and Chairman of Bose ni Momo (Tui Vitogo) and Dr isimeli Tukana MOH National Advisor NCD

3. Ministry of Education

"The Viseisei Sai Health Center at Viseisei Vuda is a Trust that not only provides free medical services but also has programs that connects its services and programs to the community and more interestingly to the cluster of schools in the Vuda corridor. The Ministry of Education through the Divisional Education Office hereby acknowledges the network and partnership the center has with the schools in the Vuda Cluster of schools.

I am extremely thankful to Professor Rajat Gyaneshwar and Dr Swaran Naidu for their vision and forward looking in initiating programs that increase teacher's and children's understanding on NCD and health living habits. I also wish to commend the Centers Anti-Drug Campaign in Vuda District School, Lomolomo Public School and Gurukul Primary and the Wellness program promoted in the schools. Apart from these programs it is also noted that the Young mothers Project which was targeted at the young mothers because it had an overlapping effect on the lives and education of these young women. Surely this program will have a great impact on the lives of their children

To conclude this short note I wish to extend the my sincere appreciation on behalf of the Ministry of Education, Heritage and Arts to *Professor Rajat Gyaneshwar and Dr Swaran Naidu and Mosese Baseisei and the Team at the Sai Health Center for promoting wellness programs in the schools and increasing the awareness on the importance of living a healthy life style to sustain good health. I hope that we will continue to work in partnership through an integrated approach in 2016."*

**Albert Wise
Divisional Education Officer
Western Division**

4. **Iliesa Cabanaivalu – Volunteer Viseisei Village**

What do you see as the role of VSHC in relation to the Village?

I see VSHC as health educators, for wellness and healthy living. They are beacons for the community.

How did you become involved with the health center?

5 years ago when I was President of the local rugby club I first met Professor Rajat whilst the health center was being built. Involvement and relationship has grown from there.

What does the word community mean to you?

To me it is involving people. It goes with what I like, "working with the people".

What inspires you?

My father was a Turaga ni Koro. I want to follow in his footsteps, to be useful. I want the village to be clean.

My motto – "don't be idle". I want to be useful with my time

Where do you see the relationship between VSHC and Viseisei Village in the next 5 years?

I see more of a commitment to the community, with stronger ties and partnership between the Village and VSHC. The health center is a role model for the Village.

What interests do you have?

I am passionate about gardening and teaching children. I like being active and being involved with all types of sports.

If you could change one thing, what would it be?

I would like to change people's attitude, particularly towards health and wellness.

What is your vision for the Village?

I would like to see waste management properly managed and a system put into place in the village. I would also, like to see the development of a community garden and a sporting complex (gymnasium).

Any other comments?

I would like to thank VSHC for involving themselves in the community, for their work towards improving wellness. I would like to see more education and awareness through workshops. Personally, I would also like to thank the health centre for the education and support they have provided me, and for sending me to the Disaster Risk Management (DRM) Workshop recently. The skills I have learnt I hope to put into practice.



Iliesa is from Viseisei Village and is the Chairman for the Yaubula Committee. He has been volunteering his time with VSHC to assist in providing compost workshops to the community and the promotion of wellness through backyard gardening.

ADMINISTRATION & FINANCE REPORT



2015 was a challenging year. Ashni Prasad who joined VSHC in 2011 secured an appointment with EU and has moved to greener pastures. The office was lucky to secure the services of Mr. Neeraj Chand who had previously worked with Rotomould and Punjas. He managed Punjas wholesale and retail shop in Nuku'alofa, Tonga. Ashna Chand provided the continuity between Ashni and Neeraj and has continued in providing excellent support. The Director of finance and trustee has been in touch on almost a daily basis and has made frequent visits to support the office. There were many accomplishments that marked this year; the most noteworthy was the completion of the EU project which included an audit undertaken by auditors from Europe. Ernest and Young were involved in the audit of two projects with FCDP. The office was also involved in providing administrative and financial support to the ongoing FCDP project; the acquisition of the UNFPA funded mobile clinic bus, and the conduct of a UNDP funded project, the start of CAP2 and the negotiations regarding the grant from the International Women's Association (IWA).

The FNU grant for the administrative officer ceased in February and we have been advised that the UNFPA funding for the research officer will cease at the end of 2015. The second half of 2015 has been taken up by preparing administrative and financial support to new project proposals for 2016 and beyond.

VSHC has had 4 projects running simultaneously in 2015:-

1. *NCD project*

The NCD project continued with the funding from FCDP from October last year till may 31st this year. This project funding was subsequently extended for another 6 months till 30st November, 2015.

At the end of the first round of funding for the project, an audit was conducted by Ernest and Young for the period from October 2014 till May 2015.

2. *Mobile Clinic Bus*

UNFPA kindly donated a mobile clinic based on VSHCs EU funded project accomplishments. This project was about empowerment of women and girls about their reproductive health. A visiting UNDP team were impressed with the accomplishments of the project and recommended that UNFPA support VSHC.

3. *CAP 2 Project*

CAP 2 is a community development project which is funded by FCDP. It commenced in October and will continue until April 2016.

4. *Young Mothers Project*

UNDP funded this project which was driven by VSHC trained Community Health Workers (CHWs).

Contribution of Volunteers

Lucy and Shane started during the year, they initially came as Australian Red Cross Volunteers, this program is in transition, but we expect them to both stay in 2016. We have also had Jeffrey and Lauren spend a period with us during the year.



(Volunteer, Shane, conducting compost workshop)

Cash Donations

VSHC is fortunate to have five regular financial supporters who have continued their support since the inception of the health center. We are grateful to them. There have been several other donors who have donated when they have visited the health center. VSHC as a charity is dependent on this type of generosity.

Donations of Equipment's

Donors locally and from abroad have continued to supply us with equipment and medical supplies. An asset register is maintained for all such donations.

Policy Procedure Manual

The organization's operational manual is being updated regularly to reflect the alterations and adjustments made to the working environment. All of these changes are implemented with the approval from VSHC trustees.

Financial Reports

VSHC has continued to maintain its high accounting standards. We have had several audits with satisfactory reports.

Cost management requires stringent controls and these have been maintained robustly under the direction of the director of finance.

Neeraj Chand (Manager – Admin & Finance)
Ashna Kumar (Accounts Assistant – Admin & Finance)

VSHC CLINIC REPORT

Viseisei Sai Health Centre is dedicated not only to providing excellent patient care but also to making sure that we serve the needs of the people.

Through it all, we have been guided by the Ministry of Health & Medical Services values of: **Equity, Integrity, Respect for Human Dignity, Responsiveness and Customer focus**. We are improving the quality of life of every patient, every day. This concept of continuous improvement of challenging ourselves to do more and be more for our patients has driven us to places that few would have expected. We have an obligation to help our patients live their lives to the fullest. It is a responsibility we take very seriously and it is one of the many reasons we could not be prouder of the over 16234 patient consultations at Viseisei Sai Health Centre.

Across the full spectrum of care, we have deployed interventions, care improvements and clinical leadership that have had a dramatic impact on the overall quality of care and service.

At Viseisei Sai Health Centre, we view our role as fostering a health delivery system that is unique in scope, breadth and depth. We are committed to care for the whole patient, integrating quality, safety and efficiency. It is only because of the continued support from the Viseisei Sai Health Centre Trust and sound guidance from The Ministry of Health & Medical Services, that we prudently continue our quest to change the fundamentals of health delivery for individuals and to advance our understanding of how to boost their quality of life and address their medical needs, while being good stewards of our health resources.

Our patients are the central focus of attention in all of these efforts as we move into 2016. We look forward to receiving additional nursing staff, expanding our pharmacy and refurbishing our waiting area to cater for the growing numbers of patients. Also, we intend to introduce a queue management system that will be distinct to the health care services and make our patient service area more informed.

We applaud each staff of Viseisei Sai Health Centre for their commitment and expect a high level of attention, urgency and focus on ways to drive clinical activities toward the best patient outcomes and the delivery of extraordinary service.

But at Viseisei Sai Health Centre, we are just getting started. And we could not be more excited about what 2016 will bring.

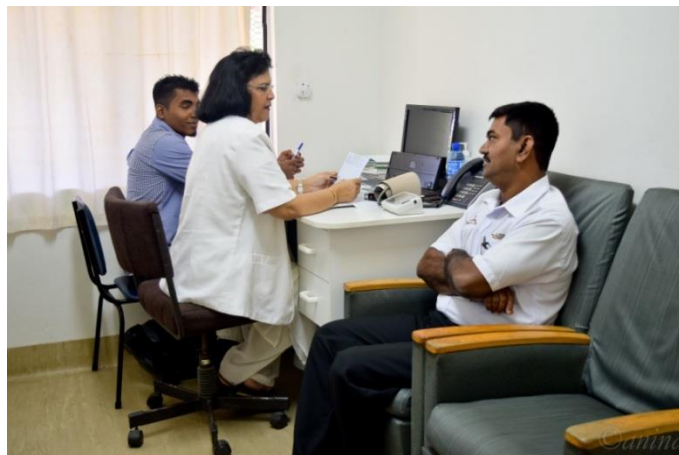
Dr Kris Naidu
Medical Officer-in-Charge
VSHC



S/N Makereta Attending to a patient



Dr Krish Naidu, the Medical Officer in Charge at VSCH clinic



Dr. Saras Nandan, senior visiting general practitioner conducting a consult with a medical student in attendance

Population Demography for Viseisei Zone for the 2015

	Itaukei	FIDs	Total
Population	2392	3459	5901
Child Bearing Age (CBA)	789	1140	1930
Crude Birth Rate (CBR)	34.28 per 1000	7.23 per 1000	18.13 per 1000
Crude Death Rate	10.87 per 1000	4.63 per 1000	7.12 per 1000

Births/Deaths

	Itaukei	FIDs	Total
Total Birth	82	25	107
Total Deaths	26	16	42
NCD Related	14	8	12
CD Related	10	5	15
Other Deaths	2	3	5

Family Planning

	Itaukei	Itaukei New Acceptors	FIDs	FIDs New Acceptors	Total
Family Planning Counselling (only in MCH)	88	-	62		150

Methods Used	Itaukei	Itaukei New Acceptors	FIDs	FIDs New Acceptors	Total
Oral Contraceptive Pills	33	11	44	8	96
Notisterat	19	3	1	1	24
Condoms	2	8	12	11	33
Depo-Provera	77	7	33	4	121
Total	131	29	90	24	274

Total General-Out Patient Clinic Number 2015

Months	Itaukei	FIDs	Others	Total
January	360	591	4	955
February	335	703	5	1043
March	304	694	-	998
April	265	611	-	876
May	288	561	3	852
June	317	642	4	963
July	315	811	9	1135
August	282	715	8	1005
September	301	755	5	1061
October	373	846	4	1223
November	301	849	1	1151
December	215	773	3	991
Total	3656	8551	49	12253

Total Special-Out Patient (SOPD) Clinic Number 2015

Months	Itaukei	FIDs	Others	Total
January	50	72	-	122
February	34	84	-	118
March	40	98	-	138
April	30	80	-	110
May	34	108	-	142
June	53	111	-	164
July	36	106	-	142
August	34	117	-	151
September	83	154	-	237
October*	64	112	-	176
November	30	117	-	147
December	45	30	-	75
Total	633	1333	-	2266

Maternal Child Health Clinic Report

Total "Well Child" seen in the year 2015 = 1715

Months	0-2MNTHS		2MNTHS- 5YRS		Total	
	ITAUKEI	FIJIAN	ITAUKEI	FIJIAN	0-2 mnths	2mnths- 5yrs
January	14	10	69	46	24	115
February	21	8	49	34	29	83
March	31	39	47	39	40	86
April	38	11	57	22	49	79
May	20	15	55	45	100	35
June	25	18	58	7	43	65
July	34	12	57	32	46	89
August	13	9	61	19	22	80
September	25	13	65	43	38	108
October	14	11	45	25	25	70
November	15	10	30	25	25	55
December	5	8	33	24	13	57
Total	255	134	726	600	981	734

NON-COMMUNICABLE DISEASE (NCD) / SEXUAL & REPRODUCTIVE HEALTH (SRH) OUTREACH REPORT

This report has been compiled by Amelia Ake and Jyotishna (Jenny) Naidu. Amelia is a trained nurse and has been working with VSHC since 2012; she has developed significant expertise in providing outreach clinical services, especially in the area of sexual and reproductive health. She has personally conducted more than 2000 Pap smears and breast examinations. Jyotishna Naidu has a bachelor degree in public health and is currently

working towards her Master's degree at FNU. Jenny was appointed on a UNFPA grant to support a Data Manager / Research Assistant; she replaced Sheetal Naidu in April. Jenny also replaced Sheetal as the Coordinator of the FCDP component of the project. Sheetal resigned to migrate.

VSHC has learnt that combining NCD and SRH is the most effective use of resources in its outreach work. The community is exposed to lifestyle risk factors which impact on health and wellness in general. VSHC has developed a considerable amount of experience in its NCD work commencing with the STEPS survey in 2011/2012 and a comprehensive intervention package to reduce lifestyle NCD risk factors in the community. These interventions have included working with other sectors other than health, such as education and youth and sports. Much of this work has been possible due to an initial funding from the University of NSW (UNSW) and ongoing funding from the Fiji Community Development Program, which is funded by the Australian Government.



S/N Amelia Ake screening for NCDs during outreach



Home gardening was started in 2013 and has been sustained



High Risk NCD Patients at an education Session at VSHC



Health educator, Warsha (R) educating community

The NCD project has been developing the capacity of CHWs to engage with the community in health promotion work. Perhaps the greatest success of the NCD project has been a better understanding by VSHC about the meaning of health promotion and understanding the underpinnings of the healthy islands framework.

Outreach activities (2013 - 2015):

Activities	Total Communities	Total Sessions	Total Beneficiaries
Outreach	4 villages & 17 settlements	354	5738
High Risk Clinics	21	111	3424

High Risk Education	21	69	1105
School Education	6	16	320
Preschool Education	3	3	150
Gardening	21	259	1738
Healthy Cooking Demonstrations	21	73	1293
Physical Activity	21	194	2081
Workshops	19 sessions	21	366
Composts	12	12	122

High Risk Clinic

VSHC has a total of 574 NCD patients and the patient's data is captured and updated weekly.

The table below shows the total number of patients with their diagnosis:

Diagnosis	Total number	Gender	
		Male	Female
DM	127	56	71
HTN	281	68	213
Dual	159	41	118
High Chol./CVDs	7	6	1
Total	574	171	403

PACKAGE OF ESSENTIAL NON-COMMUNICABLE DISEASES (NCDS)

Package of Essential NCDs (PEN) is a tool developed by the World Health Organization (WHO) which is a risk prediction chart for a 10 year risk of a fatal or non-fatal cardiovascular event using these specific variables - gender, age, systolic blood pressure, total blood cholesterol, smoking status and the presence or absence of diabetes mellitus.




Risk Levels for PEN



<10% (an individual has <10% chances of occurrence of any cardiovascular event in the next 10 years)



10 % to 20% (an individual has 10% to 20% chances of occurrence of any cardiovascular event in the next 10 years)

-  **20% to 30%** (an individual has <20% to 30% chances of occurrence of any cardiovascular event in the next 10 years)
-  **30% to 40%** (an individual has <30% to 40% chances of occurrence of any cardiovascular event in the next 10 years)
-  **>40%** (an individual has >40% chances of occurrence of any cardiovascular event in the next 10 years)

The VSHC NCD team has been implementing the PEN through the NCD intervention. The PEN score provides us with an objective tool for measuring our effectiveness in managing high-risk NCD patients and therefore impacting on premature death, limb amputation, blindness and kidney failure.

Using the risk assessment charts, each of the patients who present to the 'High Risk' NCD clinic is provided with a PEN score and colour coded accordingly. Every six months these patients are assessed – smoking status, family history of NCDs, their cholesterol, blood pressure and diabetes status for the scoring. The NCD team as well as the patients follow up of these scores to provide interventions, which include changing their lifestyle behaviours, as well as their management.

The table below shows the PEN scores 1& 2 breakdown:

Pen Score	PEN score 1	PEN Score 2
<10	210 (38%)	184 (8%)
10% to 20%	86 (15.7%)	64 (15%)
20% to 30%	68 (12.45%)	37 (8.87%)
30% to 40%	126 (23%)	99 (24%)
>40%	56 (10%)	33 (7.91%)
Total	546 (95.12%)	417 (76.37%)

From the total of 574 patients, 546 were classified initially with a PEN score and 417 have gone through their second follow up PEN score after 6 months. This represents 95% of the NCD patients.

We are trying to make sense of the PEN strategy in monitoring cardiovascular events in high risk NCD patients. We are planning to analyse the data in greater details in 2016.

"MOBILE CLINIC BUS

A mobile clinic bus has been donated to VSHC from the United Nations Population Fund (UNFPA). This was as a result of (United Nations Development Program) UNDP reviewing the European Union (EU) funded RH outreach project carried out at VSHC from 2012 - 2014. The bus has been designed and fitted out as a clinic, which can be used for confidential consultations. It enables the team from VSHC to travel into rural and remote areas of Fiji, providing sexual and reproductive health outreach and screening, servicing the community who may otherwise be unable to access services. The mobile clinic was officially handed over to VSHC on the 27th February 2015.

Between February and June the mobile clinic bus was used for Sai Camps in Balata (Tavua), Tagaqe (Sigatoka) and Drasa (Lautoka) for both RH and NCD clinics for which VSHC covered all the costs. From July until December the mobile clinic bus operated in conjunction with the NCD outreach program with support from UNFPA and VSHC. A kind donation was given to VSHC towards the end of the year which will assist in running the mobile clinic bus for NCD/RH outreaches for further outreaches.

A total of 46 outreaches were carried throughout this year with a total of 1344 women screened, counselled and educated on sexual and reproductive health.

SEXUAL AND REPRODUCTIVE HEALTH

1. During this reporting period, 21 patients with abnormal Pap smear results have been followed up. All of these abnormal cases have been followed up by the VSHC/RH nurse and referred to Lautoka Hospital for further management and treatment.
2. A total of 150 patients were seen at the Health Centre for follow up **Gynecology Clinics**, where 50 pap smears were also conducted. 10 were referred to Lautoka Hospital for further management.



A total of 46 UNFPA Mobile Clinic Bus Outreaches were conducted, out of which 1143 pap smears were conducted. A total of 27 women received family planning service through these outreaches.

The table below shows the total number of people seen during the outreach in the mobile clinic bus till date:

Area	Dates	Total Seen RH	FP Services Given	Safe And Counselling	Sex FP	First Visit Pap Smear	Current Pap Smear	Referral Cases	STI's
Balata	26/04/2015	49	2	49		16	40	2	3
Tagaqe	30/04/2015	36	0	36		13	31	2	7
Sai School	01/05/2015	66	0	66		19	56	3	6
Sleeping Giant	02/07/2015	4	0	4		2	4	0	0

Waikatakata	02/07/2015	15	0	15	5	8	0	2
Lomolomo Public School	03/07/2015	2	0	2	1	0	0	0
Lomolomo Hillside	03/07/2015	5	0	5	2	3	0	0
Lomolomo Sawmill	03/07/2015	1	0	1	0	1	0	0
Viseisei Village	07/07/2015	10	1	10	2	9	0	0
Anchorage	10/07/2015	1	0	1	0	1	0	0
Viseisei Back Road	21/07/2015	6	0	6	2	5	0	0
Saweni	23/07/2015	8	0	8	2	7	0	0
Lauwaki 2	24/07/2015	13	0	13	3	12	0	0
Black Town	28/07/2015	0	0	0	0	0	0	0
Smart Chef - Barara 2	30/07/2015	0	0	0	0	0	0	0
Vuda Back Road - Nagan Shop	31/07/2015	0	0	0	0	0	0	0
Vuniyawa	06/08/2015	3	3	3	3	3	0	0
Nawai Settlement	08/06/2015	4	2	4	3	3	1	0
Vuda Back Road	11/08/2015	4	0	4	2	4	0	0
Visiese Bypass	18/08/2015	9	0	9	4	9	0	0
Padarath Road	20/08/2015	7	0	7	0	5	0	0
Wairabetia Settlement	25/08/2015	18	0	18	3	18	1	1
Saweni settlement	25/08/2015	8	0	8	1	8	0	0
Drasa Seaside	27/8/2015	20	0	20	5	14	1	0
Wairabetia Rustums	1/9/2015	8	3	8	2	7	1	0
Velovelo Tank Road	9/02/2015	14	9	14	9	14	0	2
Napoidi/Natindro	09/03/15	3	0	3	0	3	0	0
Fulton College	09/08/15	26	3	26	10	26	3	3
Lauwaki Village	10/09/2015	5	0	5	2	5	2	2
Natabua Tramline	15/09/2015	16	0	16	6	12	0	0
YWCA Women workshop	18/09/2015	2	0	2	1	2	0	0
Navutu Settlement	23/09/15	20	1	20	4	13	1	1
Natokowaqa Housing	01/10/15	11	1	11	2	10	1	1
Vuda Point	06/10/2015	5	0	5	0	5	0	0
Barara 3	19/10/2015	4	0	4	2	4	0	2

Lomolomo road side	19/10/2015	2	0	2	2	2	0	0
Lomolomo Village	20/10/2015	2	0	2	1	2	0	0
Lomolomo Road side Settlement	22/10/2015	2	1	2	2	2	0	0
Lomolomo Seaside	27/10/2015	1	0	1	1	1	0	0
Lomolomo Hillside	29/10/2015	6	0	6	1	6	0	0
Lovu Sangam Temple	08/12/2015	15	0	15	3	9	1	0
Lovu Hart	10/12/2015	27	1	27	12	24	1	3
Natabua Housing	15/12/2015	8	0	8	1	5	0	0
Naviago Village	17/12/2015	16	0	16	5	10	1	2
Total	46	1344	27	1344	154	1143	21	35



S/N Amelia Ake conducting consult inside the bus Couch for examination inside the bus.

HEALTH PROMOTION TEAM

This team was led by Mosese Baseisei who has been working at VSHC since 2013. Mosese brings with him a huge network of strategic contacts in government and the community. He has a natural instinct for community development work and much of VSHCs success with the community has been because of Mosese's contacts and credibility. Working with him have been Seremaia Koroi and Jokapeci Tokalau and more recently Warsha Prakash. VSHC has also been very fortunate to have Sr Akisi Daivalu as part of the team, supporting and mentoring the CHWs. She has worked in various leadership roles in the community with the Ministry of Health.

VSHC has learnt a lot about health promotion and healthy islands since its inception. Our work has continued to grow and mature over the last year. We are now better able to understand the benefits of health promotion and how this can be put into practice in the community.

This year the health promotion team has been focusing on the revitalization of Health Committees and has continued to support the work of the Community Health Workers.

Revitalization of Health Committees and Community Health Workers

- *The former Minister for Health, Dr Neil Sharma, invited VSHC to progress CHW training and deployment. VSHC took up this challenge and appreciates the value that CHWs bring to health promotion activities.*
- Work has been undertaken to assist the community in developing an understanding of the importance of taking ownership of health and recruiting their own Community Health Workers. CHW's role is to initiate health promotion and wellness activities at community level. The CHW's act as a bridge between the community and the Health Service. Thus CHWs are nominated by the community for training and subsequently supervised in their activities by the Zone Nurse. VSHC is formalizing this supervision by providing the CHWs a diary to record all their activities. There is a regular debriefing meeting at the health center to identify any issues. An example of the CHW activities include:
 - Dispelling myths and misunderstandings which often impact on community attitudes and values regarding their health and wellness
 - Informing the community in the vernacular using language that people understand and are familiar with advocating within the cultural context of the community. Many communities have pre-formed belief systems based on past experience and incidence.
 - It is important to have the support of the community structures such as the village council health sub committees, through the advisory council or, support from mothers club and youth clubs with due recognition from the Provincial Councils office, the District Office, the Ministry for Women and the Ministry for Youth. CHWs require support from within the community to be effective. *Without support and respect from the community the CHWs feel very vulnerable and insecure. Traditionally Villages were encouraged to have health committees to inform the Vanua hierarchy on health issues. Unfortunately many of the health committees in Vuda and the Ba Province at large have become dysfunctional and require support to revitalize. VSHC has been working closely with the Ba Provincial Council and the District Officers to develop strategies to re-establish these committees where they no longer exist and to strengthen those committees that exist, but require additional support. The Settlements have Advisory Councils which are established by the District Commissioner and supervised by the District Officers. VSHC has struggled to make head way with the Advisory Councils so far in spite of the fact that the Advisory Councils were invited to help VSHC develop their work plan in 2011. VSHC need to work significantly harder to meet these challenges as the Advisory Councils are the major development links to disempowered communities which are generally very poor. These communities are often marginalized and do not have access to normal government services.*

Managing NCD and Intervention at Community Level and Advocating for Women's Empowerment in Reproductive Health

- Lifestyle risk factors remain a major challenge for both NCDs and sexual and reproductive health. It is difficult to change individual lifestyle and VSHC is beginning to realize this. The SNAP tool which has been used has not been evaluated for effectiveness. VSHC is planning to undertake a repeat STEP survey once funding is

available. The SNAP tool has provided the main thrust of VSHCs intervention in changing lifestyle risk behavior for NCDs. VSHC is planning to review its health promotion activities in 2016 and align it with current evidence based practice from other developing countries.



Young girl holding education material

During outreach

Outreach health promotion session

- VSHC is convinced that any behavioral change requires grassroots involvement of the community. To this end a pilot project is being led by Shane working with Iliesa from Viseisei Village.



A healthy cooking demonstration



CHW Iliseva checking blood glucose on outreach

COMMUNITY ACTION PROGRAM (CAP2)

Background

One of the most exciting developments in our association with the Fiji Community Development Program (FCDP) has been the Community Action Program (CAP 2). VSHC was invited to participate in this by nominating two potential leaders for sustainable community development. VSHC nominated Seremaia Koroi and Adi Jokapeci Tokalau for this. Koroi is a former Head Boy and Cadet Leader from Queen Victoria School and subsequently worked as a Peer Educator in the Family Life Education Program. He has been working with VSHC since 2013. Joka has a Bachelor in Public Health from USP and is currently undertaking post graduate training in statistics. She has worked with VSHC in both the RH and NCD projects. Both Koroi and Joka have great leadership potential to be realized.

The Community Action Program (CAP) is designed to:

- Build the capacity of CSOs in Fiji to be able to engage more effectively and in a participatory way at the community level;
- Encourage community-driven development; and
- Deliver services to rural and remote communities

Objective

- The objective of this program is to develop a Community Action Plan for the 4 communities that have been chosen from the Viseisei zone and to train the two staff chosen in community development. .

The CAP 2 training program is run by the Centre for Social Change, with local Fijian expert input. The program is a professional development opportunity that brings together current, global best practice and participant experience and knowledge, into an interactive, practical and strengths-based learning program. The CAP2 staff will attend block training session during the project.

CAP2 CSO Staff Development Program is an intensive program comprising of formal training workshops, self-directed learning and field projects.

Capacity Building Workshops

Block 1 Training

To understand current development themes and how these relate back to Fiji and participants work. Trainees were given a self-directed learning assignment to be presented at the end of Block 2.

Block 2 Training

Was directed at developing community engagement skills through power mapping and profiling.

Gender Equality and Social Inclusion (GESI) Training Workshop

This training involved sharing of CSO experiences in GESI related activities. This activity identified the importance of shared learning in dealing with major challenges in the community.

Community Based Field Work

The field work emphasized participatory activities to mobilize the community to engage in identifying challenges, planning interventions to meet the challenges, culminating in a prioritized community development program which is owned and lead by the community. Koroi and Joka have chosen four communities to work with. These activities included:



1. Workshops with social group leaders
2. Community meetings
3. Focus group discussions
4. House-to-house profiling
5. Household surveys
6. Interviews

At the end of 6 months a community action plan will be completed by the 2 villages and settlements. They will then be able to use these plans for their development and to advocate for assistance from the government and other agencies.

WASTE MANAGEMENT

The recruitment of Shane Heath as a Australian Red Cross / Australian Volunteer for International Development volunteer, has led to a new initiative in waste management. Shane brings considerable amount of experience which will ensure that the project is a success. Underpinning the project are health promotion principles which are based on community ownership and involvement to ensure sustainability.

VSHC is situated in a rural area and supports the communities in the Viseisei Health Zone. Waste management is a growing issue in the area, with no infrastructure in place to support the communities outside the town council boundaries. The Community Health Workers working with VSHC and other community members are requesting for assistance to manage the problem. In the last six months education has been provided to the VSHC staff and the community health workers, and compost workshops have been carried out throughout the area. The health center is in the process of setting up an improved system, with composting and waste separation.

Iliesa Cebaivalu from Viseisei Village is championing this project on behalf of the village. To start tackling the issue, a three day clean-up campaign was organized, which took place in December. The event was a great success, with the Village planning to have an annual clean-up campaign. Further interventions will be put into place across the health zone in the



Shane Heath
Australia Red Cross Volunteer/ Waste Management Officer

TRAINEE INTERNS PUBLIC HEALTH ATTACHMENT

The College of Medicine, Nursing & Health Sciences MBBS program is of six years duration.

The final (MBBS6) year is a training internship year comprising of 20 weeks of tertiary hospital attachment and 20 weeks of community-based (primary health care) attachment.

During their 20 weeks at the public health setting (sub-divisional), the Trainee Interns (TI) from Ra, Tavua, Ba, Nadi & Sigatoka hospitals rotate through the Viseisei Sai Health Centre (VSHC) for a period of 2 to 3 weeks.

This year 33 TIs had the opportunity to be part of VSHC's workforce thus gaining insight into its unique staffing, programs and activities.

These TIs worked alongside the clinical and especially the non-clinical staff (Health Educators, Health Promotion Officer & Community Health Workers) in the planning and implementation of programs that are vigilant in promoting and protecting the health of our communities thus supporting the core values of Public Health.

Winslow, 1920 defined Public Health as "*the science and art of preventing disease, prolonging life and promoting health & efficiency through organized community effort*".

Fiji and the Pacific need more public health doctors since primary health care success or failure determines the disease burden in secondary and tertiary care levels.

Understanding and adopting the core values of public health will help doctors to holistically assess and manage patients and their communities rather than being restricted to the usual system of diagnosis & treatment.

Our aim is to engage the TIs in our health promoting activities to help them gain understanding and hopefully ignite an interest in public health by the end of their 2 to 3 weeks attachment.

This year, the TIs were instrumental in the implementation of activities such as:

- NCD awareness/screening & counseling in the villages and settlements
- Reproductive Health awareness/ pap smear testing during outreaches
- MCH mothers- education on management of common illnesses, immunization, pap smears, family planning, breastfeeding and infant feeds
- Kindergarten- Nutrition & backyard-garden projects (2 schools)
- Backyard Gardening in communities
- Waste Management & Composting trainings in villages/settlements
- Community Health Worker Workshop
- Empowerment of Women Workshop
- Young "Teenage" Mothers Project
- Turaga ni Koro/Advisory Councilor awareness programs etc.

Congratulations to all the 33 TIs who graduated on Friday, December 11th.

We hope that these TIs will continue to grow in primary health care in order to make a difference in the health & wellbeing of our nation in the years to come.



Trainee Intern, Isaac, assisting Ilesia at compost workshop in the community



Trainee Interns, Fane & Fulori providing one to one education on during outreach



Trainee Intern, Kandy, educating community members during outreach

Dr Finau Dansey
Lecturer/ Western TI Public Health Supervisor
Fiji National University

YOUNG (TEENAGE) MOTHERS PROJECT

The NCD team and the community health workers (CHWs) attended a UNDP - SCEFI capacity building workshop where they identified teenage pregnancy as one of the major issues in their community. A successful proposal was put forward for a small grant on behalf of the community, through VSHC.

The CHWs' (trained under the NCD project) initiative succeeded in getting the funding for the project. They identified the young (teen) mothers in their respective communities and

also helped with administering the initial "Needs Assessment" questionnaire. This shows their responsibility towards their communities and understanding of the significance of wellness. The project was undertaken over a six month period, ending in July 2015. 33 young mothers were identified from Viseisei and Lauwaki, and 20 completed the needs assessment. Following this, 3 phases of workshops took place, with 16 of these women attending different phases. 8 young mothers were able to complete the full program.

Most of the Young Women reported that they have limited opportunities, and during the needs assessment expressed their desire to pursue their original goals in life of potential employment and other income generating opportunities. The project has been successful in empowering the Young Women and providing them with a voice and an opportunity to express their needs. They have been provided with information and linked to other stakeholders who can assist them to achieve their goals.

The project has also been successful in bringing these young women together to form a support network. The young women have now formed a group and have been registered with the Ministry of Women, Children and Poverty Alleviation. They are looking to start some small income generating projects, and have started to grow fruits and vegetables in their backyards.

A training workshop has also been organised and funded by Ministry of Youth and Sports (MYS) and carried out by Australian Pacific Technical College (APTC). This training was held to build capacity and enhance skills to create future employment opportunities for the young mothers. Since this training, 3 Young Mothers have been employed.

SIGNIFICANT EVENTS

- 1. VSHC received a visit on the 29.10.2015 from the Honorable Minister for Health_Mr. Jone Usamate.**

"Visited the health center and am impressed with the activities being undertaken in particular the upstream activities that will provide food for thought in considering approaches to be used for the country. Thank you for all your efforts."



Minister for health standing with VSHC staff.

2. Visit from Assistant Minister of Health & Medical Services, Veena Bhatnagar

Visit from Assistant Minister for Health: Mrs. Veena Bhatnagar's. On the 15.1.2015, Mrs Veena Bhatnagar visited the health center. A small presentation was given by the staff providing an overview of the health Centre and the outreach projects.

3. International Women's Day Celebration - "Empowering Women – Empowering Humanity: Make it Happen"

On the 17.03.2015, an event was held at VSHC to celebrate International Women's Day and to launch the Reproductive health booklet & Reproductive health project Report. The chief guest was Andrew Jacobs, the EU Ambassador for the Pacific.



(Momolevu na tui vuda with chief guest Mr. Albert Wise, ADO Lautoka Yasawa and UNDP Officer Rusiate)

4. Young Mothers Project Launch

On the 18.04.2015, the Young Mothers Project was launched at the health center. A project aimed at empowering the young mothers of the Viseisei zone. On the 29.05.2015, the Young Mothers Project concluded with a "Graduation Program" at the health center. All the participants received a certificate.



5. Visit from the zone chair of the international Sathya Sai service organization for Australia New Zealand, Papua New Guinea and Fiji.



Brother Neville Fredrick's, talking to the staff.

6. Completion of DFAT funded FCDP managed NCD project.

On the 27.11.2015, an NCD project reflection meeting & luncheon was held at the health center for the completion of current project.

