

ARDINGLY OLD JESHWANG ASSOCIATION: A.O.J.A

Chairman's Annual Report 2014-2015

The Trustees are pleased to present their report for the year ended 30th June 2015

AOJA was formed in 1993. Its aim is to provide affordable healthcare to the community of Old Jeshwang, an urban village of some 20,000 people, in The Gambia. To this end, in 2000, we built a modern health centre, which we now staff. Although unable to support it financially the Gambian government accepts our facility as an integral part of its health care system.

The Charity registration number is 1024627 and is governed by its Constitution dated 6th August 1993.

Registered Office: Avins Bridge Cottage, College Rd, Ardingly, West Sussex, RH17 6SH

Mr Stephen Doerr. : Chairman

Mrs Peggy Guggenheim. : Secretary / Administrator

Mrs Barbara Monk. : Treasurer.

The trustees are the above and in addition: Mr Lynn Wilson, Vice Chairman
Mr David Ogilvie.

The charity's bankers are Barclays and all three officers are signatories.

Finance

The detailed results of the year are set out in the annexed Receipts and Payments Account. The cash funds, without charge, remaining at the end of the year, of £26,765, reflect a surplus of £10,707. The consolidation of our financial position will enable us to proceed with the expected and much needed replacement of our generator along with some other delayed building and plant renewal. The Dental Surgery has now been commissioned as part of our sustainability programme with some income expected on - stream within the next 12 months.

We are always mindful of our commitment to support the monthly salaries of 45 staff and continue to maintain a 'six month running cost fund' in line with good financial governance. Our cash flow continues to benefit from a more stable exchange rate with the trend in fluctuations being in sterling's favour.

Sponsorship

The sponsorship scheme continues to be our main source of regular income. Our sponsor pool has plateaued at about 130 supporters, giving a monthly income of around £2000, which underpins the running costs of the Health Centre including salaries and overheads. Inevitably we lose some of our 'more elderly' long standing supporters but their places are always filled by new sponsors who are often impressed by the directness of our funding chain to the Gambia, which allows little scope for loss or wastage. The increased income from additional clinic activity has enabled the O.J management committee to fund its own staffing demands

and decisions. Separate fund raising in the UK has continued to support new initiatives and essential refurbishment. These events have included representation at local country fairs, charity dinners, BBQs, and concerts. We are particularly indebted to our group of corporate sponsors; St. Peters Church Ardingly, St. Nicholas Church Brighton, Worth School, Bidborough Primary School, and Redcoat Express Gatwick.

Clinic Activities

The activities of the health centre continue to grow, with the infant welfare clinics thriving. Deliveries at the clinic have plateaued at around 30 per month which could be the expected level for our catchment area. Approximately two-thirds of the women attending the antenatal clinics deliver their babies at the health centre.

The general out-patient attendance, an important part of the clinic programme, is now above 1300 patients per month a significant increase on last year, as news of our high standard of care continues to spread. The clinic has now been able to fund a doctor on site twice a week focusing on the 'under – fives' but we are still looking to increase this provision when a suitable appointment can be made.

Under a government programme the centre has trained its first 'home grown' midwife who is due to graduate later this year.

The 'feeding' programme, initiated to meet any acute nutritional needs, continues, as does the anti-malaria 'bed net' project with the distribution of pre-impregnated nets.

As part of a Global Health Fund initiative the Health Centre continues to be a counselling and testing centre for HIV/AIDS.

This year saw the commissioning of the dental surgery where the work of our dentist and his technician is already being much appreciated by the local community.

The ambulance continues to provide key transport for patients from home to Health Centre and emergency transport to hospital. With its distinctive Old Jeshwang logo it has also done much to make the services of the Health Centre more widely known within the community.

We are home to the Area Public Health Officer whose office was given a solar energy facility but its 'hoped for' possible extension to other parts of the Centre could be technically difficult.

Future development.

Throughout the year groups have continued to go out from the UK to give specialist support in midwifery, primary health care, medical research projects and building maintenance. The retention of high standards in all these areas remains a priority and continues to be commented upon by both visitors and new patients to the centre.

The income from the new Dentistry is due to come on stream this year increasing the centre's financial independence and will help to underwrite our main function of primary health care.

Brighton and Sussex Medical School (BSMS)

The elective programme continues to be available with Brighton and Sussex Medical School and involving the Medical Research Council (MRC) in Fajara. Students stay at the MRC for 6 weeks, spending one day a week at our Health Centre, usually a Monday or Tuesday the busiest days, and the remainder of the week at the MRC. Generally two students from BSMS go out at a time, when they are able to visit other local medical facilities apart from helping with our Ante-natal and Infant Welfare Clinics. Provision also remains to support students studying for the M.Sc. in Global Health.

Research

With the increasing number of births at the health centre we continue to audit the birth outcomes. This study will examine the effect of maternal anaemia during pregnancy on the well-being of the mother and baby at delivery. It will also indicate what can be achieved in The Gambia in a health centre with facilities such as those available at Old Jeshwang. A study of cardiovascular risk factors in Gambian adults (in conjunction with the MRC) is also planned.

Pharmacy

The revolving drug fund has kept us well stocked but the system still requires monitoring in terms of suppliers and rate of consumption. Additional deliveries from the UK and other sources have helped to maintain stocks of essential items but with provision in the Gambia continuing to be uncertain our health centre can often be the only source, for the general public, of some key drugs.

Buildings and Plant

The buildings remain in good condition, with the continuation of our rolling plan of redecoration and visits from groups of UK sponsors who are always able to put their varying skills to good purpose.

Our magnificent 40+ year old generator still cuts in most days to cover for the regular power cuts which are a feature of Gambian life, but its maintenance costs have steeply risen and it has to be replaced. With the funding now in place we are already well advanced in confirming the specification and sourcing of a new unit along with planning the refurbishment of the generator shed.

Old Jeshwang (OJ) Management Committee

The O.J. management committee continues to be ably led by its chairman Emmanuel Stafford who in supporting our administrator, Abdoulie Sowe, retains a good team spirit and sense of ownership amongst the staff.

The system of monthly reporting continues, enabling us to respond more accurately to changing circumstances at the centre where our staff work in an uncertain economic climate.

Risk Assessment

The trustees have identified and are aware of any risks to which the Charity is exposed and will keep this under constant review to establish procedures to mitigate those risks.

Signed on behalf of the Trustees

Stephen Doerr
Chairman.

31st July 2015