

Health and Wellbeing Report

This year has been a challenging year for RMFC. With the outbreak of The Dengue fever epidemic in October and in March the COVID 19 Virus.

The development and implementation of processes including the Medical and Dental, Infection control and hand hygiene policies and procedures, have proven to be of great benefit. The completion of risk assessments and reporting of incidents as they occur has improved both communication and health outcomes.

The Dengue fever outbreak started in October 2019. Asa contacted the Director of Padad's Health Clinic for advice on the prevention and treatment for the infected children. The children were placed under the mosquito nets and all the sick children were moved to the volunteer dormitory for isolation and close monitoring. This was done in an effort to reduce the number of infections as it is known to be spread from person to person from mosquito bites. Children were treated with paracetamol and electrolytes as per instructions from the local health clinic. Asa observed and monitored the children for symptoms, some children developed fevers, nausea and vomiting and became quite unwell. A total of 36 children developed Dengue fever and required admission to hospital. Ten children were transferred to Chaing Rai Regional hospital. Asa was kept busy taking children to both the local Maesuai hospital and Chiangrai regional hospital and should be congratulated on her efforts.

We were truly fortunate to have had visitors from Australia and New Zealand during this time that provided care and assistance on site and we offer our sincere gratitude to those volunteers. Unfortunately, due to the outbreak some visitors were restricted in their access to the mission because of the risk of developing Dengue fever.

The following strategies were implemented to reduce the risk of infection. The mission was fumigated by the health authorities, the grounds were checked for areas where mosquitoes breed such as stagnant water and these areas were cleared. The children are now encouraged to wear long sleeve clothing and use mosquito repellent. It was fortunate that all the children made a full recovery.

In March this year, the next challenge began. The COVID 19 Virus. Asa once again should be commended for her quick response. She contacted the local Health Department. Children were quarantined for 14 days and have been unable to attend school as schools were closed, visitors were not permitted to the site as recommended by the Health Department. We are currently waiting for further announcements and instruction from the Thai Health Department with regards to the isolation imposed on the mission. Unfortunately, it was my intention to visit in March, however I had to cancel my trip due to the COVID 19 Virus.

The introduction of correct hand washing technique was demonstrated to the children and practiced on my recent visits and hand washing posters used on site have proven to be a beneficial resource given the current situation. Asa has supervised the children with the correct hand washing technique and they now appreciate the importance of correct hand washing, this has become a life-saving skill.

During this time of social distancing the children have been making material face masks and soap bags. This project instills the importance of preventing the spread of infection. They are also practicing their sewing skills and creativity.

In September 2019, the new children commenced the immunisation programme and all other children received their required immunisation including Hepatitis B and Hepatitis C.

Nosaya has had follow-up visits to an ophthalmologist and been diagnosed with a strabismus last year. Further appointments were scheduled, and she was last seen on September 23rd at Chiang Mai hospital. Her next appointment is booked for 1st June 2020.

The children were visited by Dr Kevin's medical team from the USA on the 4th November for a general check-up. Children also attended the dentist in September. Asa recorded and forwarded data on the children's visit. Records indicated fifty-four children attended the dentist, twenty-six children's teeth were in good condition. Other children were treated for tooth decay and tar build-up. It was reported that one new child had 6 teeth decayed. Dental treatment consisted of hygiene, fillings and tooth extractions. The dental program is proving to be a success as children attending the dentist on a regular basis have shown a vast improvement with less children requiring intervention as they mature.

Private Health care has also proven to be of benefit for the new children - this has been trialed for two of the children. With the medical issues that have presented over the last 12 months, it is proving evident that in an economic sense, the introduction of private health insurance will need to be considered to cover the children in the near future. Private insurance would make health care at the local Mae Suai Hospital available to the children, it does not however cover them for other hospitals. This will be a project we should look at implementing in 2020 as a priority, given sufficient funding.

RMFC are incredibly grateful for the sponsors and the generosity of so many people who donated money for the medical care of the children during the Dengue fever epidemic. The ongoing support of sponsors, health care workers, teachers, trades people and others who share their skills and talents with the purpose of helping the Children. This support makes it possible for the children to have access to quality health and education. We hope and pray that soon the children can return to school, and we can visit the children again. They are a wonderful family that have joined together through these difficult times.

Over the next year we will be revising policies on visitors to the mission to maintain a safe environment for the children. We also have a large number of teenagers and we need to provide them with health education so they can maintain a quality of health and wellbeing as they develop into young adults. We hope to discuss what is required in terms of the consideration of strategies to ensure we are meeting their personal needs.

Communication has been improved by use of documentation and maintaining complete personal electronic files on each of the children and we aim to improve the use of this over the coming year as this has been a work in progress.

It's been a pleasure to be part of the hard working and diligent team that is the committee for RMFC and I thank them for their continued support of myself as well as their selfless efforts on behalf of the children. I would also like to thank Asa whose efforts in implementing ideas and procedures that we have developed has demonstrated a high level of professional commitment as well as personal sacrifice.

In Good Health & Wellbeing

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(Registered Nurse)