

Supporting Community Health



**The
Britain-Nepal**

medical trust

Annual Report 2017-2018

BNMT project area

BNMT NEPAL PROJECT COVERAGE DISTRICTS





Gillian Holdsworth



Prof. S. Subedi

Chairs' Foreword

Last year the Britain-Nepal Medical Trust held its 50th anniversary – a significant event for any organisation, but especially a small charity such as BNMT. A reception was held at the Nepalese Embassy in London in November 2017, kindly hosted by the Nepalese Ambassador (His Excellency Dr Durga Bahadur Subedi). Six members of the original BNMT team were in attendance, as were many Trust members from over the years.

In last year's annual report, we described how BNMT had established and registered a Nepal-based organisation, Birat Nepal Medical Trust (or BNMT Nepal), in 2012 which would provide a local partner for our work. This was part of a longer-term strategy to ensure the longevity of BNMT's values and vision.

BNMT Nepal is now the implementing partner of most of BNMT UK's work in TB control, community health and post-earthquake rehabilitation and reconstruction. BNMT UK continues to offer oversight and mentoring to BNMT Nepal, to ensure that BNMT Nepal can benefit from the partnerships, collaboration and success of BNMT UK and ensure their long-term sustainability.

This report shows how our partnership has boosted the health and well-being of communities across Nepal over the past year, and how we are strengthening the country's health systems and services with a view to the future. None of this would have been possible without your support. Our heartfelt thanks to everyone who has contributed to our work over the past 50 years.

Gillian Holdsworth

Prof. S. Subedi OBE, QC
Joint Co-chairs of BNMT UK

Patrons and Trustees

Royal Patron

HRH The Prince of Wales KG, KT, GCB

Patrons

Sir Christian Bonington CBE, DSc(Hon)

Dr Robert Fryatt

MB, BS, MD, MPH, DTMH, MRCP, FFPHM

Prof Sir Andrew Haines

MB, BS, MD, FRCGP, FFPHM, FRCP, FMedSc

Lady Hughes-Hallet

Dr J.O.B. Rosedale

Col J.N.B. Stuart

Trustees

Dr G. Holdsworth – Co-Chair

Prof S. Subedi – Co-Chair

Dr R. Dhital

Mr J.W. Mecaskey

Dr J. Payne

Company Secretary/Administrator

Dr Mashbileg Maidrag

Cover photo:
A Sherpa girl



Kulesh Thapa

A Message from the Country Representative

The past year has been a busy one as BNMT UK celebrated its 50th anniversary in Nepal as well as in the UK. This came shortly after the celebrations of 200 years of Nepal-UK friendship and the first official visit of Prince Harry to Nepal.

Over this year we have seen the successful transition of many BNMT programmes to our partner organisation, BNMT Nepal. We continue to support and mentor the BNMT Nepal board and senior staff to ensure the long-term sustainability of the organisation.

It has been exciting to watch the growth of BNMT Nepal as it takes responsibility for many of our programmes. Among these are our major TB programmes in collaboration with the National TB Programme, the World Health Organization and Liverpool’s School of Tropical Medicine and their Impact TB research. Exciting new opportunities have arisen to work on adolescent sexual and reproductive health with support from the Amplify Change challenge fund. We have also embarked on an innovative programme in partnership with Stonybrook University (USA) to trial the use of drones to transport TB supplies and specimens.

This is my last year as country representative of BNMT and I would like to thank everyone who has been instrumental in the success of BNMT over the years. I believe that BNMT Nepal is well placed to continue to deliver its good work, and I wish BNMT Nepal and its staff all the best, from the bottom of my heart.

Kulesh Thapa

50 YEARS OF BNMT

The 50th anniversary of the Britain-Nepal Medical Trust was marked in both Britain and Nepal. In London, more than 70 supporters and former members of the Trust – including some of its founders – attended a reception at the Nepalese embassy on 16 November 2017 (see opposite page). In Nepal, BNMT and its partners, including representatives of the government and international organisations, gathered at Park Village Resort, Budhanilkantha, on 1 December.

In March 2018, four founders of BNMT – members of the original team of volunteer medical staff who set out from Britain in 1967 – returned to Nepal to visit the Trust. It was an opportunity to share their memories with today’s BNMT workers, and to see the progress the Trust has made over the past half-century.



BNMT Nepal board and staff members on the 50th anniversary of BNMT, Kathmandu December 2017.

The BNMT 50th Anniversary Celebrations 2017

by Johnny Payne, Trustee



Left to right: Mr Sharad Aran (Deputy Ambassador), Sheena Ward, John Ward, Dr Durga Bahadur Subedi (Ambassador), Gillian Kellie Stewart, Rosemary Boere (nee Reid); Barney Rosedale, Peter Hawksworth

*This year the Trust became 50 years old,
So, it seemed only fair and fitting to hold,
on a chosen day in mid November,
an event to celebrate, and to remember
All the achievements that made the Trust strong,
and able to last so remarkably long;
And the many people from over the years,
from the current staff to those first pioneers,
supporters and friends, from the present and past,
without whom the Trust would have struggled to last.*

*It was held in the embassy of Nepal,
territory suited to one and all,
where, in a way, the whole thing started,
when the team met up before they departed,
the first eleven, that intrepid band*
who then set off on their trek overland,
arriving unscripted in Kathmandu,
saying, "here we are, now what can we do?"
Then being sent off to heroically try
to improve health care in the Eastern Terai.
In the mud and the dust, the heat and the sweat
they confronted the endless needs to be met.
In time, the Trust's energies, skills and deeds
diversified to meet different health needs.
Responding to what they learned and could see,
they branched out to tackle the scourge of TB
grass roots community work was begun,
schemes to bring medicines where there were none,
sustainable, flexible, small and local
the aims and strengths remained simple and focal.
Through turbulent times, the Trust has survived,
sometimes it's struggled, sometimes it's thrived.
Much changed, but the ideal persisting, somehow
it made it to reach where we are now...*

*So everyone gathered, the short and the tall,**
in the fine stately Embassy of Nepal,
ex-members, and many a loyal supporter,
directors, trustees and an ex-trustee's daughter,**
meeting and mingling, to chat and to share,
to talk of Nepal, and the times they were there.
Then came the speeches, first off to hear
from a highly significant pioneer,**
of the overland trip, the bold course that they charted,
of the Trust's conception and how it all started.
The Nepali Directors and Trustee co-Chairs
then spoke of the current state of affairs,
of challenges, changes and reincarnation,
and the realised goal of full Nepalisation,
how the BNMT UK has begat
the new Nepal Medical Trust of Birat,
this fully fledged NGO, that has grown
to the point where now it can stand on its own.
Last spoke our host and honourable guest,**
who at his own most generous behest,
feted a few, who all would agree
contributed greatly to BNMT,
especially the legendary Ian Baker,
longest serving Trustee, mover and shaker.
After all this, some refreshments were needed,
so off to the buffet the gathering proceeded,
and there a delicious Daal Bhat was consumed,
reflections and conversations resumed.
Slowly the memorable evening dwindled,
new contacts made, old friendships rekindled.
The celebrations had come and had gone,
but the BNMT keeps rolling on.*

* Six of the original team were there for the celebration.

** Don Patterson, ex-member and trustee was as prominent as ever.

*** Dr Kulesh Thapa and Suman Gurung.

**** Ian Baker's daughter Hannah was there to receive his honour.

***** Dr Barney Rosedale, in Nepal 1968-1972.

***** His excellency the Ambassador of Nepal, Dr Durga Bahadur Subedi.



Microscopy technician at work

Putting an End to Tuberculosis

BNMT works with national and international partner agencies to end TB in Nepal. The Trust focuses on case-finding in communities, and improving TB testing and diagnosis.



A TB education poster

Tuberculosis (TB) is curable and preventable, yet it kills more people worldwide than any other infectious disease. In 2016, more than 10 million people around the world fell ill with TB and 1.7 million die from it. More than 95 per cent of TB deaths are in developing countries like Nepal.

Tackling tuberculosis has been a constant theme throughout the Trust's 50 years in Nepal, making diagnosis and medicines accessible even in remote communities and pioneering new forms of treatment. Much progress has been made over the years, but new challenges have arisen, notably multiple drug resistant TB and TB-HIV co-infection.

Today, BNMT supports TB control by ensuring that cases of TB are found, accurately diagnosed, and treated. For this to happen, the general public need to know the signs of the disease and understand the importance of seeking treatment; and diagnosis and treatment methods need to be accessible and effective.

Health education

To improve public understanding of the disease, the Trust runs health education programmes in schools, where students learn about the signs and symptoms of TB and are encouraged to share the knowledge in their family and community (see left).

Finding cases

In the TB Reach project, the Trust works with female community health volunteers (FCHVs) to find cases of TB, trace the contacts of people who have the disease, and encourage people in high-risk groups to go for testing. This project operates in eight districts: Pyuthan, Argakhachi, Bardiya, Salyan, Kapilvastu, Gulmi, Achham and Doti. In four of these districts, BNMT has installed GeneXpert machines in government hospitals, to improve the speed and accuracy of diagnosis.

Case-finding in the community

Ujire Damai, 76, lives in a remote village in Achham, in far-western Nepal. Earlier this year, he fell ill: he lost his appetite, coughed continuously, was unable to walk around his home, and sometimes had a fever at night. He never thought it might be TB – until a school student visited him and suggested he should go to the local health post for a sputum test.

At the health post, Ujire Damai was diagnosed with TB and started treatment. His health is now gradually improving. This is a direct result of BNMT's school health TB programme in Achham, which teaches students in Grades 8, 9 and 10 in government schools to recognise the signs and symptoms of TB and refer likely cases for diagnosis and treatment.

Quality control

BNMT manages the Eastern Region Quality Control Centre, which monitors the quality of TB microscopy in all 16 districts of the region. As well as cross-checking sputum smear slides, the Trust is responsible for laboratory supplies, training microscopy staff, and supervising the region's microscopy centres. The centre makes an essential contribution to the quality assurance of TB microscopy in the laboratories. At present, the Quality Control Centre has no external funder and the Trust is supporting it with its own funds, as part of its commitment to ensuring quality health services in the eastern region.

Supporting households

Tuberculosis often strikes adults of working age, with dire consequences for their dependants. In April 2018 BNMT embarked on a research project to examine the needs of TB-affected households and devise practical, locally appropriate ways to support them. The aim is to ensure an alternative source of income if the family's main breadwinner is unable to work, and also to ensure that the TB patient has access to care and treatment.

Contributing to international research: Impact TB

BNMT is participating in research into TB diagnosis technologies, with the aim of finding the best and cheapest way to scale up the tried and tested methods of case finding at community level and apply them nationwide. The Impact TB research project is led by Liverpool School of Tropical Medicine and funded by an EU grant. It compares two diagnosis methods – smear microscopy and GeneXpert machine testing – and is being implemented in Nepal and Vietnam.



A health worker collects sputum samples for TB testing in Swargadvari

Strengthening TB laboratories

“One district at a time and travelling on motorbikes, we visited all the TB diagnostic centres working with the Impact team. We discussed the laboratory work with the technicians, tried to identify any issues regarding equipment and consumables, advised on techniques and procedures for sputum microscopy and GeneXpert, determined how laboratory waste was being processed and generally offered friendly advice and practical assistance on the improvement of services if required.

“We found a network of laboratories that were well-supplied with reagents and consumables with dedicated and hardworking staff. We were able to service and repair microscopes at many sites and in some cases this allowed a non-functional microscopy centre to become functional again....

“I think one of the most valuable outcomes of the district visits, however, was the boost to morale and the opportunity to discuss the issues they face that it gave the laboratory staff. They perform critically-important duties in difficult conditions and frequently their contribution is under-recognised.”

Professor Andrew Ramsay, of the University of St Andrews, Scotland, visited microscopy centres with BNMT's Impact TB team.



Professor Andrew Ramsay

Enhancing Community Health

From July 2017 to April 2018, BNMT worked on a project to restore and improve people's health in 15 earthquake-affected villages.

This project, supported by the Big Lottery Fund, aimed to strengthen local health services and ensure that local people and institutions had the knowledge, skills and resources to maintain the health of the community. It addressed the key health needs of the communities: psychosocial problems, including post-earthquake trauma; diseases linked to poor sanitation; and a lack of health services.

The work started with a survey of local residents, which helped determine what needed to be done. We learned that although most people (77 per cent) had heard about washing hands after defecation, less than 10 per cent actually did so. Adolescent girls said that the main reason for their absences from school was menstruation. Four-fifths of local people said that no mental health services were available in their community, and more than half of the health workers we interviewed said they had received no training in mental health.

Mental health and psychosocial support



BNMT delivered basic training in mental health and psychosocial support to all health service workers in the project area, and to others in the local community including female community health volunteers (FCHVs), social and community leaders, teachers and mothers' groups. The training enabled them to identify mental health problems and gave them the communication and counselling skills they needed to be able to help.

With support from the Trust, health workers and community leaders were able to provide psychosocial support in earthquake-affected communities, focusing particularly on women, the elderly and marginalised groups. The Trust also worked to raise awareness about mental health in the community, and to reduce the stigma and discrimination associated with mental health problems.

The project established mental health help desks at the health post in each village, with two health workers at each one assigned to provide information



Pictures above: A poster publicises mental health and psychosocial support services.

Right: The mental health help desk in Nuwakot.

Project area

The Enhancing Community Health project covered 15 villages, spread over five districts:

Bhaktapur district

Gundu
Nagarkot

Kathmandu district

Sankhu
Sundarijal
Kavresthali

Makwanpur district

Handikhola
Manahari
Padampokhari

Nuwakot district

Samundrar
Sundaradevi
Balkumari

Sindhupalchowk district

Badegaun
Kunchowk
Sipapokhare

and counselling, and to refer patients for more specialised treatment when necessary. By the end of 2017, 70 people had received counselling and treatment through the help desks.

Working with local schools, the project provided psychosocial support to almost 500 school students, boosting their self-esteem and helping them to cope with stress.

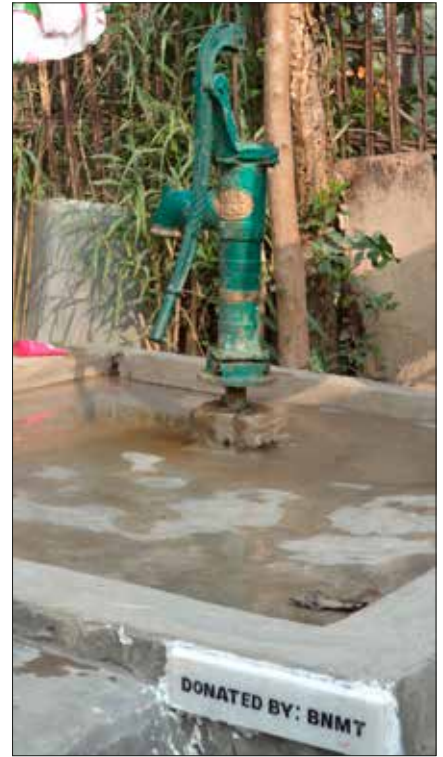
Water, sanitation and hygiene

In places where large numbers of people had no access to toilets, BNMT built community toilet blocks. In all, 17 toilet blocks were constructed in partnership with local Water, Sanitation and Hygiene (WASH) committees, which took on the responsibility for management and maintenance in the long term. The Trust also built sanitary pad disposal pits in school toilets.



Some villages in the project area already had local WASH committees. In the others, BNMT formed new committees or re-energised those that had become inactive. The Trust supported the committees not only to build toilets, but also to educate the wider community about safe drinking water, handwashing, sanitation and the importance of protecting the environment. Large posters were put up on billboards and BNMT ran a series of awareness-raising events: rallies, street stalls, drawing competitions and tree planting.

An important aspect of the project was supporting adolescent girls to manage menstruation. This involved educating school students in all 15 villages about different ways to reduce stress and pain, and showing students and school staff how to make inexpensive, eco-friendly sanitary napkins. Unlike similar projects elsewhere, this one educated boys as well as girls, and this was much appreciated by students and teachers alike.



Pictures above: A water pump installed after the earthquake.

Top left: A hygiene poster.

Bottom left: A newly-built toilet block is handed over to the community of Sundaradevi, N

The earthquake of 2015

On 25 April 2015 a severe earthquake (7.9 on the Richter scale) hit Nepal, its epicentre just 45 miles northwest of the capital, Kathmandu. Multiple aftershocks followed and, on 12 May, a second severe earthquake (7.3 on the Richter scale), with an epicentre 47 miles east of Kathmandu.

The disaster claimed the lives more than 9,000 people and injured more than 22,000.

More than half a million homes and thousands of government buildings were destroyed, including more than 500 health facilities completely destroyed and another 460 damaged, depriving 5.6 million people of access to health services.



Pictures above: Rice cultivation in Sindhupalchowk.

Right: Gynaecology consultation at a health camp in Nagarkot, Bhaktapur.

Bottom right: Registering for a health camp in Sindhupalchowk.

Health camps

To improve access to medical treatment, BNMT organised health camps, bringing in a range of specialists to offer local people a check-up and treatment, including medicines if necessary, free of charge. These provided general medical, obstetric and gynaecological, orthopaedic and paediatric services, as well as screening and testing for tuberculosis. More than 4,000 people in the project area made use of the health camps.



Reducing the Risk from Natural Disasters



First aid training

In Makwanpur district, where BNMT reconstructed seven village health posts destroyed in the earthquake (see last year's Annual Report), we continue to support health workers and local government to strengthen health services. One important aspect of this is equipping health workers and local government leaders with the knowledge and skills they need to support the community when disaster strikes.

The Trust provided training in disaster risk reduction, including how to respond to mass casualties, or a mass outbreak of disease, and how to draw up a health response plan. There was also practical instruction in first aid. This was the first training session of this kind ever held in Makwanpur.

Improving Cancer Treatment

BNMT is supporting the UK Institute of Cancer Research (ICR) and Royal Marsden Hospital in establishing four oncology fellowships for Nepal, funded by the Global Challenges Research Fund.

In Nepal – as in other developing countries – health care needs are changing. As healthcare provision overcomes the challenges of infectious disease, cancer and heart disease increase. It therefore becomes more important for Nepal's doctors to develop specialised knowledge in these areas.

Funding has now been secured for four oncology fellowships of three months at the ICR and Royal Marsden Hospital. Dr Sanjay Thakur (from Bir hospital) and Dr Uzzal Chalise (from Bhaktapur Cancer Hospital) arrived in the UK for their three-month fellowship in July 2018. Dr NK Bajracharya and Dr Bishal Paudel arrived on 30 September.



Dr Sanjay Thakur and Dr Uzzal Chalise. London, August 2018



Dr NK Bajracharya and Dr Bishal Paudel with BNMT chair Dr Gillian Holdsworth and the British Ambassador to Nepal, July 2018

Nepal – an Overview

With an area of 147,181 km², Nepal is home to a population of 28.5 million. This culturally diverse country has three distinct ecological zones: the high mountains, with 7 per cent of the population; the hills, with 43 per cent of the population; and the *Terai*, or lowlands, where 50 per cent of the population lives.

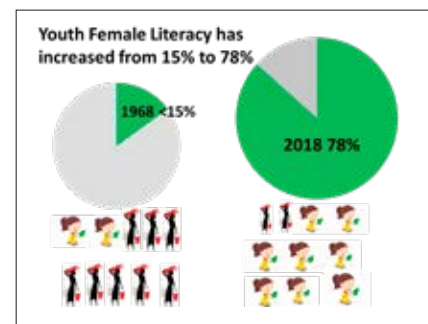
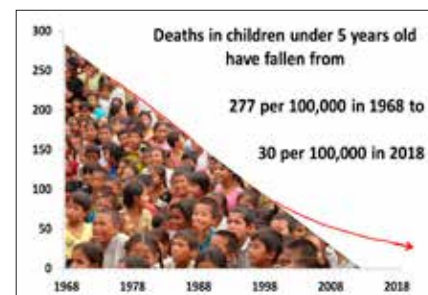
Despite its ancient heritage, cultural richness and magnificent scenery, Nepal remains one of the world's poorest countries, ranked 144th in the Human Development Index. It is struggling to overcome a turbulent political and economic legacy and manage a peaceful transition to stability. A quarter of the population lives below the national poverty line.

Nevertheless, Nepal has made remarkable progress in health, with substantial improvements in maternal and child health in particular. These are the result of the combined efforts of the Ministry of Health and Population and its development partners: multilateral and bilateral agencies and international and national nongovernmental organisation (NGOs).

Selected health and social indicators

Population	28.5 million
Median age	23.1 years
Life expectancy	69 years
Maternal mortality rate (per 100,000 live births)	258
Births attended by skilled health personnel	58%
Neonatal child mortality rate per 1,000 live births	22
Under-fives' mortality rate per 1,000 live births	39
Incidence of tuberculosis per 100,000 people	156
Proportion of population with access to affordable medicines and vaccines on a sustainable basis	66
Health workers per 10,000 people	29.3
Government health expenditure as proportion of general public expenditure, 2014	11.2%
Proportion of population using improved drinking water sources	92%
Proportion of population using improved sanitation	46%

Sources: World Health Organization, 2017 Health SDG Profile: Nepal; UN Development Programme, Human Development Index 2017



Financial Report

The financial information presented in this report does not constitute the statutory accounts of the Britain-Nepal Medical Trust. The full accounts for the year ended 31st December, 2017 have been submitted to the Registrar of Companies and the Charity Commissioners. The Independent Examiner's Report on the Trust's accounts to 31st December 2017 is not qualified in any way. A copy of the Reports and Financial Statements may be obtained from the Trust's office c/o Foot Davson Ltd, 12 Church Road, Tunbridge Wells TN1 1LG.

Balance Sheet

	Notes	2017		2016	
		£	£	£	£
Fixed assets					
Tangible assets	11		–		935
Current assets					
Debtors	13	84,430		11,730	
Investments		70,154		66,053	
Cash at bank and in hand		155,883		246,383	
		310,467		324,166	
Creditors: amounts falling due within one year	14	59,596		13,703	
Net current assets			250,871		310,463
Net assets			250,871		311,398
The funds of the charity:					
Restricted income funds	14	39,463		169,670	
Unrestricted income funds		211,408		141,728	
		250,871		311,398	



The company is entitled to the exemption from the audit requirement contained in section 477 of the Companies Act 2006, for the year ended 31 December 2017. No member of the company has deposited a notice, pursuant to section 476, requiring an audit of these financial statements.

The trustees acknowledge their responsibilities for ensuring that the charity keeps accounting records which comply with section 386 of the Act and for preparing financial statements which give a true and fair view of the state of affairs of the company as at the end of the financial year and of its incoming resources and application of resources, including its income and expenditure, for the financial year in accordance with the requirements of sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the company.

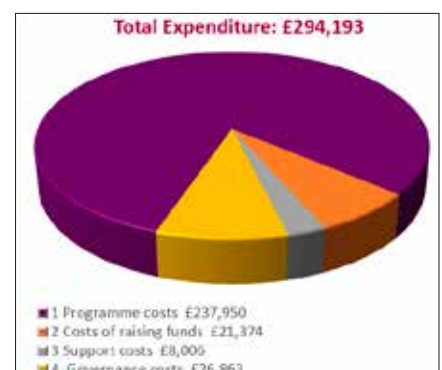
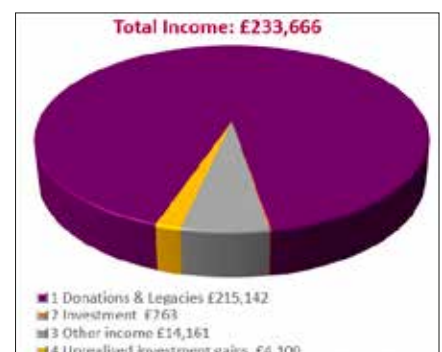
These financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the board of directors and authorised for issue on 15 September 2018 and are signed on its behalf by:

Dr G M C Holdsworth
Dr G M C Holdsworth
Trustee

Prof S P Subedi
Prof S P Subedi QC OBE
Trustee

Company Registration No. 921566



Fundraising

Many organisations and generous private donors have supported the Trust over the years, and continue to do so. Without their generosity, much of our work would not have been possible.

The Trust would like to thank the following for their support in 2017/18:

Organisations

The Henry C Hoare Charitable Trust
The Francis and Eric Ford Charity Trust
D.&H.E.W Gaunt Charitable Settlement
Bryan Guinness Charitable Trust
The Blunt Trust
The Himbleton Charitable Trust
The Everest Marathon Fund
Swire Charitable Trust

Individuals

P. Nobel
A. Walters
A. Taylor
J.B. Sayers

Legacies

We acknowledge with gratitude legacies received from the estates of the late Phyllis Augusta Thomas and the late Winifred Rose Ritchie.

The Trust would also like to thank all individual supporters, too numerous to name, many of whom donate every month.



A child receives treatment at a BNMT health camp, after the 2015 earthquake.

School students learn about menstrual health management, Bhaktapur.



How your donation/s can help us ...

... reduce the gaps in health service provision, especially for poor and disadvantaged people

- £10 will buy a ring pessary to ease the suffering of a woman with uterine prolapse
- £40 buys packets of oral rehydration solution to treat 100 children with acute diarrhoea
- £150 buys 40 packets of clean home delivery kits that will protect 100 babies and mothers from infection
- £200 can buy a set of life-saving basic equipment for a health post in a remote village
- £200 buys 100 packets of sanitary kits for school children
- £500 contributes significantly to our organisational running costs
- £2,000 contributes to organising a health camp for 300 earthquake affected communities and other displaced people
- £3,000 can, for one year, educate and mobilise 30 young people to prevent the spread of HIV/AIDS
- £3,500 builds a community toilet to serve an earthquake affected community

I enclose a cheque/postal order made payable to the Britain Nepal Medical Trust for £

Committed giving and donating online

Alternatively, you can imagine how a regular monthly amount between £10 and £15 would make an even greater impact on the lives of the Nepalese. You can arrange this by completing and returning this form. Or you can donate, or set up a direct debit, online through the Charities Aid Foundation's secure fundraising service by going to www.britainnepalmedicaltrust.org.uk or www.givenow.org

To the Manager(Bank)

Address

..... Post Code

Name

Address

..... Post Code

Account No. Sort Code

Please pay the Britain Nepal Medical Trust the sum of(figures)

.....(words)

Starting on..... / / Monthly Quarterly Half-yearly Annually

Signed: Date:

Tax-effective giving

Since April 2004 a scheme from the Inland Revenue enables you to give to charity through your tax return. All you have to do is quote the reference **UAK68HG** and nominate The Britain-Nepal Medical Trust as the recipient of your tax repayments.

Gift Aid

The other way you can help BNMT raise funds is by returning the Gift Aid declaration below. This means that you authorise BNMT to reclaim from the HMRC tax you have already paid. All gifts from UK taxpayers now qualify for Gift Aid.

Gift Aid declaration

- Please treat as Gift Aid donations all qualifying gifts of money made: today/in the past 4 years/in the future until further notice.
- I confirm I have paid or will pay an amount of Income Tax and/or Capital Gains Tax for each tax year that is at least equal to the amount of tax that all the charities that I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand that the charity will reclaim 25p of tax for each £1 that I give.

Date / / Full name

Signature

Full home address

..... Post Code

- Please tick here if you would like to receive details on making the BNMT a beneficiary of a legacy.
- Please let us know your email address, either by mail or by email, if you would like to receive information by email, (see below for the address)

(No individual personal information will be sold, routed or otherwise transferred to a third party without your explicit consent)

Please return completed form to



BNMT, 8 Hazeldean Road, London, NW10 8QU

Tel: +44 (0)7486 910807

Email: info@britainnepalmedicaltrust.org.uk

www.britainnepalmedicaltrust.org.uk

Charity Registration No 255249

The Britain-Nepal Medical Trust

Vision

Improved health and wellbeing of the Nepalese people.

Mission

To ensure equitable access to quality health care and an enabling environment for socially and economically disadvantaged people.

Programme focus

Health, climate change and environment – contributing to improved health, livelihood and social harmony.

Working principles

Adhere to and appreciate partnership at all levels

Ensure sustainable development

Respect for equity and diversity

Inclusion

Promote transparency and accountability

Working approaches

Human rights based

Partnerships and alliances

Participatory, gender and social inclusion

The
Britain-Nepal

medical trust

BNMT

8 Hazeldean Road • London NW10 8QU

Tel: +44 (0)7486 910807

Email: info@britainnepalmedicaltrust.org.uk

Web: www.britainnepalmedicaltrust.org.uk

Registered Charity No 255249

