

# 2018 ANNUAL REPORT

"A CENTRE OF EXCELLENCE



EDUCATE  
EMPOWER  
UPLIFT  
UPHOLD™

# Introduction

The Frank Hilton Organization is the Suva Branch of the Fiji Crippled Children's Society. It is registered under cap. 47 of the Charitable Trust Ordinance of Fiji.

The humble origins of the Frank Hilton Organization stems from an initiative by a group of concerned citizens of Suva to cater for the survivors of the poliomyelitis epidemic of 1958 and the increasing number of survivors of meningitis and birth injuries. In 1961 the organization opened its headquarters at the Betty Keene Room of the CWM Hospital. In October the clinic was registered as the first Special School in Fiji.

Today, known as the Frank Hilton Organization it provides early detection, intervention, rehabilitation and special education to children with disabilities from birth. It also offers hearing screening and mobility device services to 17 special schools in Fiji. It also provides the only infant hearing screening service in Fiji at the CWM Hospital. Further to this, the organization has now opened its doors to outpatient clients who are referred by doctors, hospitals and schools and those who independently seek out services.

**PRESIDENT:**  
Ritesh Dass

**VICE PRESIDENT:**  
Shivas Singh

**SECRETARY:**  
Vandhna Narayan

**TREASURER:**  
Rajeshwar Singh

**BOARD MEMBERS:**  
Sangeeta Maharaj  
Kolianita Alfred  
Rajendra Kumar

**CHIEF EXECUTIVE OFFICER:**  
Sureni Perera

**HEAD TEACHER**  
**HILTON SPECIAL SCHOOL:**  
Nanise Ravisa

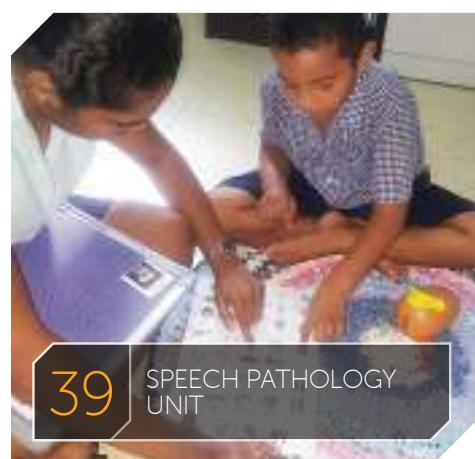
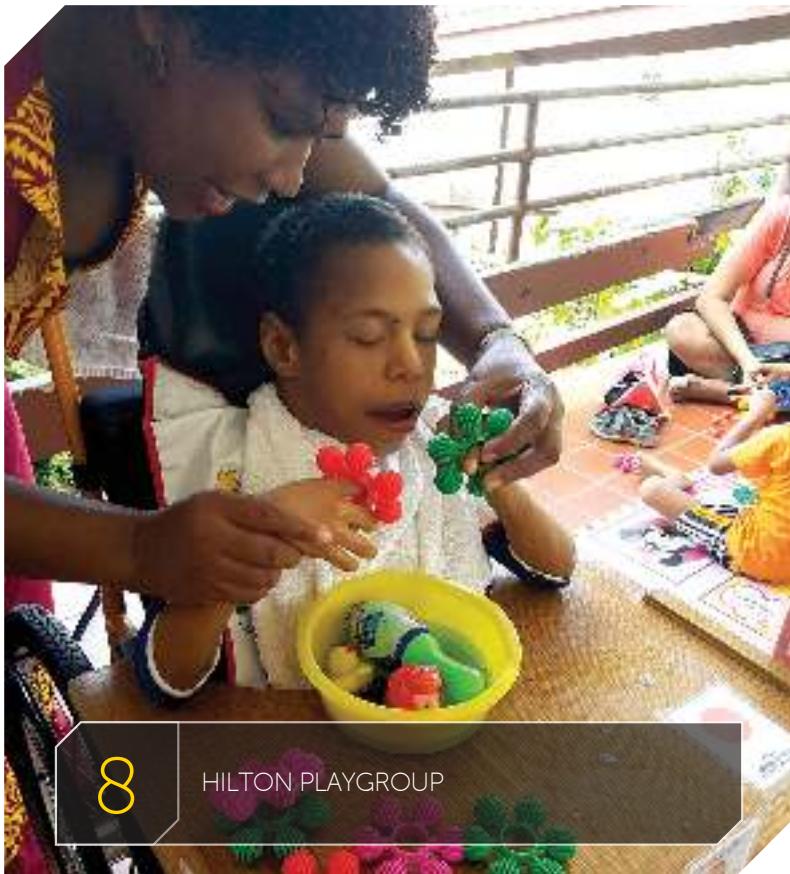
**HEAD TEACHER**  
**HILTON EARLY INTERVENTION CENTRE:**  
Cecilia Yee

**CONSULTANTS: (VOLUNTEER)**  
Shelley Kennedy- Occupational Therapist  
Dr. Donna Carkeet- Audiologist  
Terrie Walker- Speech Pathologist  
Dr. Maria Ellena

**PARTNER ORGANIZATIONS**  
Ears Inc. Australia  
Motivation Australia  
Medical Services Pacific  
Habitat for Humanity Fiji

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# MESSAGE FROM THE PRESIDENT FRANK HILTON ORGANIZATION



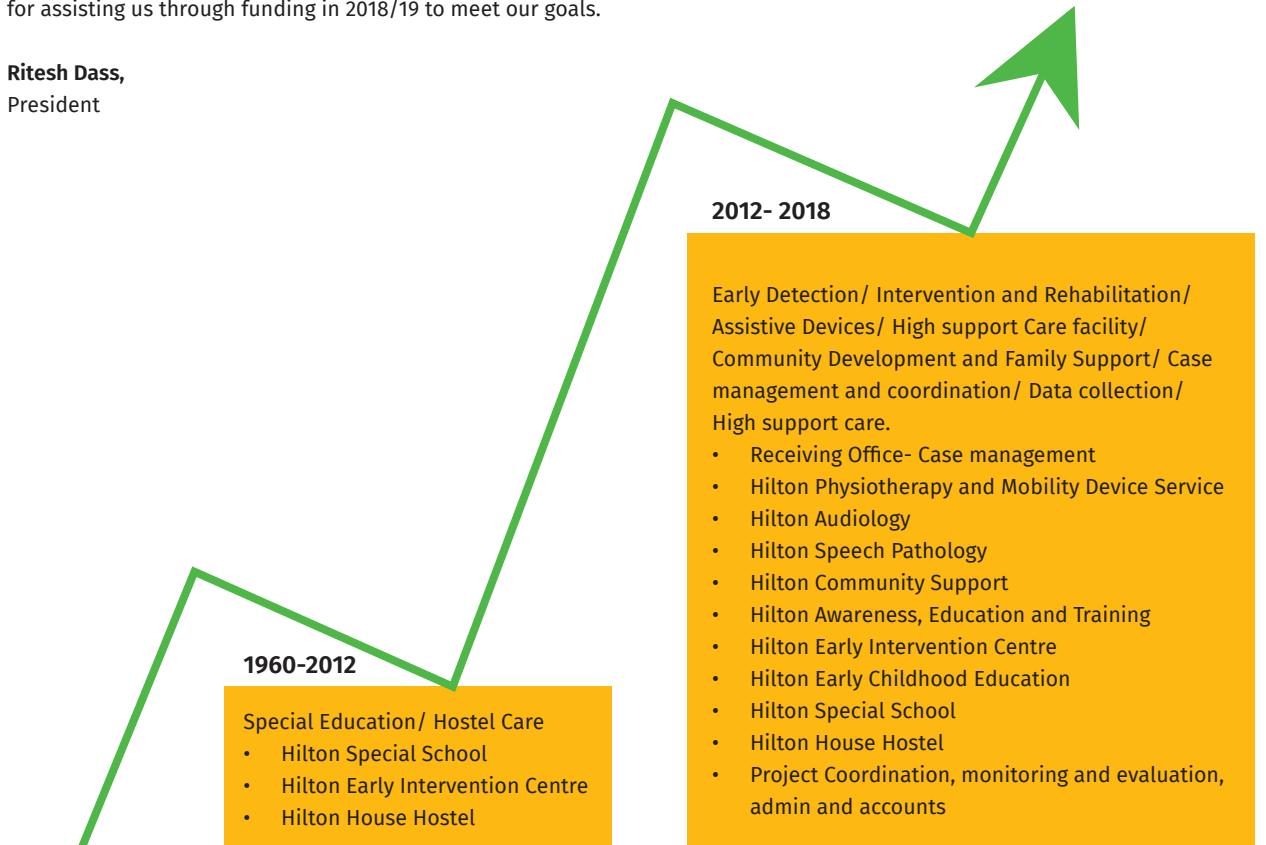
Frank Hilton continued to deliver on its objective of providing the best level of intervention and support to children with disabilities and developing and delivering programmes and services which enhanced our ability to make a difference in the community in which we operate.

We were not short of challenges however, through various awareness programmes we ran, we were able to increase the number of children we took under our care, including providing them and their families the much needed support in dealing with the challenges that they faced. We still are far behind addressing all the cases that exist today, however our aim always has been to put all efforts and resources to better service the needs of children requiring special care and attention.

We are blessed with the commitment of well wishers and passionate staff and volunteers who go the extra mile in delivering superior care and support to our children. Forming a strong personal bond with the children is an integral part of our programme to give them the assurance and confidence that they are special and have an equal place in the society. And when we look at the smiles these children have despite the daily challenges they face, it helps us learn that hard things are put in our way not to stop us but to call out our courage and strength.

I would like to sincerely thank and commend the staff and Board members for their time, effort and energy, in garnering the much needed support and resources needed to not only ensure a smooth running of our institute, but more importantly, serve the special needs of our children. The generosity of our donors and supporters cannot be understated and for that we and the children are extremely grateful for. The recognition by the Government for the work we do is extremely encouraging and we sincerely thank them for assisting us through funding in 2018/19 to meet our goals.

**Ritesh Dass,**  
President



# MESSAGE FROM THE HON. MINISTER FOR WOMEN, CHILDREN AND POVERTY ALLEVIATION



Greetings,

Congratulations to the Frank Hilton Organization for completing another successful year of remarkable service delivery through its operations via Hilton Special School, Hilton Early Intervention Centre and the Hilton House Hostel.

We are extremely fortunate to have an organization such as this offer effective and quality education at all levels to increase the potential of children with disabilities; to empower children with appropriate skills for life in order to increase independence and full participation in society; and to mitigate hardships of parents and caregivers and empower them with the necessary tools to understand, protect and advocate on the rights of children with disability. It is laudable how the Organisation has grown rapidly in the past few years and now has departments in physiotherapy, speech therapy and community support ensuring that children with disabilities receive a holistic range of services under one roof.

The highly valuable service of the Frank Hilton Organization to provide an early intervention facility is not only crucial to us as a society but is very much appreciated by the Fijian Government as possibly the only facility to identify special needs of children at an early stage. Government's grant of approximately \$850,000.00 last year is to strengthen the partnership between Government and the Frank Hilton Organization to ensure the best possible service is provided to all Fijians. It is very pleasing to learn that the Government grant was commendably utilized to provide better screening outreach programs in special schools around the country.

Government and the people of Fiji need to work closely together in realizing obligations on the rights of persons living with disabilities both here and abroad. According to WHO, 70% of disabilities can be prevented if proper care is taken during pregnancy, infancy and early childhood. If a disability still happens, an early detection gives time to the family to initiate early intervention steps so that the further deterioration of the impairment can be averted. I encourage all Fijians to take advantage of the services of the Frank Hilton Organization and help our children with special needs lead independent and healthier lives and attain the best possible education.

I wish the Frank Hilton Organization the very best for their work in 2019.

Vinaka

**Hon. Mereseini Vuniwaqa**

## MESSAGE FROM THE CHIEF EXECUTIVE OFFICER



In 2016 we served 120 students within the two schools in Suva. By the end of 2018 we had touched the lives of 1454 children through outreach in 17 Special Schools around the country, over 300 through outpatients division who were referred to our services, and 152 through the two schools under the Frank Hilton Organization (FHO) management in Suva. The sheer magnitude of the growth we have experienced is due to three reasons; the continued funding from the government of the day, the tireless efforts of my FHO family and the guidance, encouragement and support from our volunteers, partners and stakeholders.

During the first half of 2018 we focused on executing the workplan undertaken in line with the government grant which was provided in August 2017 for the second consecutive year. Funding to the Organization was further enhanced by the fundraising activities conducted by the Board. FHO is lucky to have a supportive and active Board who not only oversee governance and accountability, but who are not afraid to roll up their sleeves and pitch in towards our fundraising activities when needed.

Although FHO's annual plan focused on areas of service delivery and capacity development, the continued funding from the government provided us with an opportunity to scale up and widen our outreach. And so stepped out our brave Physiotherapy team for the first time, being the second FHO department to take our services to the community (the first being Audiology in 2017). The department commenced outreach to Special Schools and rolled out its mobility device service. The objective was to provide personal mobility which will increase the child's independence and enable access to education, as well as identify children with disabilities who

require physiotherapy intervention services. These children were then referred to FHO services in Suva or the Ministry of Health divisional Physiotherapy units around the country.

Training and capacity development undertaken in late 2017, continued well into 2018 with a marginal increase in workforce. While service delivery received priority in the past, the heavy investment and emphasis in capacity development was to ensure service excellence and sustainability. It is important to note that while providing training and upskilling for existing skillsets may not require prolonged focus, developing new skillsets and a workforce to provide these new services, such as those required for speech therapy, occupational therapy, audiology, requires education, mentoring, modelling and continued practice, especially as these services and programmes are not available in Fiji.

Service delivery areas continued to focus on detection, intervention rehabilitation and education. We also opened our doors to out-patients services. The step up in media awareness also contributed to the large numbers of families that walked through our doors. The growth and expansion was organic and therefore our workforce capacity was stretched considerably. But Team FHO held firm to our promise that we will not close our doors to anyone or turn our back on anyone who sought our support. This gave birth to a new department, the "Receiving Office" whose function it was to manage and coordinate out patients.

In July 2018, I was compelled to leave my FHO family for six months to take on studies in Canada. Having been immersed in disability development, the broader spectrum of community development was both enlightening and



challenging. While I continued to oversee and support my team remotely while away, FHO was blessed to have Shelley Kennedy- Occupational Therapist take on the duties as Acting CEO in my absence. Under Shelley's guidance FHO continued to thrive and her leadership inspired the team to think of innovative methods to support the many families who reached out to us. I will leave Shelley to share this space and speak of her term as Acting CEO further on in this report.

Lets talk of the future. Our vision is to build a Centre of Excellence. How fare are we from this? I would say we are at the half way point.

The first quarter of 2019 will be dedicated towards completing our strategic plan for 2020- 2025. FHO Strategic plan will focus on the following;

#### **WORKFORCE DEVELOPMENT**

1. Allied Health Services- Qualification and Training.
2. Skills Development / Professional Development.
3. Information, Education and Awareness.

#### **INSTITUTIONAL STRENGTHENING**

1. Infrastructure development – New Facility.
2. Service excellence – Policy, Processes, Standards.

#### **COMPLEMENT AND SUPPORT SECTOR DEVELOPMENT**

1. Health services network
2. Education services network
3. Community development and child services

Our hopes and plans for 2019 and beyond are extremely ambitious, however we are driven by a simple philosophy which is also my personal philosophy.

*"My faith goes beyond theology and religion and requires considerable work and effort... My faith demands that I do whatever I can, wherever I am, whenever I can, for as long as I can with whatever I have to try to make a difference."*

- Jimmy Carter

I speak for my team when I say that our lives will be meaningless if not for FHO. The smiles we see, the squeals of laughter we hear and the feverish frenzy around us is what propels us to reach beyond heights we never dreamed possible. The children that walk through our doors walk right in to our hearts and lives. We will never turn our backs on their needs and we will continue to grow as long as they need us. The legacy of the first founding members of the Suva Branch will live on in the lives we touch and the change that we bring in to the lives of our children.

#### **Sureni Perera**

Chief Executive Officer / School Manager

## **MESSAGE FROM THE ACTING CEO**

### **(JULY - DECEMBER 2018)**

As a volunteer Occupational therapist within the organisation I never imagined that Acting CEO would be a role that I would fulfil while Sureni was out of the country. However, what a fantastic opportunity both personally and professionally.

The team focused on building our outpatient services and adding additional programmes to provide holistic early intervention. This allowed more children to be included in a group program that was tailored to their different needs. We developed a playgroup specifically for children with Cerebral Palsy a condition affecting both the brain and physical abilities of the person. This was well received and will develop and grow further in 2019.

Our focus on training our staff and families to develop skills and knowledge about different communication strategies continued within the Centre and we were able to confirm that TalkLink NZ would visit in February 2019 to provide staff and parent training and support assessments of some of our children with higher needs.

We also employed an additional Speech Pathology Assistant to join the team and increase the provision of our in-house services. Additionally, we also recruited a private Speech Pathologist practicing in Suva to work alongside us one day per week. She will continue in 2019 focussing on supporting communication strategies in playgroups.

Our smallest resident, a three-month-old infant arrived to live in the Hostel. She is amazing us every day with her development and is truly a blessing to have her apart of the FHO family. This addition to our family required us to focus on building the capacity of the Hilton Hostel with additional staff being recruited and new training given so that we can meet the needs of the newest member of our family. Our first nurse was employed in the organisation, she is supporting the residents in the hostel as well as developing a role across all FHO services.

These few months proved to be a very busy and it was great to see Sureni return to her role in the Organisation. For me it is back to meeting more children and families and supporting the team in any way I can. Thank-you for the opportunity FHO.

#### **Shelley Kennedy**

Acting Chief Executive Officer

# THE JOURNEY TOWARDS EXCELLENCE

The end of 2018 marked the end of FHO's 3 yr strategic plan (2016-2018) which was a continuation of the restructure of the Suva Branch (Fiji Crippled Children Society), that commenced in 2012 and focused on programme expansion and capacity development. Early intervention still being the core function FHO set out on an ambitious journey to ensure children with disabilities in Fiji will receive access to necessary services under the early intervention banner which in turn will provide equitable options for inclusion and mainstreaming.

## WHERE DO WE GO FROM HERE?

### FHO 5 YEAR STRATEGIC PLAN - 2020 - 2025



In accordance with "Fiji's 5-year and 20-year National Development Plan" FHO will now align its mission and strategic focus to support the state in achieving indicators under Inclusive Socioeconomic Development in sectors of Health, Education and Social Inclusion and empowerment. This is also in keeping with the FHO vision which is to create a "Centre of Excellence" to provide services

for children with disabilities and their families thus ensuring opportunity for an inclusive, barrier free and rights-based society.

## STRATEGIC DIRECTION

In accordance with the national sensus of 2017, 13.7% of the Fijian population over the age of 3years have one or more disabilities. However it is noted that apart from Special Education programmes, there are very few and in most cases no intervention programmes for children with disabilities in Fiji. The need is considerable and therefore in keeping with FHO's mandate of providing these services at the earliest possible time in the life of a child, it is necessary to ensure that we focus on a service ready workforce, ensure structure and governance within the organization and work with the existing sectors, delivering services to children in a collaborative manner.

Therefore FHO has identified the below areas as Key Focus Areas within its strategic plan;

#### 1. Workforce Development - Allied Health/Intervention Services

In order to provide sustainable services in early intervention FHO will continue to prioritize and focus on capacity development and training within the allied health sector as well as education.

#### 2. Institutional Strengthening

Ensure FHO is set up as a model institution with a focus on setting service standards and excellence that can be replicated at decentralization stage.

#### 3. Complement and support sector development

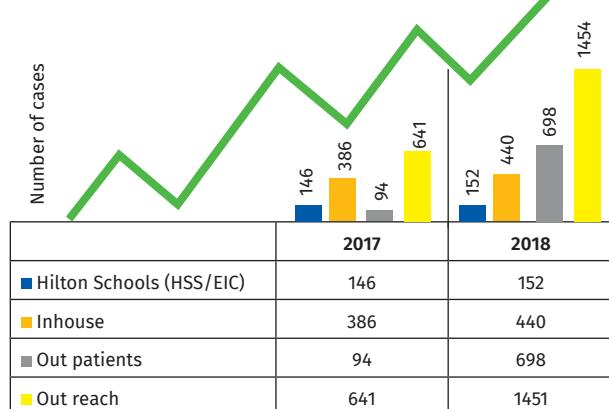
Work within existing sectors of Health, Education and Community development in order to ensure disability mainstreaming and inclusion.

## THE NEED.

Services in early detection and intervention are notably few and in some cases the only such services provided in Fiji for children with disabilities are made available through the FHO programme.

This is noted in the increase in outpatients and outreach caseload in 2018 compared to 2017. The increase in caseload can also be attributed to the extensive awareness and community outreach conducted by the FHO which has served to establish undersatnding of the need to seek assistance during the formative years in the life of a child.

**TOTAL CASE LOAD - 2017 - 2018**



# THE RECEIVING OFFICE



*"...children with disabilities have equal rights with respect to family life. With a view to realizing these rights, and to prevent concealment, abandonment, neglect and segregation of children with disabilities, States Parties shall undertake to provide early and comprehensive information, services and support to children with disabilities and their families"*

Article 23- Respect for Home and Family - United Nations Convention on the Rights of Persons with disabilities

Every child has a right to be brought up in a respectful, loving nurturing environment and therefore, realizing the importance of the family and the role of a family in the early intervention process, the Frank Hilton Organization set up the Receiving Office in May 2018.

The Receiving Office is the first point of contact for all families who are interested in the services of the FHO and provides an opportunity for parents and guardians to have a focal point of contact, to discuss their concerns regarding their child, make appointments with other departments, discuss transition plans or simply have someone to lend a listening ear. Parental/guardian concerns vary from health-related issues, access to services, poor academic performance, delayed developmental milestone achievements and behaviours of concern that make life challenging for the child and their family. The key function of the Receiving office is to offer support and coordinate services.

## KEY FUNCTIONS

- Initial registration process
- Case management
- Conduct parent / guardian counselling
- Goal setting - Monthly review of all cases
- Transition planning and community outreach- engaging with other special and inclusive schools and kindergartens
- Collecting and collating data and maintain database
- Playgroup - Out-patient group programs and school readiness programs

## AIMS

- To ensure parents and children enrolled at FHO receive optimal care and support at the initial stage and throughout their journey.
- Facilitate smooth transition for children and families to Hilton Early Intervention Centre and Hilton Special School as well as other special and inclusive/ mainstream schools and kindergartens.
- Provide data and statistic to Management for monitoring and evaluation and planning.

## TEAM

Resina Fuata	- Case Officer and Playgroup Coordinator
Dr Elena Sharma	- Family Support Officer
Loretta David	- Family Support Officer
Shelley Kennedy	- Occupational Therapist

## TOTAL CASES MANAGED

Outpatients Registrations May- December 2018	
Initial Parent Interviews Conducted	95
Closed Cases (Failed to attend or transitioned)	12
Home Visits	2
Parents/Guardians counselled	62
School Visits	4
Enquiries received	278

## SERVICE DELIVERY THROUGH RECEIVING OFFICE

Ages of clients May- December 2018	
0-2 years of age	14
3-5 years of age	44
6-8 years of age	21
8 years <	16



Regions	
Central	83
Western	11
Eastern	1
Northern	-

## TRANSITION

Transitioned to Education Programmes	
Clients into Hilton Special School	5 (3 for 2019 enrolment)
Clients into the Early Intervention Centre	20 (18 for 2019 enrolment)
Clients into mainstream school from out-patient department	1
8 years <	16

## INTERNAL REFERRALS – MULTIDISCIPLINARY UNITS FOR ASSESSMENTS

Department	Client Number
Physio Therapy	52
Audiology	157
Occupational Therapy	47
Speech Therapy	22
Community Support – (To be referred for social protection schemes and additional support)	3

## OTHER REFERRALS

Facilities	Client Number
Hospital services- CWM	40

The process facilitated by the receiving office not only ensure the child remains within the mainstream school setting but also provides accessibility within the home to support the child's need. What started with a simple screening transpired to health, educational, social and economic support for the child and their family in a holistic manner.

### A STORY OF GUIDED TRANSITION

*Joe (name has been changed to protect the identity of the child), was 7 years old when he came to FHO along with his aunt on the 30th of January, 2018 as a referral for a hearing test from the Paediatric Department at CWM. During his hearing assessment it was observed that he had an unsteady gait and therefore an internal referral was done to the Physio department for an assessment. Once his Physio assessment was complete, he was then referred to the Receiving Office to begin the enrolment process for Hilton Special School as this was the request from the family. However, during the parent interview it was found that the school Joe attended had informed Joe's aunt that he would not be able to cope in school because of his physical disability and therefore they should enrol him in a special school. Through the encouragement of the Receiving Office he was referred to Arya Samaj Primary school which is an inclusive school as the Receiving Office felt that Joe would be able to excel in an inclusive school that could accommodate his physical needs.*

*In addition, during the Receiving Office's interview, Joe's grandaunt expressed her concerns for Joe's as he was very unsteady on his feet in his home environment. His home is built below road level and he had to walk on an unpaved dirt slope to get into his house. Receiving Office referred Joe's case to the Community Support Division and FHO was able to build Joe a footpath with a railing to support him when walking from his house to and from the main road. The family was supported to apply for Social Protection programmes offered by Social welfare and also obtaining a free bus fare card for Joe. As of today, Joe is doing well in Arya Samaj class one and his family feel reassured that Joe is safe within his school and home and able to pursue his study in a least restrictive environment amongst his peers. Joe still remains an out-patient client of the FHO Physio Department and is on a home program and monthly review to improve his gait and hand strength.*

## FRANK HILTON PLAYGROUP



The Playgroup program was an initiative of the FHO Speech Therapy Unit and begun in Term 4 2017, a total of 98 children have participated in playgroup since its inception.

Play is essential to development because it contributes to the cognitive, physical, social, and emotional well-being of children and youth. Play also offers an ideal opportunity for parents to engage fully with their children.

The purpose of the Playgroup is to provide an early intervention program for children under the ages of 8 years. The playgroup follows the Mataniceva Fijian ECE curriculum which has been adapted for children with special needs. The child's special needs are catered for within the setting, and the groups include children with a variety of disabilities and impairments.

2018 saw the development of 2 new Play Groups.

- Wednesday playgroup is for children with Cerebral Palsy or children who require more floor-based activities and their caregivers, as our existing playgroup did not meet the needs of these children.

The aim of the play group is to assist with the child's cognitive and social development and to promote learning experiences that can be replicated at home. This is achieved through a variety of communication, play and sensory experiences.

The numbers of the children increased from 3 to 7 regular participants. We were also able to utilise expertise from a speech language therapist to promote further communication strategies.

Feedback following the completion of the group included  
*"the playgroup is good for me as a parent to see my child grow in knowledge and the skills she has developed".*

*"since learning the 'round and round the garden' song we are able to play with her, it's a song she enjoys, she responds"*

- Also, within the 3rd Term of 2018 an additional playgroup session was created on Friday afternoons. The 7 children, continuing from the term 2 playgroup morning session, formed the afternoon group. This with the inclusion of three other children who were currently attending mainstream kindergartens and a primary school but who required additional support. The afternoon session enabled FHO to continue to support these 10 children and offer the morning session to 9 more children. Bringing the total number for both sessions to 19 for term 3 and the overall roll for 2018 year, who accessed our playgroup services to 44.



**KEY FUNCTIONS:**

- Provide a multidisciplinary assessment and intervention programmes in the form of a Playgroup for children who are on the waiting list to attend the Early Intervention Centre school-based program or Hilton Special School.
- Use play to engage the child and parent and acquire different skills and experiences
- Support parents in understanding their child's different abilities and provide strategies to achieve their goals.
- Provide an opportunity where parents can support and learn from each other and from the interdisciplinary team

**AIMS:**

- Smooth and consistent transition of children to Early Intervention Centre and Hilton Special schools.
- Transitioned to mainstream education instead of remaining on the waiting list for Early Intervention Centre or Hilton Special School.
- Parents to advocate for their child and created friendships and supports between themselves.
- Greater team work within the multidisciplinary team and parents.

**Playgroup 2018 - Total 44**

Term 1	Term 2	Term 3
14	10	10
Afternoon session		10

**ACTIVITIES FOR 2018:**

Term	Parent Training	Staff Training	Outings
1	2	2	2
2	2	2	2
3	2	2	2

**Training:**

Parent training is an important aspect of playgroup. The aim is to cover topics that the parents are interested in learning about and increasing their skills and knowledge about how to support their child's development. The topics included:

- What is playgroup and its different components.
- How to play with your child.
- Heavy play workshop.
- Speech: How to communicate with your child using visual aids: symbols, core and communication boards.
- Communication Strategies - OWL (observe, wait & listen, choice making using visual aids, joint attention, plus one talk, turn taking & sharing).

**Outings:**

The purpose of outings is to encourage families to engage with the child in activities within their natural environment.

- Encourage outdoor physical play at My Suva Park and Tikram Park.
- Increase socialisation-for most of the children it was their first time to visit these parks and have an actual outing outside their home environments. Potluck picnic lunch-everyone each prepared and shared a meal.
- End of the year - individual children were presented with their bags made with their original art creations.

**Ongoing services:**

- Conduct assessments and therapy sessions through our multidisciplinary unit in-house staff during playgroup.
- Facilitate the enrolment process for the playgroup children who are transitioning to our two schools (EIC & HSS), and working in collaboration with our two schools to ensure that this process is a smooth one.
- Provide and facilitate opportunities for professional development for playgroup team members
- Continue to build on forming stronger partnerships with parents and increasing their participation in developing FHO services to meet their needs.



### **Transition**

Transitions: 20

Term	Transition		
	Early Intervention Centre	Hilton Special School	Mainstream Kindergarten
Term 2 - May - Aug	2	1	
Term 3 - Sept - Nov	-	-	1
New term of 2019	14	-	2

### **Collaboration:**

This year we were grateful and very much appreciated having numerous visitors. Our first volunteer playgroup team member from the UK, Jessamy who is a mental health nurse by profession. The University of Newcastle Australia Speech Pathology students Amy, Jess, & their supervisor Jessica. Followed by two Occupational Therapy students, Bridgette & Ethan also from the same university. Finally, a private speech pathologist Trisha Khatri.

During their time with us we were privileged to have them be part of the playgroup team with their area of expertise, skills and experience. We learnt so much from each of them.

### **Challenges:**

- I. Attendance/Conducting of parent training.
- II. Vulnerability of the children & caregivers to sickness which impacts on their ability to attend the group.
- III. Non availability of caregiver and parents to bring the children to playgroup due to other commitments.

IV. Staff resources to facilitate playgroup when team members are not available due to outreach or other work commitments.

V. No designated room or area for playgroup sessions & storage

### **Focus Areas for 2019:**

- Teamwork, networks and partnerships- Resource people: continue to work closely with current established local & overseas university students. Network/collaborate/partner with local & overseas institutions potential ECE, student placements, volunteers, such as APTC, USP, FNU, ECE Child Care Centre's.
- Continue with ongoing service: weekly evaluation of its functions and make relevant constructive changes that enable us to continue to offer ongoing efficient and quality service delivery.
- Seek opportunities for capacity building and training for carers and staff.
- Further changes are planned to improve the Wednesday playgroup in 2019. This will have a similar structure but have a greater focus on visual communication systems, be longer in duration and have an increased focus on parent support and education and implementation of weekly goals to work on at home.
- Additionally, to the playgroups in 2019 our goal is to implement a module-based parent education program for parents of children with cerebral palsy. Each session will have a different focus on development and will be presented by different members of the multidisciplinary team.

# OCCUPATIONAL THERAPY



The role and function of the volunteer occupational therapist at FHO has been to support the need of the organisation where ever the need was identified. Established priorities included:

- Staff and Parent development - Facilitating training - a large component of this was planning and supporting the training from TalkLink New Zealand.
- Completing assessments and interventions with individual children, families, in play groups and participating in outreach activities. Specifically providing an 'occupational therapy' lens.
- Within 2018 the role also supported the function of Acting CEO and FHO liaison with external agencies.

## STAFF AND PARENT DEVELOPMENT

### TalkLink Partnership Summary:

FHO has established a partnership with TalkLink Trust New Zealand to provide assessments and intervention programs for children with severe to profound communication needs and training for our staff.

The TalkLink team are specialists in the area of Communication Assistive Technology / Augmentative and Alternative Communication (AAC). AAC tools and strategies are used to supplement or replace speech or writing for those with impairments in the ability to speak or understand written language. The purpose is to enable all people with communication impairments to interact and participate to their full potential.

TalkLink and FHO have completed the following work in 2018:

Engaged in regular Skype and email meetings regarding client assessments and recommendations, training of AAC systems and strategies. We also met in person in Auckland to continue planning processes.	Provision of electronic resources by TalkLink (e.g. core boards, activity specific boards, visual time tables) for the FHO to print and laminate to use with their clients.
Online training modules provided by TalkLink designed to upskill the whole FHO staff. These will be facilitated by Shelley (or another FHO staff member) in Fiji but designed and recorded by TalkLink staff.	In February 2019 TalkLink will visit FHO to provide assessment and recommendations regarding AAC to specific students with complex needs and provide training to staff to upskill them in the areas of augmentative and alternative communication, access and literacy.

### Professional Development:

#### Child Specific

CP Alliance consultation on feeding – videos of various children were taken while feeding with a follow up consult session with a Speech Pathologist from CP Alliance was completed. This enabled a greater understanding of how to support parents with feeding issues at home. This is identified as an ongoing need within the organization.	Outreach to three Suva Primary Schools: This involved supporting the teachers with strategies for a child with Autism. A professional development session for support teachers about how to intervene with students with fine motor difficulties and finally an assessment of a child within the school to identify learning needs. The Head Teachers and teachers within these schools were very receptive to our visits and support.
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**Parents**

"Positive behaviour in the classroom and at home" – for the parents at the EIC. Purpose: How FHO approaches behavior with the students and the process we follow. It incorporated what parents can do at home. Finally explaining the differences between behavior and the child's disability and why we need to have a common approach. The training was attended by 19 parents with very positive feedback received.

"What are Fine Motor Skills" for parents at the EIC. Purpose: To explain what fine motor skills are and how to support your child in developing their fine motor skills. The session was led by the student occupational therapists and was completed with 16 parents. The feedback was very positive and further work with specific EIC students has resulted from the PD session after speaking to the parents.

**Staff**

Playgroup staff members – "Autism & Sensory Processing" Purpose: to understand the concepts of sensory processing and specifically 'heavy work' and why/how we need to include it as part of the playgroup sessions.

Hostel Staff – "Orientation & Hoist Training." Purpose: Orientate new staff and update existing staff to new and existing processes. All aspects of caring for the high support needs residents. Staff from all departments provided training in relation to their specific roles and provide guidance to the care giving staff in the specific requirements of each of the residents.

EIC Teachers – "Behaviour Process" Purpose: Following the completion of the Child Protection Policy the agreed Behaviour process was outlined to staff at both HSS and EIC. This was presented with Master Josefa Korovulavula.

**Recommendations:** Ongoing professional development across all staff and alongside parents is an ongoing requirement for FHO. Formal training from a local institution would be beneficial for allied health support staff to increase their skills and knowledge of disability and approaches for intervention. Ongoing education sessions for parents could cover all disabilities and strategies for support.

## ASSESSMENTS AND INTERVENTIONS

### Occupational therapy assessments completed 2018:

	EIC	Outpatients	Playgroup	Hostel	HSS
Term 1	3	13	11	1 review	4
Term 2	7	9	10	1 review	4
Term 3	9	24	10	4 review	8
Total	19	46	31	6	16

The 118 assessments encompassed a variety of interventions. This included classroom behavioural strategies, independence in activities of daily living, support with feeding and seating/positioning, fine motor skills programs, home visits, assessments for assistive technology and behavioural support for parents of children with Autism. Additional parent interviews completed were 12 for EIC and 5 for HSS.

**Occupational therapy students** – to increase the capacity to deliver services within the EIC and school and to continue to raise the awareness of the need for occupational therapy services across the organisation.

Two occupational therapy students from Newcastle University completed their 10-week final placement on the 21st of September. They were based across all FHO services EIC, HSS and Outpatient areas. They completed assessments with students in the classrooms, participated in PD sessions for teachers and parents and participated in the play groups. The use of the students was very beneficial and highlighted the need for ongoing occupational therapy intervention across all the FHO services.

The following success story outlines the benefit of more intensive occupational therapy assessment and intervention within our Early Intervention Centre.

**Recommendations:** It is proposed that an occupational therapist be employed full time to support the ongoing work of FHO. This person would train a full time assistant to support occupational therapy activities for the services and work as part of the MDT. As there are no training programs in



### WORKING WITH PARENT

*Seini (name changed) aged 6 years was referred from the teacher for showering difficulties. The occupational therapy student conducted a parent interview where they discussed in detail the challenges that they were having with this activity. Together they identified a goal "that Seini will be able to shower herself with minimal assistance and no negative behaviours within 4 weeks. The OT student identified a number of strategies to trial and implement at home. She modelled the desired strategies within the school environment. The student wrote instructions and a schedule for mum to follow at home which were simple and clear to follow. Used visual strategies to assist with understanding for Seini and gave Seini greater control of situation through communication. The goal was achieved within 3 weeks of the interventions.*

Fiji, either a Volunteer from Australia Aid or a volunteer who can visit on a regular basis could provide ongoing support and training.

#### Occupational therapy in outreach:

The Physiotherapy and MDS Rakiraki Outreach included participation from the occupational therapist. The highlights included:

- Working with the CRA's in the area. They had knowledge of the children in their community and contacts in villages of those children who may need assessment and intervention.
- The support from the school for screening.

#### Recommendations:

- Multidisciplinary outreach and training - A mixture of the multidisciplinary team participate so that children could be screened across all disciplines rather than referred back to the organization. Training for staff and parents could be conducted at the same time.
- Development of standard Professional development sessions for the teachers and parents of special schools on communication, fine motor difficulties, the role of FHO – all of our services. Professional development sessions for health professionals (CRA's) at hospital sites could also be included.

**Shelley Kennedy**

Volunteer Occupational Therapist

# HILTON EARLY INTERVENTION CENTRE



## KEY FUNCTION

To provide Early Childhood Education and development programmes to children with disabilities in their critical years of development.

## TEAM

Teachers - Civil Servants	5
Teacher Aides	4
ECE Teacher	1
Bus Drivers	1
Gardener/ Handy Man	
Bus Aid/ Cleaner	1
Care Giver	1

## SCHOOL ROLL:

Girls	16
Boys	33
Total	49

Stream 1	Stream 2	Stream 3	Stream 4	Stream 5
11	13	10	6	9

## ACHIEVEMENTS

- Successful opening of 2 new classrooms at EIC
- Increased registration of children in playgroup awaiting enrolment into HEIC
- On going follow ups and continuation of therapy sessions and programs with the FHO Multi Disciplinary Unit and its team of specialists.
- Continued consultation and successful facilitation of professional development.



- Facilitation of professional attachments and work experiences – Local & International ( 3 years consecutive with University of New Castle- Aus.)
- Ongoing celebrations of significant events (Autism, DS, CP, Easter, Library Week, ECE Week, No Drugs Week etc)
- Participation of school at the 2018 Regional Games
- Participation and 2 wins at the 2018 National Games
- Strengthened and improved community support
- Successful transitioning of 20 students for Year 1 in 2019.
- Successful vaccination of all consented students for Meningococcal Virus
- Continued and strengthened consultation and networking with relevant ministries and stakeholders for improvements
- increased attendance and participation of parents at Parent Trainings.
- Successful facilitation of CAPs meetings, parent teacher conferences and continued communications through newsletters.
- Successful implementation of core boards to aid communication for identified students.

#### **CHALLENGERS**

- Poor drainage systems in place that lead to flooding earlier in the year
- Continued monitoring and follow up of transitioned students from the Centre especially for those that received therapy through the MDU.
- Maintaining contact with parents of children that had left EIC
- Channels of communication when raising matters of concern
- Poor turn out of parents at organized CAPs meetings
- Insufficient play facilities to cater for all children





#### OUTCOME AREAS FOR 2019

- Maintaining student teacher ratio as per Special & Inclusive Education policy.
- Ensure that each classroom teacher has a Teacher Aide.
- Improved and Safe Play Area inclusive of proper and adequate play facilities for the Centre.
- Improved networking with receiving schools.
- Improved monitoring matrix for transited students with receiving schools

#### CONCLUSION

It is with heartfelt appreciation that we thank the FHO management and Board for their steadfast support in all activities in 2018.

It is at this juncture that I wish to acknowledge all stockholders for your unwavering support to HEIC and all her activities throughout 2018.

To all our supporters who have in one way or another helped to make a difference in the lives of our special children, we say thank you! And we look forward to your continued support in the years ahead.

To our teachers, thank you for the hard work throughout the years in grooming these fine graduates to this day. To our outgoing parents, it has been an honor journeying with you this far.

**Cecilia Yee**  
Head Teacher



## FRANK HILTON EARLY INTERVENTION CENTRE MOTHER'S CLUB



The Hilton Early Intervention Centre's Mothers Club consists of mothers, grandmothers, aunts and care givers of students of the school.

The Mothers Club was formed in 2015 and was formalized as a functioning body by the FHO Board in its Annual General Meeting in 2017, in recognition of the group's support towards the Centre.

The Mothers Club has lived up to its main goals and has over the years since its rebirth, been a shining example in reinforcing and strengthening parental engagement in all school programs and activities ultimately making positive contributions to the holistic development and progress of our children.

### Achievements

- Strengthened and maintained community partnership with Tau Sports securing printing of school sports T shirts 4 years consecutively.
- Improved attendance and participation of mothers at Parent Training facilitated by professionals.
- Election of Mother's Club interim executives 2018 – 2019 to oversee activities of the group.
- Successful training of mothers ( by Jessamy Campbell & Shelly Kennedy) in the use of Art & Craft to support sensory focused programs within the classrooms as well as the learning needs of children at the Centre.

### Activities & Projects

- School compound cleaning and beautification.
- Sponsored students Bula shirts for the 2018 national games Awards Night.
- Organized students and teachers sports uniform for 2018 National Games.
- Hosting teachers to refreshments on World Teachers Day

and committing an hour in the shoes of a teacher.

- Continued hands on responsibilities with school organized celebrations

### Challenges

- Not at liberty to approach donor partners for assistance when required for certain activities that support schools programmes.
- Parent meeting usually is limited to non working moms who are at school daily.
- Decisions made are sometimes met with resistance from working moms who may disagree to decisions called.

### Outcome Area for 2019

- Increased involvement and participation of all members of the Mothers Club for school projects.
- Organize newly enrolled students National games uniform.
- Fundraising drive towards schools National Games 2019 that will be held in the Western Division.

We acknowledge the Head Teacher, Teachers and Frank Hilton Organisation Management for supporting the Mothers' Club in its endeavor to support the Centre in every opportunity.

Our most sincere gratitude to the Board, for allowing Mother's Club a formal recognition, as it has given our group of dedicated mothers, renewed confidence in moving forward with planned programs and activities as well as pride in working under the FHO Banner.

We will continue in our vision to work in collaboration with the school and its management at achieving our common goal and making a difference in the lives of our children.

VINAKA.

**MRS. SALOME LOCO**

INTERIM PRESIDENT



# HILTON SPECIAL SCHOOL



## KEY FUNCTIONS

Administer Teaching and Learning (TL) following the set primary curriculum:

- Modify curriculum to suite learning needs/level of functioning/severity of disability.
- Incorporate academic/life skills/hands-on learning
- Promote/support Inclusion/successful transition.

Appropriate services to support/complement teaching and learning for wholistic learning/development:

- Therapy programs- Occupational & Physio Therapy, Audiology, Speech Program,
- First-hand information for teachers, parents/care-givers.
- Capacity building for Teachers to improve service delivery.
- Networking with stakeholders to support TL programs.

## TEAM

Teachers - Civil Servants	18
Teacher Aides	3
Care-Givers	1
JICA Volunteer	1
Bus Aides	1
Bus Drivers	1
Handy Man	1
Total Staff	26

School roll	Boys	Girls
Term 1	41	56
Term 2	57	43
Term 3	59	44

Classification	
Physical impairment	48
Hearing impairment	24
Autism	6
Down/Apert's Syndrome	3
Rheumatic Heart Disease	3
Slow Learners/Development Delay	19

## CLASSES:

Transition: Years 1 – 7

Vocational Classes- 2 (Boys/Girls)

## ACHIEVEMENTS

- Literacy And Numeracy Assessment (LANA) – 80% average level.
- Activation of Year 7 class
- Year 7 Examination – 50 % Pass
- A staff on AUSAID scholarship.
- 3 Teacher-Aides now absorbed as civil servants.
- An ex-student being employed as a computer teacher.
- Transition of students to mainstream schools-Ex-Student topped Year 9 exam results at Sacred Heart College.



- Accommodating tertiary students on practicum attachment (local & international)
- More children receiving treatment at the Shriners' Hospital in Hawaii.(FOC)
- National Games participation.
- Promoting INCLUSION/Children's participation:

#### OTHER ACHIEVEMENTS

- Clean School Program.
- Launch Of Careers Booklet
- World Forest Day.
- Sporting Activities
- Religious/Cultural Events, National Events & Celebrations.
- Home visit program & Benefit Scheme (supported by FHO)

#### CHALLENGERS

- Working with high support-needs children (ideal program, manual handling, etc. Support IEP program)
- Difficulties in behavior management
- Follow-up on students who have transitioned to mainstream schools.
- Parental support towards programs/activities, CAPS/PTFA meetings, etc.
- Transport issue – limited space in school buses.

#### OUTCOME AREAS FOR 2019

Improve our service delivery:

- strategies to improve literacy & numeracy and other areas of TL.
- capacity building for teachers/enroll on programs to upgrade qualifications.
- OMRS criteria in place.
- quality teachers-quality students/programs
- improve/support IEPs (parents are part of team)
- maximizing/Take ownership of services provided. (FHO, MoE, MoH, MoWC)
- Improve /Strengthen Parental Support.
- strengthen/Improve effective communication/networking amongst departments/other stakeholders.



#### WAY FORWARD

- Improvements to the Infrastructure.
- To accommodate our increasing numbers.
- PTFA to work on painting of buildings, general school beautification & levelling of the playground.
- Accommodation at the hostel.
- Supporting Vocational programs for successful transition / employment pathway Employment for Ex-Students.

#### ACKNOWLEDGEMENT AND GRATITUDE TO:

- Ministry of Education, Ministry of Women, Children & Poverty Alleviation, MOH and other line ministries.
- The Management for your unwavering support and immense contributions.
- Business Houses, NGOs.
- International Secondary School & Inclusive Schools.
- Fiji Sports Commission & other sporting bodies.
- Support & Ancillary Staff.
- To ALL of you who have been part of the learning journey of the special children under our charge.

#### CONCLUSION

We commend every stakeholder and we thank you all for your unwavering support and commitment towards the education of our special children. You have all been a source of inspiration as we aspire to strengthen our partnership to reach greater heights in our endeavor to help make a difference in the lives of children with special needs.

**Nanise Ravisa**  
Head Teacher

# HILTON HOUSE HOSTEL



The Hostel is one of the Frank Hilton Organizations oldest facilities, set up in 1975 to provide temporary residential hostel facilities to children with disabilities from areas in Fiji that did not have access to special or inclusive education programmes. However, given the many Special Schools that were established subsequently and considering the Ministry of Education policy in inclusive education, the Hilton House Hostel now limits its services to children under the following categories

1. Children with high support needs and disabilities
2. Children with no family support
3. Children at risk of abuse or neglect

## HILTON HOUSE INTERNAL PROCESS

During 2018 the Hilton House Hostel internal processes, staffing and care plans were reviewed and redrafted in accordance with appropriate standards of care required.

In accordance with the new intake policy, the internal processes of the Hostel were reviewed, and the following was drafted.

1. The children who are placed at the Hostel will require a care order, medical report and birth certificate from the Department of Social Welfare.
2. If the child has been identified by the FHO team or by a member of the community, the FHO admin and

community support officer will work with the Department of Social Welfare to acquire the above documentation for registration.

3. Once a child has been registered the hostel will prepare for a safe and appropriate environment for the child with necessary supportive devices and accessibility according to the child's needs.
4. The child will then undergo other necessary inhouse assessments (Physiotherapy, Speech Pathology, Audiology) assessment with all departments and placed on an inhouse care plan.
5. Based on the needs assessment the child will be provided with the best care plan to develop and support the child's physical, mental and emotional needs. Care plans for children will be drawn up on enrolment which will consider the child's care needs, support needed, how long the child will stay in facility and any other requirements.
6. All nutrition, clothing, sanitary and health needs of the child will be catered for by the Hilton House hostel. Medical and health interventions will be provided in collaboration with local medical officers and monitored by the Community Support and Administration Department.
7. Reports of children referred by the Social welfare will be provided on a quarterly basis.
8. Director Social Welfare will be contacted for any urgent medical needs of child under care.



#### CARE PLANS:

**Respite care** - for children who will come in on a part time basis only and will be transitioned out to another home or their family once the goal of the care programme is achieved. These children will have specific goals and the multidisciplinary team will work to achieve goals for the child with the parent or caregiver.

**Palliative care** - for children who might come for a short period to help the parents and child with the quality of life. Children in this plan will either stay on a temporary basis or through their lifespan.

**Supportive care** - where a child will come into the hostel one time for any parent support plan or brought into the hostel to receive support from specialists from FHO and hostel. The child will be visited by the hostel team for reviews and brought in for short time spans before hospital reviews, when parents are not available or when child might need some facility due to house/home conditions.

**Full time care and support** - children referred for this will undergo a thorough evaluation and will remain on care throughout their life. These children will have to meet all criteria for hostel entry stated above.

	BOYS	GIRLS
High support Care	3	3
Respite Care	0	6

Ages 8 months – 38yrs  
Ages 8 yrs – 36yrs

#### Children under High Support Care

The Hostel offers care to 6 individuals who require assistance with all of their activities of daily living as well as medical management due to the severity of their condition. The care plans are focused on quality of life. Sensory based programmes, communication programmes, excursions



when possible and other activities are a part of the care programmes.

The individuals under this care plan require constant monitoring of vitals, fluid intake, diet and medication requirement. The individuals are provided with physiotherapy on a daily or weekly basis as required. Communication programme and occupational therapy support is also offered.

Given the high support needs of these residents electronic hospital beds were purchased to provide increased options for positioning, mattresses to reduce the risk of pressure areas and improving the safety for manual handling for staff and the residents. A portable electric hoist was also purchased to enable the residents to be lifted in a manner which is fully supported and reduces the risk to both staff and residents. All caregivers have participated in training to effectively use the equipment. Other equipment such as a shower chair has upgraded the existing equipment in the unit.

#### **Children under Respite Care**

Children under the above care attend the Hilton Special School on a daily basis. The families of these children are encouraged to visit, and they are requested to take the children home as frequently as possible or at least during school holidays so that the child maintains contact with the family. However, this presents a challenge at times as the families may prefer to be exempt from this responsibility due to various reasons.

While the family is encouraged to support the child in any manner possible the Hostel still supplies all needs such as food and nutrition, health and hygiene, clothing assistive devices and school requirements for the children.

#### **STAFFING AT THE HOSTEL**

There are currently 9 Caregivers at the Hostel.

Minimum qualification for position as Care Giver is a caregiver training certificate from a recognized institution.

The Hostel Caregivers are also supervised by the Nurse attached to the Receiving Office at FHO. The first registered Nurse was employed in December of 2018.

The Caregivers work on a roster that places two care givers and a general attendant for floor duties and kitchen duties at any given time 24hrs a day.

Allocation of staff to either the high needs unit or the baby unit has allowed us to train specific care givers in different areas depending on the needs of those residents. We have developed monitoring systems for recording medications, fluid intake, bowel monitoring and vital signs. This enables us to be proactive regarding the resident's care.



During 2018 there were many significant health issues that occurred due to the condition of the disabilities that required constant hospitalization of the individuals. This places a huge strain on the staff as one staff member is required to be placed as the personal care attendant along with the child who is hospitalized.

#### **SUPPORT TOWARDS THE HOSTEL**

The Hostel is supported through a grant from the Ministry of Women, Children and Poverty Alleviation, and further supplemented through the funds raised by the FHO Board fundraising activities. Other donations in kind are also welcomed and the Hostel is fortunate to have a constant inflow of donations throughout the year.

#### **FUTURE GROWTH**

- For 2019 and beyond the demand for our service has increased from 12 residents to a need of 20 identified children currently in the community. Our facility is at full capacity and subsequently a request for relocation or significant modifications to the current environment are required to accommodate this need.
- More hostel/specialised beds and equipment are needed. Despite the existing hostel provision of a hoists and commodes but can be better utilised in a state-of-the-art facility. A purpose-built bathroom is required to enable greater safety for bathing of the residents.
- The current facility does not have adequate space for recreational space and specialised/isolated wards.
- The current facility and staff are only able to meet the needs of the current roll and the needs requirements will change as more children come in requiring different care plans.

# HILTON AUDILOGY DEPARTMENT



*"Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons"*

- United Nations Convention on the Rights of Persons with Disabilities- Article 25- Health.

The department offers a wide range of services in keeping with the overall Organization goals of providing early detection and intervention at the earliest possible time in the life of a child. It remains the only facility in Fiji providing a comprehensive range of Audiology services most of which are not available in Fiji.

## KEY FUNCTIONS

### Early Detection

- Infant screening offered at the Neonatal Intensive Care Unit (NICU) of the CWM Hospital
- Screening and testing of children referred by doctors and other professionals as well as walk in clients
- Follow up diagnostic testing for children who did not pass initial screening.

### Intervention and Therapy

- Fitting of hearing aids – Hearing aids are programmed to suit the child's hearing loss and fitted together with a custom made ear mould.

### Outreach

- Screening programme for children in special schools around Fiji

### Training and capacity development

- Ongoing training and upskilling by professionals in the fields of Audiology for in house staff
- Training and workshops for teachers in special and inclusive schools
- Parent awareness sessions and counselling

### AIM

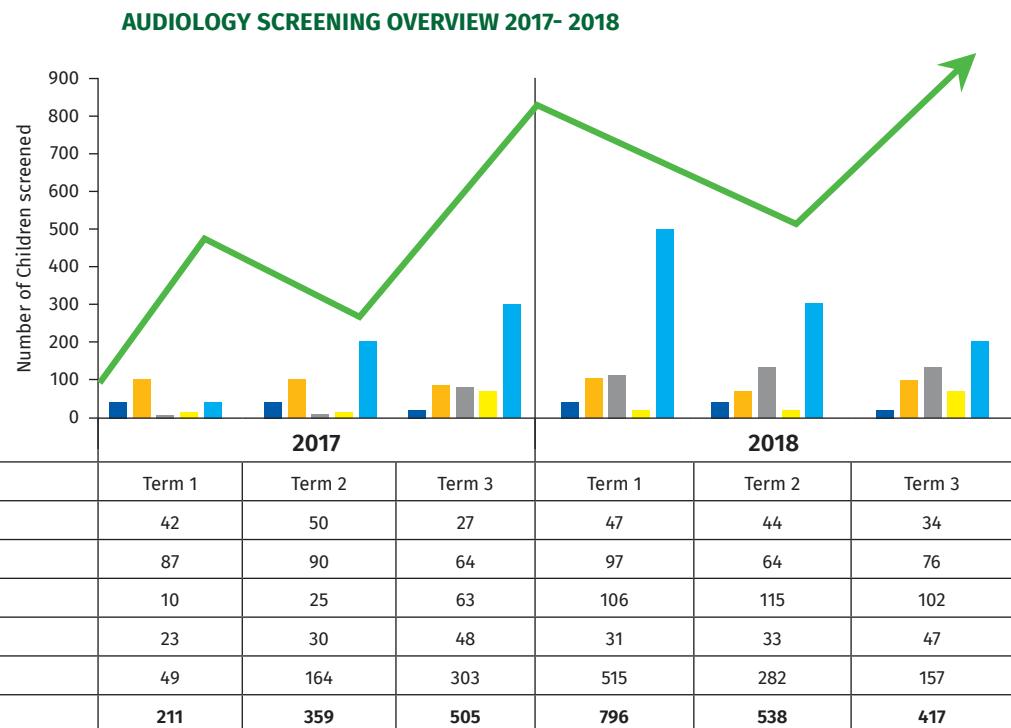
Providing early detection, hearing loss prevention and intervention to children with hearing and hearing related problems at the earliest possible time in the life of a child.

### TEAM

- **Dr Donna Carkeet:** Consultant Audiologist from Australia.
- **Sevanaia Ratumaitavuki:** Consultant Audiometrist.
- **Shabina Dean** – Programme Co-coordinator for Audiology Department, Audiology and Speech Pathology Assistant
- **Terence Chand** – Ear mould technician

### PARTNER ORGANIZATIONS

- EARS Inc. Australia

**FHO AUDIOLOGY DEPARTMENT STATISTICS JAN - DEC 2018**

	EIC	HSS	OUT PATIENT	NICU	SPECIAL SCHOOLS
<b>Screenings:</b>					
Automated Auditory Brainstem Response (AABR)			4	60	
Otoscopy	256	484	484	6	1886
Tympanometry	260	543	486	6	1787
<b>Assessments/ Testing:</b>					
Distortion Product Otoacoustic Emissions (DPOAE)	58	29	226	51	147
Visual Reinforcement Audiometry (VRA)	18	16	73		20
Play Audiometry	13	65	323		471
Audiometry		4	73		69
Auditory Brainstem Response (ABR)			4	8	
<b>Assistive Device Fitting:</b>					
Ear moulds	18	44	45	4	76
Hearing Aid fittings (Children)	7	17	23	2	41
Bone Conductor Hearing Aids (Children)		2	1		1
FM System		3			
<b>ENT – Ear Pathology</b>	<b>60</b>	<b>63</b>	<b>44</b>	<b>1</b>	<b>132</b>

### IN-HOUSE CLINICAL SERVICES

The FHO audiology team provides clinical services to children who attend HSS and EIC as well as outpatients referred to us by doctors, hospitals, schools and by families.

As a mandatory requirement, all students who are enrolled in to the Hilton schools are screened and tested prior to admission. Hearing aids are fitted following assessment when required.

The Audiology team conduct follow up checks on all students who have been identified with a hearing loss or at risk of acquiring a hearing loss. While in-house testing is a part of the follow up the staff also accompany the students for frequent medical checks by a general physician and a volunteer ENT specialist to ensure optimal ear health. FHO in-house HSS/EIC students are reviewed and screened each school term for wax and ear infection.

Accountability for the hearing aids by students, parents and even teachers alike are a cause for concern. Therefore, while the hearing aids provided are at no cost to the family, the parents/ guardians are required to sign an agreement to refund the organization at a cost of \$50 for any willful damage or loss of aid. The use of these devices are monitored by the Audiology Department to ensure proper management of device.

#### In House Caseload 2018

	Term 1	Term 2	Term 3	No. of Children Fitted with Hearing Devices
Early Intervention Center	47	44	34	7
Hilton Special School	97	64	76	17
Playgroup	14	8	19	0

#### EAR MOULD PRODUCTION

Frank Hilton Organisation Ear Mould Lab is currently the only unit of its kind in Fiji. The lab is manned by a technician trained by Dr. David Pither, from our partner organization EARS Inc. The lab produces both soft mould and hard moulds. The custom made ear moulds are changed every 3-4 months for children with hearing aids to ensure accurate fit.

Ear Moulds Produced January- November 2018	
In House – Hilton Schools	62
Out Patients and Other Special Schools	125



#### OUTREACH PROGRAMMES

##### Colonial War Memorial Hospital – Neonatal Outpatients Screening Programme

Number of babies	Out - patient
Passed AABR	28
Passed DPOAE	51
Referred to CWMH next NNC	16
Referred to Hilton Clinic	4
Follow up screening at Hilton Audiology	12

**Total: 111 babies screened**

- Neonatal Out- patient Clinic – conducted every Thursday from 1pm – 4.30pm at the CWM Hospital

##### Special School Screening Program

Special School Screening Program commenced in March 2017. Through this programme audiology team was able to identify hearing loss and fit hearing aids to provide sound amplification to suit the child's level of hearing. The provision of amplification is required to derive successful outcomes from classroom learning as well as language development. This programme is in keeping with the mandate of early detection of disabilities and early intervention to children with disabilities and has continued through 2018 financial year.

Date	School Name	1st Visit		2nd Visit		3rd Visit		Followup At Hilton	No. Seen By Ent	Hearing Aids Fitted
		Total School Roll	No. Screened 1st Visit	Total School Roll	No. Screened 2nd Visit	Total School Roll	No. Screened 3rd Visit			
6/2/2018	Gospel School for the Deaf			58	21					
21/9/2018	Gospel School for the Deaf								32	
9/2/2018	Nausori Special School			79	28					
18/9/2018	Nausori Special School					77	53			
12/9/2018	Suva Special School			104	60			14		
16/04/2018	Fiji School for Blind	28	25					3	0	0
4/4/2018	Early Intervention Centre	50	47	50	44	50	34	34	17	6
31/01/2018	Hilton Special School	102	97	102	64	102	76	55	31	36
22/3/2018	Ra Special School							15		2
12/2/2018	Nadi Special School			168	80					
25/7/2018	Nadi Special School					168	24			6
29/3/2018	Ba Special School							5		6
20/3/2018	Sunshine Special School							12		1
13/02/2018	Lautoka Special School			150	41					
25/7/2018	Lautoka Special School					150	17			4
27/3/2018	Sigatoka Special School							8		
19/02/2018	Labasa Special School	68	59					3	28	
11/7/2018	Labasa Special School			61	27			8		6
19/02/2018	Northern NCPD		15							
11/7/2018	Northern NCPD								10	
21/02/2018	Nasavusavu Special School	32	20					12	14	
10/7/2018	Nasavusavu Special School			33	24			0	4	2
21/02/2018	Nasavusavu District School	300	184					6	30	
13/6/2018	Norah Frazer	20	19						13	
3/7/2018	Norah Frazer							13	5	2
13/6/2018	Levuka Main Stream Schools		72						40	2
13/6/2018	Levuka Out - patient		18						17	
13/5/2018	Suva FNCDP	70	40							115
		670	596	805	389	547	204	188	199	



The three main aims of the Special School outreach programme are:

1. Prevention of permanent or increased hearing loss through medical management.
2. To commence hearing rehabilitation as early as possible in order to reduce the effects of the hearing loss on the long-term speech, language and educational outcomes of the child.
3. To raise teacher, parent and community awareness of hearing loss in children.

In each phase of the screening process the FHO Audiology team have been involved in:

- Conducting professional development of teachers in the schools to prepare for screening days.
- Assisting in the coordination of the schools screening
- Reporting on statistics
- Following up cases of children with ear pathologies requiring medical treatment
- Provision of hearing aids to the students who require this technology
- Education of the family members about hearing loss and the use and care of hearing aids.
- Follow-up of the children with the hearing aids to check how they are progressing with the technology.
- Providing professional development training to “hearing aid champions” – staff within each school who will check and troubleshoot any difficulties with the hearing aids.

#### **Nausori Special School**

FHO Audiology Team visited Nausori Special School for 2nd

visit on the 9th Feb, & 3rd visit on the 18th Sept, 2018. The total number screened on both visit was 81. The team was assisted by 2 teachers from the school assigned by the Head Teacher Mrs Nandita Chand.

- 21 students were referred for ENT clinic.
- 21 students were referred to Frank Hilton Audiology Clinic for further assessment

#### **Gospel School for the Deaf**

FHO audiology team did a second visit screening on the 6th Feb 2018 and conducted follow up screening on 21 students and a third visit screening on the 21st Sept 2018 during which ear impressions were taken on 16 students for new ear moulds. The team was assisted by 2 teachers from the school assigned by the Head Teacher Mrs. Mudaliar.

- 20 students were referred for ENT clinic.
- 17 students were referred to FHO Audiology Clinic for further
- 16 students new ear impressions were taken for soft moulds

#### **Suva Special School**

FHO Audiology Team visited Suva Special School for screening on the 11th / 12th Sept 2018. 60 students were screened. Team was assisted by 2 teachers from the school assigned by the Head Teacher Mrs Makereta.

- 17 students were referred for ENT clinic.
- 14 students were referred to FHO Audiology Clinic for further assessment and assessments

#### **Fiji School for the Blind**

FHO Audiology Team visited Fiji School for the Blind for screening on the 16th April 2018. The school roll for Blind school is 28, 24 students were screened by FHO Audiology Team. The team was assisted by 2 teachers from the school assigned by the Head Teacher Mrs Sharmila Chandra

- 10 students were referred for ENT clinic.
- 3 students were referred to FHO Audiology Clinic for further assessment and assessments were conducted on 17/07/2018

#### **Fiji Vocational, Technical Training Centre - Suva**

40 students from FNCDP came for hearing screening at FHO audiology clinic on the 13th May 2018. The school roll for FVTC is 70. 17 students were referred for ENT clinic. The team was assisted by 2 teachers from the school assigned by Master Jone.

#### **Ra Special School**

Follow up Screening and Assessments - 15 students from Ra Special School came for hearing assessment at FHO Audiology clinic on the 22nd March,2018

- 9 students were referred for ENT clinic
- 1 student was fitted with hearing aid device.



### Ba Special School

5 students were referred to Advance Eye & Ear clinic in Ba for further assessment on the 29th March 2018 and 3 students were fitted with hearing aid devices

- Referred 18 students to FHO for follow up screening assessment
- Assessed at school 12 students.

### Nadi Special School

FHO audiology team conducted 2nd visit on the 12th Feb 2018. The team screened 80 students.

The FHO Audiology team conducted 3rd visit on the 15th May 2018. Screened 17 students

- 34 students referred for ear pathology
- 17 students to FHO Audiology Clinic for further screening and assessments

- Referred 7 students for ENT medical treatment.
- Referred 10 students to Hilton Clinic for follow up screening and assessment
- 2 ear impressions taken for ear moulds

FHO Audiology team did 3rd visit on the 16th 2018 and screened 24 students.

2 students came for hearing aid fitting at FHO Audiology department on the 25th of July 2018

- 4 students to FHO Audiology Clinic for further screening and assessments.
- 3 students came for hearing aid fitting at FHO Audiology department on the 25th of July 2018

### Sunshine Special School

12 students came for follow up assessment at FHO Audiology clinic on the 20th March 2018 and 1 student fitted with a hearing aid device.

**Sigatoka Special School**  
8 students came for follow up assessment at FHO audiology clinic on the 27th March 2018

### Lautoka Special School

FHO Audiology team conducted 2nd visit on the 13th Feb 2018. Screened 41 students

### Labasa Special School

FHO Audiology Team visited Labasa Special School for screening on the 19th Feb, 2018. The school roll for Labasa Special is 68. Out of 68, 59 students were screened by the team. The team was assisted by 2 teachers from the school assigned by the Head Teacher Master Mukesh.

- Referred 25 students for ENT medical treatment.

- 28 students passed did not required any further action
- 11 students were referred for ENT Clinic (SDMO – Labasa Hospital with Dr.Oh)



- 3 students were referred to FHO Audiology Clinic for further assessment
- 11 students to be reassessed at school
- 28 students were seen by ENT specialist Dr. OH at the School
- 6 impressions were taken for ear moulds

FHO audiology team conducted a second visit to the school on the 11th July 2018:

- Programming hearing aid and fitting 3 children with hearing aid.
- Conducted Parent Awareness talk on the use and care of hearing aid
- Conducted training for teachers on hearing aid maintenance:
  1. Checking and troubleshooting for hearing aids
  2. Maintenance of aids.
  3. Battery stock management
  4. Reporting format
- Recheck Tympanometry – 26 students & referred to ENT clinic 8 students (23rd Aug 2018 with Dr.OH at Labasa hospital)
- Conduct new enrolment screening

#### **Labasa Northern National Council for Person with Disability**

FHO Audiology Team screened youth from vocational Centre of National Council for Person with Disability on the 19th Feb, 2018 at Labasa Special School. 15 youths were screened and impression taken on 6 youths for hearing aid fitting. The team

was assisted by 1 teacher from the school assigned by the NCPD board Miss Monisha.

FHO audiology team did a second visit to the school on the 11th July 2018:

- Programming the hearing aid and fitting 6 youths with hearing aid.
- Conducted Parent Awareness talk on the use and care of hearing aid

#### **Nasavusavu Special School**

FHO Audiology Team visited Nasavusavu Special School for screening on the 21st Feb, 2018. The school roll for Nasavusavu Special is 32 out of which 20 students were screened by FHO Audiology Team. The team was assisted by 1 teacher from the school assigned by the Head Teacher Ms. Kasilia

- 5 students passed did not required any further action
- 3 students were referred for ENT Clinic (SDMO – Labasa Hospital with Dr.OH)
- 12 students were referred to Frank Hilton Audiology Clinic for further assessment
- 14 students were seen by ENT specialist Dr.OH at the School

FHO audiology team conducted a second visit to the school on the 10th July 2018 and performed:

- 24 students Conducted new enrolment screening and reassessments and recheck on Tympanometry after ENT Clinic
- 4 referred to Nasavusavu hospital ENT for medical treatment
- Conducted Hearing Aid Champ training of teachers Savusavu
- 2 impression taken for ear moulds

#### **Nasavusavu District School**

FHO Audiology Team screened Nasavusavu District School for screening on the 21st Feb, 2018 at Nasavusavu community hall. The school roll for Nasavusavu District is 300 out of which, 184 students were screened by FHO Audiology Team. The FHO team selected classes 1- 3 for screening as well as children identified by the teachers who present hearing issues in the classroom. The team was assisted by 2 teachers from the school assigned by the Head Teacher

- 129 students passed did not required any further action
- 14 students were referred for ENT Clinic (SDMO – Savusavu Hospital)
- 16 students follow up ENT clinic at Labasa hospital 26/04/18
- 6 students were referred to FHO Audiology Clinic for further assessment
- 19 students were seen by ENT specialist Dr.OH at the School

### Norah Frazer Special School

FHO Audiology Team visited Norah Frazer Special School for screening on the 13th June, 2018. The school roll for Norah Frazer Special is 21 out of which 20 students were screened by FHO Audiology Team. Team was assisted by 1 teacher from the school assigned by the Head Teacher Apikali

- 7 students passed did not required any further action
- 5 students were referred for ENT Clinic (SDMO – (Levuka Hospital))
- 13 students were referred to Frank Hilton Audiology Clinic for further assessment
- 13 students were seen by ENT specialist Dr.OH at the School

Follow up clinic at FHO audiology dept. on the 3rd July 13 children attended Hilton audiology clinic for recheck of tympanometry and then to ENT clinic at CWM hospital. Cost of which was born by FHO

### Levuka Main- stream schools

Total number of 72 children were seen by FHO Audiology dept. on the 13th June,2018 from 13 Levuka mainstream school.

- 36 students passed did not required any further action
- 11 students were referred to FHO Audiology Clinic for further assessment
- 66 students were seen by ENT specialist Dr.OH
- 27 were referred to Levuka hospital for treatment

### TRAINING AND AWARENESS PROGRAMMES

The Frank Hilton Organization strongly believes in the upgrading of professional skills and continuously focuses on expanding the staff's skillsets. The Audiology Department being the only one of its kind in Fiji follows a strict training schedule under the supervision of the consultant Audiologist Dr. Donna Carkeet. Frank Hilton Organization is a strong advocate on the necessity to develop local capacity without which sustainability of the programme is questionable.

Further to this, the team conducts frequent awareness programmes amongst various communities to ensure that children with hearing loss are identified and offered appropriate support at the earliest possible time.

- 12th /13th /14th March 2018 – Ear Mould Training conducted by Dr. David Pither
- 23rd /24th /25th April 2018- Training in Play Audiometry/ PLOTT Test/ABR Test/Bone Conduction conducted by Dr.Donna Carkeet
- 20th June 2018 - Hearing Aid Champ training for all Special School. Facilitator: Dr. Donna Carkeet /Sevanaia Ratumaitavuki/
- Training on the following topics;
  - Checking and troubleshooting for hearing aids
  - Maintenance of aids.



- Battery stock management
- Reporting format
- 21st June – Pure Tone Audiometry Training conducted by Dr. Donna Carkeet
- 23rd July – 3rd Aug Masking –Air and Bone Conduction / Interpreting audiograms conducted by Dr. Donna Carkeet
- 25th/27th September,2018 – Masking & Air/bone Conduction conducted by Donna Carkeet (Audiologist)
- 22nd /23rd October,2018 – Primary Ear & Hearing Care Training Intermediate Level conducted by Dr.Oh Chunghyeon (ENT Specialist)

### CHALLENGES

#### Consistency and Follow up

#### Schools and families following up on students requiring medical treatment

When a referral is given, parents do not take the child to see a doctor. This means that despite identifying the medical issue, the child is not receiving medical treatment. As a result no intervention can be conducted to assess or fit the child with a hearing aid and the child continues to have temporary hearing loss for a large part of the school year, therefore affects their ability to learn and communicate.



#### Hearing Aid Champ in Schools

Teachers assigned and trained to troubleshoot problems regarding hearing aids, check consistency for child wearing aid and ensure proper use of hearing aid by child do not maintain consistency and do not follow up in accordance with the process. This means the child often does not receive the batteries required or the maintenance required and does not benefit from receiving the aid.

#### NOTE FROM PARENTS;

##### **Dear Team Audiology,**

On behalf of my family, I would like to say Vinaka Vakalevu to Shabina, Donna, Sevanaia and the whole Hilton audiology team for all the assistance you have provided and continue to provide for our son Keola.

Keola has developed in leaps and bounds since being tested and fitted with hearing aids two years ago. Before being tested we remember being worried when Keola would become frustrated when we couldn't grasp what he was trying to say. This is now such a rare occurrence in our household, thanks to the tireless efforts of your team, the speech therapy team and his wonderful teachers at EIC who have also taught him sign language (his parents are still trying to catch up).

The commitment of the audiology team to ensure that Keola's hearing is being tested regularly, his hearing aids are functioning well and the patience you've lent when we've popped by for advice to our questions have been such a blessing to us first-time parents who remember feeling out of our depth when we first suspected that Keola had a hearing impairment and were unsure of the services available to help.

Our family has a lot to be grateful for as we contemplate the year and Keola starting Class 1 in 2019, and the Hilton Organisation and audiology family is high on our list.

Thank you and have a wonderful festive season.

Regards,

Andreas Frey (Keola's dad)

##### **Dear Team Audiology,**

Thank you very much for Adriu's Rakai's hearing aids. It was indeed great help. He loves it and has been a blessing for his education and daily conversation.

Vinaka Vakalevu,  
Filimoni Kaitavu  
(Adriu's dad)

### Message from our partners



### EARS INC. FIJI PROJECT OVERVIEW

There are now regular Fijian audiology services available in Ba, Suva and Nadi. Frank Hilton Organisation (FHO) in Suva leads the way for audiology in Fiji. A successful partnership with EARS Inc., who provide training and equipment, has facilitated progress in audiology service development. Audiologist, Dr. Donna Carkeet, from EARS Inc. visits from Australia around five times a year to continue to provide training to staff from not only FHO but for teachers, doctors, and hearing screeners from other organisations. She works to continue the development of the services offered as well as see complex paediatric cases.

FHO employs an audiometrist, Mr Sevanaia Ratumaitavuki two days per week as well as two Audiology Assistants (AAs). The AAs coordinate services for children up to 18 years of age who receive free audiological evaluations; including, visual reinforcement audiometry, auditory brainstem response (ABR) testing, and auditory steady state response testing. Hearing aid fitting, replacement ear moulds, hearing aid batteries, and repair and maintenance are also done at FHO. In 2017-2018, the FHO audiology team completed screening of over a thousand children in special schools in Fiji and proceeded to test and fit hearing aids for over 100 children in Labasa, Savusavu, Rakiraki, Ba, Lautoka, Nadi, Sigatoka, Suva, and Nausori special schools.

FHO AAs, in conjunction with the Colonial War Memorial Hospital in Suva, conducts neonatal screening, using Automated ABR, for premature or high-risk infants. An ear mould laboratory and basic repair services were also established at FHO with training by EARS Inc. volunteers. EARS Inc. has had a number of other volunteer audiologists that have visited to assist in the project in Fiji. FHO through its partnership with EARS Inc. will continue to support partnerships with government and non-government organisations (NGOs) that target capacity building (e.g., training AAs and nurses) and hearing loss identification (e.g., screening outreach programs to rural and remote regions of Fiji).

### MESSAGE FROM DR. DONNA CARKEET,

In 2018 I am proud to say I saw the local team step up and begin to really plan and deliver the services with less support. In early 2018 we revised our internal processes for recalling and making appointments for new and review cases both at the schools and our outpatients. We also revised our data collection and protocols. This has led to more efficiency in the review of patients and the prioritizing of cases to see

Sevanaia. These protocols have assisted in better using his time, and in assigning cases to other team members.

The growth in the number of new outpatient cases has meant that Shabina has had to manage some of the routine cases. She was given additional training and has stepped up and has grown in confidence in her clinical abilities, she has continued to try to deliver the best service possible to the children at Hilton and our outpatients. Therefore at the end of 2018 I recommended that she be supported to do the Diploma of Audiometry next year to further increase her skills.

Towards the end of last year with the increased demand of the new outpatients and the increase in the number of children with hearing aids who require ongoing appointments, it was seen that Sevanaia's days were getting very full and it was recommended that his time be increased to two days per week in 2019.



Another change last year was that we implemented a protocol with the ENT at CWM hospital for review of the children at HSS and EIC who have ongoing middle ear conditions. Some of these children have now had operations to place grommets in the eardrums to alleviate

this. The team monitors these chronic cases monthly at school and all children are screened for middle ear and wax issues each term.

Our team has continued to be frustrated with the lack of review to the cases that fail screening at CWM infant clinic and require review, but in November we could begin to recall these patients by contacting them directly, rather than the hospital. We believe this will see a big change in this process for us in 2019.

The special school screening has continued, and we have now attended children from 17 special schools. This continues to highlight the difficulties in provision of local services in these areas of Fiji. Discussions began with both the ENT who visits these area hospitals that there is a need for training in the local areas of someone for audiometry and ear health. We have had initial discussions with the Ministry of Health to provide nurse training in 2019. We hope to report more about this next year.

Overall it has been a busy but eventful 12 months for our team and I am very proud of the increased independence that is developing in the team.

# HILTON PHYSIOTHERAPY DEPARTMENT



*“...right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability.”*

- United Nations Convention on the Rights of Persons with Disabilities - Article 25 - Health

*“...ensure personal mobility with the greatest possible independence for persons with disabilities, including:*

*a) Facilitating the personal mobility of persons with disabilities in the manner and at the time of their choice, and at affordable cost;”*

- United Nations Convention on the Rights of Persons with Disabilities- Article 20- Personal Mobility

The Physiotherapy department of the Frank Hilton Organization offers daily physiotherapy and related services to over 84 children including 65 children from both Hilton Early Intervention Centre and Hilton Special School. The Department was initially set up to ensure that children within the 2 special schools under the management of the Frank Hilton Organization receive therapy service as per the need and on a regular basis. However the department has grown in capacity to offer a wide range of services and has just commenced an out patients service as well as an outreach arm.

## KEY FUNCTIONS

### Assessments and evaluations

- The physio department provides paediatric assessment to all children under the age of 18 years, who are referred to Frank Hilton Organization.

### Therapy services

- Provide ongoing therapy services on a one-on-one basis as well as group sessions.
- Classroom based programmes are offered in gross and fine motor skills for children in accordance with their Individual Educational Plan goals. These programmes are incorporated in to the daily classroom activity schedule to ensure consistency.

### Mobility Device Service (MDS)

- Children are provided with mobility devices to ensure they can participate in daily activities at home and in the school environment.

### Home based programmes

- Children who cannot access the daily school programme or physiotherapy services are provided with home based therapy programmes. In most cases a parent or caregiver is trained to carry out the programmes and the Physio team will monitor progress.
- Advice on home modification and accessibility is also provided to families of children with mobility devices.

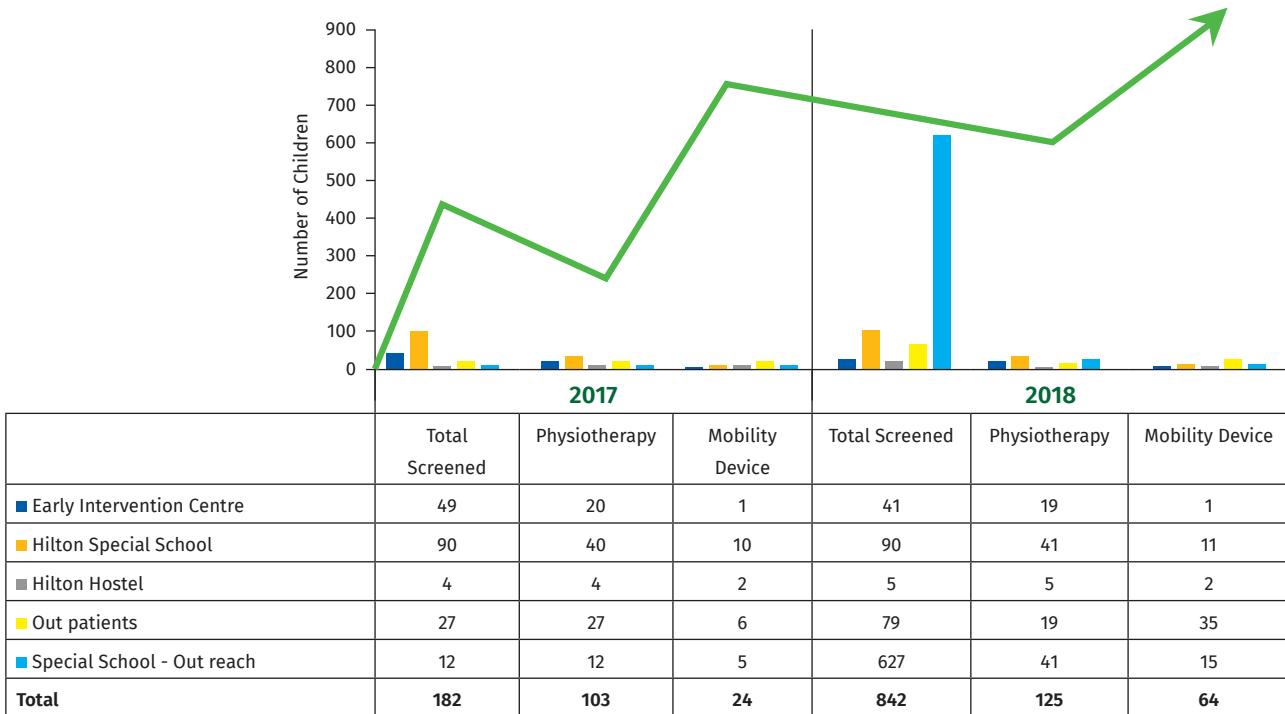
### Outreach Programme

- The department commenced its outreach programme in 2018 that provided access to wider communities to receive mobility devices, physiotherapy screening and referrals back to FHO services, nearest physiotherapy unit or hospital for follow up.

### AIM

The aim of the Physiotherapy department is to ensure children with a disability or developmental delay are provided with necessary programs to improve motor functional skills and activities of daily living. It aims to provide programmes at the earliest possible time and consistently thereafter to prevent further complications and slow the progress of the disability. The department also aims to provide children with assistive devices and postural support devices that will improve access and participation in school and home environment.

### PHYSIOTHERAPY SERVICE OVERVIEW 2017-2018



#### TEAM

- Sylvia Reddy - Physiotherapist
- Priyansha Chand - Physiotherapist
- Sazmin Nisha - Programme Coordinator/ Community Rehabilitation Assistant
- Anasavaia Liku – Community Rehab Assistant
- Jope Liloima – Wheelchair Technician

#### PARTNER ORGANIZATIONS

- Motivational Australia

#### IN-HOUSE SERVICES FOR JAN- DECEMBER 2018

	Total no. of children screened	Total identified for Physiotherapy services	Mobility Devices given
Hilton Early intervention Centre	41	19	1
Hilton Special School	90	41	11
Hilton Hostel	5	5	2
Out patients	79	19	35
Outreach	627	41	15
<b>TOTAL</b>	<b>842</b>	<b>125</b>	<b>64</b>

The department continues to provide in house programs to both the schools. At Hilton Special school 90 children were screened in total and 41 were identified to receive physio therapy or hydro therapy intervention, 49 children were screened at The Early Intervention Center and 19 were placed for physiotherapy intervention. In total the department sees 60 children from both schools including the 5 individuals with high support needs at the Hilton Hostel. Programmes are conducted in individual and group sessions. The programmes are mainly play based and offered in a fun and enjoyable manner. Parents and caregivers are encouraged to participate however this remains a challenge. While families are encouraged to support the child where necessary, independence of the child is also stressed.

The Physiotherapists also works with teachers within the schools to ensure they are aware of the child's requirements and are able to incorporate these in to the daily teaching and learning programmes. Professional development is also provided to teachers and monthly meeting to discuss the child's progress and goals are conducted.

The department has worked alongside with the Occupational Therapist, Speech Pathologists, Audiologists, Teachers, Parents and Carers all throughout the year. We also welcomed Occupational Therapy Students and Speech Therapy students from the University of New Castle this year who completed their clinical placements and practical's at FHO. A JICA volunteer who is a Physical Therapist by profession was also welcomed as a part of the team and based at the Hilton



Special School during the third term. These collaborations and partnerships further strengthened the service delivery of the physiotherapy team during 2018.

#### **MOBILITY DEVICE SERVICE (MDS)**

FHO mobility device service (MDS) was launched on the 11th of May 2018. The Department works in line with the Pacific MDS Project which focused on supporting and strengthening mobility device services in Fiji, the Solomon Islands, Vanuatu, Kiribati and Papua New Guinea. The partnership between Motivation Australia (MA) and FHO is part of the Pacific MDS Project 2016-2019. Through the Pacific MDS project, MA and FHO are working together to strengthen the capacity of FHO to meet the mobility and seating needs of children.

The service is delivered through an 8 steps guideline drafted in accordance with WHO protocols.

1. **Identification screening and referral** - Identify the client and his/her needs through a basic screening.
2. **Assessment** – Conduct a full comprehensive assessment for wheelchair clients.
3. **Prescription and Selection** – once the client has been measured for wheelchair, the technician and clinician selects the most appropriate mobility device that suits the client's needs and environment.
4. **Funding and Ordering of Product** – FHO is fortunate to acquire the support of donors for products and has available stock on hand.
5. **Product Preparation** - The product best suited for the child in accordance with the child's activities, environment and physical needs is selected and adjustments done accordingly to ensure postural support.
6. **Fitting** – The process where the child is given an opportunity to try out the product and ensure comfort and functionality.
7. **User Training** - The child and the family are trained to use the product and basic maintenance
8. **Maintenance Repair and follow up** - Once the fitting is conducted the team will call/ visit every 3-6 month or sooner if any urgent repairs are required.

#### **MDS OUTREACH PROGRAMME - SPECIAL SCHOOLS**

A total of 627 children were screened during the outreach conducted and 15 received support through the mobility device service while 41 were referred to medical officers and hospitals for further treatment. The outreach focused on providing early detection and physiotherapy intervention by screening children in lower grades from ECE level to Year 1-3. Also 11 Professional Development sessions were conducted during the special school screening this year. It also focused on training the teachers on identifying and screening children who require seating devices, and the benefits of having an appropriate wheelchair. Along with the Special School screenings, the team also managed to do community screening with the Health Workers. It was noted that many children who required physiotherapy services or wheelchairs were not being seen or referred, thus not receiving any form of support. During the outreach the team also screened children for respiratory issues and conducted lung function test. Children identified were sent for further treatment to the nearest health centres and hospitals.

The Physiotherapy department conducted visits to 11 special schools in Northern, Central and Western Division as part of the Special School Screening Program. The first outreach was to Labasa Special School which was from the 2nd to 3rd of July and to Nasavusavu Special School from 4th to 5th of July, 2018. The Central Outreach was conducted in 3 Special Schools, including Nausori Special School on 17th July, Ratu Latianara Memorial Primary School from the 18th to 19th July and Arya Samaj Primary School from 25th- 26th July, 2018. Western Outreach was conducted for Nadi Special School on 11th September, Lautoka Special School and Sunshine Special School on the 12th September, Ba Special School on the 13th September, Sigatoka Special School on the 15th October and Ra Special School on the 23rd October, 2018.





Schools Screened	Total number Screened	Total number of Wheelchairs given	Number of children referred for medical and physiotherapy services
<b>North</b>			
2 <sup>nd</sup> - 3 <sup>rd</sup> of July - Labasa Special School	36	3	6
4 <sup>th</sup> - 5 <sup>th</sup> of July - Nasavusavu Special School	21	3	6
<b>Central</b>			
17 <sup>th</sup> July - Nausori Special School	28	3	5
18 <sup>th</sup> - 19 <sup>th</sup> July - Ratu Latianara Memorial Primary School	147	-	1
25 <sup>th</sup> - 26 <sup>th</sup> July - Arya Samaj Primary School	195	-	5
<b>Western</b>			
11 <sup>th</sup> September - Nadi Special School	53	2	5
12 <sup>th</sup> September - Lautoka Special School	24	3	6
12 <sup>th</sup> September - Sunshine Special School	48	-	3
13 <sup>th</sup> September - Ba Special School	24	1	3
15 <sup>th</sup> October - Sigatoka Special School	24	-	-
23 <sup>rd</sup> October - Ra Special School	27	-	1
<b>TOTAL</b>	<b>627</b>	<b>15</b>	<b>41</b>

### OUT-PATIENTS CLINICS

As awareness grows our clientele expands and so do our services. The department offered outpatient clinics and has screened and assessed a total number of 79 children. Out of these 19 were identified and placed on the physio outpatients list. They also actively participated in the Play Group for children with Cerebral Palsy that commenced this year together with the usual Playgroup for outpatients that is provided each week. The purpose of this play group is to educate and create awareness for parents of children with Cerebral Palsy and to create a support group for parents where they share experiences and difficulties faced by them.

Total outpatients screened	Total Wheelchair clients assessed	Total physio outpatients clients
79	69	19

### HOME BASED PROGRAMMES AND COMMUNITY VISITATIONS

Providing support to the child within the Centre at times restricts the ability of the team to observe and better support the family within the child's natural environment. Therefore, the importance of a home visit needs to be stressed. The department has continued with home visitations this year alongside other professionals such as Community Support Officer and the Occupational Therapist. In total the physio team has conducted 32 home visits this year including the clients seen in the community during outreach visits. After

each home visit, reports were compiled, and issues identified and addressed accordingly by the Home Visit Team. The team will also continue to offer support to the Community Support Unit in home management and accessibility for children with disabilities.

### COLLABORATION AND PARTNERSHIP

#### Partners – Motivation Australia

The partnership with Motivation Australia continues for the second year. FHO is extremely appreciative to Motivation Australia for the technical support provided towards further developing the MDS programme.

This year 2 staff were invited by Motivation Australia to attend a 1 week refresher training for intermediate level wheelchair service training in Vanuatu from 5th to 9th of March. 3 clinicians from our team attended the Intermediate Wheelchair Training in Suva, from the 18th to 29th of June. A Basic wheelchair training was also conducted by FNU in collaboration with LDS and SIA, from the 3rd – 6th September, which was attended by 2 staffs, followed by a refresher basic wheelchair training conducted by MA in partnership with FHO, MOHMS and SIA, from 19th – 21st September, which was attended by 3 staff from FHO Physio Dept.

#### Spinal Injuries Association

Although not formalized, the spinal Injuries association and FHO has been working closely to provide services to the community for many years. This year the SIA supported the

team by providing wheelchairs and mobility devices for the FHO Mobility device Service. A total of 31 products have been procured from SIA, these include pediatric wheelchairs e.g. UCP, WFK and basic wheelchairs. FHO also refers adults who require mobility devices to the SIA for support.

#### **NOTE FROM PARENT:**

##### **Jedidiah. T. Inia**

*Jedidiah was introduced to the Hilton programme in early 2018. Since his introduction to this programme we have come to see a significant improvement in his progress. Prior to the programme, his development was very slow. His body was soft, floppy and lacked support; he was about 17 months. He was not able to crawl and sit without support. He was also not able to support his own head.*

*Through the programme Jedidiah has managed to improve a lot. He has managed to roll, bunny hop, crawl and climb up and down from furniture. He supports his neck without any trouble today. He is now very active. He is playful and enjoys his playtime with the other kids at home. We his parents credit his improvement to a very helpful small group of supporters and one of it is the Hilton family. The Hilton programme has not only nurtured our son but also helped in facilitating my family to stand strong with Jedidiah.*

*Our family is grateful for the physio sessions, the counseling, the home visitation and the wheelchair. The wheel chair was a vital component that supported my son's posture.*

*The challenges ahead would be to progress our son's growth in to walking and talking. We hope to see more home visitations by the programme because as working parents the most challenge for us throughout the year was taking time off work to accommodate his programme. Nevertheless, it was a progressive year for my family and Jedidiah.*

Vilsoni. H. Inia (Father of Jedidiah)



## Message from our partners



## MOTIVATION AUSTRALIA AND FRANK HILTON ORGANISATION: 2018 SUCCESS!

### 1. PACIFIC MDS PROJECT

The Pacific Mobility Device Service (MDS) project is focused on supporting and strengthening existing mobility device services in the Pacific Region, including the Solomon Islands, Fiji, Vanuatu, Kiribati and Papua New Guinea.

Together we aim to ensure more women, men, girls and boys with a mobility disability have access to a range of appropriate mobility devices, through trained local service providers. This is achieved through strengthening the capacity of personnel in each country to provide quality mobility device services and of mobility device service managers to implement, monitor and evaluate their services. Pacific MDS Partners in Fiji include the Ministry of Health and Medical Services (MoHMS), Frank Hilton Organisation and the Spinal Injuries Association (SIA).

### 2. KEY ACTIVITIES IN 2018

#### June: Intermediate level wheelchair service training

Trainers from Motivation Australia and Cerebral Palsy Alliance (CPA) co-delivered an intermediate level wheelchair service training course for 20 participants, including three from Frank Hilton Organisation. Intermediate level training focuses on the skills and knowledge required to provide wheelchairs and supportive seating for children who need additional support to sit upright.

Two personnel from Frank Hilton Organisation Sazmin Nisha and Jope Liloma supported the training with clinical and technical mentoring, and training logistics. Priyansha Sheenal Chand, Anasavaia Liku and Sylvina Shivangani Reddy successfully completed the training.

#### September: Basic refresher training

The training co-delivered by Motivation Australia (MA) and the Latter-day Saint Charities (LDSC), was a highly collaborative activity involving a number of organisations within Fiji, including technical and clinical representatives from MoHMS, the SIA and Frank Hilton Organisation.

During the training, personnel learned how to prescribe, assemble, fit, modify, use and maintain the new wheelchairs. The training also provided the opportunity to introduce updated wheelchair service forms to further strengthen data collection and service systems.

Priyansha Sheenal Chand, Sazmin Nisha and Jope Liloma successfully completed the training.

Motivation Australia has developed and installed a mobility device service database for Frank Hilton Organisation's wheelchair services.

This database provides a real-time analysis of clients of the wheelchair service, including key demographics such as gender, age, location (urban / rural) and diagnostic information.

Integral to the database are dashboards with up to date summary statistics, as well as disaggregated, de-identified reports for service managers, funders and donors.

#### Mobility device service committee (MDSC)

The MDSC has been established with the support of the MoHMS, Ministry of Women, Children and Poverty Alleviation, SIA, Frank Hilton Organisation Motivation Australia and the Latter-day Saint Charities.

The purpose of the MDSC is to increase consistent and sustainable access for children and adults to appropriate mobility devices provided by trained personnel through professional services.

We are working together to:

- Strengthen mobility device services.
- Increase coordination between all MDS stakeholders.
- Raise awareness of the need for appropriate services.

Motivation Australia values the contribution of Frank Hilton Organisation to the Pacific MDS Project, and wheelchair services in Fiji. We look forward to working together in 2019!



# SPEECH PATHOLOGY UNIT



*“...to ensure that persons with disabilities can exercise the right to freedom of expression and opinion, including the freedom to seek, receive and impart information and ideas on an equal basis with others and through all forms of communication of their choice*

*b) Accepting and facilitating the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means, modes and formats of communication of their choice by persons with disabilities in official interactions”; - United Nations Convention on the Rights of Persons with disabilities- Article 21 – Freedom of expression and opinion, and access to information*

To be able to communicate is a fundamental need however for many children with a disability or impairment communication remains a challenge. The Frank Hilton Speech Pathology Unit specializes in speech therapy programme offered to children who require speech and communication support. Once children are identified with significant speech or communication issues, they are screened; assessed and specific programs are prepared to address the issue. The programs are run by the Speech Pathology Assistants (SPA)

at FHO and the parents are encouraged to carry out the programs at home. The initial assessments are conducted by a visiting Speech Pathologist and the results of the on-going speech therapy sessions are reviewed to ensure that the goals are met.

## KEY FUNCTIONS

### Intervention and Therapy:

- Evaluations and assessments of children
- On-going speech therapy for the children with communication difficulties

### Training and Capacity Development:

- On-going training and mentoring of Speech Therapy Assistants and other staff in delivering therapy services to children
- Training of teachers and caregivers in supporting children with communication difficulties both in the classroom and at home

### AIM

- To provide necessary communication methods and train the child, teacher and family in order to facilitate better communication that will improve the child's academic and social goals.
- Train and upskill local counterparts to take on the role of speech pathology assistance in the absence of Speech Pathologists in Fiji.

### TEAM

- |                    |   |
|--------------------|---|
| • Terri Walker     | - Consultant Speech Pathologist from Australia. |
| • Tara Lagimiri    | - Speech Pathology Assistant                    |
| • Navneeta Prakash | - Speech Pathology Assistant                    |
| • Filiji Lew       | - Speech Pathology Assistant                    |
| • Shabina Dean     | - Part- time Speech Pathology Assistant         |



#### CASELOAD FOR SPEECH PATHOLOGY UNIT 2018

	TERM 1	TERM 2	TERM 3
Hilton Early Intervention Centre	30	30	23
Hilton special School	17	12	18
Outpatients	3	7	11
Hilton Hostel	1	1	3
Hilton Playgroup	14	8	19
<b>TOTAL</b>	<b>65</b>	<b>58</b>	<b>74</b>

#### SETTING SPEECH THERAPY GOALS:

- The more specific the goals, the greater the likelihood that a child will feel empowered and capable.
- The unit looks for measurable ways in which a child can work on speech therapy goals.
- Help a child navigate any obstacles that might otherwise prevent him from achieving the goal.
- Ensuring that the steps needed to reach the goal are healthy, logical and realistic.
- Ensuring to incorporate time-related markers for the goals as time is tangible, measurable and specific.

#### Augmentative And Alternative Communication (AAC) Systems

AAC systems have been in use at FHO since 2017 and have significantly been the most effective communication tool during the Speech therapy sessions. Any child having difficulty

communicating or being understood gradually benefits in some way from AAC strategies. Children with Cerebral Palsy, Autism, Development delays and other speech related disorders can be supported in their communication and learning through AAC.

Here at FHO, our Speech therapy sessions are done using Unaided AAC and Aided AAC Systems. AAC includes all of the ways we share our ideas and feelings to communicate without talking.

- Unaided AAC Systems** – is where we communicate with children using gestures, body language, facial expression and sign language.
- Aided AAC Systems** – is where we communicate using a different sort of communication tool or device such as Core Boards, Communication Folders and Symbols.

The AAC Systems have shown to improve children's self-esteem and reduce their frustration (especially due to their inability to communicate effectively). It also allows children with speech difficulties to increase their participation in daily life activities and make their learning more interactive rather than passive. Thus, AAC Systems motivate children to learn how to communicate in other ways and change other people's attitudes towards them and interactions with them.

Therefore, the Speech Pathology Unit here at FHO combines and uses both the aided and unaided AAC systems to achieve goals of the Speech therapy sessions and to promote



effective and efficient communication with children having communication difficulties.

#### **Capacity Development - Upskilling & In-Service Training**

FHO considers the constant upgrade of professional skills and continuous development of staff skill sets. Thus, there are various on-going training sessions done by the Professional Speech Pathologist Terri Walker that helps the Speech Pathology Assistants to expand their knowledge and perform to their level best as SPAs. Some of the topics that were covered under this year's training sessions are as follows:

- Workshop On Behavior Management Procedures
- Autism Course
- Train The Trainer PD
- PD Session on Teaching Receptive Language
- How to Engage with Your Child/Student
- Observe, Wait and Listen (OWL)
- Classroom Strategies for Teaching Communication
- Pragmatics Profile Assessment tool
- How to create Communication Dictionary
- Visual Use Training
- How To Communicate effectively with CP Children
- Further training and exams were conducted by the Consultant Speech Pathologist Terrie Walker to ensure that the Speech Pathology Assistants receive maximum staff training initiatives. This covered the following areas:

##### **Theory:**

- Project Core Overview Module
- Beginning Communicators Module
- Supporting Individual Access to the Universal Core Vocabulary Module

##### **Practical:**

- Producing Boardmaker Symbols and Communication Folders

- Managing Student Behavior
- Following Speech Pathology Programs
- Providing motivational support to students in Therapy.
- Assessments:
- SPAs completed and passed the theory examination online
- SPAs received their Certificates via email for each of the exams done online

##### **Professional Development Sessions for Teachers & Staff:**

- On-going training for teachers and staff
- Specific training on Speech & Language use of visual aids and symbols.

#### **HOW WE TOUCH LIVES:**

Shayaan is a 12 year old boy who came to us with possible epilepsy, learning difficulties, intellectual disability. He attends a mainstream school. Shayaan's mother, Shayreen, brought Shayaan in for a speech pathology assessment largely because his teachers at school told her that Shayaan is not able to communicate like other children. A speech therapy program was designed by the Speech Pathologist after he was assessed. Shayaan went through speech therapy sessions for 2 terms and this is the response we received from his mother Shayreen.

*Good morning,  
It's been a pleasure to inform you that Shayaan's  
speech therapy is a success till now.*

1. *He can differentiate between R and L, and also pronounce them soundly.*
2. *He can also put words into sentence and also he can read 3 letter words and 4 letter words.*
3. *He can see pictures and tell what's in it which has seen his imaginary improving.*

*These vast improvements have also been acknowledged in his school so thank you very much for this. Hope to see you guys next year. Merry Christmas and Happy New Year.*

*Shayreen (Shayaan's Mom)*

## BUILDING SPEECH PATHOLOGY CAPACITY IN FIJI

### A STORY OF VOLUNTEERING IN FIJI

By Terri Walker April 2019



I had never expected to volunteer as a speech pathologist, but in 2016 my husband accepted a position in Lautoka, Fiji Islands. The result of this was a volunteering experience which has provided me with a range of rich professional and personal experiences.

Guidance from a long-standing Australian Speech Pathologist living in Fiji – Dr Suzanne Hopf – meant that I met a lot of different people and organisations, when I first arrived in Fiji, but it was the Frank Hilton Organisation in Suva with Sureni Perera at the helm that got me the most excited.

During my time living in Fiji (from July 2016 to September 2017), my role at FHO was primarily to train staff. The CEO of FHO, Sureni Perera, had already developed a part-time Speech Pathology Assistant role at the Centre. This staff member would run speech pathology programs that had been left by previous Speech Pathology volunteers. Sureni increased the personnel in the Speech Pathology Department to 2 full time staff members to support my volunteering and our joint goal of capacity-building in the Speech Pathology Department at FHO.

Of course, in order to train staff, we needed to have speech pathology programs, so as well as organising professional development for staff, I was involved in assessing and programming for students at the Early Intervention Centre, Hilton Special School, Playgroup and outpatients.

I have now returned to Australia but am continuing my involvement with the Frank Hilton Organisation. Since leaving Fiji in September of 2017, I have done 3 trips back to Fiji in 2018. I also skype regularly with the Speech Pathology Assistants (now 3 in number) and other staff at FHO to continue to support the development of knowledge and understanding in the area of Communication Disabilities.

### WHY DO I STAY INVOLVED WITH THE FHO?

1. I feel strongly that people living with a Communication Impairment in Fiji need to have access to services to support them and their families to give each individual the best opportunity to become a communicating member of society.
2. I feel strongly that Fijian professionals have the abilities to develop skills that will support the teaching of students with all sorts of communication impairments.
3. I feel strongly that Fijian families who have a member with a Communication Impairment can be taught how to best support that family member to optimise their potential.
4. I feel strongly that FHO is currently the leading organization in Fiji to work towards fulfilling these goals for young Fijian children.

### WHAT ARE MY FRUSTRATIONS?

1. The fact that we have to rely on overseas SPs deciding to come and work in/visit Fiji because there is no local SP.
2. The lack of local training services for Speech Pathology Assistants. It is my belief that the unique cultural and geographical features that make Fiji so special, will also necessitate a number of Speech Pathology Assistants to be trained and employed around the many Islands and regions of Fiji. There is capacity already in Suva to provide this training in Fiji, but as yet the organisations involved do not see the need to provide the training.
3. An extension of the last point, is that there has already been a turnover of staff in the Speech Pathology Department and this necessitates more training. We are trying to get to the point where local staff take the main role of the training, but there is still a need for a supervisory SP.
4. Lack of knowledge about Autism throughout Fiji.

### WHAT ARE MY NEXT HOPES?

1. That an overseas SP decides to come and work in Fiji until young Fijian students, now undertaking speech pathology training in Australia, graduate.
2. To draw this talent from overseas I would love to see money being allocated to provide packages that make this job worthwhile.
3. I would like to see a Certificate IV course in Speech Pathology and Audiology Assistants running in Fiji.



4. I would love to have the personnel to be able to start to spread the word about Communication impairment across other areas of Fiji including:
  - a. Other special education campuses
  - b. Other mainstream school campuses – linked with integration
  - c. Health Department to cover both ends of the life spectrum ie the 0 – 5 year olds and the adults who have a communication impairment.
5. That soon.... Maybe in 2020, we run our first conference in the Pacific on Autism.

This volunteering experience has been truly wonderful for me. I have met the most amazing people. I have used all of my professional skills and more. I have seen significant progress in the way that FHO has blossomed as a quality service provider for children with disabilities and their families in Fiji.

My final wish is that one day soon I will not be needed in Fiji, as services for people with Communication Impairments will be provided by local, trained professionals.





## TWO-WAY LEARNING: SPEECH PATHOLOGY PLACEMENTS AT FHO

Since 2016 speech pathology students from the University of Newcastle (UON), Australia, have been visiting the Frank Hilton Organisation annually to complete a component of their coursework. This has been possible with the support of the Australian Government through New Colombo Plan funding which encourages the development of relationships between undergraduate students in Australia and organisations in the Pacific. The students undertake this placement when they are in their final year of studying the Bachelor of Speech Pathology (Hons) Degree. Often students who are studying Occupational Therapy at UON are visiting simultaneously, which enables a multi-disciplinary experience for the UON students.

Typically 3-4 students have visited each year with an educator from the university and all have benefited greatly from the experience. The FHO environment offers a supportive context where the UON students learn essential skills to implement speech pathology practice with an international focus. The UON students have been very grateful for the opportunity to learn and practice speech pathology skills while working:

- In a multicultural and multilingual setting
- With a caseload of children who have a variety of disabilities
- In a wonderful multidisciplinary team of medical and education professionals
- In a model of capacity-building and sustainable practice

The positive and strengths-based approach at FHO has helped to prepare the UON students for their clinical experiences when they graduate. Many of them have maintained connections with the staff and families at FHO even after they have graduated and are practicing in similar contexts in

Australia. The placements provide a wonderful opportunity for UON students to learn from staff and families and in return to share their knowledge of speech pathology with the team at FHO.

The focus of the students' placements is to work with staff and families to best support the children at the School, the Early Intervention Centre, the Playgroup and the Hostel to develop their communication skills. Often the UON students develop lasting relationships with the staff because of the mutual respect for each other's roles, skills and experience. The UON students have also developed positive relationships with their clients who are excited to work with different people and consequently try very hard in their therapy.

The therapy involves both traditional speech therapy and also the promotion of augmentative and alternative communication (AAC) which enables non-verbal clients to communicate using pictures, signing or other means. The UON students attend orientation sessions before they depart Australia to prepare for their experiences in Fiji. This often involves online (eg Skype) communication with the team at FHO. Upon their return to Australia, the UON students have also shared the wonderful experiences gained at FHO in many ways, for example through implementing health promotion projects such as writing an article for an international newsletter to spread the word about speech pathology at FHO.

The students and staff of UON are extremely grateful for the welcoming support of the team at FHO. We also acknowledge the wonderful work that has been carried out by a succession of volunteer allied health professionals which makes this placement opportunity a possibility for speech pathology students.

Thank you,  
Dr Gwendalyn Webb, Lecturer in Speech Pathology (UON).

## COMMUNITY SUPPORT UNIT



*“...recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and shall take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability.*

- a) To ensure equal access by persons with disabilities to clean water services, and to ensure access to appropriate and affordable services, devices and other assistance for disability-related needs;
- c) To ensure access by persons with disabilities and their families living in situations of poverty to assistance from the State with disability-related expenses, including adequate training, counselling, financial assistance and respite care;”

- United Nations Convention on the Rights of Persons with disabilities- Article- 28 - Adequate standard of living and social protection

Although Community Development is not a core function of the Organization, it is necessary to consider the wider social determinants of health in order that the child and family benefits from the services offered. The holistic approach of the Frank Hilton Organization contributes to better qualitative outcomes in service delivery.



Therefore, the Community and Child support Program is set up to mitigate Socioeconomic hardships that restricts access to services offered at Frank Hilton Organization. These are both physical barriers and socioeconomic barriers. The program commenced proper in August 2017 after a needs Assessment conducted in 2016 through 36 home visits conducted to families of children not attending school programme.

## KEY FUNCTIONS

### Accessibility

#### Physical Barriers

Provide accessibility within and around home environment to ensure the child and family can freely participate in community activities.

#### Attitudinal Barriers

Providing awareness, education, and understanding on disability related issues to address stigma and negative attitudes. Parents, families and communities are the main target audience. The Community Support Division engages in community awareness activities, media campaigns, parent education programmes to achieve its objectives.

#### Water, Sanitation and Hygiene

Ensuring the child with a disability and their families have access to clean water, proper accessible sanitation and conducive environment that supports the child's growth and development.

#### Addressing Poverty

Providing awareness and support on available social protection programmes and ensuring family can access these programmes providing reimbursements for transportation and providing transportation to FHO services where possible.

#### Nutrition

Providing mid-day meals and ration packs as well as nutritional supplements to children under the scheme.

#### Educational Supplies

Provide school uniforms, shoes, books and other stationaries to children identified under the scheme.

#### AIM

The Community Support Division aims to ensure access and consistent attendance to FHO services for children with disabilities and their families. The focus is to mitigate the hardships faced by families are due to lack of parent education/awareness, Accessibility and/or Extreme Poverty.

#### TEAM

- Ashna Kumari – Community support officer / Marketing Officer
- Deola Ravusoni – Head of Administration

#### PARTNER ORGANIZATIONS

- Habitat for Humanity
- Medical services Pacific



## CRITERIA FOR QUALIFICATION FOR THE SERVICES PROVIDED

In order that a child may qualify for support, the following areas are considered.

- Low income group- combined Family income to be less than \$300 a week
- High number of family dependents and persons with disabilities in the household
- Single parent families
- Accessibility – Children from areas that do not have services OR where environment is not conducive
- Unsafe home environment – Where child is at risk or vulnerable to abuse or neglect

The community support officer may conduct a home visit to ensure that information provided is accurate. The officer may also liaise with department of Social Welfare to ensure the credibility and followup support.

## CHILD SUPPORT SERVICES 2018

Child support	Number of children
Lunch	60 per day
Ration packs	70 per month
Stationary/ bags	77 per year
Shoes/uniforms	74 per year
Transport	63 per day
Other assistance (clothes, pillows, blankets, mattress)	66 per year
Hostel facilities	12
Home based assistance	20 children per quarter
Fare reimbursements	6

### HOME VISITS CONDUCTED (JAN- NOV 2018)

Home visits	35	some receive assistance in most categories and are repeated in the below stats
Accessibility	1	Complete home
	3	Footpaths built
	4	Home Environment- Bedding and mattress, home/education packs, groceries

The 2018 community support program had 50 children on the visit list who were selected due to regular absenteeism or had entirely dropped out of school. All 50 children were provided assistance and have returned to school with improved attendance. The number of children assisted are not only children from the Hilton Special School and Hilton Early Intervention but also, outpatients coming through the receiving office. Children in the outpatients division are equally assessed and assisted as required with bus fare reimbursements, Social Welfare referrals, Health and medical referrals, home improvements and or all other parental and home support the child requires.

The community support unit provides the Director Social Welfare with continuous reports of children at risk of abuse and neglect, and works closely with department Social Welfare to ensure continued followup and support.



### A LITTLE HELP GOES A LONG WAY

Sara (her name changed) is a 7-year-old girl who carries a smile on her face all the time. But she is not able to share this with friends and is not able to find new reasons to laugh other than the great family she has who take wonderful care of her.

Due to her disability Sara's personal mobility and motor functions are limited. She either has to be wheeled to the bus or she has to be carried. She has not attended school before and is very eager to do so. Sara's wheelchair does not fit on the footpath leading to her house and her carer is not able to carry her. She also has a lot of difficulty being taken to the washroom and to have a shower. Sara's parents have left her in the care of their relatives.

After a home visit recommended by the Head teacher of the Hilton Special School earlier in the year, Sara was placed on the list for support. The child was provided a hospital bed with mattress for her feeding and posture, a commode/shower chair with wheels, home education package with visual books and symbols and a Physio therapy home program.

Along with this a suitable footpath was made from her house to the main road.

The interventions provided have enabled Sara to come to school for the first time. She travels in the school bus with her carer and has a custom-made wheelchair for her. Sara receives mid-day lunch, nutrition pack and many other benefits provided for her well-being. Sara loves being in school for the first time and has made many friends now....

### Message from our partners



Frank Hilton and Habitat for Humanity Fiji signed an MOU on the 31st of January 2018, agreeing to help improve accessibility within the home and environment for children with disability.

In 2018 Habitat for Humanity along with Frank Hilton, worked together on four individual houses to improve accessibility to the houses. These four houses were located within the Suva-Nausori corridor, specifically Narere, Kalabu and Lami village.

Habitat for Humanity Fiji along with Frank Hilton, visited the first sites in Narere & Lami site on the 11th of May 2018, to finalized scope of works. On the 9th of June after completion of construction, Frank Hilton and Habitat revisited the families.

For 2018 Habitat for Humanity upgraded four houses, two were footpaths with centre railing that allowed the PWD to walk on both sides accessing the railing, and one for wheelchair access from the main house entrance to the communal footpath. The fourth house received remedial with the replacement of a timber floor and the installation of windows and doors.

Habitat was also invited to take part in Frank Hilton's annual fundraising, wheelbarrow race at Albert Park on the 28th of July 2018.



Narere Site before and after photos of footpath with centre railings.



Lami site before and after photos of new wheelchair access



Medical Services Pacific (MSP) is a Fijian registered non-government organisation (NGO) who aims to enable Pacific women and children to have greater access to quality health care services, and to build resilience among vulnerable groups facing economic, environmental and humanitarian challenges.

MSP was very fortunate to sign a Memorandum of Understanding (MOU) with Frank Hilton Organization in 2018, following our commitment to the Fiji National Council For Disabled Persons in 2017.

MSP and FHO have developed a mutual referral system, in order strengthen the efforts of both organisations to educate and empower children in Fiji. Thusly, we were able to gain access to at-risk clients and provide them with free counselling and medical services.

We are grateful to Frank Hilton Organization for its continued consultation and support with regards to disability inclusion, and hope to see this partnership extend into 2019 and beyond.



# TREASURER'S REPORT



Another year has passed and we have grown much stronger in our endeavours to provide the best level of service towards achieving the Strategic objectives of Frank Hilton Organisation. 2018 has been busy, productive, exciting and challenging for the organisation and I am pleased to report on the audited Financial Results for year ending 31 December 2018.

The full set of audited financial statement forms part of the 2018 Annual Report.

## FINANCIAL SUMMAR

	2018 \$	2017 \$	Change %
Total Income	1,189,408	777,818	52.9%
Total Expenditure	1,136,920	711,690	59.7%
SURPLUS	52,488	66,128	(21%)

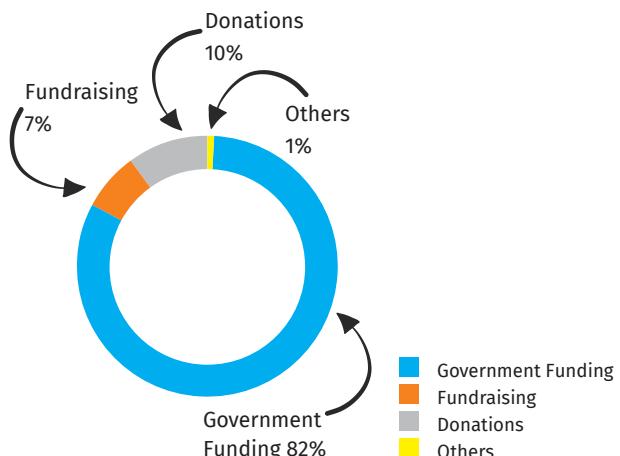
The 2018 financial year closed with a net surplus of \$52,488, being lower than the 2017 net surplus by \$13,640. The Government of Fiji, in its 2018/19 National Budget had again provided the much needed funding to the Frank Hilton Organisation [FHO] with an amount of F\$850,300. We sincerely convey our appreciation to the Government including Ministry of Economy, Education and Social Welfare for their continued support towards the organisation. Further, donor agencies including Corporate Bodies and many Individuals are greatly acknowledged for their financial support during the year.

FHO look towards every available opportunity in strengthening its relationships with its donors and partners who help to deliver services and support to Fiji's needy children. As the organization evolves, FHO must ensure it is fit for the future, stays true to its core principles and has sustainable income to support core staff and the organization's operational costs.

## REVENUE MIX

We recorded total revenue of \$1,189,408, an increase of \$411,590 (52.9%) over 2017. The major revenue inflows were from Government funding, internally organised fundraising and donations.

The graph below depicts overall revenue mix for 2018.



Operating expenses had an increasing trend in line with extended and wider scope of service delivery to population of needy children within Fiji. Additionally, proper management of cash with clear demarcation of bank accounts to ensure proper accountability and reporting on fund utilisation has continued. At all times, scrutiny and control over expenses has been strictly adhered to without any compromise on internal controls.

We hosted an amazing Wheelbarrow race with net surplus of \$81,624.

The Board continues to invest in Human capital and assets to meet the objectives of the organization and also to deliver on efficient and effective service to all.



I must record my profound privilege towards the people who give tirelessly and generously of their time, including the Board members of FHO, FHO staff, volunteers, donors and the BSP Finance Team. Behind FHO are dedicated people who are amazingly committed and hardworking. I extend my gratitude to you all and look forward to the challenges that 2019 will bring.

Also, we would like to extend our appreciation to the former accountant, Ms Aarti Maharaj for her support and dedication till she departed on 31st January 2019.

Finally, there is still a lot to do as we embark on another challenging year and we hope to receive your continued

support to enable us to deliver efficient services to the needy children for best of their comfort. I encourage you all to extend a hand and be part of FHO in fulfilling your desire to support Humanity with all love and care

Rajeshwar Singh. BA PGDDIA PGDFAF (Forensic) MBA USP, CA (Fiji) CPA (Aust)

Treasurer - Frank Hilton Organisation  
General Manager Corporate Services & Chief Financial Officer  
– BSP Bank of South Pacific

## THANK YOU TO OUR DONORS AND SPONSORS IN 2018!

Donors	
Goodman Fielder Int'l	10,000
Reserve Bank of Fiji	1,000
Island Customs Agencies Ltd	1,000
Sandeep Chauhan	2,500
Star Printery Ltd	3,020
Current Money Holdings Ltd	20,000
Bluewater Real Estate	20,000
Kalidas Kasabias M Trust	5,000
DHL Express(Fiji) Ltd	1,150
Tappoos Ltd	5,000
Fiji Roads Authority	3,000
Ethan James	4,985
Lohar Investment Ltd	1,500
BSP Life Ltd	5,000
Fiji Water Foundation	1,800
Mike Johnston	14,199

Support towards Fundraising	
Apco Coatings	2,000
Sun Insurance	3,000
British American Tobacco	5,000
Bluewater Real Estate	5,000
Morris Hedstrom	5,000
Janty Kanvan Ltd	5,000
Fortech Construction	5,000
Bluescope Pacific Steel	5,000
Vodafone Fiji Ltd	5,000
Asco Motors	5,000
Star Printery	5,000
Bluescope Lysaght	5,000
Standss South Pacific	5,000
Telecom Fiji Limited	5,000
Vinod Patel & Co Ltd	5,000
HFC Bank	5,500
Bagel Boys	5,653
Oasis Holdings Limited	10,000

**Fiji Crippled Children Society – Suva Branch**  
**Financial Statements**  
**31 December 2018**

**Fiji Crippled Children Society – Suva Branch**

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Detailed statement of Income and Expenditure	16

## **Fiji Crippled Children Society – Suva Branch Board Members Report**

In accordance with a resolution of the Board of the Fiji Crippled Children Society – Suva Branch (FCCS-SB), the Board Members herein submit the Balance Sheet, consolidated statement of Income and Expenditure and Cash Flow Statement for the period ended as at 31 December 2018.

### **Principle Activity**

The principle activity of the FCCS-SB is to provide educational opportunities to special children including the provision of transport and assistance to these children. The FCCS-SB relies on donations, fundraising and Government grants to fund its activities.

The FCCS-SB consists of seven divisions located at Waimanu Road and Brown Street. Divisions are as follows:

1. Hilton Special School (HSS)
2. Early Childhood Education (ECE)
3. Early Intervention Centre (EIC)
4. Hilton House Hostel (HHH)
5. Hilton Audiology/Speech Therapy (HAST)
6. Hilton Physiotherapy Department (HPD)
7. Operations
  - Community Support programmes
  - Public Awareness and fundraising

### **Vision**

Vision for the FCCS-SB is “A Centre of Excellence – Educate, Empower, Uplift, and Uphold.”

### **Mission**

The mission statement for the FCCS-SB is to:

- Offer effective and quality education at all levels to increase potential of children with disabilities.
- Empower children with appropriate skills for life in order to increase independence and full participation in society.
- Mitigate hardships of parents and caregivers and empower them with the necessary tools to understand, protect and advocate on the rights of children with disability.

**Fiji Crippled Children Society – Suva Branch  
Board Members Report**

**Trading results**

The net surplus for the year ended 31 December 2018 was \$ 52,488 (2017: net surplus \$ 66,128).

In accordance with a resolution of the Board Members of the Fiji Crippled Children Society – Suva Branch, we state that in the opinion of the Board Members:

- the accompanying consolidated statement of Income and Expenditure is drawn up to give a true and fair view of the results for the year ended 31 December 2018;
- the accompanying statement of Balance Sheet of the FCCS-SB is drawn up to give a true and fair view of the state of the FCCS-SB affairs as at 31 December 2018;
- the accompanying statement of Cash Flow of the FCCS-SB is drawn up to give a true and fair view of the cash flows for the year ended 31 December 2018;

The financial accounts are approved in accordance with a resolution of the Board for and on behalf of the FCCS-SB.

Dated this ....15..... day of .....March....., 2019.

  
.....  
Ritesh Dass  
(President)

  
.....  
Rajeshwar N Singh  
(Treasurer)

**G.H. Whiteside & Co.**  
Chartered Accountants

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Suva, Fiji.

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Email : gardiner@ghw.com.fj

**Independent Audit Report**

**To the Board Members of Fiji Crippled Children Society – Suva Branch**

We have audited the financial statements of Fiji Crippled Children Society – Suva Branch for the year ended 31 December 2018 as set out on pages 6 to 15. We have conducted an independent audit of these financial statements in order to express an opinion on them.

Our audit has been conducted to provide reasonable assurance as to whether the financial statements are free of material misstatement. Our procedures included examination on a test basis, of evidence supporting the amounts and other disclosures in the financial statements and the evaluation of accounting policies and significant accounting estimates. These procedures have been undertaken to form an opinion as to whether in all material respects, the financial statements present fairly the financial position and the results of the operations of Fiji Crippled Children Society for the year ended 31 December 2018.

The audit opinion expressed in this report has been formed on the above basis.

**Audit Opinion**

In our opinion, the financial statements present fairly the financial position of the Fiji Crippled Children Society as at 31 December 2018 and the results of its operations for the year then ended.

We have obtained all the information and explanations which, to the best of our knowledge and belief, were necessary for the purpose of our audit.

8 April 2019  
Suva, Fiji



**Fiji Crippled Children Society – Suva Branch**  
**Balance Sheet as at 31 December 2018**

	<u>Notes</u>	<u>2018</u> (\$)	<u>2017</u> (\$)
<b>Current Assets</b>			
Cash at bank	3	538,741	748,029
Prepayments	4	1,786	1,786
Receivables	5	12,114	9,624
		-----	-----
<b>Total Current Assets</b>		552,641	759,439
		-----	-----
<b>Non-Current Assets</b>			
Fixed Assets	2(b)	973,959	689,961
		-----	-----
<b>Total Non-Current Assets</b>		973,959	689,961
		-----	-----
<b>Total Assets</b>		1,526,600	1,449,400
		-----	-----
<b>Current Liabilities</b>			
Accounts payable		-	-
Accruals	6	11,118	6,112
Funds Held for other - Branch	7	6,345	6,345
Income received in advance	8	445,999	426,293
		-----	-----
		463,462	438,750
		-----	-----
<b>Total Liabilities</b>		463,462	438,750
		-----	-----
<b>Net Assets</b>		1,063,138	1,010,650
		-----	-----

**Fiji Crippled Children Society – Suva Branch  
Balance Sheet as at 31 December 2018**

**Accumulated Funds**

Balance brought forward	1,010,650	944,522
Net surplus for the year	52,488	66,128
<b>Total Accumulated Funds</b>	<b>1,063,138</b>	<b>1,010,650</b>
	=====	=====

The accounts are approved in accordance with a resolution of the Board for and on behalf of the FCCS-SB.

Dated this ...15..... day of .....March..... 2019.

Ritesh Dass  
(President)

Rajeshwar N Singh  
(Treasurer)

**Fiji Crippled Children Society – Suva Branch**  
**Statement of Cash Flows**  
**For the year ended 31 December 2018**

	<u>2018</u> (\$)	<u>2017</u> (\$)
<b>Cash flows from operating activities</b>		
Grants, donation, fundraising	1,219,304	1,205,196
Payments to suppliers & others	(1,063,849)	(690,519)
	-----	-----
<b>Net cash flows from operating activities</b>	155,455	514,677
	-----	-----
<b>Cash flows from investing activities</b>		
Payment for Fixed Assets	(364,743)	(184,387)
	-----	-----
<b>Net cash used in investing activities</b>	(364,743)	(184,387)
	-----	-----
<b>Cash Flow from financing activities</b>		
Proceeds for community based rehab	-	-
	-----	-----
<b>Net cash from financing activities</b>	-	-
	-----	-----
<b>Net increase/ (decrease) in cash held</b>	(209,288)	330,290
	-----	-----
<b>Cash as at 31 December 2017</b>	748,029	417,739
	-----	-----
<b>Cash as at 31 December 2018</b>	538,741	748,029
	-----	-----

**Fiji Crippled Children Society – Suva Branch (Summary)**  
**Income and Expenditure Statement**  
**For the year ended 31 December 2018**

	<u>Notes</u>	<b>2018</b> (\$)	<b>2017</b> (\$)
<b>INCOME</b>			
Donation	9	113,621	276,137
Fundraising (Net)	10	81,624	135,644
Child Sponsorship		-	3,500
Hostel Fees		140	745
Interest Income		8,112	7,664
Membership Fees		51	50
Ministry of Education Fee Free Grant		30,067	52,234
Ministry of Women Children Poverty Alleviation- NGO Grant		43,425	2,640
School Bus Fare		-	5,017
MOE- Special Education Funding		91,937	118,753
Canteen		2,745	3,174
MOE -Early detection and Intervention Grant		815,672	151,667
Insurance Claim – MV FN151		-	18,000
Out Patients		1,399	2,343
Other Income		615	250
		-----	-----
		1,189,408	777,818
		-----	-----

**EXPENDITURE**

Bank Fees		1,286	811
Consulting Fees		-	6,050
Cleaning Materials		2,580	-
Depreciation		80,745	69,089
Electricity		11,650	9,652
Gas		316	173
Staff Cost		9,249	13,829
Hostel Food		13,087	8,860
Health & Hygiene		4,906	2,071
Insurance		17,562	10,316
Internet		1,049	4,306
Miscellaneous		9,840	11,667
Rent & Rates		2,147	2,262
Repair & Maintenance		43,114	114,586
Receiving Office- Parent Support		33,423	900
Stationary		23,077	21,117
Shriners Travel Expenses		2,688	3,820
Telephone		4,350	5,141
Testing Disposals		-	10,729
Van Operating Expenses		-	17,542
Wages		247,261	251,282
FNPF		22,823	20,657

Water	1,050	1,347
Monitoring Coordination & Data Collection	115,333	30,167
Public Awareness	70,129	8,983
Training & Capacity Development	34,574	8,333
Access to Service / Transport	86,813	27,480
Detection & Diagnosis & of Hearing Disabilities	35,178	14,847
Fitting Hearing Aids	54,028	8,419
Capacity Building & Training	8,813	1,800
Speech Therapy	35,816	-
Physiotherapy Services	63,648	19,333
Supportive seating & Mobility Device	38,462	4,484
Community Based Rehab	20,149	-
Physio Equipment	1,177	838
Assistance to low income families	18,549	316
Accessibility within Home Environment	18,649	483
Other Expense	3,400	-
<b>Total Expenditure</b>	<b>1,136,920</b>	<b>711,690</b>
<b>Surplus</b>	<b>52,488</b>	<b>66,128</b>

**Fiji Crippled Children Society – Suva Branch  
Notes to and forming part of the accounts  
For the year ended 31 December 2018**

**1. Income**

FCCS-SB relies on Donations, Fundraising and Government grants to fund its activities. Income is recognized on cash basis.

**2. Statement of Principle Accounting Policies**

The accounts of the FCCS-SB have been drawn up in accordance with the accounting standards (GAAP & IFRS) and the disclosure requirements of the Fiji Institute of Accountants and the requirements of the law. Set out below is a summary of significant accounting policies adopted by the FCCS-SB in preparation of the accounts.

**(a) Basis of Preparation**

The accounts have been prepared on the basis of historical costs and do not take into account changing money values or current valuation on non-current assets.

**(b) Depreciation**

Assets are listed at cost less accumulated depreciation. Depreciation rates have been set on the basis of the estimated useful lives of relative assets.

Plant and equipment are depreciated using the straight line method. Items of plant and equipment are depreciated from the date that they are installed and are ready for use. See schedule of fixed assets and depreciation for detailed listing.

**(c) Income Tax**

No tax is payable as the FCCS-SB is registered under the Charitable Trust Act. FCCS-SB is a charitable institution's under the provisions of Section 21(n) of the Income Tax Act CAP 201.

**(d) Comparative Figures**

Comparative figures have been amended where necessary, for changes in presentation in the current year.

HFC - Operating account

**3. Cash at Bank**

	<b>2018</b> (\$)	<b>2017</b> (\$)
ANZ - Chq account	533	533
WBC - Chq operating account	6,125	22,753
WBC - Maxi deposit account	11,343	12,648
WBC - Special Education Grant (EIC)	3,266	29,330
WBC - Special Education Grant (HSS)	58,188	45,005
WBC - Special Education Grant (EIC Bus Fare)	432	451
WBC - Fee Free Grant (EIC)	22,739	12,206
WBC - Fee Free Grant (HSS Bus Fare)	432	451
WBC - Fee Free Grant (HSS)	13,706	14,027
HFC - MOE Special Grant	314,936	302,891
HFC - Operating account	93,397	307,734
HFC - Account	13,644	-
	-----	-----
	538,741	748,029
	-----	-----

**4. Prepayments**

	<b>2018</b> (\$)	<b>2017</b> (\$)
Insurance/Third Party Motor Vehicle	1,786	1,786
	-----	-----

**5. Receivables**

	<b>2018</b> (\$)	<b>2017</b> (\$)
Immigration Bond		
- CEO	3,199	3,199
- Teacher aid	3,915	1,205
Visa Debit Account - Deposit	5,000	5,000
Staff Loan	-	220
	-----	-----
	12,114	9,624
	-----	-----

**6. Accruals**

	<u>2018</u> (\$)	<u>2017</u> (\$)
PAYE	1,069	35
FNPF	10,049	6,077
	-----	-----
	11,118	6,112
	-----	-----

**7. Society other Branch - Funds**

	<u>2018</u> (\$)	<u>2017</u> (\$)
Intended for distribution to FCCS affiliate		
Members upon receipt of their financial statements	6,345	6,345
	-----	-----

**8. Income received in advanced**

	<u>2018</u> (\$)	<u>2017</u> (\$)
MOE Grant received in advance - \$395,999 (Amortization of Grant – Aug to Dec)	445,999	426,293
	-----	-----
Community Based Rehab - \$50,000 (Blue Water Real Estate)		

## 9. Donation

	<u>2018</u> (\$)	<u>2017</u> (\$)
Major donors for 2018 are listed as follows:	113,621	276,137

Name	Balance (\$)
Current Money Holdings Ltd	20,000
Bluewater Real Estate	20,000
Mike Johnson	14,199
Goodman Fielder	10,000
Kalidas Kasabia M Trust	5,000
Vodafone Fiji Ltd	5,000
BSP Life Ltd	5,000
Etha James	4,985
Fiji Roads Authority	3,000
Sandeep Chauhan	2,500
Fiji Water Foundation	1,800
Star Printery Ltd	1,770
Lohar Investment Ltd	1,500
DHL Express Fiji Ltd	1,150
Reserve Bank of Fiji	1,000
Island Customs Agencies Ltd	1,000
Various Others	15,717
<b>Total</b>	<b>113,621</b>

## 10. Fundraising

	<u>2018</u> (\$)	<u>2017</u> (\$)
Amazing Wheel Barrow Race (Net)	81,624	135,644
-----	-----	-----

## 11. Board Members

The names of Board Members of the FCCS-SB in office at the date of this report and at any time during the financial year and up until 31<sup>st</sup> December 2018 were as follows:

Ritesh Dass - President  
 Shivas Singh - Vice President  
 Rajeshwar Singh - Treasurer  
 Sangeeta Maharaj  
 Rajendra Kumar  
 Kolianita Alfred

Sureni Perera - Chief Executive Officer

**Directors Resigned**

Lolesh Sharma  
Ravendra Achari  
Vandhna Narayan

**12. School Summary**

School	2018		2017	
	Teachers	Students	Teachers	Students
Hilton Special School	21	103	19	97
Hilton Early Intervention Centre	9	49	10	49
<b>Total</b>	<b>30</b>	<b>152</b>	<b>29</b>	<b>146</b>

Department	Staff						Children reached				Children reached through Outreach programmes	
	Contracted		Volunteers		Consultants		Inhouse		Out Patients		2017	2018
	2017	2018	2017	2018	2017	2018	2017	2018	2017	2018	2017	2018
Receiving Officer	1	2	1	2			8	44	0	271		
Audiology		2		1		1	149	152	60	323	641	827
Speech Therapy	3	3		1	1	1	26	42	4	20		
Physiotherapy	3	5					64	65	27	79		627
Community Support	1						128	125	3	5		
Hostel	4	8					11	12				
Admin/ Accounts	2	2										
Support services	6	7										

**13. Directors' interests**

No director of the FCCS-SB has, since the end of the previous financial year, received or became entitled to receive a benefit by reason of a contract made with the FCCS-SB or a related corporation with the director or with a firm of which he/she is a member, or in a entity in which he/she has a substantial financial interest.

**14. Government Grant**

Allocation in the 2018/2019 budget towards the FCCS-SB was \$850,300 of which \$513,038 has been received as at 31<sup>st</sup> December 2018.

**Fiji Crippled Children Society - Suva Branch  
Summary of Divisional Performance Statement**

**Fiji Crippled Children Society – Suva Branch (Operation)**  
**Income and Expenditure Statement**  
**For the year ended 31 December 2018**

	<b>2018</b> (\$)	<b>2017</b> (\$)
<b>INCOME</b>		
Donation	113,621	223,768
Fundraising (Net)	81,624	135,644
Child Sponsorship	-	3,500
Membership Fees	51	50
MOE Grant	815,672	151,667
Interest Income	8,112	7,664
Insurance Claim – MV FN151	-	18,000
Other income	365	-
	-----	-----
	1,019,445	540,293
	-----	-----
<b>EXPENDITURE</b>		
Accessibility within Home Environment	18,649	483
Access to Service/Transport	86,813	27,480
Assistance to low income families	18,549	316
Bank fees	1,286	811
Cleaning Materials	2,580	-
Depreciation	80,745	69,089
FNPF	8,558	4,384
Staff Cost	9,249	5,685
Insurance	17,562	10,316
Miscellaneous	1,638	1,967
Monitoring Coordination & Data Collection	115,333	30,167
Receiving Office- Parent support	33,423	900
Public Awareness	70,128	8,984
Repair & Maintenance	34,660	102,963
Rent & Rates	2,146	1,542
Shriners Travel Expense	2,688	3,820

Stationary	12,009	3,233
Telephone	-	284
Training & Capacity Development	34,574	8,333
Van Operating Expense	-	17,543
Staff Wages	101,703	88,838
Other Expenses	3,400	-
<b>Total Expenditure</b>	<b>655,693</b>	<b>387,138</b>
<b>Surplus/ (Deficit)</b>	<b>363,752</b>	<b>153,155</b>

**Fiji Crippled Children Society- Hilton Special School**  
**Income and Expenditure Statement**  
**For the year ended 31 December 2018**

	<u>2018</u> (\$)	<u>2017</u> (\$)
<b>INCOME</b>		
School Bus Fare	-	4,307
MOE - School Fees Funding	19,067	31,734
MOE - Special Education Funding	68,470	62,720
Canteen	2,745	3,174
	-----	-----
	90,282	101,935
	-----	-----
<b>EXPENDITURE</b>		
Cleaning Material	-	-
Electricity	5,735	4,783
FNPF	2,923	2,886
Internet	969	3,730
Miscellaneous	5,307	6,909
Repair & Maintenance	3,640	5,931
Stationary	8,272	7,549
Telephone	2,480	3,073
Wages	29,947	28,860
Water	773	617
	-----	-----
<b>Total Expenditure</b>	<b>60,046</b>	<b>64,338</b>
	-----	-----
<b>Surplus/ (Deficit)</b>	<b>30,236</b>	<b>37,597</b>
	=====	=====

**Fiji Crippled Children Society - Early Childhood Education  
Income and Expenditure Statement  
For the year ended 31 December 2018**

	<u>2018</u> (\$)	<u>2017</u> (\$)
<b>INCOME</b>		
Income	-	-
	-----	-----
	-	-
	-----	-----
<b>EXPENDITURE</b>		
FNPF	1,400	1,650
Wages	14,196	16,496
	-----	-----
<b>Total Expenditure</b>	15,596	18,146
	-----	-----
<b>Surplus/ (Deficit)</b>	(15,596)	(18,146)
	=====	=====

**Fiji Crippled Children Society - Early Intervention Centre**  
**Income and Expenditure Statement**  
**For the year ended 31 December 2018**

	<u>2018</u> (\$)	<u>2017</u> (\$)
<b>INCOME</b>		
School Bus Fare		710
MOE - School Fees Funding	35,200	20,500
MOE - Special Education Funding	23,467	56,033
Other income	250	250
	-----	-----
	58,917	77,493
	-----	-----
<b>EXPENDITURE</b>		
Electricity	1,678	1,595
FNPF	3,036	2,169
Internet	80	227
Miscellaneous	2,314	2,104
Repair & Maintenance	4,814	2,579
Rent & Rates	-	458
Stationary	2,797	6,656
Telephone	663	687
Water	-	730
Wages	31,204	21,690
	-----	-----
<b>Total Expenditure</b>	<b>46,586</b>	<b>38,895</b>
	-----	-----
<b>Surplus/ (Deficit)</b>	<b>12,330</b>	<b>38,598</b>
	=====	=====

**Fiji Crippled Children Society - Hilton House Hostel**  
**Income and Expenditure Statement**  
**For the year ended 31 December 2018**

	<b>2018</b> (\$)	<b>2017</b> (\$)
<b>INCOME</b>		
Donation	-	30,000
Hostel Fees	140	745
MOE – Boarding Fees Grant	-	-
Social Welfare Funding	19,225	2,640
	-----	-----
	19,365	33,385
	-----	-----
<b>EXPENDITURE</b>		
Electricity	4,236	3,273
FNPF	6,339	4,004
Gas	316	173
Health & Hygiene	4,907	2,071
Hostel Food	13,087	8,860
Miscellaneous	582	382
Rates & rent	-	262
Repair & Maintenance	-	2,633
Telephone	1,206	762
Wages	64,393	40,041
Water	276	-
	-----	-----
<b>Total Expenditure</b>	<b>95,342</b>	<b>62,461</b>
	-----	-----
<b>Surplus/ (Deficit)</b>	<b>(75,977)</b>	<b>(29,076)</b>
	=====	=====

**Fiji Crippled Children Society - Audiology/Speech Therapy**  
**Income and Expenditure Statement**  
**For the year ended 31 December 2018**

	<u>2018</u> (\$)	<u>2017</u> (\$)
<b>INCOME</b>		
Donation	-	20,000
Out Patients	-	2,343
Other Income	1,399	-
	-----	-----
	1,399	22,343
	-----	-----
<b>EXPENDITURE</b>		
Capacity Building & Training	8,813	1,800
Consulting Fees	-	6,050
Detection & Diagnosis of Hearing Disabilities	35,178	14,847
FNPF	-	1,411
Fitting Hearing Aids	54,028	8,419
Staff Cost	-	7,666
Internet	-	144
Miscellaneous	-	307
Repair & Maintenance	-	300
Speech Therapy	35,816	-
Stationary	-	2,488
Telephone	-	335
Testing Disposals	-	10,729
Wages	-	14,116
	-----	-----
<b>Total Expenditure</b>	133,835	68,612
	-----	-----
<b>Surplus/ (Deficit)</b>	(132,436)	(46,269)
	=====	=====

**Fiji Crippled Children Society - Physio Department**  
**Income and Expenditure Statement**  
**For the year ended 31 December 2018**

	<u>2018</u> (\$)	<u>2017</u> (\$)
<b>INCOME</b>		
Donation	-	2,370
	-----	-----
	-	2,370
	-----	-----
<b>EXPENDITURE</b>		
Community Based Rehab	20,149	-
Internet	-	205
FNPF	568	4,153
HR Employee	-	478
Physio Equipment	1,177	838
Physiotherapy Services	63,647	19,333
Repair & Maintenance	-	180
Stationary	-	1,191
Supportive seating & Mobility Device	38,462	4,484
Wages	5,818	41,240
	-----	-----
<b>Total Expenditure</b>	<b>129,821</b>	<b>72,102</b>
	-----	-----
<b>Surplus/ (Deficit)</b>	<b>(129,821)</b>	<b>(69,732)</b>
	=====	=====

# OUR TEAM ... OUR STRENGTH



I love my job. Because I love what I do I can see beyond a tough day or unexpected turn. FHO genuinely cares about the people who use our services and the staff who work hard to achieve great care and want the best experience for both. I love that I am encouraged by my boss to try new things out and be innovative and if it does not work I am supported to learn lessons, dust myself off and try again. The office is the kind of place where its ok to have a baby join us for meetings and make everyone coo over him, lifting our spirits.

On a day to day basis there is a sense that we are working towards a grand achievable vision and I proudly see us making strides towards it every day and making it a reality.

**Deola Ravusoni**  
Administration



It has been a pleasure and joy to work amongst children with special needs and to see how I can provide a positive outcome in my role as a Speech pathology assistant and to value the different people and from all backgrounds that I come in contact with in my scope of work. FHO gives me the platform to actively make a difference in the lives of these dear children and I am so blessed to be part of the FHO team and pioneer to this organisation.

**Filiji Lew**  
Speech Pathologist Assistant



I, love working at FHO because it helps me understand children with special needs. It also helps me enhance my knowledge on the type of care needed to be given to children with special needs. It is a new environment, new workplace which feels like home.

**Ethal Rozia Mohammed**  
Registered Nurse



I am so fortunate to work for Frank Hilton Organisation because for the past 2 years I have spent with them they were able to make me realize the importance of having a disability child participate in the community. I was enlightened and shaped by the tremendous work that we do every day and getting a priceless smile from a child when they reactive to our help or get a wheelchair at the end of the day. I would continue to give my 100% best to FRANK HILTON ORGANISATION and also EDUCATE, EMPOWER, UPLIFT AND UPHOLD a child with disability.

**Jope Liloma:**  
Wheelchair Technician

# OUR TEAM ... OUR STRENGTH



I was fortunate to be given the opportunity to work under the FHO banner. I am sure that I made a right choice to follow my dreams of becoming an Audiologist here at FHO. The experience have been great so far especially the enthusiasm of the Board, CEO, and the volunteered specialists who are my role models. Moreover, the superb feeling of helping out someone with a special need has confirmed that I am in the right place. I am blessed to be a part of the FHO family not only to pursue my dream but also believing that one day I will see one of this children grow up to be an independent successful citizen of our beloved Fiji.

**Josefa Baleinukulala:**  
Audiology Assistant



Working at the Frank Hilton Organization has allowed me networking opportunities with a multiple of professionals, each contributing to my professional and personal growth. I've also had the passion of helping kids with improving their communication skills and FHO has provided me with this platform. I love to work with children and make a positive difference in their day to day interaction with others.

**Tara Lagimiri**  
Speech Pathology Assistant



Working at Frank Hilton Organization has challenged me as a Community Rehabilitation Assistant, providing services for children with disabilities has really helped me in appreciating what I have, and also helped me to learn to have patience and I am grateful to be working in this environment that allows me to thrive towards success. Thank you, Frank Hilton organization, for allowing me to grow with you.

**Anasavaia Liku**  
Community Rehabilitation Assistant



FHO has not only given me my first job after graduating, it has given me the opportunity to serve others and give back to my country. Working alongside families and watching them and their child grow to become more comfortable and confident with their circumstances has in turn made me confident in my ability to continue support these families. We see a diverse group of individuals but see a commonality of willingness to give all children with a disability the best start to life.

**Loretta David**  
Family Support Officer

# OUR TEAM ... OUR STRENGTH



I work as a community Support officer/Marketing officer at FHO. I love every day of my work which entails home visits, fundraisers, parent and stakeholder meetings and many more.

Working here: I go to bed knowing that during the day I did not sit behind a PC to put words together for a report but I have made an actual difference somewhere, I may have changed a life and I have helped somebody who needed me...I realise my self-worth and know I am putting a mark on a bigger picture

I love the fact that FHO has allowed me to grow and nurtured me in my area of work in so many ways. It amazes me to see the strong bond and the team work I have within the department and with the organization staffs.

"At FHO is not about me or you it's about us and that's what I enjoy the most where everyone is equal."

Thanks team FHO.

**Ashna Kumari**  
Community support officer/Marketing Officer



I am passionate about what I do as a Physiotherapist. I have been in this profession for the past 9 years. Working with Frank Hilton Organization has opened up so many opportunities for me in my career development

and it has created a path towards specialization in my field. What I love about working at Frank Hilton Organization is that it has molded me into a better person; I have grown professionally working in a multidisciplinary setting, where new ideas are created everyday towards the betterment of our services.

**Sylwina Reddy:**  
Physiotherapist



They say its destiny!! And yes, it has proved just right for me. The Shabina Dean you see today, some 23 years ago had no clue that she will be part of this amazing team called the Frank Hilton Organization.

Like I said destiny! Yes, my child Rachel Dean now 23 years, beautiful, young, strong individual was born with Microtia is a congenital deformity where the pinna (external ear) is underdeveloped. Like any mother I was shocked, angry, scared, sad, confused, frustrated, in denial – that why my child. But what started with a frightened mother helpless with a child's unusual ear was the turning point of my life.

I was a determined mother who wanted to know more and to give back more not only to my child but to all the children out there in any possible way that I could. And destiny had it all planned for me. I dedicate myself to in the field of ears – as an audiology assistance. I get to see, mingle, assist, help kids in the same field of what I encountered some 23 years ago. I can relate to all the parents and loved ones more easily and encourage them with my story.

I am humbled and blessed to be part of this super amazing organization the Frank Hilton. Working with such fantastic individuals, my work buddies, our hardworking super women CEO Ms. Sureni who never fails to encourage and assist me.

This has helped me too grew as a person, as mother, as an audiology coordinator, as an individual in this field.

However, the best part is the beautiful, differently able, champion kids that we have. It's a houseful of talents. Coming to work every day is a new learning for me as it teaches one to celebrate every child! Sharing the joy with family members and friends.

Thank you, Frank Hilton, for giving me the courage. "As you begin to embrace courage, you will be able to point your life in the right direction.

**Shabina Dean**  
Audiology Assistant

# OUR TEAM ... OUR STRENGTH



I love my job because everyone shares the same vision and is dedicated to the Frank Hilton Organization mission. This truly creates a family environment where everybody/ every department is there for each other.

I believe the combined effect of the team is greater than the sum of individual efforts. Hence working together as a team can apply individual perspectives, experience, and skills to solve complex problems/ cases, creating new solutions and ideas that may be beyond the scope of any one individual. And while my job is personally rewarding, my career path has also enabled me to take advantage of additional opportunities.

**Ranisha Kiran (Physiotherapist)**  
Case Officer



"The only way to do great work is to love what you do" –Steve Job. I firmly believe in this; this is why I am very passionate about working as a Pediatric Physiotherapist at Frank Hilton Organization. My journey with Frank Hilton

has been an overwhelming experience so far. My special interest for applying for this position was the uniqueness of the organization. The organization believes that very special child deserves a better future. The vision, mission and values of the organization is phenomenal. It will be an experience that is going to last a lifetime. I am very passionate about my role as a Pediatric Physiotherapist and why I love working here because of the holistic approach that is applied in taking care of each special needs child. I am glad to be part of such an organization and would like to thank the CEO and the team at Frank Hilton for believing in me and having me on board.

**Priyansha Chand**  
Physiotherapist



"I alone cannot change the world, but I can cast a stone across the waters to create many ripples". Mother Teresa

The Receiving Office is the first point of contact and is the face of FHO. First impressions are important.

FHO has given me the opportunity to work closely with the families' I have had the privilege to serve and will continue to do so. Working with these families has given me a better understanding of the realities that families of children with special needs face. Also working with a multidisciplinary team challenges me to continuously improve the service that I provide to every person that accesses our service.

**RESINA FUATA**  
Case Officer/Playgroup Coordinator



I love working here as it helps me put the skills and education I received in my caregiving course into practise and build me to be a better person...

**Akesa Raiwa:**  
Caregiver

# OUR TEAM ... OUR STRENGTH



Working here has helped me grow emotionally and spiritually and the challenges have allowed me to put my work skills in use.

**Losana Matawalu**  
Caregiver



Working at FHO came as a blessing in my life, not only did it provide me with a job but it has given me the opportunity to support children with special needs. I never saw myself working in this field, however now, I find myself wanting to

pursue further studies in this field. Seeing a child with communication difficulty being able to communicate has truly been a beautiful experience. I look forward to supporting children with communication difficulties reach their maximum potential.

**Navneeta Prakash**  
Speech Pathology Assistant



My work has made me a better person personally and professionally. I was raised in an orphanage. I see things differently since my employment here at the FHO. Serving a population that many people don't understand, those with disabilities who exhibit challenging behaviours has enabled me to see the world through different eyes.

**Siwan**  
Hilton Driver



I started off at FHO in 2014 as a pioneer for the department. I am glad that as a Community Rehabilitation Officer and a Program Coordinator I am able to use my skills and knowledge to work with children with special needs. I am grateful to be

part of a multidisciplinary unit in Fiji. I love the fact that FHO has allowed me to grow and nurtured me in my area of work in so many ways. It amazes me to see the strong bond and the team work I have within the department and with the organization staffs.

"At FHO is not about me or you it's about us and that's what I enjoy the most where everyone is equal."

**Sazmin Nisha**  
Community Rehabilitation Assistant

# Frank Hilton AMAZING WHEELBARROW RACE

The Amazing Wheelbarrow Race was held for the 3rd consecutive year bringing together partners, stakeholders and supporters of the Frank Hilton Organization in an innovative approach to assist in fundraising.

14 teams participated in the event this year. The music of the police band created a carnival atmosphere and the colourful costumes of the teams added to the gaiety.

There was a fierce fight for first place between defending champions Bluescope Lysaght and Fortech Construction resulting in a win clocked in at 9 minutes 11 seconds by Fortech Construction!.

Team participation:



**Fortech construction Ltd**



## HILTON AMAZING WHEELBARROW RACE



# SUPPORT TOWARDS MOBILITY DEVICE SERVICE BY FULTON HOGAN HIWAYS JOINT VENTURE

The Frank Hilton Organization Launched its Paediatric Mobility Device Service in May 2018. This would have not been possible if not for the generous support of Fulton Hogan Highways Joint Venture that assisted in the procurement of 100 paediatric mobility and postural support devices at a cost of \$48,000 with further commitment towards building a container workshop. A total commitment towards Frank Hilton Organisation through financial support, labour and construction material was approximately \$70,000.

FHO is proud to be the only organization in the country to have a fully qualified (Intermediate Level) clinical and technical teach as well new products. Confirming our pledge to ensure a rights based approach to service delivery, FHO commits to ensure the services and products are available when needed by the client.

The main feature of the FHO Paediatric mobility Device service is its product range which supports children from 6months of age and over with equipment that has never before been available in Fiji prior to this.

We thank Fulton Hogan Highways Team for their generous support.



## SUPPORT TOWARDS HILTON HOUSE HOSTEL

Joint effort from Goodman Fielder, Telecome Fiji & Suva City Council

The High support needs ward of the Hilton House Hostel provides support to children and young adults with severe disabilities and related medical conditions. They often require complete support with all activities of daily living and twenty four hour care.

In order to better support these individuals the Hostel identified essential equipment which cost approximately \$23,000. The equipment includes beds, mattresses, hoists and portable commodes. This equipment was sourced from New Zealand.

We wish to thank Goodman fielder (\$10,000), Telecome Fiji Ltd (\$5,000) and Suva City Council (\$2,500) for their contribution towards the acquisition of these items.



## NOTES

# Vision

“A Centre of Excellence – Educate, Empower, Uplift, Uphold.”

## Mission:

- Offer effective and quality education at all levels to increase potential of children with disabilities.
- Empower children with appropriate skills for life in order to increase independence and full participation in society.
- Mitigate hardships of parents and caregivers and empower them with the necessary tools to understand, protect and advocate on the rights of children with disability.



## Frank Hilton Organization

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