



Friends of
2015 Tansen

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WELCOME TO ANOTHER EDITION OF

Friends of Tansen



The highlight of 2014 was undoubtedly the hospital's 60th anniversary celebrations. This took place on 11 June, and we were delighted to have Dr Marjory Foyle with us as chief guest. She was the hospital's first lady doctor, and came to Tansen in the very early days of the hospital. On the day before the main celebrations, we distributed celebratory gifts within the hospital - fruit was given to all the adult in-patients and toy boxes to the children in the paediatric ward. The actual anniversary day started with a rally through the town, with a local traditional band playing at the head of the procession followed by a selection of staff wearing their colourful national dress. The rest of the staff, guests and well-wishers processed behind them, winding their way around the steep roads of the Bazaar. The rally was followed by a formal meeting and the opening of the new accommodation and training block, named after our founders - the Carl and Betty Anne Friedericks building. The day ended with a celebration meal for all staff and guests.

One of our biggest challenges is water, not too much water (which has been a problem for some in this part of the world in recent months) but too little water. Imagine how much water it takes to wash linen for 165 patients! Tansen is situated on a hill, and the town has outgrown its water supply. We collect rainwater but hope to get enough funding to build an additional rainwater harvesting tank to double our water storage capacity to tide us over during the long dry season.

The new High Dependency Unit is ready to open in the next few days. This has beds for four of our most critically ill patients. It will have a higher nurse-patient

ration and provision to give limited ventilator service to patients who only require this support for a couple of days (for example, patients bitten by poisonous snakes). The next project will be more renovation work in the medical ward, to provide a separate room for rehabilitation patients.

Another challenge is to find a permanent site for the New Life Psychiatric Rehab Centre (page 10). We were hoping local authorities would allocate some land we could build on by now. However, this is a lengthy complicated process, not helped by frequent transfers of civil servants. Having seen the positive changes in the residents' lives, it would be great to have a fixed, secure home for them.

I would like to say a big "thank you" for all that *Friends of Tansen* readers have done, praying for and giving to the work of the hospital. I hope you enjoy reading about what we have achieved together.

Dr Rachel Karrach
Hospital Director

NEWS FLASH!

After nine long years, UMN and the Ministry of Health and Population recently signed a five-year agreement covering the operation of the United Mission Hospital Tansen, and Okhaldhunga Community Hospital. This will give some certainty to our work, and hopefully help with visa arrangements for expatriates and other issues. Praise God for this excellent outcome.

joys AND Sorrows



One day while at home, 13 year old Samsher lost consciousness and fell in the fire, receiving severe burns. His family rushed him to the hospital. An examination revealed that he had fainted because of a seizure disorder, and he would need to be hospitalised for a month or more.

This was traumatic for Samsher, because of his extensive burns, and also because of the previously undiagnosed illness. His parents also faced the emotional challenges of a sick child and the extreme financial cost of such a long hospital stay. Unfortunately, this scenario of suffering is repeated for many of the families who come to our hospital.

During hospitalisation, Samsher was not easy to talk with. He did not interact with us, nor did he eat well. Unlike most other children, he was not excited to play with toys or a balloon; neither was he interested in

studying with our teacher. Dressing his wounds was a painful experience. No matter how hard we tried, he never seemed interested in playing and interacting with us. One day, in our weekly teaching rounds, we were speaking with a mothers' group about the importance of a nutritious diet and how it helps in healing wounds and strengthening our body. Samsher was one of a number of children nearby, and he seemed to be paying close attention.

The next day as we were giving some toys and balloons to the children, he asked us about the type of foods that he would need to eat to get better. It was the first time he had ever interacted with us. We encouraged his interest and as he began to eat, we saw that his burn wounds were significantly improved. All the staff, and Samsher and his family as well, were encouraged with the progress of healing. As we were providing for his



physical needs, we also prayed for his recovery. Before he was discharged from the hospital, he was transformed from quiet and sullen boy to a happy, laughing child. Where previously he had avoided interaction with others, he now made others laugh and encouraged other children and families in the ward. He also became very interested in studying the school lessons that he had missed in the six weeks he had to remain at the hospital.

From the Pastoral Care Department, Samsher's family received financial support through the Medical Assistance Fund. We are grateful to all *Friends of Tansen* for their generous giving to the children of our hospital. We thank God for all those who give so that children can have nutritious food. Through your support, the lives of Samsher and his family have been touched.

Sita (Play Therapist), Shristi (Dietary Educator) and Deborah (Teacher)

POSTSCRIPT: We learned recently that Samsher caught pneumonia and had complications that ended in his death. We were so sad to know of this, but we are encouraged that his family was touched and continues to remember the care he received at the UMHT.



Nepali people coined the name "Video Test" when ultrasound scans first became available in Nepal. It has been 25 years since I unpacked United Mission Hospital Tansen's first ultrasound machine and Dr. Olak Jirel began the work.

From the late 1980s, ultrasound was recognised as an appropriate and useful diagnostic tool for doctors, even ones working in remote hospitals. From basic, easy-to-use machines, larger more costly machines have now become available, offering a wider range of diagnostic capabilities.

In 1988 the United Mission to Nepal decided to introduce ultrasound in its hospitals, and I came to set up the departments, and more importantly, train Nepali doctors to do this work. Although my initial role was completed by 1996, the request to train more staff for remote locations, meant several short term visits in subsequent years.

Last year my husband Tim began work as the Information Technology Advisor at the hospital, and I have now returned to the Ultrasound Department to teach a couple of mornings a week.

Tansen now has three ultrasound machines, including one with doppler capability. There are three sonographers at present, but because of Tansen's more remote location, they do not have access to ongoing learning in the field. They are always grateful for further instruction from visiting specialists. The ultrasound office is always busy – as evidenced by the 8,117 that were performed in the hospital last year.

Val Nicholson (née Reid)

HAPPY, HEALTHY AND well-nourished



Nine-year-old Prabin and his family live in an area for landless people at the edge of town. His mother left home searching for work in the Gulf and has not been heard from for many years, and his older sister is somewhere in India, so the family now consists of Prabin, his brother and their father. Their father tried to support his sons by daily labour, but he has an alcohol problem and found it hard to raise his sons on his own. Often, Prabin would go to bed hungry, as there was no one to make an evening meal, and no food in the house. He slowly lost weight and eventually became ill.

Following a fall, he cut his leg. The wounds failed to heal and his body started to swell. Eventually he was taken to the district hospital and they referred him on to our hospital. He was diagnosed as having severe malnutrition and nephrotic syndrome, a kidney problem which sometimes follows infected cuts. He was sent from the ward to the Child Nutrition Rehabilitation Centre (CNRC). At that time, he weighed only 18.8 kg (despite having swelling due to his kidney problems). In CNRC, he had a daily weight check and was given nutritious food eight times a day. His family stayed in the Centre with him and the nursing sister in charge gave his father health education and taught him how to care for his children.

After two weeks, Prabin's condition was beginning to improve and he was followed up at the Paediatric Clinic. The doctor there sent him to the Children's Hospital in Kathmandu for further management of his kidney problem. Our Pastoral Care Department arranged financial support for the family to go to Kathmandu, and on their return they spent another two months in CNRC to complete his nutritional rehabilitation. He continued to improve, his swelling decreased and he started eating well. He became a happy boy who enjoyed playing and was no longer the apathetic and miserable child he had been when he first arrived.

His father was really grateful for the help Prabin received. Without that, Prabin would probably have deteriorated and died. We in Community Health are also thankful that we were able to bring change and new life to Prabin and his family. It was a happy, healthier, better nourished boy who was discharged home. Our staff see him regularly when he returns to CNRC for follow up.

Sister Parvati Gautam
Chief of Community Health Department



ON THE front line

My name is Tej and I have worked in UMHT for the past 19 years. I am thankful to the *Friends of Tansen* Committee for allowing me to write about my experiences at Tansen Mission Hospital.

I served in the Nepal Army for 18 years before I joined the hospital as a security guard. Now I supervise the 23 security guards in the hospital. When I look back over the years, I can see so many changes in the hospital. Nineteen years ago there were many missionary doctors, but now there are almost as many Nepali experts. Many buildings have been added, along with many new services for the patients. There have also been many changes in the community and the overall culture of Nepal.

When I started working here, I thought my job would be basically crowd control and giving security to the hospital premises. But the scope of our work is so much more than that. We are the first people visitors and patients who come to hospital encounter. Therefore, as I tell my fellow security guards, our behavior gives the initial impression of UMNT. We not only welcome visitors, but we also assist with emergency cases; we help guide patients with trauma, advanced pregnancy and other conditions to the correct treatment site. In the process of assisting and meeting people, we get the opportunity to interact with them and give information. I

had never imagined how many vital aspects there were in the role as security guard in a hospital like this. It is no wonder that our hospital was awarded the best hospital in Nepal two years ago. There are few other hospitals in Nepal where both rich and poor are treated without discrimination, and poor people especially have easy access to health facilities.

Poor and marginalised patients are not turned away from the hospital due to lack of funds. I have learned the meaning of Holistic Care here, and I have seen it put into practice every day. There was a time when I thought, what makes this hospital so unique and why are staff so compassionate and willing to serve? Over the years I have learned that the values of this hospital are what make it different. It always amazes me that there are many people around the world who pray for this hospital; some who have not ever seen us or this place.

I feel proud to be part of this prestigious organisation where all staff and patients are treated without discrimination. As this hospital just celebrated its 60th anniversary, I hope that the work will continue here for another hundred years.

Tej Bahadur Gaha
In-charge, Security Department



THE PRISONERS WILL BE set free...

At first glance, the motley group of women looked just like any other group of people thrown together and forced to form some sort of community. There were the younger ones who seemed to be in a more privileged position; confident, keen to engage in conversation, arms decorated with various tattoos. In stark contrast to them was a much older lady in village clothes – looking as if she had just left the house to fetch water, and in between were the others, clumped together in little groups or sitting alone, staring into the distance.

This was my first visit to the prison in Tansen and I was not sure what to expect: small cells, bars and a sense of imprisonment? I certainly did not expect the reasonably large building, with a number of women milling around outside. This not-so-unpleasant first impression soon changed. The guards in blue uniforms with their weapons always visible, the oppressive high

wall that surrounded us, which allowed only the blue sky to be seen, soon became apparent. Not even a glimpse of the beauty around us – the mountains, the valleys, the trees, was discernable.... All this painted a very different picture.

We were divided into two groups, and two of us started to see the women. Many of them had smaller ailments, often easily managed. But there were others with more serious issues, and many of them showed clear signs of underlying depression. Often during a consultation I would ask about the family situation, but I soon realised (and was told) that it was not a good idea to ask about that in this context. So often family issues were associated with much distress, or even part of the circumstances that contributed to them being imprisoned.



What brought them there? What were the stories of these women? What will happen to these children that run around? (The women are allowed to keep small children with them until they reach the age of 5 years). These, and many other questions, filled my mind. I would have loved to have been able to just sit and talk to them. Listen to their stories. Speak to them about hope, and forgiveness, and new beginnings possible even in the darkest of places.

I was reminded of Jesus' words about prisoners being set free. He proclaimed the possibility of freedom for all of us from the many things in our lives that imprison us. Forgiveness, healing and wide open space where we can be free. What would these words mean to that small group of women who have found themselves thrown together in a place of physical imprisonment?

I hope to be able to visit the prison again. Next time, I will be more prepared for what I will find there. Maybe there will be a chance to just sit and talk. To listen to the stories of these women who are in many ways not so different from us. To talk about the One who spoke of Himself and said: "If the Son sets you free, you will be free indeed."

These visits from the hospital to the prison will continue on a regular basis, and include medical as well as dental consultations. These consultations are provided free, and are part of our outreach program to the community.

Ansie van Rensburg
Head of Paediatrics

BROKENNESS TO HEALING: *Lives transformed*



I have worked with clients in the New Life Psychiatric Rehabilitation Center (NLPRC) for over 19 months now. I have seen them come to us in a state of complete brokenness, and I have seen their lives changed. These people have moved from fears of a life with a hopeless end to lives filled with endless hope. Many who have come to us have found healing in Jesus Christ, and care, love and support through His people. I am so thankful for our staff and volunteers who work with our clients and love them through the tough times.

One common trait seen in our clients, and in our staff and volunteers, is their perseverance in their faith and hope. In Matthew 15: 21–28, Jesus teaches us about the faith of a woman who didn't have much education or status in the eyes of others around her, but who kept making her needs known to Jesus even when it didn't seem He would respond. She, through her faith, had become aware of who Jesus was, and because she was bold enough to continue to approach Him, He not only answered her request, but also praised her belief, saying: "O woman, great is your faith!"

For this woman, moving from a "hopeless end" to an "endless hope" did not happen automatically. In spite of the barriers put up against her, she kept asking until she received; she kept seeking until she found; and she kept knocking until the request was granted to her.

I have received much moral support from friends and colleagues in my care for mentally ill people. Many of you read the previous *Friends of Tansen* article in 2014 about Saila and his changed life. As his life continues to change for the better, I am encouraged, as well.

However, there are also discouragements. In spite of an agreement which we made verbally with the District Development Committee, we have not been able to get

the land we need for building a safe home for otherwise uncared-for mentally ill patients. Due to changing personnel, we are still knocking on doors and praying for the free land promised to us, and for the funding needed to support our residential care facility. We are happy to be in another rented facility for now, but please continue to pray for this essential need.

Since the opening of the NLPRC, we have cared for nine people so far. After four months with us, two of them are completely changed and well. One of these is Saila, who is now working in the hospital as a Central Services and Supplies volunteer. He has done so well that they have just increased his hours from two hours daily to four hours daily. Another client arrived with her child after they had been abused and abandoned by her husband; initially she was suicidal. She has improved so much that she is now working in a home for orphans as a kitchen helper, and her child has started attending school. We are so thankful at the transformation in both of these lives.

The other clients are all improving as well, and help with daily activities including cooking, shopping, carrying water, cleaning, and doing laundry. These are all huge steps, as some clients arrived to us naked and had never cleaned themselves or their clothing!

Sadly, two of our clients have died – one passed away from old age (he was 85 years old) and the other was not able to recover from severe pneumonia. One was buried by the Christian community as they had no family, and the other was taken by their relatives, but the NLPRC staff were able to join with them for the funeral ceremony.

Pun N. Shrestha
Head of Pastoral Care



a new CMLT SCHOOL

Laboratory investigations are very important to medical services, and the Nepal Government has decided to strengthen laboratory capacity at all levels in its latest Health Plan. There is a great need, especially in Western Nepal, for well-trained Laboratory Technicians.

The United Mission Hospital Tansen is a referral hospital and has a large workload. Three to four hundred patients pass through the hospital each day. The laboratory performed 183,767 lab tests during the past year, making it one of the busiest laboratories in the country and thus an ideal training site.

The hospital has been involved in training health workers from its inception. The Tansen Nursing School also has a great reputation all over the country, and works in partnership with the hospital. In both of these institutions, there are well-trained staff available to be faculty of a new laboratory technician training programme.

Our hospital cares for all patients, whether they can pay or not. The extra income generated from a training programme would be helpful in keeping our services at

affordable prices and maintaining the charity service for all who are unable to pay.

Therefore, we decided to join with the Council for Technical Education and Vocational Training (CTEVT) to start a three-year Certificate-level course in Medical Laboratory Technology (CMLT).

A classroom and practical laboratories for the first year students are completed and ready for student intake. More building work is underway to host the second and third years' laboratory facilities, classrooms and accommodation.

The school will take 30 students per year and although everything is ready now, final approval was given too late to begin the programme this academic year. We will continue to make preparations to start in October 2015.

We are very excited about this new project that we trust will enhance laboratory capacity all over this country. We also hope that our school will set an example that can be followed by other CMLT schools in Nepal.

Marianne Broqueville
Lab Advisor

MOTHERS' MOMENTUM

for change



Resplendent in pink saris and green tillahari necklaces, the ladies of the mothers' group in Kantipokhara village, Palpa, explained to me the changes that had come about in their communities and households since forming their group six years ago, facilitated by the Community Health Department (CHD) of UMHT. Their confidence and enthusiasm was infectious, and it was obvious that they not only enjoyed meeting together, but were also proud of their achievements and the opportunity to share them with an outsider.

All of them shared about what they had learned about keeping their families healthy, and the activities they were involved in as part of the group's revolving fund; growing vegetables, raising pigs and chickens, planting potatoes - improving not only their income but also their nutrition. Many had benefitted from the emergency fund, to get them to hospital when they were going to deliver a baby, or for a more unexpected emergency. As with many women's groups, initially their husbands had been doubtful about the benefit of allowing their women to leave the house and meet together with others, but after seeing the changes in their homes and families, they encouraged their wives to be involved. Not infrequently, if one of the members could not attend herself, she sent her husband to deposit the monthly contribution to the revolving fund.

The next day we set off at 7:00 am, heading for one of CHD's new working areas. One hour of hairpin bends on tarmac road, and a further two hours on hair-raising tracks chiseled out of the steep hillsides,

confirmed the remoteness of Jaymire VDC and the reason why no other organisations were working in this area! Once again we met with a mothers' group which had been formed just a few months previously. This time, the introductions took longer as most needed encouragement to stand up and say their name and home area, and often ended sitting down amidst embarrassed giggles, not to mention all the mallas! However, a few months before they did not even have the courage to say their names in public!

The group had received health awareness teaching on a number of issues, including nutrition and HIV and AIDS, and were able to explain what they had learned and what changes they had made in their homes as a result. The majority of them had husbands working and living abroad -in India, the Arabian Gulf states or Malaysia. They were conscious of the challenge of sharing what they had learned with their husbands. The group had just started contributing each month to an emergency fund to help their members when they need emergency health care. Even within the few months that they had been meeting, changes in their knowledge and self confidence could be seen, and despite there being a lot more to do, it was evident that their community was going to be very different by the time the programme came to an end, and that the Laligurans (rhododendron) Mothers' Group would be an active and positive force for change into the future, well past the end of the project itself.

Mark Galpin
Executive Director, UMN

Celebrate 60



“We Serve, Jesus Heals”. For 60 years, this has been the heart of United Mission Hospital Tansen and the hundreds of people who have been a part of this hospital on the side of the hill. On 11 June 2014, we were able to celebrate God’s goodness to us and His work over 60 years in Tansen. We remembered the many people who have gone before us and who laboured to make this a hospital which still is building on its solid reputation.

Last year we shared the wonderful story of Carl and Betty Anne Friedericks, who were the first missionaries to come to Tansen and who started the Mission Hospital. This year, as part of our celebrations, we opened the newest building on the hospital compound – the Carl and Betty Anne Friedericks Building - which not only has classrooms for training, but housing for staff and doctors as well. Dr Marjory Foyle, who was the first lady doctor to work at Tansen back in the late 1950s, cut the ribbon to open our new building. She was also the Chief Guest for our 60 years celebration, and it was a real joy to have her with us to celebrate. During the program, Dr. Foyle shared memories of her time both in Tansen and in India, and the struggles and joys she has experienced in her life of mission work.

We were thankful for good weather for our celebration, as we started the day with about 200 people marching around the streets of Tansen bazaar, led by a hospital banner, a local Nepali band, and staff dressed in cultural outfits, dancing at the head of the parade. Not

only hospital staff marched, but also people from the community who are part of the hospital management committee, and other guests.

At the hospital, there was a formal programme with gift giving, candle lightings, and speeches and songs. We were happy to hear from many long-time workers and supporters of the hospital, including Dr Olak Jirel (Hospital Services Director and former surgeon in Tansen), Manamit Jureboo (former nurse and Social Services Department head), Dr Mark Galpin (UMN Director), Dr Rachel Karrach (Hospital Director) and the honorable Mr Som Prasad Pandey (Member of the Constitutional Assembly). They and many others shared their memories of UMHT, as well as encouragements and best wishes for many more years of service to the people of Tansen and the surrounding communities.

After the formal programme was completed, all the guests and hospital staff were able to enjoy a delicious meal together on one of the grassy areas on the hospital compound. It was such a delightful day, enjoyed by all!

As we look into the future, we are thankful for having had the opportunity to stop and remember and to praise God for the work which was been done here. But we are also thankful for the chance to commit ourselves to serve God and Nepal for many years to come.

Deborah Dornon

THE YEAR IN numbers

Thanks to your donations we were able to:

- Give free patient care to patients totaling NRP 12,008,211 (approx USD 120,000).
- Over NRP 600,000 (USD 5,882) of free orthopaedic implants were provided to patients.
- Complete building the accommodation and training block and renovations for the HDU.
- Buy an ECG machine, 3 patient monitors, an ophthalmoscope, a light source for Laparoscope, Lab Incubator, coagulation Analyzer, Elisa reader and washer, OT Light, Autoclave, Ultrasound machine, dental x-ray machine, 2 birthing beds, central oxygen system for medical and paediatric wards .
- Continue our training focus, offering courses for internal and external medical staff.

Friends of Tansen is also available in pdf format on our website. If you would rather not receive a paper copy of our magazine or you have changed your address please email Dr Roshan Kharel at: donorrelations@tansenhospital.org.np



The editorial team would like to thank everyone who contributed stories and photos for this issue of Friends of Tansen.

It has been a busy year in the hospital as you can see from the figures below:

	This Year	Last Year
Patients seen in our clinics	90,902	89,337
Emergency cases treated	15,184	14,202
Babies delivered	2,105	1,990
Patients admitted	12,549	12,687
Surgeries performed	6,777	7,113
Bed occupancy rate	79.73%	82.79%
Town clinic visits made	9,306	8,501

Future projects - can you help?

- 1 The Medical assistance Fund (MAF) provides charity to the poorest patients. Each year we are seeing more and more patients in need of assistance, so donations to this are always welcome.
- 2 The New Life Psychiatric Rehab Centre needs on-going support and we are also looking for funds to build a centre when land is allocated.
- 3 We hope to purchase the following needed items of equipment: Cardiac monitors, x- ray machine and digital x-ray system, diathermy machine, operating table, pulmonary function machine, fully automated biochemistry analyser.
- 4 We are pleased that work on the new water tank will be starting soon as we reached our target for the tank itself. (Thanks to donors!) However, there is still a need for funds for the water saving measures which we will need to take around the hospital, and there are other equipment items which are needing replaced, so any gifts would be appreciated!
- 5 We are still in need of long term medical personnel, particularly general surgeons. We would also like some short (or longer term help) from a psychiatric nurse or social worker. If you feel that God may be leading you to serve here, please get in touch. Our website has more details.

Thank you again for all your generous giving that enables us to continue to give high quality treatment.



When donating to United Mission Hospital Tansen, please send us a letter or email tansen@umn.org.np (and copy to fin@umn.org.np) giving the following details:

1. Your name, address, and the amount.
2. The date of the transaction.
3. The account number it was paid into (if by money transfer).
4. Please state clearly that the funds are for United Mission Hospital Tansen. All undesignated gifts will be used as needed.

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Set up a payment or monthly standing order to transfer funds.

EUROPEAN CURRENCIES

Pay to: **United Mission to Nepal**

Sort Code: **60-91-99**

Account Number: **10615512** (Euro account)

Bank: **Standard Chartered Bank Jersey, UK**

US & NEPAL CURRENCIES

Transfer or wire to:

**Standard Chartered Bank Nepal Ltd.
PO Box 3990, Nayabaneswar,
Kathmandu, Nepal**

Account Name: **United Mission Hospital Tansen, Palpa**

Account Number: **01156528101**

Swift Code: **SCBLNPKA**

DONATE ONLINE

umn.org.np/give

Give using your **credit** or **debit card**.

In the Message pane, write UMHT.

OTHER OPTIONS

For help or advice about giving please contact tansen@umn.org.np or look at our website: tansenhospital.org.np/support/support-money.html

MAIL DONATIONS

Send a cheque made payable to **United Mission Hospital Tansen** and post to:

**United Mission Hospital Tansen
c/o United Mission to Nepal
P.O. Box 126, Kathmandu, Nepal**

All donations made will receive a letter of acknowledgement and thanks.

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