



## Social Accounts

2015 - 2017



A Special cover and Mystamp was released in commomeration of the Canonization of Saint Teresa who released our Upanayan Early Intervention Programme and dedicated it to the nation.

### Madhuram Narayanan Centre for Exceptional Children

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## SOCIAL AUDIT STATEMENT

### Madhuram Narayanan Centre for Exceptional Children

The Social Audit Panel has examined the draft Social Accounts submitted to us and discussed them in detail at the Social Audit Panel meeting held on 28<sup>th</sup> October 2017.

I have examined the revised Social Accounts which were prepared following the Social Audit Panel meeting and have taken into account various points discussed at the Social Audit Panel Meeting. We also examined a sample of the data and the sources of information on which the Social Accounts have been based.

We believe that the process outlined above has given us sufficient information on which to base our opinion.

We are satisfied that, given the scope of the social accounting explained in the revised draft and given the limitations of time available to us, the Social Accounts are free from material mis-statement and present a fair and balanced view of the performance and impact of **Madhuram Narayanan Centre for Exceptional Children**, as measured against its stated values and objectives and the views of the stakeholders who were consulted.

We have identified some important issues to be taken into consideration during the next social audit cycle. In particular we would refer to the following:

- i) To use external persons to consult a few key stakeholders in the next cycle
- ii) To monetise the social value created as part of the economic impact

The members of the Social Audit Panel were:

- a) Ms. L V Jayashree
- b) Ms. Bhooma Parthasarathy
- c) Ms. Aruna Rathnam

Ms. Latha Suresh  
14<sup>th</sup> November 2017.  
Chair of the Social Audit Panel

\* The notes of the Social Audit Panel meeting form part of the social accounting and auditing process and may, by arrangement, be inspected along with the full social accounts at the offices of **Madhuram Narayanan Centre for Exceptional Children** at T Nagar, Chennai, India. Members of the Social Audit Panel have acted in an individual capacity.



## ACKNOWLEDGEMENT

The Management of Madhuras Narayanan Centre for Exceptional Children (MNC) wishes to thank Mrs. Latha Suresh, the certified Social Auditor, SAN, for chairing the audit committee and auditing the Social Accounts prepared by MNC for the academic years 2015-2017.

MNC also acknowledges the valuable contribution of the Social Audit Panel members during the audit process and thanks them immensely.

- **Ms. L V Jayashree**, Director, Spastics Society of Tamilnadu, Chennai
- **Ms. Bhooma Parthasarathy**, Director, Thirumalai Charitable Trust, Ranipet
- **Ms. Aruna Rathnam**, Education Specialist, UNICEF, Chennai

The management further acknowledges and thanks for the efforts put in by Mrs. Sowmya Raghavan and Mrs. Vimala Kannan in the process of meeting various stake holders, collecting, collating the data and interpreting the same objectively, and Mrs. Vijayanthi Desikan in preparing the Social Accounts document.

The management also wishes to thank all the staff, both permanent and part time and volunteers for their cooperation in the preparation of the social accounts and also in organizing the social audit meeting.



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## 1. INTRODUCTION

**Madhuram Narayanan Centre for Exceptional Children (MNC)** provides early intervention services for children with Intellectual and associated disabilities. MNC celebrated its Silver Jubilee on 12<sup>th</sup> December 2014. The journey of **28 years** has been a rewarding one and today MNC has become a model intervention centre for Intellectual Disability and a Mentor for many centers providing such services. Regular refresher courses for the Tamilnadu Government appointed Special Educators/Therapists working in the rural Primary Health Centers, and Government Early Intervention Centers have come to stay and the State Commissioner's Office for the Differently Abled has acknowledged MNC's efforts in training the personnel. The rich expertise garnered over the journey of 28 years is shared during the refresher courses, Annual Workshops and at the Triennial International Conferences. The numbers of delegates during the training sessions are on the increase and the benefit accrued in attending, is being felt by all of them. The MNC staff personnel take part in the training sessions with much interest as it is a learning process for them every year and an opportunity to update their skills.

**In order to assess its social impact and to check whether MNC's activities are in line with its Vision of providing early intervention for young children with Intellectual Disability (MR), MNC drafted its Social Accounts and has** successfully completed three cycles of Social Accounts for the period 2008-2009 and 2010-2012, 2013– 2015. The experience and clarity gained during the first three Social Audits was very helpful and provided valuable information for the functioning of the centre and resulting in the exercise being taken up once again for the fourth time focusing on:

- Improved comprehensive assessment, both quantitative and qualitative, of the Early Intervention Program, with reference to specified parameters
- Overall performance review and reporting based on the principles enunciated in the Vision, Mission Statements and the Values of the organization
- Interactions with stakeholders and their feedback on the program
- Evaluation of data, taking initial and final count against the set objectives for each child.



## 2. PREVIOUS SOCIAL ACCOUNTS AND AUDITS

The **issues for action** identified by the 2013-2015 Social Audit Panel Report, have been duly attended to, and form the resultant observations of the present exercise. MNC initiated the Social Accounts for the period **April 2015 to March 2017** by forming the Social Accounting team that included:

- Mrs. Sowmya Raghavan, Member of the Railway Board (Retd) and a Director at MNC
- Mrs. Vimala Kannan, Director MNC, qualified and experienced in the field of special education, particularly in the provision of early intervention services to children with mental retardation and associated disabilities, age group six years and below
- Mrs. Vaijyanthi Desikan in charge of documentation at MNC

Mrs. Jaya Krishnaswamy and Mr. S. Krishnan were totally involved throughout the process of preparing this document, sharing their rich experience in the field, designing the questionnaires and arranging for interviews etc. The interpretation of the quantitative and qualitative values of the social audit exercise was done totally under their guidance.

**The recommendations of the previous social accounts 2013-2015 have been implemented and get reflected in the current cycle of social accounts.**



### 3. HISTORY AND BACKGROUND

**Madhuram Narayanan Centre for Exceptional Children (MNC)** was established in Chennai in December 1989 as a **Research cum Demonstration Centre** to provide **Early Intervention Services to children with Intellectual Disabilities (MR), through an indigenously developed systematic program of training Upanayan, meaning 'to lead along'**. **Upanayan** was the outcome of the need felt by the community of parents and service providers to fulfill the existing void in the area with a simple, easy to follow and culturally suitable program.

#### **Upanayan Early Intervention Programme**

**Upanayan** engages parents as partners in the implementation of the program. They are trained by the special educators to lead the children towards their developmental goals. **Upanayan** Early Intervention Program, was sponsored by its parent organization - **Indchem Research and Development Laboratory (1987- '89)** as a part of its initiative for corporate social responsibility. This program, based on India's time tested legacy of child care, was designed keeping in view the socio-economic conditions and the cultural milieu of the country. An interdisciplinary team consisting of experts in Developmental Psychology, Neonatology, Audiology, Occupational Therapy, Physiotherapy, Education, Special Education, Yoga and Information Technology, besides a Nutritionist and Dietician, worked on the project from March 1987 and completed the first phase of the project covering the age group of birth to two years in December 1989. The program was field tested for its workability and suitability, and was formally released by **Saint Teresa** in July 1992 at Kolkata. The training program, covering children in the **age group birth to 6 years** has since been successfully implemented and **5700** children have benefited over the last **28 years** from various states of India and abroad.

#### **Provision of Early Intervention Services**

Early Intervention **services are provided for children with Developmental Delay/Intellectual and Associated Disabilities, (as mentioned below) in the age group birth to six years:**

- 1. Neuro Muscular Cerebral Palsy**
- 2. Down Syndrome**
- 3. Autism Spectrum Disorder**
- 4. Attention Deficit Hyperactivity Disorder**
- 5. Microcephaly**
- 6. Macrocephaly**
- 7. Hydrocephaly**
- 8. Vision Impairment**

9. **Hearing Impairment**
10. **Seizure Disorders**
11. **Metabolic Disorders**
12. **Other Neuro Muscular Disorders**
13. **Other Chromosomal Disorders**
14. **Any other disorders with developmental delay**

**The Intervention services comprises** the individualized education plan for every child along with, Physiotherapy, Occupational and Speech therapy, Yoga and Play therapy, Physical Education, Music, Medical Intervention, Nutritional Intervention, apart from Outdoor and Indoor activities, as part of the curriculum.

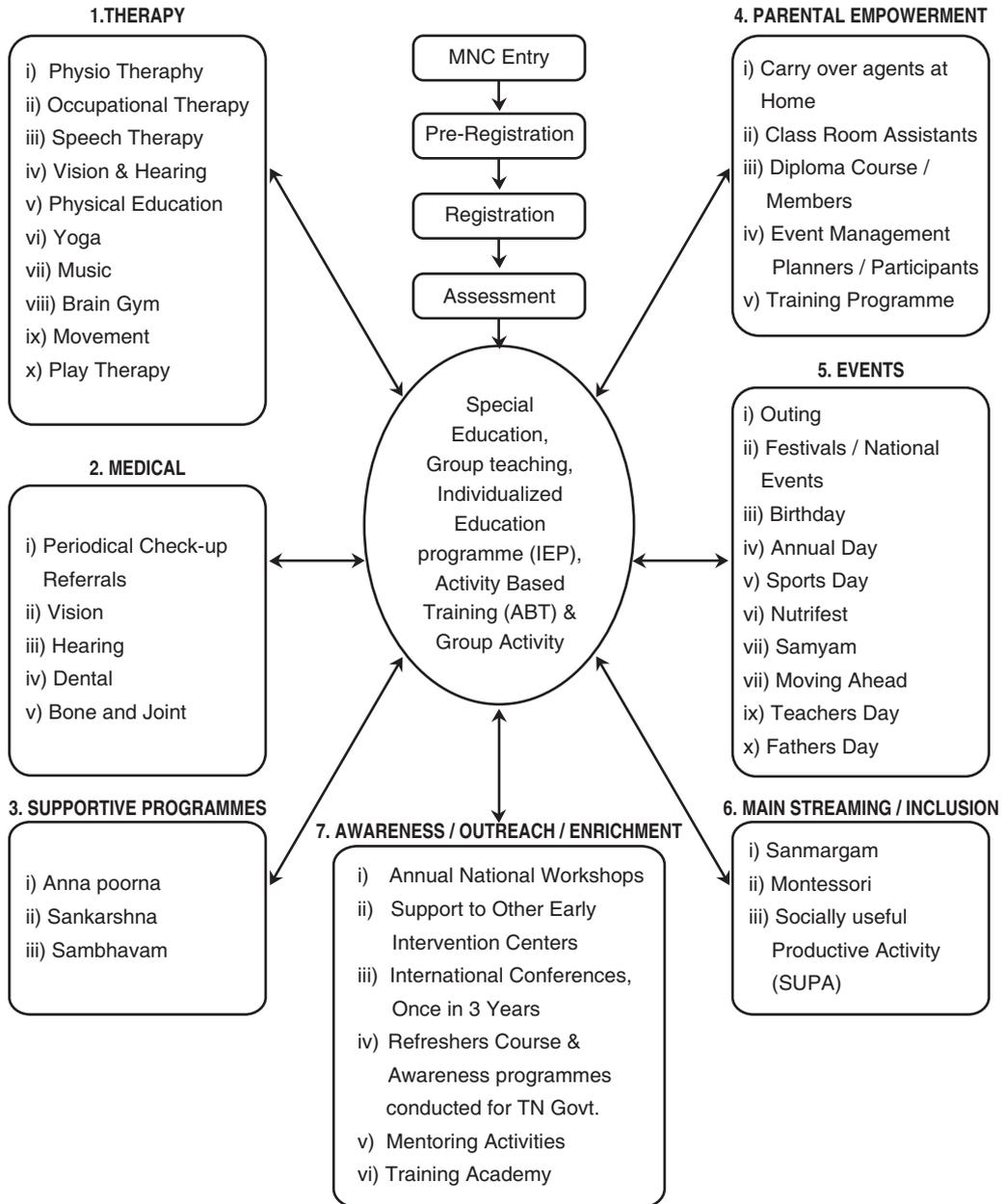


# UPANAYAN EARLY INTERVENTION PROGRAM



**MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN**

## EARLY INTERVENTION PROGRAM (EIP)



## **SUPPORTIVE PROGRAMS**

### **1. Physiotherapy**

Stimulates motor functions  
Improves muscle control used in activities of daily living  
Develops self help skills  
Promotes good health

### **2. Occupational Therapy**

Improves muscle control  
Facilitates Activities of Daily Living  
Develops self help skills

### **3. Speech Therapy**

Improves Language and Communication  
Improves Receptive Language  
Aids Expressive language  
Rectifies SODA (**S**ubstitution, **O**mission, **D**eletion, **A**ddition) with appropriate training  
Includes Alternate and Augmentative Communication

### **4. Yoga Therapy**

Has a calming influence on the child  
Facilitates Attention, Focus and Recall  
Activates, Energizes and strengthens the child

### **5. Play Therapy**

Develops Attention to details  
Improves listening skills  
Trains in following Instructions  
Helps in completing a given activity in a given time  
Teaches to be a team player

### **6. Voice and Vision Therapy**

Optimum usage of vision strength  
Facilitates vision through visual aids  
Adaptations in case of low or lack of vision

### **7. Physical Education**

Building muscle strength  
Coordination of body movements  
Identify/recognize any special talent/skill of the child in any of the sports activities  
Overall improvement of health

### **8. Brain Gym**

Stimulates left and right brain functions  
Maximizes the potential of the child's brain

### **9. Music**

Calms the child and increases the attention span  
Helps in Memory recall  
Helps in Rhythm and tone synchronization

### **10. Movement Therapy**

Acts as a Catharsis  
Helps in the synchronized movements of limb with grace  
Trains in following tunes and rhythm coordinating them in movements

The training provided is both **Centre and Home-Based**. The special educators at the Centre provide intensive training to parents so that the entire process of training particularly the methodology becomes very clear to them, and it guides them to become carry over agents of the program for their children in activities of daily living at home.

#### **Centre Based**

The **Individualized Family Service Plan (IFSP)** helps in the early intervention programme for children in the age group, birth to two years where **parental participation is total** in the program. The child's special educator (in a class room setting or in the home setting)

- Demonstrates the training program to the parent
- Assists in the implementation of the training to the child at the Centre, and also prepares the parent on
- how to become a **carry-over agent in activities of daily living** at home

In situations where the parents are not available, a close relation of the child or dedicated care givers provide the needed services. About 100 children attend the Centre and receive training on every working day with their mothers/or, in a few cases, with close relations/caretaker and in rare cases with their father/grandparents. The institution is well equipped and has the requisite number of qualified special educators and therapists.

The **parent** gains self confidence as an implementer of the program to her/his child, and gradually **develops into a teacher aide** to train other children at the centre, and later equip herself/himself as a Special Educator by qualifying through a diploma course in '**Early Childhood Special Education**'.

In the Upanayan **2 plus to 6 years** program, the parents are:

- **slowly weaned away** from direct training at the Centre
- the **special educators** utilize their expertise only if required

The special educator trains the child to become more and more self-dependent in preparation for mainstreaming in school education. The parents continue to involve themselves along with the other family members in training the child at home, thereby providing an effective supportive system for the child. Based on the progress made, the children are introduced into the school level programs either in the **special schools** meant for the purpose or to **mainstream schools** with non-disabled children.

#### **Centre-Home Based**

**IFSP** is particularly helpful to parents living far away from the Centre, and who for other compelling reasons cannot bring the child to Centre every day. The parents and the special educators mutually decide on:

- The number of days the parent comes to the Centre for training
- Number of home visits the special educator has to make in training the parent to become effective carry over agent at home.

#### **Home Based**

**IFSP** is introduced for out station parents who make a preliminary visit to the Centre for the purpose of assessment and programming but who carry out the programme in their own settings. They visit the centre once in fifteen days or once a week and learn the skills that should be taught to the child at home and the progress is checked on their next visit.

#### **The Process**

- The parents, on admission and assessment of the child, use the special education and therapeutic services at the Centre. The duration of their stay is decided mutually by the parents and the special educators based on the logistical conveniences of the parent and the needs of the child.
- During this 'internship' period the parents are exposed to the programme and trained to provide the needed interventions to their respective child.
- The parents where possible, contact the Centre through telephone or in person, regarding the progress made by the child.
- The parent is expected to come every fortnight for instructions and to review of the progress of the programme and definitely after three months for evaluation of the child and to move over to the next skill or to change strategies for training.

#### **Special Staff and Consultants**

The specialist staff for providing the services comprises special educators, physiotherapists, occupational therapist, speech therapist, consultant pediatrician supported by an Inter disciplinary team of experts as mentioned earlier.

### **Parental Empowerment**

**Total parental involvement is** the very basis of the intervention program at the Centre. **In addition to the habilitation of the children, the twin objective of the Centre is the rehabilitation and empowerment of parents**, to enable them to come to terms with their child's disability.

#### **Beneficiaries include children from:**

- City of Chennai and its outskirts (Largely)
- Districts of Tamil Nadu
- Muscat, Dubai, Abudhabi, Srilanka and the USA



### **Board Members of MNC**

1. Mr. N. Kumar, Industrialist
2. Prof. P Jeyachandran, Psychologist/Special Educator
3. Mrs. Jaya Krishnaswamy Educationist
4. Mr. S B Prabhakar Rao, Business Executive
5. Prof. K Vijayaraghavan, Scientist
6. Mr. Satish Parasaran, Lawyer
7. Mrs. Vimala Kannan, Educationist
8. Mrs. Madura Visweswaran, Educational Entrepreneur
9. Mrs. Sowmya Raghavan, Railway Board Member (Retd.) IRAS
10. Mr. Dipankar Ghosh, World Bank Executive, Washington D.C., USA

**Management Committee**

1. Mr. N Kumar
2. Mrs. Jaya Krishnaswamy
3. Mr. S Krishnan
4. Mr. Sowmya Raghavan
5. Mrs. Vimala Kannan
6. Mrs. Priya Rajkumar
7. Mrs. Sumitra Manoharan
8. Mr. S Vijayan



#### 4. MISSION, VALUES, OBJECTIVES AND ACTIVITIES (MVOA)

MNC first conceived the Vision and Mission of the Centre in 2004. The process of evolution of Vision, Mission and Values was reported in the Social Accounts 2008-'09 and in 2010-'12, and 2013-'15. The Vision, Mission and Values of the Centre continue to guide and inspire the organization in its work and therefore remain unchanged.

##### Vision - Mission Statement

##### VISION

- **Reaching Early Intervention Services** to every Child with Intellectual Disability (MR) and Associated Conditions

##### MISSION

- **To provide** services in early detection, identification and intervention in Intellectual Disability ((MR)
- **To empower** parents and family members in the care and management of children with disability
- **Starting a Training Academy** to conduct recognized courses in Special Education

##### VALUES

- **Zero Rejection** of any Child with Intellectual Disability
- **Openness to Developments** and Innovation in Technology in the Field of Special Education
- **Adaptability** to the Growing Needs of Inclusion in the Community

##### Objectives and Activities:

**The first recommendation of the previous Social Accounts was:**

**Review of the Objectives and the Activities of the center:**

**Action taken:**

*The Management committee met and **revisited the objectives**. The objectives of the centre were found in line and adequate and fully encompassing the Early Intervention Programme being provided here. It therefore needed no revision.*

**Objective 1: Providing Early Intervention Services for the Habilitation of the Child with Intellectual Disability through:**

- **Early detection** through direct communication and referrals
- **Early identification** using the UPANAYAN assessment tool
- **Implementation** of the Early Intervention Program UPANAYAN
- **Providing Support** Systems through the projects – **Annapoorna, Sankarshana, Samyam, Sambhavam and Sanmargam**
- **Establish a Montessori** unit at the Centre to create a pre-school environment prior to education in mainstreaming

**Objective 2: Rehabilitation of Parents and their Empowerment through**

- **Training programs**
- **Planning and Conducting Events**

**Objective 3: Creating Awareness on the Importance of Prevention, Early Detection / Early Intervention through**

- **Dissemination of knowledge**
- **Effective media communication**
- **MNC website**

**Objective 4: Organize Outreach Programs through**

- **Government Schemes**
- **And in programmes conducted for Special Schools**

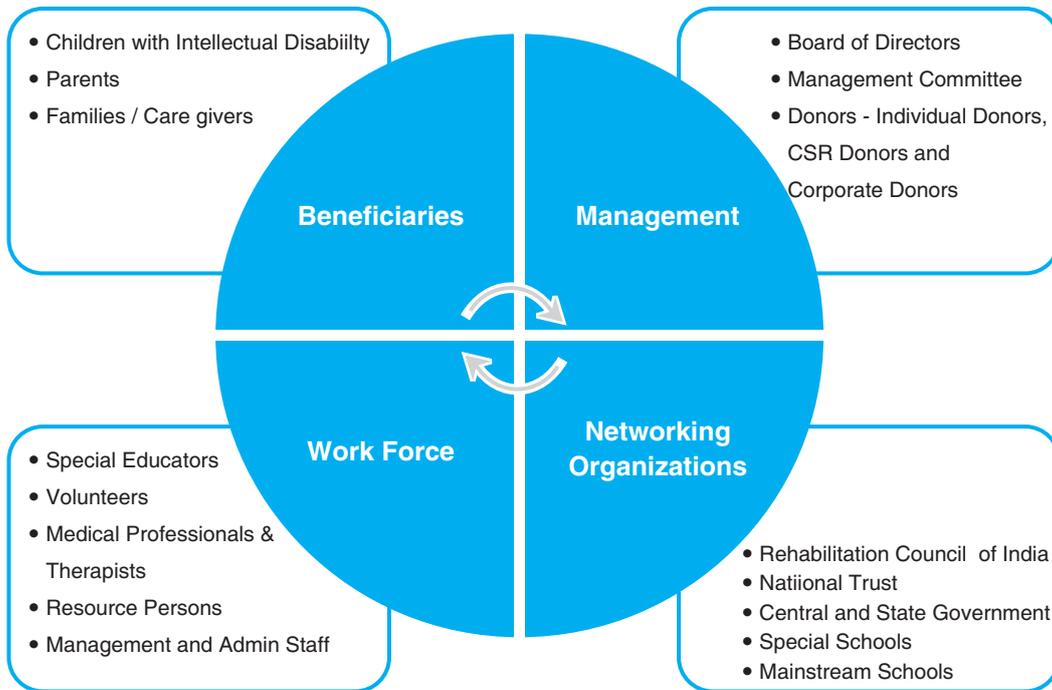
**Objective 5: Create professionals in special education through**

- **Offering Accredited Courses** offered by the **Rehabilitation Council of India**
- **In house Refresher / Orientation courses** to staff / parents

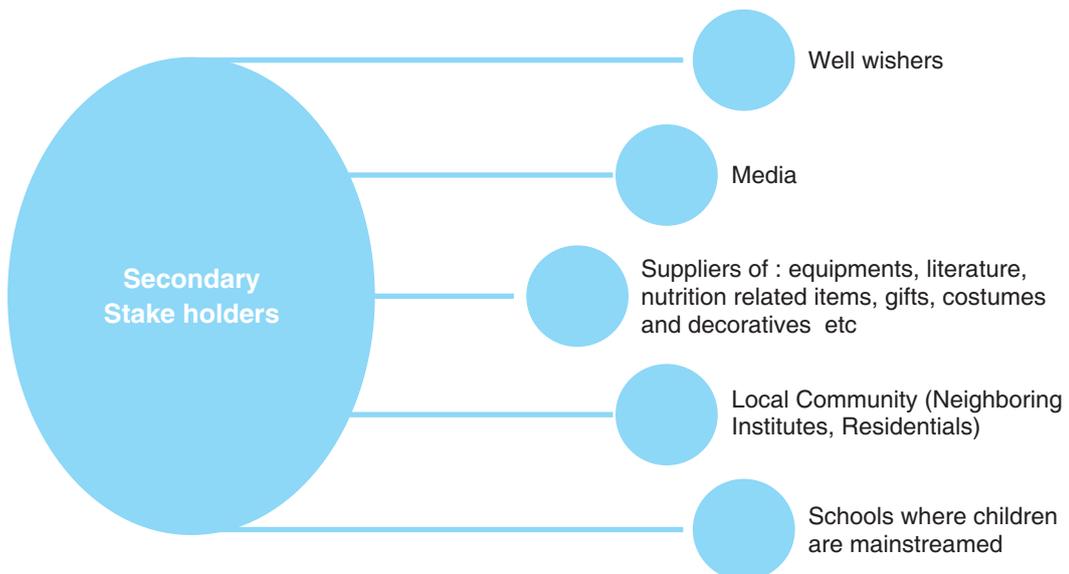


## 5. STAKE HOLDER MAPPING

### PRIMARY STAKE HOLDERS OF MNC



### SECONDARY STAKE HOLDERS OF MNC



**The second recommendation of the previous Social Accounts was:**

**To include all stakeholders for the next cycle**

**Action taken:**

The number of **Parents** interviewed this time almost doubled (51) compared to the last social accounting cycle. As far as possible all parents who attend with their children at the Center have been interviewed. The interview served not only as a means to know how the parents reacted to the intervention services provided at the Center but also served the major need for conducting counseling sessions with the parents. While 35 parents were interviewed during the last cycle we have now interviewed 51 parents.

*(The format used and the summation of the interview can be viewed as Annexure 1 and 2)*

Three important **State Government Officials** were interviewed personally and a couple of the **Central Government Officials** were interviewed over the phone. This category of stake holders has been interviewed for the first time.

*(The format used and the summation of the interview can be viewed as Annexure 1 and 2)*

The **Donors** – The donors who were hitherto not interviewed were however included in this social cycle. A questionnaire was designed for them, which was mailed to them which they had to fill and mail back to us. Some of them replied by email and some of them by post.

*(The format used and the summation of the interview can be viewed as Annexure 1 and 2)*

All the **Special Educators** at the Center have been interviewed. A questionnaire was designed for them, and the interviewer met them during the working hours of the Center individually, and spent 30 minutes with each Special Educator.

*(The format used and the summation of the interview can be viewed as Annexure 1 and 2)*

**Management Staff and Board** – All the management staff have been interviewed. The Chairman of the Board of Directors, and 4 of the members were also interviewed.

*(Can be viewed in Annexure 2)*

## 6. SCOPE AND METHODOLOGY OF THE SOCIAL ACCOUNTS

This presentation of social account covers the time period **April 2015 - March 2017**.

We have for this process consulted stake holders in all categories – Parents, Donors, Well wishers, Central and State Government Officials, and Resource persons. The secondary stakeholders have also been consulted and respective feedback has been recorded as annexure.

### Stakeholder Consultation

Stakeholder	No. of stakeholders	No. consulted	% consulted	Methodology
Children	114	51	45	Parents responded on behalf of the child
Parents	114	51	45	Questionnaire and direct interaction in Focus Group Discussions
Special Educators	22	22	100	Questionnaire Observation and Direct Interaction
Management staff/Board	6	12	50	Direct Interaction / Monday meetings
Donors	96	20	21	Email questionnaire
Well wishers	100	20	20	Email questionnaire
Suppliers	5	3	60	Personal Interview
Government Officials State/Central	6	4	67	Email questionnaire / Interview over the phone
Resource Persons	60	20	35	Email questionnaire

*(Selection of stake holders in the categories of Donors, Well wishers, and Resource Persons was done by a **Random Sampling Method**, an unbiased surveying technique where large population is involved in the survey.)*

**Stake holders Quotes:**

**Well wishers:**

**1. Ms Anindita Mukherjee**

Consultant - Oberoi International School  
1103 Building B, Oberoi Woods CHS Ltd  
Western Expressway  
Gokhale Road, Goregoan (E), Mumbai

*MNC is a pioneer in the field of quality Identification of disabilities in children as young as a few days old and providing necessary intervention services which is affordable. The approach to services is holistic which includes educating and up skilling the parents to manage their child better, nutritional requirements of the children with MNC are looked into and the well being of the mind and the body is looked in through yoga programme.*

*Parental involvement in the program directly is the other significant highlight of MNC's program. There are several examples cited by parents who have benefitted immensely from this approach.*

*This has over the yeasers created awareness in the society attracting patrons, volunteers who have joined into campaign for the cause with MNC.*

**2. Dr. Amibika Kameshwar**

Director – RASA  
Chennai

*Every institution of this nature has a purpose and works towards it. MNC is enlivening its purpose of facilitating societal change and empowerment.*

*Specific to my field of work I would like to sponsor the fee of two teachers who can get trained in Theater Arts for holistic development and apply their methodology for the further betterment of groups of children at MNC.*

**Corporate Donor**

**1. Mr. Sankaranarayanan Balasubramanian**

**Sr. Tech Lead, V2P (ESBU)/Service Provider Platform & Apps**  
CISCO, Chennai

*My views on the content/appearance of the website*

- *The website is informative and well done*
- *There should be a payment gateway to donate on line*
- *There is no provision to donate online. If this is not feasible immediately, at*

least providing info on UPI payment address which can be setup for this donation might help donors.

- *The success stories of mainstreamed children should be uploaded*

Have you recommended any other donor to MNC? **Yes**

*If Yes, how many and why did you recommend?*

- *Can't say the exact figure, recommended many*
- *I have enrolled MNC in Cisco Community and the process of registration is in progress. Cisco requires an amount of \$1000 donation or volunteering to be registered against an NGO before they will start the registration process. We have just hit this mark in the last week. I recommend MNC because I think they can benefit from the enrollment in Cisco Community and my fund raising efforts.*

**Resource Person:**

1. *Ms. Camille Catlett*

*Scientist*

*Frank Porter Graham Child Development Institute*

*University of North Carolina*

*Chapel Hill, NC 27599 8185 USA*

- *Their work with families is preparing them to be the best possible resources in supporting the full potential of their children*
- *Their work with children is advancing the potential for each child to be included members of their homes and communities*
- *Their work with other professional in enhancing their capacity to serve and support children and families*

2. *Ms. Deborah Fidler*

*Professor & Director, Graduate Programs*

*Human Development and Family Studies*

*Colorado State University*

*I believe that MNC has an important mission and a very strong team of professionals working hard to provide intervention and support for young children with disabilities and their families. I have a strong admiration for the dedication of the leadership and the staff, and I believe MNC provides an important service that makes a difference in the lives of families in Chennai and beyond.*

*I believe that MNC plays an important role in raising awareness regarding the importance of early intervention regionally and nationally in India. By providing a center that places a strong emphasis on early intervention, MNC sends a clear*

*message that the lives of young children with disabilities are important, and that young children and their families require community investment and social support.*

- *Highly dedicated staff*
- *Strong commitment to the population of children with disabilities*
- *A strong motivation to bring in evidence-based practices from the latest in treatment and developmental science*

### **Methodology for consultation with Parents**

#### **The Procedure**

The interviewer interacted directly with the parent, first having gathered some background information on the parent from the Child Particulars Form filled in by the parent at the time of entry into the program. The interview was conducted in Tamil/English, using open-ended questions. This facilitated a free and frank sharing of information and ideas, and provided valuable pointers to take the program forward. Parents were interviewed during the course of a normal working day, in the midst of daily activities like yoga, prayer, mealtimes or during group activities. The interviewer not merely documented the responses, but took this opportunity to counsel the parents on what they should expect here and how they have to use the facilities and opportunities offered here.

#### **Using the Questionnaire as the Tool**

The oral questionnaire was put across to the parent at a time suited to both the interviewer and the parent. The purpose of the questionnaire, that the responses would be used in the social accounting process, was explained to the parent. The answers provided by the parent were noted down by the interviewer as not all parents could read / write fluently. The total time taken for completing a questionnaire was 30 minutes.

***(Details of the questionnaire is given in Annexure 1 and responses of parents are given in Annexure 2)***



*Mrs. Sowmya Raghavan Interviewing a member of the staff*



*Mrs. Vimala Kannan interviewing a parent*

### **The Chairman's Take**

Started in 1978 by Mr. N Kumar, Indchem Research and Development Ltd (**IRDL**) was a part of the Sanmar Group. The age of computers was dawning in India, and IRDL was at the cutting edge of multimedia technology. Indchem manufactured sound and graphic cards and other technological innovations. After a few years, the IRDL team began to ask itself how it could use computers to benefit society. Mr. Kumar wanted to use knowledge of electronics to benefit children in all possible ways. In September 1987 the Management committee of IRDL formally approved the proposal to design **Upanayan**. It was undertaken as a part of an initiative from Indchem Electronics to provide Early Intervention Services to exceptional children to enable their rehabilitation into mainstream environments. Subsequently, in order to provide greater focus, and extend the services mentioned, with the aim of benefitting society as a whole, this project was transferred to a separate entity called the Madhuram Narayanan Center for Exceptional Children (MNC). During its journey of 28 years MNC has evolved itself into a model **Early Intervention Center**.



Mr. N Kumar, Chair of the Board of MNC being interviewed by Mrs. Sowmya Raghavan and Mrs. Vimala Kannan

***I consider MNC as one of our proudest achievements, and the future lies in scaling up, in expansion and growth and replicating the model across India, which is my dream. The empathy shown to the child in distress, the dedication to the cause of disability is what I am happy about. The core strength of MNC is the people. The organization displays exemplary dedication to the cause – “the child who is in need”.***

*I for my part will do whatever and more that I can.*

N Kumar

Vice chairman – Sanmar Group and Chair of the Board MNC

### **Interview with Special Educators as Stakeholders**

The Special Educators form the back bone of MNC's Early Intervention Program, and provide a dynamic and vital support system to the parent throughout the child's training in the centre. Their major areas of work are:

- Implementation of the training program, steering it through the structured course during the appointed time
- Maintain detailed records of the child's progress digitally in Upaneeta
- Mentor the parents in the process of training and as their child's carry over agents at home

The stakes that the special educators have in the program implementation are: the habilitation that is the progress of the child – an indicator of the impact of early intervention and, the rehabilitation of the parents, that is, to integrate them into the structure of the Early Intervention Program as a co-educators and co-therapists.

#### **The methodology included:**

- One to one interaction, using a questionnaire
- Informal observations in class room settings
- Observations made at the time of assessments, staff meetings and parent counseling sessions

#### **Selection of Special Educators:**

The interviewer interacted on a one to one basis with all the special educators, including the members with the management.

***(Details of questionnaire and responses to the question are given in Annexure 1 and 2)***



## **7. THE REPORT ON PERFORMANCE: ANALYSIS OF THE SOCIAL ACCOUNTS**

Values of MNC are:

- **Zero Rejection of any child with Intellectual Disability (MR)**
- **Openness to Developments and Innovation in Technology in the field of special education**
- **Adaptability to the Growing needs of inclusion in the community**

The present social accounts exercise has reinforced the values MNC has laid down, and this is reflected in the interviews with the stakeholders. Parents come to MNC with the assurance that their child will be admitted to the Centre and benefit from it. The very fact that they repose so much confidence in the Centre makes it evident that the values are inherent at MNC.

- **Zero Rejection of any child with mental disability**

This value forms the core of existence for MNC. No child is rejected admission on the basis of their caste, color, creed or economic status. Any child in the age group birth to six years with developmental delay or Intellectual disability, who enters the portals of MNC is offered early intervention training and there is no discrimination practiced at MNC.

- **Openness to Developments**

Learning is an on-going process in MNC, and every effort is made to keep abreast with latest developments in the field. Special educators in MNC are very enthusiastic and happy to be in this program as they are exposed to academic, medical as well as technological advancements in the field of special education. The learning process takes place through workshops, conferences, in-house training programs and talks by experts in the field of medicine, research and special education. While introducing other forms of therapy like music, movement and art the learning process continues, and with the Upgrading of Upaneeta to include the current needs in the documentation process, the learning curve becomes more defined.

- **Adaptability to the growing needs of inclusion in the community**

Children are integrated into the larger community, and are accepted by family, peers and teachers in mainstream schools. They also learn to use public transport, public spaces like malls and parks and to follow set routines and discipline. Innovative programs are added each year to enable the process of effective inclusion in the community.

**Objectives and Activities:**

**Objective 1**

**Providing Early Intervention Services for the Habilitation of the Child with Mental Retardation**

### Activity 1 - Early detection through direct communication and referrals

MNC registered its first student in Feb 7, 1990 and by the end of the year there were 77 children enrolled. The next year it rose to 150 and the numbers kept increasing. MNC did not advertise but word spread through the parents and doctors enabling a growing familiarization with the concept of Early Intervention, which served as a message of hope for children with mental retardation.

During the current Social Accounting year **2015–2016, 2016-2017** a total of **214** and **212** children respectively were referred to the centre through various sources. The referral to the centre is through two methods of communication:

#### 1. Direct communication :

Referrals received from parents, well wishers, the medical fraternity like physicians, pediatricians, neurologists, pediatric psychiatrists and other professionals like psychologist, physiotherapist, occupational therapist, special educators and other institutions.

#### 2. Indirect Communication:

Referrals from Setting up Exhibition stalls, public awareness through newspapers, magazines, press and television, brochures/pamphlet/audio-visuals, in-house newsletter, International and National conferences organized by MNC and MNC website ([www.mncindia.org](http://www.mncindia.org))

#### Children referred to the centre in 2015 – 2016 and 2016-2017

Sources	No. of Children Registered	
	2015-2016	2016-2017
Doctors	108	104
Patients	22	26
Well Wishers	14	19
Media	4	4
Website	6	6
Self-Introduction	10	5
Professionals	25	24
Others not included above	25	24
<b>Total</b>	<b>214</b>	<b>212</b>

*(\*\* Note: Preregistration denotes every child irrespective of age who seeks guidance, counseling, and intervention. Out of this children who are age appropriate, and who decide to join the center are screened for assessment and enrolled. This is in line with our value of zero rejection policy)*

### ***Parent speak***

*My son Ashwath Krishna was an embarrassment to me. I would be scared to take him to family functions. We came from Nagpur to Chennai so that my son could attend MNC. New to ADHD and to Chennai, MNC welcomed me with both hands and took me to their bosom. My son now has eye contact, improved speech, sitting tolerance, independent observation, and now asks me if he can travel in a plane. If I instruct him at home about the event we are going to attend, he is manageable outdoors and in functions.*

*Jaya Madam encouraged me to complete my higher secondary exam, in NIOS and after that I have joined the Diploma course at the AVMVK Academy. Thanks to MNC, I have found direction in my life and want to help other children like my son Ashwath.*

*Seetha Gopalakrishnan  
Parent*

### **Activity 2: Early identification using UPANAYAN assessment tool**

Upanayan means '**to lead along**'. This interpretation symbolizes the essential philosophy and ultimate goal of MNC – to help transform parents into leading lights for their children and in the process, grow confident as emotional healing increases day by day. On registration at MNC, the child is **assessed** in the areas of development in the 5 domains using the **Upanayan Early Intervention Program Package**.

The Upanayan Early Intervention Program Package consists of the following:

- Child registration form
- Child information form (both the forms have been updated to suit the current relevance)
- Upanayan Assessment tool – consisting of check lists for : Birth to two years and 2+ to 6 years

#### **Check list of items**

- For children **Birth to Two years**, 50 discrete skills in each of the 5 Domains of Developmental Areas namely: **Motor, Language, Self Help, Cognition and Socialization**.
- For children **Two plus to Six years**: 50 discrete behavioral skills in each of the 12 Domains, namely: **Communication, Self Care, Meal time activities, Personal Daily Activities, Home Living, Social Interaction, Community Use, Self Direction, Health and Safety, Functional Academics (Reading, Writing and Number) Leisure and Work**.

- A set of **illustrated activity cards** with lesson plans relevant to each item in the check list.
- **Recording forms** – Child Information form, Assessment Profile for both graphic and numeric recording, therapy Information Formats (Speech, Physiotherapy, Occupation, Health and Nutrition and Yoga) and weekly Program format. (forms have been updated to suit the current relevance)
- A **set of assessment cum training materials**.

During the two year Social Accounting period, **426** children were assessed at MNC using the Upanayan package. Out of these the number of children taking the program regularly was **242 (128+114)**. The rest of the children were absent either due to difficulties in commuting, sickness or other domestic issues.

**Number of children enrolled under Upanayan Early Intervention Programme**

Enrolled at MNC	No. of Children Enrolled					
	2015-2016			2016-2017		
	Existing	New	Total	Existing	New	Total
Birth to 2 years	18	25	43	11	28	39
Two to Four years	12	13	25	9	9	18
Four to Six years	33	20	53	35	17	52
Montessori	5	2	7	8	--	5
<b>Total</b>	<b>68</b>	<b>60</b>	<b>128</b>	<b>63</b>	<b>54</b>	<b>114</b>

**Teacher Speak**

*The word Upanayan is so precious to me. The moment I see a child at the center, my mind works like a calculator, relating its achieved milestones to its developmental age and rushing away to the skills that I have to give to him/her to bridge the developmental delay.*

**Mrs. A Sumathi – Group Head**

**Identifying** the type, degree and level of the disability the **Individualized Education Plan (IEP) is evolved for each child**. The types of disabilities seen largely in MNC are as follows:

- **Intellectual Disability with associated conditions including**
  - ✓ Hydrocephaly, Microcephaly, Metabolic disorders
  - ✓ Cerebral Palsy

- ✓ Down's Syndrome
- ✓ Autism Spectrum disorder
- ✓ Attention Deficit Hyperactivity Disorder/Attention Deficit Disorder
- ✓ Vision impairment with developmental delay
- ✓ Neonatal seizures with mental retardation
- ✓ Chromosomal and metabolic disorders

Disability Type	No. of Children 2015-2016	No. of Children in 2016-2017
Cerebral Palsy	24	22
Down Syndrome	20	26
Seizure disorder	7	17
Vision Impairment	2	8
Hearing Impairment	0	1
Autism Spectrum Disorder	21	21
Microcephaly	6	6
Hydrocephaly	2	1
Macrocephaly	0	1
Attention Deficit Hyperactive Disorder	19	10
Others	27	0
Metabolic Disorder	0	1
<b>Total</b>	<b>128</b>	<b>114</b>

*Upanayan can be described as the star of MNC's endeavor. The fulcrum of this flagship program is the parent. Parents are the main educators. It is parents who "hear, see and learn" the Upanayan so that they carry it over to their children at home. The strength and the enthusiasm of the mother to learn the skills their children are taught never fail to impress me as I visit the classrooms.*

*S Krishnan  
Advisor - MNC*

### **Activity 3: Implementation of the Early Intervention Program UPANAYAN**

The Upanayan Early Intervention Training program is **an expert system** with resources drawn from an Interdisciplinary team of experts for working out an **Individualized Education Plan (IEP) and Individualized**

**Family Services Plan (IFSP)** for early intervention.

- **The Holistic Intervention Program, birth to two year maximizes the child's potential, in this age group**, in the five developmental areas: **Motor, Cognitive, Self-help, Socialization and Communication.**
- In the age group, **2 plus to six years**, the intervention program aims to: Make the child as self dependent as possible in the activities of daily living and focuses on the adaptive behaviors in the following domains of development - **Communication, Self Care, Meal Time Activities, Personal Daily Activities, Home Living, Social Interaction, Community Use, Self Direction, Health and Safety, Functional Academics (Reading, Writing and Numbers) Leisure and Work.**

#### **The Individualized Education Plan (IEP):**

##### **Need for IEP**

Children with disabilities do not all perform uniformly for the following reasons:

- In addition to Intellectual disability (MR) they have additional difficulties
- They also perform in their own pace according to their abilities; the pace may not be uniform in all the areas
- Leading the child along the assigned path of developmental or educational programme plan is simple in practice with IEP, as the tasks are analysed and the performance of the child in every activity is observable and measurable for assessment
- There is therefore the need to evolve individualised education plans, according to each one's level of functioning

##### **What is an IEP**

- Each child is unique: has his/her own strengths and weakness
- In addition to the disability the child may have other associated conditions
- The level of performance, in the learning process, also differs from child to child
- Therefore an Individualized Education Plan (IEP) is set for each child - the lesson plan is followed using appropriate strategies

### **Planning an IEP**

- Taking into consideration: The child's age, associated conditions and the child's current level of performance
- Prioritising the needs of the child
- Evolving a lesson plan in observable and measurable terms

### **The Team**

- The IEP is developed by a team of professionals from various disciplines
- The child's parents and the child's teacher are always included in the IEP deliberations
- Special Educators direct the IEP process; in the assessment of children; in the adaptation and modification of classroom activities to implement the individualized program; and in the evaluation process

### **Process**

- Assessment to identify the functional level of the child and accordingly formulate the baseline for programming
- Based on the goals and objectives selected, the lesson plan is evolved to help child to perform activities age appropriately
- Each activity is task analysed
- Every activity is selected for its performance on observable and measurable terms

### **Steps**

- **Assessment** by the Special Educators in **Coordination** with the Interdisciplinary Team of Experts and using the checklists of skills from the Upanayan Early Intervention Programme
- **Setting** up long term and short term goals based on the assessment
- **Integrating** therapy into the programme.
- **Evolving** an Individualised Lesson Plan
- **Planning** a structured time table for the implementation of the IEP
- **Evaluating** periodically the progress of the child

**The third recommendation of the previous Social Accounts was:**

**Review the activities of the center:**

**One of the activities which was reviewed was the IEP**

**Action taken:**

*The Management Committee on a review of the Center took the implementation process of **Individualized Education Programme Plan (IEP)** for a greater focus on its importance in the training of the child with disability. The experienced senior teachers are assigned the responsibility of the satisfactory implementation of the early intervention programme at their respective groups, birth to 2 years, 2 to 4 years and 4 to 6 years.*

**The process of implementation is as follows:**

*The Special Educators train the children through the Individualized Education Programme Plan where the child after assessment is trained on the assigned objectives for the quarter. The parent observes, learns, clears himself/herself of any doubt and takes on the training supervised by the special educator. On getting confidence through practice and guidance the parent is on her/his own. The parent evolves as an effective special education helper and a carryover agent at home in activities of daily living. The special educators receive training too. The lesson plan is checked by the management staff and the method is discussed with the special educators. A video recording of the IEP is taken and both the teacher and the Principal along with the Coordinator Programme Implementation go through the recording to learn the shortcomings and change strategy/methods to enhance the benefit from IEP. The teachers who take IEP have been provided with a form where the performance of the child is recorded, and submitted to the class teacher, for further discussion of the outcomes with the parent every Monday in the presence of the Group Head. This provides an opportunity for the Group Head, the class teacher and the parent to get together and review the progress of the child both at home and in the center for further training.*

### **IEP in Group Teaching**

- IEP: **In the case of IEP one to one**, skills are taught to each child using **appropriate strategies**. In the **IEP in group teaching** it is implemented to a group of children where in addition to the Special Educator there is also a teacher helper. It is heterogeneous group, each child with his/her own level, degree and status of disability. It is also a homogenous group because they are children with disabilities
- The teacher introduces the **concept** in the skill (to which the children have each undergone training) at the IEP at the varying levels of performance of the children.
- The training will range from just introduction of the skill at the primary level to the actualization (generalization) by the children in all circumstances.

- **Positioning** each child and providing the correct posture in the class room for effective teaching, brings out the ingenuity of the teacher **for developing adaptive behaviors of daily living**, age appropriately
- **Skills not taught directly in the class but exhibited in the group by any child, or by children is absorbed** by the children by observation and repetition. This leads to the blossoming of latent skills.
- Group Activities are planned daily to help the child in **reinforcing the skills learnt** in the classroom through, music, dance, action - songs, art, craft and storytelling and other activities
- Once in three months a **real life theme** is planned for children in the four to six age group as an activity where the children learn experientially in an environment different from the Center or Home. The event is planned meticulously with the involvement of the parents, teachers and children, and the learning by the children is demonstrated to the parents.

**IEP in a group setting** helps child develop skills in Social Interaction, adaptive behaviors and experience the class room structured environment with peer learning, role modeling and reinforcement strategies. This experience helps them in later years to adapt to the work areas, with completion of assigned tasks, reaching the expected standards of performance and in co-operating with fellow workers.



IEP one to one



IEP in Group teaching in progress

## **Individualized Family Services Plan (IFSP)**

### **Family means:**

- The child, parents, siblings, elders and other close family members, immediate neighbors and the community at large

### **Facilitates:**

- Coordination between the family members of child and the members of the intervention team
- Identification of existing resources and
- evolving methods for reaching out to the family

### **IFSP consists of information**

- on the child's current level of functioning
- the strengths and needs of the family for the child
- the expected major outcomes for the child and family,
- specific early intervention services required
- The intervention plan supporting the child's transition to preschool services in inclusive settings

### **Process**

- Collecting Background Information
- Carrying Out A Functional Assessment
- Setting Goals & Objectives
- Formulating Lesson Plans
- Teaching and Learning In Appropriate Context
- Evaluation
- Maintaining Records

### **Step 1 in Programming**

**Prior to drawing up the intervention programme, the following information is essential.**

- Prerequisite skills, set earlier in intervention programmes – a refresher
- Strengths in a particular area of development based on which specific achievements in other areas can be exploited.
- Identification of aids and adaptations needed to facilitate learning

**The completed programme includes :**

- A developmental profile-of the child drawn and updated periodical evaluations on the basis of observations made by special educators who work with the children
- The child's current level of performance
- Long-term (annual) goals for the child and short term objectives that need to be prioritized for training

**Include answers to the following questions Who? What? When and Where? How ?**

- WHO is the person being programmed for intervention
- WHAT is the challenging behaviour that needs to be addressed
- WHEN and WHERE will the person exhibit the learning.
- HOW should the level of performance be evaluated.

**Management**

- Specific services to be provided and the period dates for the duration of the programme
- Activity Based Interventions for enabling the child use adaptive behaviours and perform the needed activities of daily living

**Special educational support services to enrich the Intervention Programme**

- Sessions with Physio, Occupational, Speech Therapists, Yoga, Brain Gym, Art, Craft, Indoor games, Group Songs, Play Therapy, Physical Educationists and any other as needed
- Celebration of different National festivals and Birthdays for Community awareness participation
- Nutritional Intervention, Medical Check up, Dental check up for the maintenance of general health and for detecting any early medical need for the child

**Quarterly evaluations**

- Determine whether objectives have been met according to the laid down conditions
- Gives direction to the Special educator for planning the next course of intervention understanding the progress made by the child and recognizing the manifestation of any special talent in the child
- Review the performance of the child in the given period of 3 months and the efficiency of the strategies used
- Identifies the new set of goals for the child

### Ultimate Outcomes

- Developing Adaptive Behaviours and using them, age appropriately, with the parents in their role as carry over agents of their child in the home environment in Activities of Daily Living
- Assisting parents and family members , siblings in the care and management of the child
- Empowering the child to be included in the mainstream as a matter of right

*(The Organization and Staff details are given in Annexure 3 )*

#### Parent Speak.....



*A mother, care taker, teacher assistant and now a Special Educator Mrs. Uma Mageshwari has done it all. Mother of Deva a child with seizure disorders and developmental delay, Uma brought him on the suggestion of her uncle to MNC in 2010. Scared and timid she just hoped that her son would improve so that she may enroll him in a normal school. But the seizures were too many and too often and Deva needed to be watched very closely. From then on there was no turning back for Uma. Slowly she realized how the intervention was helping her son, and she started working as a caretaker helping the other children with their personal needs at the intervention session. Her confidence level improved. Blessed with a special talent for writing Tamil poems and also dancing to popular Tamil numbers, she slowly started taking part in all the celebrations at the Center and also contributed to the in-house magazine Kalpatharu. She gradually started to realize the challenge in bringing up her son and became equipped to face the situation with courage. Deva is now on a special group where he will be trained on pre vocational skills and thereafter be equipped for training in vocational pursuits.*

*Uma joined the Diploma in Early Childhood Special Education course of the Rehabilitation Council of India, conducted by the AVMVK Academy, a unit of the center, and qualified herself as a Special Educator. She is a teacher now, has a class of her own and yes, not a minute to spare.*

*As I see her walk the corridors, dancing at the functions, reading her poems aloud at MNC, I feel very happy for her. Truly MNC has empowered her.*

*Vaijyanthi Desikan  
Admin*

## **Therapy Programs in Early Intervention Program**

### **Physiotherapy**

When Intellectual disability (MR) is associated with other difficulties like neuro muscular, orthopedic or cardio-vascular disorders, the child may show delay in motor development. In order to overcome the difficulties in movement and prevent ineffective or less effective movements, physiotherapy for such children becomes very important as part of the Early Intervention Programme. If left unattended the child may develop secondary disabilities such as deformities, contractures or even wounds thereby creating additionally severe emotional and behavioral problems in the child. The aim of physiotherapy is to help the child to overcome the movement difficulties and learn to move limbs as effectively as possible. The physiotherapist aims at the twin objectives of facilitating motor functions and also on maintaining the general health of the child. The child is given experiences in action of muscle which brings about the desired movement for the child.

When the child presents itself at the physiotherapy class an assessment is done and a base line is obtained. The goal fixed by the special educator in the priority goal statement is taken up by the therapist and physiotherapy is given to aid proper muscle functioning towards achieving that goal. For example if the goal is 'Reaches for preferred objects', physiotherapy is given to strengthen the shoulder and upper arm.

As detailed earlier the implementation of the Early Intervention training program is through the Individualized Education Program and is coordinated with inputs for intervention from the different therapies, which the child may need in the course of training.

### **Therapy Programs have the following components:**

- Individual needs of the child are synchronized with the special education program in the IEP
- Assessment by the respective therapists, coordinated with the Goal set by the special educator
- IEP drawn to complement the goal selected in addition to his/her individual needs
- Quarterly evaluation to see if the desired results have been achieved
- Move to the next goal or change strategy to achieve the set goal

### **Occupational therapy**

Occupational Therapy primarily concerns the child's ability to perform functions required in day to day activities. Secondly it also concerns the social, psychological and cognitive development of the child. Its contribution is towards the functional and vocational rehabilitation of the child. The occupational therapist at the Center does the assessment of the child initially, studies the strength and weakness of the child, takes note of the priority goal set for the child by the special educator and integrates

occupational therapy to aid the goal selected. **A sensory integration room at the center provides the needed inputs for sensory integration.**



Physiotherapy in progress

### Speech Therapy

Children with special needs have problems in language processing and in expressive communication. Assessment is carried out by an expert in the field who helps identify the child's current level in the area of communication, and an individualized program plan is drawn accordingly along with the special educators of the center using the Upanayan Check list. The Communication programme is also synchronized with the IEP set by the Special Educator.



SRM Staff teaching oro motor stimulation techniques to the mothers

Speech and Communication assessments and Evaluations are conducted annually by the Department of Audiology and Speech Pathology, **SRM University, SRM Nagar, Kattankulathur – 603203**. The team led by Ms. Usha Dalvi, Associate Professor of the Department of Audiology and Speech Pathology does both audiology screening and speech and language assessment for our children and give us their recommendations. They use qualitative and quantitative assessment methods, including standardized tests, as well as special instruments to analyze and diagnose the nature and extent of speech, language and swallowing impairments. They develop an individualized plan of action tailored to each child's needs. For children with little or no speech capability, they

may suggest augmentative or alternative communication methods, including automated devices, flash cards, and picture books and teach their use. They counsel parents/families concerning communication disorders and how to cope with the stress and misunderstanding that often accompany them. They also work with family members to recognize and change behavior patterns that impede communication and show them communication-enhancing techniques to use at home. These recommendations are followed and integrated in the IEPs for the child. Apart from this, children who have auditory problems are referred to the Speech Pathologist and Audiologist, at Madras Hearing Research Center, 141-143 Kutchery road, Mylapore, Chennai 600004 for hearing evaluation and their findings and recommendations are incorporated in to the child's IEP.

**Given below is a sample Speech and Language assessment done during the year 2016-2017 for all age group by the Speech and Language Pathologists of SRM University.**

Sl. No.	Name of Child	Assessment details - Skills selected for the child	Recommendations
1	Mohammed Musatafa	L 16 - Places tongue against roof of mouth to produce sound	<ul style="list-style-type: none"> <li>• Speech sound production using mirror and imitation</li> </ul>
2	Sai Krithvik	L 14 – Presses, purses or rounds lips in imitation or on request to produce sounds L 17 – Imitates speech sounds	<ul style="list-style-type: none"> <li>• Speech sound production using mirror and imitation</li> <li>• Child should be asked simple questions using picture cards</li> </ul>
3	Dchitranayagi	L 11 – Repeats sounds, vocalizes L 22 – Responds to gesture with gesture L 17 – Imitates speech sounds	<ul style="list-style-type: none"> <li>• Environmental sounds to vocalize and repeat sounds</li> <li>• Encourage hand movement to say good morning</li> <li>• Oro motor exercises to decrease drooling</li> </ul>
4	Dhanushree	L9 – Babbles L 10 – Responds to name by looking up or by stopping activity	<ul style="list-style-type: none"> <li>• Present toys with sounds</li> <li>• Give environmental sounds</li> <li>• Give repeated utterance of child's name either in an activity or by keeping child in a lap</li> </ul>

Sl. No.	Name of Child	Assessment details - Skills selected for the child	Recommendations
5	P Santhosh	Provisional diagnosis – Delayed speech and language. Previous goals not achieved consistently	<ul style="list-style-type: none"> <li>• To start with function words like <b>tha, po</b></li> <li>• Combine noun+functional word eg. <b>Amma tha</b></li> <li>• Communication board noun + lexical word</li> </ul>
6	Lasith Kumar	L 7 – Initiates vocal play with toy	<ul style="list-style-type: none"> <li>• Play activity with colorful toys</li> <li>• Produce speech sounds and environmental sounds</li> </ul>
7	Pranavi G	L 13– Vocalizes to music L 15 – Looks at person named	<ul style="list-style-type: none"> <li>• Singing songs and rhymes</li> <li>• Peek a boo activity</li> </ul>
8	Gopen Sabareesh	L15 – Looks at person named	<ul style="list-style-type: none"> <li>• Photos of parents can be used</li> <li>• Encourage child to eye pointing followed by hand/finger pointing</li> </ul>
9	Jai Vishnu	L 19 - Imitates sounds and syllables in songs and rhymes L 25 – Stops activity when said No	<ul style="list-style-type: none"> <li>• To stop activity – give punishment or any toy that the child is afraid of or dislikes</li> <li>• Songs and rhymes with action can be given</li> </ul>
10	Oviya K	L 3 – Follows sound, moving head L 8 – Initiates vocal play with people	<ul style="list-style-type: none"> <li>• Oro motor exercise (Lip closure)</li> <li>• Tongue elicit</li> <li>• Vocalize sounds a, e, u</li> <li>• To use '<b>amma</b>' in meaning full sentences</li> </ul>

(Where L denotes the Domain 'Language', and the number denotes the skill)

**Seventy children underwent audiology screening** for the year 2015-2016 by the staff of the Audiology Department of SRM Medical College and Hospital and medical interventions were suggested. The staff of SRM also discussed therapy needs with the class teachers and helped in evolving IEP for the children based on their assessments. Hearing aids were obtained for a couple of them from the SRTC free of charge.

**One hundred and forty one Children were assessed for the years 2016 and 2017** for Speech and Language by the Speech and Language pathologists of SRM Medical College and Hospital, at the center. Those with problem were referred to the SRM Medical College and Hospital for a more detailed examination. Intervention techniques were discussed with the class teachers and the staff helped the teachers to plan effective IEPs.

#### **Voice and Vision:**

The center has identified one of its special educators Mrs. V R Jeyashree who has been trained at Perkins Voice and vision and is implementing the recommendations of experts in the field by lesson plans for the children through suitable IEPs. A memorandum of understanding is being signed with Perkins Voice and Vision India, Mumbai for a year which is renewed every year. According to the MOU, Ms. Dipti Karnad from Clarke School for the Deaf and Mentally Retarded, Chennai is assigned as the mentor for MNC.

#### **Her role is in:**

- Supporting the team members to organize the space available into work areas for the students with visual impairments and multiple disabilities (VIMD)
- Supporting them to decide on a list of material or equipment as per the needs of the students in the center
- Support the organization in terms of planning for furniture and accessories as per need
- Enabling them to develop basic educational materials and some low cost toys such as sound makers and other materials using objects that are easily available
- Acquaint them, with the documents they need to maintain in the center such as the assessment records and IEP
- Interacting with team members as a peer – someone who has gone through the same experience and knows what it means
- Understanding the needs of organization and supporting the team members to identify and assess their own areas of development
- Appreciating the individual identity of each member and philosophy of each organization

- Maintaining the confidentiality of the mentee organization
- Any other role mutually agreed with Perkins Voice and Vision India



Lakshai being taught to walk with a white cane

**In order to fulfill the above roles it will become essential for the Mentor to:**

- Spare time for at least 10 days a year for the mentee organization
- Travel to the organization at least two times a year
- Spend 2-3 days as per the need in each visit to the mentee organization
- Support their needs through direct demonstrations, designing strategies, conducting small training and providing appropriate materials
- Following up through the programme for good practices
- Preparing a short report on the mentoring visit and its outcomes
- Be impartial and non discriminative of case, color, religion, ethnicity etc

Given below is a sample report of the mentor **Ms. Dipti Karnad** of the Clarke School for the Deaf and MR, Chennai : (2015-2016 report is dated 29.9.2015)

Sl. No.	Name of Child	Observation and assessment by Ms. Dipti Karnad	Suggestions
1	Yuvraj Male / 2.5 years	<ul style="list-style-type: none"> <li>• Cataract removed at 5 months age, lens fixed</li> <li>• B.T. Shunt fixed.</li> <li>• Does not walk but shuffled on his buttocks.</li> <li>• He tries to reach and grasp objects and colorful toys.</li> </ul>	<p>To develop an appropriate communication system especially to indicate “want” ‘don’t want” “toilet” “pain” and “hunger”</p> <p>Develop a highly predictable routine for the day.</p>

2	Ashwin Kumaran J Male /8 months	<ul style="list-style-type: none"> <li>• Child has CP, Vision problems and seizure disorder</li> <li>• Seems to have normal hearing but medical diagnosis is needed</li> <li>• Tries to grasp things but since neck control not achieved, response is inconsistent</li> <li>• Efforts of teacher and mother are really appreciable</li> </ul>	<ol style="list-style-type: none"> <li>1. To have inputs in language and communication as is being done now.</li> <li>2. To continue therapy and vision activities.</li> <li>3. To have a crib or a cradle from which brightly colored objects could be suspended to encourage reach, grasp and release.</li> <li>4. To develop body awareness through massage</li> <li>5. To encourage body games like rocking while on the mother's lap, finger and hand games like clapping</li> </ol>
3	Mukundan Male/ 5 years	<ul style="list-style-type: none"> <li>• CP with hearing impairment but has a Cochlear Implant</li> <li>• Has good cognitive skills and uses gestures for communication.</li> <li>• He uses the cochlear implant well</li> </ul>	<ol style="list-style-type: none"> <li>1. To continue auditory training and do auditory verbal therapy</li> <li>2. To do conditioning by giving visual and auditory clues then fade visual clues and allow him to depend on auditory clues in every session</li> <li>3. To use an embroidery frame with thin but dark cloth when hiding mouth during auditory training</li> <li>4. To have age appropriate academic inputs as he could be considered for integration into regular school.</li> </ol>
4	Lakshai Male/8 years 4 months	<ul style="list-style-type: none"> <li>• Retinopathy or prematurity, totally visually impaired</li> <li>• Good hearing</li> <li>• Able to understand all said to him</li> </ul>	<ol style="list-style-type: none"> <li>1. Create need for expressive communication</li> <li>2. To be exposed to pre Braille</li> <li>3. To have an experience and then a small story made</li> </ol>

		<ul style="list-style-type: none"> <li>• Uses touch well</li> <li>• Interested in swimming</li> <li>• Independent in school campus</li> </ul>	<p>out of that experience in the form of tactile representations to make him remember the activity</p> <p>4. To have tactile markers in the places where he goes for yoga, play</p> <p>5. To continue all other activities as planned</p>
5	Lakshanya Female / 4 years	<ul style="list-style-type: none"> <li>• Vision problem, squint, microphthalmia</li> <li>• Congenital rubella syndrome</li> </ul>	<p>1. To encourage independent movement in the school from class room to where she keeps her lunch bag, to the toilet or to any other place that she needs to go by using tactile markers and tactile clues</p> <p>2. To do a lot of functional vision activities to improve the usage of her residual vision</p> <p>3. To mark her belongings with a personal identifier for easy identification</p> <p>4. To label objects in the class in large print to encourage reading</p>

Vision assessment is done and if found that more diagnostic inputs are necessary the child is sent to **Sankar Netralaya** for further diagnosis. The inputs are analyzed and discussed with the parents and special educators for evolving IEPs suitable to them. Further Ms. Deiva a consultant in Vision Rehabilitation at the Frontline Eye Hospital, screens the children of the center for visual functions. Perception of light, Oculo motor skills (fixation, pursuit patterns and scanning), Grating acuity, Detection acuity and Visual acuity for distance and near are all tested and her recommendations are followed. The children who have very limited vision and do not have good oculomotor skills were advised vision stimulation activities. Children who partially gained these with better vision and intelligence were advised stimulation and visual perceptual skills. Children who have vision, perception and motor skills were advised visual training through activity work sheets.

**Eighty eight children in the period 2015-2016 and 68 children in 2016-2017 were assessed for any possible difficulties in the area of vision by the Special Educators at MNC. Children identified with vision problems were referred to Sankar Netralaya for further assessment and suggestions for medical interventions were followed. The children were also assessed by Ms. Deiva of Perkins Voice and Vision and her technical inputs helped the special educators to plan Individualized Education Programs for the children, according to their needs in vision.**



Materials used for vision stimulation and vision therapy



Vision therapy classes in session

**Story of change - Pranavi**



Little Pranavi joined MNC with Developmental Delay / Down Syndrome when she was just 6 months old in July 2015. Children with Down Syndrome have reduced muscle tone which can delay development of other motor skills. **They may roll over, sit up pull up, stand and walk later than other children their age.** Encouraging motor skills development through active play is recommended. That is what we did to Pranavi. So when Pranavi took her first step at age a year and half in January 2017, both her mother Mrs. Lakshmi and I were overjoyed. She now walks independently.

*Mrs. Thayammal  
Special Educator*

**Group Activities:**

Play Therapy, Brain Gym, Storytelling, Action Song, Art, Craft, Music and Bhajan, Fine Motor Activities, Outdoor Activities, School Outing, (Monitored) TV LCD Viewing, Balance and Coordination Activities. All of these activities are performed in groups. The children are observed for their performance in the group, in displaying their individualized skills.

The table below gives an overview of the schedule of group activities

Therapy	Activities	Skill Development	No. of Children Attending				
			Monday	Tuesday	Wednesday	Thursday	Friday
Play Therapy	Ball rolling	Listening skills					
	Rope	Coordination					
	Bench	Social interaction	30	40	--	40	--
	Hoop	Waiting interaction					

<b>Brain Gym</b>	Brain button Cross crawl Positive point Lazy Eight Thinking cap	Coordination of the left and right side of the brain	40	25	50	25	65
<b>Story Telling</b>	Fox and the Grapes Thirsty Crow	Listening skills Comprehension skills Answering simple questions	--	45	40	--	--
<b>Action Song/ Music</b>	Vegetables fruits Vehicles	Imitations Repetition of gestures Language	60	--	50	--	60
<b>Art</b>	Finger printing Sponge printing Hand printing	Fine motor skills	40	--	45	--	--
<b>Craft</b>	Paper crushing Seed pasting Dhal pasting	Eye hand coordination	20	40	20	--	--
<b>Bhajan</b>	Sa Re Ga Ma Small songs	Repetition of sounds Listening skills	--	--	--	--	65



Dipping greeting card in oil paint



Mothers and children painting earthen lamps



Activity based learning



Finger Painting - Craft class in progress

The child is assessed using the **Upanayan Assessment Tool**. Evaluation is carried out every quarter and assessed annually. On the basis of the progress made through the intervention program, a fresh set of goals and objectives are planned and followed in the next phase of training. The progress is recorded systematically, manually as well as graphically in the given formats. It is also recorded into a software program, "**UPANEETA**" created indigenously for the purpose. The data are fed into the software program by the special educators and therapists. The children's progress report is made into graphical representation for easy understanding and reference. The data are recorded according to the age group Birth to 2 years, 2 plus to 4 years and 4 plus to 6 years.

***The Fourth recommendation of the previous Social Accounts was:***

***Review the activities of the center:***

***The sactivity which was reviewed was the supporting Software Upaneeta.***

***Action taken:***

***Upaneeta*** – The supporting software, which deals with the **systematic collection and recording** of data that is required to **assess and evaluate** a child with Intellectual Disability(MR) and the necessary intervention that should be given for the **care and management** of special children, **has been upgraded**. It is now a comprehensive programme that records holistically the history of the child from the time the child steps into MNC till he/she leaves the Center. Assessments, Intervention and Evaluations are recorded and validated online, thereby saving hours of manual work, providing accurate information on the outcomes with appropriate data validation. It is planned that the information analyzed will be put to use for research purposes in future. The drudgery of maintaining manual records by the special educators/therapists and consultants have been eliminated to a great

extent. **Upaneeta** has been deployed on a **Local Area Network** (LAN) in MNC premises and has been deployed on **Cloud Server** (Commercial Server that stores large amount of data and helps in data recovery management in case of unforeseen natural disasters) and accessed through internet, for use by partners ( who need the Upanayan program and also for other institutions with similar activity).

### Evaluation

The system of external evaluation has been practiced in order to get an unbiased performance picture of the child in totality. Ms. Kalusha , Principal, Vijay Human Services, is the External Evaluator.



Mrs. Vimala Kannan at an Evaluation session

### Evaluation is done:

- After the teaching has been completed.
- Every quarter by the special educator and the interdisciplinary team of experts

### Evaluation seeks the answer to the question

“Did the student learn according to the plan?”

- If the answer is, “Yes” then new objectives have to be set and fresh training is begun,
- If the answer is, “ Not yet” then the team should sit together and find out why and then
- plan to set right the situation by introducing new teaching strategies to help the child make progress

### Evaluation helps in:

- Understanding the purpose of the intervention programme
- Choosing fresh strategies of training as and when needed

- Taking a decision on the priorities of each child according to individualized needs
- Improve the training programme with updates on the latest results and studies of research on Early Intervention from all over the world.

**Among the many suggestions that the external evaluator put forth a few are given below:**

- In the case of severe disability modify the materials used, for example using lighter objects for grasping than heavier ones
- To identify the reason for a selected skill having not been achieved in the quarter for any child, and also to recognize the skills, manifesting on their own, which the child performs without much effort.
- Judicious use of the right type of training materials instead of handling too many at one time

### **DISABILITY – WISE DATA FINDINGS AND CASE STUDIES**

#### **Disability – Wise Data Findings**

**Disability wise and age group wise data in a table form :**

(Based on the objectives taken for each child)

#### **Tables – Programme Group (Birth to 2 years)**

**Table 1**

Developmental delay + Down Syndrome - 5 Children	Number of Skills		% Achievement
	Number Selected	Number Achieved	
MSK	28	19	68
SHSK	50	26	52
LSK	28	6	21
CSK	17	11	65
SSK	18	8	44
<b>Total</b>	<b>141</b>	<b>70</b>	<b>50</b>

**Table 2**

Developmental delay + Down Cerebral Palsy - 5 Children	Number of Skills		% Achievement
	Number Selected	Number Achieved	
MSK	24	11	46
SHSK	45	8	18
LSK	23	7	30
CSK	12	4	33
SSK	11	6	55
<b>Total</b>	<b>115</b>	<b>26</b>	<b>23</b>

**Table 3**

Developmental + ASD 3 Children	Number of Skills		% Achievement
	Number Selected	Number Achieved	
MSK	9	6	67
SHSK	20	9	45
LSK	10	2	20
CSK	7	3	43
SSK	6	3	50
<b>Total</b>	<b>52</b>	<b>23</b>	<b>44</b>

**Notes explaining the above tables:**

1. The age group taken is Birth to 2 years
2. The initial and final data recorded for 13 children has been represented by:
  - Five areas of development namely Motor skills (MSK) Self Help (SHK) language and Communication (LSK) Cognition (CSK) and Socialization (SSK) are recorded for progress.

- Each area of development has 50 skills for training.
- The initial and final scores are based **only on the objectives taken in each developmental area** for all children.
- Language skills may show lesser achievement than other areas since this group includes children from birth to two years.

**Note:**

**This table displays the achievement made by the children in the skills set by the special educator, after the assessment made in consultation with the interdisciplinary Team of Experts.**

During the course of the intervention it is observed that the child displays a spurt in development as a natural development where there has been developmental delays; also that there is a manifestation of lateral skills springing alongside the progress on the skills for which training has been imparted.

It is the credit of the special educator and the parent that such observations are noticed and recorded as when they occur, importance given in sustaining and blending them into the different activities planned daily for the children.

This developmental pattern, an exclusive experience in early intervention programme is recorded for each child in their respective file.

**Tables – Programme Group (2 – 6 years )**

**Table 1**

Developmental Delay + Down Syndrome - 4 Children	Skills		% Achievement
	Selected	Achieved	
Communication	10	2	20
Meal Time Activities	11	5	45
Personal daily living	12	11	92
Home Living	8	7	88
Social interaction	8	5	63
Community use	8	5	63
Self Direction	8	5	63
Health and Safety	9	6	67
Reading & Writing	20	12	60
Number	8	6	75
Leisure	10	7	70
Wok	8	7	88
<b>Total</b>	<b>120</b>	<b>78</b>	<b>65</b>

**Table 2**

Developmental Delay + Autism Spectrum Disorder - 5 Children	Skills		% Achievement
	Selected	Achieved	
Communication	18	10	56
Meal Time Activities	22	14	64
Personal daily living	20	10	50
Home Living	28	20	71
Social interaction	28	18	64
Community use	21	11	52
Self Direction	29	21	72
Health and Safety	20	9	45
Reading & Writing	36	20	56
Number	23	16	70
Leisure	29	22	76
Wok	27	20	74
<b>Total</b>	<b>301</b>	<b>191</b>	<b>63</b>

**Table 3**

Developmental Delay + Cerebral Palsy - 5 Children	Skills		% Achievement
	Selected	Achieved	
Communication	11	0	0
Meal Time Activities	11	1	9
Personal daily living	18	2	11
Home Living	11	2	18
Social interaction	11	1	9
Community use	10	0	0
Self Direction	11	0	0
Health and Safety	11	0	0
Reading & Writing	28	4	14
Number	11	1	9
Leisure	11	0	0
Wok	15	6	40
<b>Total</b>	<b>159</b>	<b>17</b>	<b>11</b>

**Table 4**

Developmental Delay - 5 Children	Skills		% Achievement
	Selected	Achieved	
Communication	15	2	13
Meal Time Activities	17	9	53
Personal daily living	17	12	71
Home Living	12	5	42
Social interaction	12	6	50
Community use	11	4	36
Self Direction	19	13	58
Health and Safety	17	10	39
Reading & Writing	24	13	54
Number	11	6	54
Leisure	22	17	77
Wok	17	10	59
<b>Total</b>	<b>194</b>	<b>107</b>	<b>55</b>

**Notes explaining the above tables:**

1. The age group taken is 2 – 6 years
2. The initial and final data recorded for 19 children has been represented by :
  - Twelve areas of development namely Communication, Meal Time Activity, Personal Daily Living, Home Living, Social Interaction, Community Use, Self Direction, health and Safety, Reading and Writing, Arithmetic, Leisure and Work are recorded for progress.
3. Each area of development has 50 skills for training.
4. The initial and final scores are based **only on the objectives taken in each developmental area** for all children.

**Note:**

**This table displays the achievement made by the children in the skills set by the special educator, after the assessment made in consultation with the interdisciplinary Team of Experts.**

During the course of the intervention it is observed that the child displays a spurt in development as a natural development where there has been developmental delays; also that there is a manifestation of lateral skills springing alongside the progress on the sills for which training has been imparted.

It is the credit of the special educator and the parent that such observations are noticed and recorded as then they occur, importance given in sustaining and blending them into the different activities planned daily for the children.

This developmental pattern, an exclusive experience in early intervention programme is recorded for each child in their respective file.

**CASE STUDY**

**SNEHA. D**

Madhuram Narayanan Centre for Exceptional Children (MNC) provides Early Intervention Services for children (6years and below) with Developmental Delays, Mental Retardation and Associated Conditions. Services at the centre include Special Education and coordinated therapeutic intervention.



**CHILD DETAILS**

Name of the child	<b>SNEHA. D</b>
Date of Birth	25-Oct-2012
Date of Entry to the Upanayan Early Intervention Programme at MNC	08-09-2015
Age at Entry	2 years 11months
Present Age (as on report date)	4years 6 months
Condition Diagnosed (based medical repots submitted by parent)	Autism, CMV( infection)
Assessment Tool	<b>“UPANAYAN”</b> Checklist
Assessment Team	Special Educator in co-ordination with inter-disciplinary team members and the Parent

### **FAMILY DETAILS**

- Sneha is the second child living in a nuclear family setup. Her elder sister is studying in 4<sup>th</sup> std
- Her father is a Farmer and mother is a housewife
- There is no history of any family members with special needs

### **IMPLEMENTATION OF THE EARLY INTERVENTION PROGRAMME**

The Centre follows the “**Upanayan**” Early Intervention Program, which serves as an assessment and training tool.

**Birth – 2yrs** - Includes 5 domains (Motor, Self-help, Language, Cognition, Socialization), 50 **developmental skills** under each domain.

**2 - 6yrs** - Includes 12 domains (Communication, Mealtime activities, Personal daily living, Home Living, Social Relationships, Community use, Self Direction, Health & Safety, Functional Academics – Reading & Writing, Functional Academics - Number, Leisure, Work), 50 **adaptive behavioural skills** under each domain.

### **EVOLVING AN INDIVIDUALIZED PROGRAMME PLAN (IPP)**

- An initial assessment to ascertain Sneha's developmental age was performed
- The assessment showed that her developmental age was not age appropriate
- Priority Goals were selected accordingly, based her age, need and condition
- An activity based, structured and composite Individualized Programme Plan (IPP) incorporating, educational, and therapeutic inputs, was evolved for intervention.
- She was grouped in a classroom with children of age group 2- 4 yrs

### **ADDITIONAL PROGRAMME AT THE CENTRE**

- Developmental therapy
- Speech & Language
- Computer-Aided Learning
- Physical Education
- Yoga
- Music therapy
- Movement therapy
- Group Activities - Art, Craft, Storytelling, Picture conversation, Fine motor activities, Play therapy, Brain gym, Balance & Coordination, Games
- Sports

- Cultural events
- Outings
- Experiential learning at public places
- Inter-school events
- Nutrition Supplement

### **PARENT AS A CARRY OVER AGENT**

The parent was guided closely by the special educators, during the training period provided to the child at the Centre to perform as a carryover agent at home.

### **SNEHA LEVEL OF PERFORMANCE AS ON 21-MAR-2017**

#### **➤ COMMUNICATION**

- Responds to simple questions, commands and services
- Answer three simple questions about self
- Uses adjective (describe an objects in two word phrases)
- Describes a familiar picture/book being searched for
- Answers simple questions in complete sentence
- Answer “wh” question appropriately
- Requests for information

#### **➤ SELF-HELP**

- Follows daily routine at prescribed timings
- Performs her daily living activities such as brushing, bathing, dressing, grooming with minimal parental support
- Performs meal time activities independently
- Indicates toilet needs and performs toileting activities independently
- Identifies and uses appropriate locations in house/school related to appropriate activities

#### **➤ HOME LIVING**

- Assists parent by doing part of the chore in an assigned task – folds clothes, sorts vegetables/fruits, stacks items, rolls mats, picks washed clothes after drying, picks leaves from green leafy vegetables, peels cooked food items.

#### **➤ SOCIAL BEHAVIOUR**

- Plays consistently with her favorite friends
- Shares belongings/food with peer
- Defends own possessions

- Displays emotions, such as, anger, joy, sadness, pride, and happiness in achievement / completion of a task, each with suitable expressions
- Play adult roles
- Says/indicate please, thank you, sorry
- Follows rules and procedures in classroom
- Makes a choice

➤ **HEALTH & SAFETY**

- Seeks help from familiar adult when hurt/injured physically
- Recognizes a hot object and does not touch
- Avoids physical hazards while moving out doors
- Differentiates between strangers and known persons
- Expresses appropriately weather variation (hot day cold day, rainy day)
- Identifies common dangers in items of common use
- Indicates feeling of sickness

➤ **LEISURE**

- Ball activities involving roll, throw, catch and kick
- Plays in public/park, taking turns properly, participating in group games
- Plays a ring-a -ring of roses with a group of children
- Hits a rolling ball with bat
- Throws ball overhead (backward, forward) in instruct organized play
- Bounces and catches a large ball, repeats action more once

➤ **CLASSROOM BEHAVIOURS**

- Maintains silence during school prayer
- Answers to attendance
- Identifies her personal belongings, uses appropriately and replaces in the designated place
- Maintains place when moving in a queue/line with others

➤ **FUNCTIONAL ACADEMICS:**

**1) READING**

- Reads simple 2-3 letter words

**2) DRAWING & COLOURING**

- Connects dots to form different shapes
- Draws different shapes

### 3) NUMBER

- Identifies, picks up big/ small objects
- Identifies, picks up long/short-objects
- Arranges objects in order of size from the smallest to biggest and vice versa
- Differentiates, Indicates the group of objects having more or less number of items
- Indicates whether object is heavy or light
- Picks up specified number of objects up to three
- Matches numbers up to three
- Constructs sets of one/two/three objects
- Reads numbers up to three
- Reads numbers with objects to 5
- Matches numbers with objects up to 5
- Constructs set of 4 and 5 objects

### 4) E.V.S

- Names different familiar colors
- Names different familiar shapes
- Names pictures in each given category (Fruits, Vegetables, Animals, Birds, Vehicles, paring cards)
- Names different familiar action words
- Classifies pictures based on its function
- Recalls in sequence the objects shown
- Names 15 body parts.
- Tells own gender
- Identifies boy/ girl in person
- Names familiar community workers

### ➤ WORK (Pre-vocational skills)

- Matches identical objects/pictures
- Imitates action in rhymes/action songs
- Places blocks/boards one behind the other
- Takes apart / puts together objects with detachable parts
- Stacks 8-10 blocks, different sizes
- Sorts objects differing in one attribute only into 2 groups

- Matches 10 objects/pictures each with its pairs
- Peels sticker from sheet, pastes them at assigned plac.
- Identifies rough/ smooth surfaces
- Screws together objects with thread grooves
- Identifies hard/ soft material surfaces / objects each by its usage
- Tears sheets at its perforation
- Attends to teacher directed tasks for 10-15 minutes

➤ **OTHER SKILLS**

- Participates in Group
- Interacts with peers
- Repeats in chorus
- Gets required materials for a specific activity
- Does notebook exercises
- Copies from blackboard
- Comes and shows the finished activity

➤ **ACHIEVEMENTS**

- Consistent progress in academics during the 3 quarters
- Participated in school cultural programmes – performed her part of role independently
- Winner in sports day event which includes inter-school event as well
- Participated in Fancy dress competition

**Experts Recommendations:**

- **Activities given by OT Consultant –**
  1. Throws ball
  2. Bouncing on therapy ball for vestibular integration
  - 3.. Jumping graded from 2feet to 4feet
  4. Kneel waking
- **Speech and Language Pathologist –**
  1. Increase action words familiar & unfamiliar word
  2. Story narration (In expanded manner)
  3. Sequencing (Daily activity)

**Class Teacher's Remarks:**

- **Strengths & Interests:**
- Social skills

- Leadership skills.
- Arithmetic skills.
- Taking chance in a group.
- Listening to stories.
- Puzzles.
- Playing with peer.
- Playing in park.

She performs the following activities as a result of the Montessori Training.

#### **PRATICAL DAILY LIFE SKILLS**

- She sieves powder, sorts grains cereals, pulses, dried chick peas for cooking and making rotes
- uses spoon to transfer objects, food item
- uses a spoon to ladle out dhal, folds and
- unfolds napkins and oil cloths
- holds and lifts a mug places it on tray and carries tray to the dining table
- Uses duster to dust tables and other objects
- She makes small kolams using a mould
- She holds, lifts rolls and unrolls a mat
- Sits on a chair gets up
- She walks without stepping on the mat
- Greets people appropriately
- She sneezes and yawns appropriately
- She puts on clothes and buttons self
- Buckles her shoes appropriately
- She uses material for grooming self

#### **SENSORIAL MATERIALS**

Uses Cylinder block, Pink tower, Brown stairs, Long rods, Color tablets, Tactile material, Geometrical cabinet, Geometrical cards, Color cylinder and Steriognostic bags.

#### **LANGUAGE**

- Classifies picture into categories
- Tells stories
- Sings rhymes/songs
- Involves in conversation when shown scenic picture
- Recognizes different sounds (oral activities)

## ARITHMETIC

1. Uses Number Rods
2. Sand Paper Figure
3. Spindle Boxes
- 4.. Cards Counters

## REMARKS

Sneha joined the Montessori Programme on 08-06-2016. She is a very smart girl. Since coming to the Montessori Unit, she has learned to use a lot of the materials in the Montessori Environment. In the beginning, she did not speak. But now there is improvement in her speech and she speaks fluently both in Tamil, Telugu.

***The total number of children impacted by Upanayan Early Intervention Programme at MNC during this accounting year 2015-2016 is 128 and 2016-2017 is 114.***

***On completion of the Early Intervention program 23 children out of 242 enrolled between April 2015 and March 2017 that is 10%(2016 - 2017 – 2 accounting years) have moved ahead –13 have joined regular mainstream schools, 10 have joined other special schools.***

## Medical Intervention at MNC

The centre engages a Developmental Pediatrician Dr. Padmalochani who visits twice a week. A thorough medical checkup is done **selecting four or five children** on every visit and an assessment report is prepared. The parameters checked are Height, Weight, and Nutritional status, as also the medical history of the child. After the general medical examination is completed the pediatrician co-relates the development skill training being given to the child matching it with the medical status of the child to ensure that the training on the skill selected proceeds smoothly. Wherever needed she suggests further medical investigation and intervention. She also gives counseling to pregnant mothers on the precautions to be taken and the care required from conception period to the delivery of the child.



Dr. Padmalochani with parents and their child at the centre

### Dental Intervention at MNC

The Baskar Dental Foundation at T Nagar, has been regularly sending their doctors for dental checkups to the Center. During this social cycle dental checkups were conducted on 14.9.2015, 17.6.2016 and 27.9.2016. Each dental assessment included all the children at the Center. Parents whose children needed further treatment were advised and referred to either Baskar Dental or to other dentals centers in the city according to accessibility by the parents.



Dental intervention to the children

Intervention	Year	No. of Children**
Dental Intervention	2015-2016	156
	2016-2017	177
Medical Intervention	2015-2016	282
	2016-2017	258

(\*\* The same children have been examined in different quarters)

### Activity 4- Providing Support Systems through the projects – Annapoorna, Sanmargam, Sambhavam, Sankarshana, Samyam

#### Project ANNAPOORNA

#### Purpose of the project

- To identify the children attending the early intervention program at the centre having gross deficiencies in nutrition including those with apparent severe malnourishment

- Implement corrective measures to set right the imbalances
- Periodic Assessments for Improvements

### Criteria

Out of the **128** children in **2015-2016** and **114** in **2016-2017**, **30** children were chosen for **each academic year**, according to the following criteria:

- Indications of nutritional deprivations in physical appearance
- Height and weight lower than the age appropriate scale
- Clinical blood investigation (anemia-positive)

### The process

A team of experts who assess the children include: our in house pediatrician, Dr. Pamalochani and consultant nutritionist Mrs. Avanti Prabhakar, Assistant Professor, Dept.of Home Science J.B.A.S. College for Women, Chennai-18 and they selected the children according to the given criteria given above

- The assessed children's current diets are then modified and a balanced diet recommended fulfilling the child's specific needs
- Nutrition supplements are given regularly to the identified children (we are happy to record here that MNC extends this nutritional supplement to all children who attend the center) : 'Sathu Mavu kanji (porridge), – (**The nutritive value of Porridge for 100 gms:**Calories - 340.00 kcals, Protein-14.37 gms, Fat - 3.83 gms, Carbohydrate - 61.39 gms, Calcium-159.92 gms, & Iron -5.97 gms)
- **Kadalaipodi** (Roasted and powdered Bengal gram, groundnut and jaggery powder) A banana with the above powder everyday
- Vegetable soup made of green leafy and other vegetables once a week and **Sundal** (steamed lentils) once a week.
- Teachers and students of the Department of Home Science, JBAS College for women, Chennai, conduct counseling sessions for the parents of the chosen 30 children included in the Annapoorna project. The students explain new recipes to the parents whose children have deficiencies in their diet. They introduce high calorific food to the parents and ways to serve the food that the child generally shows aversion to.
- At the end of the year they visit MNC again to review the results of the project and recommend change in their diet or change strategies to improve the eating habits of the children.



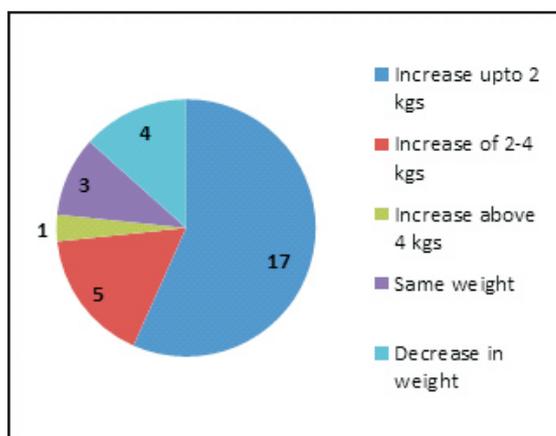
Steamed lentils (Sundal) being prepared for the children



Blood Test by the Metropolis Laboratory technicians.

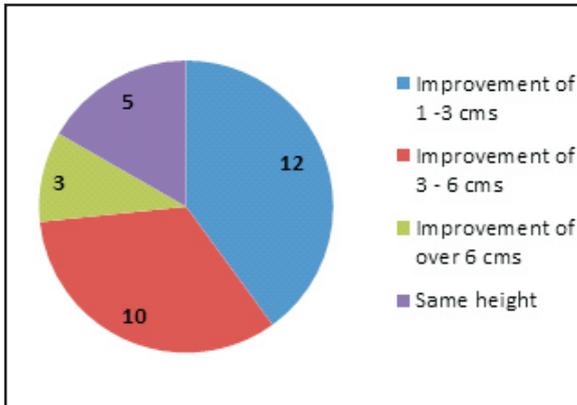
### Graphical Representation of the Results 2015 – 2016

Improvement of Weight of the 30 Children between 1.7.2015 – 31.7.2016 after inclusion in Annapoorna



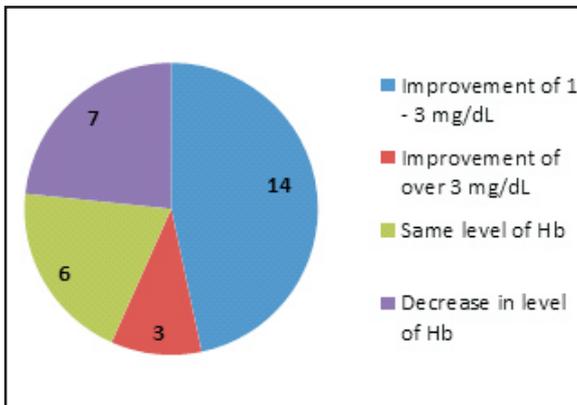
**Weight** -17 children increased in weight upto 2 kgs, 5 children by 2-4 kgs, one child above 4 kgs. Three children remained at the same weight while 4 of them saw a decrease in weight.

### Improvement in Height



**Height** - 12 children increased in height between 1 and 3 cms, 10 children by 3 – 6 cms, three children over 6 cms, while 5 of them remained at the same height.

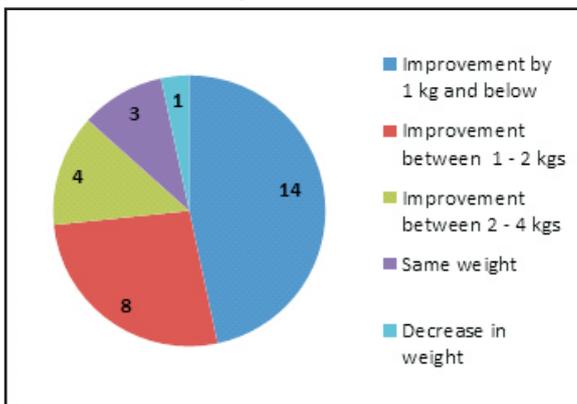
### Improvement in Hb (mg/dL)



**Hb level** - 14 children saw an increase of 1-3 mg/dL, 3 children had a increase of over 3 mg/dL, 6 maintained the same level of Hb and 7 of them had a reduction in their Hb levels

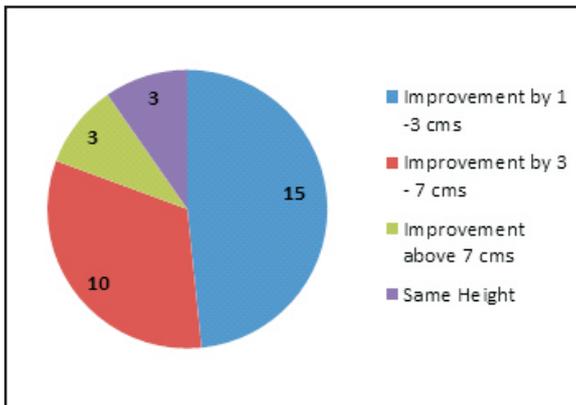
### Graphical Representation of the Results 2016 - 2017

#### Improvement of Weight of the 30 Children between 1.7.2016 – 31.7.2017 after inclusion in Annapoorna



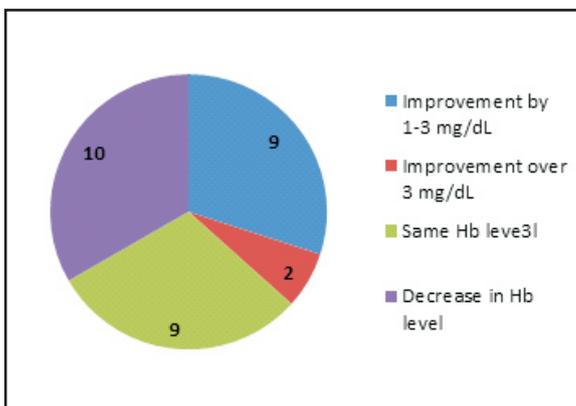
**Weight** - 14 children increased in weight up to 1 kg, 8 children between 1 - 2 kgs, 4 children between 2 – 4 kgs and 3 children retained the same weight while 1 child decreased in weight.

### Improvement in Height



**Height** – 15 children improved by 1 – 3 cms, 10 children by 3 – 7 cms, 3 children over 7 cms while 3 of them remained at the same height.

### Improvement in Hb (mg/dL)



**Hb level** - 9 children improved by 1-3 mg/dL, 2 children over 3 mg/dL, 9 children retained the same level, while 10 children saw a decrease in their Hb levels.

### Outcome:

Periodic assessments have been carried out and home visits made for the 30 children selected every year for the program, among them, for the period 2015-2017:

***Out of the 60 children selected for the Project Annapoorna, (30 in each academic year) which takes care of the nutritional aspect of early intervention, 49 children showed improvement in weight, the increase per child for the year ranging from 0.5 kg to 4 kgs. Only 5 children recorded a reduction in weight, the others maintaining same weight, 60 children showed an increase in height ranging from 2 cm to 8 cms / or remained static, and 43 children recorded a rise in hemoglobin ranging from 0.5 mg to 3.90 mg, or remained static, while 17 children showed a decrease in Hb level.***

*Systematic and structured inclusion of the nutrition intervention program benefitted children and their families. The nutrition management facilitated the child's improved health conditions and therefore regularity in attendance. The attention span of the children improved in the performance of a learnt activity which reflected in the overall performance of the child in the early intervention program. Thanks to Project Annapoorna all this was possible.*

**Mrs. Priya Rajkumar, Principal**

### **IMPACT OF PROJECT ANNAPOORNA**

**List of children for Annapoorna – 2015-2016 Initial readings taken in July 2015 and final readings in April 2016)**

#### **Children included in Annapoorna Project 2015-2016**

Sl. No	Regn. No	Name of the child	Date of Birth	M/F	Condition	Wt Kg (July 2015)	Ht Cm (July 2015)	HB (July 2015)	Wt Kg (April 2016)	Ht Cm (April 2016)	HB (April 2016)
1	5356	Nishitha. P	23/2/14	F	D.S	8.5	70	9.8	9.45	76	10.6
2	5365	Saathuvika Samshitha	19/6/14	F	GDD	16.5	75	6.7	17	81	10.8
3	5190	Yuvaraj. V	10/1/13	M	DD+ Rubella	7.8	78	10.6	9.2	83	16.5
4	5391	Siva Karthikeyan	8/12/14	M	DS	6.5	62	9.6	8.7	69	9.0
5	4844	Maha Swetha	15/7/10	F	CP+DD	12.8	92	10.3	12.0	93	10.2
6	5191	Saikrithvik	12/3/10	M	CP+DD	11.0	98	12.5	11.4	98	12.5
7	5281	Keerthi Kumaran	23/5/11	M	CP+DD	11.9	90	11.1	13	91	11.4
8	5287	Deeraj Krishan.R	4/6/11	M	ASD	13.2	98	9.6	14	99	12.3
9	5464	Bathmesh	18/5/14	M	CP+DD	7.8	68	9.8	8.25	71	10.3
10	5173	Kavin Raj. K R	13/12/10	M	MR	13.4	97	14.0	13.5	99	14.3
11	5175	Mh. Rizwan	21/1/10	M	DD	22.0	115	9.6	22.0	116	10
12	5471	Ashwin Kumaran	28/1/15	M	Micro-cephaly	5.8	63	8.2	8	70	11.7
13	5407	Advaith	14/02/10	M	PCs +seizure	19.0	115	9.6	18.5	118	9.4

Sl. No	Regn. No	Name of the child	Date of Birth	M/F	Condition	Wt Kg (July 2015)	Ht Cm (July 2015)	Wt HB (July 2015)	Wt Kg (April 2016)	Ht Cm (April 2016)	Wt HB (April 2016)
14	5167	Mugundhan	4/10/10	M	CP+HI	14.0	97	11	16.5	99	11
15	5307	Jaison Santino	13/12/10	M	ADHD	18.3	105	11.4	19.7	107	11.4
16	5415	Prithvirajan.A	12/03/09	M	ASD	17.0	109	10.9	19	114	11
17	5136	Akash .A	5/10/09	M	ASD	12.4	102	11.5	12	102	11.5
18	5372	S.Harshika	1/1/10	F	ADHD	12.5	101	11.1	14.4	103	12.3
19	5485	Prajan	2/8/09	M	ASD	18.5	105	9.4	19.4	109	11.5
20	5203	B.Abirami	27/6/11	F	CP+DD	9.0	86	9.1	9.5	86	9.3
21	5238	Kanishka.p	25/01/11	F	CP+DD	8.5	85	10.9	10	91	11.4
22	5198	A.Preetham	7/10/10	M	DD	10.5	90	11.4	11	91	9.6
23	5187	Poorvaja. J	17/11/12	F	DS	12.5	75	6.9	12.5	75	8.6
24	5220	Nithish Gangadharan	18/05/11	M	MR+CP+ Seizure	15.9	102	10.1	20	109	10.1
25	5270	N. Jaya Shree	22/6/08	F	CP+DD	15.0	98	7.8	15.0	98	7.9
26	4709	Kabir	22/12/10	M	CP+DD	14.2	100	12.1	14	102	12.1
27	5204	Nishanth.B	16/12/09	M	DS	14.5	91	11.9	15	94	12.4
28	4271	M.Mohammed Irfan	5/10/08	M	Micro-cephaly	11.0	90	13.6	13	95	13.1
29	4803	K.Vishva Selvan	18/2/12	M	DS	11.0	84	7	12	90	6.2
30	4980	S.Gulam Mohammed	8/3/09	M	Seizure Disorder	14.0	103	10.9	15	105	10.3

**Improvement in Weight or static – 26 – Decline – 4**

**Improvement in Height or static – 30**

**Improvement in Hb or static – 23 Decline – 7**

- **Key**

C.P – Cerebral Palsy / D.D – Developmental Delay / GDD – Global Developmental Delay / ADHD – Attention Deficit Hyper Activity Disorder / M.R – Mental Retardation / ASD – Autism Spectrum Disorder SD – Seizure Disorder

- **Results**

**Highlighted in yellow – increase in the value or Static / Letters in red – Decrease in value**

**Impact of Project Annapoorna**

**List of children for Annapoorna – 2016-2017 (Initial readings taken in July 2016 and final readings in April 2017)**

**Children included in Annapoorna Project 2016-2017**

Sl. No	Regn. No	Name of the child	Date of Birth	M/F	Condition	Wt Kg (July 2016)	Ht Cm (July 2017)	HB (July 2016)	Wt Kg (April 2017)	Ht Cm (April 2017)	HB (April 2017)
1	4713	Gokul Surya S T	21.7.2008	M	DS	16.8	106	14.4	18	110	13.7
2	5609	Karthikeyan M P	18.10.2011	M	DD	16.5	100	10.4	18	103	11.3
3	5548	Vigneswaran A	28.8.2011	M	Seizure Disorder	15.5	105	10.7	16.1	106	12.0
4	5407	Advait Krithik V M	14.2.2010	M	MR	20.9	120	9.2	22.0	121	9.6
5	5322	Prasanna Balamurugan R	13.11.2009	M	ASD	31	125	10.9	35	125	11.5
6	5382	Mohammed Musthafa S	23.9.2011	M	CP	11.5	95	8.7	11.5	95	8.4
7	5281	Keerthi Kumaran R	23.5.2011	M	DD	12.5	94	11.4	13.2	95	11
8	5292	Sambhavi S	4.8.2011	F	DD+ seizure Disorder	14.8	98	10.9	16.4	102	10.9
9	5349	Sharvesh	19.11.2014	M	DS+MR	10.9	73	8.0	11.5	75	11.7
10	5611	Nishanth S	6.5.2015	M	Micro-cephaly DD+CP	7	74	8.8	8.5	75	8.8
11	5634	Kishore M	17.9.2013	M	Micro-cephaly	9.4	83	9.8	10.5	87	10

12	5642	Sree Kavin Kumar M J	20.8.2013	M	ASD	13.8	79	10.7	15	87	10.7
13	5615	Gopen Sabaresh K S	24.4.2014	M	DD+CP	11.7	85	7.9	10.7	86	10.8
14	5506	D Chitranyagi	27.4.2014	F	DD+CP	9.7	76	9	12.2	80	12.3
15	5677	Velavan M	13.7.2015	M	DD	8	78	9	8	79	8.7
16	5190	Yuvaraj V	10.1.2013	M	CP+VI	9.2	84	16.3	9.5	85	16.3
17	5645	Sugaveeran	10.4.2013	M	Micro- cephaly	8.6	78	10.7	8.8	80	11
18	5270	Jayashree N	22.6.2008	F	CP+DD	16	99	7.6	17	102	8.1
19	5561	Sudharshan R	27.1.2015	M	GDD	10	78	10.8	11	86	10.5
20	5198	Preetham A Nithink	7.10.2010	M	DD	12	93	9.1	12	95	8.7
21	5610	Santhosh P	17.3.2010	M	DD	17	100	9.8	19	105	10.9
22	5187	J Poorvaja	17.11.2012	F	DS	15.5	86	8.4	16.4	89	7.3
23	5519	Karthick R	5.4.2013	M	CP	9.5	80	9.4	9.6	81	8.9
24	5669	Sharon Rose	3.7.2014	F	DD+CP	9.3	78	12.3	10.7	82	11.1
25	5452	Hemadharani	4.12.2012	F	DD+CP	14	90	10.7	16	91	9.4
26	5633	Sri Ram	12.3.2013	M	CP+DI+ Seizure	13.5	92	10.3	14	93	10.3
27	4844	Maha Shewatha	15.7.2010	F	CP+MR	14.1	96	10.1	14.2	97	10.1
28	5229	Harish S	16.5.2013	M	DS	8.5	78	13.1	10	85	13.1
29	5334	K S Danish	15.3.2014	M	DS	10.1	77	10.2	11	79	10.2
30	5604	Mahendran R	1.1.2013	M	DS	13	85	8.6	14	99	8.6

**Improvement in Weight or static – 29 Decline – 1**

**Improvement in Height or static – 30**

**Improvement in Hb or static – 20 – Decline - 10**

- Key**

C.P – Cerebral Palsy / D.D – Developmental Delay / GDD – Global Developmental Delay / ADHD – Attention Deficit Hyper Activity Disorder / M.R – Mental Retardation / ASD – Autism Spectrum Disorder /

- Results**

**Highlighted in yellow – increase in the value**

**Letters in red – Decrease in value or static**

### **Project: SANMARGAM**

The ultimate **aim** of every parent who has a special child is to integrate the child into mainstream society. In order that the children continue to benefit from the gains realized by them in the Early Intervention program, birth to 6 years, and ***that they build up further from there on, the selection of children and preparing them for moving ahead is carried out over a period of time.*** 'Sanmargam' aims at **preparing** the children to **"Move Ahead"**, and beyond the birth to six years program of intervention, **towards school education** in the mainstream and special school systems, **facilitating** children with developmental delays/mental retardation, and with associated disabilities to continue education in special and mainstream schools on completion of the Upanayan early intervention program, age group, birth to six years.

It is a coordinated training program where:

- the interdisciplinary team of experts are consulted in the processes of assessment and selecting goals and objectives,
- Through the respective programs, the therapists assist in further development of the skills.
- Inputs through group activities, music, yoga and play are also provided for optimizing the child's individual strengths through Individualized Education Plans (IEP).
- The children are guided and directed by the special educators who also transfer the skills to the parents, the 'carry over' agents who continue the training at home

The focus of the IEP is on the **'Moving Ahead'** and hence aimed at training the child in the required age appropriate skills in activities of daily living, thereby building bridges wherever there were developmental delays, and helping child reach the goals set for further development. Apart from this MNC helps in:

- Placement of children in the mainstream schools coordinating with the parents in their choice of schools, the teachers and head of institutions into which the children are being placed
- Providing support to the children, parents and mainstream school teachers for a period of three years from the date of admission, facilitating the transition of the child to adjust to the new environment
- Workshops are planned for the mainstream school teachers and parents to take the child forward to reach his/her potential smoothly.

**A special class on Montessori methodology of teaching is followed at the center since 2013 wherein the children who are ready to be mainstreamed are placed for a three year period of transition till they move to mainstream primary school. The preschool environment in this class provides the child a transitory platform to learn adaptive behavioral skills apart from functional academics. This class serves as a transitory platform to acquire skills that are expected of the child in a**

**mainstream environment. The focus is on children being:**

- age appropriate at the required level in their achievements in academics
- trained in socially acceptable behavior and
- interactive in their communication skills
- Trained in self management skills.



Montessori methodology in the class

**Outcome :**

**2015-2016** - A total of 13 children passed out from the Centre in April 2016. Among them 7

Children moved to the mainstream/special schools and 6 children moved to Special Schools.

**2016-2017** – A total of 10 children passed out from the Centre in April 2017. Among them 6 children moved to Mainstream schools and 4 to other Special schools.

**List of school where MNC children were mainstreamed:**

Lady Andal Venkatasubba Rao Matriculation School  
Shenstone Park,  
No.7 Harrington Road,,  
Chennai-600 031

CSI Monahan Matriculation School  
196 Peters Road, Opposite New College  
Royapetah  
Chennai 600014

Ellen Sharma Matriculation Higher Secondary School  
9, CGSS, Sholinganallur, Salai, Chennai, Tamil Nadu 600119

Radha Vidyalaya Matriculation School  
15/12, Dayalu Ammal St, Loganathan Nagar,  
Padmanabha Nagar, Choolaimedu,  
Chennai, Tamil Nadu 600094

Sri Durga Nursery and Primary School  
28 Unni Sali Street  
Ellis Road, via Mount Road  
Triplicane  
Chennai 600002

Shining Star Play School, Chennai  
Old No. 45 New No 87  
TTK Road  
Alwarpet, Chennai 600018

White Gold Montessori School  
29 Permabur High road  
Permbur  
Chennai 600011

Bala Vihar  
Kilpauk  
Chennai 600010

Little Flower School for the hearing impaired  
G N Chetty Road  
T Nagar  
Chennai

Maithree Special School Chennai  
32B Vasudevapuram Street  
Near Five Lights  
West Mambalam, Chennai 600033

Kalyani Kumaramangalam Nursery and Primary School  
29 Giri Road, T Nagar,  
Chennai 600017

Government School 5 <sup>th</sup> Main Road, Nanganallur Chennai 600061
Sai Vocational Development & Education Centre, New No.27, Old No.1834, Vasantham Colony, 3rd Street, 18th Main Rd, Anna Nagar West, Chennai – 600 040
Renga Nursery School, Choolaimedu 125, Shanmuganar Salai, Kamarajar Nagar, Gill Nagar 600094
Trinity School 9, K.R. Koil Street, West Mambalam, Chennai, Tamil Nadu 600033

**The feedback from the mainstream teachers / Principal during visits to the schools:**

**Report from Bala Mandir Vidyalaya, 8 G N Chetty Road, T Nagar, Chennai 600017, where Master V Yeswin was mainstreamed in**

Initial Observation	Present status of the child
Depended on his mother	Is able to be independent. The mothers support in the class room has been stopped and the child is able to cope up alone.
Found difficulty to accept and move with the teachers and other children, socialization was very poor	Has accepted the school environment. Understands the pattern of classroom.
Was not able to follow the instructions given by the teachers	He has good rapport with teachers. He follows the instructions. Expresses his needs to the teacher.
Lack of concentration and was not able to sit in the class	He reports to the teacher after completing his class work. Follows the rules of the classroom.

Was not able to express his needs	He has friends. He mingles well with other children. He wishes his classmates on their birthdays.
Speech delay	Good in Tamil. He can read small sentences in Tamil.
Could read and write 2-3 letter words in English and numbers up to 100.	He completes the exams on his own. Clarifies doubts with teachers during the exams. Does addition of two digit numbers.
In the beginning, he used to repeat the same word that was spoken by others. Gradually improved to answer three to four words together. He is friendly and never fights with other children. If chooses to sit in another place if he finds others seated before him in his place.	

**Report from Kalyani Kumaramangalam Nursery and Primary School, 29, Giri Road, T Nagar, Chennai 600017, where Master Abhinav was mainstreamed in 2017**

Teacher	He is able to finish his class work. Has some difficulty with following instructions. He can follow instructions with reminders.
Co-ordinator	Report card about his lessons is good. The expectation of the mother is too much and must be scaled down.

**Report from Ranga Nursery School, 6/1 First Street, Gill Nagar, Choolaimedu, Chennai 600004 about Master Jovan Kasper who was mainstreamed in 2017**

Teachers	Child follows instructions. Sings rhymes. Performance is improving and is better now.
Co-ordinator	Sitting tolerance has improved. He finds difficulty in following instructions in a group.

**Report from While Gold Montessori School, Perambur, Chennai 600011 where Sai Sivesh was mainstreamed in 2016**

Teachers	Does not cooperate in doing activities, and does it only when he feels like or on his own. He isolates himself in a corner and does not mingle with the peers.
Co-ordinator	The parents do not come and meet the teacher to learn about his progress.

Action taken – Called the parents and spoke to them. Explained to them that the success of mainstreaming lies in a concerted efforts of parents and teachers and that they should visit the school as often as possible and help both the teachers and the child.

**Report from CSI Mohanan Matriculation Higher Secondary School, Royapettah, Chennai, where Mohammed Irfan was mainstreamed in 2016**

Teacher	Well settled in the class room environment. Tries to answers questions with speech and gestures. Writes holding the pencil but does not apply pressure.
Co-ordinator	The mother advised to hold his hand and write the home work till he learns to apply pressure. Needs improvement in writing and speech clarity. Potential to improve is there.

**Parents feedback on Sanmargam:**

**Mrs. V. Devi**

**Mother of Yeswin mainstreamed into Bala Mandir Vidyalaya.**

*I came to MNC with Yeshwin and not much hope. We stayed here and took intervention for two years. The sea change that I saw in him was all because of the special educators at MNC. When we came he had developmental delay and could not read. He was chosen to be mainstreamed and IEPs were given to that end. When we left MNC for Balamandir Vidyalaya he could:*

- ❖ **Answer simple sentence**
- ❖ **Eat independently**
- ❖ **Knew the usage of money**
- ❖ **Read simple 2 and 3 letter words**
- ❖ **Write 3 letter words when dictated**
- ❖ **locates object in ordinal position**
- ❖ **Perform simple addition**

*“Sanmargam' project aimed at mainstreaming children is a very successful project for children like Yeswin. I now come to MNC and work as a parent helper. I want to retain my connection with MNC and help other children like Yeswin.*

### Project – SAMBHAVAM

This is a project to facilitate experiential learning. Sambhavam in Sanskrit means EVENT and in the context of learning at MNC experiencing an event in real life situations reinforces the skills learnt in the school environment. The program is planned to enhance the skills taught in the class room and specifically to assist children to **'Learn from Real Life Experiences' by planning of events outside school environment, 'Learn from peers, Reinforce learnt Skills and Generalize skills in performing Activities of Daily Living.** Children are taken to places like Museum, Railway Station, Vegetable market, Park, Beach and allowed to experience the real life situations. The visit is video graphed and shown to the children at the centre to reinforce the visit and the skills learnt thereof.

This program is planned to enhance the skills taught in the classroom and specifically assist children to:

- Learn from real life experiences by planning of events outside school environment
- Learn from peers
- Reinforce learnt skills



An art gallery has been replicated at the center by the children after Sambhavam when they visited the museum



MNC children inside the Metro Rail



MNC staff and children at the Metro station

Sambhavam conducted during 2015-2017

21.9.2015 23.9.2015	Pazhamudir Nilayam in two batches (Vegetabel Market)	77 Children
28.3.2016 30.3.2016	Natesan Park in two batches	54 Children
19.9.2016	Marina Beach	54 Children
9.1.2017	Ride on a Metro Train (Koyambedu to Alandur)	53 Children

**Sambhavam** is one of the most innovative programs on experiential learning devised at MNC. This has been very thoughtfully conceived and has become one of the flagship programs in social inclusion at MNC. Not only the strengthening of social skills has been possible among the children at MNC, the event also reinforced the confidence in the parents that they can take their children out to public places, and prepare them to visit shops to buy any items. By taking the children out in a group, it has been possible to sensitize the local communities on children with special needs and how they, when trained perform as well as others. The hesitation to interact with a special child getting faded away gradually, we get messages of request from supermarkets and shop keepers who have had MNC children visit them to bring the children once again. The Sambhavam programme gives great joy to the children, raises the self confidence of the parents, and motivates the special educators to experiment further and impacts the public that the population of children means also children with special needs.

**Impact on children:**

On the first visit the parents may be apprehensive of their children's behavior in the outside world, they may pickup items kept on the counter without permission, reach out to the objects displayed in the shop. The special educators prepare the children well before the visit and also guide them in such practical situations to behave appropriately.

On day two the children are familiar with the setting, and parents more confident. Children more aware of the new environment react to it in much the same way as do other children.

On the subsequent days, (during the ten day programme) children display adaptive skills in a more demonstrated way. The entire visit is then played in the class room in a simulated environment. A demonstration is then planned when the children display the acquired skills in adaptive behavior. The skills in which they are trained get generalized in real life situation. Sometimes various other adaptive skills also manifest along with the skills taught.

Children get interested and start asking parents “When are we going out, Who is accompanying us” and so on. The enjoyment is more visible. Children requiring pervasive support also express in one way or the other their joy and display their participative skills considerably.

**Impact on Special Educators:**

- Teachers learn to plan meticulously each visit.
- They learn to manage the different situations that suddenly crop up.
- They learn to study and check all details regarding accessibility for the child, mobility needs, requirement of any first aid, medical attention and so on.
- They learn to budget in terms of money, time, manpower, resources and so on.
- Getting the parents to involve in the planning, preparation and demonstration gives the Special educator an additional learning experience

**Impact on Public:**

- It is an unusual but worthy lesson for them on awareness to know about the children with special needs, that the special needs of each is what differentiates the child from the rest of the children and hence they too are part of the 'inclusive society.'
- They learn to address the special needs of the children and therefore make the parents comfortable
- An awareness to be become committed to the needs of special children is created.

***Parents feedback on Sambhavam***

1. *Mrs. Umamageshwari*  
*Mother of Deva*
2. *Mrs. K Revathi*  
*Mother of Vaishnavi*
3. *Mrs. Alagammal*  
*Mother of Preetham*

*We excluded our children from trips to the grocer's, Super stores for buying Vegetables/fruits, Restaurants and small family functions. We were hesitant and sometimes embarrassed of answering the queries people would raise about his/her behavior. Sambhavam helped us overcome this. When we took our child with other special children accompanied by mothers, we were equipped to answer the questions the public posed to us. They would politely stare and one or two of them*

would ask if we belonged to a school for Special children. Being in a group gave us the confidence and we were prepared to answer them. We would explain that the children enjoyed these trips and that we owe it to them to expose them to the community by bringing them out. I found that our children enjoyed these trips and could see modifications their behavior when was in public places. The manners improved and they were learning a lot of things. We are now confident of taking our children to any public place or private function without hesitation.

In general all of them agreed that :

- The inhibitions/reservations in every parent to expose their children to public events begin to wean off. Since the centre takes parents in a group there is at first a feeling of comfort. By and by they learn from their own experiences and by sharing them with each other. They develop confidence to manage their children in outings.
- Parents begin to realize that their children do really get influenced positively by such experiences.
- The preparation part of such outings in which the center gives training make the parents learn as to how they would also do the same when they plan outings.
- The parents realize the hidden potential in their child when they see them, particularly those that are required in management of toilet needs in outing
- Parents also are themselves excited with the visits as they come out of their isolation.

### **Project - Sankarshana**

**SANKARSHANA**, meaning, "**Bringing Back**" was conceived to bring together children who had on certain compulsions dropped off from the program. A relook at their current needs was taken and accordingly counseling given to the parents.

#### **Aim of the Project:**

- Counseling parents on the importance and the need for early intervention and the continuance of the same according to the needs of the child.

#### **Methodology of the Project:**

- **Organizing** home visits, contacting the parents through telephone, and by mail to **find out the reasons for dropping out** when they do.
- **Facilitating bringing them back to the early intervention training**



House visits

**Summary of House Visits done during the period 2015-2017:**

	2014-2015	2015-2016	2016-2017
Number of House Visits done	22	15	27
Number of children who returned to MNC	6	2	4
Number of children who were admitted in other mainstream schools or special schools or Vocational Schools	7	3	9
Number of children who had dropped out but were counseled to get back to early intervention	5	10	9
Could not contact as house was locked	4	--	5

**Project Sankarshana – Details of House visits and feedback from the parents met :**

Sl. No	Date of visit	Name of Child	Address	Status
<b>2015-2016</b>				
1	14.9.2015	Saathvika Shamshitha G	D/O Gajendra Raj L 7/1 Mangal Nagar Choolaimedu, Chennai 600096	<b>Came back to MNC</b>
2	23.8.2015	Divya Yazhini	14 Yamuna Street, Velacherry Chennai 600042	Going to a mainstream school

3	18.7.2015	Deepashri	D/O Devaraj 4/6 Oil Monger Lane Street, Royapettah Chennai 600014	<b>Came back to MNC</b>
4	4.8.2015	Davin Anto A	S/O Arockia Jown Peter K B 3 Ayyappa Avenue RMR Flats Chennai 600116	Going to a Special School
5		Krish Narayanan R	S/O A K Ravi Sankar 38 Ganapathy Colony East Tambaram Chennai	Going to a mainstream school
<b>2016-2017</b>				
6	27.7.2016	A Akash	S/O Arokia Raj 258 Kamarajapuram Nungambakkam Chennai 600034	<b>Came back to MNC</b>
7	23.8.2016	Nishanthini	S/O V Ramesh 19/10 Corporation Colony, T Nagar, Chennai 600017	Family issues, returned to the maternal grand parents home at Thiruvallur and going to a Main- stream school.
8	23.8.2016	A Ajay	S/O P Menaka C6 Anand Square 30 Govindan Road West Mambalam Chennai 600033	Going to a play school nearby.
9	23.8.2016	Abhirami	D/O Balamurugan 1/308 Nagabus Compound Kaliyamman Kovil Street Karapakkam Chennai 600071	<b>Came back to MNC</b>

10	23.8.2016	Jaison S	S/O Santhosh 23/12 Xavier High road street, G N Chetty road, T Nagar, Chennai	Going to another Special School
11	24.8.2016	Prathiksha K	D/O D Karthi 89/54 Trustpuram Mandaveli Chennai 600028	Going to a mainstream School
12	27.8.2016	Lekha Sriranjani	S/O Gurumani Amudhan 11 Palayam Street Aminjikarai Chennai	They would like to go for an IQ test. After consulting with Dr. Viswanathan will come to school. Meanwhile the child suffered seizures and had to be hospitalized.
13	24.8.2016	Dhanu Shree N	D/O Nagaraj 27/10 Appu Street Nungambakkam Chennai 600034	Planning to go to a special school – Vidyasagar in Ambattur
14		Daniel P	S/O Pradeep Kumar Old No 74/2 New No 112, thiruvalluvar Salai, Alwarpet, Chennai 600018	<b>Came back to MNC</b>
15		Sriram R V	S/O Ramesh Kumar 36/44 K P Dasan Salai Teynampet Chennai 600018	<b>Came back to MNC</b>
16	28.12.2016	Madhusri R	D/O R G Ramadevan 250 Ashoka Nagar Arumbakkam Chennai	The child has a sibling and the care of the child is keeping with mother away from bringing Madhusri to MNC. Counseled them that it is better for them not to stop Early Intervention to Madhusri.

17	5.02.2017	Rafiya Fatima A	D/O Ansar Basha 28/9 Gulam Muthuzha Street, Mount Road Chennai 600002	The parents had a difference of opinion with the therapist and wanted to stay away. Counseled them that it was wrong on their part to deny Early Intervention to the child due to small reasons like this and told them to bring the child back to MNC
18		Kanishka P	D/O Palani Venkatapuram Krishnagiri Dist	The mother of the child is pregnant and so is finding it difficult to bring this child to the center. Will bring her after the delivery.
19	20.9.2016	Karthikeyan R	S/O Ravi 12 Valliamman Nagar Vilivakkam, Chennai -49	
20		P Kowshik	S/O Prakash 34 Ashok Nagar MMDA Colony Arumbakkam, Chennai -106	

**Six children came back to MNC** after counseling through the Sankarshana project, 2 in 2015-2016 and 4 in 2016-2017.

**Parents feedback on Sankarshana**

**Mrs. Lakshmi Pradeep Kumar**

**Mother of Daniel**

*When I was pregnant with my second child I stopped brining Daniel to MNC. It was very tiring to bring him to the center everyday and then catch up with my household work. I found it difficult to manage Daniel at home too but there was no other go. After the delivery of my second child, I had fallen into the routine of managing Daniel at home. But Mrs. Muthuperiyanayagi, from MNC visited me and explained to me why Early Intervention was so very important and that to drop out now means that I will loose the progress that Daniel had made. She visited me twice and encouraged me to come back. Now I have found a caregiver for my child at home and I accompany Daniel to the Center, who is making good progress. Thanks to MNC.*

## Project - SAMYAM

Madhuram Narayanan Centre introduced **SAMYAM** in 2013. Every year this event is being celebrated in the month of July. This project was conceived to bring the past students, present and the new entrants together to the Centre during the event. The present students and the new entrants are motivated in coming together with the past students and interacting with them. The past students find guidance and reassurance in the teachers that they are on the right track.

The objective of **Samyam** is to bring together the three different categories of children at Madhuram Narayanan Centre

- New children who have enrolled for the current academic year
- Existing children who are with Madhuram Narayanan Centre for the past few years
- Alumni who have moved ahead to mainstream schools and other special schools

**Samyam** creates a platform by bringing all the children along with parents together for:

- **Healthy interaction** to share the ideas and views for further development of the children
- **Maintain continuity** with Madhuram Narayanan Centre for guidance and counseling
- **Motivating new parents** to face the challenges in bringing up and training the children



Cultural programme at Samyam

*The platform 'Samyam' gives an opportunity for the past parents to talk to the new ones without any reservations. Their deep doubts can be aired in the comradeship and this helps the new parent, gives her confidence to face the challenges of admitting her child in a special school.*

*Mrs. Lakshmi Pradeep Kumar – Parent*

**Alumni attendance and alumni feedback**

Alumni Attendance	2015-2016	2016-2017
<b>Number of Children who attended Samyam with their parents/siblings</b>	15	12

**Mrs. Sudha Madhavan, mother of Master Lakshmi Narayanan spoke at Samyam 8<sup>th</sup> August 2015. This is what she had to say:**

*Good morning everyone. It is proud privilege to speak in this forum and I feel this is a great opportunity given by my son. My son is a child with Ataxia. Today I stand here as a proud mother, but I still remember those days when he was young and when I used to cry everyday. I made a round of all the hospitals in Chennai hoping to see a miracle but that did not happen. Then I came to MNC where I was motivated, given courage and made to understand the reality that it is my son and to help him, I must accept his condition. After coming here he has improved a lot. It is not only me, but many mothers who were despondent like me looking for answers. I have done the special education diploma course at the center. I dedicate my entire growth and learning to MNC. The training and experience at MNC has helped me come out with flying colors in all my endeavors.*

*Now I feel "with my son, there is everything, without him there is nothing".*

*Thank you MNC thank you all.*

**Aruna Srikanth**

**Mother of Anirudh**

*My son was diagnosed with Autism Spectrum Disorder. I had enrolled him in a regular school at first but the teachers there called me and said that my son needed more care as he seemed different. I then took him to a neurologist who advised me to go for Early Intervention as he was autistic. My husband has just got a very good job in Australia. We refused the offer and decided to stay back in Chennai to help Anirudh. My son attended MNC for four years and meanwhile I qualified myself as a Special educator. Anirudh now attends a special school 'Maithree' near my home. Parental involvement in MNC is the hall mark of the center and I am grateful to all the teachers for giving their services to Anirudh's development. My advise to new parents is – Involve yourself in the Early Intervention programmed followed at the center and blindly follow what is counseled there.*

**Mrs. Premila Devi, (now a special educator at the center)**

**Mother of Sabari**

என் மகன் சபரி இங்கு ஒரு வரம் வரும் பொழுது மூன்றரை வயது அழுதுகொண்டே இருப்பான். யார் தொட்டாலும் பிடிக்காது. சாப்பாடு என்றால் மேலும் அழ தொடங்கிடுவான். தொடர்ந்து ஆசிரியர்களும் பள்ளியும் தந்த ஒத்துழைப்பும் பயிற்சியும் தான் என் மகன் மோவிங் அஹெட் மூலம் லிட்டில் பிலோவேர் கான்வென்ட் செல்கிறான். இப்பொழுது அவனே தானாக உண்கிறான். எல்லாருடனும் பழகுகிறான். முழுமையான பள்ளி சூழலுக்கு தயார் செய்த MNC க்கு நான் மிகவும் நன்றி கடன் பட்டிருக்கிறேன். எனக்கு மேடை அமைத்து கொடுத்த MNC க்கு நன்றி

Thank You MNC

### **Social Impact of Objective 1**

- High quality early intervention services can change a child's developmental trajectory and improve outcomes for children, families, and communities. Intervention is likely to be more effective and less costly when it is provided earlier in life rather than later.
- Stress, such as extreme poverty, abuse and neglect, or severe maternal depression can damage the developing brain, leading to lifelong problems in learning, behavior, and physical and mental health. Through early intervention offered at MNC, the brain of the child is strengthened by positive early experiences, especially stable relationships with caring and responsive adults, safe and supportive environments, and appropriate nutrition.
- Early social/ emotional development and physical health provide the foundation upon which cognitive and language skills develop. This enables these children to be mainstreamed in schools and gives them more opportunities for inclusion in society.
- A significant impact of mainstreaming is that children are integrated into the larger community and are accepted by peers and teachers.
- Nutritional intervention through Project Annapoorna has positively impacted the children. Their health condition shows an improvement thereby ensuring regular attendance to school and improved participation in class activities.
- The experiential learning provided at MNC enables the children to learn the use of public transport, public spaces like malls and parks and follow set routines, etiquette and discipline.
- Early intervention has led to a decrease in challenging behaviors and self-stimulatory behaviors among the children

### Parent Speak - Success story of Rishabh



*My son Rishabh Bhutra is a young man of 24 years, graduated in B com (Bank management) from D.G.Vaishnav college(2015). He is a merit scholar. He secured admission in college wholly on his merit based on his class XII marks.*

*Rishabh is my first child born in June 1993 .The doctor decided to do a C section due to breech presentation of the child in the womb. Due to doctor's negligence the child did not cry immediately, resulting in delay in oxygen supply to the brain. This is the reason for his disability called cerebral palsy. When the child was six month old the normal milestone of sitting was not achieved. At that time I met Dr Shashikala a developmental neurologist. After examining Rishabh she said he was quadriplegic spastic and needs 'Early Intervention programme'. She referred me two centers in Chennai.1) Madhuram Narayanan Centre (MNC) 2) Spastic society of Tamilnadu.(SPASTN)*

*I selected MNC in October 94. At MNC I came to know about the Individualized Education Programme in various developmental areas like motor skills, self help skills, cognition skills, social skills and physiotherapy MNC had a time table for each of this area and that too for every child, according to their needs.*

*The programs gave me a great learning and peace of mind too. In 1998 June when Rishabh was five year old so for further schooling and academics, we shifted him to Vidyasagar. During the first year itself they decided to put him in regular school as a part of inclusive education program. His memory is sharp and he is a good auditory learner. He participated in all school programs. From class six we admitted him in Lady Andal school with the help of Mrs. Poonam Natrajan.(Director of Vidyasagar) who personally accompanied him for the entrance exam and personal interview. Lady Andal school accepted him whole heartedly and provided him all support for successful completion of his studies till class XII.. For exams a scribe was provided by Vidyasagar,. He scored 69% in class X and 78.9% in XII. He then joined D G Vaishnav College.*

*Since his speech is not clear, he has got permission from Madras University to use computer to spell the word to the scribe. He is very good in operating computer. He can browse the net, download music, movies upload photographs. He is very active on social media, like Facebook What'sapp.*

*Early Intervention helped my son reach here. Early Intervention is very effective and the earlier the better.*

*Sharda Bhutra  
Mother*

## **Objective 2 - Rehabilitation of Parents and their Empowerment**

### **1. Training Programs**

MNC offers various trainings continuously to the **parents** with a focus on

- a. Improving their self-confidence
- b. Inculcating the skills required to train children
- c. Providing leadership quality
- d. Exposes to lectures and demonstrations on various topics to enhance their knowledge and to learn things useful for their children

Training of Parents in various areas during the period 2015-2017:

<i><b>Parents</b> as members of the interdisciplinary team trained in determining the IEP for their child at the time of assessment, setting goals and objectives and carrying out the IEP</i>	<b>140</b>
<i><b>Parents</b> trained by the Special Educators to become effective ' carry over ' agents for their children in activities of daily living at home</i>	<b>150</b>
<i><b>Parents</b> counseled by specialists from different fields as and when needed</i>	<b>80</b>
<i><b>Parents</b> encouraged to take up the diploma course conducted by the training center AVMVK Academy to enhance their knowledge and become qualified special educators</i>	<b>13</b>
<i><b>Parents</b> developing Additional skills developed in the enabling them to handle children other than theirs and become recognized as teacher helpers / trained teacher aides / parent helpers</i>	<b>8</b>
<i><b>Parents</b> after completion of the Diploma course in AVMVK Academy working as Special Educators in other special Schools and MNC</i>	<b>12</b>

### Key Achievements

- **Parents** are encouraged to take up the Diploma Course in Early Childhood Special Education conducted by the training center AVMVK Academy to enhance their knowledge (13 parents during this social accounting period)
- **Eight parents** after completion of the Diploma course in the AVMVK Academy are working as Special Educators in other special Schools and 5 of the parents have joined MNC as Special Educators.
- **Parents** became carry-over agents and created awareness on Early Intervention within the community and Society.
- **Twenty two children have been referred to MNC by parents** in 2015-2016, 26 in 2016-2017. Parents have formed a strong support system, and sensitize the larger community and bring/refer children with special needs to MNC for the Early Intervention program.

**Nine parents** have been appointed as teacher helpers for the current accounting period



Parents showing their talent on the stage at the Annual Day celebrations

## 2. Events (Annual)

### Annual Events at MNC

Month	Event
June	Ramzan Celebration
July	Samyam
August	Independence Day Mega School Outing

September	Father's Day
October	Diwali Celebration
November	National Workshop (Annual) International Conference (Triennially)
December	Annual Day Christmas Celebration
January	Pongal Celebration
February	Sports Day Staff Outing (2 or 3 days)
March	Nutrifest

#### a. Nutrifest

Nutrifest is an event specially designed to focus on the **importance of nutritional intervention** in caring for children with Intellectual Disability (MR). “**Healthy Foods, Healthy Kids**”. It is celebrated yearly in March. The **parents** participate in the event where a topic is selected every year for cookery competition.

#### 2015-2016

It was celebrated on 11.3.2016. . In the year concerned the focus of the festival was on **Vegetables and Fruits in Daily Diet**. The theme selected was **INCORPORATION OF VEGETABLES AND FRUITS IN DAILY DIET**. The theme was selected by the Special Educators of the center in consultation with the teaching staff/students of the **Department of Home Science, JBAS College for Women, Chennai**. The department conducted a demonstration session explaining the different recipes that could be tried, pertaining to the ingredients in the selected topic. This is to ensure that the parents were made aware of the high nutritional value of the ingredients. The demonstration session had a display of dishes prepared earlier with particular reference to the theme and the recipes are distributed to the parents. A chart showing the nutritional value of each recipe is also displayed and in case the recipe has any medicinal value that was also included in the chart.

On the day of the festival the parents with their children, teachers and other invitees gathered in the MNC Prayer Hall to be a part of the event marked by color and gaiety, with a colorful array of dishes, vying with each other for taste and display. About 50 dishes (prepared at home by the parents) came out on the table and the three judges were put to much difficulty in selecting the dishes that were outstanding. Some of the new and innovative recipes were:

- Water Melon Dosa
- Nendram Fruit Jamun
- Vazhapu Idly
- Pineapple Kesari
- Carrot and Sooji Payasam
- Apple and Dates Milkshake
- Banana Gulab Jamun
- Carrot Idly
- Brahmi Leaves Gravy
- Fig Flowers Poriyal

**It was left to the mothers to further innovate the dish, its consistency and texture to ensure that her child was able to eat it easily.**



An array of dishes displayed at Nutrifest

The judges and special invitees of the year's event were:

- **Dr. Devi Manohar**, Associate Professor in the Department of Home Science, Anna Adarsh College for Women, Chennai with 22 years of experience
- **Mr. Arun**, Executive Chef, Hotel Ambassador Pallava, Chennai with 20 years of experience
- **Mrs. Rama Narayanan**, who is involved in Community and Public Health Nutrition with expertise in the area of maternity and early childhood. She comes with 25 years of experience and is a research scholar in nutrition.

From the 4 groups that prepared dishes for the competition the group of Ms. Helen Rose, Mrs. Revathi and Ms. Ramya (age group 2-4) were adjudged the best and appreciated. The take away was the awareness the whole event created for the nutritional value of Vegetables and Fruits and the record of recipes that was compiled for future use.

## 2016-2017

It was the Tenth edition and was celebrated on 10<sup>th</sup> March 2017. This time the focus of the festival was on **Nuts and Oil seeds in Daily Diet**. The theme selected was **INCORPORATION OF NUTS AND OIL SEEDS IN DAILY DIET**.

Some of the new and innovative recipes were:

- Peanuts Sweet Balls
- Poppy Seed Kheer
- Dates Laddu
- Peanuts Rice
- Badam Milk
- Cashew Pakoras
- Jack Fruit Seeds Curry
- Basandi
- Sunflower Seeds Adai
- Coconut Milk rice
- Sesame and ground nut sweet balls



Nutrition charts and dishes at display at Nutrifest

The judges and special invitees of the year's event were:

- **Dr. Padmalochani**, Developmental Pediatrician with over 15 years of experience. She has been associated with MNC for over 7 years and counsels our mothers and is a consultant to our children. She makes weekly visits to ascertain their progress and guide us in the IEPs.
- **Mr. Arun**, Executive Chef, Hotel Ambassador Pallava, Chennai with 20 years of experience
- **Mrs. Mala Chettri**, Consultant Nutritionist with over 15 years of experience who works with kids. She is the Vice President of the Indian Diatec Association.



The judges evaluating the dishes



The winning team bags the trophy

From the 4 groups that prepared dishes for the competition the group of Mrs. Revathi Kannan, Mrs. Anitha, Ms. Ranjitha and Ms. Sasirekha (age group 4-6) were adjudged the best and appreciated. The take away was the awareness the whole event created for the nutritional value of Nuts and Oil Seeds and the record of recipes that was compiled for future use.

#### a. Father's Day

It is usually the mothers who get involved in the day to day training of the child. Towards orienting the fathers in the care and management of the children with special needs, MNC decided to invite them to spend a day at the center. The fathers were invited on the Father's day while the mothers took backseat. Father's day is celebrated in September every year.



Fathers taking part in group activity

#### Process:

- A letter to the individual father was sent ( in English and Vernacular)
- A confirmatory note from the parent was obtained on their participation
- Initially fathers were given an overview of the activities of their children and instructions were given on how they should participate in the training of their child

- All fathers were made to train the child through Individualized Education Program.
- At the end of the day a feed-back session was held.

***A total of 54 fathers participated during the year 2015-16 and 66 fathers during the year 2016-2017. This created awareness in the fathers on the process of Early Intervention being given to their children. This facilitates in sensitizing the fathers on the need to interact with the child at home in a more structured way.***

#### **Feedback from Fathers who attended the Father's day**

<b>Date</b>	<b>Name of child</b>	<b>Name of Father</b>	<b>Remarks</b>
19.9.2015	S Trivikraman	Mr. N Suresh	Once a day in a year, this is a chance for fathers like us to understand how the kid does at school and his improvement and activities that evolve along with the growth. Thanks and keep up the good work growing.
	S Jason	Mr. Santhosh	Father's day a day with their child - programme conducted is very good, for both the child and the father. I understood how to treat my child at home and in public places. This programme is very helpful.
	S Shivakrupa	Mr. G Satish	Very happy about the splendid service MNC is doing. I know well how difficult it is to take care of kids like these. Thank you for this great opportunity. May almighty keep you all blessed – always.
	A Seshan	Mr. A S Ananthkrishnan	Thank you MNC. Both of us as parents are greatly indebted. Thanks again.
	K R Kavin raj	Mr. V S Krishnaswamy	In the past one year my son's all activities improved a lot. The training provided by the class teacher is up to the standard. Thank you for the service.
17.9.2016	Triloksami P	Mr. S Papanasam	Trilok improved a lot after joining MNC. Now he able to say rhymes at home. He started communicating with me and his mother. Thanks to MNC for change which happened to my son

	Asif Khan	Mr. Ameerkhan	The training session is nice. The way the teacher teaches the child is extraordinary. They are taking too much effort to develop the child. Altogether it was a nice experience with all of you. Thank you.
	Pranavi G	Mr. K Gokulakrishnan	Thanks a lot for conducting such programs. This will really help us to teach our children at home. It is our responsibility and thank for entire team and management of MNC for the help.
	Thanishka	Mr. R Karthi	I am very thankful to you for giving more support. She is improving day by dy by giving lot of brain stimulation. PI do the favour more. Thank you.
	Nideesh	Mr G Prakash Babu	Vey good approach from your side. I feel thankful to you for caring for my son in a special say. Requesting more support from you.

#### Key Achievements and Social Impact of Objective 2

- March 2<sup>nd</sup> 2015 – **A demonstration by students of SIET** on the selected topic for Nutrifest, (**Topic - Incorporation of Vegetables and Fruits in Daily Diet**) for children in the **age groups Birth to 2 years, 2 to 4 years, and 4 to 6 years**) and balanced diet for children with special needs.
- May 29<sup>th</sup>, 2015 – **A lecture/presentation on Nutrition** – Traditional methods was conducted by Ms. N Nachal, a activist and author of several books on organic and traditional methods of Nutrition/farming.
- July 3<sup>rd</sup>, 2015 – **An orientation for the parents about Yoga** and its advantages for the children was organized by Satyananda Yoga Centre, Chennai.
- Sept 19<sup>th</sup>, 2015 – Open Day – **54 fathers and 7 mothers** attended and expressed their concerns about their children and got feedback from the teachers.
- Jan 12<sup>th</sup> 2016 – **Counseling to the parents** by SIET staff and students on balanced diet and good dietary habits.
- March 23<sup>rd</sup>, 2016 – **Demonstration by students of SIET** to the parents on the topic for Nutrifest (**Topic: Incorporation of Nuts and Oil Seeds in daily diet.**)
- 7<sup>th</sup> July, 2016 - Mrs. Venilla Ravi, Special Educator, NIMH, addressed the parents on **Home Remedies for their children.**

- August 5<sup>th</sup>, 2016 – Dr. Jayam Memorial Lecture by Dr. Mangayarkarasi of Perinatal Research Foundation, Chennai. She spoke to our parents about **breast feeding, safe pregnancy and good hygiene during pregnancy.**
- August 11<sup>th</sup>, 2016 – Dr. Seshadri and Ayurvedic Physician in the city gave an introductory lecture on “**Indigenous Medicines and Home Remedies.**” The interactive session saw almost all the mothers asking him tips for mild day to day problems of their children. The take home information from this session was very valuable for the mothers who noted down the tips on paper at the end of the session.
- August 16<sup>th</sup> and 17<sup>th</sup>, 2016 – Presentation by Mrs. Neeraja Raghavan a teacher educator and founder of an organization called **Thinking Teacher which works with schools** to help teachers identify their problems and work their way to solutions. The idea was to de-stress teachers, enhance their efficacy and thus benefit students. All parents too attended the session as parents are the teachers of their children.

#### **Social Impact**

- Developing the Parenting Skills in the parents has led to their Empowerment as partners in the training program of their child, at MNC
- Parents become the spokespersons to the community at large on the importance of early intervention.
- They become role models to the community at large, which helps other parents in similar situations to handle disability in the family.

#### **Objective 3 - Creating Awareness on the Importance of Early Detection / Early Intervention by**

##### **1. Hosting Conferences, Lectures and workshops**

MNC organized the **12<sup>th</sup> National Workshop** on Early Intervention in Mental Retardation and Associated Disabilities on the dates 20<sup>th</sup> and 21<sup>st</sup> November 2015 at the Pastoral Centre, Mylapore, Chennai. **Distinguished experts of national and international repute** from areas of special education, medicine, Para- medicine, therapeutics, human resources, and child's right advocacy formed the faculty members of the workshop. **About 120 delegates** drawn from several walks of life attended the workshop. The theme of the workshop was “**Preparing for Holistic Inclusion into Mainstream Communities through Early Intervention in Mental Retardation and Associated disabilities**”. The theme was presented under the topics:

- Ingredients for successful inclusion in preschools
- Preparing children with autism for Inclusion and Mainstreaming

- Early Intervention – key to successful Inclusion and Mainstreaming
- Sharing experiences from Mainstream teaching staff
- Making Employability a possibility – Experiences of a Cross disability placement organization
- Role of Government as a model in making Inclusion happen
- Inclusion in early years in mainstream school – Making it happen
- Parents perspectives – Inclusion towards employment

The deliberations of the workshop was translated into a set of recommendations and the same was handed over to the State Commissioner for the Differently Abled Dr. K Manivasan and a copy was sent to the Rehabilitation Council of India and the Ministry of Social Justice and Empowerment for use while drafting Government policies for the differently abled.

**The 5<sup>th</sup> International Conference and the 13<sup>th</sup> National Workshop** was conducted from the 17<sup>th</sup> to 19<sup>th</sup> November 2016, at Hotel Savera, Chennai. The theme of the Conference was “Early Intervention in Mental Retardation and Associated disabilities in the age group birth to six years”. The theme Early Intervention was presented under the heads:

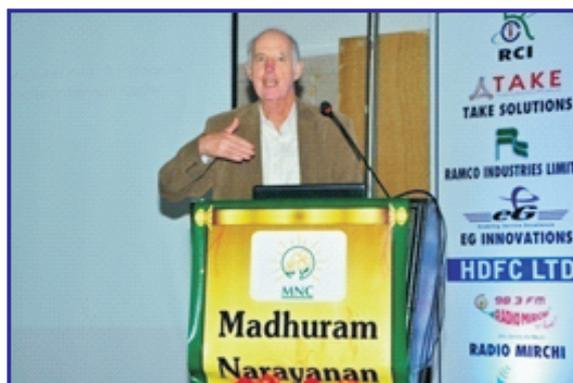
- **Research** : Recent trends in Prevention, Early Detection and Identification of Disabilities – In the laboratory and from clinical practices
- **Programs and Innovations** in Methodologies in the provision of Early Intervention Services
- **Interventions for children** with multiple disabilities
- **Facilitating adaptive behaviors** in Activities of Daily Living : Interventions with therapeutic inputs
- **Needed Value Additions** to the Individualized Education Plan
- **Continuing Outcomes** – Right to Education – Creating a conducive environment
- **Early Intervention Services** – Learning experiences from our neighbors
- **Information technology** in the Provision of Early Intervention Services

The keynote address of the conference was delivered by **Prof. George Baroff** on “**Early Identification of Children at High-risk for Autistic Spectrum Disorders (ASD)**”. It was a recorded audio presentation and outlined the importance of early identification of ASD and major indicators of ASD risk in infants and young children. The following three workshops which formed part of the conference were well received by the audience:

- **Active Participation of Families in Early Intervention Programmes**
- **Development of Executive Functions and Goal Directed Behavior in Children with Down Syndrome**

- **Making Inclusive Education effective in Mainstream Classrooms – responding to the challenge”**

The deliberations of the conference were presented to the State Commissioner for the Differently Aabled Mr. Murugaia to be used while framing policies for the disability sector. About 200 delegates across India participated in the conference and made it a grand success.



Prof. Peter Farrell conducting his workshop at the 5<sup>th</sup> International conference

#### **Workshops/Lectures/and training sessions attended by MNC staff**

- July 4<sup>th</sup>, 2015 – An **orientation programme for teachers in Yoga** was conducted by the Satyananda Yoga Centre, Chennai.
- Feb 15<sup>th</sup> – 19<sup>th</sup>, 2016 – Mrs. Revathy Kannan attended a workshop at Vidya Sagar on **”Communication for children with Multiple Disabilities – Voice and Vision”**.
- Mrs. Revathy Kannan and Mrs. A Sumathi two of our senior special educators attended a workshop on **“Supervisory Skills”** at the Karl Kubel Institute, Coimbatore.
- June 27<sup>th</sup>, 2016 – Mrs. Premila Devi, Special Educator attended a workshop on **“Sensory Integration for children with Special needs”**.
- June 25<sup>th</sup>, 2016 – Ms. Revathy Kannan attended a workshop on **“Feeding Challenges in Children with Special Needs”** at State Resource Training Center, Chennai.
- March 6<sup>th</sup> and 7<sup>th</sup> 2017 – Mrs. Premila Devi, Special Educator attended the **“Voice and Vision Workshop”** at Vidyasagar.
- Mrs. Sumathi and Mrs. Muthuperianayagi attended a workshop on **'Behavioral Analysis in Children with Autism'** conducted under the auspices of Tech Mahindra Foundation at the SPASTN premises.

### Memorial Lectures

The third AVMVK Memorial lecture was delivered by Dr. Partha Pratim Majumder, Director, National Institute of Biomedical Genomics, Kalyani (Near Kolkatta) and Head of the Department of Human Genetics, Indian Statistical Institute, Kolkatta. His lecture was on the topic “Perspectives on Exceptional Children through the lens of genes”. He spoke at length about the genetic aspect of disabilities and how genomics is trying to find solutions to cancer through protein inhibitors that stop cell growth. He explained that the future of cancer medicine is in genomics. He stressed that Genetics-driven transition from reactive medicine, based on disease, to a predictive and preventive centered on health is discernable in the near future. The audience was privy to his latest efforts at his lab and the lecture was very interesting and informative.



Dr. Partha Pratim Majumder giving the memorial lecture and being honoured by Mr. N Kumar, Vice Chairman of Sanmar Group

### Training Sessions Conducted by MNC

- Jan 30<sup>th</sup> to 17<sup>th</sup> March 2017 - Five Day Training for Special Educators / Therapists of Sarva Siksha Abhiyan in the **Implementation of Upanayan Early Intervention Programme**. 255 eligible candidates were identified from the 85 EIC in the district block levels all over TN. They were distributed in eight groups of 30 candidates each
- July 27<sup>th</sup> – 31<sup>st</sup>, 2015 – Training programme in the **implementation of Upanayan Early Intervention Programme** for the Special Educators of the Government Early Intervention Center at State Resource Center for Inclusive Education, No: 82, 4<sup>th</sup> Trust Link Road,, West R.A. Puram, (Near Amma Unavagam), Santhome, Chennai – 600 028. Subsequent to this the SRC staff visited the center for practical training on the 10<sup>th</sup> and 15<sup>th</sup> of July 2015.
- The **mentoring programme** for EIC in the State Resource Centre for Inclusive Education, Santhome campus continued till November 2015. Every week two special educators visited the EIC and helped the special educators there to assess, evaluate and record the progress of the children.

- Feb 8<sup>th</sup>, 9<sup>th</sup>, 10<sup>th</sup>, 2016 - Bala Mandir Research Foundation conducted a **Parenting Conference** at Hotel Palmgrove. Mrs. Jaya Krishnaswamy, Mrs. Andal Raghavan and Mrs. Vimala Kannan presented papers.
- March 28<sup>th</sup> to April 2<sup>nd</sup>, 2016 - Madhuram Narayanan Centre had been selected for conducting the **Refresher course to Special Educators of the Government nominated Early Intervention Centers** all over Tamilnadu, at MNC. The course was conducted at the Centre this year. The objective of conducting the course at Chennai is to facilitate Special Educators to observe the implementation of Upanayan Early Intervention Programme at Madhuram Narayanan centre first hand. This gave them an opportunity for hands on experience in the implementation under the guidance of the MNC Special Educators. The trainees of the districts were grouped under 4 clusters
- March 30<sup>th</sup> and 31<sup>st</sup>, 2016 – Under the auspices of the State Resource Cum Training Centre, Madhuram Narayanan Centre conducted a one day training programme on “Behavioral **Analysis in Children with Special Needs**” for special educators in two batches
- March 1<sup>st</sup>, 2016 – Under the auspices of the State Resource Cum Training Centre, Madhuram Narayanan Centre conducted a one day training programme on “**Prevention of Disabilities**” for the students of the Madras School of Social Work.
- March 20<sup>th</sup> to April 2<sup>1st</sup>, 2017 - Madhuram Narayanan Centre had been selected for conducting the **Refresher course to Special Educators of the Government nominated Early Intervention Centers** all over Tamilnadu, at MNC. The course was conducted at the centre this year. The objective of conducting the course at Chennai is to facilitate Special Educators to observe the implementation of Upanayan Early Intervention Programme at Madhuram Narayanan centre first hand. This gave them an opportunity for hands on experience in the implementation under the guidance of the MNC Special Educators. The trainees of the districts were grouped under 4 clusters.

***Feedback from the Participants of the Refresher Course :***

***1. Parents participation***

- *The very fact that the mothers work along with the children in such a close manner was very inspiring to us.*
- *It was interesting to note the way the mothers communicate with their special children at the centre*
- *The way to communicate the goals and the related skills to the parent was taught to us, which we think is a very useful lesson.*
- *Training to counsel parents will be very useful.*

## **2. Visual Stimulation**

- *IEP in visual communication was a new concept for us.*
- *The visual stimulation and sensory integration provided at NIEPMD was new to us and we are thankful for the field trip arranged by MNC.*

## **3. IEP and its importance**

- *We have attended many Refresher courses, but this was the best as we worked practically with 2 children and got hands on training in both writing and implementing the IEP. The MNC special educators were present by our side and this was a boon to us as they would correct us the moment we made a mistake and explain the right way to do things.*

## **4. Class time table**

- *The time table being written for every child and for every class was excellent and made things easier for the child and the teacher. We learned this procedure and will follow the same in our centers.*

## **5. The Values gained from the Refresher course over the years**

- *The pattern of the Refresher course in brining the teachers to MNC and providing an opportunity to get trained hands on in IEP/Group Teaching/Lesson Plans etc is the best method for us. We could clear out doubts then and there and this practical session is more enriching to us than theory classes.*
- *The Refresher course conducted in 2017 was by far the most useful for us. We were able to learn about teaching and learning materials and it was all very new to us.*
- *We look forward to such Refresher Courses in future.*
- *This Refresher course afforded us the chance to write IEP on our own and implement the same.*
- *Every day of the Refresher course was a day to learn new and useful things for us.*
- *The Refresher course was a real motivation for us. The teaching methods adopted here are new and the opportunity to learn them was the highlight of our course.*
- *Big thanks for MNC for teaching us new things. It has become a practice for MNC to teach us new things every year.*
- *MNC is doing such a good job that it is time they started vocational center/schools, special schools for children above 6.*
- *Innovative / Educative / Impressive / Motivating. Encourages us to apply the same in our institutions.*

- *Very useful and educative.*
- *If the course is conducted in Jan/Feb when the children do not have exams it will be very useful for the candidates.*

#### **6. Programme implementation**

- *The Upanayan Check list was explained to us in detail.*
- *The teaching materials / equipment used in MNC/NIEPMD was very effective and if our centers can get equipment like that we would be happy*
- *The punctuality followed here is worth following in our centers.*
- *The Montessori section is very good. The teaching and learning materials are arranged in a very good way.*

#### **7. Experiential learning**

- *SAMBHAVAM – This project of MNC was very appealing to us. Both the parents and the children enjoyed their trip to the park.*

#### **8. Accreditation**

*If this training course is accredited by RCI then that will be the best thing.*

#### **1. Media Coverage**

**Press interviews and Television Programs** – All events celebrated are covered by the leading dailies of the city like The New Indian Express, The Hindu, Deccan Chronicle and regional newspapers. During the year 2015-2016 – 3 articles appeared in the papers and during the year 2016-2017 – 17 articles appeared in the newspapers about the center.

1. The Hindu, 18.11.2016
2. Times of India, 18.11.2016
3. New Indian Express, 18.11.2016
4. New Indian Express, 19.11.2016
5. Deccan Chronicle, 19.11.2016
6. DT Next – 18.11.2016
7. The Hindu Tamil – 18.11.2016
8. Dinamani, 18.11.2016
9. News Today, 19.11.2016
10. Andhra Jyothi, 18.11.2016
11. Sakshi, 18.11.2016
12. Vartha, 19.11.2016

13. DT Next – 17.11.2016
14. Dinamalar – 17.11.2016
15. The Hindu, 15.11.2016
16. New Indian Express, 15.11.2016
17. Times of India ,15.11.2016

### Tribute to Saint Teresa

The Early Intervention Programme Upanayan was released by **Saint Teresa on 27<sup>th</sup> July 1992** at Kolkatta. The journey that started there has come 27 years and 5700 children far and we are happy that we are here despite the arduous path.

**We strongly believe that her blessings helped us reach here and as a tribute decided to release a special cover and stamp in her honor.**

On the 17<sup>th</sup> November 2016, evening, at the Samavesh Hall of Hotel Savera, Post Master General (Mails and BD), Chennai Circle, Mr. J T Venkateswarlu, released the cover and stamp. The first copy was received by Mr. N Sankar, Chairman, Sanmar Group of Companies in an august gathering



The Special cover and the Mystamp released

It was as dramatic as the release of Upanayan. The hall was packed as Mrs. Jaya Krishnaswamy read out a small message recounting her experience on that day in 1992 when Upanayan was released. On the giant screens on either side of the dais, the small clipping of Mother Teresa releasing the book was running and Mr. J T Venkateswarlu got up to release the cover. Everyone seeing the short telecast could feel the divine presence of the Mother, and lo as she handed the Upanayan in the short documentary video clip, Mr. Venkateswarlu handed over the first copy of the cover and stamp to Mr. N Sankar. The press rushed in to record the moment for posterity and slowly the emotions turned normal. A befitting tribute to our revered Mother.

**More than a dozen newspapers covered the event which created a lot of awareness on the Early Intervention Programme Upanayan and about MNC.**

**3. Communication** - Bringing out 'Kalpatharu' a bi annual in house magazine, reaching out to about 400 people.

**4. MNC Website**

**MNC Website**– [www.mncindia.org](http://www.mncindia.org) - The website provides comprehensive information on the services that we provide, the projects that support the early intervention programme, details of events, celebrations and photographs that give a glimpse of the functioning of the center. Apart from information on activities, an online contact form is available which enables public to send queries to the center. The yearly workshop information and a downloadable registration form are provided for delegates to register online. The website is updated regularly.

### **Key Achievements and Social Impact of Objective 3**

#### **Key Achievements**

- **Two Hundred and Fifteen special educators** (from the 32 districts in Tamil Nadu **109 in 2015-2016**, and **106 in 2016-2017**) have undergone the refresher course for trainers during **2015-2017**.
- Dissemination of information has been achieved by conducting **five international conferences** and **thirteen national workshops** during the last few years the proceedings of which have been circulated to all key stakeholders.
- The number of delegates who participated in the Twelfth National Workshop in November 2015 was **94** and the number of delegates who attended the 5<sup>th</sup> International Conference and the thirteenth National Workshop was **165**. **Both the events had accreditation from the Rehabilitation Council of India.**
- This information has also been published in the national press, MNC website and our in-house journal '**Kalpatharu**' - a bi-annual publication with 400 copies circulated

### **Social Impact**

- The media coverage of the various conferences/workshops/functions conducted at the centre sensitizes the community at large on the concept of Early Intervention in Mental Retardation and Developmental delays.
- During this social audit period 48 children were referred to the center by the parents, 33 by well wishers, 49 by professionals, 212 by doctors and 51 by others like therapists, care givers and people who are familiar with MNC, reflecting the awareness created about Early intervention.

### **Objective 4 – Outreach Programmes**

The objective is based on the Vision Statement – to reach out to every child with Intellectual Disability and provide Early Intervention. MNC partners with both the State and Central Government in establishing the EI centers and also mentoring. MNC also supports other organizations in setting up EICs and also provides need based support on a continuing basis.

- **Government Early Intervention Centre**

The Government of Tamilnadu with a vision on the need and importance of Early Intervention Centers for Children with mental disabilities planned for Early Intervention Centers to be established one in each district in the year 2007. MNC was identified by the office of the State Commissioner for the Disabled Persons, Government of Tamilnadu as the Non-Governmental Organization (NGO) to start an Early Intervention Centre at Chennai, and is a beneficiary of their aid to support such a programme. As on date, 40 children have been enrolled at the Government Early Intervention Centre, located in our premises. The facilities that MNC children enjoy are all extended to them. Apart from Intervention through *Upanayan* they are included in Therapy, Yoga, Nutrition projects of the Centre, Outings, and Medical Check up and get to participate in all MNC functions.

### **Early Intervention Centre for Autism/MR at State Resource Training Centre at K K Nagar, Chennai**

In the year 2012 the State Commissioner for Differently Abled, had selected MNC to establish an Early Intervention Centre for Autism/Mental Retardation at State Resource Training Centre, K K Nagar, Chennai 600078. 25 children are enrolled in this centre from nearby and far off places. MNC is the mentor for the centre. The special educators and staff have been trained by MNC in the implementation of Upanayan Early Intervention Programme. Weekly visits by the senior special educators of our centre ensures that Assessment forms are filled properly, Individualized Education Programmes have been drawn up properly and implemented in the right way. Evaluation is done periodically by the Principal or the Coordinator Programme Implementation and recorded. The progress of the children is monitored for mainstreaming. Special educators are included in the refresher courses conducted by MNC and they bring their problems to MNC for solution

- **Sarva Siksha Abhiyan**

During the period June 2015 – May 2016, a memorandum of agreement was signed between the State project Director, Sarva Siksha Abhiyan, Tamilnadu and MNC for “**Capacity building of personnel of the State Resource Center for Inclusive Education (SRC-IE)** for Children with Special Needs for assessment and intervention for disabilities/developmental delays in children aged 6 years and below. UNICEF supported SSA by funding the project. *The project consists of a training and support programme and would hand hold and enable the SRC-IE staff through the model routines, information system development and innovative methods out of MNC's rich expertise on children assessment, profiling, guidance and counseling parents, referral to therapeutic practices and inclusion into Individualized Education Programme as well as development of basic skills in pre-vocation for the 10+ age group at middle school level. The early intervention programme will facilitate children 6 years and below and their transiting into the mainstream education system. Through Upanayan model MNC will meet these needs.*

MNC undertook a yearlong programme of support to the SRC staff with the following objectives:

- Train SRC personnel in the indigenously developed Upanayan program and its implementation
- On-the-job coaching of the personnel in the process of implementation
- Train them in the documentation of data for evaluation and progress
- Develop systems for effective feed-back and controls

In the long run the expected outcome of this exercise was to have a system in place at the State Resource Center Intervention Center enhanced by Information Communication Technology tools. The SRC – IE personnel were expected to master strategies for implementation of convergent services from pre-school to elementary and sustain the service practices offered to Children with Special Needs as parts of SSA's initiatives. The programme would also help the SRC staff develop a model, demonstrate and train resource personnel from the cluster and Block Resource Centers for CWSN (**Children with Special Needs**) operated by SSA in the state. The outcomes of the project were:

- Attainment of necessary skills by 20 Special Educators of SSA in assessment of children aged 6 years and below for developmental delays / disabilities
- Establishment of Early Intervention Centre in SRC-CWSN, Santhome
- Creation of data base of assessed children using **Information and Communication Technology** tools. (ICT)
- A 100% screening of all children who come to the SRC-IE center

- Follow up of all assessed children, management of such children with developmental delays along with rehabilitation services and intervention
- The above activities to become part and parcel of SRC-CWSN services



Unicef, MNC and SSA visit SRC EIC

***A tweet of Appreciation by Ms. Farough Foyouzat, Chief of Field Services, UNICEF India***



*"I met Sudha and her son, Master Bharat, on a recent visit to Chennai at an Early Intervention Centre run by Sarva Siksha Abhiyan. These centers offer services to infants with disabilities and their parents to offset the impact of the disability or delay. Everyday Sudha travels 20 Kms to get to the centre where her son is enrolled. I asked her why she makes the effort every day, and she replied 'because I can see how much my son has progressed. The simple exercises they teach do work -*  
***Tweeted Ms. Farough Foyouzat, Chief of Field Services, UNICEF India***

*UNICEF has been supporting an early intervention initiative by the personnel of the State Resource Centre for Inclusive Education at Santhome. This Centre was set up by SSA jointly with Chennai Corporation to serve children with disabilities. The personnel at this centre volunteered to offer early intervention strategies to children*

and parents under 5. This age group is not under the mandate of SSA, but all SSA personnel, including the SPD, (State Project Director) supported the SRC personnel in their effort. With Maduram Narayanan Centre's expert guidance, SRC staff have been offering parents and children holistic early intervention since June 2015. This is additional work but the personnel of SRC have willingly taken it up. UNICEF has supported this effort for the past year. **On 7 April 2016, Ms. Foroogh, Chief Of Field Services and Ms. Henriette, Deputy Director, Programs, India Country Office, UNICEF Delhi visited the Centre and interacted with the parents and children, along with Mr. Nagaraja Murugan, Joint Director, SSA, Chennai.**

**Mrs. Umamageswari**  
**SSA-IED**  
**Chennai**

*This is the best thing that happened to SSA. The seed for an Early Intervention centre was sown by the then Chief Minister Mrs. J Jayalalitha. The Hon'ble Chief Minister of Tamil Nadu in the year 2012 made a special announcement in State Assembly that emphasized setting up a **State Resource Centre for Inclusive Education in Chennai** with facilities that primarily focus, augment personalized learning, and create equal opportunities, access to educational needs and vocational training of all those Children with Special Needs. When UNICEF came forward to fund the project we had short listed two or three Institutions to provide training and help us establish the State Resource Centre for Inclusive Education. After deliberations our choice was Madhuram Narayanan Center. We have had very good experiences with them in the past and had attend refresher courses, and other training program, National Workshops, conducted by them. Moreover the **Upanayan Early Intervention Programme** used by them was familiar to us. So we zeroed in on MNC. The sincerity in establishing the center with materials, the intensive training given by the MNC staff and their mentoring for a year was a great help. The SRC EIC now functions independently and serves the under privileged children as envisaged by the CM. SSA hopes to take this forward and effectively run more EICs at block level.*

**Mehtva Special School at Kalpakkam** – This special school has benefitted by the guidance from MNC for its entire programme since 1995, through regular evaluation of the implementation of the Early Intervention Programme. This is carried out on a quarterly basis.

**Disha Learning Centre, Alwarpet, Chennai** – The object of the visits once in two months is to provide consultation on how to complete case history, training in assessment and selection of goals and objectives and evaluation. This work is being carried out since 2013.

Given below is the list of institutions/organizations covered in our outreach programmes

Institutions/organizations	State/Central Private	No. of centers	No. of children covered	Special Educators/ Therapists
Tamilnadu Dist Early Intervention Center at MNC	State Govt.	1	43	4
Tamilnadu Dist Early Intervention center for Autism at SRTC, K K Nagar	State Govt.	1	10	2
Tamilnadu Dist Early Intervention center for MR at SRTC, K K Nagar	State Govt.	1	15	2
Disha Learning center	Private	1	7	1
Mehtva Special School, Kalpakkam	Private	1	15	6
<b>TOTAL</b>		<b>5</b>	<b>90</b>	<b>15</b>

***The ultimate outcomes of a successful Early Intervention Programme is:***

- *Developing Adaptive Behaviors in Activities of Daily Living, age appropriately*
- *Assisting parents and family members, siblings in the care and management of the child*
- *Empowering the child to adapt in an inclusive community*

*This is what MNC aims at.*

***Mrs. Sarojini  
Group Head***

**Reaching the benefits accorded by the Government of Tamilnadu to the Differently Abled Children of MNC.**

**Unique ID for Disabled persons issued by:**

**Department of Empowerment of Persons with Disabilities, Ministry of Social Justice & Empowerment**

“Unique ID for Persons with Disabilities” **UDID (Unique Disability ID)** has been implemented in 2016 with a view of creating a National Database for PwDs, and to issue a Unique Disability Identity Card to each person with disabilities. The project has been envisaged to encourage transparency, efficiency and ease of delivering the Government

benefits to the persons with disabilities and ensure uniformity. The project is also expected to track the physical and financial progress of the beneficiary at all levels of hierarchy of implementation from Village level, Block level, District level, State level and National level.

The Objective of this project is to enable the PwDs to obtain the new UDID card / Disability Certificate to avail schemes and benefits provided by the Government through its various Ministries and their Departments. This card will be valid pan-India. The UDID portal shall be designed to provide an online platform for the following:

1. New application for UDID
2. Renewal of existing Certificate / Card on expiration of validity or in the event of loss of card/certificate

In addition to the above, the UDID Portal shall also provide information on the various schemes/benefits, procedures to apply for Disability Certificate/UDID Card, Success Stories, Suggestions/Feedback, Manuals etc. The UDID card shall bring a host of benefits to the Persons with Disabilities as given below:

Persons with disabilities will not need to make multiple copies of documents, maintain, and carry multiple documents as the card will capture all the necessary details which can be decoded with the help of a reader.

The UDID card will be the single document of identification, verification of the disabled for availing various benefits in future. The department had selected the States of Madhyapradesh, Gujarat, Odisha, Maharashtra, **Tamilnadu**, Kerala, Uttar Pradesh and Chattisgarh **in the first phase. So it became imperative for our students to get themselves registered on the portal within a very short time – a few days to be exact.**

Children, who had disability cards issued by the Commissionerate for the Welfare of the Differently Abled, had to register immediately in the new format and in the biometric process for the UDID. **MNC administration staff helped 78 children register themselves within 2 days of portal being open for public registration.** The department of differently abled now issues disability certificates in the new format and since it is on line and contains all the necessary details the parents are spared the difficulty of taking multiple copies of their relevant documents and running from one place to another. The process is ongoing and new children are by default helped to register for the UDID.

### **Maintenance Allowance**

Maintenance allowance is given at the rate of Rs.1,500/- per month to the severely Differently Abled persons who cannot be rehabilitated by any other assistance. The Allowance is sent through “Core Banking system” to their bank account. Parents seek assistance from the **MNC office** to apply for the maintenance grant and all children at MNC who are eligible for this assistance receive the same. Considering the practical problems like lengthy documentation, visits to the concerned office with the special child

in tow, MNC has taken the initiative to take care of all the formalities, and ensure that the benefits reach the beneficiaries on time.

### **NIRAMAYA – Health Insurance Scheme**

The Government of India has introduced w.e.f 2015 Niramaya Health Insurance Scheme for the benefit of persons with disabilities.

#### **Scheme Description**

The scheme envisages delivering comprehensive cover which will

- Have a single premium across age band
- Provide same coverage irrespective of the type of disability covered under the National Trust Act
- Insurance cover upto Rs. 1.0 lakh, on reimbursement basis only.
- All persons with disabilities under the National Trust Act with valid disability certificate will be eligible and included.
- No pre-insurance medical tests
- Treatment can be taken from any hospital.

MNC has been helping parents in getting coverage under the Niramaya Scheme, in filing their claims, and follow up services till settlement.

#### **Benefits offered by the Central Government under the scheme:**

<b>Description</b>	<b>Amount Sanctioned</b>
<b>Overall limit for Hospitalization - Rs. 70,000</b>	
1. Corrective surgeries for existing disabilities	40,000
2. Non surgical hospitalization	15,000
3. Surgery to prevent further aggravation of the disability	15,000
<b>Subtotal</b>	<b>70,000</b>
<b>Overall limit for Our Patient Treatment - Rs.14,500</b>	
1. OPD treatment including medicines	8,000
2. Regular medical check up	4,000
3. Dental Preventive check up	2,500
<b>Subtotal</b>	<b>14,500</b>

Ongoing therapies	10,000
Alternative medicines	4,500
Transportation	1,000
<b>Total</b>	<b>70,000+14,500+10,000+4,500+1,000 = Rs. 1,00,000</b>

#### **Bus Passes/Train Concessions for Travel within the City/State**

Bus passes to travel to and from the school within the city, and bus passes to travel within the state are procured for the children and their attendant. Concessions on trains at 20% of the fare are also procured for parents who make a request at the admin office. The parents are counseled to benefit from all the above schemes. Announcements in the morning assembly, regular meetings with the parents ensure that all the parents are aware of the benefits due to them from the governments and that they have taken the right steps to procure them.

#### **Aadhar Cards**

The purpose of the Aadhaar was to make it simpler for people to avail government subsidies and have one number that would work as proof of address and proof of identity. As far as differently abled persons are concerned Aadhar has become mandatory for all benefits and MNC helps every parent who comes here to procure Aadhar for their children.

#### **Children helped to obtain benefits offered by the Government during the period 2015 -2017**

Type of facility availed	2015-2016	2016-2017
UDID	102	91
Bus Passes	35	37
Maintenance Grant	101	90
Midday Meals	35	35
Niramaya Insurance Cards	35	35
Aadhar cards	64	71

#### **Economic Impact per child accrued by helping children obtain Government benefits**

**(Approximate value)**

<b>Benefits</b>	<b>Cost per annum</b>
Maintenance Grant Rs.1500 per month 12 months x Rs.1500	Rs. 18,000
Bus Pass average Rs.20/- per trip Rs. 20 x 2 trips per day x 22 school days x 12 months x people (beneficiary and parent)	Rs. 21,120
Midday Meal scheme Rs. 10/- per meal Rs.10 x 22 days x 12 months	Rs. 2,640
<b>Total</b>	<b>Rs. 41,760</b>

#### **Key Achievements and Social Impact of Objective 4**

##### **Key Achievements**

- The Tamil Nadu state government has recognized Upanayan Early Intervention program and has adopted the same for implementation in all the 32 districts of the state
- The State office of the Sarva Siksha Abhiyan mooted by the Central Government has chosen MNC as its partner in curriculum adaptation and training their teachers/special educators.
- Upanayan Early Intervention program package has been chosen by the following institutions/centers for implementation:
  1. All the Government Early Intervention Centers in Tamilnadu
  2. Asha Speech and Hearing Clinic, No. 15/76, Old Rajender Nagar, New Delhi 110060
  3. Holy Cross College, Madurai Road, Tiruchirappalli, Tamil Nadu 620002
  4. Ramakrishna Mission Vivekananda University (RKMVU) Coimbatore
  5. Sarva Siksha Abhiyan, Project Office, Chennai for their Early Intervention Centers
  6. The Department of Special Education, ICFAI University, PO Kamalghat, AGartala- Simna road, Tripura 799210
  7. The Department of Special Education, Christian Medical College, Vellore 632004
  8. Ritham Special School, Rajapalayam

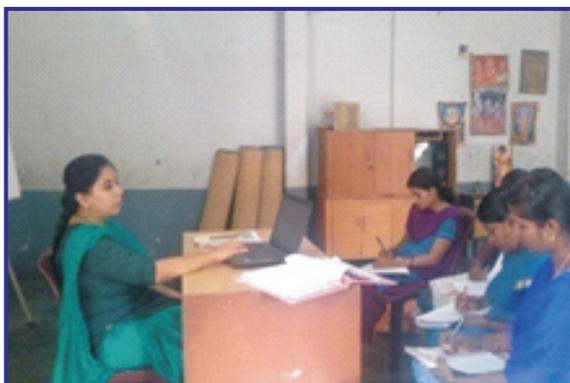
### **Social Impact**

- Successful in creating awareness about prevention, early detection of disabilities and early intervention for children diagnosed with disabilities
- The existing Government health delivery mechanism has been effectively used to reach these services to remote villages
- The parents of the children coming to MNC are fully sensitized to avail all the benefits given to them by the State and Central Government and the centre offers help in obtaining these benefits.
- MNC has been able to help the Government in providing useful inputs in evolving policy decisions in the field of disability.

### **Objective 5: To Establish a Training Center**

- **To conduct accredited courses of the Rehabilitation Council of India, towards increasing the number of special educators in the country**

For the last three decades there has been a steady increase in the awareness of Intellectual disability(MR) and developmental delays in children. Many institutions have been established that offer early intervention to such children. The increase of Special educators meanwhile has not been in tune with the increase of these institutions. MNC sensed this dearth of Special educators and to bridge the need decided to offer accredited courses in Special Education.



Students of our diploma course attending class

### **AVMVK Training Academy**

The launch of AVMVK Training Academy, an academic wing of MNC, in memory of our Founder Director Air Vice Marshal V Krishnaswamy on September 5<sup>th</sup>, 2012 is an important landmark in the history of MNC. MNC applied to the Rehabilitation Council of India to conduct Diploma course in Early Childhood Special Education (MR) in 2012 and has been given approval till March 2018. As per the norms of the RCI, a course coordinator was appointed. The faculty consists of qualified staff and visiting experts from the areas of Physiotherapy, Family Intervention, Medicine, and Speech Therapy.

### **Key Achievements**

***During the year 2015-2016 two of our students stood first and second in the country in the DECSE exam conducted by the Rehabilitation council of India.***

***Eight students during the year academic year 2015-2016, 5 students during 2016-2017 have successfully passed the Diploma Course. (DECSE-MR). All the 13 students passed with distinction. (RCI approval to conduct Diploma Course – Annexure)***



Mrs. Gauri Anantraman (Picture 1) and Mrs. Satya (picture 2) who bagged the All India first and second rank respectively in the DECSE(MR) receiving her certificate of merit from Dr. S Geethalakshmi, VC, The TN MGR University and Mr. N S Kang, Secy, GOI, DEPwDs, MSJE

### **Faculty Speak**

*The event “Assessment & Training of Children with Visual Impairment and Additional Disabilities” was attended by students of Diploma course at MN, and the special educators. The training started with an orientation of anatomy and physiology of eye, process of seeing and conditions & diseases causing visual impairment. Second session described the functional difficulties and definitions of visual impairment. In this session the participants marked the various conditions causing the visual impairment in the eye diagram and explained the functional difficulties of overall blurred vision, peripheral field loss and central field loss. Later the definitions were explained with distant visual acuity charts and field loss diagrams. The participants tested distant and near vision among themselves and recorded the scores. Participants were grouped into 4 and each group presented 5 cases with interpretation of conditions and relevant functional difficulties. The second day was devoted to describing the components of vision – Oculomotor skills, distant and near visual acuity, visual field, color vision, contrast sensitivity and visual perceptual skills. The following session described the assessment tools, criteria for assessment,*

*process of assessing the child and recording assessment results. The last session dealt about how to provide vision intervention, vision stimulation, visual skills and visual perceptual skill training. Every group prepared one vision stimulation material and presented to the vision department of the center. I am very sure that the participants understood the concepts taught very well.*

*Mrs. Deiva Jayaraman*

*Consultant – Vision Rehabilitation - Frontline Hospital and Faculty for Diploma Students*

### **Staff recognition:**

#### **Award of Excellence**



*MNC has initiated an **Award of Excellence** to honor staff who have gone beyond their call of duty to help the center in its functioning. The first such award went to Miss C Thenmozhi, Special Educator, who looks after the children of 4 – 6 years. She has been given this award **for her 'exemplary performance in the implementation of upgraded 'Upaneeta' software program at MNC. This award recognizes her leadership quality exhibited during the process of implementation. In addition it also recognizes her ability to effectively co-ordinate with all concerned.'** Here is what she said after receiving the award:*

*'This takes me by surprise and is a proud moment for me and I thank the management for getting the best out of me trusting my capabilities. As a team, my colleagues pitched in with me at all times of difficulty - many a time staying late hours, debating the formats and generally participating in all brain storming sessions that went into the implementation of Upaneeta. Team work made it possible and I take this award for my team. Sure it motivates me to deliver my best in future challenges and opportunities' said Thenmozhi.*

*Vaijyanthi Desikan  
Admin*

## 8. KEY ACHIEVEMENTS FOR THE PERIOD 2015-2017

- **About 1500 children** are presently undergoing ' Upanayan Early Intervention Programme' in Tamilnadu.
- The total number of children impacted by **Upanayan Early Intervention Programme at MNC** during the accounting years 2015-2016 is 128 and 2016-2017 is 114.
- The software Upaneeta was upgraded and all classes were equipped with Laptops/desktops so that the Special Educators may enter the data. The drudgery of manual recording has been reduced to a great extent facilitating minimum human errors
- On completion of the Early Intervention program **23 children out of 242 enrolled between April 2015 and March 2017 that is 10% (2015-2017– 2 accounting years) have been mainstreamed – 13 have joined regular mainstream schools, 10 have joined other special schools.**
- **Eight students** of the 2015-16 batch of the AVMVK Academy passed in distinction. **Mrs. Gauri Anantraman secured the first place in the country while Mrs. Satya bagged the second place.**
- **Thirteen students out of which 8 MNC parents** have gained professional qualifications by pursuing a diploma in Early Childhood Special Education (MR) at the AVMVK Academy between 2015 -2017 and five of them are employed in MNC.
- Out of the 60 children selected for the Project Annapoorna, 60 children showed an increase in height or remained static, 44 children showed a rise in Hb , and 5 children showed a improvement in weight.
- **Two Hundred and Fifteen special educators** from the 32 districts in Tamilnadu have undergone the refresher course during the period 2015-2017 in implementing the Upanayan Early Intervention Programme.
- The number of delegates who participated in the Twelfth National Workshop in November 2015 was **94** and the number of delegates who attended the 5<sup>th</sup> International Conference and the thirteenth National Workshop was **165. Both the events had accreditation from the Rehabilitation Council of India.**
- Writing of the social accounts for the **fourth time** (with a gap of every two years) and subjecting the centre to a social audit brings clarity to develop more professionalized systems.
- The corpus is being consolidated towards financial sustainability
- The Rotary Club of Madras East in association with La Ambience honoured National Award **Mrs. Jaya Krishnaswamy**, Director, Madhuram Narayanan Centre for Exceptional Children with the “**Dronacharya Award**” for her singular contribution in their chosen field.

Our Principal **Mrs. Priya Rajkumar** was honored with the “**Sraina Puraskar**”, (Women Achiever) instituted by the Dr. Vera Augustus Endowment on 30<sup>th</sup> March, 2017 at Women's Christian College. This award is given annually to women achievers in different fields, who have gone beyond their call of duty in the service of others.

## **9. ECONOMIC IMPACT**

All organizations, whatever their nature, have an economic impact on their stakeholders and on the local community in which they operate. This impact can be significant and until recently was usually under-reported.

### **Creating employment**

MNC employs 32 full time staff, 6 part Time staff and 11 consultants, 3 volunteer and 8 parent helpers. The services of Volunteers are used as needed. Around Rs.60 lakhs is being paid as Honorarium to the employees at MNC. More than 80% of the workforce lives locally. (Within T Nagar)

### **Using volunteers**

Volunteers work for around 8 hrs a week for MNC's benefit. Most of them are not paid and this valuable contribution has enabled MNC to employ lesser staff.

### **Investment in Training**

Training is offered twice in a year to all the special educators and therapists – refresher training and also on the latest happenings in the field. The training is done in-house and only incidental expenses are incurred

### **Inward investment**

**The** expenses incurred by MNC are met by 15 % from Government grant 65 % corporate donors and 20 % from individual donors. Government Grants are in the form of Grant in Aid from the Ministry of Social Justice & Empowerment, Government of India, and State Commissioner for Differently Abled Government of Tamil Nadu. The government projects are aided in full by the respective Government offices.

### **Purchasing policies**

Ninety-five percent of the annual spend goes to local suppliers and 5 % to National suppliers. All purchases are made at fair trade shops and local retail vendors.

### **Contributions to the community**

The AVMVK Academy offers a Diploma in Early Childhood Special Education. The course is for duration of 10 months and many mothers who come to the center with their child join the course with twin purpose of helping their child and seeing an opportunity to work as a Special educator. The academy situated right in the center of the city offers a course which is job oriented.

Project Sambhavam wherein our children are taken out to public places along with the mothers creates a very positive effect in the community. It creates awareness among the public about disability and sensitizes the general population about inclusion of the special children in mainstream be it in regular schools or public places, where they have a right to be, and enjoy benefits.

## 10. ENVIRONMENT IMPACT

### Green Office Checklist

<b>Paper</b>	<b>Y/N/NA</b>
Are photocopies double sided?	Y
Are non-essential copies photocopied on re-used paper?	Y
To avoid mistakes, do you trial copy before printing big batches?	Y
Is scrap paper turned into useful notepads?	Y
Is e-mail used whenever possible?	Y
Are copy documents kept on disk rather than paper?	Y
Are computer printout margin sizes, fonts etc set to minimize paper use?	Y
Does the office use recycled paper?	N
<b>Energy</b>	
Does your office source any energy from renewable sources?	N
Are lights always turned off in empty rooms?	Y
Are lights turned off as soon as there is enough daylight?	Y
Are windows kept clean, free from obstructions etc?	Y
Are all lights energy efficient?	Y
Are electrical equipment, PC monitors, photocopiers etc switched off when not in use?	Y
<b>Office Supplies</b>	
Are long life products chosen over short life ones?	Y
Are materials bought in large packs to avoid excessive packaging?	Y
Do you purchase eco-efficient or "green" products? – recycled, refillable, water based ink etc.	N
Do you use paperclips rather than staples?	Y/Partly

<b>General Office</b>	<b>Y/N/NA</b>
Is the toilet paper / hand towels made from recycled fibre?	NA
Are aerosol products with CFC propellant avoided?	NA
Are dripping taps repaired quickly?	Y
Have low flush volume WCs been installed?	Y
Do you use environmentally friendly cleaning materials?	Y
Do you use washable cups rather than disposable ones?	Y
Do you purchase fair trade or organic tea and coffee?	Y
Do you purchase supplies from local shops?	Y
<b>Recycling</b>	
Is all used paper saved for recycling?	News papers are used for making paper bags
Does the office store then recycle glass, cans etc?	N
Does the office separate and compost materials?	N
Is there a paper recycling bin next to the photocopier?	Y
Does the office recycle its electronic equipment, toner cartridges etc?	Periodically
If plastic cups are used are they recycled?	N
Are you utilizing recycling opportunities by co-operating with nearby businesses?	NA
<b>Transport</b>	
If you have pool or company cars do they run on unleaded petrol or diesel?	NA
Do you have information available on prices and timetables of public transport?	Y

	Y/N/NA
Are office working hours flexible enough to allow people to use public transport?	Y
Are employees taught and encouraged to drive in an environmentally friendly manner?	Y
Is it policy to use buses for business purposes whenever possible?	Partly
<b>Health and Safety</b>	
Is fresh fruit available alongside biscuits at break time or for visitors?	Y - Butter milk / coconut water made available
Is clean drinking water available?	Y
Are house plants grown in the office to lower stress and absorb chemicals?	Y
Is sitting at the computer for long hours discouraged?	Y
Are policies on long working, safe use of equipment etc enacted?	Y
<b>Implementation</b>	
Is there a green office notice board in a prominent position?	N
Does the office have a suggestion box for environmental ideas?	Y
Does the office hold events with a green theme?	N
Does the office have an environmental policy?	N
Is there an opportunity to raise environmental issues at staff meetings?	Y
Is resource use monitored and are environmental effects audited?	Y



## 11. CONFORMANCE TO STATUTORY REQUIREMENTS

1. Registered as a Section 25 company of the Company Act 1956, Government of India issued by the Registrar of Companies, Madras. Vide their letter number 20495/CIV/S.21/97 dated 16.10.1997. ( Annexure 10)
2. Certificate of registration from the office of the State Commissioner of Tamil Nadu as an institution under Section 52 of the Persons with Disability (Equal Opportunities, Protection of Rights and Full Participation) Act 1995 valid up to 31.1. 2018. (Annexure 11)
3. Financial Audit report for the assessment year 2016-2017 has been filed with the Registrar of Companies
4. Board meetings with adequate quorums were held during the accounting years 2015-2016, 2016-2017.
5. School recognition certificate issued by The State Commissioner for the Disabled, Tamil Nadu validated up to 31.1.2018. (Annexure 12)
6. No objection certificate issued by Fire Safety Department valid till 28.2.2018.
7. IT returns for the assessment year has been filed for the assessment year 2016-2017.
8. Approval under Section 80 G (5) (vi) of the I.T. Act, 1961
9. Valid FCRA ( Foreign Contribution Regulatory Act ) registration from the Ministry of Home Affairs , Government of India



## 12. KEY ASPECTS CHECK-LIST FOR SOCIAL ACCOUNTS

This check-list has been devised to allow organizations to report simply on the Key Aspects of the organizations

<b>1. Human Resources</b>		
<b>1.1 Number of Employees</b>	<b>Y/N/NA</b>	<b>Date/Details/Comments</b>
Full time	YES	32(Annexure 3)
Part time	YES	6(Annexure 3)
Volunteer	YES	3( Annexure 3)
Contract Employees	NO	-
Parent helpers	YES	8(Annexure 3)
Consultants	YES	11(Annexure 3)
<b>1.2 Number of members/shareholders ( For Cooperatives/Companies etc)</b>	NO	Although a Section 25 Company, as per provision of the Companies Act, the organization has been incorporated without any share holders or share capital
<b>1.3 Policies and Procedures in place</b>		
Employee contracts	NO	
Employee job descriptions	YES	(See Annexure 3)
Staff appraisals	YES	Formal appraisals have been put in place and annual appraisals are done. The management staff has been trained to do formal appraisals.
Provident fund	YES	
Health Insurance	ESI benefits	
Life Insurance	NO	
Grievance procedures	YES	Group Head, Teacher Coordinator, Parent Coordinator – counseling and discussion in weekly meetings

	Y/N/NA	Date/Details/Comments
Disciplinary procedures	NO	
Equal Opportunities	YES	Self improvement and enhancing knowledge
Safety protocols	YES	No objection certificate from the Fire safety systems
Others	YES	PF, Gratuity and ESI scheme implemented
<b>1.4 Consultations</b>		
1.With paid employees	YES	Group discussions (periodical)
2.With Volunteer/Part-time staff	YES	Group discussions (periodical)
3.With families of employees	NO	
<b>1.5 Facilities</b>		
Crèche	NO	
Transport	NO	
Travel Allowance	YES	<ul style="list-style-type: none"> <li>• Making house visits of MNC children</li> <li>• Conducting workshops outside MNC</li> <li>• Attending workshops both in and out of the city</li> </ul>
Medical Allowance	YES	Medical assistance provided by ESI.
Subsidized meals	NO	
Children's allowance	YES	As per Government grant
Staff outings	YES	Once a year – 2 days trip to places outside Chennai but within India Twice a year within Chennai
Others	NA	

<b>2.Good Governance and Accountability</b>	<b>Y/N/NA</b>	<b>Date/Details/Comments</b>
2.1 Legal form of Organization		
Constitution (tick appropriate)		
Sole trader	NO	
Partnership	NO	
Company limited by shares	NO	
Section 25 company	YES	Certificate attached
Registered Society	NO	
Registered Trust	NO	
Others	NO	
2.2 Appropriate annual return filed	YES	Filed with the Registrar of Companies
2.3 Annual General Meeting held	YES	Minutes of meeting
2.4 Regular Board/Management Committee	YES	Quarterly minutes of meeting available
Number of Board Members	YES	10 - (Annexure 3 )
Composition of Board	YES	Attached - ( Annexure 3 )
<b>2.5. Advisory Council</b>		
Number of Advisory council	YES	Five
Composition of advisory council	YES	Mr. N Kumar Mr. S Krishnan Mrs. Jaya Krishnaswamy Mrs. Vimala Kannan Mrs. Sowmya Raghavan
Frequency of Advisory Council meetings ( please state number of meetings in a year )	YES	Monthly – 12 meetings
Annual report published	YES	2016-2017 attached

	Y/N/NA	Date/Details/Comments
2.6 Membership increased/decreased (delete as appropriate)	NA	
2.7 Social Accounts prepared	YES	2015-2017
2.8 Social Accounts verified by Social Audit	To be verified	2015-2017
Panel	YES	Mrs. Latha Suresh – Chair Mrs. Bhooma Parthasarathy – Member Mrs. L V Jayashree – Member Ms. Aruna Rathnam - Member
2.9 Social Accounts reported to stakeholders	To be reported	2015-2017
<b>2.10 Consultations</b>		
a. With members of the organization		2015-2017
b. With members of the board or the management committee		2015-2017
c. With advisory council members (if appropriate)		2015-2017
<b>3 Financial Sustainability</b>		
3.1 Annual Accounts prepared and filed (please state which regulatory body)	YES	Registrar of Companies
3.2 Balance sheet been strengthened/weakened	YES strengthened	Explanation will be given orally
3.3 Profit / Loss for the year (Please delete as appropriate and give figure)	YES	Attached
3.4 Plough / Reinvestment	NO	
3.5 Distribution of Profits	NA	

**Additional Information****Financial Sustainability Plan**

As the Central Government grant is getting reduced to about 15% of the total income efforts have been taken to ensure that the income is sustained through corporate funding and other sources. This has resulted in creation of a corpus which has ensured financial sustainability.

<b>4.Environmental Sustainability</b>	<b>Y/N/NA</b>	<b>Date/Details/Comments</b>
4.1 Environmental policy in place	NO	
4.2 Reports on Environmental practices available Energy use: heat and light	YES	
4.3. Carbon footprint calculated	NO	
<b>5.Economic Impact</b>		
5.1 Purchasing policies defined	NO	
5.2 Report on effect of purchasing policies available	NO	
5.3 Local multiplier effect of organization calculated	NO	
5.4 Other (please describe )	YES	In house greeting cards, gift pouches, Earthen lamps, paper bags and fridge bags are made and sold
<b>Additional information</b> <b>Revenue Generation</b> Paper bags Lamps and greeting cards Fridge bags 'Upanayan Early Intervention programme kit' <b>2015-2016 - Rs. 97822/-</b> <b>2016-2017 - Rs.103000/--</b>		

### 13. OTHER VIEWS OF STAKEHOLDERS

#### Well wishers

- Great work! It's amazing to see many children under one roof. Keep it up.  
Deiva Jayaraman  
Consultant – Vision Rehabilitation  
Frontline Eye Hospital  
6/40 Sri Ram Nagar North Street  
Alwarpet, Chennai 600018
- Contrary to my imagination, the children and the mothers were very very happy. Wonderful. I am so happy the school is doing a wonderful job. God bless you all.  
Kamakshi Subramaniam  
F4, Mico Colony IV Avenue  
Besant Nagar  
Chennai 600090
- Pleasure to visit! What an amazing and rewarding effort.  
Dr. Harshini Mukundan  
895 Rim road  
Los Alamos  
New Mexico 87544, USA
- This school is unique in its way and its Upanayan program is well planned and research oriented. Each child is being taken care of. The assessment and skill program is very good. Our team learn a lot. We wish that we will be able to collaborate in future with your kind support  
P K Agarwal  
M Atul  
Nita Dhawan  
The Heritage School  
Chowbaga road  
Kolkatta 700107
- Fantastic, I am so touched by the center and the work done. I have fallen in love with the children. I will definitely be back.  
Mrs. Revathi Raghunathan  
25 Baroda Street  
West Mambalam  
Chennai 600033

- I thank the management for inviting me to participate in the birthday celebration for the month of September, It was wonderful, festive atmosphere, with fantastic participation by the children, parents, staff and the management. Wishing the best to the children and the center.

Mr. Aroon Kumar R R  
Chief Finance Officer  
Express Infrastructure P Ltd  
Chennai

- Great Institution. Was overwhelmed by the innovativeness of the parents in their cooking. (Judge for Nutrifest 2016, 2017)

Mr W Arun  
Executive chef  
Hotel Ambassador Pallava  
30 Montieth road  
Egmore  
Chennai 600008

- Excellent work. I pray to God that the good efforts should continue.

Dr. Rama Narayanan PhD  
Consultant  
Community Nutrition  
Chennai

- Excellent job. Happy to see the effort taken by the parents. Pray for their happy well being.

Mrs. Devi Manohar  
Asst. Professore  
Anna Adarsh College  
Chennai

- Very impressed with the extent to reach to the children and the love and care shown. I hope we together can take this programme to the levels it is destined to go.

Mr. Dipankar Ghosh  
Executive  
World bank, Washington DC, USA ( Director of MNC)

- Such a humane task of looking after the children who need us. Looking forward to more interactions and work from our side. We are all part of OSA, Chennai Chapter. This visit touched our hearts and really appreciate the efforts made by this great institution. Hats off.

Mrs. Gauri Chawla and friends  
Mrs. Saroja Sunderajan  
Ms. Namrataz  
Ms. Vijayshree Vijay  
Old Springdale School Association.

- A great effort towards the children, executed by committed team of professionals. It is a humbling expression of devotion and love. I salute the team and the leadership. With the Institution a great success and continued service to Humanity. Jai Hind.

Brig R Ravi  
Officers Training Academy  
Chennai

- An excellent center, a really admirable effort by all – A wonderful learning experience

Shireen Hooda  
2B Block C  
Anugraha Apartment  
Nungambakkam High road  
Chennai 600034

- நெகிழ்வை தரும் நிகழ்வில் கலந்து கொண்டது பெரும் மகிழ்வை தந்தது. விரைவில் MNC காக குரும்படம் ஒன்றை உருவாக்கி தருவேன் என்று உறுது கூறுகிறேன்.

Mr. S Thanu ( Film Producer and neighbor)  
V Creations, 17 Prakasam Street, T Nagar, Chennai 600017

- Wonderful experience of life. What a sacrifice by all stake holders to fulfill the purpose of God's creation. Do keep up the good work. God bless.

Mr. Y K shimray  
United India Insurance Company Ltd  
24 Whites Road, Chennai 600014

- Very good centre with a nice programme for all Special Children. Instead of suggestions I would like to learn much from this center at the age of 68 years after finishing 40 years of pediatric training.

Dr. S Mangayarkarasi  
No 2/31 Ist Main road, Kamaraj Nagar West,  
Thiruvanmiyur, Chennai 600041

- A very good programme to enlighten mothers  
Dr. R Jeevarathnam, 16, Yamuna Street,  
Kalakshetra Colony, Besant Nagar, Chennai 600090

- A very great effort towards a good cause. Very encouraging and inspiring and much required motivation for mothers of special children.

Dr. D Sreelekha  
7 C Chellappa Garden, South Lock Street,  
Kottupuram, Chennai

- Learning a lot from the staff and parents. Highly motivating.

Dr. V Seetha  
C 324 Riverview apartments, Vandikaran Street,  
Velacherry Check post, Chennai 600042

- An Exceptional place for great children. The joy of the children reflects the care and affection given.

Dr. S Krishnaswamy, 2/154 South Fifth Street,  
Palkalainagar Eaast, Madurai 625021

- A wonderful place, Best wishes

2/154 South 5<sup>th</sup> Street, Palkalainagar,  
Madurai 625061

- Excellent work, feel so good to see Madam's vision in action.

Dr. R Madhu  
Ganesh Flats, New No 15, School road,  
Perambur, Chennai 600011



## 14. INCOME AND EXPENDITURE ACCOUNT

MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN

BALANCE SHEET AS AT March 31, 2017		Amount in Rs.	
Particulars	Note No.	As at March 31, 2017	As at March 31, 2016
<b>I. EQUITY AND LIABILITIES</b>			
<b>1. SHARE HOLDERS' FUNDS</b>			
(a) Share Capital		-	-
(b) Reserves and Surplus	1.01	7,30,33,026	5,69,99,282
(c) Monies Received Against Share Warrants		-	-
<b>2. SHARE APPLICATION MONEY PENDING ALLOTMENT</b>			
		-	-
<b>3. NON - CURRENT LIABILITIES</b>			
(a) Long term borrowings		-	-
(b) Deferred tax liabilities (Net)		-	-
(c) Other long term liabilities	1.02	-	60,944
(d) Long term provisions		-	-
<b>4. CURRENT LIABILITIES</b>			
(a) Short term borrowings		-	-
(b) Trade Payables		-	-
(c) Other current liabilities	1.03	3,53,004	5,04,151
(d) Short term provisions	1.04	8,625	8,625
<b>TOTAL</b>		<u><u>7,33,94,655</u></u>	<u><u>5,75,73,002</u></u>
<b>II. ASSETS</b>			
<b>1. NON - CURRENT ASSETS</b>			
<b>(a) Fixed Assets</b>			
Tangible assets	1.05	1,55,625	1,83,270
Intangible assets		-	-
Capital Work in Progress		-	-
Intangible assets under development		-	-
(b) Non Current investments		-	-
(c) Deferred tax assets (Net)		-	-
(d) Long term loans and advances	1.06	1,14,22,587	1,15,46,874
(e) Other Non current assets		-	-
<b>2. CURRENT ASSETS</b>			
(a) Current Investments		-	-
(b) Inventories		-	-
(c) Trade Receivables		-	-
(d) Cash & Cash Equivalents	1.07	6,16,37,692	4,57,52,094
(e) Short term loans & advances		-	-
(f) Other Current Assets	1.08	1,78,751	90,764
<b>TOTAL</b>		<u><u>7,33,94,655</u></u>	<u><u>5,75,73,002</u></u>

Summary of significant accounting policies

Notes 1.01 to 1.08 annexed are an integral part of this Balance Sheet.  
This is the Balance sheet referred to in our report of even date.

For and on behalf of  
PRASAD & SRINATH  
Chartered Accountants  
FRN 005826 S

S. PRASAD  
Partner  
Membership No. 12847

Place : Chennai  
Date : 29th July 2017



For and on behalf of the Board of Directors of  
MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN

NARAYANAN KUMAR  
Director  
DIN : 00007848

JAYA KRISHNASWAMY  
Director  
DIN : 02819475

## MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN

## AUDITED STATEMENT OF INCOME &amp; EXPENDITURE FOR THE YEAR ENDED MARCH 31, 2017

Particulars	Note No.	Amount in Rs.	
		As at March 31, 2017	As at March 31, 2016
<b>A. CONTINUING OPERATIONS</b>			
1. REVENUE FROM OPERATIONS	2.01	1,42,06,163	1,06,70,941
2. OTHER INCOME	2.02	38,53,263	35,63,564
TOTAL REVENUE		<u>1,80,59,426</u>	<u>1,42,34,505</u>
<b>3. EXPENSES</b>			
Cost of Materials Consumed		-	-
Purchases of Stock in Trade		-	-
Changes in Inventories of Finished goods, WIP and Stock in Trade		-	-
Employee Benefit Expenses	2.03	66,27,821	59,96,162
Finance Costs		-	-
Depreciation & Amortisation Expenses		1,48,436	1,02,672
Other Expenses	2.04	41,94,566	54,12,782
TOTAL EXPENSES		<u>1,09,70,823</u>	<u>1,15,11,616</u>
4. EXCESS OF INCOME OVER EXPENDITURE BEFORE EXCEPTIONAL & EXTRAORDINARY ITEMS AND TAX		70,88,604	27,22,889
5. Exceptional Items		-	-
6. EXCESS OF INCOME OVER EXPENDITURE BEFORE EXTRAORDINARY ITEMS & TAX		70,88,604	27,22,889
7. Extraordinary Items		-	-
8. EXCESS OF INCOME OVER EXPENDITURE BEFORE TAX		70,88,604	27,22,889
<b>9. TAX EXPENSES</b>			
Current Tax		-	-
Less : MAT Credit		-	-
On previous years		-	-
Deferred Tax		-	-
10. EXCESS OF INCOME OVER EXPENDITURE FOR THE PERIOD FROM CONTINUING OPERATIONS		<u>70,88,604</u>	<u>27,22,889</u>
<b>B. DISCONTINUING OPERATIONS</b>			
11. (a) Excess of Income over Expenditure from discontinuing operations (before tax)		-	-
(b) Gain/(Loss) on Disposal of Assets/Settlement of Liabilities attributable to the discontinuing operations		-	-
(c) Add/(Less) : Tax expense of discounting operations		-	-
- On ordinary activities attributable to discontinuing operations		-	-
- On Gain/(Loss) on disposal of assets / settlement of liabilities		-	-
12. EXCESS OF INCOME OVER EXPENDITURE FROM DISCONTINUING OPERATIONS		-	-
13. EXCESS OF INCOME OVER EXPENDITURE FOR THE PERIOD		<u>70,88,604</u>	<u>27,22,889</u>



## 15. MAIN ISSUES AND RECOMMENDATIONS OF THE PREVIOUS SOCIAL ACCOUNTS 2013-2015

- ***For future strengthening of MNC's work, action will be made to replicate the Upanayan models across the country by forging institutional partnership for imparting training on the same.***

*We are in consultation with the experts in the field who have identified that there is a need for Early Intervention Centers in the North East of India. They have also identified NGOs that are in a position to start Early Intervention centers there. We are working out the ground rules for a partnership where MNC will mentor and impart training of Upanayan to the Special schools there. This could pave way for exploring other regions of India too.*

- ***A robust feedback mechanism should be in place to capture regular feedback from all the stakeholders.***

*The feedback is being obtained from all stakeholders as follows:*

*From parents – quarterly sessions with Mrs. Vimala Kannan*

*From Staff – Regular Staff meetings*

*Management staff – Monday meetings, regular meetings and implementation of performance appraisal system.*

- ***MNC should work towards setting benchmarks in the field of Early Intervention.***

*Improving our data entry and data storage – The software Upaneeta has been updated in a comprehensive way. The software now records the child particulars from the time he/she enters the school till the child leaves for mainstreaming or for another special school. Assessment and evaluation details are also entered on line. In future this information can be used for research studies.*

***Documentation of the model in various Indian languages will help in replicating nationally. More doctors, pediatricians specifically, need to be made aware of the Upanayan tool which would help them recommend therapy for children with mental retardation.***

*About a dozen doctors from Perinatal Research Foundation, NO 2/31 First Main Road, Tiruvanmiyur, Chennai 600041 have been sensitized to Early Intervention when they were invited to celebrate their founder's day with us.*

- ***Using technologies to upgrade the existing software Upaneeta, Data Analytics for Research and Development, use of newer tools like Mobile apps, Tablets for dissemination and to reach out to other countries across the globe.***

*Upaneeta has been upgraded totally and now functions on Local Network area in the center. Data has been deployed on a cloud server and accessed through internet by the institution/client who so ever wants to use it at their location. The Early Intervention Programme has been validated by freezing date after the concerned level of authority approves or validates it. Levels of authority have been sent so that users have access as per their need and cannot enter data or edit it. Manual maintaining of records have been totally eliminated and automated so that work has been reduced for the special educators and also ensure minimal errors due to manual intervention.*

**Weaknesses addressed:**

- *We have not been able to consolidate views of the secondary stakeholders, apart from the primary, on the organization, their expectation and directions for future.*

***The secondary stakeholders have been interviewed and their views noted down that forms a part of the current social accounts draft.***

- *Improve our parameters of evaluation on programs that have been newly included (music, yoga and movement therapy)*

***We have designed forms for the above interventions and have incorporated the same in our software Upaneeta. The parameters are given in the form and on completion it is being evaluated with other therapies.***

- *Formal appraisal systems of internal staff should be put in place.*

***This has been done.***



## 16. RECOMMENDATIONS OF THE CURRENT CYCLE OF SOCIAL ACCOUNTS 2015-2017

### Recommendations:

- I. An External person to conduct the stakeholders consultation for the next cycle
- II. The IEP data available in an electronic form to be analyzed and reported
- III. The drop out students analysis to be done
- IV. Stakeholder questionnaires to be made available online for simplifying data entry and data analysis
- V. Benchmarking with International standards to be undertaken
- VI. Improve efforts for bringing in more visibility for MNC
- VII. A research wing to be opened
- VIII. All stakeholders to be consulted on Values of MNC
- IX. A detailed economic impact section to be incorporated including volunteer contribution, cost benefit analysis , SROI etc



## **17. PLANS FOR THE NEXT SOCIAL ACCOUNTING CYCLE**

- The next social account cycle will be conducted for the period **2017-2019 during the last quarter of 2019.**

## 18. DIALOGUE AND DISCLOSURE

1. On certification of Social Accounts by the certified Auditor, the Accounts will be printed in a booklet form.
2. These booklets will be arranged to be sent to all resource persons, Governmental agencies, donors and well wishers.
3. An internal meeting will be organized for all the staff, volunteers and management staff to explain the certified accounts.
4. A parent meeting will be organized to disseminate information on the social accounting process and MNC's commitment to its stake holders.
5. The summary of social accounts will be uploaded in MNC's website.
6. The summary of the social accounting will be included in our Newsletter "KALPATARU" which is been circulated to all persons associated with MNC.



## 19. ANNEXURES

### ANNEXURE 1 – QUESTIONNAIRES

#### QUESTIONNAIRE FOR PARENTS

- 1 Name of child
- 2 Parents' name and occupation
- 3 Child's age at present
- 4 Age when admitted
- 5 How long has your child been the program?
- 6 Birth order/siblings
- 7 Why did you bring your child to the Centre?
  - Overall development delays
  - Speech and motor delay
  - Hearing/visual impairment
  - Cerebral palsy
  - Autism
  - Down's Syndrome
  - ADHD
  - Other (specify)
- 8 Who referred you to MNC?
  - government hospital/health centre
  - private hospital
  - Doctor attending the child
  - Friend/well wisher
  - School where child was admitted earlier
  - website
  - Parents of past/present MNC students
  - MNC staff
  - Other (specify)
9. What are your expectations from MNC for your child?
10. What are the benefits of admitting your child to MNC?

### QUESTIONNAIRE FOR SPECIAL EDUCATORS

1. Name of the teacher
2. Which class are you presently in charge of?
3. How long have you been in MNC?
4. Why did you choose this Centre over others?
5. What do you feel about the
  - a) *Upanayan program*
  - b) *Special education provided here*
  - c) *Working environment in the school*
  - d) *Infrastructure*
6. What were your expectations before joining the Centre?
7. How far do you think they have been met?
8. Are there any defined parameters for teachers' assessment?
9. What are the avenues for self-improvement?
10. Any other feedback you would like to share

### QUESTIONNAIRE FOR RESOURCE PERSONS

1. What motivated you to support MNC as a Resource Person?
2. Do you get regular updates from MNC? Yes No
3. Do you get prompt response from MNC for our communications? Yes No
4. Have you visited the website of MNC? Yes No
5. What is your impression about MNC and its activities?
6. In your opinion what impact is MNC creating in society in general and in the field of disability in particular
7. Name the persons of MNC with whom you communicate.
8. What are the three strengths of MNC?
9. What are three areas of improvement in your opinion?

### QUESTIONNAIRE FOR DONORS

1. What motivated you to support MNC?
2. Do you get regular updates from MNC? Yes    No
3. Do you get prompt response from MNC for your communications? Yes    No
4. Have you visited the website of MNC? Yes    No
5. Your views on the content/appearance of the website
6. Have you recommended any other donor to MNC? Yes    No  
    If Yes, how many and why did you recommend?  
    If No, why have you not recommended?
7. Have you visited MNC? Yes    No
8. Name the persons of MNC with whom you communicate.

### QUESTIONNAIRE FOR GOVERNMENT OFFICIALS

1. How is MNC aligned to the policies of the Government?
2. Do you get regular updates from MNC? Yes    No
3. Do you get prompt response from MNC for your communications? Yes    No
4. What are the three strengths of MNC?
5. What are three areas of improvement in your opinion?



## ANNEXURE 2

### ANALYSIS OF RESPONSES

#### The response from Parents

##### 1. Why did you bring your child to the center?

Down Syndrome	14%
Autism Spectrum Disorder	20%
Cerebral Palsy	20%
ADHD	8%
Developmental Delay	29%
Microcephaly	4%
Macrocephaly	1%
Others	4%

##### 2. How did you come to know about the center

Doctor attending to the child	23%
Well wishers	10%
Parents who children were attending MNC	21%
Internet/website	3%
Government Hospital	10%
Private Hospital	19%
Special Schools the Child attended previously	12%

The other 2% came from Staff of MNC, Bala Mandir Staff, self introduction after learning about MNC from the newspapers / magazines.

##### 3. How long has your child been in the center

Less than a year	62%
One to two years	14%
Two to three years	12%
3 years and above	12%

#### **4. What were your expectations when you brought your child to the center**

- Wanted to try
- No idea, no expectation, not aware of the condition of the child
- To understand and overcome the delay
- Become normal
- Must become independent
- Teachers will guide us in training the child
- Training towards mainstreaming
- Child's problem will be attended to and a chance to become normal
- Will be able to manage the child
- Child has a better chance to learn
- Individual attention
- Better development
- Will walk and talk
- Must settle down, listen and do things and activities
- Behavior issues to reduce
- Communication to improve
- Stop crying
- Express his/her need

#### **5. Has your child benefitted after attending the center**

- A lot of change is seen in socialization skills
- Realized that I have to understand my child's capabilities and help him/her
- Therapy, language development, hand function, cognition
- Sits without support now which I never imagined he will do
- Feeding better
- Toilet indication is much better now
- Speech improved
- Medical and dental intervention is very useful
- Nutrition intervention is very good
- Group teaching has improved socialization skills
- Better OT here
- Overall development seen

***80% of the parents expressed their gratefulness and appreciated the concerted effort by MNC, in getting them disability ID card, maintenance grant, bus Pass and Niramaya Insurance benefits.***

**6. Parents feedback on infrastructure facilities**

- Good
- Satisfactory

**7. Parents feedback on the staff**

- Good, Cooperative, helpful, very supportive, friendly and concerned - 100%

**The response from special Educators**

The special educators form the backbone of MNC's Early Intervention Program, and provide a dynamic and vital support system to the parent throughout the child's education in the Centre. Their major areas of work are to:

- Implement the training program, steering it through the structured course during the appointed time
- Maintain detailed records of the child's progress
- Mentor the parents as partners in the process of training and as the child's carry-over agents at home

The stakes that the special educators have in the program implementation are: the habilitation that is the progress of the child - an indicator of the impact of early intervention and, the rehabilitation of the parents, that is, to integrate them into the structure of the Early Intervention Program as co-educators and co-therapists.

**The methodology included:**

- One to one interaction, using a ten-point questionnaire
- Informal observations in class room settings
- Observations made at the time of assessments, staff meetings and parent counseling sessions
- Mrs. Sowmya Raghavan our volunteer was present during all the interviews/feed-back sessions

**Selection of Special Educators**

The interviewer interacted on a one to one basis with fourteen special educators working in the center.

### **Consolidated response from Special Educators**

#### **1. Work atmosphere**

- Cordial working atmosphere
- Staff are committed to the cause
- Staff would like more interaction with top management
- Presence of group head very reassuring
- Senior teachers very helpful and impart knowledge
- Scope for improvement in inter personnel relationships
- No formalized performance appraisal hence feedback of performance is vague

#### **2. About the Early Intervention Program**

- Very well structured program, easy to follow
- Program developed in-house - matter of pride
- Comprehensive which is unique
- Training and program content are very good
- Full freedom for innovative ideas
- Parent's involvement in the program and sharing of goals make it very interesting
- Progress tests benefit the child and parents, as they give a very clear picture of where the child stands
- Parents must be informed of changes in the program to their children

#### **3. Self Improvement**

- Awareness as a special educator and ability as a teacher have increased
- Have become very self-reliant and self-confident after joining MNC
- Seminars and workshops are very useful
- Avenues for self-expression and creativity are available in respect of teaching method
- Refresher courses are very helpful in enhancing knowledge and improving self confidence
- Government projects afford great opportunities for self improvement

#### **4. Job satisfaction**

- Very involved in the centre and wish to continue to work here
- Teachers were initially given adequate freedom, but not in the last few years
- Increased work overload over the years, no time for file work, evaluation and assessment

- A speech therapist required to strengthen the system
- Leave and permission for urgent work – a system to be established

**5. Infrastructure and facilities**

- Introducing new facilities – computer training introduced, which is good
- Present building is very nice compared to old one

**6. Other feedback**

- Need for a structured and formalized performance appraisal
- Activities per day is very tight sometimes it is exasperating, some breaks required
- Staff welfare measure are welcome and bring in a sense of belonging

**The response from Resource persons**

**1. What motivated you to support MNC as a Resource Person?**

- One of the first few NGO's in Tamilnadu to help children with special needs.
- Affordable to all socio economic strata.
- Dedicated service
- Concept of comprehensive care for Special children
- From overseas – An opportunity to support a good intervention programme and learn from Indian colleagues.
- A long association facilitated by the divine.
- The vision and mission of MNC and the commitment of the team to fulfill the same
- MNC's dedication and holistic approach
- Recommendation by Resource persons who have attended MNC workshops
- The purpose and people involved

**2. Do you get regular updates from MNC? YES**

**3. Do you get prompt response from MNC for your communications? YES**

**4. Have you visited the website of MNC? YES**

**5. What is your impression about MNC and its activities?**

- Their help and involvement cannot be explained in words
- Affordable to all strata of society
- Making an impact across TN in Early Intervention

- Highly committed staff, well thought out program, detailed IEPs
- Commitment to support parents
- Innovative, Inclusive education initiatives
- Provides vital support service to special children
- A lot done and well done
- Sustained its focus and quality of services for families of children with disabilities
- Reached grassroots level and creates awareness there, for identification and Early Intervention
- Created a niche for itself in disability
- Periodic International Conference bring in updates in research and development to the professionals
- Good and noble institution serving the needy
- Can do more service by reaching out to rural population
- Very grounded and value based
- Excellent team work with novel ideas
- It is an institution with greater potential and promise.

**6. In your opinion what impact is MNC creating in society in general and in the field of disability in particular?**

- Awareness, need for Early Intervention
- Helping mothers create a forum and special schools (Maithree)
- Making an impact across Tamilnadu in Early Intervention
- Known in Chennai as Model Intervention Center
- MNC facilitates societal change and empowerment
- MNC represents Gold standard in delivering services
- Trying to create a respectable position for special children in society by helping them
- Nutritional reports of children looked into
- It creates hope among people and families with exceptional children.
- In disability sector this is a cost effective programme that may be made accessible to all.

**7. Name the persons of MNC with whom you communicate.**

Mrs. Jaya Krishnaswamy

Mrs. Vimala Kannan

Mr. S. Krishnan

Prof. P Jeyachandran

**8. What are the three strengths of MNC?**

- People, people, people
- Affordability
- Creating awareness and updating the parents and community with knowledge of recent developments.
- Access to all strata of society
- Empowering parents
- Meticulous assessments
- Commitment to support parents
- Highly trained and committed staff
- Sustained work
- Parental involvement and empowerment
- Experience and expertise
- Good leadership
- Low rate of staff attrition
- Orientation towards mainstreaming
- Team work and dedication
- Care for everything
- Openness for new concepts
- To bring in evidence based practices
- Excellent resource persons
- Early Intervention
- Professionals involved
- Management

**9. What are three areas of improvement in your opinion?**

- Stronger follow ups
- Linkage with industries
- Help start more early intervention centers in rural areas involving Lion/Rotary clubs, other NGOs and Schools
- Needs a team of dedicated medical professionals to actively participate in the center
- Scientific approach to conduct training particularly for ASD
- Staff training on methodologies to improve
- More efforts to support social inclusion

- Consider establishing an inclusion class room at the center
- Teachers can get trained in theater arts for holistic development and apply that methodology
- Continuous skill development of staff
- Use technology to disseminate the experience over the years to reach more families
- Reach out to rural population
- Play active role in policy making at the state level
- Run teachers training courses
- Create a data base of old students
- Staff development to be in place. For example sponsoring Ph.D candidates.
- Research–Collaborative research and publication to begin with. Tele intervention program may be initiated, to begin with those who have dropped out for strategic / logistic reasons.

#### **Interview with Management Team / Board**

##### **Response from the Management Team**

##### **The team consists of 6 people. The team is involved in:**

- Establishing systems, frequent monitoring and course correction where required
- Budgeting, Planning
- Innovation
- Assisting policy framework

##### **The methodology included:**

- One to one interaction
- Monday meetings

##### **Selection of Management team**

The interviewer interacted on a one to one basis with 6 persons of our management team and was present on all Monday meetings.

- The process of Social Accounts has given an insight into the working of the various departments at the center. Further it has also brought clarity in the objective with which the center functions and the processes and the methodologies along with both quantified and qualified results.
- The human resource has been better deployed towards optimizing their strengths.

- Recording and analysis has been improved with the upgrading of our software **Upaneeta** to a large extent.
- Efforts are on to continuously improve knowledge and skills of personnel for better functioning.
- **Taking MNC forward** - MNC has successfully operated for more than two and a half decades. A thought process to visualize the next two and half decades led the management to sketch a road map to ensure the availability of resources, infrastructure, personnel, and leadership required. **This road map aims at institutionalizing MNC by associating with Bala Mandir Kamaraj Trust.**

### Response from Donors

1. What motivated you to support MNC?
  - Relatives who told me about MNC
  - Other NGOs who referred us to MNC
  - From parents whose children have trained in MNC
  - From the organization (employees of CISCO and FORD)
  - People in the field of teaching the special children
2. Do you get regular updates from MNC? **YES - 50% NO – 50%**
3. Do you get prompt response from MNC for your communications? **YES - 50% NO – 50%**
4. Have you visited the website of MNC? **Yes**
5. Your views on the content/appearance of the website
  - The website is informative and well done
  - There should be a payment gateway to donate on line
  - *There is no provision to donate online. If this is not feasible immediately, at least providing info on UPI payment address which can be setup for this donation might help donors.*
  - *The success stories of mainstreamed children should be uploaded*
6. Have you recommended any other donor to MNC? **Yes**  
 If Yes, how many and why did you recommend?
  - Can't say the exact figure, recommended many

- *I have enrolled MNC in Cisco Community and the process of registration is in progress. Cisco requires an amount of \$1000 donation or volunteering to be registered against an NGO before they will start the registration process. We have just hit this mark in the last week. I recommend MNC because I think they can benefit from the enrollment in Cisco Community and my fund raising efforts.*

If No, why have you not recommended?

No one has answered this

7. Have you visited MNC? **YES** 75% **NO – 25%**

8. Name the persons of MNC with whom you communicate.

Mrs. Jaya Krishnaswamy

Mrs. Vimala Kannan

Mr. S Krishnan

Mrs. Priya Rajkumar

Mrs. Vaijayanthi

9. What are the three strengths of MNC?

- *Dedicated staff*
- *Long history and well organized setup for children*
- *Data collection and documentation*
- *Care and concern,*
- *Easy accessibility and*
- *Total commitment to the cause*

10. What are three areas of improvement in your opinion?

- *MNC can have a dedicated fund-raising volunteer (full-time or part-time) who can help raise funds for its regular operations.*
- *MNC can identify specific projects which can be used for fund-raising, to increase donor appeal*
- *MNC can appoint an ambassador who can help bring more visibility for the organization.*

### Response from Government Officials

1. How is MNC aligned to the policies of the Government?
  - MNC is giving support in implementation various programmes of the government.
  - To the dot
2. Do you get regular updates from MNC? **Yes**
3. Do you get prompt response from MNC for your communications? **Yes**
4. What are the three strengths of MNC?
  - Using advanced technology
  - Cordial relationship with all officials and others
  - Man power
  - Authority over the subject
  - Dedication
  - No profit motive
- 5.. What are three areas of improvement in your opinion?
  - Coordinating with other NGOs
  - Publicity
  - Human resource development
  - None I can see, they are doing fine and the model can be replicated which the State Government is trying to do.
6. **Other comments:** "Man Service, God Service – Strength of Chain lies in the weakest link" – Keep it up. – Dr. Kamesh Kumar, Chief Commissioner Persons with Disabilities, Delhi.



### ANNEXURE 3

#### ORGANISATION & STAFF DETAILS

##### Full time/Part time Staff details

Sl. No.	Name	Designation	FT/PT
1	Mrs. Angelina G Priya Rajkumar	Principal	FT
2	Mrs. Sumitra Manoharan	Coordinator – Programme Implementation	FT
3	Mrs. A Sumathi	Group Head (Birth to 2 years)	FT
4	Ms. A Sarojini	Group Head (2to 4 years)	FT
5	Mrs. A Hemalatha	Group Head (4 to 6 years)	FT
6	Ms. M Thayammal	Special Educator	FT
7	Mrs. V Bhavani	Special Educator	FT
8	Mr. K Subramonian	Physiotherapist	FT
9	Mrs. B Muthulakshmi	Physiotherapist	FT
10	Mrs. C Helen Rose	Special Educator	FT
11	Miss C Thenmozhi	Group Head (Government EIC)	FT
12	Miss. S Ranjitha	Special Educator	FT
13	Mrs. M Fathima K	Physiotherapist	FT
14	Miss. S Sasirekha	Special Educator	FT
15	Mrs. Premila Devi	Special Educator	FT
16	Mrs. Alagammal	Special Educator	FT
17	Mrs. Uma Mageswari	Special Educator	FT
18	Mrs. V Sangeetha	Special Educator	FT
19	Mrs. V Dhavamani	Special Educator	FT
<b>GOVERNMENT EARLY INTERVENTION CENTER AT MNC</b>			
20	Mrs.K Geethalakshmi	Special Educator	FT
21	Mrs. K Revathy	Special Educator	FT
22	Miss. N Sharmila	Special Educator	FT

Sl. No.	Name	Designation	FT/PT
<b>AVMVK ACADEMY</b>			
23	Mrs. V R Jeyasree	Coordinator – AVMVK Academy	FT
24	Mrs. M Rajalakshmi	Faculty – AVMVK Academy	FT
<b>MONTESSORI TEACHER</b>			
25	Mrs. V Thangathai	Montessori teacher	FT
<b>ADMINSITRATION</b>			
26	Mr. S Vijayan	Manager-Administration	FT
27	Mrs. Vaijyanthi Desikan	Office Assistant	FT
28	Mr. K Subramanian	Office Assistant	FT
29	Mr. K Kumar	Driver	FT
30	Mr. C Senthil	Office Assistant	FT
31	Mrs. Valli	House Keeping Staff	FT
32	Mrs. Vasanthamma	House Keeping Staff	FT
<b>PART TIME STAFF</b>			
1	Mrs. K Muthuperiyanayagi	Special Educator	PT
2	Mr. N Janardhanam	Drawing Teacher	PT
3	Mrs. Sowbhagyalakshmi	Music Teacher	PT
4	Mrs. Chandana Ongolu	Speech Therapist	PT
5	Mr. Venkatasalam	Occupational Therapist	PT
6	Mr. Paul Devasagayam	Physical Education	PT
<b>CONSULTANTS</b>			
1	Mrs. Nirmala Venkateswaran	Occupational Therapist	
2	Mrs. V Vimala	Special Educator	
3	Mr. Karthik Ranganathan Rao	Physiotherapist	
4	Dept. of Audiology and Speech Pathology, SRM University, Kattankulathur 603203	Speech Therapists	

5	Dr. Padmalochani	Developmental Pediatrician
6	Dr. Rajan	Eye Specialist
7	Krishnamacharya Yoga Mandiram, Mylapore, Chennai 600004	Yoga
8	Mrs. Rajam Shankar	Musician
9	Mr. Sudharshan	Software
10	RS2M Business Solutions P Ltd 57 Solaiappar Street Mylapore, Chennai 600004	Software consultant
11	Dr. P K Baskar	Dental consultation Baskar Dental Foundation 117 G N Chetty Road, T Nagar, Chennai

#### **VOLUNTEERS**

1	Mrs. Sowmya Raghavan	Volunteer
2	Mrs. Padmini Sharma	Volunteer
3	Mrs. Kamala Rao	Volunteer

#### **PARENT HELPERS**

1	Ms. Sudha	Parent Helper
2	Ms. Kalpana	Parent Helper
3	Ms. Priya	Parent Helper
4	Ms. V Devi	Parent Helper
5	Ms. Suganthi	Parent Helper
6	Ms. Priyadarshini	Parent Helper
7	Ms. Sharanya	Parent Helper
8	Mr. Venkatesan	Parent Helper

## **Job description of Staff, Part time staff, Consultant, and Volunteer**

### **Role of the Principal**

- *Implementation, Establishment and maintenance of various systems for effective functioning of MNC*
- Development of expertise in the teaching staff
- Bringing in improvisation continuously wherever and whenever required.
- Coordination and integrating the various groups leaders and members in conducting the various events in MNC
- Striving for the adherence and espousment of the value systems of MNC as an institution by constantly interacting with all members of MNC towards its maintenance and development.

### **ACCOUNTABILITY**

- Successful Implementation of the IFSP using the **UPANAYAN EARLY INTERVENTION PROGRAM** working towards the development of all the children to the satisfaction of the parents
- Ensuring the quality and standards of MNC in all areas of activities to uphold the reputation of MNC

### **RESPONSIBILITIES**

- Registration and planning for the Assessment of the child
- Ensuring specific action plans are chalked out and reviewing the same on quarterly basis
- Ensuring smooth conduct of various events of MNC
- Processing the procurement on time of various materials resources
- Fostering camaraderie and self discipline and its maintenance even in times of crises among staff members
- Assessing of GROUP HEADS and suggest plans for their improvement
- Interact with parents in building rapport in making them adhere to the rules & regulations of MNC

### **Coordinator - Programme Implementation**

#### **ROLE**

- Effective implementation of Upanayan programme through IEP in both Individualized and group settings
- Training Group heads in their functioning

- Monitoring all the activities connected with the program and implementation of supportive programs
- Coordinate with Principal and other consultants

#### **ACCOUNTABILITY**

- Assessment to Evaluation for each and every child – complete responsibility, monitoring IEP activities
- Therapy coordination
- Counseling parents after assessment and placing children in the relevant groups
- Setting up goals with respect to Yoga, Voice and Vision, Physical Education and handing over to the Principal for implementation
- Conducting weekly meetings with the Group heads
- Coordinate with office administration regarding collection of parents contribution

#### **PROGRAM GROUP - BIRTH TO TWO YEARS**

##### **Role of a Group Head - Special Educator**

- Ensure the successful implementation of the Upanayan Birth to 2 years program.
- Ensure that the benefits of this program reach all the children.
- Ensure that all teachers in the Birth to 2 years will be well trained well equipped, effective teachers so as to transfer the program to the children and parents.
- Ensure the effective use of teaching aids by the teachers.

##### **ACCOUNTABILITY:**

- All teachers will effectively implement the Upanayan Birth to 2 years program, among the group 2 of them will be model teachers.
- Appropriate teaching aids for the skills are selected by the teachers and effectively used for the development of the child, displayed and changed once a month.
- All the children in the Birth to 2 years group will develop the skills selected in each quarter as per the expected level of each child given in the IFSP and be prepared to move to the next level

#### **PROGRAM GROUP - TWO TO FOUR YEARS**

##### ***Role of Special Educator***

- Ensure the successful implementation of the Upanayan 2-4 years program.
- Ensure that the benefits of this program reach to all the children.

- Ensure that all teachers in the 2 to 4 years will be well trained, well equipped effective teachers so as to transfer the program to the children and parents.
- Ensure the effective use of teaching aids by the teachers.

#### **ACCOUNTABILITY**

- All teachers will effectively implement the Upanayan 2 to 4 years program, of them 2 will be model teachers.
- Appropriate teaching aids for the skills are selected and effectively used by the teachers for the development of the child, displayed and changed once a month.
- All the children in the 2 to 4 years group will develop the skills selected, each quarter as per the expected level for each child given in IFSP and be prepared to move to the next level.

#### **PROGRAM GROUP - FOUR TO SIX YEARS**

Pre preparatory preschool program

##### **Role of Special Educator:-**

- Ensure the successful implementation of the Upanayan 4-6 year's program.
- Ensure that the benefits of this program reach all the children.
- Ensure that all teachers in the 4 to 6 years will be well trained, well equipped effective teachers so as to transfer the program to the children and parents.
- Ensure the effective use of teaching aids by the teachers.

#### **ACCOUNTABILITY:**

- All teachers will effectively implement the Upanayan 4 to 6 year's program and all of them will be model teachers.
- Appropriate teaching aids for the skills are selected by the teachers and effectively used for the development of the child, displayed and changed once a month.
- All the children in the 4 to 6 years group will develop the skills selected, each quarter as per the expected level for each child given in IFSP and move ahead to the school program
- All the children in the class will benefit from the secondary program

(Developmental therapy, speech therapy, yoga therapy, counseling, pranic healing, pediatric consultation)

#### **Therapy Department**

##### **Role of a Group Head Therapist**

- Ensure the successful implementation of the Upanayan Early Intervention Program facilitated by the appropriate therapy program for each child.

- Ensure that the benefits of the therapy program reach all children.
- Ensure that all the therapists are well trained, well equipped, effective therapists working as part of the inter disciplinary team, transfer the program to the children through the parents
- Ensure that the department has appropriate equipments and aids for the training of the children.
- Ensure that the goals selected for the children are appropriate, and selected as per the IFSP to facilitate the development of the skills.

**Accountability:-**

- An inter - disciplinary team of therapists will effectively plan and facilitate the child's development through therapeutic activities, as per the IFSP
- All the children in the Upanayan Program will develop the skills selected, each quarter as per the expected level in the IFSP for each child.
- Each therapist will use appropriate equipment and aids for the training of the children in the therapy department.

**Therapist's Role:-**

- Ensure the successful implementation of the Upanayan Early Intervention Program facilitated by the appropriate therapy program for each child.
- Ensure that the benefits of the therapy program reach all children given to the therapist.
- Ensure that the goals selected for the children given are appropriate, and selected as per the IFSP to facilitate the development of the skills.

**Accountability:-**

- An inter - disciplinary team of therapists will effectively plan and facilitate the child's development through therapeutic activities, as per the IFSP
- Each of the children will be trained to develop the skills selected, each quarter as per the expected level in the IFSP for each child.
- Appropriate equipment and aids for the training of each of the children.

**Part Time Staff**

Part time staff will be involved with specific tasks or projects. This will be decided in consultation with the management board. They will be assigned tasks or projects taking into consideration their area of interest and experience. They will put in a minimum number of working hours each day and a monthly honorarium will be paid. Their assignment will be usually on a long time basis.

### Consultant

A specialist in a particular field may be appointed as a consultant depending on the need. Their job will be to train, advice, assist, staff, parents and children. They will also be suggesting improvements in systems and monitoring activities. They will be paid consultation fees as per their expertise and time spent at MNC.

### Volunteer

A Volunteer at MNC is assigned specific task oriented jobs. The details of the tasks may include support in planning, implementation and training of children, parents and staff. The task will be time bound and mostly on a short time basis. Volunteer will coordinate with the respective full time staff depending on the task. Their services are voluntary in nature without monetary considerations. However expenses incurred on local transportation may be reimbursed.

### Details of Directors/Managing Committee of the Organization

Sl. No.	Name	Occupation	Address	Educational Qualification
1	Mr. N Kumar	Industrialist	1, George Avenue, Chennai – 600 018	B.E., (Electronics & Telecommunication)
2	Prof. P Jeyachandran	Psychologist	4, Lakshmiapuram 3 <sup>rd</sup> Street, Royapettah, Chennai – 600 014.	M.A.,M.Litt.,M.S. (US), Ph.D.(US),.
3	Mrs. Jaya Krishnaswamy	Educationist	“Sharanya” 145, Defence Colony, Chennai – 600 032	M.A., M.Ed., M.Sc.
4	Mr. S. B. Prabhakar Rao	Business Executive	F-4, Lloyds Estate, Lloyds Road, Royapettah, Chennai – 14	Post Graduate
5	Prof. K. Vijayraghavan	Scientist	No.106, 6 <sup>th</sup> Cross, RMV Stage II, Bangalore – 560 095	Ph.D in Molecular Biology, Secretary, Department of Biotechnology and Science, Government of India.

Sl. No.	Name	Occupation	Address	Educational Qualification
6	Mr. Satish Parasaran	Lawyer	"Sri Ranga", New No.8, (Old No.13), 8 <sup>th</sup> St, Dr. Radhakrishnan Road, Mylapore, Chennai - 4	B.Com, LLB, Civil Advocate
7	Mrs. Vimala Kannan	Educationist	Plot No 32, Flat No. 3 Balaji Apartments East Abhiramapuram 3 <sup>rd</sup> Street, Mylapore, Chennai 600004	B.A., Dip Social Science / Special Education
8	Mrs. Madhura Vishweshwaran	Business Woman	"Swarup Heritage", Flat Nos. D1 & D2, Plot No. 1 & 3, Kasturi Estate II St, Chennai -6	Graduate and Montessori Trained
9	Mr. Dipankar Ghosh	World bank Executive	World Bank Washington DC USA	CA, MBA
10	Mrs. Sowmya Raghavan	Retd. Railway Board Member	30/31 Sapthagiri Colony Jafferkhanpet Chennai 600083	IRAS (Indian Railway Accounts Services)



## ANNEXURE 4

### RCI APPROVAL TO CONDUCT DIPLOMA COURSE

  
भारतीय पुनर्वास परिषद्  
(सामाजिक न्याय और अधिकारिता मंत्रालय, भारत सरकार के अधीन एक सांविधिक निकाय)  
**REHABILITATION COUNCIL OF INDIA**  
(A Statutory Body under the Ministry of Social Justice and Empowerment)

सं/No..... 17-658/D.E.C.S.E.(MR)/11/RCI 611 दिनांक/Date..... 24 July 2013  
SPEED POST

Mrs. Jaya Krishnaswamy  
Director  
Madhuram Narayanan Centre  
for Exceptional Children  
No. 1, Girappa Road,  
Opp. Bala Mandir Kamaraj Trust,  
T Nagar, Chennai – 600 017

**Sub:** Proposal for seeking permission to continue the ongoing D.E.C.S.E.(MR) training programme – reg.  
Madam,

I am directed to refer to the subject mentioned above & to inform you that on the basis of the inspection report submitted by the team of visiting experts, permission to continue the D.E.C.S.E.(MR) training programme has been accorded to your institution for 05 years from the academic year 2013-14 to 2017-18 with an intake of 25 students.

2. In this connection, you are requested to remit the approval fee of Rs.10,000/-.
3. Permanent Approval Certificate will be issued on receipt of the approval fee.

Yours faithfully,  
  
(Dr. Subodh Kumar)  
Deputy Director (Acads.)

बी - 22, कतुब इन्स्टीट्यूशनल एरिया, नई दिल्ली - 110 016  
B - 22, Qutub Institutional Area, New Delhi - 110 016  
Ph.: 011-2653 2408, 2653 2384, 2653 4287 Fax : 011-2653 4291  
E-mail : rehabstd@nde.vsnl.net.in, rehabstd@ndc.vsnl.net.in, rehccouncil\_delhi@bol.net.in  
Website : www.rehabcouncil.nic.in

**ANNEXURE 5**

**INCORPORATION CERTIFICATE OF THE CENTER**

Company Number : 18-20495



**FRESH CERTIFICATE OF INCORPORATION  
CONSEQUENT ON CHANGE OF NAME**

In the office of the Registrar of Companies, Tamil Nadu, Madras-6.  
(Under the Companies Act, 1956 (I of 1956))

IN THE MATTER OF\* INDCHEM FOUNDATION

I hereby certify that... INDCHEM FOUNDATION

which was originally incorporated on... 18th day of... Mar. 91.

under\*\* Companies Act, 1956/~~1913~~ and under the name... INDCHEM FOUNDATION

having duly passed the necessary resolution on... 19.07.97

in terms of Section 21 / ~~22 (1) (a) / 22 (1) (b) / 44~~ of the companies Act, 1956 and the approval of the

Central Government signified in writing having been accorded hereto in the Ministry of Law, Justice and Company Affairs, Department of Company Affairs, Registrar of Companies, Madras, Letter No. 20495/C.IV/S.21/97 dated... 16.10.97

the name of the said company in this day changed to... MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN

and this Certificate is issued pursuant to Section 23(1) of the said Act

Given under my hand at MADRAS this... SIXTEENTH Day of... OCTOBER  
TWENTY FOURTH ASVINA

One thousand nine hundred and NINETY SEVEN  
One thousand nine hundred and NINETEEN (Saka)



(V. SREENIVASA RAO)  
Registrar of Companies  
Tamil Nadu

\* Here give the name of the company as existing prior to the change.  
\*\* Here give the name of the Act(s) under which the company was originally registered and incorporated.

## ANNEXURE 6



COMMISSIONERATE FOR WELFARE OF THE DIFFERENTLY ABLED,  
LADY WELLINGTON COLLEGE CAMPUS, KAMARAJAR SALAI, CHENNAI - 600 005.

### RENEWAL OF REGISTRATION

(Form II under section 51(2) of the Rights of Persons with Disabilities Act, 2016)

(Proceedings of the State Commissioner for the Differently Abled)

Proc.No.1624/ST2/2017

Dated: 05.06.2017

Registration is renewed to **MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN, NO.18, PRAKASAM STREET, T.NAGAR, CHENNAI-600017** as an institution for the Persons with Disabilities vide **S.No. 08/2017** Under Section 51 (2) of the RIGHTS OF PERSONS WITH DISABILITIES ACT, 2016 to run a **non-residential School for Mentally Retarded** .This certificate of registration is valid for the period commencing from **01.03.2017** to **31.01.2018** and is subject to the following conditions:-

1. Application for granting renewal of a certificate of registration should be submitted to this office two months in advance before the expiry of the period of validity.
2. The Management should not appoint any staff whose Certificate has been cancelled or who has been convicted for offence involving moral turpitude.
3. The State Government grant will not be given at present.
4. The Institution should provide proper infrastructure facilities including sufficient accommodation to Differently Abled children.
5. The building license should be duly renewed periodically.
6. The Management should appoint not less than four percentage of the total number of vacancies in the cadre strength in each group of posts meant to filled with persons with bench mark conditions as per section 34 (1) of the RPD Act, 2016.
7. Rain Water Harvesting facilities should be made in the Institute immediately.
8. This certificate should be displayed by the institution in a conspicuous place.

9. The following words may be mentioned in the name board of the Institute - **MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN, NO.18, PRAKASAM STREET, T.NAGAR, CHENNAI-600017** - is registered under Section 51(2) of the Rights of Persons with Disabilities Act, 2016, temporarily for a period from **01.03.2017** to **31.01.2018**.
10. Institution should follow rules/regulations issued by State Commissioner for the Differently Abled from time to time.
11. Necessary fire safety facilities should be properly installed at the appropriate scale as indicated by the Fire and Rescue Services Department.
12. Structural Stability Certificate, Sanitary Certificate, Building License and No Objection Certificate from Fire and Rescue Services Department should be renewed periodically without fail.
13. The Institution is subjected to inspection by the inspection authorities under the Act/Rules and by the persons / officers authorized by the State Government.
14. The certificate of registration is liable to be revoked as the provisions given in the section 52 of the RPD Act 2016.

The registration shall be subjected to the conditions laid down in the Persons with Disabilities Act, 2016. The Institution should comply with Rules/Regulations issued by the State Commissioner for the Differently Abled from time to time.

  
**STATE COMMISSIONER  
FOR THE DIFFERENTLY ABLED (FAC)**

To:  
✓ **THE DIRECTOR,  
MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN,  
NO.18, PRAKASAM STREET,  
T.NAGAR,  
CHENNAI-600017**

Copy to:

1. District Differently Abled Welfare Officer, **CHENNAI** District.
2. Stockfile / spare.
3. DAW/Section, O/O-SCDA – Chennai .600005

## ANNEXURE 7

COMMISSIONERATE FOR WELFARE OF THE DIFFERENTLY ABLED,  
LADY WELLINGTON COLLEGE CAMPUS, KAMARAJAR SALAI, CHENNAI - 600 005.

### RENEWAL OF RECOGNITION

(Proceedings of the State Commissioner for the Differently Abled)

Proc.No.1624/ST2/2017

Dated: 05.06.2017

Recognition is renewed to **MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN, NO.18, PRAKASAM STREET, T.NAGAR, CHENNAI-600017** vide **S.NO. 08/2017** Under Tamil Nadu Recognized Private Schools (Regulations) Act, 1973 and Rules 1974 .This certificate of recognition is valid for the period commencing from **01.03.2017** to **31.01.2018** and is subject to the following Conditions:-

1. Qualified Teachers should be appointed in 1:8 ratio within a year.
2. The Management should run the school in accordance with Provisions of the Tamil Nadu Recognized, Private Schools (Regulations) Act, 1973 and Rules 1974.
3. Application for granting renewal of a certificate of recognition should be submitted to this office two months in advance before the expiry of the period of validity.
4. The State Government grant will not be given at present.
5. The Institution should provide proper infrastructure facilities including sufficient accommodation to Differently Abled children.
6. The building license should be duly renewed periodically.
7. The Management should not appoint any teachers whose certificates have been cancelled or who have been convicted for offence involving moral turpitude.
8. The Management should maintain economic strength prescribed by the Education Department in all the Standards.
9. The Management should appoint not less than four percentage of the total number of vacancies in the cadre strength in each group of posts meant to filled with persons with bench mark conditions as per section 34 (1) of the RPD Act, 2016.
10. Rain Water Harvesting facilities should be made in the Institution immediately.
11. This certificate should be displayed by the institution in a conspicuous place.

12. The following words should be painted in the Name Board by the School  
**"Recognized by the State Commissioner for the Differently Abled as Special School for Differently Abled (Mentally Retarded) children for the period from 01.03.2017 to 31.01.2018 for classes Early Intervention Centre (0-2 years), Early Intervention Centre (2-4 years) & Pre-School (4-6 years).**
13. Institution should follow rules/regulations issued by State Commissioner for the Differently Abled from time to time.
14. Necessary fire safety facilities should be properly installed at the appropriate scale as indicated by the Fire and Rescue Services Department.
15. Number of Special educators now available should be maintained. On no account, number of Special educators employed should be reduced. In that case recognition will be cancelled.
16. Structural Stability Certificate, Sanitary Certificate, Building License and No Objection Certificate from Fire and Rescue Services Department should be renewed periodically without fail.
17. The School authorities should provide barrier free and easily accessible environment to students of Special Schools.
18. The Institution is subjected to inspection by the inspection authorities under the Act/Rules and by the persons / officers authorized by the State Government.
19. This recognition is valid only, if the school is functioning in the address mentioned in this recognition order.

  
05/06/17

**STATE COMMISSIONER  
FOR THE DIFFERENTLY ABLED (FAC)**

**To:**  
**THE DIRECTOR,**  
**MADHURAM NARAYANAN CENTRE FOR EXCEPTIONAL CHILDREN,**  
**NO.18, PRAKASAM STREET,**  
**T.NAGAR,**  
**CHENNAI-600017**

**Copy to:**

1. District Differently Abled Welfare Officer, **CHENNAI** District.
2. Stockfile / spare.
3. DAW/Section, O/O-SCDA – Chennai .600005
4. Special School Section, O/O-SCAD-Chennai.600005

## **SOCIAL AUDIT STATEMENT 2013-2015**



**Social Audit Network, India**

### **SOCIAL AUDIT STATEMENT**

#### **Madhuram Narayanan Centre for Exceptional Children**

The Social Audit Panel has examined the draft Social Accounts submitted to us and discussed them in detail at the Social Audit Panel meeting held on 10<sup>th</sup> September 2015. I have examined the revised Social Accounts which were prepared following the Social Audit Panel meeting and have taken into account various points discussed at the Social Audit Panel Meeting. We also examined a sample of the data and the sources of information on which the Social Accounts have been based.

We believe that the process outlined above has given us sufficient information on which to base our opinion.

We are satisfied that, given the scope of the social accounting explained in the revised draft and given the limitations of time available to us, the Social Accounts are free from material mis-statement and present a fair and balanced view of the performance and impact of **Madhuram Narayanan Centre for Exceptional Children**, as measured against its stated values and objectives and the views of the stakeholders who were consulted.

We have identified some important issues to be taken into consideration during the next social audit cycle. In particular we would refer to the following:

- i) To consult all the stakeholders in the next cycle
- ii) Revise the Objectives and Activities

The members of the Social Audit Panel were:

- a) Ms. Maya Gaitonde
- b) Ms. Praveena Yagnambhat
- c) Dr. K. Prabhakar
- d) Mr. V.C. Krishnan

  
Ms. Latha Suresh

Chair of the Social Audit Panel

28<sup>th</sup> October 2015.

\* The notes of the Social Audit Panel meeting form part of the social accounting and auditing process and may, by arrangement, be inspected along with the full social accounts at the offices of **Madhuram Narayanan Centre for Exceptional Children** at T Nagar, Chennai, India. Members of the Social Audit Panel have acted in an individual capacity.