



Madhuram Narayanan Centre for Exceptional Children

A Unit of Bala Mandir Kamaraj Trust (Regd Soc)

18 Prakasam Road, T Nagar, Chennai 600017

Phone: 28340574

Email: mnc@balamandir.org Website: www.mncindia.org





SOCIAL AUDIT STATEMENT

Madhuram Narayanan Centre for Exceptional Children (A Unit of Bala Mandir Kamaraj Trust)

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 30th September 2023. We 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:

- To rework the Values of MNC
- ii) To include a section on the impact on the community-
- iii) To monetise the social value created by the Jivikam Program

The members of the Social Audit Panel were:

- a) Ms. Sarada Jagan
- b) Dr. Mujahid ul Islam
- c) Ms. Marie Banu

d) Mr. Bharath Natarajan (Virtual attendee)

Ms. Latha Suresh

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 Madhurum 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 Madhuram Narayanan Center for Exceptional Children wishes to thank the following persons for auditing the Social Accounts prepared by MNC for the academic years 2020-2022 on the 30th September 2023.

- Mrs. Latha Suresh, Certified Social Auditor, Director San India, Honarary. Director CSIM, Chair of the Social Audit Panel
- Mrs. Neeta Nair, Certified Social Auditor and Co-Chair of the Social Audit Panel
- Mrs. Marie Banu Rodriguez, Certified Social Auditor, Director CSIM Panel Member
- Mrs. Sarada Jagan, Ex Managing Director Human Resources and Corporate Services, The Sanmar Group - Panel Member
- Dr. Mujahid ul Islam, Associate Professor, TN Ambedkar Law University, Chennai – Panel member
- Mr. Bharath Natarajan, Bala Mandir Kamaraj Trust Panel Member

The management wishes to thank all the staff both permanent and part time and volunteers of MNC for their cooperation in the preparation of the social accounts and also in organizing the social audit meeting. Special thanks to Mrs. Andal Raghavan and Mrs. Lakshmi Gopal for conducting the stake holder's interviews and Miss C Thenmozhi for helping us document the 24 hour based program.



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1. INTRODUCTION

Madhuram Narayanan Centre for Exceptional Children (MNC) A Unit of Bala Mandir Kamaraj Trust (BMKT) provides Early Intervention Services to children with Intellectual disability and associated conditions. MNC took a very significant step during the last social accounting period in merging with Bala Mandir Kamaraj Trust and now functions as a Unit of Bala Mandir. In 1995 MNC moved into the premises of Bala Mandir and ever since has developed and nurtured a very healthy and symbiotic relationship. Both institutions focus on child care and development in the early stages of childhood for those in challenging circumstances. While BMKT is involved in early child care for nuero typical children MNC is into early intervention for children with intellectual disability and associated conditions. The coming together of both the institutions facilitated the optimal use of infrastructure and expertise of both the institutions.

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, MNC has successfully completed 5 cycles of Social Accounts periods 2008-2009, 2010-2012, 2013-2015, 2015-2017, 2017-2019. The experience and clarity gained during these Social Audits was very helpful and provided valuable feedback towards improved functioning of MNC.

The key persons involved in drafting the sixth Social Accounts for the period April 2020 to March 2022 includes

Mrs. Jaya Krishnaswamy, Executive Committee Member, BMKT Founder Director, MNC

Mr. S Krishnan, Hon. Joint Secretary, BMKT

Mrs. Andal Raghavan, Member in Charge-MNC,

Mrs. Vimala Kannan, Consultant MNC,

Mr. S Vijayan, Manager- Administration MNC,

Mrs. Vaijayanthi Desikan, Executive Secretary, in charge of documentation at MNC



2. PREVIOUS SOCIAL ACCOUNTS AND AUDIT

The **issues for action** identified by the 2017-2019 Social Audit Panel Report, (meeting conducted on 21.9.2019) were partially taken up for action due to the pandemic which restricted us in many ways.

Recommendation 1: Special achievements of children and alumni need a significant mention under Social Impact.

Special achievements of the children have been consolidated along with key achievements & Social impact in this report.

Recommendation 2: A structured feedback mechanism to be developed for ascertaining how MNC has influenced the acceptance and inclusion in society.

As MNC functioned virtually during April 2020 to March 2022 the community outreach activity was not implemented and hence this has not been reported upon.

Recommendation 3: Sustainability and scaling up strategies of MNC to be highlighted

A section on Sustainability has been added in this report.

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 disability, 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 disability sector with a simple, easy to follow and culturally suitable program.

Upanayan Early Intervention Programme

Upanayan engages parents as partners in implementation of the program. They are trained by special educators to lead children towards their developmental goals. Upanayan Early Intervention Program was sponsored by Indchem Research and Development Laboratory (1987- '89) as a part of its initiative for corporate social responsibility. The program, based on India's time tested legacy of child care, was designed keeping in view the socio-economic conditions and 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 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 in Kolkata.

The training program, covering children in the age group birth to 6 years has since been successfully implemented and 6,500 children have benefitted in the last 33 years from various states of India and from abroad.

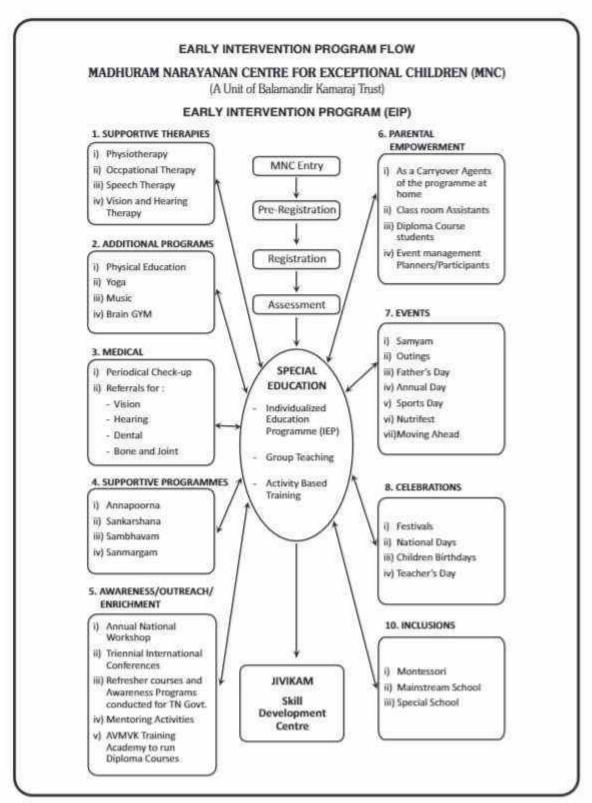
Provision of Early Intervention Services

Early Intervention services are provided for children with Developmental Delay / Intellectual disability with associated conditions (as mentioned below) in the age group birth to six years:

- Neuro Muscular Cerebral Palsy
- Down Syndrome
- Autism / Autism Spectrum Disorder
- Attention Deficit Hyperactivity Disorder
- Hydrocephaly
- Metabolic Disorders

- Vision Impairment
- · Hearing Impairment
- Seizure Disorders
- Microcephaly/ Macrocephaly
- Chromosomal Disorders
- Any other disorders with developmental delay

along with, Physi Physical Education	services comprises individual otherapy, Occupational, Vision n, Music, Medical and Dental co and advice, Group activities, Activ	, Play and Speech therapy, Yoursultation, Nutritional Intervent	oga,
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The Training offered at MNC

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. They become Carryover agents of the program for their children in activities of daily living at home. The training provided is both Center and Home-based

Center 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 line with the total dependent level of the child) 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
- . Guides parents to become carryover agents in activities of daily living

In situations where the parents are not available, a close relation of the child or dedicated care givers provides the needed support. On an average 90 children attend the Centre on a daily basis and receive training on every working day with their mothers/caretakers 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. They may later equip herself/himself as a Special Educator by studying for one year diploma course in 'Early Childhood Special Education'.

In the Upanayan 2 to 6 year's program, the parents are:

- slowly weaned away from direct care of their own child in the center
- · encouraged to assist other children and parents
- supported to network amongst themselves for advancing the cause of children with disabilities

The Special Educator trains the child to become more and more self-dependent in preparation for moving to special schools or mainstream schools. 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 go through a series of school readiness activities.

The class room model followed at the centre:

The classroom is a heterogeneous group, as the level of disability/conditions/ and the severity of the Intellectual Disability and associated conditions of the children differ. The classes are divided into age groups of the children - birth to 2 years, 2 to 4 years and 4 to 6 years. A Special Educator is appointed for a group of 8 children according to the international standards. They are usually assisted by a trained parent who works in

coordination and cooperation with them. Every child has an individual time table for the day - Individualized Education Plan, Physiotherapy, Occupational therapy, Yoga, Vision intervention, Group Activity, Activity based training, Computer aided learning, storytelling are all classes that the child attends. At the end of the day the children gather in their respective class rooms for prayer and disperse.

IEP one on one - Every child gets uninterrupted learning with the teacher for half an hour on a one-to-one basis. This individualized Education Plan is the most effective learning session and the skill selected for the child is reinforced till the child achieves the skill.

IEP in Group Setting - In a group setting, where 5 or 6 children are taught together the special educator selects a common concept to teach to the children at different levels individually. For example if she takes red color concept she may teach a child to identify the color, teach another to see red shapes, and another to find red objects in the room etc. Thus the concept being the same, the level at which the skill is taught differs.

The staff providing the services at MNC includes Special Educators, Physiotherapists, Occupation Therapist, Speech and Communication Therapists, Vision Therapist, Consultant Pediatrician, Consultant Dentist, Physical Education Instructors, Yoga teachers and a Music teacher.

Most of the children hail from Chennal and its outskirts, Districts of Tamil Nadu. A few children from the states of Andhra Pradesh, Assam, Bengal, Karnataka, Kerala, Pondicherry and countries like Middle East and the USA have enrolled at MNC.

Centre-Home Based

In some cases parents are unable to bring their child to centre every day. Then the parents and MNC staff together decide on:

- Periodicity of parents visit to the centre for training
- Number of home visits by the special educators to create supportive environment

Home Based

In very rare cases, the centre assesses the child and helps the parent to chart out the customised development program using Upanayan frame work to be carried out by the parent in their own home. The child and the parent return once a quarter for evaluation and upgrading the program for the next quarter. Telephone and technology such as skype are used by such parents regularly to course correct with MNC personnel.

Upaneeta Software

MNC developed Upaneeta to document each child's details, assessments, interventions and evaluations. The recording in the software is done by the class teacher in coordination with other members of the team and with the consent of the parents. The Group Heads verify and validate the records at regular intervals. At the end of each quarter, after evaluation, parents see the profile of functionality before they plan for the next quarter.

TIMELINE OF EVENTS AT MNC · Launch of MNC 1989 1st International Conference 1989 · Annapoorna Project Sanmargam 2007 Refresher courses of TN GOVT EICS 2010 AVMVK academy to conduct RCI accredited courses 2012 Sambhavam · SRTC Autism centre 2014 Migration to digital date - Upaneeta 2016 · Integration with Balamandir Kamaraj Trust 2014 Launch of Jivikam 2016



The Trustees of BMKT are people from different walks of life whose common goal is the welfare of the destitute and abandoned children who reach the Balamandir premises. Started 75 years before, in the year 1949 by Mrs. Manjubhashini and Mr. K Kamaraj, the then Chief Minister of Tamilnadu, the trust is a treasure house of the efforts and satisfying outcomes of a team of committed voluntary service providers looking beyond their own profession and family life and deeply involved in the care, protection and upbringing of the children at Balamandir, age group cradle to school and beyond. They are ably assisted by likeminded members the Executive Committee who share their interests and expertise in the many activities of the trust. The sub-committees are unit specific and each has experts who tune in with the matters of the unit. The management team of the unit works in close conjunction with the subcommittee members in the best interest of the children of BMKT.

Trustees of BMKT Mr. N Kumar Mrs. Maya Gaitonde Mr. M K Sonthalia Mr. P Natarajan Mr. Sriram Panchu Mr. K V Rengaswami Mrs. Girija Valdyanathan Management Team Sub Committee- MNC Mr. S Krishnan Mrs. Andal Raghavavn Mrs. Andal Ragahvan Mrs. S Vasanthi Mrs. Jaya Krishnaswamy Mrs. Hemalatha Arumugam Dr. K Vijayraghavan Mrs. A Sumathi Mrs. Janaki Balakrishnan Miss C Thenmozhi Mr. P Nartarajan Ms. Sarojini Ms. Aruna Rathnam Mr. S Vijayan Mrs., S Vasanthi

4. VISION, MISSION, VALUES, OBJECTIVES AND VALUES (VMVOA)

MNC first conceived the Vision and Mission of the Centre in 2004. The Vision Mission and Values of the Centre continue to guide and inspire the organization in its work and therefore remain unchanged.

VISION

 Reaching Early Intervention Services to every Child with Intellectual disability and associated conditions

MISSION

- Provide services in Prevention, Early Detection, Identification and Early Intervention in Intellectual Disability
- Empower parents and family members in the care and management of children with disability
- . Undertake any other responsibility in, making "Inclusion" a reality for the child
- Disseminate information on creating awareness, updating of knowledge in Intellectual disability and associated conditions among professionals in the field and the general public.
- Starting a Training Academy to conduct recognized courses in Special Education

VALUES

- Zero Rejection of any child at entry level 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:

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
- Establishing 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
- Conducting Early Childhood Special Education Diploma course

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

- Dissemination of knowledge
- Effective media communication
- MNC website

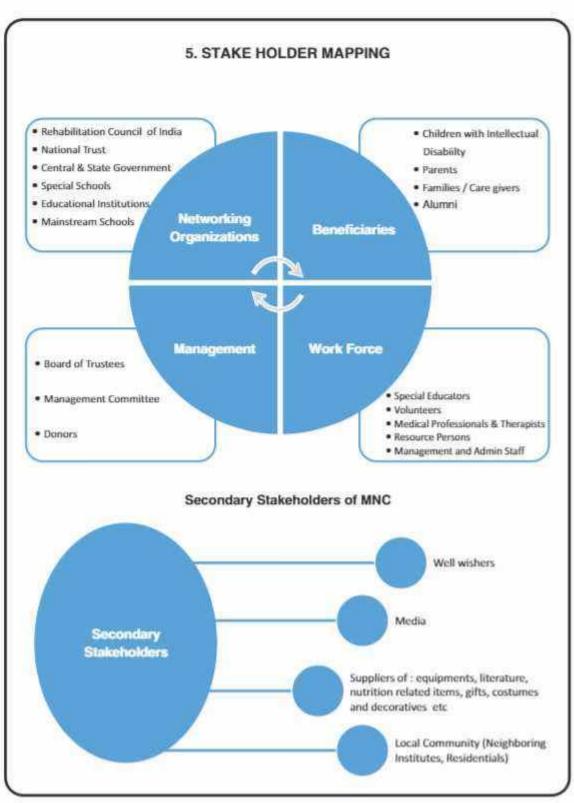
Objective 4: Organize Outreach Programs through Government Schemes and in programs conducted for Special Schools

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

<u>Objective 6:</u> Moving forward - Preparing children with early intervention experiences, training them in developing skills towards employability in their adult years, on an experimental basis.





6. SCOPE AND METHODOLOGY

This presentation of Social accounts covers a period from **1.4.2020** to **31.3.2022**. The years 2020-2021, 2021-2022 reeled under the pandemic and most of the operations were remote.

Stakeholder Consultation

Stakeholder	No. of stakeholders	No. consulted	% consulted	Methodology
Children	92	70	76%	Parents responded on behalf of the child
Parents	96	70	73%	Structured Interviews using a questionnaire
Special Educators	29	26	90%	Focus Group Discussions & Personal interviews
Management staff	7	4	57%	Personal interviews

Omissions:

The following stakeholders were not consulted – Donors, Alumni, and Networking organizations.

6.1 Methodology for consultation with Parents

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.

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. On an average the time taken for completing a questionnaire was 30 minutes. Other tools used were Focus Group discussions, feedback forms from parents, NGOs and from training sessions conducted.

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.



Mrs. Lakhsmi Gopal interveiwing a special edcuator



Mrs. Andal Raghavan interviewing a parent

(Annexure 8 is questionnaires and Annexure 9 is Analysis of the responses)



7. REPORT ON PERFORMANCE: ANALYSIS OF THE SOCIAL ACCOUNTS

Values of MNC are:

- Zero Rejection of any child with Mental Disability.
- 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 Intellectual 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. Parents who walk with their children older than 6 years in the hope of getting intervention are directed to other intervention centers.

In confirmation with our values every child who steps into the centre is "included" and pre registered. No child is rejected. If the child is over 6 years the parent is guided to a special school / vocational centre with a follow up to see that the child gets the right help. Children below 6 years and suitable for Early Intervention are enrolled into the program at the centre.

Mrs. Jaya Krishnaswamy

Openness to Developments and Innovation in Technology in the field of special education

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.

COVID pandemic situation did not stop us from reaching our vision to serve children with special needs rather it gave us the opportunity to explore the circumstances and change the direction to reach it. Our focus shifted from what we could not to what we could

C Thenmozhi, Vice Principal - EIC

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 Intellectual disability

Activity 1: Early detection through direct communication and referrals

In line with our zero rejection policy, children irrespective of age who seeks guidance, counseling and intervention are pre-registered before the start of the academic year. Out of this, children who are age appropriate, and who decide to join the centre are screened, assessed and enrolled. These children are referred to MNC through various sources like doctors, hospitals, parents etc.

Children referred to the centre in 2020-2021 and 2021-2022

	No. of Children	Pre Registered**	
Sources	2020-2021	2021-2022	
Practicing Private Doctors	4	8	
MNC Parents	7	9	
MNC / BMKT staff	5	10	
Well wishers	3	17	
Media	0	9	
Government Hospitals	1	5	
Private Hospitals	0	2	
Others NGOs	0	7	
Others not included above	3	1	
Total	23	68	

30% of the parents who responded to the survey had enrolled their child at MNC as their doctors/ hospitals advised them.

27% of the parents had enrolled after interacting with other parents at MNC.
25.7% were referred by their therapists or Special schools.

Number of children enrolled under Upanayan Early Intervention Programme during 2020-2022

				lo. of Ch	ildren or	the roll	s**			
		2020-2021					2	021-2022	2	
Age Group	Children at the start of the year	Children who moved ahead to other institutions	Children who joined /rejoined during the course of the year	Children who dropped out during the course of the year	Children on active roll	Children at the start of the year	Children who moved ahead to other institutions	Children who joined /rejoined during the course of the year	Children who dropped out during the course of the year	Childrer on active roll
Birth te 2 Years	17	0	8	2	23	8	0	8	0	16
Two to Four Years	25	0	2	3	24	19	0	20	17	22
Birth to 2 Years	34	6	4	6	26	45	6	10	21	28
Montesson	8	2	0	0	6	11	-1	2	4	8
Montessori	29	0	7	1	35	31	2	7	10	26
Total EIC	113	8	21	12	114**	114 **	9	47	52	100

^{**} The children on roll (114) at the end of 2020-21 continued in 2021-22 since moving ahead to other institutions was impossible due to the closure of the mainstream schools and special schools during the pandemic period. We retained all children and in due course of 2022 helped them to move to other mainstream/special schools.

Activity 2: Early identification using the UPANAYAN assessment tool

After 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 Intellectual Disability with associated conditions including Hydrocephaly, Microcephaly, Macrocephaly, Cerebral Palsy, Down 's syndrome, Autism / Autism Spectrum disorder etc.

Children Enrolled (Disability wise) for the year 2020-2022

Diagnosis Autism Spectrum Disorder	No. of Children			
	2020-2021	2021-2022		
	31	25		
Cerebral Palsy	27	29		
Developmental Delay	8	9		
Seizure Disorder	10	6		

Discount of the second of the	No. of Children			
Diagnosis	2020-2021	2021-2022		
Seizure Disorder with Associated Condition	14	13		
Attention Deficit Hyperactivity Disorder	3	2		
Down's-Syndrome	12	9		
Microcephaly	4	2		
Hydrocephaly	1	1		
Metabolic Disorders	1	0		
Speech and Language Disorder	2	2		
Williams Syndrome	1	0		
Neruo typical child from BMKT	0	1		
Grand Total	114	100		

This reflects the types of disabilities prevailing in the children who present themselves at the centre.

Activity 3: Implementation of the Early Intervention Program UPANAYAN

MNC had to close down the Center based activities for children due to the lockdown followed by the COVID pandemic since March 2020. These Special children needed constant training in the absence of which children could go into regression by losing the skills learnt at the Centre and would affect their developmental milestones. After an internal assessment and discussion with all staff members it was decided to plan for a home based programme for the children. Therefore, the need of the hour was to design a structured routine (from the time the child gets up till the child goes to bed), that will help the child maintain skills already acquired and learn newer adaptive behaviors.

The absence of physical contact between the Special Educators / Therapists and the children imposed a challenge in delivering any programme to the children. So it was decided to seek the support of parents as the "carry- over agents," day to day to closely work with the children in helping them adapt to these changes as per the instructions of the special educators. Not only was physical contact with children impossible, the teachers could only discuss/deliberate/ exchange views and brainstorm with the parents over the phone/mobile. After several rounds of consultations within the team, "A 24 Hours Home-based Programme", was drawn to help children receive early intervention at home through digital technology.

A systematic and structured process in implementing the programme was framed and a blue print with action to be taken week wise was evolved. Activities of the programme were designed to ensure –

- Maintenance of skills already achieved, and
- Progress in activities of daily living, as parents can spend adequate time for training in this domain.

The skills were simplified as **tasks** in a sequential order. Based on the child's current level of functioning in a skill, and each particular task was set as short-term goal.

Time table

Week	Special Educator	Physiotherapist	Occupational therapist	Voice & Vision
22 to 26 th June 2020 (Reopeni ng for the year 2020-	Collect information on family's present status using standardized format.	Parents sked to send videos of the children's therapeutic exercises in the common Whatsapp group to know the current level of each child	OT questionnaire for home based program prepared after discussion with other colleagues.	Vision activities planned and grouped under different categories like vision tracking, stimulation and so on.
2021)	Timetable to interact with ea	ch parent decided with the	eir consent.	
29 June to 3 ^{ut} July	Parent sends a sample daily routine of their child. Special educators clarify their doubts with parents on the routine.	Assess the child based on information and the videos sent by parents.	Using the questionnaire, information collected from the parents through phone calls.	Information collected about the vision status from the parent through phone calls.
6 to 10th July	Special educators coordinate with the therapists (PT/ OT/ Vision) to get the defails of their recommendations	Coordinate with the special educator and co-therapist for pro-motor inputs.	Individual intervention plan prepared for each child. Therapists intervention plane incorporated with the special educator's planning of activities.	Individual intervention plan prepared for each child and embedded in the child's routine at home.
13 to 17 th July	Special educators designed the individualized 24 Hours Home-based Programme for every child including family, member's role in implementation and verified from Principal & Vice-Principal.	Incorporated therapoutic exercises in the overall flow of 24. Hours: Home- based Programme	Reached the parent with the intervention plan through phone calls /Whatsapp	Reached the parent with the intervention plan through phone calls /Whatsapp
20 to 24 th July	24 Hours Programme communicated to parents, through phone call and Whatsapp	Exercises that can be easily carried out by parents at home explained through demonstration videos / video calls.	Explained child's activities to the parent through Whatsapp demonstration videos/pictures/video calls	Explained child's activities to the parent through Whatsapp demonstration wideos/pschures/video calls
27 to 31 ^{al} July	Parents were asked to write the details of the programme and stick it in a noticeable place at their home.	Activities done by children monitored on regular basis through video calls, to make sure they are not deviating from therapist's guidance in assisting their child.	Parents received guidance to work on the activities with their cheldren based on videos sentivideo calls. Therapists gave additional corrective inputs on each child's progress for further follow-up.	Parents implemented the vision activities for their child and were guided through video calls.

How the Virtual classes worked

- For each class a separate Whatsapp group was formed during the first week of July for interaction between the staff and parents.
- As per the scheduled time table, the special educator contacted each child twice a week and therapists contacted once a week.
- Time allocated 30minutes per session per child. Each child interacted with staff for 90 minutes per week but received inputs for activities for the whole week.
- For children requiring intervention for vision impairment, vision therapist contacted once a week.
- Follow up was done through phone calls and/ or video calls.
- Once a week, parents shared the performances of their child, in the form of photos and videos in their Whatsapp group.
- Special educators and therapist shared their and feedback and further instructions on line.
- Depending on the progress attained by the child in performing a given task, the next level task was set as the new goal.

(Refer Annexure 1 for 24 Hours Home-based Programme)

While the physical classes dealt with the skills in totality, the online classes broke the skill into tasks and instructions for every task are given step by step to achieve the skill.

Whatsapp Messages sent to parents



Special Educators and Therapists record the key points observed during the call with Parents. This was **verified on a daily basis** by the Group Heads to know the progress of the children and offer guidance to the special educator accordingly. **Weekly monitoring** was done by the Principal to know the effectiveness of the programme given, and add suggestions if required in the implementation.

Special educators taking classes online













Special Education - Process Improvement:

With an objective to enhance the quality of the programme delivered the following were offered-

Whatsapp Video calls session (EIC):

In the beginning Special Educators interacted

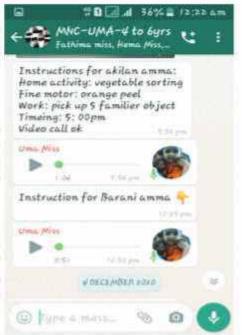
during two sessions through voice call alone. However in order to build and sustain the rapport with children from Sep-2020 onwards they started interacting with child through Whatsapp video calls.

Prior Instruction for Session (EIC):

Special Educators send instructions to Parents pertaining to their session a day before in the respective Whatsapp group. It includes the call timing, tasks / activities that will be followed-up and the required materials.

Task Analysis (EIC):

Special Educators wrote task analysis for the self-help skills, to guide the Parent appropriately about the task to be trained. Also for the tasks achieved, the video clip of child's performance is documented and corresponding skill link in Upanayan is noted.



Key aspects to record observations (EIC):

To facilitate precise **recording of the observations** made during follow-up sessions, the key aspects were identified and accordingly Special Educators and Therapists record the details of their session.

Call Recording:

Each Special Educator is to document 3 call recordings per month of their Parent-Teacher interaction. An official message was sent by the Principal of EIC and Jivikam to the respective Parent group in this regard through whatsapp. In addition special educators also informed the parent about the call record at the beginning of their call.



Lockdown Talk - what the teachers say!

We all grow through challenges". Though challenges are inevitable they also present an opportunity to re-discover our strength. Yes! COVID pandemic situation did not stop us from reaching our vision to serve children with special needs rather it gave us the opportunity to explore the circumstance and change the direction to reach it. Our focus shifted from what we couldn't do what we could. Individualized 24 Hours Home-based programme was designed by Special Educators in consultation with Parents and Therapists to help the children in the

maintenance of skills already acquired. No surprise they were doing an awesome job with the continuous support and guidance given by our staff members. Their efforts in carrying out physiotherapy exercises deserve a special mention. Though we missed the physical presence of children at the Centre, watching the video clips of their performances at home was a delight. It motivated us to function uninterruptedly.

Miss C. Thenmozhi, Vice Principal - EIC



Lockdown Talk - what the teachers say!

The 24 hour program was very useful to interact with the dear children whom we missed with their parents. We really came to know the value of the parents who were acting as effective carry over agents at home and the involvement of family members in the program. Thanks to the management for implementing this. This has brought the staff and the children together to interact wholeheartedly.

Mrs. A Hemalatha, Principal - EIC

Therapy programs on line - Physiotherapy

When Intellectual disability 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 Early Intervention Program. 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. During the pandemic the therapy classes were held through whatsapp calls and Google meet. Instructions were given to the parent through video calls. The child was observed performing the skill at home. (Refer Annexure 2 for Sample online Physiotherapy instructions to the mother)





Physiotherapy at home with the parents



Lockdown Talk - What the teachers say!

When we started 24 Hours Home-based program, my mind was stuck with a query as to how we can help our children with physiotherapy training. Many of our parents are aware of the child's needs and therapy activities followed at the Centre because we take their assistance. Hence though they don't have practice to do therapy, it is not tough for us to teach basic techniques to encourage parents. After a fortnight of such communication, the parents

started to learn with clarification from us to help their children at home in COVID 19 pandemic situation. I must say, they did a perfect training job with the help of the father and siblings. I am happy to be part of MNC team to extend support to our children in any situation. Mr. K Subramanian – Group Head

Online Occupational Therapy

Occupational Therapy primarily concerns the child's ability to perform functions required in day to day activities. Secondarily 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, takesnote of the priority goal set for the child by the special educator and integrates occupational therapy to aid the goal selected.

(Refer annexure 3 for OT program during pandemic)





Children performing occupational therapy activities at home

Online sessions helped us to know the children's routine at home and thereon we framed the activities where parents could help the children with available resources at home. Maximum efforts were put to extend our help to the mother in understanding why the activity is given to them and the impact it would bring in the child.

Mrs. Hemalatha

Principal EIC

Online Speech and Language Intervention

A detailed report about 24 Hours Home-based Programme to children at MNC was sent to Mrs. Meenakshi, our Speech and Language Pathologist to orient her about the structure of the programme. Further interaction between MNC team and the Speech therapist resulted in a specific plan of action being drawn up for Virtual Speech and Language Therapy sessions as below:

- Children details were collected from special educator in terms of their Chronological age, age group, Provisional diagnosis, online platform (Zoom or whatsapp), Contact number with email-id.
- Assessment form for Virtual Speech and Language Intervention was designed to arrive at a baseline performance of the children. From the ascertained baseline, goals & activities were structured using materials available at home.
- Activities were demonstrated during the session for better understanding of the parent and special educator.
- Intervention programs mainly focused on language stimulation (both receptive and expressive skills), speech (articulation) and Oro motor abilities.
- Home intervention programs were monitored using video clippings from the child.
- A copy of the filled assessment form was sent to MNC team to file it in the respective child's file.

121 children (EIC 104 + JIVIKAM 17) had been assessed and the follow-up session started from 14-12-2020 onwards.

Group activities

Group Session through Google Meet:

From Feb-2021 onwards, in addition to individual session, Special Educators planned for online group sessions. Children were grouped based on their performance level and activities such as Yoga, Action songs, Storytelling were all conducted online. The day prior to the Group session, the mothers were informed about the activity that will be

conducted the next day and to keep the materials ready for the session. For e.g.: if the group activity selected was finger painting then the parents would keep the chart paper, paints ready before the Google meet. The teacher would give instructions from the centre and would observe how the child does the activity virtually.

Parent-Teacher meet was conducted once in a month in the same manner for the same group to give general instructions and get feedback from Parents.

As the parents were becoming adept in using Google meet, a time table was set for all the children for the 24 Hour home based program. This comprehensive timetable included special education and all therapies.

	24	The second second second second second	and the second second	andir Kamara amme: CHILD	Address of the Parket of the P	TABLE	
Academic Year Group Name of the Class Teach		: 2020 - 21 : 2 TO 4 YEARS					
S.No	Name of the child	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
i	SAICHARAN	Group Session J	SE (VOICE) OT	VISION	PT	SPEECH	SE (VIDEO)
2	CATHERINE TERESA	Graup Sessian 1	OT	5E (VOICE)	SPECIAL	st (viota)	Group Session 4
3	JEBIN DAYAL	Graup Session I	OT.	SE (VOICE)	SPECCIO	SE (VIDEO)	Group Session 6
4	SANJIV RAM	SE (VOICE)	OT	Group Session 2	SE (VIDEO)	SPEECH	Group Session 4
5	MAHASRI	SE (VOICE)	OT	Group Session 2	SPECCH	SE (VIDEO)	Group Session 4
6	CHRISH MATHEW	5E (VOICE)	OT	Grauge Seasion 2	SE (VIDEO)	Group Session 2	SPECCH.
7	RENUGADEVI	OT	SPEECH	SE (VOICE)	PT	Group Session 3	SE (VIDEO)
8	SASHWIN AKASH	OT	SPEECH	VSKON	91	Group Session 3	SE (VIDEO)
9	TABUN	SE (VOICE)	SHEECH	VISION	DE	Group Seasion 2	SE (VIDEO)
10	NISHANTH	07	SPRECH	SE (VOICE)	SE (VIDICE)	PT	SE (VOICE)
11	SANAFATHIMA	SE (VOICE)	SPECIFIC	VISION .	SE (VOICE)	WE	SE (VOICE)

Attendance:

From Jan-2021 onwards attendance was marked for all children at MNC (EIC and Jivikam) attending 24 Hours Home -based programme. Parents were informed prior implementation. This recording facilitated in analyzing if the children were regularly attending the programme and the details of attendance was included in monthly report. The children who are absent for a period of 3 months continuously, irrespective of follow-up at all levels were classified as drop-outs.

Evaluation

The system of external evaluation has been practiced in order to get an unbiased performance picture of the child in totality. Evaluation was done after the teaching was completed, every quarter by the special educators and the interdisciplinary team of experts. Evaluation during the pandemic was done online. Since the skills were broken into tasks and taught to the parents to be transferred to the child, the evaluation was very simple and task based and a real-time video call was used by the special educator/therapist to evaluate the child.

Evaluation seeks the answer to the question

- "Did the student learn according to the plan?"
- If the answer was "Yes" then new objectives were set and fresh training commenced.
- If the answer was "Not yet", then the team discussed to find out the reasons and then introduced new teaching strategies to help the child make progress.

Effectiveness of Evaluation:

- Understanding the progress 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.



Lock down talk: What the teachers say!

The routine of the children during lockdown was "sleep late and get up late. This posed a big problem to the parents. They had difficulty in bringing the children back to a good routine. Our program with demonstration made it easier for them to engage their children with activities improving their skills. A new routine was set and both parents and children were busy and the behavioral issues of the children were getting reduced.

Mrs. A Sumathy, Principal - Jivikam

Feedback from Parents - Survey

- 81.4% of the parents had understood clearly about the skills that were set as goals for their child.
- . 86% preferred the centre based teaching than the online method
- On enrolling, 27% of the parents hoped that their child would become normal and go to school.
- 35.7% had no idea on what to expect from their child.
- 16% expected their child to be independent and self sufficient.
- After enrolling, 33% wanted the child to be independent, 21% wanted them to lean vocational skills, 19% wanted them to go to normal school

Almost all parents, after coming to MNC, have started accepting their children's condition, and have a realistic view of their abilities and that academic goals are secondary. They understand that each child progresses gradually according to his/her ability and cannot be pushed. Daily living skills for independent adult life is more important. They now aspire to make their child independent and self sufficient and have understood that the child's condition and potential plays a big part in their progress. MNC has become family for many.

Feedback from Parents



Lockdown talk - What the parents say!

Lockdown talk - What the parents say!

ஆன் லைன் பாடம் நல்ல பயன்ளினதாக உள்ளது. இதுவரை ஆதிரியர்கள், தொரின்ட், அம்யா எல்வாம் இணைந்து பாடம் நடத்தினோம் கோவிட் சூழலில் ஆன் லைன் பயிற்சி மூலம் எங்கள் வீட்டில் உள்ள அனைவரும் இணைந்து என் மக்குக்கு பயிற்சிகள் செய்கிறோம் இதனால் குடும்ப உறுப்பினர்கள் அனைவரும் நிதிஷுக்கு பயிற்சிகள் கொடுப்பது அவளை கையாணுவது பற்றி உணர்கள் ஏற்பட்டு உள்ளது. இப்பொழுது பாட்டி, தாத்தா, அக்கா, மாமா எல்லோறும் அணைடன் விளையாடுவது போல்லோ ஈடுபாடுடன் பயிற்சிகளையும் செய்கின்றனர். குடும்பத்தில் விழிப்பு உணர்வு ஏற்பட்டு உள்ளது. மிக்க மகிழ்ச்சியாக உள்ளது.



Mrs. R Devi (Mother of Nithish)

Activity 4: Providing Support Systems through various projects

A. Project Annapoorna

Purpose of the project

- To identify the children attending early intervention program having gross deficiencies in nutrition including those with malnourishment
- Implement corrective measure to set right the imbalances
- Periodic assessments for improvement

During the pandemic the Annapoorna Coordinator called up all the parents and had a detailed discussion with them about the well being of the child, challenges the mothers are facing in feeding, diets that enhance immunity during the pandemic. The feedback was collated and given to Mrs. Avanti Prabhakar, our honorary nutrition consultant who then formulated an immunity booster diet to be given to the parents. (Refer Annexure 3 for Diet sheet for parents)

Nutrifest - As part of Project Annapoora the centre conducts a food festival annually. This "festival for nutritional awareness" is to create awareness on the importance of right and balanced diet in growing children. Nutrifest is an event specially designed to focus on the importance of nutritional intervention for children with disability. "Healthy Foods, Healthy Kids". It is celebrated yearly in March. The parents participate in the event, where a theme is selected every year for a cookery competition.

In 2021, as the centre was functioning on line, Nutrifest was also celebrated online on 7th April 2021. A Video clip of the preparation of the dish (not exceeding 1 minute), photograph of the ingredients used and the procedure in written form were sent to the respective class Whatsapp group. All the videos were compiled and a virtual Nutrifest took place at the centre. Judges at the centre announced the winners and recipes were filed for future use.



Mothers cooked in their homes and send the videos to the centre

The Theme was: "PANDEMIC INSPIRATIONS - Recognizing and acknowledging our traditional food items"

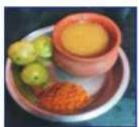
(நம் பாரம்பரிய உணவுப் பொருட்களை அறிந்து அங்கீகரித்தல்)

Recipes were prepared based on the ingredients given below:

- Turmeric (மஞ்சள்)
- 2. Ginger (இஞ்சி)
- 3. Garlic (பூண்டு)
- 4. Pepper(மிளகு)
- 5. Lemon (எலுமிச்சை)
- Amla (தெல்லி)
- 7. Drumstick leaves (முருங்கை இலை)
- 8. Curry leaves (கறிவேப்பிலை)
- 9. Groundnut (வேர்கடனை)



Online presentation to the judges sitting at MNC











Recipes made of Amla (Indian gooseberry)

Nutirfest was conducted on 25th March 2022 at the centre. The theme was "Age appropriate balanced diet with traditional recipes for children in the age groups Birth to 2 years, 2 to 4 years, 4 to 6 years and 7 to 15 years". There was a cookery competition on the theme and marks were awarded as per the criteria listed below:

- Innovative and easily preparable recipe
- · Presentation of the dish
- Charts depicting the nutritive value and role of traditional recipes in giving the children a balanced diet

Mothers of children in the age groups of birth to 2 years, 2 to 4 years and 4 to 6 years and 7 – 15 years took part. About 50 dishes came out on the table and three judges had a tough time selecting the best dishes.

(Refer Annexure 4 for diet chart during pandemic and Annexure 5 for Nutrifest 2021-2022)

B. Project Sanmargam:

The Ultimate aim of every parent who has a special child is to integrate the child into mainstream society. "Sanmargam" aims at preparing the children to "Move Ahead" beyond the birth to six years program of intervention, towards the next stage of education in mainstream and special school systems.

Apart from preparing the children for school readiness, help is provided in:

- Placement of children in the mainstream schools, coordinating with parents in their choices of schools, with teacher and head of institutions about children who come to them
- 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
- Counseling and advice is offered to the mainstream school teachers and parents to take the child forward to reach his/her potential smoothly.

On the 22nd April 2022, the 14th Moving Ahead celebration was held for children enrolled from 2019 to 2022, as the Moving Ahead program was **not held due to the pandemic for two years the period of this social audit.**

- 20 children moved into the mainstream schools / other special schools.
- Among them 8 moved to Mainstream Schools and 12 to other special schools.

This has been a significant contribution by MNC towards habilitating the children with developmental delays



The young graduates with the chief guest and the management



Mrs.Uma a parent sharing her experiences



Children's skit at Moving Ahead



Parents dance at Moving Ahead

C. Project Sankarshana

Sankarshana means bringing back, and was conceived to bring together children who had on certain compulsions dropped off from the program, to look at their current needs and provide advice to the parents. This project's focus is on -

- Counseling parents on the importance of Early Intervention and the continuance of the same
- Organizing home visits, contacting the parents through telephone, and by mail
- Parents and members of the family are met to find our the reasons for dropping out
- Putting efforts to bring them back to Early Intervention.

This project assumed great importance and imminence due to the pandemic. Varied problems cropped up from loss of jobs for the father, prolonged closure of schools for siblings, sharing of day time space with all at home, not to say the loss of a structured training for children with special needs.

Sankarshana Coordinator called every parent at home since visits were not possible.

- About 14 (in 2020-2021) of them moved to their native place where they had roots, since the father has lost his job and the family could not meet the living expenses in the city.
- Distribution of dry ration by the centre was very much welcome since it helped them meet the ends on a daily basis.

D. Project Samyam

This project was conceived to bring the alumni, current students and new entrants together with the past students and interacting with them. The past students find reunion with their peers and teachers joyful. 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

Samyam 2020-2021 - This event was held on the 9th, 11th, 13th and 16th of August 2021, between 10.30 and 11.30 am through googlemeet. We had 4 chief guests one each day Ms. Aruna Rathnam, Mrs. Janaki Balakrishnan, Mr. SKrishnan, and Mrs. Vimala Kannan. Parents of 4 groups of children birth to 2 years, 2 to 4 years, 4 to 6 years and Jivikam were invited to air their doubts and challenges in bringing up their children with special needs. The mothers who had faced similar situations provided solutions. Now, many concerns were not cleared during Samyam and so the management arranged a series of expert on line consultations for the mothers. It started with a Google meet with Mr. Inbadurai, Occupational Therapist presenting a session on Sensory Integration on the 17th of Sept. On the 22nd Sept, we had Dr. Veluchamy, Pediatric Neurologist who spoke about brain development and seizures. The last in the series of meets was with Dr. Subramanian, Pediatrician who spoke on general health and upkeep for special children, prevention of diseases and best recommended nutritional practices.

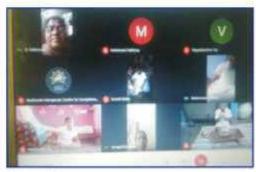
E. Other Events:

i. Sports Day

- Every year Sports day is conducted during the month of February. During the pandemic MNC planned to a Virtual Sports Meet.
- Google Meet was the platform decided for conducting the virtual sports meet. Parents were guided by Teachers in the installation and operation of the app. A trial meet was conducted for all parents to get them familiarized with the platform.

- According to the performance level of the children, games were designed based on the materials available in home environment. A total of 29 games were designed. Children who complete the game as per the set criteria and time limit are the winners of the game.
- Parents initially sent a video clip of child performing the game which helped in guiding them. Thereafter rehearsals were conducted on google meet.
- Separate Whatsapp groups were formed to enable children participating across different classes but with similar ability. Each game was given a batch number based on which Parents logged in promptly.
- Sports day was conducted on 3 days 22nd, 24th and 26th Feb 2021.
- 104 children (87 from EIC, 3 from SRTC and 14 from Jivikam) participated.
- E-Certificates were distributed for all children who participated in the Virtual Sports Meet.





Virtual Sports meet

Parents feedback



ii. Annual Day:

12th of December 2020 MNC completed 31 years of service to children with developmental delays, Mental Retardation and associated conditions in the age group 6 years and below. A special day for MNC, since it brings to the front the last thirty one years of tireless and the dedicated work put in by the founders, Management Team, the staff, and of course the children and the parents. The theme for 2020 was STAY SAFE, STAY HEALTHY. The parents sent recordings of the children maintaining the strict pandemic guidelines given by the government that is - washing hands often, using a mask and maintaining social distance. The messages were sent as action songs, skits, monoacting and mock conversations with members of the family duly recorded and sent to MNC. The Chief Guest was Mr. N Kumar, Vice President, Sanmar Group and President of Bala Mandir Kamaraj Trust. Dr. Aruna Rathnam, Executive Director, welcomed the gathering and recorded the dedication and passion with which the parents are managing their children under the stressful condition of Covid 19.





Celebrations:

To emphasize the importance of festivals, depending on the level of child, special educators planned art and craft activities on the festival. Parents were requested to send photos/videos of how the festival was celebrated with children participation.







Pongal

iii. Special Camps

Freedom Trust conducted a camp at MNC to provide orthosis. This camp was organized by Dr. Sunder and his team in coordination with the therapy department on 25th March 2021 to provide mobility aids. 32 needy children were identified for the camp and amongst them 28 attended the camp in batches and availed the benefit.



Dr. Sunder of Freedom Trust examining our children

Parent's Feedback - Survey

When they knew about their child's condition, they all were sad, depressed, shocked, and did not know what to do, Helpless, very disappointed and found it very difficult to accept.

Coming to MNC was a happy feeling for most of the parents.

- 96% felt that the parent group was very helpful and supportive. The interaction among the parents transcends social status, and other differences. Parents were concerned for children other than their own and were willing to take care of them when necessary. They appreciated the MNC culture and even have formed parents group and go for outings on their own.
- 98.6% of parents were very much appreciative of teachers' Commitment, understanding and passion in working with children. They opined that the staff were ready to answer any question, clarify doubt anytime, either directly or through phone. The parents felt that they get clarity even with their personal problems when they interact with senior teachers.
- 49% of the parents were satisfied with the existing program.
- 30% felt that Occupational therapy and speech therapy were best suited for their child.
- · 26% wanted more communication and speech therapy.
- 10% wanted more occupational therapy sessions.
- 61% of the parents had a supportive family.
- 15% were still hesitant to take the child out.
- 11% started taking the child for functions after enrolling at MNC.
- 45.7% had availed government schemes and 21.4% had applied for the same.
- 30% were still not clear on their understanding about Early Intervention.

SOCIAL IMPACT OF EARLY INTERVENTION SERVICES (EIS)

Providing Early Intervention Services (EIS) for the habilitation of children with intellectual disabilities can have a significant and positive social impact on the individual child, family and society. Some of them are:

- a. Improved Quality of Life: EIS leads to improvements in the overall quality of life for children with intellectual disabilities. The therapies and educational support help children develop essential skills and abilities, improving their ability to communicate, socialize, and participate in daily activities.
 - 114 children in 2020-2021 and 100 children in 2021-2022 enrolled in the program.
 - The EIS reinforced Positive Behavior in children, as the activities incorporated in the program meaningfully engaged the child throughout the day and most importantly with all the family members.
 - Regression of the child's activities was avoided by continuous training given at home during COVID times.
 - The online sessions improved Teacher-Child rapport as children got connected with their teachers through video calls which helped in sustaining the rapport already built.
 - Teacher-Parent interaction enhanced as the online sessions created a platform for Parents to interact with teachers on a weekly basis. They clarified their doubts, shared the challenges faced, and sought professional guidance.
 - Teachers became innovative and made use of the available smart phone technology to handle the classes effectively and share their knowledge to meet the needs of the child.
- Empowerment of Families: EIS not only benefit the child but also empowers families.
 - Parents evolved as Special Educators and Therapists in delivering the programme to their child at home. This has built confidence in them, and they truly believe in the concept of being a carryover agent for their child.
 - The training helped them better understand and meet their child's needs.
 This further aided in reducing stress and improved the well-being of the entire family.
- c. Inclusion and Social Integration: EIS promotes inclusion and social integration by helping children develop the necessary skills to interact with their peers and participate in community activities. This reduces the stigma associated with intellectual disabilities and promotes a more inclusive society.
 - 28 children benefitted from the orthosis camp.
 - 26 children availed UDID
 - 10 got maintenance grant
 - 63 children availed Niramaya insurance cards.

- d. Better Educational Outcomes: EIS leads to better educational outcomes for children with intellectual disabilities. By addressing developmental delays and providing tailored support, these children are more likely to succeed in school, potentially reducing the need for special education services later.
- e. Reduction in Behavioral Problems: EIS helps address behavioral problems associated with intellectual disabilities. By teaching coping strategies and providing appropriate therapies, the likelihood of challenging behaviors that can disrupt families and communities is largely reduced.
- f. Enhanced Social Cohesion: EIS fosters a sense of social cohesion and unity, as individuals with intellectual disabilities are more fully integrated into the fabric of society. It helps break down barriers and promotes the understanding that every individual has unique strengths and potential contributions to make.
- g. The following is an email received from Mr. B Ashok Kumar, father of Aadavan who was registered at MNC vide Registration number 2005393 on 14.4.2015. He was diagnosed with ADHD. He left the centre after a year's training.

Our son A. Aadhavan an old student of MNC has improved a lot now. He is very good in his studies. He is double promoted to 7th std from 5th std this year (2021-2022) based on his age and his performance. In addition to this he wrote Hindi Prathamic exam and he has secured 88 percentage of mark. Our whole hearted thanks to each and everyone at MNC who gave training to him and laid foundation for the uplift of our son. -B. Ashokkumar

AAdhavan underwewnt Early Intervention at MNC in 2015 for one year.

Objective 2 - Rehabilitation of Parents and their Empowerment

Activity 1 - The pandemic provided an opportunity to the parents/siblings to take part in the training of the children. The tasks / skills were taught online to them which were then transferred to the child.

MNC believes that the mother is the natural teacher of her ward and the fulcrum of Upanayan. The pandemic years proved beyond doubt that empowering the mother with the knowledge of the training and the methodology helps her to be an effective carryover agent at home. That is the reason MNC insists on the presence of the mother at the centre with the child. The on line instructions that the teachers imparted to the mother to be transferred to the child, was done by the mothers with precision and enthusiasm. Every mother was metamorphosing into a special educator / therapist herself and the success of the 24 hour program is to be fully attributed to them. Amidst the difficult times at the domestic front due to Covid, they were able to send videos of the performance of their child and follow whatsapp instruction from the teacher, speaks volumes of their versatility. Kudos to all the mothers and other family members.

Mrs. Jaya Krishnawamy - Founder

Activity 2 - Dry Ration distribution:

The pandemic made a huge dent in the wages of the daily workers who could not afford freshly cooked meals even once a day; their earnings having taken a massive drop during the lockdown which ended up being a very stressful time for them. The management made special efforts to distribute dry rations to the needy parents during the pandemic, and here's where the Rotary club of Madras Besant Nagar made a difference and brought a smile on their faces during this trying time. They have

distributed Ration bags consisting of Rice, pulses, dry vegetables, jaggery and others items on the grocery that were used by the parents for children with special needs to prepare sundal, Kanji etc. The group heads coordinated this effort to find out the needs of the parents when they called them for the intervention classes on line. Rotary club was the main contributor, (having distributed 5 times to 5 batches of parents ranging from 10 – 15 parents) followed by Bhoomika Trust, family members of the Sanmar Group and individual donors.



Rotary Club of Besant Nagar, donated dry rations to parents

SOCIAL IMPACT OF REHABILITATION OF PARENTS

The rehabilitation of parents of children with intellectual disabilities can have a significant and positive social impact in various ways.

Enhanced Family Well-being: When parents receive rehabilitation and support services, it can improve the overall well-being of the family. As parents become better equipped to understand and cope with their child's disability, family stress levels often decrease, and family dynamics can improve. About 200 parents were empowered to teach / train their children at home through the 24 hour on line program for over a year. They showed remarkable understanding of the skills, immense patience and the tenacity to help their children come what may.

Improved Parent-Child Relationships: Rehabilitation helps parents develop better communication and relationship-building skills with their children. This can lead to stronger bonds and a more supportive family environment, which is essential for the child's overall development.

Reduction in Parental Isolation: Raising a child with an intellectual disability can be isolating for parents. Rehabilitation programs often provide opportunities for parents to connect with others facing similar challenges, reducing feelings of isolation and providing emotional support. 96% of the parents appreciated the parent's group at MNC which was helpful and supportive.

Reduced Stigma: Rehabilitation programs help reduce the stigma associated with intellectual disabilities. As parents gain knowledge and confidence in advocating for their children, they can help educate their communities and challenge stereotypes and misconceptions.

Community Inclusion: When parents are empowered through rehabilitation, they are more likely to advocate for the inclusion of their children in mainstream schools and community activities. This can lead to greater acceptance and integration of individuals with intellectual disabilities in society. Dry rations were provided to over 100 families at a time when their finances were almost dried up or very low due to lack of work.

Advocacy and Awareness: Parents who undergo rehabilitation may become advocates for the rights and needs of individuals with intellectual disabilities. They can raise awareness about the challenges faced by their children and work towards creating a more inclusive and supportive society.

Employment and Economic Impact: As parents gain skills and knowledge through rehabilitation programs, they may also have the opportunity to improve their own employability and economic well-being. This can have a positive ripple effect on the family's financial stability and overall quality of life.

Long-Term Independence for the Child: When parents receive rehabilitation and support, they can better plan for their child's future and work towards building a support network that will be beneficial throughout the child's life. This can help ensure a smoother transition to adulthood and greater independence for the child.

Policy and Systemic Changes: As parents become more informed and empowered, they may also engage in advocacy efforts to influence policies and systems related to disability services and inclusion. Their collective efforts can lead to systemic changes that benefit not only their own children but also the broader community.

Story of Hope

When Mrs. Uma Devi Vinoth Kurnar walked into the center with her daughter Krisha for admission the old staff were dumb struck. Mrs Uma Devi was an old student of MNC (1998-1999) who underwent early intervention for Developmental delay and mild autism. After 2 years of training she moved ahead to Children's Garden Higher Secondary School, where she passed her 10th exam with 450/500 and in the 12th standard she scored 1052/1200. She worked in CAMS as an assistant and also at a private school as a teacher. With the birth of Krisha she chose to stay at home to be with the child. She was able to identify early that the child had developmental delay and brought her to MNC for training. Krisha has joined the birth to two years group and the mother has enrolled in our diploma program

Vaijayanthi Desikan.

Exec. Secy - Admin

Objective 3 – Creating awareness on the importance of Early Detection and Early Intervention

Activity 1 - Dissemination of knowledge

The staff attended a number of webinars to enhance their knowledge including the Rehabilitation Council of India recommended. World Health Organization webinars on the pandemic.

- 5.8.2021 8 Staff members attended the CogniAble Software workshop arranged by the State Commissioner for the Differently abled at theSRTC, KKNagar.
- 17.9.2021 Mr. Inbadurai, Occupational therapist presented a session about sensory integration through google meet for the parents.
- 22.9.2021 Dr. Veluchami, Pediatric Neurologist presented a session about Brain Development and Seizures through google meet for parents.
- 4.10.2024 Dr. Subramanaian, Pediatrician presented a session about general health measures like prevention of diseases and nutritional aspects through google meet for the parents.
- 10.12.2021 Vannga Pesalam' a new initiative to exchange ideas between teachers, parents and an expert in the area of disability was started. Dr. Vijayaakshmi of NIEPMD shared her experiences as a special mother with parents of EIC through a google meet.
- 11.3.2022 Mr. Avanti Prabhakar conducted a google meet with the parents on the theme of the nurifest for the year. (The theme was "Age appropriate balanced diet with traditional recipes "for children in the age groups Birth to 2 years, 2 to 4 years and 4 to 6 years.

Activity 2- Effective media communication

The website was kept updated and active for any type of a query in the pandemic. The in-house magazine Kalpatharu covers all activities of the center quarter wise and the magazine is sent by email to all stakeholders — parents, teachers, donors, resource persons and the Government officials.

SOCIAL IMPACT OF OBJECTIVES 2 AND 3

Providing awareness on early intervention services for children with intellectual disabilities contributes to the overall well-being and cohesion of the community. When society invests in early intervention services, it sends a message of inclusion and support for all its members. This can foster a sense of social cohesion and unity, as individuals with intellectual disabilities are more fully integrated into the fabric of society.

The awareness of early intervention programs and their success can lead to greater support for inclusive policies and legislation that protect the rights and well-being of individuals with intellectual disabilities. This can have a broader impact on society by promoting equity and social justice.

Objective 4 - Organize Outreach programmes through:

Government Schemes and in programs conducted for Special schools.

(This was not done due to restrictions imposed because of covid 19),

Objective 5 – Create professionals in special education by offering Accredited Courses recognized by the Rehabilitation Council of India

For the last three decades there has been a steady increase in the awareness of Intellectual disability 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.

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 the 5th September 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. The academy conducts a Diploma course in Early Childhood Special Education (DECSE) for duration of 10 months. During this social accounting period 8 students (1 mother of MNC child, 7 of them outsiders) had undertaken the course. 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. (Refer Annexure 6 for Details of the teaching staff)



Class in progress



Practical examination in progress

58 students have passed out of the academy since it was started.

Year	Students	Rank	
2012-2013	13		
2013-2014	7		
2014-2015	6		

Year	Students	Rank
2015-2016	8	All India First, Second rank
2016-2017	5	
2017-2018	4	All India First, Second, Third rank
2018-2019	1	
2019-2020	6	All passed with Distinction
2020-2021	3	All passed with Distinction
2021-2022	5	All passed with Distinction
Total	58	

53% of students, who have graduated till now, are mothers of children who undergo intervention at MNC. Some mothers work as special educators at the centre or set up their own intervention centers.

SOCIAL IMPACT OF OBJECTIVE 5 - CREATING PROFESSIONALS IN SPECIAL EDUCATION

Creating professionals in special education is essential for building a more inclusive, empathetic, and productive society. It not only directly benefits individuals with disabilities but also contributes to a more harmonious and forward-thinking community. These professionals have a significant and positive social impact in various ways:

Empowering Individuals with Disabilities: Through tailored education plans and support, special education professionals empower individuals with disabilities to reach their full potential. This leads to increased independence, self-confidence, and overall well-being for them.

Parent and Family Support: Special education professionals often work closely with families. They provide resources, guidance, and emotional support, which improve the overall well-being of families with individuals who have special needs.

Improved Quality of Life: Special education professionals help individuals with disabilities acquire essential life skills, leading to an improved quality of life. This includes skills related to communication, self-care, socialization, and vocational training.

Reducing Stigma and Discrimination: Well-trained special education professionals help reduce the stigma associated with disabilities. They can educate communities, parents, and students about different abilities and foster a more inclusive and accepting society.

Enhanced Employment Opportunities: Special education professionals can collaborate with vocational programs and employers to create opportunities for individuals with disabilities to enter the workforce. This not only benefits the individuals but also contributes to a more inclusive job market.

Inclusive Education: Special education professionals play a crucial role in promoting inclusive education. By equipping educators with specialized skills and knowledge, more students with diverse needs would be included in mainstream classrooms. This fosters a sense of belonging and acceptance among all students.

Advocacy and Policy Influence: Trained professionals in special education often become advocates for policies that benefit individuals with disabilities. They can influence educational and societal systems to become more inclusive and accommodating.

Breaking the Cycle of Exclusion: Effective special education professionals can identify and address early signs of learning difficulties. This early intervention can prevent students from falling behind or being marginalized, potentially breaking the cycle of exclusion.

Promoting Social Cohesion: Inclusive education environments encourage interaction and understanding between students of all abilities. This fosters empathy, tolerance, and respect, leading to a more cohesive and harmonious society. A society that values and supports individuals with disabilities reaps long-term benefits. It promotes diversity, innovation, and a sense of community responsibility.

Research and Innovation: Trained professionals in special education often engage in research and development of innovative strategies and technologies to better support individuals with disabilities. This can lead to advancements that benefit a broader range of people.

Objective 6: Moving forward - Preparing children with early intervention experiences, training them in developing skills towards their employability in their adult years, on an experimental basis.

The Academic year 2017-2018, saw the inception of a new initiative of Madhuram Narayanan Centre - SOCIALLY USEFUL AND PRODUCTIVE ACTIVITY (SUPA) a unit for children mainly with multiple disabilities, who have difficulties in reaching mainstream education, or in attending to assigned tasks independantly in a group work place. Additoinal training in skills contributive towards a productive income generating activity can help them to manage themselves in their daily activities as well. With support from their families they will become productive and contibutive as citizens in their adult years. It was visualised that the parents will be motivated to plan units of activity wherein they would utilize the potential in their children and include them in performing work related actvities towards the completion of particular jobs. The jobs will be planned and assigned by the parents. These jobs sites can be pioneered by them in the community setting itself or even in the homes of the parents. The jobs are expected to fulfill the market needs of the community in which they live. In such a set up children would be relating socially to the community in which they live and become productive earning members to their family. The children will remain with their families and yet not be a burden to them financially. The empowered parents would have become self respective and contributive

to the membership to the community. Training through Socially Useful and Productive Activities (SUPA) was started in June 2017 for children, who were above 5 years and who required pervasive support for performing activities of daily living. Activities were planned systematically after task analysis. The areas of activity given priority were in the the Domains of Communication, Self Care, Socialization, Self Direction, Leisure and Work, Community Use and Health and Safety. The aim was to prepare the children for fucntional and meaningful occupations in their adult years.

The SUPA programme was an eye opener and a stepping-stone to help the child who cannot attend mainstream school. The need was to combine special education and vocational training programme for every child enrolled to become a self-sustaining earning member in vocations specializing in community environments and contribute to the community needs. Thus, Project Jivikam was evolved.

JIVIKAM SKILL DEVELOPMENT UNIT

"Jivika", meaning, "Source of Life "is the basis for "JIVIKAM", ": employability", Jivikam was conceived to fulfill the responsibilities of training every child with disability (intellectual) towards a socially useful and productive life. The training is offered in both areas, special school education with prevocational training based on the Madras Developmental Programming System and training in vocational skills towards placement in jobs.

Highlights of Jivikam

- The child's innate potential to perform any skill pertaining to daily living activities is first exploited. A structured assessment scale is used to evolve a base line of the performance level of the child in the areas as listed in the Definition of Intellectual Disability (AAID). (Refer Annexure 6 for Jivika enrollment details.
- The assessment is followed up by the training to be provided through an Individualized Programme Plan using the Madras Developmental Programming System.
- The training provided is activity based and pertains to the development of skills required in work areas for the performance of jobs.
- The child would within the school tenure of 6+ to 12 + years become trained in functional academics as well as in work related skills, prior to moving into the more specialized areas of vocations.
- 5. Active engagement of the child is calculated by the amount of time spent by the child, in involving themselves in their school hours, relating to their teachers, peers, learning materials, in the way that is age appropriate, in performing activities which bring out their abilities to surface, and in an environment, suitable to the culture in which they live. The Madras Developmental Programming System is the Scale used for assessment and training.

Eligibility:

- Age 6+ to 12 years
- Must have gone through the early intervention training at MNC and shown performance levels of 100% proficiency in at least 60 % of the skills in each of the domains listed in the Upanayan Early intervention Programme, birth to 6 years.
- 3. Period of Training: 6 to 8 years

Programme Plan:

- School education and prevocational skills training based on the Madras Developmental Programming System.
- National Open School preparation for taking phased out examinations and reaching the eligibility to receive the School Examination Certificate from the concerned authority.

Curriculum:

- Basic Self Management Activities in Daily Living; Occupational Activities related to the domains as listed in the: Definition of American Association for the Persons with Intellectual Disability Act (2010)
- Upanayan Early Intervention Programme
- MADRAS Developmental Programming System.
- In Preparation for the Citizenship as envisaged in the Rights of Persons with Disability

Training Period

Age 6+ to 12 years (upper age maximum 15 years)

Period of Training: 6 to 8 years

Goals of Jivikam Programme:

- Develop the latent cognitive processes of the child with ID and Associated conditions through activity-based programmes
- Support each child's physical well being through peer play, coordinated sensory movement and therapeutic practices
- Facilitate gradual growth of each child to communicate with their peers and family
- Reinforce the potential of each child through inter-related activities in group settings for self-reliance
- Foster socially useful behaviors through hands-on-training in structured learning environments
- Construct a systematic series of assessment, IEP, progress monitoring and periodic evaluation for each child annually to map progress

Methodology

- Assessment: base line performance of functioning by a team of interdisciplinary experts including the parents, special educator, therapists and medical professionals.
- Goals and Objectives for further training set by the interdisciplinary team
- Working out Individualized Lesson Plans
- Preparing the required Teaching Learning Materials for Training
- Preparing the Environment required for Imparting Training
- Imparting training using Special Education Methodology
- · Noting observations on the Responses from the children
- · Adapting the lesson plans for effective results
- · Term-end evaluations and annual assessment

Programme Components of Jivikam:

IEP in group setting will be the broad approach to how the programme will be carried out in the Centre. Parents/ care givers will be briefed on a weekly basis so that children get to practice at home as well.

Classroom setting:

Skills, concepts and behaviors related to the domains of functional academics, work and communication are structured into an upwardly widening spiral curriculum. Learning materials and methods used and useful in a classroom

Activity Labs:

Application of functional academics as well as practicing of behaviors related health, safety and leisure. In the first 3 years, urban gardening, mock kitchen, fine arts and crafts will be set up.

Therapy sessions:

Apart from recommended therapy specific to the impairment, blending in ideas/items for targeted physical & sensory stimulation in other settings (use of standing frame or textured learning aid in a classroom) helps strengthen overall performance.

Physical education:

Physical education for children with multiple disabilities offers scope for realizing the potential of unimpaired sensory processes. As this is the period of gradual growth of the body towards adolescence, awareness of how to maintain and increase the overall stamina of the special child gains urgency.

Acts of Daily living:

Independence in carrying out these acts enhances the quality of life for the child as well as for the immediate family members. Practice of skills necessary for acts of daily living makes these competencies second nature. Hence meal time, bio-break time, arrival and departure times are part of the time table.

Expected Outcomes:

- Design and development of Jivikam curriculum with annual evaluation tools for 6 to 12 year olds in 6 years
- Each graduate will master 60 to 80% of 450 skills from the Jivikam checklist
- Increasing self-support of each child by a minimum of 20% from baseline every year
- Measurement tool for Assistance by the child in household tasks and chores to be developed



The first meeting with the parents to discuss concept of Jivikam



The inauguration in Nov 2020 by Aruna Rathnam

Jivikam Skill Development Unit was **inaugurated on 9.11.2020**. An initial intake of 21 students who have had their Early Intervention in MNC formed the first batch of Jivikam students. Between November 2020 and November 2021 classes were conducted online. Physical classes commenced in Nov 2021 and from then on children have been regularly coming to the center.

Students enrolled in Jivikam

YEAR	Children at the start of the year	Children who joined /rejoined during the course of the year	Children on active roll
2020-2021	14	7	21
2021-2022	21	6	27

15 domains were selected and 30 skills were listed under each domain for training. The domains are:

- 1. Physical Activities
- 2. Daily Living Activities Meal time
- 3. Daily Living Activities Grooming and Toiletting
- 4. Communication
- 5. Socialization

- 6. Function Academics Reading
- 7. Functional Academics Writing
- 8. Functional Academics Numbers
- Functional Academics Time
- 10. Functional Academics Money
- Domestic Activities
- 12. Health and Safety
- 13. Community Use
- 14. Recreation/Leisure Activities
- 15. Work

One skill in each domain is selected for the child every quarter and a weekly progress sheet is maintained. Since the children were adolescents the concept of time /money / domestic behaviors were emphasized in the check list. These concepts were a precursor for exploring if the child has the potential to travel towards the vocation.

Three activity labs are set up under Jivikam. They include

- i. Kitchen Activities
- ii. Urban gardening
- iii. Arts and Crafts.

Kitchen Activities

Activities like sorting, cutting, cleaning and stacking of vegetables/ingredients will form part of training. Dry cooking like making sandwiches, juices, smoothies, will also be taught to the children. The next step may be to pack ingredients as in a super store in small quantities (eg. 1 kg, ½ kgs etc). They will also be taught to stack the items as in a store one over the other or one beside the other as the packing may warrant so that it is easy for the customers to retrieve. Training in laying tables, placing cutlery and crockery appropriately on the table, serving food to customers etc will form part of the kitchen activities. Training in such activities can be a pre vocational training towards working in grocery stores/super stores, a small restaurant etc.

Urban Gardening

Mrs. V Arthidevi, Proprietor – Urban Farm Guide was our consultant for the selection and implementation of gardening activities at home. Two special educators were deputed to Urban Farm Guide who received orientation in homebased gardening activities. This was then included in the 24 hours home based training and the children were given activities like sowing seeds, watering plats, trimming and plucking where possible.

Arts and Crafts Activities

Children were taught on line to extract colors from petals, trace the outline of leaves, pasting leaves on paper, stringing beads etc all of which could be done at home. Group Activities were given in Arts and Craft and Kitchen where the child performed the skill at home under the guidance of the teacher.

KEY ACHIEVEMENTS AND SOCIAL IMPACT OF OBJECTIVE 6

We are only recording the implementation of the Jivikam Skill Development Unit and shall wait to see its impact and results during the next social accounts period.



8. KEY ACHIEVEMENTS FOR THE PERIOD 2020-2022

- Total number of children who benefitted during the period:
 - MNC EIC 114 in 2020-2021 and 100 in 2021-2022
 - MNC JIVIKAM 21 children in 2020 and 27 in 2021-2022
- Empowerment of Parents About 200 parents were empowered to teach / train their children at home through the 24 hour on line programme for over a year. They showed remarkable understanding of the skills, immense patience and the tenacity to help their children come what may.
- Parents as Special Educators Parents took up the additional role of a Special Educator and a Therapist in delivering the programme to their child. This has built confidence in them and they truly believe in the concept of carryover agent for their child. They have experienced the impact of their role in acting as a teacher at home and are better equipped now and more knowledgeable to help their child.
- The two years of pandemic brought out what MNC considers its fulcrum and its strength. We have always advocated that the mother is the natural and the first teacher of the child if she is empowered to give the training at home as a carryover agent. The online 24 x 7 intervention proved this.
- Reinforced Positive Behavior in children The activities incorporated in the programme meaningfully engages the child throughout the day and most importantly with all the family members.
- Avoided Regression of the child's activities to a great extent by continuous training at home.
- Enhanced Teacher-Child rapport Children got connected with their teachers through video calls which helps in sustaining the rapport already built.
- Effective Teacher-Parent interaction the online sessions served as a platform for Parents to interact with teachers on a weekly basis. They clarified their doubts, shared the challenges faced, and sought timely professional guidance.
- Adapting to Smartphone technology Teachers acquired and adapted their process knowledge to meet the needs of the child through WhatsApp and video calls.
- Dry rations provided to over 100 families at a time when their finances were almost dried up or very low due to lack of work.
- New children were not turned away but assessed using the online guidelines and the parents asked to come to center to sign the acceptance form and the children were admitted to the online program.

All queries were handled and parents counseled according to their needs.

- 6 students of AVMVK Training Centre during the academic year 2019-2020 passed out with distinction in Dec 2020 and 3 Students during the academic year 2020-2021 passed out with distinction in Nov 2021
- 53% of students, who have graduated till now, are mothers of children who undergo
 intervention at MNC and such mothers work as special educators in the centre or set
 up their own intervention centers.

Special achievements of children and alumni:

- On the occasion of World Disability Day i.e. 3rd December 2021, KRM Special School, Bharathi Road Second Street, Perambur, Chennai 11, conducted Interschool competition digitally. The competitions were in the areas of Dancing, singing, fancy dress, storytelling etc. More than 20 children from our school participated in the Competition and won prizes as listed below. The competition was conducted without any age limit and across all disabilities. We are very happy and proud that our children could compete with children from all over the state and come out with flying colours in spite of the fact that they were pitted against children who were older than them.
 - 1. Taran A-Consolation Prize-Fancy Dress
 - 2. Samar Shabeer S-Third Prize-Fancy Dress
 - 3. Asmitha UP Consolation Prize Fancy Dress
 - 4. Kirthik B-First Prize-Story Telling (mainstreamed)
 - 5. Dhruy Charan Consolation Prize Drawing
- To celebrate the Word Disability Day 2022 the District Differently Abled Welfare
 Officer, conducted competitions for the differently abled children at the city level
 in November 2022. The children were divided into Sub Junior, Junior and senior
 groups. While singing, dancing and fancy dress was offered to the sub juniors,
 singing, dancing, skipping and yoga was offered to the Juniors and singing,
 dancing, storytelling, ball tapping, skipping and yoga were offered to the seniors.
 Most of our children participated and eight of them won prizes. The prizes were
 distributed at the TN Secretariat building on The prize winners are:
 - 1. Thanish Raj 3rd Prize Singing
 - 2. K Akhilesh Shiva 3rd Prize Fancy Dress
 - R Vijayan 1st Prize Fancy Dress
 - S Maghizhan 2nd Prize Fancy Dress
 Mahasri 1st Prize Fancy Dress
 - SBrihati-2nd Prize-Dancing
 - J Deekshan 3rd prize Dancing
 - 8. J Catherine Tresa 3rd Prize Dancing

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 38 full time staff, 7 part Time staff and 10 consultants, 3 volunteer and 16 parent helpers. The services of Volunteers are used as needed. Around Rs.65 lakhs per annum is being paid as compensation to the employees at MNC. More than 80% of the workforce lives locally. (Within T Nagar)

Note: Out of these 65 lakhs the Central Government Grant under the Deen Dayal Rehabilitation Scheme is 15%. The remaining is being met by donations both from individual and corporates, which remains a big challenge.

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

15 % MNC's expenses are met by 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 bodies.

Purchasing policies

95% 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. ENVIRONMENTAL IMPACT

Green Office Checklist

Paper	Y/N/NA
Are photocopies double sided?	Y
Are non-essential copies photocopied on re-used paper?	Υ
To avoid mistakes, do you trial copy before printing big batches?	Y
Is scrap paper turned into useful notepads?	Y
ls 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
Energy	
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
Office Supplies	
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?	Mostly
General Office	Y/N/NA
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?	We use stainless steel tumblers / glassware only avoiding plastic or any other form of disposables
Do you purchase fair trade or organic tea and coffee?	Y
Do you purchase supplies from local shops?	Y
Recycling	
Is all used paper saved for recycling?	News papers are used for making paper bags for our use.

Does the office store then recycle glass, cans etc?	N
Does the office separate and compost materials?	Y
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?	Not used
Are you utilizing recycling opportunities by co-operating with nearby businesses?	NA
Transport	
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
Is 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
Health and Safety	Y/N/NA
Is fresh fruit available alongside biscuits at break time or for visitors?	Y - Butter milk / coconu 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
Implementation	
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?	NA



11. CONFORMANCE TO STATUTORY REQUIREMENTS

- Composition of Trustees (Annexure 11)
- RCI approval to conduct diploma course (Annexure 12)
- Registered as a Society under the Tamilnadu Societies Registration Act 1975 as Registration Number 13/1949 by the Registrar of Companies, Madras South, Chennai. (Annexure 13)
- 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 31.1.2024 (Annexure 14) for Early Intervention Centre
- 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 6.10.2023 (Annexure 15) for Jivikam Skill Development Unit
- Financial Audit report for the assessment year 2021-2022 has been filed with the Registrar of Companies(The income and expenditure account is attached)
- The meetings of the trustees and the sub committees were held online during the accounting years 2020-2021 and 2021-2022.
- No objection certificate issued by Fire Safety and Rescue services department valid till (Annexure 16)
- IT returns for the assessment year has been filed for the assessment year 2022-2023 (Annexure 17)
- Approval under Section 80 G (5) (vi) of the I.T. Act, 1961 (Annexure 18)
- Valid FCRA (Foreign Contribution Regulatory Act) registration from the Ministry of Home Affairs, Government of India. (Annexure 19)



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

1.Human Resources (see annexur	Selection of the select	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Number of Employees	Y/N/NA	Date/Details/Comments
Full time	YES	37
Part time	YES	2
Volunteer	YES	3
Contract Employees	YES	2
Parent helpers	YES	13
Consultants	YES	12
1.2 Number of members / shareholders (For Cooperatives/Companies etc)	NO	NA
1.3 Policies and Procedures in place		
Employee contracts	YES	YES available renewed periodically
Employee job descriptions	YES	(See Annexure 10)
Staff appraisals	YES	Formal appraisals have been put in place and annua 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
Disciplinary procedures	NO	Allower are a
Equal Opportunities	YES	Self improvement and enhancing knowledge
Safety protocols	YES	No objection certificate from the Fire safety systems
Others	YES	PF, Grafuity and ESI scheme implemented
1.4 Consultations	Y/N/NA	Date/Details/Comments
1. With paid employees	YES	Group discussions (periodical)
2 With Volunteer/Part-time staff	YES	Group discussions (periodical)
3 With families of employees	NO	The state of the s
1.5 Facilities	E.V. (94.25)	
Crèche	YES	
Transport	NO	
Travel Allowance	YES	Making house visits of MNC children Conducting workshops putaide MNC Altending workshops both in and out of the city
Medical Allowance	YES	Medical assistance provided by ESI.

Subsidized meals	NO	
Children's allowance	YES	As per Government grant
Staff outlings	NO	Not done due to the pandemic
Others	NA	
2.Good Governance and Accountabili	ty	
2.1 Legal form of Organization		
Constitution (tick appropriate)		
Sole trader	NO	
Partnership	NO	
Company limited by shares	NO	
Section 25 company	NO	
Registered Society	YES	Certificate attached (Annexure 6)
Registered Trust	NO	
Others	NO	
2.2 Appropriate annual return filed	YES	Filed with the Registrar of Societies
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	7
Composition of Board	YES	Attached (Amesure 11)
2.5.Advisory Council		
Number of Advisory council	YES	4
Composition of Sub Committee members.	YES	Mr. N Kumar Mrs. Maya Gastonde Mr. P. Natarajari Mr. S Krishnan Mrs. Jaya Krishnaswamy Mrs. Vimita Kannan Mr. Satish Parasaran Mrs. Janaki Balakrishnan Dr.K Vijayraghayan Ms. Aruna Rathnam
Frequency of Advisory Council meetings (please state number of meetings in a year)	VES	4 quarterly
Annual report published	YES	2021-2022
2.6 Membership	NA	
increased/decreased (delete as appropriate)		
2.7 Social Accounts prepared	YES	2020 - 2022
2.8 Social Accounts verified by Social Audit	To be verified	2020 - 2022
Panel	YES	Mrs. Latha Suresh – Chair (CSIM) Mrs. Neeta Nair – Co-Chair (CSIM)

		Mrs. Marie Banu - Penel (CSIM) Mrs. Sarada Jagan - Panel (Ex Sanmar current Bala Mandir Kamaraj Trust) Mr. Bhacath Natarajan - Panel (Balamandir Kamaraj Trust) Prof. Mujahid ul Islam - Panel (Prof. Dr. Ambedkar Law University, Chennai)
2.9 Social Accounts reported to stakeholders	To be reported	2020-2022
2.10 Consultations		
a. With members of the organization	YES	2020-2022
 b. With members of the board or the management committee 	YES	2020-2022
 With advisory council members (if appropriate) 	YES	2020-2022
3 Financial Sustainability		17)
3.1 Annual Accounts prepared and filed (please state which regulatory body)	YES	Registrar of Societies
3.2 Balance sheet been	YES	Explanation will be given crally
strengthened/weakened	Strengthened	
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	
		t 15% of the total income efforts have been taken to ensure ther sources. This has resulted in creation of a corpus which Date/Details/Comments
		Delection Continues
4.1 Environmental policy in place 4.2 Reports on Environmental practices available Energy use: heat and light	YES	
4.3. Carbon footprint calculated	NO	
5.Economic Impact	THE STATE OF THE S	(1)
5.1 Purchasing policies defined	NO	
5.2 Report on effect of purchasing policies available	NO	
positive services and an arrangements.	ATTACK.	
5.3 Local multiplier effect of organization calculated	NO	

13. OTHER VIEWS OF STAKEHOLDERS

1.3.2021

Ms. Archana Joshi

Ms. Bharathi Balarajan

Ekadaksha Learning Center, R A Puram, Chennai 600028ory Act) registration from the Ministry of Home Affairs, Government of India. (Annexure 19)

Thank you for sharing. We enjoyed visiting your centre.

3.3.2021

Mr. Dindrakumar

Deputy Director

National Institute of Labour Economics Research and Development (NILERD)
A7 Institutional Area, Narela, New Delhi 110040

Organization is doing excellent job for the welfare of PwDs. My best wishes for their success, more achievements in the field of disability.

16.3.2021

Dr. Javis Jai chitra

Managing Trusteel Change, Hosur 635109

I am so happy to visit MNC after 23 years and to see Mrs. Jaya Krishnaswamy with the same zeal. I am impressed by the work done by her in the field of Early Identification and Intervention. Hope I can contribute in a very small way in this journey of MNC.

3.12.2021

Sundar Rasu

Centre Manager

Samarthan Trust, Chitalapakkam, Chennai

Excellent infrastructure and doing good work for PwDs.

3.12.2021

Mr. Chander Bali

Chennai Site Manager

Microfocus, Tril Inforpark, Taramani, Chennai

Really humbled to see the work undertaken here, Kudos to all the teachers and staff for their selfless contribution!

3.12.2021

Mrs. Hannah Priyadarishini

Operations Manager

Chennai Microfocus

Hats off to the Madhuram family for the dedication, compassion towards the children, the most precious ones, Thank you, I am blessed as well.

9.2.2022

Commodore Rajiv Sreedharan (Retd)

Chennai

An extremely educative and humbling experience. The wonderful work being done here is simply wonderful and is something for others in society to emulate. Thank you. God bless.

9.2.2022

Mr. Saiju Aravind

Chennai

Very inspiring to see te commitment of the team in carrying out this noble mission. I am sure that this institution will become a model for any such institutes and educations groups. Thank you.

22.2.2022

Mr. Johny Tom Varghese IAS

Director

Office of the State Commission for the Differently Abled, Chennai

It was an enriching experience. Thank you for your efforts. Looking forward for greater participation and integration.

22.2.2022

Ms. Anu George IAS. Secretary-IV to CM

Information and Public Relations Department,

Secretariat, Fort St. George, Chennai 600 009

It was a wonderful experience to see and hear about MNC. Looking forward to more collaboration!! Best

25.3.2022

Dr. Yesodha Thanikachalam

Tiruvanmiyur

Wishes to Best

Chennai (Judge for Nutrifest 2021-2022)

Thankful for the opportunity to be a part of the food festival. I enjoyed the festival immensely. The enthusiasm of the mothers, their painstaking work, exhibits and the varieties are exhilarating.

25.3.2022

Mrs. Revathy Shanmugam 10/33 Neelakanta Mehta Street,

T Nagar, Chennai 600017

அருமையான நிகழ்ச்சிக்கு அழைத்தமைக்கு நன்றி, மேன் மேலும் தொடரட்டும் உங்கள் சேவை. வாழ்க வழமுடன்

25.3.2022

Mrs. Rama Narayanan

L2 Sudharshan Gardens

106 Velachery Main road, Chennai

மிக்க அருமையான நேர்த்தியான பாரம்பரிய உணவு வகைகளை குழந்தைகளின் வயதிற்கு ஏற்றாற் போல் தாய்மார்கள் தயாரித்ததை பார்க்கும் பொழுது மிக்க மகிழ்ச்சியாக இருந்தது.

28.3.2022

Mr. K Venkatesh Prasad

2122 Ascot Road, Ann Arbor, MI 48103 USA

Outstanding set of teachers, tools and gems of students. Thank you.



14. PLANS FOR THE NEXT SOCIAL ACCOUNTING CYCLE

The next social account cycle will be conducted for the period 2022-2024 during the last quarter of 2024

15. DIALOGUE AND DISCLOSURE

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



16. ANNEXURES

ANNEXURE 1

Sample of 24 Hours Home-based Programme designed by special educator in coordination with parent & therapists

TIME	TASK	CURRENT LEVEL	ACTIVITIES	THERAPY ACTIVITIES
7:00am	Wake up time			WERE THE PERSON NAMED IN
7:30am	Brushing	He identifies his own brush.	To hold the brush in the required position	
8.00am	Bathing	He holds small mug.	To hold and pour water small mug.	
8:30am	Toileting	He sits in squatting position.	To sit in the western closet using baby seat for 5 minutes.	
9;00am	Breakfast (hand wash before eating)	He picks the food item.	To take a small piece of food item towards the mouth and place it inside with mother's assistance.	Occupational therapy: To take small portions of dough from a big dough ball by placing his thumb and index finger deep inside the dough (Finger strengthening activity)
9:30am	Plays on his own		To play with his toys.	H STANSFEE
10:00am	Banana time (hand wash before eating)	He sets banana with mother's assistance.	To hold and take the barrana to mouth.	
10:30am Speech activity (with Father)	He blows the candle	To blow small paper places	Vision therapy: To track the lit candle for 5 minutes.	
		He licks the upper lip when honey is placed.	To lick the side of the lips when honey is placed.	
		He identifies body parts.	To label any one body part.	
11:00gm	Balance and coordination	He rolls independently.	To do the below exercises for 20 counts; 5) Sit and stand; 2) Squat; 3) Bear walk; 4) One-leg standing; 5) Kneel walk	Physiotherapy: To stand on balance board with minimal support Occupational therapy : To crawls under chair (obstacle course)
11:30am	Break	He identifies toilet in home.	To indicate his tollet needs during day time.	
		He drinks water with spilling.	To hold the turnbler and drink without spilling.	

11:45am	Eye and hand coordination	He transfers channe dhal from one bowl to another. He removes cloth clip from the board pinned	To transfer dhal from one bowl to another using spoon To transfer woolen balls using tongs. To insert woolen balls into a bottle.	Physiotherapy: To do afternate ball tapping in standing position. Cocupational therapy: To remove factile overlay stickers placed on his left forearm using two fingers of his right hand. Vision therapy: To transfer wet sand from one bowl to another using hand. To bend down, take the clip and go towards the rope or card board to clip it.
12:15pm	Speech activity (with Father)	He identifies the named objects.	To label objects and animals in his environment (any 2 objects and 2 animals)	
12:30pm	Water play	He plays in water using both the hands	To find pebbles or big beads placed inside a tub containing water	Vision therapy: To Squeeze the well sponge using both the hands
12:45pm	Lunch time (hand wash before sating	He chews and swallows food	To hold the food item and take it to mouth.	
1:30pm	Action song (with mother)	He imitates simple action	To imitate actions in action song.	
1.45pm	Story telling (with Father)	He identifies the named story book.	To imitate movements of another person and simple words from the story.	
2:00pm	Ball therapy	He rolls the ball	1) To rotate the ball around his head. 2) To roll the ball from top to down using hands and legs. 3) To roll the ball to his partner (brother).	Physiotherapy: Overhead ball throw in prone on therapy ball
2:30pm	Vision activity			Vision therapy: Lea symbols activity.
3:00pm	Sleeping time			
4:30pm	Kanji / fruit juice	He holds the tumbler using both hands.	To hold the tumbler and drink without spilling.	

4:45pm	Break	He identifies tollet in home.	To indicate his tollet needs during day time.	
5:00pm	Terrace play with grendparents (wear mask)	He takes few steps with support	To walk without support. To play with his brother using ball.	Physiotherapy: To walk independently (focusing on gait pattern)
5:45pm	Riding tri-cycle	He sits on the tri-cycle.	To stamp the peddie of the tri-cycle with aid.	Occupational therapy: To perform modified wall push up (strength & endurance training)
6:30pm	Coloring / finger painting.	He holds a big crayon.	To scribble in circular motion.	Occupational therapy : To do wall finger walk using index and middle finger (Proprioceptive)
7:00pm	Dinner (hand wash before eating)	He picks the food item.	To take a small piece of food item towards the mouth and place if inside with mother's assistance.	
7:30pm	Brain gym	He does with support	To do the below exercise with mother's assistance 1) Brain button 2) Positive thinking 3) Cross crawl 4) Thinking cap	
7:45pm	Free play		To play with building blocks, stacking cups, puzzles.	
9:00pm	Milk time	He drinks with spilling.	To hold the tumbler and drink without spilling.	
9:30pm	Bed time		TOTAL CONTRACTOR OF THE STATE O	



Given below is a sample time table set for the 24 hours home based programme.

		TIME	TABLE FOR 2021-2022		
		MORNING	AFTERNOON		
DAY/TIME	10:00 -11:00	11:00-11:30	11:30-12:00	2:00 -2:30	2:30-3:00
MONDAY	YOGA(G1)	GROUP TEACHING (G2)	GROUP TEACHING (G1)	GROUP ACTIVITY (G1)(STORY TELLING AND CRAFT)	FINE MOTOR ACTIVITY
				GROUP ACTIVITY (GZ)(KITCHEN)	
TUESDAY	YOGA(G1)	GROUP TEACHING (G2)	GROUP TEACHING (G1)	SOURCE	FINE MOTOR ACTIVITY
			GROUP ACTIVITY(G2)(STORY TELLING AND CRAFT)	GROUP ACTIVITY SIVA (G1)(KITCHEN)	
WEDNESDAY	YOGA(G1)	GROUP TEACHING (G2)	GROUP TEACHING (G1)	GROUP ACTIVITY SIVA(G2)(GARDEN)	YOGA
				GROUP ACTIVITY (G1)(ACTION AND SONG)	
THURSDAY	YOGA(G1)	GROUP TEACHING (G2)	GROUP TEACHING (G1)	GROUP ACTIVITY (G1) (GARDEN)	GROUP ACTIVITY (G1)(ACTION AND SONG)
FRIDAY	YOGA(G1)	GROUP TEACHING (G2)	GROUP TEACHING (G1)	G1&G2 PARENT MEETING	

Sample online Physiotherapy instructions to the mother

CLASS TEACHER: REVATHI

NAME OF CHILD	MOTOR GOAL	STATUS	THERAPY ACTIVITIES
JESHURAN	ROLLS FROM STOMACH TO BACK . BACK TO STOMACH	WITHOUT SUPPORT	Rolling , creeping on mat(tactile desensitization) Etbow weight bearing Prone arm wt bearing Sitting at corner chair Crossed leg sitting-corner of wall (hand gallors)
PRAGATI	SITS WITHOUT SUPPORT	EXTENSIVE SUPPORT	1. Kneeling to half kneeling 2. Half kneeling-Rotations. Pickups, Reach outs, Weight shifts 3. High sitting-Saving reactions 4. Sitting on stool—Reach outs, pickups 5. Standing with one hand support, 6. Ensure splint & galters while doing activities.
4. One leg standing with support 5. Standing - ball th 6. Walk standing - ball throw.		2.Hand walking 3.Kneeling -reach outs & weight shifts 4.One leg standing with support 5.Standing - ball throw 6.Walk standing - ball throw 7.One leg standing -	
ASHWIN	WALKS INDEPENDENTLY		Independent walking Standing - ball tapping with alternate hands. Akneel walking wheel barrow walking balancing activities on standing.

Sample occupational therapy on line program

Academic year 2020-21

Class teacher: Ms. Sangeeta

Group : 2- 4 yrs

Name of child	Questionnaire findings	Therapy activities	Remarks
Krithik.C	-cooperative for known task -difficulty in smooth transition to a new lask	-To cut dough made vegetable and fruit with plastic knife into equal sized pieces of 10 in a given time with 3 cues -To play ring a rosa with siblings for 20 minutes without distraction -To cooperate for apongy ball throw on each other (group play)	-cuts into random pieces with verbal prompt -plays for 2min -cooperates for group play but not so long
Sugaveeran	-slow processor -Disrupted routine	-To swim on the floor in a rhythmic pattern -To play Simon(one leg stance and louch nose with index finger) -To walk on line wearing gunny bag to cover a distance of 6 feet -To throw ball underarm to hit a target within a given time with single verball command	-swims on the floor with irregular pattern - maintains one leg stance and fouch nose separately, yet to sync - covers 1st two feet on line and the other 4 feet with little deviations - performs the activity by exceeding given time on n off and maintains underarm position with deviation
Asmitha:	-oromotor response difficulty (chewing, spitting gargling) -co-ordination difficulty distraction error -gravitational insecurity	-To blow air kisses -To play carrot stick battle -To jump into circle to circle with single verbal command -To perform frog jump to cover a distance of 4feet within a given time	-blows air bubbles as a practice skill - holds stick with a carrot but not ready for battle yet -jumps into circle with continuous verbal prompt -mainfains frog position
Yokesh	-involuntary gait pattern -fine motor difficulty -Tactile hypersensitivity -ineffective bilateral coordination	-To perform tandem walk on a rope to cover a distance of 2feet -To walk overcoming obstacle wheel barrow walk on different textures mat -To twist and transfer ball to the partner alternatively(right and left) following command	-initiates tandem walk for few steps with assistance -walks with difficulty to overcome obstacle -practicing WEW yet to develop shoulder stability -follows command and attempting twist

Sunit dev	-must focus on prewriting exercise & -fine motor strengthening -poor bilateral coordination	-To perform tug of war for better holding grip (should maintain playing for 15min) -To shrug shoulders with 5kg weights on both the hands -To creep thumb for 20times on a towel without break -To heel walk on pillows to cover a distance of 45eet -To complete an obstacle course (transfer 10 peas in backward crawling) within 5min without verbal prompt -To kick a punching bag (5 lateral kick) by maintaining leg in the air	-attempts for 1-2min -attempts well but need refinement in bilatera coordination -creeps thumb with interval and not completes 20times -walks with imbalance self -completes by exceeding 5min with minimal verbal prompt - kicks straight, yet to achieve lateral perfection
Kathirayan	-not cooperating to the activities -disturbance in ADL routine -stereotypical -sensitive oral response	-To carry a chair and walk towards target line without dropping it down -To raise leg on atternate side and squat without support - To blow 10 cotton balls using a finer and long straw within a given time	-attempts but drops many times -raises leg and squat with support -Blows 10 cotton balls using big and short straw by exceeding the time
Thanka	-less cooperative -sensory imbalance -less attentive	-To make imagination free using a dough following the instructions -To transfer 10 ice cubes from bowl into a water bottle without assistance and in single verbal command -Sensory walk, to walk on sand with plastic bag tied on both feet) without assistance to cover a distance of affect -To pluck the curry leaves inserted deep into clay with single verbal command	-makes imagination free with complete assistance - transfers 10 cubes from bowl into a water bottle with both physical and verba prompt - walks with plastic bag or both feet with physical prompt to cover a distance of 4feet - plucks the curry leaves with physical prompt
Swetha	-tactife hypersensitivity -coordination imbalance -provoked involuntary movements -petvic floor weakness	-To walk on knee on a soft mat with physical assistance -To roll ball to partner (ensure comer sitting) -To pick objects from down and place it on a bowl on top in squat to return -To thread Zinch beads on a wire with physical prompt	-knee stance is maintained -rolls ball with assistance -practising squat to return -Throads boad with assistance
Keerthivasian In the last querter mother couldn't follow up our program constantly hence restricted with the ADL guidance	-Less performance -Not involving in activities -less ADL performance	-To spin on a circle and complete a simple puzzle -To crawl and pick toys scattered on the ground and place it into the basket -To play drums with available vessels and stick at home -To play with soap	-apins alone not cooperating for the puzzle activity - crawls with prolonger prompting to complete the task -practicing -practicing

Diet Chart for parents

Immune Bosola Foods - 16 Points

1) Turmeric Latte

Milk + Turneric ponder (1-2 pinches) + pepper (2-4)
120ml. + ginger crusted + Palm sugar + Tues leaves (3-4)
Heil well and serve (can also be made with
Walter alone)

- Amla fuice | coconnut water 150 ml. & Inmunity

 + Lemon (1/2) + Chia seeds (1tex) & deink.

 fuice Souled.
- i) Everyday 20-30 mm. expense to sunlight (vit D)
- 3) Good hydration with warm water and fluids (2-36)(4)

DR. AVANTI PRABUREURZ ART PREFESSIR TRAS COLLEGE FOR WITHEN CHENKAI - 18

- Early morning Turmeric Water/ Tea (Turmeric, Tulsi, Gigner, Pepper, Lemon)
- Breakfast Murungakeerai Adai / Dosai + Tomato garlic chutney or amla chutney, sozham rava upma, Red Aval, Samai pongal+1 egg white or 1 cup milk
- Mid Morning Seasonal Fruit -1-2 nos. Sunflower seeds 1 tsp+flax seeds 1 tsp+Alamonds3-4 + makkhana 6-7 (Roast all together in few drops of ghee and salt)
- Lunch Beetroot rice or Pudina rice, Rice / dal / sambar / pepper garlic rasam, any
 vegetable (aviod root), cucumber/carrot buttermilk-1 glass
- Evening Gigner + karupuavalli leaves Tea -1, Sundal 1/2 cup/ vegetable+ Sprout salad with Lemon /Wheat bread +vegetable sndwich 1 no Any vegetable soup (Avoid maida or b
- Dinner Chapathi (Wheatflour: black chana flour 4: 1) o Dal+vegetables+ rice Kichadi, dosai or Idly with sambar.
- · Bedtime Turmeric Milk +Dates -2 -3 nos.
- # Exercise daily for 20-40 mins
- # Everyday 20 mins sun exposure
- # Eat citrus fruits, Amla, Greens, Nuts, Groundnut, Gingili Seeds on daily basis
- # Use less oil in cooking, add 1 tsp of ghee in the food
- # 2-3 litres of warm water everyday



Nutrifest 2021-2022

The Judges of the year were:

Dr. Rama Narayanan: She has all along her career been an advisor with M S Swaminathan Research Foundation as a nutritionist. She has many publications to her credit and has attended many conferences on the subject of Nutrition and has presented several papers on nutrition with focus on young children. She has over Twenty five years' experience in Community and Public Health Nutrition, with expertise in the area of maternity and early childhood.

Mrs. Revathi Shanmugam: who has appeared on more than 900 food shows on various TV channels, writer of cookery books and an accomplished cook herself is well known, and we had the pleasure of having her as a judge in 2019. Revathy is specialized in traditional cooking, predominantly south Indian cuisine. She featured in "Arusuvai Ithu Thani Suvai", a Tamil show where she shows the magic of ingredients and helps viewers cook everyday meals traditionally and simplistically. Revathy runs a YouTube channel named "Revathy Shanmugamum Kavingar Veetu Samayalum." She is the author of fifteen Tamil cookbooks. She has received various awards from various institutions and clubs.

Dr. Yeshoda Thanikachalam: Among the finest Paediatricians in the city, she is practicing in Chennai and is known for offering excellent patient care. She has worked in Central Government Health Schemes in India for 32 years. She has worked in Institute of Child Health and Hospital for Children, Chennai, for 5 years. She has also worked in Spastics Society of India, Chennai as an honorary consultant for 17 years.

Mothers of children in the age groups of birth to 2 years, 2 to 4 years and 4 to 6 years and 7 – 15 years took part. Earlier Mrs. Avanti Prabhakar, our honorary nutrition consultant, who holds a doctorate in Nutrition and Dietetics with more than 15 years of experience in teaching undergraduate and graduate students made a Power Point presentation to the mothers over a Google meet prior to the competition, to explain to them the nutritive value of the ingredients that they can use in traditional recipes. The mothers took guidance from her to participate in the cookery competition. On the day of the festival the parents with their children, teachers and other invitees gathered in the MNC hall with a colorful array of dishes, vying with each other for taste and display. About 50 dishes came out on the table and the three judges were put to difficulty in selecting the dishes that were outstanding.

The mothers of 7 - 18 years and 4 - 6 years won the shield with a tie. The second prize was bagged by the mothers of 2 - 4 years group. The day came to a close with the shield being awarded to the best team and the judges' comments on the display and improvements that can be brought in.









Pictures of Nutrifest 2021-2022

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

Unique ID for Disabled persons issued by the 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 also 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 Department for the Welfare of the 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. administration staff help all children register for the UDID, upload their details and obtain UDID card for them.

Maintenance allowance

Maintenance allowance is given at the rate of Rs.2000/- per month to the severely differently abled persons who cannot be rehabilitated by any other assistance, by the State Government. The allowance is sent through "Core Banking system" to their bank account. Parents seek assistance from 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.

Nirmaya - Health Insurance Scheme

The Government of India has introduced Niramaya Health Insurance Scheme in 2015 for the benefit of persons with disabilities. 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 up to 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 and 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.

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. MNC counsels the parents about this, gives them details of the aadhar card camp dates and help all parents to procure aadhar cards for their children.

Type of facility availed	2020-2021	2021-2022
UDID	₹:	26
Maintenance Grant	*:	10
Niramaya Insurance Cards	43	30



DETAILS OF STAFF IN THE AVMVK ACADEMY

Existing Core faculty & Technical staff

S. No	Name of the Faculty with address, Mobile no. & e-mail	Designation	Academic Qualification	Rehab Qualification	Date of Appointment	Salary per month	CRR No.
1.	Mrs. Rajalakshmi Aravind	Course Coordinator	MSc. Psychology	Spec Edu. (ID)	12.06.2013	17750	A74442
2.	Ms. M Thayammal	Faculty	MSc Psychology B.Ed Spi Edn	Bed in Spl Education	01.06.1997	19899	806521
3.	Jeyasree V.R.	Faculty	M .com.BEd. PG Diploma in Spl Edn	PGPDSE	01.08.2003	22500	A50711

(ii) Guest / Part time Faculty available at training centre:

S. No	Name of the Faculty with address, Mobile no. & e- mall	Academic/ Rehab Qualification	Teaching experience	Subject/ Topic to be taught	No. of Session per month	Honorarium per lecture (consolidated payment)	CRR No. if
3	Mrs. Umarani Sridhar	MSc. Bed	10	Curriculum & Teaching Strategies	6	20000/-	A07109
2	Mrs. Smeetharani	BPT	5	Physio- therapy	10	4500/-	
3	Mrs. Sheeba Anand	BSLAP	10	Speech Therapy	4	4500/-	



ANNEXURE 8 - QUESTIONNAIRES

QUESTIONAIRE FOR PARENTS

- 1. Name and Age of the child
- 2. Father's Name and mother's name
- 3. Siblings in any
- 4. Details of referral to MNC
- Number of years in Early Intervention Programme
- 6. What is your understanding about Early Intervention Programme?
- 7. What is your understanding about the skills set as goal for your child?
- 8. What are the different programmes offered in MNC and from those, what do you think suits best for your child?
- 9. As a parent what is your perspective on Centre Based Training
- As a parent what's your perspective on online training.
- What's the preference you have between centre based training and online training.
- 12. How is the participation of family members during online session?
- What did you expect when you enrolled at MNC.
- 14. Any change in your views after enrolment in MNC?
- 15. When you learnt about your child's condition, how did you react?
- 16. What is your expectation and future plans for your child.
- 17. What are the challenges faced at home and in society.
- 18. What are the challenges faced in availing assistance from the government?
- 19. How is your interpersonal relationship with other parents?
- 20. How is your interpersonal relationship with the staff?
- 21. Does it help in building your emotional strength?
- Do you think any improvements to be made in the programme and also any needs of the child yet to be met.

QUESTIONNAIRE FOR TEACHERS

- 1. Name of the teacher
- Which class are you presently in charge?
- 3. How long have you been in MNC
- 4. Why did you choose this center over others?

- What do you feel about:
 - Upanayan
 - Special Education provided here
 - Working environment in the centre
 - 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?
- How did the pandemic affect your.
 - Working
 - Positives
 - Negatives
- What did you learn from your experience of working during t he pandemic period.
- 12. Any other feedback you would like to give

QUESTIONNAIRE FOR MANAGEMENT STAFF

- Do you know the Mission/Vision/Values o MNC. What are they?
- 2. What measures do you take to see that they are fulfilled?
- 3. How do you monitor if staff under you is in complete understanding of the E I program and its implementation?
- 4. How to you guide them according to the needs?
- 5. How do you stick to the time line along with your team?
- 6. Do you have meetings often to iron out doubts/apprehensions etc and how fruitful are such meetings?
- Do you have enough freedom to work as per your plan?
- 8. What type of self improvement programs are offered to you?
- Do you think you and your team are delivering the best if not how do you expect the management to help you?
- 10. Where do you see MNC in the next five years?
- Do you think you are equipped well for your post or do you feel the need for any training

ANALYSIS OF RESPONSES

RESPONSES FROM PARENTS

Number of parents interviewed: 70

- 1. Name and age of the child Recorded for internal purposes only
- 2. Father's name and mother's name Recorded for internal purposes only
- 3. Siblings if(any)

With siblings	-43	61.4%
Only child -	27	38.6%

4. Details of referral to MNC:

Old Parents	27%
Doctors	15.7%
Professionals/Therapists/ Teachers	11.4%
Special Education Centres	14.3%
Hospitals/Medical Centres	14.3%
Staff MNC	10%
On their own	7%

5. Number of Years in Early Intervention

Less than a year	24.3%
One to two years	20%
2-3 years	21.4%
3 years and above	34.3%

6. What is your understanding about Early Intervention?

 Very good
 4.3%

 Good
 2.3%

 Somewhat
 41.3%

 Not clear
 30%

7. What is your understanding about the skills set as goal for your child?

 Clear
 81.4%

 Somewhat clear
 14.3%

 Not clear
 4.3%

 What are the different programmes offered in MNC and from those, what do you think suits best for your child

Upanayan Comprehensive Early

Intervention programme	27% in EIC, 100% in JIvikam		
Physiotherapy	25%		
OT	30%		
IEP	18%		
Group Teaching	21%		
Group Activities	9%		
Yoga	7%		
Sensory Integration	11%		

Special comments from Jivikam parents: Very happy and appreciative of group teaching, outings, Sambhavam (Super market visit), skills teaching road safety measure, handling kitchen utensils, identifying money concepts, stitching, jewellery making, play activities. The above paves a way for the child's independent life in due course. Few parents feel (31%) the children don't get physiotherapy, speech therapy and the play activities now conducted by the teachers can be done with good physical instructors.

30%

9. As a parent what's your perspective on centre based training.

A schedule of full day program,

Speech/Communication

one on one, Helps in socializing 100%

10. Perspective on one line training

Difficult at the beginning 7%

Not very effective 46.4%

Most welcome during the pandemic 48%

11. What's the preference you have between centre based training and online training.

Centre Based Training Is preferred 86%
On line is preferred 14%

12. How is the participation of the family members during online sessions?

All members participated 38.6% Some participated 18% Nuclear family 43% Expectations while coming to MNC

No Idea 35.7% Came with grief and No expectations 3%

Came with grief and No expectations Will become normal, Go to

normal school 27%
To get some EIP 4%

Communication should Improve 6% Should walk, speak 14%

Should become independent And self

sufficient 16%

14. What is the change in views after getting enrolled in MNC

Accepted child's condition 21% Understood the need of EIP 100%

Impressed with all the Programmes and their Impact 24%

Understood the role of the parent as a

Carryover agent 16%

Almost all parents, after coming to MNC, have started accepting their children's condition, and have a realistic view of their abilities and that academic goals are secondary. They understand that each child progresses gradually according to his/her ability and cannot be pushed. Daily living skills for independent adult life is more important. They now aspire to make their child independent and self sufficient and have understood that the child's condition and potential plays a big part in their progress. MNC has become family for many.

15. When you learnt about your child's condition how did you react?

Sad, depressed, shocked, did not know what to do, helplessness, very disappointed and difficult to accept.

16. What is your expectations and future plants for your child?

No idea should see as he grows 17% should be independent 33%

should accomplish developmental tasks

like sitting, walking 4%

Should speak /become Normal 14%

Develop some skills Like drawing/

sports/music/Dance/yoga 7%
Learn vocational skill 21%
Should go to normal School 19%

17. Challenges faced at home in society

At home

Supportive 61% Partially supportive 17% Nuclear family 21%

Society

No social issues 73%

Embarrassed, hesitant to Take the

child out 15%

Going out with the Child and participating In functions after

Enrolling in MNC 11%

18. What are the challenges faced in availing assistance from the Government

Not yet applied 31.4% Has applied yet to receive 21.4% Received with MNC Admin help 45.7%

19. Interpersonal relationships of parents:

Very good/very supportive 96% Okay 1.4% Not sure 3%

Every parent feels that the parent group is very helpful and supportive. The interaction among the parents transcends social status, and other differences. Parents are concerned for children other than their own and are willing to take care of them when necessary. For many parents coming to MNC is a happy feeling. They appreciate the MNC culture and even have formed parents group and go for outings on their own.

20. How is your Interpersonal relationship with the staff?

Very good 98.6% Okay 1.4%

21. Does it help you in building your emotional strength?

Yes strengthens 98.6% Not sure 1.4%

Almost all parents are very much appreciative of teachers' Commitment, understanding and passion in working with children. The staff are ready to answer any question, clarify doubt anytime, either directly or through phone. The parents feel that they get clarity even with their personal problems when they interact with senior teachers.

22. Do you think any improvements to be made in the programme and also any needs of the child yet to be met?

Quite satisfied with the Existing	
programme	49%
Need more OT sessions	10%
Need Male Occupational Therapist (Jivikam)	5.7
Need more physiotherapy	4%
Need male physiotherapist (jivikam)	3%
Need Communication Speech therapy	26%
Sports Master	1.4%
(Jivikam) Skill/ methodology not	

RESPONSES FOR TEACHERS - 26 Teachers responded

- Name of t he teacher Recorded for internal purposes
- 2. Which class are you presently in charge? Recorded for internal purposes

1.4%

7%

- How long have you been in MNC Ranges from 1 26 Years
- 4. Why did you choose this center over others?

Clear videos will be useful

New comers unable to Comment

Came as a parent, underwent The diploma in special education Course and joined as

a teacher	38.9%
Referred by Balavihar	23%
Referred by other NGOs	7.7%

Heard about the working atmosphere

In the center and liked it 15.4% Referred by NIEPMD 7. 7% Well wishers 7.7%

5. What do you feel about :

Upanayan

Very effective both for Special and typically

developing Children 26.9%

Very structured according To the developmental

stages/Milestones to be achieved 38.5%

Very simple to understand	11.5%
Useful for parents also	7.7%
Addresses the holistic Development of the child	11.5%
Very useful assessment tool	30.8%
 Special Education provided here 	
Very good	38.5%
Guides the parents to be Carry over agents	23.0%
Holistic and offers all interventions Programs/activities needed for the child	50%
Helps the child to become Independent/self sufficient	7.7%
 Working environment in the centre 	
Very good	53.8%
Conducive to the child's progress	19%
Facilitates the special educator Continuously learn and improve	19%
Very pleasant environment	15.4%
Well structured	3.8%
Freedom in working conditions	3.8%
Family feeling	7.7%
Struggling to complete the work	3.8%
Documentation is time consuming	3.8%
Not able to mix freely with others • Infrastructure	11.5%
Very good - all facilities available	77%
Good	19%
Gradual improvement is seen	3.8%
Infrastructure is being bettered year by year appreciated by all.	which is very much welcome and
Installation of the lift is very useful.	

Installation of the lift is very useful.

Repair works attended to immediately.

Toilets are always clean.

Clean water provided

Computers provided for all teachers helps to reduce workload and update Upaneeta instantly.

Dining room for staff members needed.

100	A SALES OF THE SAL	[12] [
6.	Whatwere	our expectations before joining	the centre?
100	AALICTE AACTO	rout expectations before forming	DIG COLID C:

No expectations	34.5%
Came as a parent and became a teacher	38.5%
To get experience as a special educator	23%
To help children with special needs	11.5%

7. How far do you think they have been met?

Acquired practical knowledge in the field of

special education 61.5%
very happy to see the child's progress 53.8%
passion fulfilled 11.5%
very satisfying to work here 30.8%
Feel that they have joined a Good institution 19%

8. Are there any defined parameters for teacher's assessment?

Yes well defined 23%
Opportunity for self analysis 41%
Observation on a daily basis By the Group

head/Vice Principal/Principal 23% Not clear 7.7%

9. What are the avenues for self improvement?

Opportunities for innovation as per Childs

requirement 47% Acquire experience from seniors 23%

Opportunities to coordinate events /activities / Celebrations of the centre /opportunities to

attend seminars/workshops in the field 57.7%

learnt challenging situations that arise while training special children Workshops and

classes for teachers like Yoga, Smocking, Music, craft are vey useful

10. How did the pandemic affect your:

Working

Switching over to online Classes which was a

new Enriching Experience 65.5% Increase of interaction With parents 30.8%

Happy with the participationOf the other

family members 11.5%

Learn to use digital technology and the different platforms for on lineteaching 38.5% On line working was difficult in the existing domestic set up 11.5% Wifi connectivity problem for both Teachers/parents 19% Procuring equipemts like Mobile was a problem for paretnts 11.5% **Positives** On line teaching was very useful to the children 69% Learn to use digital technology and the different platforms for on line teaching 7.7% Parents were happy that their children Did not regress 15.4% Negatives. Difficulty at home/could not retain The attention of the child 23% Missed physical interaction Both child and parents 38.5% Missed outings conducted by the centre 7.7% Documentation was a problem for teachers 11.5% Academy students could not be Practically trained during those Two years 7.7% What did you learn from your experience of working during t he pandemic period.

86

23%

53.8%

19%

15.4%

Confidence to face challenges under difficult

Learnt to use digital technology platforms like

On line classes were a new experience at

An enriching learniang Experience for teachers 49%

A New learning experience For parents

and different circumstances

making PPTs

google meet, zoom, whatsapp etc,

home for the teacher and parent

12. Any other feedback you would like to give

Positives

- The centre provides opportunities for continuous learning and career growth and to benefit from the experience of the senior teachers
- · Happy working conditions
- Events / festivals / celebrations very well organized. Teachers share the work willingly during these occasions.

Negatives

- Teachers will benefit from better daily supervision and constructive guidance by their superiors.
- Interaction among the teachers to share best practices and experience is lacking.
- Spoken English classes for teachers will be welcome
- The methodology of Upanayan implementation is not clear for the new teachers. They need more guidance.

REPONSES FROM MANAGEMENT STAFF

- 1. Do you know the Mission/Vision/Values of MNC. What are they?
 - · Zero rejection
 - · Early Intervention to reach all
 - · Parental empowerment and training them to be carry over agents
 - Dissemination of our evidence based strategies to special educators in the field
- What measures do you take to see that they are fulfilled?
 - Zero rejection
 - Net working with persons who refer children to MNC
 - Admission throughout the year (unlike school academic years)
 - No charge for services

Parental Empowerment

- Parents observe class rooms /provided counseling
- Opportunity to join the Diploma course (run by AVNVK Academy A educational wing of MNC) in Early Childhood Spl Education and become a special educator

Dissemination

 Refresher courses to the EICs in the 31 districts of TN / National Workshops / International Conferences

- 3. How do you monitor if staff under you is in complete understanding of the E I program and its implementation?
 - Through performance appraisals as per the check list maintained for their respective roles
 - · Weekly meeting followed by discussions
- 4. How to you guide them according to the needs?
 - Through personal / group discussions /practical demonstrations giving suggestions according to their needs and providing handouts for reference
 - Helping them understand the needs of the child and advise them to seek assistance from the visiting consultants (Doctor/speech therapist/occupational therapist / dental consultations /vision problems to be referred to Sankara Nethralaya)
 - Induction programme for new special educators giving them the appropriate written the practical materials as and when needed
 - Assisting them step by step in assessments, data entry etc.
- 5. How do you stick to the time line along with your team?
 - · Fix a timeline taking into consideration their practical difficulties
 - Timely reminders/follow ups to know the status of the work
- 6. Do you have meetings often to iron out doubts/apprehensions etc and how fruitful are such meetings?
 - Yes. One on one discussions, group meetings
 - The above are very fruitful so that they are equipped with theoretical and practical knowledge
- Do you have enough freedom to work as per your plan?

YES VERY MUCH

8. What type of self improvement programs are offered to you?

Self Improvement programs

- To be coordinators of various events an celebrations at the centre
- Opportunity to attend seminars/conferences/ programs organized at the centre and to attend the same in the field
- Opportunities to be resource persons in workshops / training programs both in the centre and outside
- Monitoring and training the special educators/therapists in the 31 District Early Intervention Centers of the TN Government

- 9. Do you think you and your team are delivering the best if not how do you expect the management to help you?
 - · YES (have a very good team)
 - Not very sure
 - Trying our best to do so
 - SWOT meetings by the management
- 10. Where do you see MNC in the next five years?
 - We see Upanayan being followed in many more institutions and MNC plyaing a mentoring role.
- Do you think you are equipped well for your post or do you feel the need for any training.
 - The management provides enough opportunity for in-house training and to attend seminars/conferences in and around Chennai and we are well equipped for out post.



Organization & Staff Details

Full time/Part time Staff details

SI. No	Name Designation		FT/PT
1	Mrs. Hemalatha A	Principal	FT
2.	Ms. Thenmozhi C	Vice Principal	FT
3.	Mrs. Helen Rose	Group Head	FT
4.	Mrs. Revathi K	Group Head	FT
5.	Mr. Subramonian K	Group Head - Therapy	FT
6.	Mrs. Vijayalkshmi K	Group Head	
7.	Mrs. Premila Devi K	Special Educator	FT
8.	Mrs. Uma Mageshwari	Special Educator	FT
9,	Mrs. Seetha G	Special Educator	FT
10.	Mrs. Bharathi	Special Educator	FT
TL.	Mrs. Sundarammal	Special Educator	FT
12.	Mrs. Kalpana H	Special Educator	FT
13.	Ms. Jamuna R	Special Educator	FT
14.	Ms.Mageshwari R	Special Educator	FT
15.	Mrs. Theodora Fernandez	Special Educator	
16.	Ms. Ramajeyam R	ajeyam R Special Educator	
17.	Ms.Vidhya R	Therapist	FT
18.	Ms. Seethalakshmi J	Therapist	FT
GOVER	NMENT EARLY INTERVENTION	CENTRE AT MNC	-
19.	Mrs. Dhavamani	Special Educator	FT
20.	Mrs. V. Sangeetha	Special Educator	FT
21.	Mrs. S. Sutha	Special Educator	FT
AVMVK	ACADEMY		
22.	. Mrs. V R Jeyasree Faculty		FT
23.	Mrs. Rajalakshmi Aravind	Course Coordinator	FT
MONTE	SSORI TEACHER		-
24.	Mrs. Thangathai	Montessori Teacher	

24.	Mrs. Sumathi A	Principal	FT	
= 90	D100040198901920010000		0.0000	
25.	Ms. Sarojini A	Vice Principal	FT	
26.	Ms. Thayammal M	Special Educator	FT	
27.	Mrs. Geetha Lakhshmi	Special Educator	FT	
28.	Mrs. Sasirekha S	Special Educator	FT	
29.	Mrs. Sivakumari K	Special Educator	FT	
30.	Mrs. Kalpana M	Special Educator	FT	
31.	Ms. Sangavi	Therapist	FT	
32.	Ms. Vinisia A	Therapist	FT	
ADMI	NSITRATION	***		
33.	Mr. S Vijayan	Manager Administration	FT	
34.	Mrs. Vaijayanthi Desikan	Office Assistant	FT	
35.	Mrs. Amala Pushpam	Office Assistant	FT	
36,	Mrs. Valli	House Keeping Staff	FT	
37.	Mrs. Vasanthamma	House Keeping Staff F		
PART	TIME STAFF			
1.	Mrs.Muthuperiyanayagi K	Special Educator	PT	
2.	Mrs. Karpaka Niranjana	Special Educator	PT	
CONS	ULTANTS			
1.	Dr. Padmalochani	Developmental Pediatrician		
2.	Dr. Subramanian	Pediatrician		
3.	Mr. Arul Mozhi Vendan	Occupational Therapist		
4.	Mr. Venkatasalam R	Occupational Therapist		
5.	Mrs. Rekha V	Occupational Therapist		
6.	Mr. Infant Leslie Antioch	Speech Therapist		
7.	Miss Vishnu Priya	Music Teacher		
8.	Dept of Audiology and Speech Pathology, SRM University, Kattankulathur 603203	Speech Therapists		
9.	Krishnamachari Yoga Mandiram, Mylapore, Chennai 600004	Yoga		

10.	SRM Kattankuathur Dental	Dental Consultation
	College and Hospital	
	SRM Institute of Science and	
	Technology, SRM Nagar,	
	Kattankulathur, Chennai - 603203	
11.	Sankara Nethralaya	Eye Consultation
	41 College Road	
	Nungambakkam	
	Chennal 600034	
12.	Mrs. Sowbhagyalakshmi	Musician
VOLU	NTEERS	
1.	Mrs. Andal Raghavan	Volunteer
2.	Mr. Desikan V	Volunteer
3.	Mrs. Nalini Ramani	Volunteer
PARE	NT HELPERS AND CARE GIVERS	
1.	Mrs. Yasmin	Housekeeper
2.	Mrs. Priya A	Housekeeper and caregiver
3.	Mrs. P Parameswari	Housekeeper and caregiver
4.	Mrs. Dhatchayani T	Housekeeping - Therapy Unit
5.	Mrs. Yeshodha	Caregiver – Jivikam
6.	Mrs. Nisha Nandhini	Caregiver – EIC
7.	Mrs. Latha M	Caregiver – EIC
8.	Mrs. Usha P	Caregiver - EIC
9.	Mrs. Sudha	Caregiver - EIC
10.	Mrs. Shyamalatha G	Helper teacher – EIC
11.	Mrs. Sathiya Devi G	Helper teacher – EIC
12.	Mrs. Kamala M	Helper teacher – EIC
13.	Mrs. Thulasi Uma	Helper teacher – Jivikam
CONT	RACT EMPLOYEES	
1.	Security Staff	Contract
	Two shifts (2 personnel)	

MANAGEMENT COUNCIL

BALA MANDIR KAMARAJ TRUSTEES

(Unit: Madhuram Narayanan Centre for Exceptional Children)

SI. Na	Name	Occupation	Date of enrolment	Residential Address and other details	Mobile
1	Mr. N Kumer	Industrialist	9.9.2017	Vice Chairman Sanmar Group 1 George Avenue Alwarpet Chennal 600018	9840090419
2.	Mrs. Girija Vaidyanathan IAS (Retd)	(Retd) Chief Secretary, Government of Tamifnadiu	2020	Retd Chief Secretary 7 Central Avenue Kesavaperumalpuram	9940674396
3.	Mrs. Maya Gaitonde	Social Service	16.6.1986	Educationst / Social Service 65B Josier Street Chermai 600034	9962098068
4.	Mr. Mano, Kumar Sonthalia	Industrialist	25.1.1992	Chairman & MD The New India Express 43 Harrington road, Chelpet Chemial 600031	9841021033
5,	Mr. P Natarajan	Corporate Professional	28.9.2013	Corporate Professional 6 Smoshta Subasni 56;46 14 main road R A Puram Channal 600028	9840009830
6.	Mr. Ramesh Mangaleshwaran	Corporate Professional	28.9.1967	11/1 Valliammar Achi road Kollupuram, Chennai 600085	9820096170
7.	Mrs. Prabha Sridevan	Retd Justice High Court of Madras	9.8,1948	7 Krishnaswamy Avenue, Mylapore, Chennai 600004	9444417917

- Certified that the composition of the above Managing committee (Board of Trustees) is in accordance with the MOA of the organization.
- Certified that the Managing Committee (Board of Trustees) was recommended/ratified with the above members by the AGM held on 24.9.2022 and that the life of this committee is valid up to the next AGM due in September 2023.



ANNEXURE 12 RCI APPROVAL TO CONDUCT DIPLOMA COURSE





HIGHE STATE WHEN THE STATE OF T

EHABILITATION COUNCIL UP 1

1745W0.ECS.E.(10)/12-80

Speed Post/Errail

18 Aug. 2011

CERTIFICATE OF APPROPRIA

The Renabilitation Council of India (RCI) beneby accords to aggreeout to the resitivity to conduct the training programme apper tolowing details:

Institute	Training Programme and its dustion	Academic Session(s)	Senctioned intake (Maximum) per sets foliation
Matheron Nersyanan Centra for Seceptional Children, No. 18. Frekseham Stean, T. Nigger. Chennel, Tamil Nadu – 600057 (Jestiaka Code – TNOKV)	Occurse in Ently Childhood Special Effection (Interference Occuping) DI (III.3 E) (IV) Constants Deer Year	1903-20 1003-20 1003-24 1004-25 2025-26	Micheel

- 2. The approval to conduct the training programme is given subject to are RD's propried standard syllation & contexcitative in s/s above mentioned programm to be followed and the require inhastrictate facilities such as clinical facilities/special activity, blancing controller transaction onc. are anniable and maintained theoughout the conduct of training programme at the inelligible in accordance with the narms prescribed by RD from time to time.
- The Council reserves the right to depute team of slating experts to assert the availability of the teaming facilities and 13 mention the extendium of theory/practically of only time as per the provision of Section 18(2) of 903 Acr. 1990.
- 4. The examination for the operar shall be conducted in accordance with the control prescribed by the Maliural Board of Chamiseston in Rehabilitation (MRDM), from Ceffic or adjunct body of ECC (now term to term.
- Any admission taken beyond the variety of this approprial shot and be considered for registration in Control Rehabilitation floguese (CRR) of MC under physicisemeterics.
- a. The approval can be edifferent at any time. If the meticals is financial victoring degranorms or for any other receptain public interest.

(Se. Subsub-Sumar) Member Secretary

Cases, on page No.2

St.-22, gaps softingtons offers, sig State - 110 cmd.

B-22. Quints institutional Asset, from Carts - 110 cmd.

Tel. 011-2603 2400, 2605 2204, 2009 4307 2603 2016. Fee: 011-2603 4201

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Mediation secon-educated-ratio.

ANNEXURE 13 REGISTRATION CERTIFICATE OF THE ORGANIZATION



Balamathir Kamoral Trust

V. SIVALINGAM, STARP TERIOR, ADTAR, MURPH-600 000. Livery No. 18104 (\$ /92.

-Annouse T

CENTIFICATE OF THE CHANGE OF THE NAME OF THE REGISTERED SOCIETY . .

S.No.13/1949

I hereby sertify that the society "BALA MANDIN" registered as No.12 of 1949 has changed its name as "BALA MANDIR KAMMIAJ TRUST" and this changed name has this day been registered under the Tamil Nadu Secieties .
Registration Act, 1975 (TAMILNADS ACT 27 of 1975).

Given under my hand at Madres South this 25th day of AFRIL, One thousand nine hundred and seventy nine.

Sanf:

REGISTRAL OF SOCIETIES,

Madras South,

Cor- (with repared by : 18. 85

Registra

REGISTRATION CERTIFICATE OF THE CENTRE UNDER THE PWD ACT FOR EARLY INTERVENTION SERVICES





STATE COMMISSIONERATE FOR PERSONS WITH DISABILITIES AND DIRECTORATE FOR THE WELFARE OF DIFFERENTLY ABLED, LADY WILLINGTON COLLEGE CAMPUS, KAMARAJAR SALAI, CHENNAI - 600 005

CERTIFICATE OF REGISTRATION

(Proceedings of the State Commissioner for Persons with Disabilities and Director for the Walfare of Differently Abled

PRESENT: THIRU, JOHNY TOM VARGHESE, I.A.S.,

File No.8723/LO 4/2020,

Dated; 23,02,2021,

Registration is bereby awarded Madhuram Narayanan Centre for Exceptional Children, (A Unit of Balamandir Kamaraj Trust), Prakasam Street, T.Nagar, Chennai - 600017, as an institution for the Persons with INTELLECTUAL DISABLED vide Regn.No.37/2021, Under Section 51 (2) of the RIGHTS OF PERSONS WITH DISABILITIES ACT, 2016. The certificate of Registration is valid for the period commemcing from 01.02.2021 TO 31.01.2024 subject to the following conditions:

- Application for granting renowal of a certificate of registration should be submitted to this office two months in advance before the expiry of the period of validity.
- The Management should not appoint any staff whose Certificate has been cancelled or who has been convicted for offence involving moral turpitude.
- The Institution should maintain the proper barrier free accessible environment & infra-structure facilities including sufficient accommodation provided to Differently abled children.
- 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 be filled with persons with bench mark dissolities as per section 34 (1) of the RPWD Act, 2016.
- Rain Water Harvesting facilities should be done in the Institution immediately.
 if not done already.
- fi. This certificate should be displayed by the institution in a conspicuous place.

- 7. The following words should be painted in the Name Board of the Institute Sri Madhuram Narayanan Centre for Exceptional Children, (A Unit of Balamandir Kamaraj Trust), 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 01.02.2021 TO 31.01.2024 Institution should follow rules & regulations issued by State Commissioner for the Differently Abled from time to time.
- 8. Necessary fire safety facilities should be properly installed at the appropriate scale as indicated by the Fire and Rescue Services Department.
- 9. Structural Stability Certificate, Building License. Sanitary Certificate and No. Objection Certificate from Fire and Rescue Services Department should be renewed periodically without fail.
- 10. The Institution is subject to inspection by the inspection authorities under the Act/Rules and by the persons / officers authorized by the State Government.
- 11 The Contribute of Registration is liable to be revoked as per the provisions given in section 52 of the RPWD Act 2016.
- 12. The Registration accorded is subject to the conditions laid down in the Rights of Persons with Disabilities Att. 2016.

23-02-2021 State Commissioner for Persons with Disabilities And Director for Welfare of the Differently Abled.

D.D

11 L.O (i/c) JA

Madhuram Narayanan Centre for Exceptional Children, (A Unit of Balamandir Kamaraj Trust). Prakasam Street, T.Nagar.

Chennai - 600017.

Copy to:

- District Differently Abled Welfare Office, Chennai, District.
- 2. Stock file /spare.

ANNEXURE 15 CERTIFICATE OF REGISTRATION UNDER THE PWD ACT FOR JIVIKAM





STATE COMMISSIONERATE FOR PERSONS WITH DISABILITIES AND DIRECTORATE FOR THE WELFARE OF DIFFERENTLY ABLED, LADY WILLINGTON COLLEGE CAMPUS, KAMARAJAR SALAL CHENNAL - 800 005.

CERTIFICATE OF REGISTRATION

(Proceedings of the State Commissioner for Persons with Disabilities and Director for the Welfare of Differently Abled

PRESENT: THIRU, JOHNY TOM VARGHESE, I.A.S.,

File No.8722/LO.4/2020.

Dated: 23 .02.2021.

Registrators is hereby awarded to "Madhuram Narayanan Centre for Exceptional Children, (A unit of Balamandir Kamaraj Trust) No 18, Prakasam Street, T.Nagar, Chennal – 600 017, as an institution for the Persons with Intellectual Disabilities vide Regn.No.37/2021, Under Section 51 (2) of the RIGHTS OF PERSONS WITH DISABILITIES ACT, 2016 to function as Special School for the Intellectual Disabled. The certificate of Registration is valid for the period commencing from 01.02.2021 TO 06.10.2023 for the PRE-PRIMARY, PRIMARY AND SECONDARY AND PRE-VOCATIONAL classes subject to the following conditions—

- 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.
- The Management should not appoint any staff whose Certificate has been cancelled or who has been convicted for offence involving moral turpitude.
- The Institution should maintain the proper barrier free accessible environment.
 Infra-structure facilities including sufficient accommodation provided to Differently abled children.
- 4. 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 be filled with persons with bench mark disabilities as per section 34 (1) of the RPWD Act. 2016.
- Rain Water Harvesting facilities should be done in the Institution immediately, if not done already.
- 6. This certificate should be displayed by the institution in a conspicuous place.

- 7. The following words should be painted in the Name Board of the institute "Madhuram Narayanan Centre for Exceptional Children, (A unit of Balamandir Kamaraj Trust) No 18, Prakasam Street, T.Nagar, Chennai 600 617 is registered under Section 51(2) of the Rights of Persons with Disabilities Act, 2016, temporarily for a period from 01.02.2021 TO 06.10.2023 Institution should follow rules & regulations issued by State Commissioner for the Differently Abled from time to time.
- Necessary fire safety facilities should be properly installed at the appropriate scale as indicated by the Fire and Rascue Services Department.
- 9 Structural Stability Certificate, Building License, Sanitary Certificate and No Objection Certificate from Fire and Rescue Services Department should be renewed periodically without fail.
- 10. The Institution is subject to inspection by the inspection authorities under the Act/Rules and by the persons / officers authorized by the State Government.
- 11. The Certificate of Registration is liable to be revoked as per the provisions given in section 52 of the RPWD Act 2016.
- 12 The Registration accorded is subject to the conditions and down in the Rights of Persons with Disabilities Act. 2016.

State Commissioner for Persons with Disabilities And Director for Welfare of the Differently Abled.

J.A

11

L.O (l/c)

11

D.D

To:

Madhuram Narayanan Centre for Exceptional Children, (A unit of Balamandir Kamaraj Trust) No 18, Prakasam Street, T.Nagar, Chennai – 600 017

FIRE SERVICE LICENSE UNDER SECTION 13 OF THE TN FIRE SERVICES ACT 1985

TAMIL NADU FIRE AND RESCUE SERVICES FIRE SERVICE LICENSE

Cinder Section 13 of the Tamilhada Fire Service Act 1985 road with Tamilhada Fire Service Rules 1990 Appendix III)

LICENCE NO: 11742/A/2022

Date :4/ /12/2022

Rescue Service Act. 1985 for RUNNING A SCHOOL FOR EXCEPTION CHILDREN within the purisdection of CHENNAI Corporation of the process NO.18, PRAKASAM STREET, T.NAGAR, CHENNAI - 17 Subject to the conditions noted thereon and such other conditions as may be prescribed.

The above premises inspected by D.SIVAKUMAR (SO-T.NAGAR) on 15.12.2022

CONDITIONS

As per Col. 13 of appendix V to the Rules under section 13 of the Act.

- 1. This NOC is valid for thee Year from the case of issue.
- Regular Licence has to obtained from the composent authority of other departments.
- Fire 8 Life safety systems/arrangement have to be provided in accordance with the requirements of NEC part IV fire 8 Life safety 2016.
- All the Fire Sidety Equipment / Scatteria provided as the premises should be given periodical care and maintenance.
- 3. All the Estinguishers have to be recharged placement and maintained periodically as per code practice 2190/2010
- If here is any deviation from the Covernment Mules and Act the mose of Fire-Licence will be automatically cancelled.
- 7. All the employees must have fire prevention Training
- Browgericy contact combine (100, 101, 102, 108; should be published in all floors of the visual place.

Office Seales of the Party of t

DESTRUCT OFFICER
FINE AND RESCUE SERVICE DEPARTMENT
AMOUNT AMOUNT AND AN ADDRESS AND ADDRE

TO:
M/S.MADHUBAM NARAYANAN CENTRE FOR EXCEPTION CHILDREN SCHOOL,
UNIT OF BALAMANDIR HAMARAJ THURT,
IGERDA MORTESEN BLOCKS.
NO. 18, PHAKABAM STREET,
T.NACAR, CHENRAI - 17.

ANNEXURE 17 IT RETURNS FOR THE YEAR 2022-2023

Acknowledgement Number: 773056421021122

Date of filing : 02-Nov-2022

Г	Where the de	INDIAN INCOME TAX R on of the Return of Income to Form 178- file (Please see Haile 12		TR-J, ITR-4(SUGAM), IT	the state of the state of	IIR-7	Assessment Year 2022-23
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DO NOT SEND THIS ACKNOWLEDGEMENT TO CPC, BENGALURU

APPROVAL UNDER SECTION 80G G9509VI0 OF THE IT ACT OF 1961



GOVERNMENT OF INDIA INCOMETAX DEPARTMENT OFFICE OF THE DIRECTOR OF INCOMETAX (EXEMPTIONS)

A NINEXE III PLOOR, 125 MAHATHA GAHDHE ROAD, CHENNAI 600034

DIT(E) NO;212(170)72

DATED: 23-03-2009

The Trustee, BALA MANDER KAMARAJ TRUST, NO.8, G.N. CHETTY ROAD, T. NAGAR, CHENNAY - 600 017

Sk(s)/Hadam,

Renoval of approval u/s.80 G of the 1.T. Act,1961 - Your own - reg. Your Application filed on 25.09.2008

Accroved under Sec.80 G was granted to you in respect of donations received up to 21,03,2000 vide this office letter of even number dated 11.4,2006 . The same is hereby renewed u/s.80G of the LT.Act, from 01.04.2009 to 51.03.2012(Aset year 2010-2011)(2012-2013).

- The renewal is valid in respect of donations received by you front 01.04.2009 to 31.03.2012. In the receipts issued by you, the fact that the deduction will be eligible for donations received during this period only should be clearly mentioned. Please also note that the receipts issued to the donors should bear the number and date of this order.
- You may apply for renewal in Form 10 G (in triplicate) duly filled in after the accounts are closed for the period ended 31.03.2011.

Yours faithfully,

DERECTOR OF INCOME TAX (Ex

Copy to the ADIT(E)-IV, Chennal

//CertMed True Copy//

Exemption extended in perpetuity unless specifically withdrawn vide Circular No.7/2010 (F. No.197/21/2010//TA-I) dated 27,10,2010 of Income Tax Department

ncome Tax Off (EXCEMPTIONS), C

ANNEXURE 19 VALID FCRA REGISTRATION

No.11/21022/23(22)/2020-FCRA-HI

Government of India Ministry of Home Affairs (Fereigners-II Division-FCRA)

> First Floor, Major Dhyan Chard National Stadium, India Gate Circle, New Delhi. Dated: the 24th March, 2023.

PUBLIC NOTICE

Subject: Extension of the validity of FCRA registration certificates

In continuation of Ministry of Home Affairs' Public Notice No. IF21022/23/22y2020-ECRA-III, Dated 23.09.2022, the Central Government, in public interest, has decided to extend the validity of FCRA registration certificates of certain categories of FCRA registered entities; as

- (1) The validity of registration certificates of such entities whose validity was extended till 31.03.2023 in terms of the Public Notice dated 23.09.2022 and whose renewal application is pending, will stand extended till 30.09,2023 or fill the date of disposal of renewal application, whichever is earlier.
 - (H) The validity of those FCRA entities whose S years validity period is expiring during 01.04.2023 to 30.09.2023 and who have applied/will apply for renewal before expiry of 5 years validity period, will stand extended upto 30.09.2023 or till the date of disposal of renewal application, whichever is earlier.
- All FCRA registered associations are therefore advised to take note that in case of refusal of the application for renewal of certificate of registration, the validity of the certificate shall be deemed to have expired on the date of refusal of the application of renewal and the association shall not be eligible either to receive the foreign contribution or utilise the foreign contribution received.
- This issues with the approval of the Competent Authority. All concerned may take note of the above decision and take appropriate action in the matter.

Deputy Secretary

Tele, 011-23070756

