

## Committee Members

---

### Primary Contacts

Name	Club	District	Sponsor	Role
Ya-Ching Hsu	Taoyuan Li-Te	3502	Club	Host
Dae Sung Kang	Tongyoung-Hanryeo	3590	Club	International

### Host committee members

Name	Club	District	Role	Date Added
Chia-Hua Chang	Taoyuan Li-Te	3502	Secondary Contact	
Chung-Han Chang	Taoyuan Li-Te	3502	Secondary Contact	

### International committee members

Name	Club	District	Role	Date Added
Hwag-Yeol Bae	Tongyoung-Hanryeo	3590	Secondary Contact International	
Jun Seok Baek	Tongyoung-Hanryeo	3590	Secondary Contact International	

# Project Objectives and Implementation

---

## PROJECT OBJECTIVES

### **The Rotary Foundation approved global grant funding to be used for the following project objectives:**

#### Current Situation

Chiayi County faces a critical healthcare challenge as Taiwan's most rapidly aging region. Since 2017, it has consistently ranked as the county with the severest population aging in Taiwan. As of December 2023, Taiwan's overall aging index is 154, while Chiayi County's stands at an alarming 263, far exceeding the national average of 71%. With the nation's highest elderly population ratio at 22.36%, Chiayi County is experiencing a significant increase in chronic diseases and heightened medical needs among its residents.

#### Ophthalmology Challenges:

In the field of ophthalmology, diabetes presents a significant risk, particularly for the elderly population. Conditions such as diabetic retinopathy and macular degeneration often progress silently, with symptoms only becoming apparent after substantial damage has occurred. While regular eye exams can reduce the risk of blindness by 50%, access to care is limited. Only 5 out of 18 towns in Chiayi County offer ophthalmology services, with just 11 clinics and 3 hospitals available. This scarcity of medical resources, combined with inadequate transportation infrastructure, creates significant barriers for residents seeking timely eye care.

#### Dental Health Concerns:

Oral health is a crucial indicator of overall well-being and quality of life. The Ministry of Health and Welfare reports that adults aged 50-64 frequently suffer from periodontal disease. For the elderly population, issues such as tissue aging, tooth wear, and worsening periodontal disease can severely impact chewing and swallowing functions. This not only leads to poor nutrition and increased chronic disease risk but also affects self-esteem and social interactions, posing a severe threat to the overall health and quality of life for Chiayi's aging population.

In 2022, Chiayi County faced a severe shortage of dental professionals, with only 98 dentists serving a population of 487,550 - a ratio of 1 dentist per 4,975 residents. This stark contrast with Chiayi City, where each dentist serves an average of 1,105 residents, highlights the significant urban-rural healthcare divide. The county's vast rural and agricultural areas suffer from inadequate medical resources, exacerbated by ongoing population outflow. Vulnerable groups, including the elderly, women, children, and foreign workers, often neglect oral health due to geographical, occupational, and educational barriers.

#### Critical Equipment Needs:

The Dongshi Health Center, a crucial healthcare provider in the region, urgently requires modernization. Its outdated dental X-ray equipment frequently malfunctions, compromising patient care. Acquiring new high-performance AI ophthalmology equipment and modern dental X-ray machines is costly. Dongshi Health Center struggles to raise the necessary funds and seeks assistance from Rotary International to enhance its ophthalmology and dental diagnostic services. With support from the health center's medical staff, residents in rural areas can receive timely and appropriate eye and dental care, strengthening rural health care and advancing health equity.

### **Have any of these objectives changed?**

No

### **Have you made progress toward your project objectives?**

Yes

#### **Describe the progress you've made so far.**

Dongshi Health Center is taking a significant step toward modernizing its services by replacing its outdated and unreliable dental X-ray equipment with advanced AI ophthalmology devices and modern dental X-ray

machines. This upgrade greatly enhances patient care quality and diagnostic capabilities.

With improved medical equipment and the dedication of its healthcare team, Dongshi Health Center is providing faster and more accurate eye and dental care to rural residents—further strengthening healthcare accessibility and promoting health equity.

### PROJECT IMPLEMENTATION

Your grant application included plans for the following activities. Please report on each of your project activities below. If there were any additional activities during the project, please report each of them by clicking the Add an Activity button at the end of this section.

#### 1. Interior design and construction

**Duration**

2024/12/01-2024/12/31

**Status**

Completed

**Start Date**

02/12/2024

**Completion Date**

31/12/2024

#### 2. Equipment purchase and Installation

**Duration**

2025/01/01-2025/02/010

**Status**

Completed

**Start Date**

12/12/2024

**Completion Date**

19/02/2025

#### 3. Conditioning monitoring, supervise and record

**Duration**

On going

**Status**

In progress

#### 4. Medical professionals visit

**Duration**

Regular

**Status**

In progress

#### 5. Vision examinations and oral health education

**Duration**

Regular

**Status**

In progress

## Supporting Documents

- 設備完成圖示.pdf

# Measuring Success

---

## How many people have directly benefited from the project?

99016

### DISEASE PREVENTION AND TREATMENT

Impact measures

#### 1. Number of individuals reporting better quality of health care services

Collection method	Frequency	Beneficiaries
Direct observation	Every six months	1000-2499

RESULTS TO DATE

Collection Method	Frequency	Beneficiaries
Focus groups/interviews	Every six months	1000

#### 2. Number of recipients of disease prevention intervention

Collection method	Frequency	Beneficiaries
Public records	Every six months	1000-2499

RESULTS TO DATE

Collection Method	Frequency	Beneficiaries
Public records	Every six months	1000

#### 3. Number of communities reporting decrease in cases of disease(s) targeted

Collection method	Frequency	Beneficiaries
Public records	Every six months	1000-2499

RESULTS TO DATE

Collection Method	Frequency	Beneficiaries
Public records	Every six months	1000

### Monitoring and evaluation

Here is the person or organization that was selected to monitor and evaluate impact measures

#### Person or organization

National Health Insurance Administration-Southern Division, Chiayi County Dental Association, Chiayi County Health Bureau, Chiayi County Dongshi Township Health Center

#### Qualifications

National Health Insurance Administration-Southern Division Coordinate NHI medical service institutions' task division and coordination, and to integrate medical team strength. Chiayi County Dental Association arrange

qualified dental and ophthalmic care workers for regular care services in the dental and ophthalmic care program. Chiayi County Health Bureau Coordinate appropriate medical station or community health clinic to participate and support the project. Chiayi County Dongshi Township Health Center arrange local residents to participate in dental and ophthalmic care and necessary courses.

**Has this person or organization changed?**

No

# Participants

---

## SPONSOR PARTICIPATION

### What roles and responsibilities did host sponsor members have?

The host sponsor's roles and responsibilities include organizing and managing the project to completion and providing training for all involved parties and the community. The host sponsor is responsible for budget control and responding according to the plan.

### What roles and responsibilities did international sponsor members have?

The international sponsor's roles and responsibilities include providing consultation and funding for the project, visiting the project site, and reporting progress to their club.

## PARTNERS (OPTIONAL)

Add any Rotary clubs or districts that were involved in this project, other than the host and international sponsors or financial contributors.

No.	Type	Club name or district number
-----	------	------------------------------

## COOPERATING ORGANIZATIONS

### 1. National Health Insurance Administration- Southern Division, Ministry of Health and Welfare

No.96 Gongyuan Rd. West Central Dist. Tainan Taiwan  
Tainan  
Taiwan

<https://www.nhi.gov.tw>

### Describe how cooperating organizations participated in the project.

Providing expertise, infrastructure, advocacy, training, education, and other support. Maintaining records and data for reporting to the Rotary Foundation. Reporting activities and results to the host and international sponsors accurately and timely. Coordinating and integrating tasks of NHI medical service institutions and assisting other organizations to expand medical services if necessary.

### 2. Chiayi County Dental Association

No. 677, Section 1, Shengxian Road, West District  
Chiayi  
Taiwan

### Describe how cooperating organizations participated in the project.

Ensuring all medical services comply with the Ministry of Health and Welfare requirements. Arranging qualified dental care personnel for the school dental care program. Providing regular dental care services, education, training, and professional consultation.

### 3. Chiayi County Health Bureau

No.3, E. Sec., Sianghe 2nd Rd.,

Taibao City Chiayi County  
61249  
Taiwan

<https://cyshb.cyhg.gov.tw/en/>

**Describe how cooperating organizations participated in the project.**

contacting and coordinating appropriate medical station or community health clinic to participate and supporting the project to enhance the ophthalmology & Dentistry care in rural coastal Chiayi.

**4. Chiayi County Dongshi Township Health Center**

No. 3-7, Dongshi Township  
Chiayi County  
Taiwan

<https://cyshb.cyhg.gov.tw/dongshi/>

**Describe how cooperating organizations participated in the project.**

Providing space, paying for water and electricity bills, and maintaining the equipment. Arranging citizens to participate in the ophthalmology & Dentistry care and necessary personal hygiene courses.

# Project Expenditures

---

## Grant amount:

60,000 USD

## Expense log

Date	Description	Category	Amount (TWD)
31/12/2024	Dental periapical X-ray machine	Equipment	455200
31/12/2024	fully automatic intraocular pressure tester	Equipment	450000
31/12/2024	Centervue Color Fundus Scanner	Equipment	708000
31/12/2024	laptop	Equipment	56000
31/12/2024	Waiting chairs and plastic steel conference table	Equipment	17100
31/12/2024	Stainless steel sign	Equipment	39270
31/12/2024	air compressor and stainless steel air tank	Equipment	221000
31/12/2024	hard drive, Mobile Hard Drive	Equipment	7350

## Expense summary

Category	Budget (TWD)	Expenses (TWD)	Variances (TWD)
Equipment	1650000.00	1953920.00	(303920.00)
Operations	150000.00	0	150000.00
<b>Totals:</b>	<b>1800000.00</b>	<b>1953920.00</b>	<b>-153920.00</b>

**Did your project have any unexpected or unusually large variances?**

No

**Will you return unused funds to the Foundation?**

No

## Financial Details

---

### PROJECT BANK STATEMENTS

**Upload bank statements from the project bank account to show all project-related transactions, including deposits and withdrawals. In addition to the bank statements, you can also upload a financial ledger. For scholarships, please attach receipts for any expenses over \$75.**

#### Supporting Documents

- GG2568860-全球獎助金收支明細-8A7D4C9F171F1E6E8B4003925AD31F1FC5D02845\_GG2568860全球獎助金使用明細.pdf
- GG2568860\_全球獎助金-支出單據-C5B156CDFE2486064FCD8568129DE56D2FE73592\_GG2568860全球獎助金發票收據及帳戶使用匯總表.pdf

### FINANCIAL MANAGEMENT

#### Who is in charge of the project's financial management?

Ya-Ching Hsu , Taoyuan Li-Te Rotary Club

#### Please describe the project's financial management, including record keeping, inventory, payment authorizations, and conversion of funds.

The budget for this project applies to each category, and suppliers have already provided fixed prices. Some of the budgets need to be paid in 2-3 installments, and all records are kept by the club's treasury. Community committees and Rotarians approve payments and authorize each payment.

#### Were there any challenges in managing the project funds?

No

### PROJECT INCOME

#### Did your project generate any income through sales, interest, or other sources?

No

## Supporting Documents

---

- 捐贈儀式.pdf
- 新聞媒體報導-捐贈儀式.pdf

# Authorizations

---

## YOUR AUTHORIZATIONS

### **Primary contact**

By authorizing this report, I confirm that, to the best of my knowledge, these grant funds were spent according to Foundation guidelines and that all of the information contained in this report is true and accurate. Original receipts for all expenses incurred will be kept on file for at least five years, or longer if required by local law, in case they are needed for auditing purposes.

Grant reports and supporting documentation should not include personal data (name, contact information, age/date of birth, health/medical data, or other identifying information) or images of anyone who is not authorizing this report unless (a) it is requested by the Foundation and (b) written consent of the individual (or their parent or legal guardian) is provided to the Foundation. If such personal data is inappropriately included, it may cause delays in the grant process while the Foundation complies with Rotary's Privacy Policy.

I also understand that all photographs, video and other media submitted with this report will become the property of Rotary International and will not be returned. I represent and warrant that I own all rights in the photographs, video and other media, including copyrights, and that all persons (or their parents if they are minors or lack legal capacity) appearing in such photographs, videos and other media have given me their unrestricted written consent to license use of their images/likenesses to Rotary International. I hereby grant Rotary International and The Rotary Foundation (collectively, "Rotary") a royalty-free, worldwide, perpetual, irrevocable license and right to use, publish, print, reproduce, edit, broadcast, webcast, display, distribute, modify, create derivative works from, sublicense and publicly perform, the photographs, video and/or media now or at any time in the future, in Rotary International publications and materials, and for promotional purposes in any form, medium or technology now known or later developed. I represent, warrant and agree that Rotary shall have the universal right to license use of your photograph, video, and/or other media in order to promote Rotary programs, including grants and scholarships without liability.

### **Sponsor**

By authorizing this report, I confirm that, to the best of my knowledge, these grant funds were spent according to Foundation guidelines and that all of the information contained in this report is true and accurate. Original receipts for all expenses incurred will be kept on file for at least five years, or longer if required by local law, in case they are needed for auditing purposes.

Grant reports and supporting documentation should not include personal data (name, contact information, age/date of birth, health/medical data, or other identifying information) or images of anyone who is not authorizing this report unless (a) it is requested by the Foundation and (b) written consent of the individual (or their parent or legal guardian) is provided to the Foundation. If such personal data is inappropriately included, it may cause delays in the grant process while the Foundation complies with Rotary's Privacy Policy.

I also understand that all photographs, video and other media submitted with this report will become the property of Rotary International and will not be returned. I represent and warrant that I own all rights in the photographs, video and other media, including copyrights, and that all persons (or their parents if they are minors or lack legal capacity) appearing in such photographs, videos and other media have given me their unrestricted written consent to license use of their images/likenesses to Rotary International. I hereby grant Rotary International and The Rotary Foundation (collectively, "Rotary") a royalty-free, worldwide, perpetual, irrevocable license and right to use, publish, print, reproduce, edit, broadcast, webcast, display, distribute, modify, create derivative works from, sublicense and publicly perform, the photographs, video and/or media now or at any time in the future, in Rotary International publications and materials, and for promotional purposes in any form, medium or technology now known or later developed. I represent, warrant and agree that Rotary shall have the universal right to license use of your photograph, video, and/or other media in order to promote Rotary programs, including grants and scholarships without liability.

## AUTHORIZATION SUMMARY

### Primary contact authorizations

Name	Club	District	Status
Ya-Ching Hsu	Taoyuan Li-Te	3502	
Dae Sung Kang	Tongyoung-Hanryeo	3590	

### Sponsor authorizations

Name	Club	District	Status
Ya-Ching Hsu	Taoyuan Li-Te	3502	
Seong Hyun Yoon	Tongyoung-Hanryeo	3590	