EKAM FOUNDATION Annual Summary 2012-2013

There are infinite imaginative possibilities when we allow the freedom to go beyond our perceived limits. If we can dream it, we can build it. Life, through unconditional love, is a wondrous adventure that excites the very core of our being and lights our path with delight.

As we reflect on the last one year, we are only humbled by the truth that what we have done in the field of public healthcare seems so trivial when we take into account the actual situation of infant and maternal health. I am .It is hard to believe that another year has drawn to a close. Last year was a year of a lot of achievements and unprecedented challenges for Ekam Foundation. While we experienced great joy in working in the community, we have remained diligent in our strategic direction and focused on our ultimate goal- Providing the Right to Health for every child. Our faith in the government public health system has increased exponentially in the last year, thanks to the fantastic vision of the Department of Health, Ministry of Health and the NRHM, Special thanks to our Health Minister, health Secretary and Mission Director (NRHM) who are passionate, quick in decision making and wonderful administrators and of course Dr. Srinivasan, State IMNCI Nodal Officer a dynamic, optimistic person with full of ideas and has always been always been there for us at the time of need. We are really lucky to have such wonderful persons and because of whose support we have managed to facilitate some really interesting and fantastic health systems in place.

We are happy that Ekam foundation has played a role in helping some needy children with the health facilities that they truly deserve. But what moves us is the reality that so many fantastic people share our vision of an equitable world of healthcare and are willing to put money behind it, even in the toughest of times. Whilst it has been a tough journey for Ekam this past year, we realize that for every challenge encountered, was a great opportunity to reach out and we have miraculously received help in abundance be it in the nature of governments support, our wonderful donors, our dedicated friends within the medical fraternity, not to forget our volunteers and friends and proved our philosophy of nature always responds to pure intention of need in abundance!! I would like to thank each one of them on behalf of the Ekam family and all those children whose lives have been saved due to these wonderful people.

<u>Vision</u>

To enhance the delivery of the public healthcare system to needy children & mothers and thereby reduce neonatal, infant, child, adolescent and maternal mortality rates.

<u>Mission</u>

To support and improve the Public Health Care System so as to ensure delivery of an appropriate high quality, comprehensive, continuous health care to every neonate, infant, child, adolescent and mother in a respectful, caring and family centred environment regardless of their financial situations

Objectives to Reduce IMR and MMR

- 1. Management of direct health care services in the Government and Community
- 2. Capacity Building Knowledge and Skills up gradation
- 3. Research
- 4. Governance Reforms in maternal & Child Health

Ekam Projects in TN:

1. Management of direct health care services in the Government and Community (12 projects)- 1 Ekam core operating staff

A) Up gradation of Government hospitals on drugs, equipment, labs and manpower services(10 projects)

i) ICH -2 Ekam core operating staff

Our work at the Institute of Child Health continues at a rapid pace. In 2012-2013, we supported 107 children in all, including hospitalization, drugs and other support

	Provided 60 pediatric cots, 40 adult cots and 15 sets of 4-seater chairs to the
hospit	·
	62 staff has been recruited across 13 Departments.
	Donated a Public Address System to the hospital - Costing Rs 98,000 .The
-	m, which comprises an amplifier, microphone and loud-speakers, will ensure that
	nouncements within the hospital premises can be made available to a large public.
	Donated 10 Alpha Beds
	Provided a shelter with seating facilities for patient attendants by the car park near the Main Gate is Supported

ii) SNCU nurse recruitment- 64 SNCUs- 640 nurses

Ekam received approval from the National Rural Health Mission (NRHM) approval to provide preventive maintenance support for all the equipments in all the 44 Sick Newborn care units (SCNU) established in the State by NRHM in partnership with State IMNCI as part of a Public Private Partnership initiative. Funded by NRHM. Signed MOU with State IMNCI in August 2012. Over 90% of the equipments in SNCUs now in working condition.

iii) Equipment maintenance- 30 engineers- 64 SNCUs

With a dedicated helpline, we now are just a call away from sorting out any equipment breakdown related concerns in SNCUs in TN. In all, over 3423 complaints were registered on the Ekam Helpline. With the help of our friends from Sabisu and AMS Solutions, we have solved 3309. 114 cases are still waiting

for approval. We are happy to say that as of today, close to 90% of the equipments in SNCUs across TN are up and running.

Total Complaints registered	3423
Sabisu software	3263
Ekam helpdesk	160
Solved	3309
Not solved	114

- iv) NCD nurses recruitment- 16 districts -954 hospitals 1212 nurses.
 - This year one new project including NBSU nurses recruitment- 114 NBSUs 342 Nurses were recruited
 - vi) Helpline (PWD) identifying the needs -3 Ekam core operating staff

EKAM CHILD HELPLINE STATISTICS

Ekam launched a dedicated patient welfare hotline number 9445922333 in late August to identify the needs of the population. Any child that is identified through our network of regional officers or local partners will be treated and provided the best possible treatment course for the child. We have a team which will not refer children, but will also engage with them on a regular basis. In 2012-13, we registered around 231 people on our helpline tracker. Setting up of the Ekam Helpline - a PPP initiative to attend all distress calls from SNCUs across TN. Around 116 children supported directly or indirectly.

Total Referrals	231
Ekam- Supported	6033
Discharged	1
In the Hospital	1511
Regular Treatment	48
Deaths	39
Government- Supported	24
Discharged	2
In the Hospital	1
Regular Treatment	8
Deaths	
No results	
Other Organization - Supported	

- vii) Resource mobilization (FR) 2 Ekam core operating staff
- a. Mobilizing government funding through helpline- Contingency fund, Government health insurance scheme, PWS /HMS funds .
- b. Private donors support (2 projects)
 - ONGC project, 3 crores
 - viii) This year, Sewa USA project- approximately 10 crores.
 - ix) This year, we condcuetd change Management Workshops for staff (Internal and External) Confluenze. Shailesh Bhandari, CSIM
 - x) Sanitation project with TNHSP

B) BAS project- Community Monitoring and social audit to bring in accountability- 16 Ros- Ekam core operating staff (1 project)

xi) BAS project- Community Monitoring and social audit to bring in accountability

Screening Camps

A total of 1024 children have been identified from screening camps with the help of Doctors from screening camps in. In all, 55 referrals have been treated from the camps, 51 children have been treated at hospitals as Outpatients and 4 as Inpatients.

Total Screened	Referral	IP	OP
1024	55	4	51

xii) PBS- Health Assurance project (1 project)

2. Prajna Knowledge, Research and Teaching Institute and Resource Centres (1 project)

- 3. Capacity Building Knowledge and Skills up gradation (9 projects)-1staff
- a. Youth wing training activities in hospitals JGW event 2 staff
- b. Kancheepuram home based newborn care project 2 blocks 58 volunteers scaled up to entire Kancheepuram district- 4 Blocks, 60 PHCs, 350 VHNs and 1600 field level health workers (2 projects)
- c. AYUSH
- d. NBSU training to the nurses
- e.PALS,NALS,PEMC,SNCU,F-IMNCI,SBA- Neonatal, Pediatric and Obstetric special training to the medical staff.

- f. C-IMNCI, SBA, HBNC, Community Monitoring-Neonatal, Pediatric and obstetric specialty training to the community
- g. SIF project to provide training to nurses in SNCUs and videoconferencing.

h. Ashoka MCH Nutrition Initiative.

4. RESEARCH (9 PROJECTS)- 1 STAFF

- a. UNICEF Projects
- 1. Bottlenecks Identification in Quality Maternal and Child Healthcare 4 hospitals. 2. Assessment of ASHAs in 3 districts- Salem, Krishnagiri and Dharmapuri. 3. Follow up and screening of SNCU graduates on growth, developmental nutritional aspects in collaboration with ICH
- b. Vilupuram project on MCH research

(Including expertise on kitchen garden and cloth sanitary napkins for women designed by Auroville team, Laughter Yoga by Fif, Community dental care by Dr.Jaques, Spirulina by Joss and Music therapy by Ninad) and Governance reforms in 4 blocks- baseline for 3 months followed by implementation for 3 years. (2 projects)

- c. Follow up of Birth asphyxia babies in Dindugal district d. AYUSH
- e. Baseline Assessment of NBSUs along with NRHM and NNF , f. Rapid Assessment of SNCUs in TN.

5. GOVERNANCE REFORMS IN MATERNAL & CHILD HEALTH

- 1. Vilupuram Project (already mentioned in Research)
- **2.** Accenture Project on bringing in best management solutions and governance for Ekam internally and the government hospitals on maternal and Child health externally.(connected through Ashoka). Process documentation-Ram, Priyanshu and Accenture team
- Social Audit for Ekam by CSIM

6. Events:

Funding Events- Ilayaraja's photo cake event- 8 lakhs raised Raised, BOB - 10 lakhs raised This year- Celebrity lunch- 1.85 lakhs Medi melody and International Pediatric conference is planned Other Events- Doctor's day, JGW

- **7. Board rotation -** 6 trustees have resigned in the last one year. 6 new trustees have joined. Currently, 11 trustees.
- 8. We also got enlisted in Give India.

Highlights 2012-2013

	-0
TOTAL SUPPORTED (IP, DRUGS,LAB)	1234
Children Screened	1024
Total Referrals from BAS (Helpline and Camps) (IP+OP)	286
Camp Referrals (IP+OP)	55
Camp IP	4
Helpline IP	231
Total IP Admissions in Pvt Hospitals	120
☐ Discharged	72
☐ Currently in Hospital	34
□ Died	13
☐ Lost to follow up ☐	1
Pending Referrals	135
Drug Support	965
Lab Support	143
IVIG Support	6

FINANCIAL HIGHLIGHTS*

Total Income (Including Donations and Grants: 1, 30, 24,638

Total Expenses: 1,85,01,212.41

Medical Support Given	96,31,582.41
Project	12,10,500.00
Infrastructure Support	3,81,050.00
Equipment Maintenance	34,79,684.00
Events	27,748.00
Admin Expenses	11,54,235
Salaries	26,16,413.00

Income over expenditure - 5476575.37

^{*} Final Audited statements of Accounts are awaited.

Ekam in Maharashtra: Mumbai Pilot Project to date

Ekam team was recruited and put in place in January 2013. Inc consultation with
Government of India, it identified 3 wards Chembur M/E, Govandi M/W & Kurla L
(IMR ranging from 56.7-66.47) to focus on building its presence and commence its
operations.

☐ An advisory team of 8 supporting the Ekam Mumbai team has been formed.

☐ **Children Supported:** The total number of patients treated are 143 with 34 children were operated on and 101 given drug support and 8 were provided lab support.

			Medical	
	Operations	Drugs	Assessment	Pipeline
Jan				
Feb				
Mar	4	6		
April	16	36	62	
May	5	19		
June	2	22		
July	7	18		22
August		194		
Total	34	101	8	22

☐ Hospitals	Covered:
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Public Health Care: All MCGM hospitals

Private Health Care:

□ Fortis Hospital

□ Seven Hills

☐ Holy Family Hospital

 $\ \square$ Kokilaben Hospital $\ \square$

Jaslok Hospital

Capacity Building / Trainings: Training have been conducted with the community on awareness of ANC & PNC

Total Money Spent: 13,00,000

	2011-12	2012-13	2013-14
EKAM ANNUAL EXPENSES (Actuals/Estimated)	Actuals	Actuals	Estimated

Govt. Sponsored Programme Expenses	17,200,000	35,000,000	58,908,400 (37%)
Assured Partners/Projects support (UNICEF, EMW, Rotary, ONGC, Sewa USA)	7,390,218	2,856,481	22,497,000 (14%)
Emergency Medical Relief(EMF) and Administration Expenses	12,000,000	19,837,533	78,300,000 (6.73 cr- EMF-42% and 1.10cr -Admin-6.9%)
Grand Total	36,590,218	57,694,014	159705400
			Admin expenses- 6.9%
EKAM ANNUAL INCOME (Actuals/Projected)	Actuals	Actuals	Projected
	Actuals 17,200,000	Actuals 35,000,000	Projected 58,908,400
(Actuals/Projected)			
(Actuals/Projected) TN State Govt. funding Assured Partners/Projects Support (UNICEF, EMW,	17,200,000	35,000,000	58,908,400

Our exciting journey over the last five years has been made possible only because of the continuous support that people have made into Ekam. Without their encouragement and unshakeable faith in our work, Ekam would not be where it is today. We would like to thank each and every one of you, for having faith in us and our vision.

GIVEINDIA Mandatory Disclosures

Mandatory Annual Report Disclosures

Abridged Balance Sheet

Abridged Income & Expenditure Account

Abridged Receipts & Payments Account or Fund Flow Statement

Discloses the salary and benefits of the Head, the highest paid staff member and the lowest paid staff member of the organization.

Names of Board members and their **position** on the board.

All remuneration and reimbursements to Board members are disclosed. **Even if there is 'zero' remuneration it is placed on record.**

The distribution of staff according to salary levels and gender break up is disclosed.

The total cost of international travel by all personnel (including volunteers) – segregating those incurred on organizational expense and those that were sponsored, along with the name and designation of the person(s) who travelled, and the purpose(s) of travel. **Even if there is no travel it is placed on record.**

1. Abridged Balance Sheet

EKAM 2012-2013 financial details has been submitted to auditor but not finalised.

2. Abridged Income & Expenditure Account

EKAM 2012-2013 financial details has been submitted to auditor but not finalised.

3. Abridged Receipts & Payments Account or Fund Flow Statement

EKAM 2012-2013 financial details has been submitted to auditor but not finalised.

4. Discloses the salary and benefits of the Head, the highest paid staff member and the lowest paid staff member of the organization.

Head of the organization has not received any salary and benefits for the year 2012-13

Head of the Organization	Dr.Sailakshmi	Managing Trustee	ZERO
Highest paid staff	Mr.Byju Kurian	Chief Operation Officer	Rs.6,00,000/- per annum
Lowest paid staff	Mrs.Selvarani	Camp coordinator	Rs.45,000/- per annum

5. Names of Board members and their position on the board.

NO.	NAME	Position	
1	Dr. Sailakshmi	Managing Trustee	
2	Dr. Balaji Sampath	Trustee	
3	Dr. Padmanaba Reddy	Trustee	
4	Mr. Tarun Vij	Trustee	
5	Mr. Jayamani	Trustee	
6	Mr. Anshu Guptha	Trustee	
7	Ms. Meera Menon	Trustee	
8	Dr.Sharada Suresh	Trustee	
9	Mr.K. Pandiarajan	Trustee	
10	Mrs.Hemalatha Rajan	Trustee	
11	Mr. Muthu Krishnan	Trustee	

6. All remuneration and reimbursements to Board members are disclosed. Even if there is 'zero' remuneration it is placed on record.

No Board Members have received any remuneration / reimbursements from EKAM for the year 2012-2013. Please find the details below.

NO.	NAME	Gross Remuneration/		
		Reimbursement PER		
		ANNUM (Rs.)		
1	Dr. Saradha Suresh	ZERO		
2	Dr. Balaji Sampath	ZERO		
3	Dr. Padmanaba Reddy	ZERO		
4	Mr. Tarun Vij	ZERO		
5	Mr. Jayamani	ZERO		
6	Mr. Anshu Guptha	ZERO		
7	Ms. Meera Menon	ZERO		
8	Dr. Sailakshmi	ZERO		
9	Mr.K. Pandiarajan	ZERO		
10	Mrs.Hemalatha Rajan	ZERO		
11	Mr. Muthu Krishnan	ZERO		

7. The distribution of staff according to salary levels and gender break up is disclosed.

Slab of gross salary (in Rs) plus benefits paid to staff (per month)	Male staff	Female staff	Total staff
Less than 5000	0	06	06
5,000 – 10,000	20	25	45
10,000 – 25,000	19	10	29
25,000 – 50,000	02	02	04
50,000 - 1,00,000	0	0	0
Greater than 1,00,000	0	0	0

8. The total cost of international travel by all personnel (including volunteers) – segregating those incurred on organizational expense and those that were sponsored, along with the name and designation of the person(s) who travelled, and the purpose(s) of travel. Even if there is no travel it is placed on record.

There was no international travel made by any staff / board members / volunteers of EKAM Foundation for the year 2012-13.