



# IMPACT EVALUATION REPORT

**Program:** Remedy Mission V

**Location:** Nasiriyah, Iraq

**Dates:** May 14 - 28, 2011

**Surgical Partners:** International Children's Heart Foundation

**Other Partners:** Living Light International, Iraqi Ministry of Health

**Total Children Served:** 20

**Surgeries Provided:** 14

**Interventional Catheter Corrections Provided:** 6

**Cost Per Child in Aid from Int'l Donors:** \$378

The following report was compiled by the Preemptive Love Coalition (PLC) for our donors and other constituents for the purpose of evaluating the impact of our surgical training programs in and across Iraq. In an effort to operate with excellence and transparency in all aspects, this report includes surgical, financial, and training data.

## Summary

In the second week of May 2011, the Preemptive Love Coalition (PLC) brought the International Children's Heart Foundation (ICHF) to Nasiriyah, Iraq - with the help of Living Light International and the Ministry of Health for the Republic of Iraq - for our fifth round of training and surgeries aimed at long-term development for local cardiac care professionals in Nasiriyah.

At the beginning of the mission the local surgeons and the local health directorate asked us to put together a proposal for a year-long, in-country fellowship that would place international doctors and nurses in the Nasiriyah Heart Center for 40-45 weeks to perform continuous teach and surgery.

Over the course of the two-week mission, we provided diagnostic testing to scores of children (exact number unknown) with congenital heart defects, provided six children with minimally invasive corrections via catheterization, and provided heart surgery to 14 children.

The total cash cost of the mission to all partners (including local entities) was \$87,097, with a total cost-per-child of \$4,355.

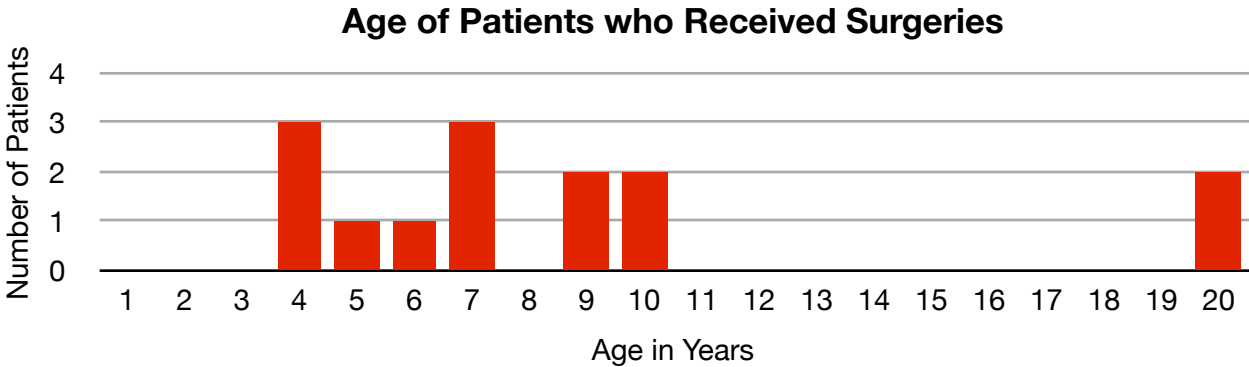
PLC was required to raise \$78,568 to cover all cash costs except local accommodations. After all expenses were covered with aid from our international donors, and upon the completion of surgeries, the Iraqi Ministry of Health made a \$71,000 contribution to the Preemptive Love Coalition, effectively reducing the total cash cost of the mission in aid from our international donors to \$7,568, with a cost-per-child of only \$378.

# Our Patients

After very disappointing results in Nasiriyah during our Remedy Mission III (February 2011) - and similar results in the Sulaymaniyah Center for Heart Disease during Remedy Mission IV (March 2011) - we insisted on a stricter set of parameters for child selection and committed to bring an ICU team to stay behind after the mission with any hospitalized children. Patients were jointly selected by the local medical professionals and the international surgical team from a prepared list. Patients were selected variously on the basis of perceived urgency, time on the waiting list. Unlike previous missions, the difficulty of surgeries was restricted to children with a RACHS-1 score of “two.”

Patient information is recorded for medical purposes on perfusion and anesthesia reports and recorded redundantly into PLC’s own database.

The following chart expresses the age of the patients who were selected to receive heart surgeries during Remedy Mission V.



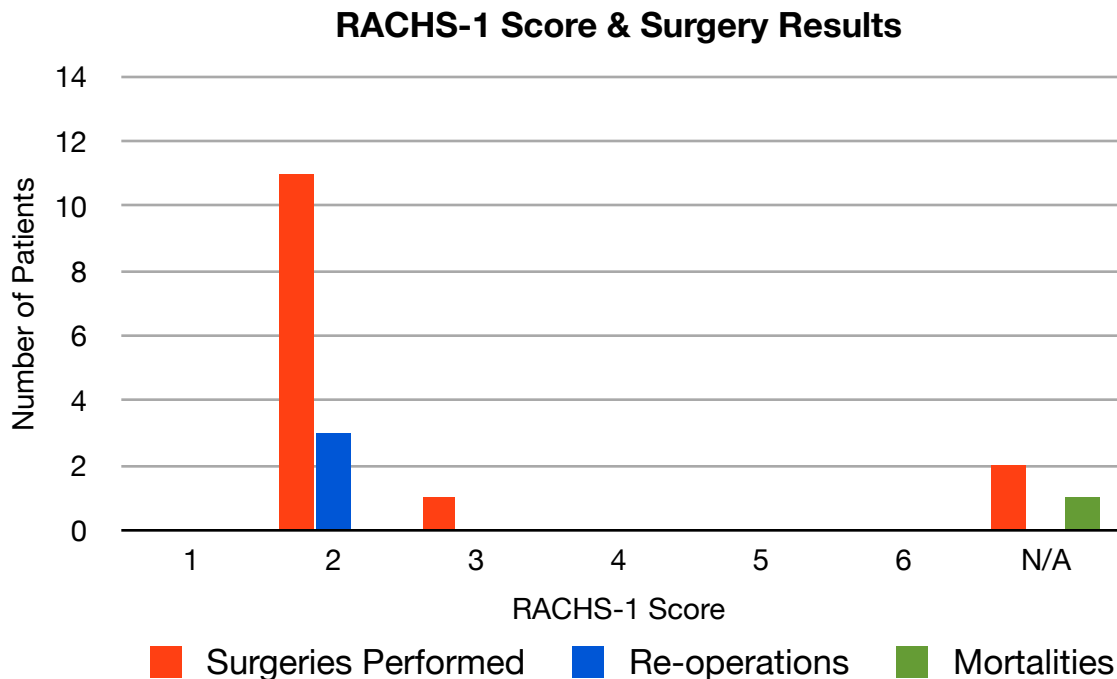
Of note is the one outlier - a 20 year old - who had been suffering from this congenital heart defect since 1991 and, in spite of surviving against the odds through the United Nations sanctions regime, Iraq War, and sectarian conflict of recent years, was still unable to find a program or doctor that would/could accept his family’s plea for surgery until he was of the age that most programs stopped considering him a *child*.

## Risk Adjustment for Congenital Heart Surgery Score (RACHS-1) and Summary of Surgeries Performed

Each qualifying patient is assigned a RACHS-1 (Risk Adjustment for Congenital Heart Surgery) score. This scale allows physicians to rate the risks of mortality for patients undergoing corrective surgery for congenital heart defects. Based upon the type of defect(s) present, a score is assigned from 1 (the lowest risk of mortality) to 6 (the highest risk of mortality). The following chart summarizes relevant surgical data from Remedy Mission V and the number of patients assigned to each RACHS-1 score.

## Complications and Mortalities

All pediatric heart surgeries in world class pediatric hospitals carry at least a 2-10% chance of mortality. Our entire *raison d'être* is predicated on the reality that hospitals in Iraq are even less prepared for these complicated surgeries. They are, therefore, susceptible to higher mortality rates. Of course, the local and international team do not merely accept these complications and mortalities. We publish our results precisely because we are constantly striving for public accountability and trying to attain greater levels of expertise and surgical perfection. We think that your donations - and our claims of success - should be based on real data.



### Re-operations

Three patients had re-operations (not counted in the surgery total).

### Mortalities

There was one in-hospital mortality during the course of the mission which occurred in the ICU.

# Training of Local Staff

This report will not attempt to make claims regarding the long term, macro-development that was wrought through any single surgical mission. We will seek to address macro-development in an annual program report.

However, there are some quantitative data worth noting.

A conservative estimate of total hours of hands-on training that took place during this mission may be calculated as follows:

- 5 int'l surgical team x 16 hrs/day x 12 days in Iraq = 960 hours
- 12 int'l nursing team x 12 hrs/day x 12 days in Iraq = 1,728 hours

We conservatively provided 2,688 hours of hands-on training to doctors, engineers, technicians, and nurses that would not have otherwise been provided without this program. This estimate is extremely conservative, as each international team member often trained up to four local counterparts at any given time.

# Financials

## In-Kind Donations of Supplies, Medications, Equipment, & Time

Each Remedy Mission lasts 14 days, including approximately 2-3 total days for travel, 9-10 total days for surgery, and one day of rest mid-mission. During each mission, our international medical team of volunteers give their time and expertise to develop the local surgical and ICU staff.

The formula we use to calculate the in-kind value of the time volunteered is derived from the American International Health Alliance and the United States Agency for International Development:

- Physicians & biomedical engineers = \$1,275/day
- Nurses & technicians = \$675/day

Total value of time donated by ICHF staff and volunteers = \$202,650

- 5 Physicians/Engineers X 14 days X \$1,275 = \$89,250
- 12 Nurses/Technicians X 14 days X \$675 = \$113,400

Total value medical supplies & equipment donated by ICHF = \$13,392.91

## Financial Partners

Multiple organizations and individuals contribute to cover the total financial cost of each Remedy Mission. While PLC plays a vital role in coordinating, organizing, and executing each surgical mission, we have designed the program so that the majority of the necessary funds come from local, Iraqi sources. This financial report does not attempt to account for "indirect costs," such as the costs to local healthcare systems, the cost of a family to travel to the surgery site, the opportunity costs of lost income for families as they wait for surgery, etc.

That said, the total cost per surgery for Remedy Mission V, including the expenses paid by the local government, was \$87,097. PLC was required to raise \$78,568 to cover all cash costs except local accommodations. After all expenses were covered with aid from our international donors, and upon the completion of surgeries, the Iraqi Ministry of Health made a \$71,000 contribution to the Preemptive Love Coalition, effectively reducing the total cash cost of the mission in aid from our international donors to \$7,568, with a cost-per-child of only \$378.

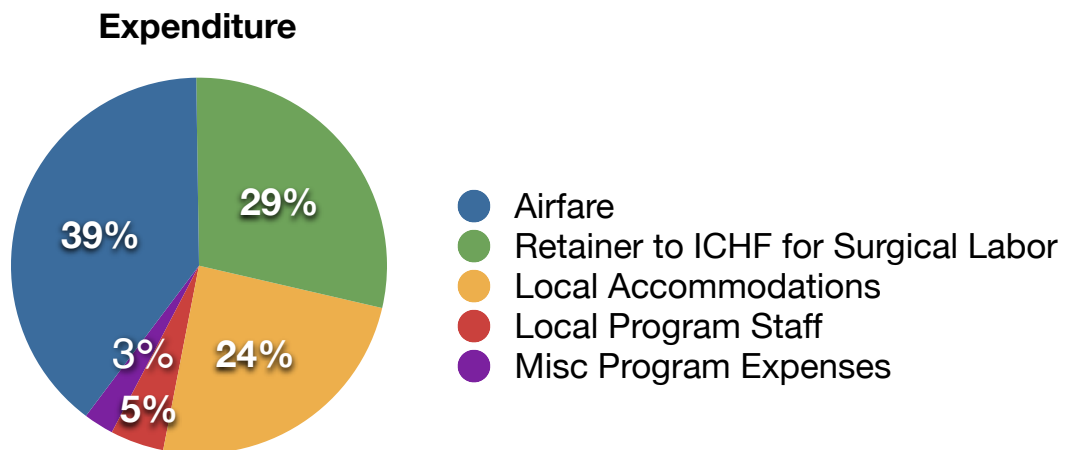
## Breakdown of Expenses

The chart below shows how each dollar was spent to cover the total cash needs of Remedy Mission V.

Expense	Amount	Donor Group
Airfare: ICHF Staff & Vols, PLC Staff	\$41,068	PLC International Donors
Retainer to ICHF for Surgical Labor‡	\$30,000	PLC International Donors
Local Accommodations (Food, Hotel, Transport)	\$25,410†	Health Directorate, Thi-Qar Province, the Republic of Iraq
Local Program Staff	\$4,800	PLC International Donors
Program Expenses	\$2,700	PLC International Donors
<b>Total</b>	<b>\$103,978</b>	

‡ Some organizations demand a strictly volunteer team, but we are unaware of a model in which volunteers alone can run as many missions per year as we require. We accomplish our nationwide goals by paying to secure the personnel provided by ICHF.

† PLC was not privy to the exact amount spent on this item. Amount is derived from per diem recommendations by the United States Government for this area of Iraq.



## List of Donors for Remedy Mission V

Special thanks to the following donors that gave a total of \$16,932 specifically to this project:

Katherine Northern  
Hugh McBride  
Christy Smith  
Katherine Salt  
Sandra Colley  
Sumner Musolf  
Amy Clausen  
Michelle Fisher  
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Rachel Cole  
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Amber Schladoer  
Teresa Anderson  
Chris Taylor  
Lauren Teel  
Michael Ly  
Jeremiah Richter  
Preston Fischer  
Paul Braden  
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Clinton and Amber McCloy  
Gary and Christi Brumley  
Crystal Hammans  
Mario Mattei