



# Health Care Society

**Annual Report 2011**

## **Preface**

**On behalf of Health Care Society, I would like to seize the chance to thank all those who supported our organization to continue and develop its activities and services to help the underprivileged Palestinian community in Lebanon.**

**Since its establishment in the Ministry of Interior in 1997, HCS helped more than 9700 Palestinians in need of surgery or hospitalization, helped more than 6500 people in need of kidney dialysis.**

**There is no doubt that the main challenge for HCS is the continuation of funding for sustainability, especially that Health Care Society is a service provider organization and not developmental. In addition the increase of health problems and the growing of the percentage of the poor people, add a burden on the budget to be able to meet the needs. With reference to the report conducted by UNRWA/ AUB, the number of Palestinians that are poor is 66.4% and 6.6% are extremely poor.**

**During 2011, HCS supported 640 patients in need of surgery or hospitalization, and the expenses were above the budget limit allocated for this project.**

**For the year 2012 HCS will be indulged in renovating the kidney dialysis unit at AL Hamshari hospital, working hand-in-hand with the donors and the generous contributors. In addition to the coordination with UNRWA in the CARE program by which patients are granted extra support for very expensive operations or treatment.**

**Finally, I would like to thank all our partners from other institutions who provide free services through their volunteer social workers in all camps to help in delivering the assistance to the beneficiaries. Also I would like to thank our donor organizations: WA, NPA, and ANERA who supported HCS since the very beginning.**

**Sincerely,**

**Fouad Bawarshi  
President**

## **Health Care Society Annual Report 2011**

### **Foundation and Mission:**

Health Care Society (HCS) was founded legally in the Ministry of Interior in 1997 under the Registration Number AD/156.

Its mission is to improve the health situation of the Palestinian Community in Lebanon by supporting part of the costs of surgery and hospitalization, providing kidney dialysis services free of charge, providing Palestinian hospitals and clinics with medications and medical supplies gratis, and by health awareness activities.

Health Care Society has a commitment towards promoting human rights and accessibility to good health care and services.

## **A- Projects Details**

### **1- Support of Surgery and Hospitalization:**

#### **Description of the project:**

Observing the deteriorating health conditions of the Palestinian refugees in Lebanon, Palestinian activists and members of the “Co-ordination Forum of NGOs Working among the Palestinian Community in Lebanon” came together to form an institution that focuses on ameliorating the prevailing health crisis. Thus, in 1995, Health Care Society (HCS) was founded with the support of Welfare Association and Norwegian People’s Aid. HCS was then registered legally in the Ministry of Health in 1997.

For the setup of this project, local NGOs are donating services of around 40 social workers. This is in an attempt to cut down administrative costs and to channel the money to beneficiaries.

Health Care Society helps beneficiaries in surgical operations and hospitalization in all regions in Lebanon. Beneficiaries fill applications in the appointed centers in the camps aided by the volunteer workers. These files are sent to HCS office in Beirut to be checked and reviewed by HCS staff. Then they are approved and signed by the executive committee which holds meetings every Friday and later signed by the board members (at least 2 members).

Emergency cases are dealt with immediately by the executive director of HCS (with the approval of 2 board members) where contact with the hospital is made for the required assistance.

The financial assistance is addressed to the third party. HCS covers 10-15% of the actual cost, noting that assistance does not exceed 1250\$ for one case. Exceptions are made to

very severe and hardship cases that are entitled for more support reaching \$2500 where the cost of surgery is extremely high, exceeding \$25,000, however this needs approval by the board members.

Following up with beneficiaries, and the pilot evaluation of the project in 2010-2011 revealed the fact that the percentage of support is not enough due to increase in the cost of surgeries and hospitalization. HCS is looking for more funds to be able to increase its contribution per beneficiary.

#### **Objective of the project:**

The aim of this project is to help the Palestinian community with part of the costs of surgery and/or hospitalization. Many Palestinians are unemployed and are not covered by any kind of medical insurance. UNRWA and PRCS have limited budgets and as such cannot sustain the expenses of severe and chronic cases. In addition the Lebanese Ministry of Health refuses to include Palestinians in their health plans, highlighting the importance of our project.

HCS is a humanitarian organization which extends its services to beneficiaries of both genders and all age groups with no discrimination. It helps beneficiaries in achieving their basic need of survival, without which it is impossible for the beneficiaries to efficiently resume their productive, reproductive, and community roles.

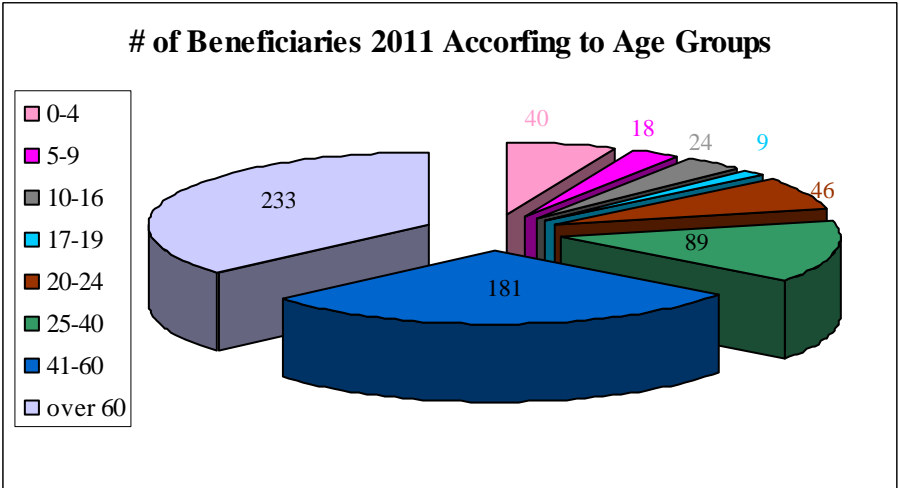
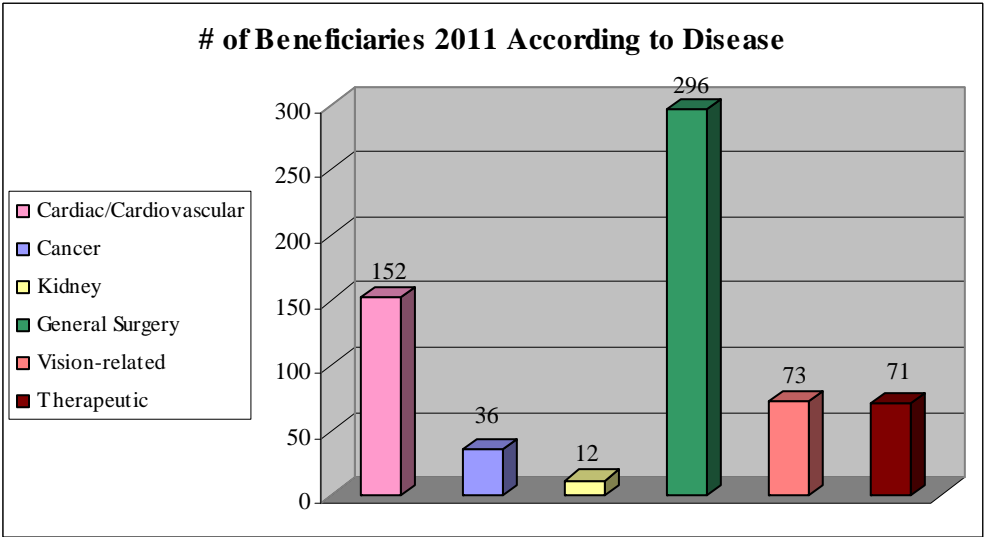
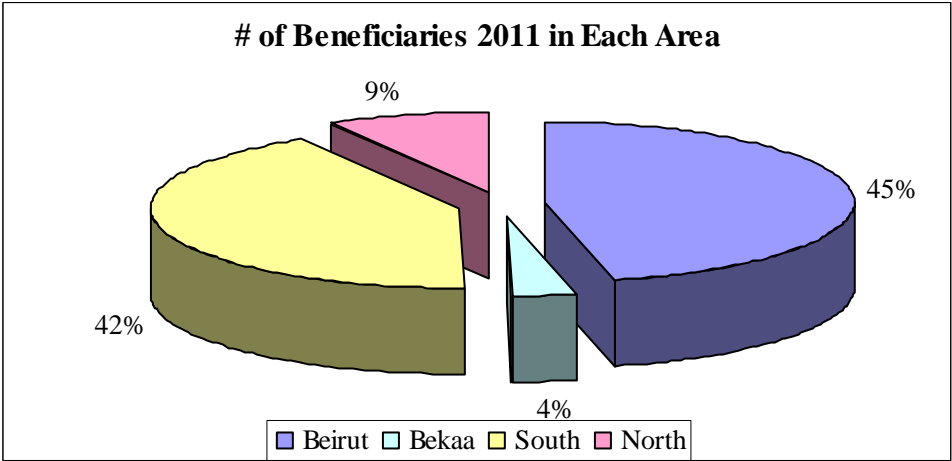
#### **Achievements**

Since its establishment, HCS helped more than **9718** beneficiaries in all regions in Lebanon and for all kinds of surgeries.

For the year 2011 the number of beneficiaries reached **640** and distributed in the table below according to disease.

Distribution of the patients according to disease is:

<b>Type of Disease</b>	<b>Number of Beneficiaries</b>
Cardio- vascular	152
Cancer	36
Kidney problems	12
General surgery	296
Ophthalmic problems	73
Therapeutic /hospitalization	71
<b>Total</b>	<b>640</b>



### **Results**

1. Palestinian refugees with health problems supported with hospitalization/operation.
2. Access to satisfactory hospitalization and medical treatment for underprivileged Palestinian refugees is improved.

### **Indicators**

- The health conditions of Palestinian refugees in Lebanon improved, leading in turn to better socio-economic status and more active role in society.
- Medical treatment and hospitalization is becoming readily available for Palestinian refugees

### **Coordination and Networking:**

1. Collaborating with UNRWA.
2. Coordination with Volunteer Outreach Clinic
3. Coordination with PRCS.

### **Success story**

Mrs. HQ, 50 years old, suffers from kidney failure and she had a kidney transplant 2 years ago, where HCS has contributed with partial support of the surgery. She had to be admitted again to the hospital recently for hospitalization due to infection. Also HCS helped her with partial cost of hospitalization. Mrs. HQ says: "God bless you all. You have indeed saved my life. You supported me like a protective mother when no one was able or willing to do so."

### **Donors for this project**

1. Welfare Association (WA).
2. Norwegian People's Aid (NPA).
3. Late Rifa'at El Nimer Fund.
4. Fund raising activities.





**Executive committee weekly meetings**



## **2- Kidney Dialysis Project:**

### **Description of the project:**

The kidney dialysis center was established in 1996 with efforts of Late Mr. Hussein Al Tabari and still continuing with additional support from generous Palestinian donors through the Welfare Association.

The center is working with full capacity of 16 machines, in addition to 5 machines kept on standby. It is run by well qualified doctors (3) and nurses (7) who work full time to deliver a good quality services and care.

The center provides free kidney dialysis services for around 60-62 patients per month. HCS manages the center directly and provides all the consumable items needed for dialysis such as filters, solutions, blood lines, fistula needles and other supplies. For the year 2011 around **7350 sessions** were performed to benefit **681** patients of both genders (52% males and 48% females). This service is delivered free of charge and it is the only one available for Palestinians suffering from kidney failure.

### **Results:**

1. Kidney dialysis is made available for Palestinian community free of charge. The majority of patients need 3 sessions per week. Hence the importance of this project.
2. Health is improved and lives are saved.
3. As a long term consequence, the socio-economic status is improved and the patients are having an active role in society.
4. Diet is improved for the patients.

### **Indicators:**

1. **680** patients benefited from the project.
2. **7350** dialysis sessions are performed free of charge.
3. **16** dialysis machines run efficiently per session.

### **Achievements:**

1. **105,000** sessions were performed over a 15 year period.
2. **6000** patients were supported by this service since 1996.
3. **8** dialysis machines were installed in 2005.
4. **3** new dialysis machines replaced the old ones in 2009
5. New water treatment machine was installed in 2009 replacing the old one.
6. **2** new dialysis machines also were installed by end of December 2011.
7. Professional exchange with AUBMC in 2007 and with RHUH dialysis unit in 2009 was done to improve the standard of care supplied by staff at Hamshari dialysis center in Saida.
8. Nutrition sessions were conducted by a specialized dietician (2008-2011).

9. Improving performance of nurses conducted by Fresenius Medical care (2010-2011).





**Recommendations in 2012:**

1. Assessing other needs of the dialysis patients such as medications and psychosocial support.
2. Assessing needs of the dialysis center which are not covered yet by the project or any other institution.
3. Rehabilitation of the center.
4. Quality control.



**Dialysis session**





**Installation of 2 new kidney dialysis machines**

### 3- Medical In-kind Donation Program:

#### Objective:

The aim of this project is to provide the Palestinian community with medications according to their needs. Medicines are very expensive in Lebanon and beyond the reach of this marginalized community.

Another important issue is the health awareness that HCS provides with its partners regarding the rational use of drugs including handling and distribution.

#### Background:

The main partner of this project with HCS is the American Near East Refugee Aid (ANERA) which is located in Washington- USA. The project started in 2003 to fill the gaps and needs of the Palestinian community regarding medications.

At the very beginning HCS used to receive 2 to 3 shipments per year supplying commonly used medications mainly for cold and cough in addition to vitamins and minerals. Now HCS is receiving 7-8 shipments per year of very useful and expensive medications for hypertension, cholesterol, mental illnesses, etc.

It is very important here to note the close coordination between HCS and Sandouk Al Zakat, where the latter acts as a consignee.

The main recipient partners of the medications and medical supplies are:

Name of recipient organization	Percentage received
Sandouk Al Zakat (SZ)	20%
Palestinian Red Crescent Society (PRCS)	20%
Human Call Association	16 %
Al Shifaa clinic	12%
Biet Atfal Assomoud	8%
Popular Aid for Relief & Development (PARC)	8%
Volunteer out-reach clinic (VOC)	6%
Dar Al Ajaza	3%
Child & Mother Care Association	2%
YMCA	5%

#### Activities

- Product Donation Offers of medicines are sent to ANERA/HCS, and are reviewed by the consultant pharmacists at ANERA and HCS for screening the medicines if they can be used in Lebanon and accepted by Ministry of Health, expiry date and side effects, etc
- Recommendations are made by the consultant Pharmacist, and offers are sent to the recipient partners who in turn accept (designating quantities also) or refuse the medicine according to their needs.

- After the container is filled with the needed medications, as well as medical supplied, the HCS pharmacist must sign an approval form for the whole shipment, which then needs 3-4 weeks to arrive to Beirut port.
- Some medications are sent by air, mostly due to their urgent need, or due to their short expiration dates (exp. 8 months).
- The executive director of HCS allocates the items and quantities needed by recipient partners based on previous offer acceptances. Each partner picks up his share and signs a receipt of the items.
- After all items are distributed HCS provides the donors, ANERA, AmeriCares, Direct Relief International and MAP International with the distribution grids. Sandouk Al Zakat also provides us with the distribution grid of their sub-recipient organizations as well.

#### **Top ten medicines shipped (2010 & 2011)**

- Respiratory
- Gastrointestinal
- Immunity suppressant.
- Mouth & throat
- Anti-allergic
- Analgesic
- Cardio-vascular
- Vitamins
- Solutions (normal saline, dextrose, etc).
- Dermatological
- Psychotherapeutic

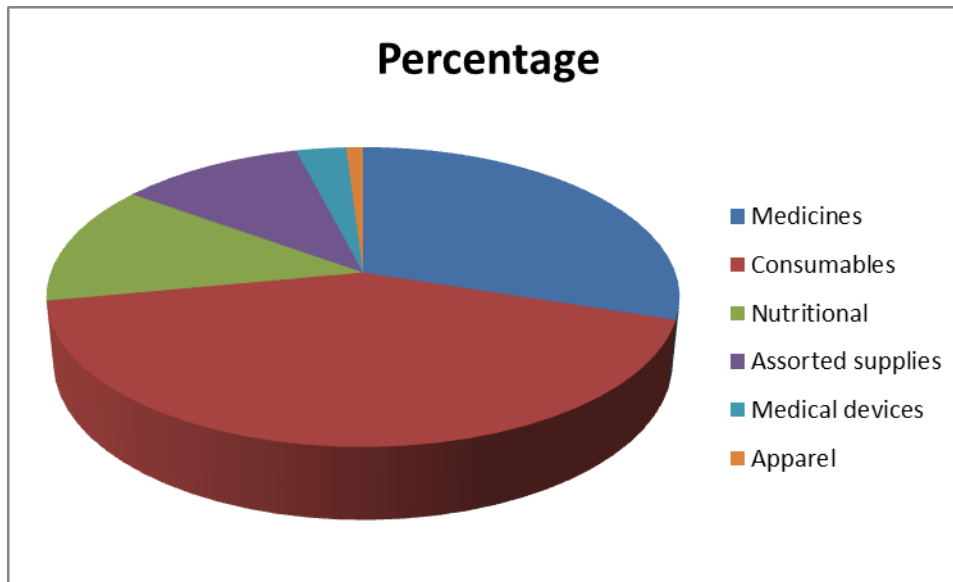


**Receiving of shipments at warehouse**



**Product composition shipped:**

Item	Percentage
Medicines	30%
Consumables	42%
Nutritional	13 %
Assorted supplies	11 %
Medical devices	3 %
Apparel	1 %

**Achievements:**

- Receiving greater quantities of medications for chronic diseases such as hypertension, diabetes, cholesterol, asthma, kidney transplant, mental illness, etc.
  - Receiving 7-8 shipments per year.
  - Increase in the number of organizations offering donations to our society.
  - Assessments of needs since 2008.
  - Conducted 4 workshops on raising awareness regarding the rational use of medicines and its harm.
  - Raising awareness regarding the use of antibiotic.
  - The number of beneficiaries increased with the increase of needed medications.
  - Creating a forum for exchange of medicines among our partners.
- Capacity building of the partners on handling, dispensing and disposing of medications. In addition the medication storage facility was upgraded by the installation of air conditioning unit, purchasing of closets with locks, etc.

**Impact indicators**

More medicines are being donated according to needs and are made available to the underprivileged in all regions in Lebanon.

**Constraints and difficulties:**

- The main problem confronting HCS regarding the In-kind program is the expenses. In 2009 the value of 7 shipments was USD 7,098,000.00 and the expenses of release and clearance at Beirut port and demurrages were USD 23,530. The value of the shipments received in 2010 was USD 12,021,000.00 and the expenses of release were USD 12,281.00. In 2011 expenses reached USD 25,131.00.
- Changes in regulations and laws and procedures enforced by the Ministry of Finance, like paying insurance of 5% of the value estimated by Beirut Port Committee, refundable but on long-term basis, add a burden on the expenses and the storage of medicines that cannot be evaded.
- Some offers are lost due to time limitations, whereby recipient partner respond beyond the time limit allotted by the donor due to bureaucratic delays.

**Recommendations in 2012:**

- Coordination with partners and beneficiaries on the Rational Use of Drugs.
- Fulfilling the physical needs of the recipient partners according to pre-need assessment.
- Coordinating closely with UNRWA regarding the needed medicines.
- Proper tracking of dispensed medicines.
- Impact evaluation of the project.



Field visits of recipients for follow up of medications



**MIKP workshops**

## **Administrative Issues**

The General assembly met on 26 Feb, 2011 to elect the new board members and to review the budget of HCS for the 2 years 2010 & 2011 and to discuss its achievements and the importance of continuity of the implemented projects.

The new elected members are:

Mr. Fouad Bawarshi as President

Mrs. Wafa Al Yassir as Vice- president.

Mr. Rami El Nimer as Treasurer.

Mr. Kassem Aina as Secretary & Head of Executive Committee.

Dr. Muna Khalidi as Consultant

Dr. Sawsan Abdulrahim as Consultant.

Ms. Leila Zakharia as Concultant.

### **Recommendations:**

1. An expert in fundraising activities must be hired due to the importance of this position.
2. General Assembly members should be more involved for the welfare and institutional sustainability of the organization.
3. Hiring more staff, as administrative staff are few in number and cannot cope with the needs of this evolving and growing organization.
4. Evaluation of the Medical In-kind Donation Program and its impact on the society. At a later stage a pharmacist should be hired in order to coordinate the project.

## **Financial Issues**

### **A- Financial Resources:**

#### **1-Donor: Welfare Association (WA)**

- HCS signed a grant agreement with WA for the surgery project 2011 in the amount of **USD 110,000.00**.
- HCS signed a grant agreement for the kidney dialysis project 2011 in the amount of **USD 200,000.00**.
- HCS also signed an exceptional agreement with WA to purchase 2 kidney dialysis machines in 2011 in the amount of **USD 38,000.00**.
- HCS signed a grant agreement with WA for the Care Program with UNRWA for severe cases in the amount of **USD 50,000.00**. This project was effective from 1<sup>st</sup> September 2011 for three years.

#### **2- Donor: Norwegian People's Aid (NPA)**

- HCS signed a grant agreement with NPA for the surgery project 2011 in the amount of **USD 59,214.00**

#### **3- Donor: Late Rifa'at El Nimer Fund**

- HCS is granted financial support for its activities mainly the project concerning surgery, from the Late Rifa'at El Nimer Fund in the amount of **USD 50,000.00**.

#### **4- Donor: American Near East Refugee Aid (ANERA)**

- HCS signed an agreement with ANERA for the Medical In-kind Donation Program. In 2011 HCS received 7 shipments the value of **USD 12,000,000.00** (according to the value in USA).
- ANERA donated **USD 15,000.00** for release of shipments.

#### **5- Membership Fees**

- Every member of Health Care Society pays a fee of 100,000.00 L.L. per year which amounts to a total of 5,000,000.00 L.L.

#### **6- Contributions of Social workers**

- This estimated at about **USD 8500.00**.

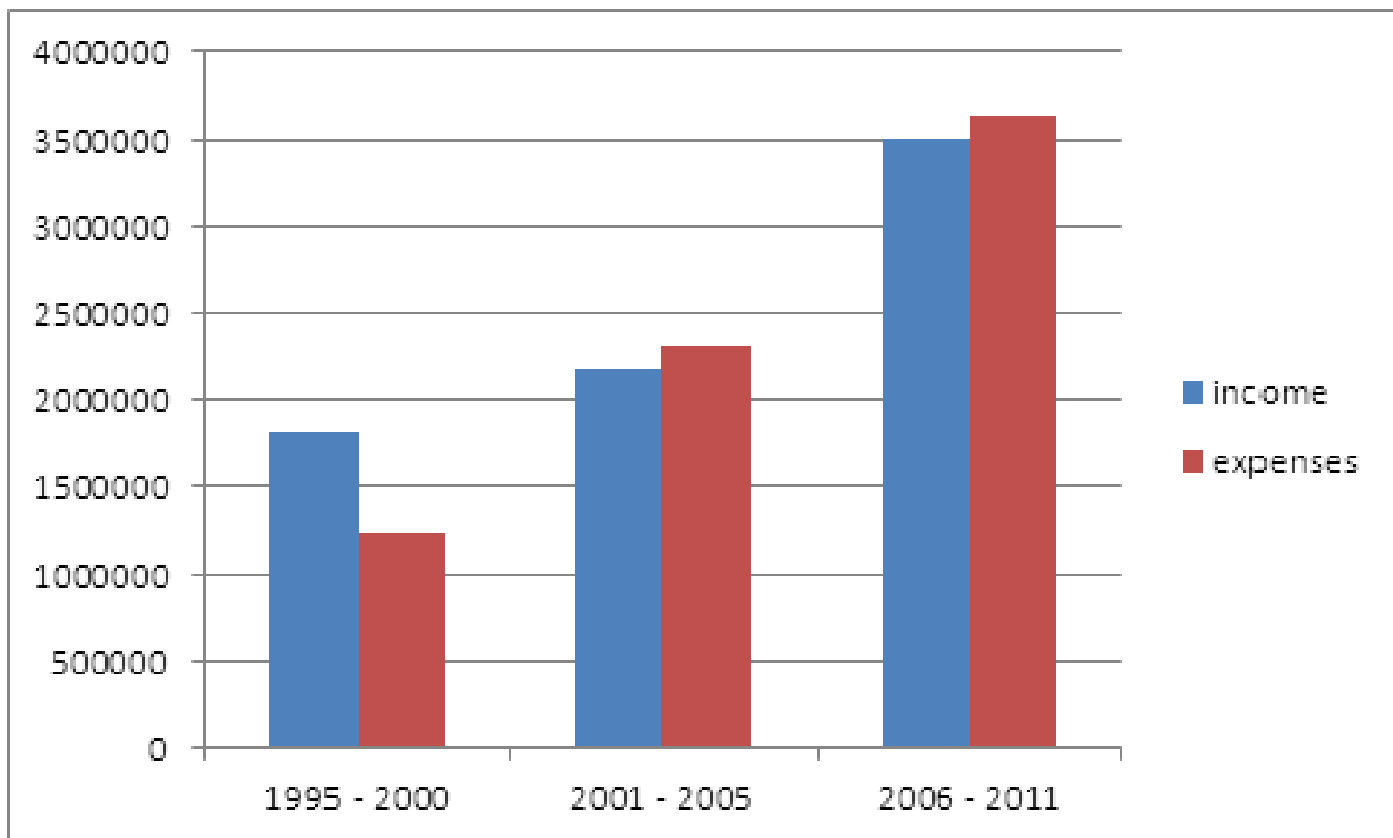
#### **7- Individual contributions**

- **40,670.00\$**.

#### **8- Fund raising activities:**

- Lunch event in Debbieh where friends of HCS and their families enjoyed, lunch and games. It was rather a friend- raising than fund raising.
- During the Holy Month of Ramadan, HCS conducted an Iftar event where more than 350 people attended the event in Metropolitan Palace Hotel.
- The board members represented by the president, Mr. Fouad Bwarshi, honored the Late Dr. Samih Alami for his efforts to improve the health situation of the Palestinian community.
- Also the board acknowledged Dr. Miguel Abboud for his efforts in helping Palestinian children suffering from cancer and blood diseases.
- HCS collected **USD 67,350.00** in the Iftar event allocated to any activity.

HCS started its activities with minimal budget not exceeding **USD 14,000** that was harnessed with the hearts and souls of the community to reach **USD 570,000** in 2011.





**Labor's day event in Debbieh.**





**Entertaining children in Debbieh**



**Acknowledging social workers on Labor's day.**

**HEALTH CARE SOCIETY  
BALANCE SHEET  
FOR THE PERIOD ENDED Dec 31, 2011**

	<b><u>2011(USD)</u></b>
<b>ASSETS:</b>	
Cash and cash equivalents	191,684.47
Automobile/Vehicles	17,483.00
Less: Accumulated Depreciation	<u>(7,575.73)</u>
Net/ Automobile	<u>9,907.27</u>
<b>Total Assets</b>	<b><u>201,591.74</u></b>
<b>Liabilities &amp; Fund Balance</b>	
Promissory note	15,000.00
Balance at beginning of year	215,584.51
( Deficit) for the period	<u>28,992.77</u>
Ending balance 31/12/2011	<u>186,591.74</u>
<b>Total Liabilities &amp; Fund balance</b>	<b><u>201,591.74</u></b>

***Income Statement for the period 1.1.2011 to 31.12.2011***

	<b>2011(\$)</b>
<b><u>Income:</u></b>	
Welfare Association	348,073.00
NPA	59,214.00
Refaat El-Nimer Fund	50,000.00
ANERA	15,000.00
Individuals	40,670.00
NGOS ( Lebanon)	8,666.33
Members subscription	4,065.26
Fund Raising	38,683.00
Other Income	5,943.00
<b>Total Income</b>	<b>570,314.92</b>
<b><u>Expense:</u></b>	
Cardiac and vascular diseases	54,275.00
Cancer	16,322.00
Kidney	225,781.80
General surgery	113,833.00
Nerves & psychological	2,201.00
Eye	15,022.00
Other medical exp.	43,111.00
Unpaid medical Support (Promissory Note)	15,000.00
Monthly support for chronic cases	20,200.00
Administrative & running Expenses	59,916.02
Other Expenses	33,645.87
<b>Total Expense</b>	<b>599,307.69</b>
<b>Balance for the year 2011 ( Deficit)</b>	<b>28,992.77</b>

**HEALTH CARE SOCIETY  
STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED DECEMBER 31, 2011**

	<b><u>2011(\$)</u></b>
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>	
Cash received from Welfare association	348,073.00
Cash received from Norwegian People's Aid	59,214.00
Grants from Refa'at El-Nimer family Fund	50,000.00
Cash received from ANERA	15,000.00
Individuals Donations	40,670.33
Contributions from NGO's Staff	8,666.33
General Assembly annual subscriptions	4,065.26
Proceeds from Fund Raising	38,683.00
Other Income	5,943.00
Cash paid to Hospitalization Support	249,175.00)(
Cash paid to Monthly chronic cases	20,200.00)(
Cash paid for mental cases medications	2,201.00)(
Cash paid to Kidney Dialysis Center-hamshari	219,169.80)(
Administrative Expenses	(59,916.02)
Fund Raising Expenses	(2,617.50)
Medical In Kind Donation Expenses	(25,131.77)
Other Expenses	(2,400.00)
<b>Net ( Decrease) in cash</b>	<b>(10,496.17)</b>
<b>Cash and Cash equivalents at beginning of year</b>	<b><u>202,180.64</u></b>
<b>Cash and Cash equivalents at End of year</b>	<b><u>191,684.47</u></b>





**Honoring Late Dr. Samih Alami during Iftar event 2011**



**Acknowledging Dr. Miguel Abboud during Iftar event 2011.**

