

Preface

Letter from the President

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 9500 Palestinians in need of surgery or hospitalization, helped more than 6000 people in need of kidney dialysis, and more than 300,000 benefited from its in-kind donations of medications and medical supplies.

For the year 2009 HCS implemented health education program based on nutrition and healthy diet as a preventive issue. More than 300 patients suffering from Diabetes, cardiovascular diseases, cholesterol, hypertension, kidney failure...etc benefited from this program. It continued in 2010 and hopefully also in 2011.

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 2010, HCS supported 686 patients in need of surgery or hospitalization, and the expenses were above the budget limit allocated for this project.

Furthermore, HCS worked on "sponsoring a patient" project to support Palestinians with chronic diseases that are not covered by any institution such as kidney transplant, MS disease, cancer.

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,

Rami El Nimer

President

Health Care Society

Annual Report 2010

Executive Summary

Health Care Society (HCS) was founded legally in the Ministry of Interior in the year 1997. Its mission is to support the Palestinian Community in camps and gatherings in Lebanon to improve their health situation by providing them with part of the cost of surgery, hospitalization, and medications, and by providing them with free kidney dialysis services. HCS works to raise awareness through health education sessions for the community.

Health Care Society is committed to promotion of human rights and the right of all people to have access to good health care.

During 2010, HCS continued implementing the projects in the following areas:

1. Support of Surgery and Hospitalization.
2. Kidney Dialysis.
3. Resuming the Kidney transplant monthly support.
4. In-kind Donations of Medications & Medical Supplies.
5. Health Education.

Surgery project:

Objective

The aim of this project is to help the Palestinian community, who are in need of surgery or hospitalization, in part of the cost of the surgery. Many Palestinians are unemployed and are not covered by any kind of medical insurance. UNRWA and PRCS have limited budgets and can not cover all cases especially severe and chronic cases. In addition the Ministry of Health refuses to include Palestinians in their health plans, hence the importance of our project.

Activities:

Health Care Society helped beneficiaries in surgical operations and hospitalization in all regions in Lebanon. Beneficiaries fill applications in the appointed centers in the camps by volunteer social workers of other Palestinian NGOs, and 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).

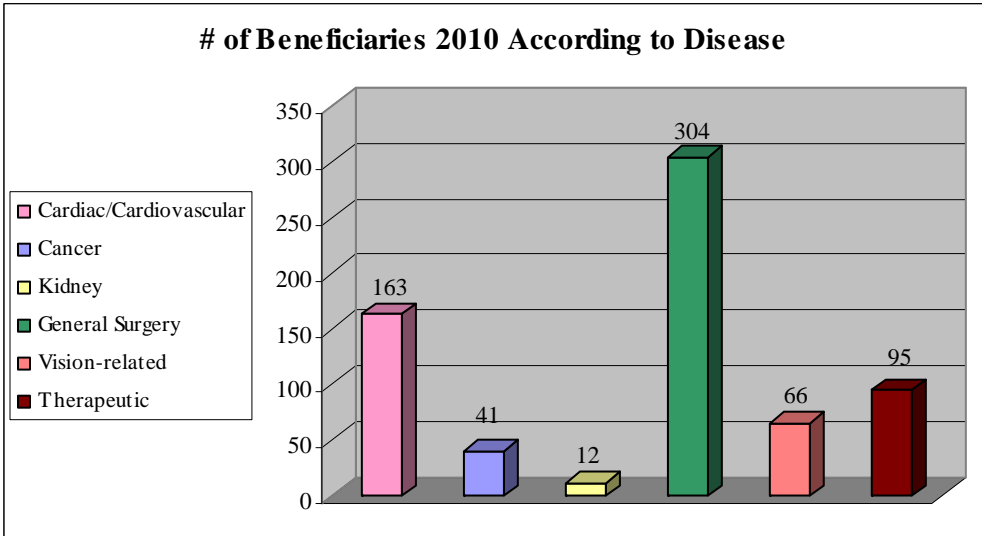
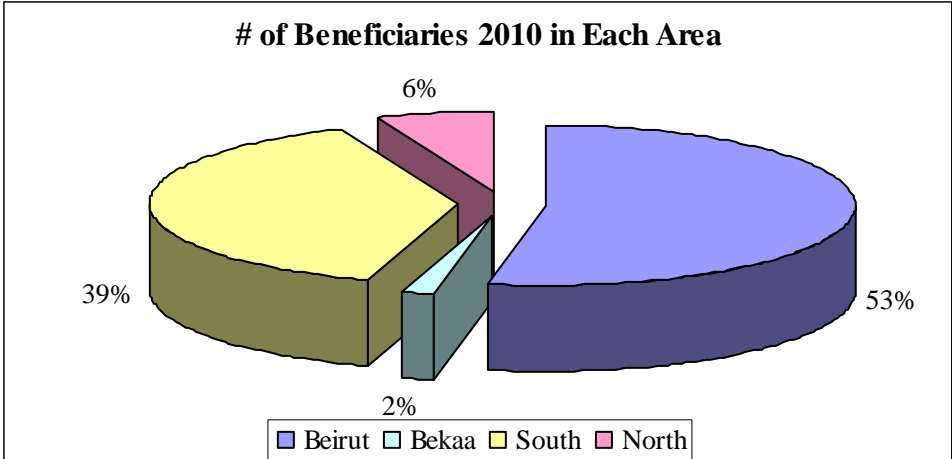
Emergency cases are dealt with immediately by the executive director of HCS where contact with the hospital is made for the required assistance.

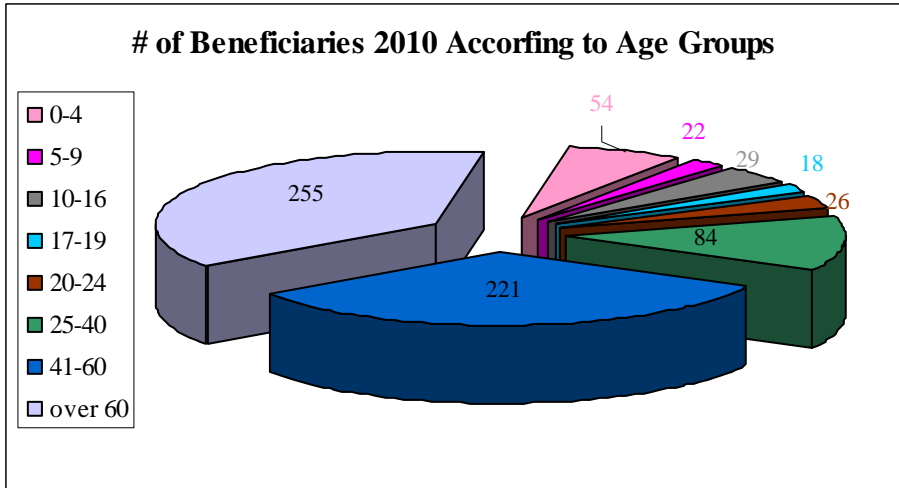
The financial assistance is addressed in the name of the hospital. It ranges between 10-15% of the actual cost, noting that assistance does not exceed 1250\$ for one case. But some very severe and hardship cases are entitled for more support (more than 1250\$) where the cost of surgery is extremely high (more than 25,000 \$) upon approval of board members.

For the year 2010 the number of beneficiaries reached 686 and the cost was above the budget limit allocated for surgery.

Distribution of the patients according to disease is:

Type of Disease	# of Beneficiaries
Cardio- vascular	163
Cancer	41
Kidney problems	12
General surgery	310
Ophthalmic problems	66
Therapeutic /hospitalization	95
Total	686





HCS helped 6 handicapped children that are in need of dental surgery. This activity was a co-operation between PRCS (Haifa Hospital) HCS and Palestine Children Relief Fund (PCRF). Doctors from USA volunteered to perform the operations along with Palestinian and Lebanese volunteer dentists. It started in October 2010 by screening of handicapped Palestinian children in all camps in Lebanon of ages 3-13 years. Only 6 children were able to be operated on, out of the 24 who were screened, the rest were not able to tolerate the anesthesia due to health problems like Thalasemia, bronchitis...etc.

The tools needed were offered by Gulf for Good to PCRF, HCS covered the cost of operation at Haifa hospital, at the end of the mission, upon an agreement made between PRCS, PCRF and HCS.



Dental surgery for handicapped children



Evaluation of Surgery Project

This project aims to obtain HCS's (health care society) beneficiaries' feedback; illustrating the long term impact & significance of the financial support & facilitation the project has provided for surgery, hospitalization and chronic cases for the participating patients in the program throughout the past 10 years.

Results:

- Participants who were interviewed, or who filled questionnaires, nearly unanimously agreed that present coverage of the HCS helps in partially relieving their financial load and debt distress, most especially that endowment was a granted sum, which will not eventually turn into an additional burden to reimburse. However, it is to be noted, that all participants have insinuated that the current endowment is very minimal with reference to the total due amount.
- Other alternatives that most of the participant usually carry out is seeking an inferior quality of medical care, postponing or getting no treatment, and contacting other NGO
- 78 % reported that there was no delay in processing their application, which reflect a relative satisfaction among beneficiaries regarding the application process
- Participant's have mainly requested the following:
 - 26 % of the participant asked for an Increase in the percent of coverage in order to avoid having to contact several NGO's and having to go through debt stress
 - 15 % requested medication expenses coverage
 - 9% Asked for contribution in medication and increase in endowment
 - 4% Cases follow up
 - 30 % express thanks for HCS for its support

HCS Recommendations:

- Consider each case individually
- Increase % of coverage of operation cost or give 15% regardless of UNRWA support
- Follow up for patient after surgery
- Repeat the questionnaire on a larger scale in order to get a more accurate result and feedback



Evaluation meetings

Kidney dialysis project:

Donor: Welfare Association (WA)

Budget per year: USD 200,000

of beneficiaries: 60-62 patients per month

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 WA.

The center is working with full efficiency of 16 machines, and 3 machines are kept as 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, like filters, solutions, blood lines, fistula needles and other supplies. For the year 2010 around 7200 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 the Palestinian community.





Results:

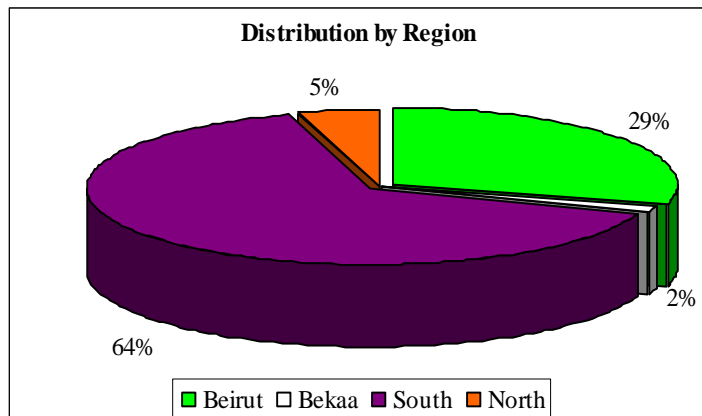
1. Kidney dialysis is made available for Palestinian community for free. The majority of patients need 3 sessions per week. Hence the importance of this project.
2. Health is improved and lives are saved.
3. For the long term socio-economic status will be improved and the patient can have an active role in the society.
4. Diet is improved for the patients.

South 64%

Beirut 29%

North 5%

Begaa 2%



Capacity building of staff:

There was a professional exchange with doctors from PRCS kidney dialysis center and Rafiq Harir University Hospital. It was a grant from the NLRC to PRCS (directly). This training started in 2008 at AUBMC with a grant from NPA, WA and NLRC.

In addition a volunteer registered nurse at Fresenius Medical Care is starting evaluation of the performance of the nurses at the dialysis unit. She came up with some recommendations and changes. The report will be sent soon when ready.

Comments:

In 2009 HCS celebrated the success of Billal Aslan in the Bac II and this year he gained a diploma degree in accounting and administration, but unfortunately he was not able to join the University because he can't pay the tuition and is looking for a job.

Kidney transplant

HCS has undertaken needs assessment for kidney transplant patient, since it is committed to fill some gaps and needs that are not yet met. Hence, during its fundraising Iftar event in Ramadan, HCS was granted some financial support for those patients to assist them with some of the cost of medications and lab tests and medical consultation. We heartily thank all those who contributed during and after this event.

This project was realized in accordance with the recommendations of the Public Health committee to extend on the kidney failure issue.

We started to support 20 patients with money monthly support in all regions in Lebanon of both genders, 70% are males and 30% females, and of all ages.

In addition we got some medications from our project with ANERA, the MIKP, Cellcept, for the kidney transplant. Around 16 patients, who are on this medication benefited from it.

Quoting:

Huda Heesh 23 yrs old female said: "God bless you. We can not thank you enough for your support that was heaven given. We thank all those generous people who contributed for the kidney transplant patients. You are the only one to help us."

Medical In-kind Donation Program

Donor: ANERA

No. of Shipments: 7 shipments in 2010

Value of Shipments: 12,954,021.87 USD

No. of Beneficiaries: + 150,000

Objective:

The main objective of this project is to provide both, Palestinian and Lebanese, with medications according to their needs. Medications in Lebanon are very expensive and beyond the reach of the marginalized communities.

Another objective is to educate the people and the health workers to understand the rational use of drugs for their wellbeing.

Activities:

Activity 1: mechanism of receiving and distribution of Medicines

ANERA, HCS partner in USA, through AmeriCares, and DRI and others, provide our organization with medications and medical supplies. During 2010 HCS received 7 shipments by sea. HCS made an agreement with Sandouk Al Zakat/ Dar Al Fatwa, where the latter acts as a consignee. The shipments are shared between HCS and SZ.

Shipments arrive in Gezairi warehouse where they are checked by HCS and distributed according to the needs of each organization that check all items and quantities needed at their centers prior to the arrival of the shipments.

HCS distribute its share among the NGOs working for the Palestinian community in the health sector according to their needs. In addition, we receive a report from Sandouk Al Zakat of their distribution.

Recipients of these shipments are:

- Sandouk Al Zakat.
- Palestinian Red Crescent Society (PRCS)
- Volunteer out-reach clinic (VOC)
- Al Shifaa clinic
- Beit Atfal Assomoud (BAS)

- Popular Aid for Relief and Development (PARD)
- Dar Al Ajaza Al Islamiyyah
- Human Call Association
- YMCA
- Child and Mother Care Association

This year we have cut down on expenses of release of shipments, thanks to YMCA, since 3 shipments were received thru them without having us to pay for the expenses.

Shipment #	Value in USD	Expenses in USD
AC009539	5,199,988.54	3150
AC010552	4,053,573.10	4272
AC011710	1,117,031.23	4499
* AC012415	500,000.00	0
* SN2010119	31,429.00	0
* AC00751	1,252,000.00	0
80009477 + 80009478	800,000.00	10,939.00
Total	12,954,021.87	22,860.00

It is important to note that staff from AmeriCares and ANERA from USA visited Lebanon to meet with the recipient partners and end beneficiaries as evaluation of the program. They were impressed by the work and efforts done by HCS and the partners. They will always work on meeting the needs of the community. HCS has signed an agreement with AmeriCares, for the first time, similar to that signed by HCS/ ANERA to assign responsibilities and duties of each. They had some remarks and recommendations for reporting and auditing of the project of the recipient partners which in turn will be followed up by HCS staff.

*HCS did not pay expenses for the 3 shipments since consignee was YMCA which is contracted with MoH.

HCS also renewed the agreements with ANERA and also with S.Z. and the recipient partners.. Reports on distributions by S.Z. and the other partners are requested regularly.

Activity 2: rational use of drugs

HCS continued its meetings with ANERA and the recipient organizations to elaborate on the med sense that started in 2009. The final draft is finished and ready for print.

The med sense is a small booklet that takes into consideration all aspects of the harm and the good and the proper use of medicines and answers almost all questions that the community should be entitled to know.

Comments and recommendations:

ANERA and HCS' partners worked on the rational use of drugs for the health workers.

For the year 2011 HCS will develop a questionnaire addressed to the beneficiaries themselves, to obtain their feedback about the quality of medicines they are receiving and quantities and type of medicines. When the study and evaluation of the project is done it will be sent to all recipient organization and to the donor AmeriCares/ ANERA, for better understanding of the needs and to improve the quality of services.



Preparatory meeting to develop med sense

Health education

Health care society HCS contacted the beneficiaries of the year 2009 who participated in the evaluation meetings and invited them to attend health awareness sessions, session time, place, and day was reconfirmed in another call. We worked with beneficiaries first from Shatila Camp.

Participants were asked if they prefer to discuss and inquire about a specific subject of interest to them, instead of imposing a subject that they already know. Based on this concept, topics covered were:

- Brief description of the food guide pyramid, main food groups & the benefits of each group
- Commonly used herbs like mint, chamomile & its benefits (based on participants demand)
- Dietary recommendations for cardiovascular diseases (based on participants demand specially those who have done a CABG, or an open heart surgery)

The plan for the year 2011 is continue the sessions with the HCS beneficiaries in Shatila, and to contact beneficiaries in Burj el Barajneh, and Ain el Helweh. Also HCS is planning to target participants who were not contacted before; with the help of the volunteer social workers of other NGOs. Topics to be covered will include healthy eating guidelines, Diabetes education, and other topics of concerns for the participants.

Administrative Issues

The 3 committees that were formed during the GA meeting in 2009, (PH, fundraising & advertising, medical & pharmaceutical committees) met several times in 2009 and 2010 in addition to the board members meetings. Several recommendations were taken and followed by HCS staff.

The General Assembly meeting is set by the board members on 26 February 2011 where new board members will be elected and renewal of the registration of HCS in the Ministry of Interior will follow in addition to important issues to be discussed for the development of HCS.

Executive committee continued its weekly meetings on Fridays to review and approve the files of patients.

Networking & Co-ordination

- HCS participated in more than 5 coordination meetings with UNRWA health field office conducted by Mr. Salvatore Lombardo, the Director of UNRWA Affairs in Lebanon, and organizations working in the health sector. The purpose of the meetings is to address the needs of tertiary care and the services provided to the Palestinian community. Recommendations that were agreed on:
 1. Coordination mechanism between UNRWA and the assigned NGOs for the patients' request.
 2. Reinforce partnership and networking in the areas in which the health services to the Palestinian community can be significantly improved. For the year 2011 UNRWA will be working on the elderly with other NGOs.
 3. Sharing information and establishing an e-mailing list.
 4. Find a mechanism on how to prevent hospital mal abuse of the patients.
- Coordination with other NGOs who are recipients of the MIKP, where HCS signed MOU with each partner to facilitate the work and to assign duties and responsibilities of each.
- Coordination meeting and workshops with ANERA and recipient partners on the rational use of drugs.
- HCS participated in my conferences on Palestinian rights, children's rights, on right of return..etc
- Participated n health campaign conducted by ANERA at AUB.

Capacity Building of Staff

- HCS participated in a workshop on health informatics which discussed the importance of information gathering to improve the services. It was conducted by "Lebanese Medical Informatics Association".
- HCS participated in a conference conducted by FHS at AUB on "reproductive health: needs and gaps".

Financial Issues

Financial Resources:

In 2010, HCS signed 2 agreements with WA for the kidney dialysis project and the support of surgery project in the amount of USD 310,000, and one agreement with NPA for the surgery project and health education in the amount of USD 72,000.

HCS receives an important grant from the late Rifa'at El Nimer Fund the amount of USD 50,000 / yr. Another income for HCS comes from the GA membership which is 100,000 L.L. /yr, individual contributors, and the contributions of the employees of other organizations, where they pay 2000 L.L / month of their salaries.

Fundraising activities:

HCS conducted a successful Iftar event during the Holy month of Ramadan, in Metropolitan Palace Hotel. More than 360 persons attended the event. As it is well known, HCS acknowledged Mrs. Intissar Abu Khadra for her long assistance and commitment to the Palestinian community in Lebanon.

Dr. Zuhair Alami covered all the expenses at the hotel as he always does. We can not thank him enough for his generous continuous support.

In addition HCS worked hard to develop its web site and to print reports and pamphlets to sponsor a patient which were all part of its fundraising activities recommended by the Fundraising and advertising committee.

All proceedings of the activities went to support the kidney transplant patients to help them buy medications and to perform lab tests...etc.



Honoring Mrs. Intissar Abu Khadra



Statement of Activities

From 1/1/2010 till 31/12/2010

Revenues, grants and other support	USD
Welfare Association	340,821.00
Norwegian people's Aid	72,563.00
Late Rifa'at El Nimer Fund	50,000.00
Morning coffee society	2000.00
ANERA	10,000.00
Individual contributions	50,636.64
General Assembly membership fees	666.66
NGOs' staff contributions	9299.00
Fundraising iftar event	28,043.35
Other income	5391.34
Total revenues	569,420.99
Expenses, programs services & operating cost	USD
Hospitalization and surgeries	268,509.00
Monthly support for chronic cases	7854.00
Kidney dialysis center	182,157.40
Health education	750.00
Total expenses	459,270.40
Administrative cost	USD
Salaries	27,378.00
Office supplies & stationary	5871.48
Employees medical insurance	4440.00
Office rental	8074.00

Website design	2600.00
Fundraising expenses	7353.83
Medical in-kind donations shipment expenses	12,281.33
Depreciation expenses	3496.60
Other costs	4122.91
Total administrative & other costs	75,618.15
Total expenses for the year	534,888.55
Surplus for the year	34,532.99
Balance at the beginning of the year	181,052.07
Balance at the end of the year	215,584.51

STATEMENT OF FINANCIAL POSITION

From 1/1/2010 till 31/12/2010

	<u>2010(\$)</u>
ASSETS:	
Cash and cash equivalents	202,180.64
Automobile/Vehicles	17,483.00
Less: Accumulated Depreciation	<u>(4,079.13)</u>
Net/ Automobile	<u>13,403.87</u>
Total Assets	<u>215,584.51</u>
LIABILITIES & Fund Balance	
Beginning Fund balance	181,052.07
Plus Excess(or Deficit) for the year	<u>34,532.99</u>
Ending Fund balance for the year	<u>218,584.51</u>
Total Liabilities & Fund Balance	<u>215,584.51</u>

STATEMENT OF CASH FLOWS

From 1/1/2010 till 31/12/2010

	<u>2010(\$)</u>
CASH FLOWS FROM OPERATING ACTIVITIES	
Cash received from Welfare association	340,821.00
Cash received from Norwegian People's Aid	72,563.00
Grants from Rifa'at El-Nimer family Fund	50,000.00
Cash received from morning Coffee society	2,000.00
Cash received from ANERA	10,000.00
Individuals Donations	50,636.64
Contributions from NGO's Staff	9,299.00
General Assembly annual subscriptions	666.66
Proceeds from Fund Raising	28,043.35
Other Income	5,391.35
Cash paid to Hospitalization Support	(268,509.00)
Cash paid to Monthly chronic cases	(7,854.00)
Cash paid to Kidney Dialysis Center-hamshari	(182,157.40)
Cash paid to development of PRCS Staff Project	-----
Cash paid for Public Health Educations	(750.00)
Administrative Expenses	(52,486.39)
Fund Raising Expenses	(7,353.83)
ANERA Shipment Clearance Expenses	(12,281.33)
Net Cash provided(used)from Operating Activities	<u>38,029.05</u>
Net Increase (Decrease) in cash	38,029.05
Cash and Cash equivalents at beginning of year	<u>164,151.60</u>
Cash and Cash equivalents at End of year	<u>202,180.64</u>