



Annual Report 2013

Inhoud

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Message from the chairman

This is the second annual report of the Foundation of the Friends of Sengerema Hospital ('Stichting Vrienden Sengerema Hospital'; SVSH). In the first year we focused on setting up the foundation, including registration in the chamber of commerce, opening a bank account, designing a logo and launching a website. Our ambition was to help the hospital by 'setting-up projects that structurally benefit the hospital.'

We were overwhelmed by the support of many people who decided to help SVSH by donating and/or raising money. We realized that with this support we have a huge responsibility to ensure the money will be well spent in Sengerema. We also realized that our ambition of 'setting-up projects that structurally benefit the hospital' was too narrowly-defined.

Because what is 'structural'? Does it mean we only want to help the hospital in a sustainable way by helping to build infrastructure? Or do we also want to help by improving patient care in the long term. Helping an individual person by covering the costs of an operation might not seem to be structural help for the hospital, but it will structurally improve the quality of life for that single patient. Temporary coverage of the cost of HIV tests is not structural, but it ensures to sustain the hospital care around HIV, maintaining local expertise and clinical routine.

Therefore, we have tried to better formulate the general aim of our foundation:

"The Foundation of the Friends of Sengerema Hospital ('SVSH') provides structural help to the Sengerema Hospital focussing on the improvement of health(care) of both patients and hospital personnel. SVSH is doing this by means of durable and transparent projects adjusted to the needs of the local people."

In this annual report we will further discuss this aim as well as the 5 points of attention we have formulated originating from this aim. Furthermore, we will report goals that have been achieved in 2013.

I would like to conclude by thanking all sponsors and volunteers for helping us to support the Sengerema hospital,

Ahsante Sana!

Maik Grundeken

Chairman Stichting Vrienden Sengerema Hospital

Board of Directors in 2013

Chairman:

Maik Grundeken

Research fellow, PhD Student

Department of Cardiology, Academic Medical Center - University of Amsterdam, The Netherlands

Treasurer:

Niek Versteegde

Resident in Tropical Medicine

Department of Surgery, het Slingeland Ziekenhuis, Doetinchem, The Netherlands

Secretary:

Laura Duineveld

Research fellow, PhD Student / General Practitioner trainee

Department of Primary Care, Academic Medical Center – University of Amsterdam, The Netherlands

General member:

Anne van de Pluijm

General Practitioner trainee

Department of Primary Care, Radboud University, Nijmegen, The Netherlands

General member:

Femke Boot

Tropical Medicine Specialist

Mseleni Hospital, Kwazulu Natal, South Africa

Our second year: from starting-up to improving structure

In the first year we focused on setting-up our foundation, including registration in the chamber of commerce, opening a bank account, designing a logo and launching a website, in the second year we focused on structure and defining a clear general aim. In the first year, our ambition was simply formulated as 'setting-up projects that structurally benefit the hospital.'

As a result, we repeatedly had the same discussion: What is structural? Some argued that structural help only includes the support of building infrastructure. Others had the opinion that financing an operation for an individual patient can never be structural, although others argued it will structurally improve the quality of life for that single individual. Covering the cost for HIV tests seems not to be structural, but it ensures the continuity of the clinical routine practice around HIV management, and thus the local expertise.



Members of the SVSH board discussing what the general aim should be.

To set our priorities straight, we decided to spend a whole weekend together and discuss what we think was most important for helping the hospital. After a long weekend of discussions, we have formulated a main objective together with points of attention that we can use to structure our decision-making. If we are confident that a plan meets our general aim, we can simply shift our focus to the practical things which will make us more effective in helping Sengerema hospital.

Main objective

We have formulated our main objective as follows:

“The Foundation of the Friends of Sengerema Hospital (‘SVSH’) provides structural help to the Sengerema Hospital focussing on the improvement of health(care) of both patients and hospital personnel. SVSH is doing this by means of sustainable and transparent projects adjusted to the needs of the local people.”

We intentionally mentioned the name of the hospital in our general aim. Although it might be of interest to develop local healthcare outside the hospital, we agreed the hospital will remain our single priority since this was the reason for founding SVSH. Furthermore, we include both patients as personnel in our general aim. We believe that supporting the hospital staff, by training and improving their working conditions, will lead to more motivated and better skilled personnel which will improve patient care. With ‘sustainable’ we do not just mean infrastructure (buildings, sanitation), but also our intention to follow-up on projects (the follow-up of alcohol dispenser use after their introduction in the hospital). With ‘transparent’ we do not only mean that we want to clearly communicate how the projects were financed, via annual reports, but we also intend to inform our sponsors via our website, newsletters, social media, etc. Finally, we only want to set up

projects that are needed by the local people. If not needed by the local staff a project will never succeed and thus never be rolled out in the first place.

Points of attention

In this section our formulated points of attention will be discussed. We will discuss the rationale of these points of interest and give examples. The 5 formulated points of attention are the following:

1. Equal and close collaboration with Sengerema Hospital
2. Working in an open and transparent manner
3. Guaranteeing that 100% of the donations are spent in the Sengerema Hospital
4. Uniting all people who sympathize with Sengerema Hospital
5. Reinforcing the local expertise and increasing accessibility to health care and education

Equal and close collaboration with Sengerema Hospital

We do not believe in the traditional way 'aid' is given to Africa. The word 'aid' implies an unequal relation: one party is depending on aid from the other. We see the Sengerema Hospital as an autonomous entity; we will respect its strategy and choices made by the hospital leadership. We try to work in close collaboration. For this reason, this annual report is written in English so that our colleagues in Sengerema will be able to read it. We seek contact with the medical officer in charge, Sister Doctor Marie José Voeten, as often as possible. Projects are set up in close collaboration with her and the rest of the hospital staff. Ideas for new projects can be formulated either by the Sengerema hospital staff or via the board of SVSH (anyone connected to our foundation in any way can make suggestions!). In the latter case, we always ask the hospital staff what they think about our idea and whether they believe it would be beneficial to the hospital. Only in the case where the hospital staff supports the idea, a new project plan will be further developed. In the future we will try to aim more and more that projects are set up by the people from such projects are the 'SACCOS' and 'Hepatitis B' projects (see project section below).

Working in an open and transparent manner

As will be discussed in the financial overview, our incomes from donations are increased 5-fold compared to 2012. We are very happy that we are able to help the hospital and to make a difference using this money. However, these amounts of money also bring more responsibility to spend to money the most beneficial way for the hospital. We think it is of utmost importance to be open and transparent how this money is spent. We regularly update the sponsors and other supporters of the foundation by communicating via social media (<https://www.facebook.com/stichting.hospital>). Furthermore, every three months we send out a newsletter. We have a website with regular updates on projects (www.stichtingvsh.nl) and we organize yearly meetings, to try and keep people informed in a face-to-face manner. During these meetings, we present our projects and people have the opportunity to ask us questions. Finally, we publish the annual report on our website.

Guaranteeing that 100% of the donations are spent in Sengerema Hospital

We guarantee that 100% of the donations are spent in Sengerema Hospital. All running costs are paid by donations from the board and money from sponsors will never be used to cover these running costs (see financial overview).

Uniting all people who sympathize with Sengerema Hospital

After starting our foundation we soon found out that we were not the only party supporting the hospital. The Pius XII foundation for example raises money to help Sengerema hospital by financing projects such as the recent replacement of the asbestos roofing. Pius XII was founded in 1959 specifically to start the Sengerema mission hospital by the congregation of the Sisters of Saint Charles Borromeo and by the congregation of the Brothers of Saint John of God. After the hospital was conveyed to the Diocese and after the Brothers of Saint John of God had left Sengerema, Pius XII changed his role by funding projects. We work in close collaboration with Pius XII. They have donated some of our transportation costs of goods to Sengerema. We are looking forward to continue and to intensify our collaboration with them.

Another important collaboration we have strengthened last year was our collaboration with SIMBA. This foundation was founded in 1999 by Erik Staal to support him so that he was able to work in the Sengerema hospital as a Tropical Medicine Specialist. Erik worked in Sengerema from 1999 until 2004 and is currently working in 'het Slingeland Ziekenhuis' (Doetinchem, The Netherlands) as a general surgeon. After Erik returned to The Netherlands in 2004, SIMBA continued to raise money that was used to help the hospital (for example by replacing the old generators). Since a couple of years Erik started to return to Sengerema twice per year to work in the hospital for 2 weeks together with theatre nurses, anesthesiologists and colleague surgeons from the Slingeland hospital, to perform difficult and high-risk surgery. In 2013, SIMBA and SVSH decided to join forces. SIMBA will transfer all donations (money collected during the Christmas market in 'het Slingeland Ziekenhuis', for example) directly to SVSH, while SVSH supports the bi-annual missions of Erik Staal and his team. We kindly take advantage of his extensive experience in practicing Tropical Medicine in Sengerema by asking him for advice. We are very excited about this close collaboration!

Another example of such collaboration is working together with our friends from 'Cycling For Future'. In 2013, father and son Hub and Rik Crijns organized a bike trip from Madrid to The Netherlands to raise money for SVSH (to sponsor HIV tests among other things). Hub is a nurse in the emergency department in the 'Laurentiusziekenhuis' in Roermond where he met Pim de Ruijter (co-founder of SVSH). Hub told Pim he planned a biking tour from Madrid to Amsterdam with his son Rik Crijns to raise money for a charity. Pim suggested supporting SVSH and it was decided that this would be their goal. Before cycling from Madrid they had also organized a lot of activities such as a Basic Life Support training, a 'kettlebell' clinic and selling green bracelets to raise money for the Sengerema Hospital. With all these efforts they were helped by Hein den Weijer and his company 'Flexxis kapper software'. The team of Cycling for Future raised an amount of €4.400! Furthermore, they have announced that they will support us by organizing a new cycling tour in 2014! Cycle For Future: many, many thanks for your (ongoing) support!

Finally, we aim to unite all the interns, and their friends and family, who planned to do their clinical rotation in Tropical Medicine in the Sengerema Hospital. We organize informal meetings with them before they travel to Tanzania to inform them about the country, the hospital and our foundation. After returning home, we hope that we can function as a platform, forming a network with all interns (and their family and friends) who have ever been to Sengerema. With this network we hope we will be able to help the hospital, not only by fundraising, but also by sharing the knowledge of all these ex-interns who are currently working

as Tropical Medicine Specialists, general practitioners, or as other specialists. Interns who want to stay involved with the hospital are welcome to have an active role in our foundation. Some of the interns already did some fundraising before the start of their rotation. If they appreciate this, we can help them to think of the best way of spending the money and help them with their projects. Last years example was the alcohol dispensers project of Davey and Thijs (see below and annual report of 2012). Similar initiatives in 2013 were performed by Anneke Tjihuis, an intern who raised money by running a half marathon (€680), and the family of Bob and Floor, two interns who raised more than €1.500 together with their family.

Reinforcing the local expertise and increasing accessibility to health care and education

Sharing knowledge is vital in improving the quality of health care. One of our projects that started in 2012, was improving hospital hygiene by placing alcohol dispensers throughout the hospital. However, without education and training to explain why and how these dispensers should be used, it makes no sense to invest in the dispensers. By supporting the missions of Dr. Staal we hope the local medical personnel will benefit by learning from his and his teams expertise. These missions make health care accessible to people for whom this would have been impossible due to financial restraints.

Projects in 2013

In this section we will discuss projects that started and/or finished in 2013.

Alcohol dispensers

One of our first priorities, formulated together with the Sengerema hospital staff, was to improve hygiene in the hospital. It is important to have good hygiene in-between patient contacts to prevent hospital-acquired infections. Pumps with disinfectants were not available in the hospital. As already discussed in our annual report of 2012, Davey Gerhardt and Thijs Nijenhuis, two interns from Nijmegen who did their Sengerema internship from December 2012 till March 2013, raised €2,000 among friends and family. They decided to invest that money, plus an additional €1,500 from SVSH, in a project to provide alcohol dispensers on every ward in the hospital. Eighty dispensers were installed throughout the hospital. Based on recommendations by the World Health Organization (WHO), local expertise and availability in Tanzania, the following recipe was chosen: 500cc Methylated Spirit 70% (for disinfection) mixed with 2.5cc Glycerin (for skin care). On top of that, Davey and Thijs put a lot of effort in educating the local personnel: not only by organizing educational meetings, but also by making plasticized instruction cards which were put on the wall next to the alcohol dispenser. The use of the





alcohol dispensers is currently part of the daily routine of the hospital personnel. Proper use of the alcohol dispensers is part of the educational program of the student nurses that are working in the ward to gain clinical experience. We believe this is a very successful project so far that will be continued in 2014. We would like to thank Davey and Thijs for their efforts.

Water project

The hospital management formulated another important measure to improve hospital hygiene. Although the operation room and some of the wards had access to running water, the internal medicine wards (male and female) as well as the surgical wards (male and female) did not have running water on the ward. This means it was very bothersome to wash hands: a bucket needed to be filled with water that first needed to be pumped up by hand in the morning (see photo). As a consequence, water was scarcely available during the day and hands were rarely washed in-between patient contacts. The way to improve this, as formulated by the hospital management, was to supply running water to the internal medicine and surgical wards. In 2012,



local technicians provided a quotation: €10,000 was needed for these construction works. To fund this project, two ex-interns of Sengerema Hospital, Hilde van Susante and Julia van Groningen, came up with the idea to organize a charity concert in Amsterdam in April 2013. The theme of the night was 'Drink voor water' ('Drink for water') and numerous artists performed at no cost. With additional support from the Dutch foundation 'Wilde Ganzen', providing an extra 55% they managed to raise €10,250! This was enough to start the construction work immediately. We were overwhelmed by this success and we would like to thank Hilde, Julia, the artists and other volunteers for their hard work to supply the funding within one night!



After the money was transferred to the hospital, local craftsmen started to build and the project was finished within two months. First the concrete platform for the big plastic tanks was built (see photo). In these tanks, water is stored after being pumped up from a large concrete water reservoir in the hospital. The water in this reservoir is obtained from Lake Victoria via a water purification system. These plastic tanks are connected to the

wards by the use of pipelines. Finally, sinks and water taps were installed so that running water is now available in the wards (see photo below).

It was very satisfying to see that both funding and realization of this project could be completed within 1 year. We are very happy with the results and we are confident that this intervention will help in the prevention of hospital-acquired infections!



HIV tests

As in 2012 there was a shortage of HIV tests due to reimbursement issues in 2013. Again, we decided to support the hospital by donating HIV tests. In this way, the well-organized HIV infrastructure (counseling and treatment) of the hospital can continue to be used effectively. To support this purpose, Eric de Ruijter (father of Pim de Ruijter) and his friend Henry attended the 'Four Days Marches' ('vierdaagse') of Nijmegen. They walked 200 km in 4 days to raise money for Sengerema hospital. Eric and Henry, thank you so much for your efforts!



Eric and Henry walking the 'Four Day Marches'

SACCOS

'SACCOS' stands for 'Savings and Credit Cooperative Organizations'. SACCOS are member-owned financial cooperatives, democratically controlled by their members, providing credit with a competitive interest. In 2013 some members of the hospital staff came up with the idea to start their own SACCOS for employees of Sengerema Hospital so that the hospital staff will be able to receive loans that regular banks do not provide. With these loans they finance, among other things, school fees for their children, the building of a house, or a 'shamba' (a piece of land for agriculture). The SACCOS is led by the local staff (5 people) and to become a member, you have to pay 20.000 Tanzanian shilling (around €10), with a monthly contribution of

2.000 shilling (€1). SVSH provided a starting capital of 4.000.000 million shilling (€2.000) for registration and licensing at government level, after which the members could start getting loans immediately. The loans that will be provided are 200.000 shilling (€100) each. In next year's annual report we will evaluate the SACCOS project.

Oxygen concentrators

There was a need for new oxygen concentrators. These concentrators are used throughout the hospital, but in particular on the intensive care unit. These concentrators can provide oxygen to those patients who temporarily have problems getting enough oxygen in their blood such as patients with a pneumonia. Niek Versteegde, our treasurer, came up with the idea to do some fundraising by running a marathon! He successfully completed the 42.2 km and finished in 3 hours 47 minutes! With this marathon he raised more than €2.000 and together with money from our donors we were able to buy 5 oxygen concentrators for the hospital.



Niek running his final meters....

New material for the pediatric ward

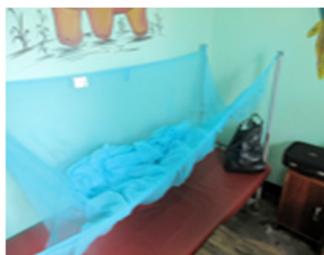
The pediatric ward is one of the busiest ward of the hospital. More than 6.000 children are admitted each year, which means that there are around 90 to 110 children in the ward each day, while the official maximum capacity is only 70. As a result, most material in the ward was dilapidated and needed replacement urgently. With a special donation of €10.250 from the Dayalu foundation we were able to help the hospital to replace material. With this money the hospital was able to buy 6 new beds, a screen, new mosquito nets, bed lockers, wheelchairs, stools, and new IV poles, among other things. With the money that was left a roof was built to protect children and family against the sun and the rain. We want to thank Joep Sins for writing the proposal to Dayalu, and of course a special thanks to the Dayalu foundation for their kind donation!



New bed



New bed locker



New mosquito nets



New roof

Upcoming projects in 2014:

Hepatitis B vaccinations

Hepatitis B is endemic in Tanzania and the number of people dying from hepatitis B is even higher than the number of people dying from HIV/AIDS. The Hepatitis B virus is highly virulent, and can be transmitted directly through saliva, percutaneously (for example in the surgical theatre during a needle stick injury), or via blood (most important transmission route). The Hepatitis B virus causes inflammation of the liver and will eventually lead to liver cirrhosis, liver cancer and death. In the Western world where Hepatitis B is less prevalent all medical personnel is protected against Hepatitis B by means of vaccines. Paradoxically in Tanzania, where the virus is highly prevalent, medical personnel are not protected except for one hospital (Bugando Medical Center in Mwanza). This is a serious concern since the World Health Organization (WHO) estimates that health care workers in the developing world have a life-long chance of around 40% to contract the infection.

Charlz Mguta, doctor in Sengerema hospital, came to us with the following question: could we fund a plan in which all medical personnel working in the Sengerema Hospital will get vaccines so that they are protected against the Hepatitis B virus? We were immediately convinced that this was a great idea and Charlz made a proposal including a cost estimate of around €10.000. We agreed to support this proposal and started to try to get the funding. 'Our' Niek Versteegde submitted a proposal to the Albert Schweitzer foundation. This foundation was founded to honor the work of Albert Schweitzer as a physician and medical missionary in Africa. Although Niek did not get awarded the main grant of €5.000, he did win the internet poll, and received €750! Although we did not get the grant we hoped for, we decided this project had a high enough priority and therefore we used money from our own sponsors to fund this vaccination plan. The vaccinations will start in 2014 and we are excited to inform you about the projects success in next year's annual report!

Other fundraisers

As a foundation we are touched by people who decide to raise money for our foundation to support Sengerema Hospital, some even have never been in Sengerema themselves! Therefore, we would like to acknowledge these fundraisers that were not mentioned above. We would like to thank Aad Duineveld and the Schiphol Group for their fundraising during the new year breakfast. We are also thankful to the church community of Akersloot who donated the collection of one of their services. We would also like to thank 'Tweesteden Ziekenhuis' for their gift. Last but not least, we thank Roel Versteegen en Sander van der Steen for their fundraising during the opening of their new building firm 'V&S: authentiek bouwen'! We would like to finish by thanking all our sponsors who support the hospital with their monthly or yearly donations!

Financial overview 2013

Balance sheet

2013 was a very successful year regarding our financials. The money that was raised increased almost 5-fold compared to 2012 and we managed to keep a positive balance. SVSH does not have any non-current assets and does not have any liabilities. In general 2013 was a healthy financial year in all aspects for our foundation. We will strive to maintain the amount of money raised for SDDH in the next years.

Friends of Sengerema Hospital Balance sheet (as per December 31st, 2013, in euros):

Balance 2012		Liabilities 2012	
- Cash and cash equivalents	€ 2.941,48	-	€0,00
Obtained assets in 2013		Liabilities in 2013	
- Cash and cash equivalents	€ 2.357,27	-	€0,00
		Equity	
		- Rabobank bank account	€5.298,75
Total	€5.298,75	Total	€5.298,75

Income and expenditure

SVSH has two strictly separated cash flows. We have made this distinction in order to make sure that the money coming from our sponsors is always spent the right way. We are proud to say that 100% of the money coming from our sponsors flows directly into projects that benefit Sengerema Hospital.

The first and most important cash flow is the cash flow coming from our sponsors, which comes from private sponsors, foundations and corporations. This is money donated for the benefit of the hospital in Sengerema and it can only be used in that way. In other words: money from sponsors is exclusively used for projects, material and other goods that benefit the Sengerema Designated District Hospital directly.

The second cash flow consists of voluntary donations made by members of the board and people who are involved in daily management. Money coming from these donations is used to cover running costs including promotional materials and visits to Sengerema. Running costs can never exceed the amount donated by the members of the board. People going to Sengerema can pay for their own expenses in this way. If there is money left after withdrawing the running costs from the total amount of these donations, this money is used for projects that benefit Sengerema Hospital.

Statement of income and expenditure account for the year 2013 (in euros):

Income		Expenditure		Net. Result
Income from private donations, donations made by foundations and corporations	€ 48.543,95	Foundation managed project (money spent directly to benefit Sengerema Hospital)	€ 47.484,28	€ 1.059,67
Income from board members' donations	€ 4.791,00	Running costs	€ 836,00	€ 1.298,60
		Expenses of members of the board	€2.656,40	
Total	€ 53.334,95	Total	€ 50.976,68	€ 2.357,27

Income from sponsors

Private sponsors

Compared to 2012 there has been a significant increase in donations coming from regular contributors. This is mainly caused by the amount of support received from family and friends who decided to become members of the "club of hundred". We have 63 people who are registered to contribute monthly or annually. In total this raised € 6.851,50 for our projects. Apart from this group there was a significant group of private sponsors that made single donations of various magnitudes. In total this amounted to another € 5.231,00. In total, private sponsors contributed € 12.082,50 directly to our foundation representing 25% percent of our total income for 2013.

Fundraising events by private parties

In 2013 we were very lucky to receive a lot of support from people who organized a fundraising for our foundation. In total there were 7 events of which 4 were sport-related events. These once-off fundraising events contributed a significant amount to our total income, resulting in a much higher than expected income. This unexpectedly high income facilitated us to take on a lot of big projects helping Sengerema. The total amount yielded from these events was €13.427,57, representing 28% of our total income for 2013.

Fundraising organised by Stichting Vrienden Sengerema Hospital

After much consideration we decided to organize a fundraising event in April 2013 to raise money to improve sanitation in 4 of the wards in Sengerema. The goal was to raise €10.250 in collaboration with the "Wilde Ganzen Foundation" of which our foundation had to raise € 6.612,90. The remainder would be sponsored by "Wilde Ganzen". The fundraising evening was called "Drinking for Water" and it turned out to be a great success. In one evening we managed to raise the required amount. The money was transferred to the bank account of Wilde Ganzen from where the total amount of €10.250 was transferred to Sengerema Hospital. After recalculation the revenue was adjusted

upwards to a total of € 6.978,88. This amount represents 14% of our total. In conclusion: we consider this a great success both financially as well as a boost for our foundation in terms of name recognition amongst family and friends.

Funds received from other foundations

In 2013 it was the first time for SVSH to collaborate with other foundations for specific projects in order to realize them. As this was the first time we worked together on projects this was a very valuable experience of which we have learned a lot. Financially it resulted in a few big contributions with a total of €13.522,00. This was 28% of the funds received in 2013. It is self-explanatory that we are very happy to receive this support for our projects and we will strive to make use of this collaboration in future projects.

Donations made by companies

Three companies decided to make a contribution to our foundation. This was 5% of our income.

Overview of all incomes

Category	Name of sponsor	Amount donated	Total per category
Donations made by regular contributors	63 different private sponsors	€ 6.851,50	€ 6.851,50
Donations from foundations	Dayalu Foundation	€ 10.272,00	
	Donation Pius XII for transportation of materials	€ 2.000,00	
	Albert Schweitzer foundation	€ 750,00	
	Church community Akersloot	€ 500,00	€13.522,00
Fundraising organized by SVSH	Income of "Drink voor water"	€ 6.978,88	€ 6.978,88
Private fundraising	Half marathon Anneke Tijhuis	€ 680,00	
	Fundraising for SIMBA mission	€ 1.100,00	
	Fundraising by Emmen family	€ 1.501,00	
	Marathon Niek	€ 2.161,07	
	Cycle for Future	€ 4.402,00	
	Walk 4 Future (Eric de Ruijter)	€ 1.800,00	
	Christmas market Slingeland hospital	€ 1.783,50	€13.427,57
Sponsoring by companies	Donation by "Twee Steden Ziekenhuis"	€ 500,00	
	Donation by Schiphol group	€613,00	
	Opening V&S authentiek bouwen	€ 1.420,00	€2533,00
Other private donations	Various persons	€ 5.231,00	€ 5.231,00
Total income from our sponsors			€48.543,95

Spending of sponsor money

In our decision-making process on how to spend sponsor money we follow some basic rules. Key factors are:

- We want to spend 100% of the sponsor money to benefit the hospital.
- We strive to spend the money as efficiently as possible.
- At least 50% of the raised money should go to projects that strive to cause a structural improvement in the quality of care for a long period of time (years). Examples include specialized medical equipment, alcoholic hand rub and sanitation.
- A maximum of 50% was set to use for acute needs required to maintain a basic level of care, i.e. HIV tests, disposables for the operation room and gloves.

Overview of all expenditures in 2013

Expenditures per project	Total per project
Transportation costs of material	€ 5.958,19
<ul style="list-style-type: none">• € 78,00 Transportation Oxygen concentrators• € 5.880,19 Container shipment by DPA	
HIV tests (~1500 test bought)	€ 1.500,00
5 Oxygen concentrators, including spare material	€ 5.063,19
Expenditure for support of mission by surgical team of Erik Staal	€ 2.850,00
<ul style="list-style-type: none">• € 1000 surgical cloths• € 1500 for plaster of Paris for surgical patients• € 350 for overtime of local theater staff	
Financial support for start-up of SACCOS	€ 2.000,00
Sanitation project; sanitary facilities for 4 wards.	€ 6.612,90
Paediatric ward project supported by Dayalu foundation, main cost	€10.270,00
<ul style="list-style-type: none">• Roof over dining area paediatric ward• Bed lockers• 60 mattresses and mattress covers• 6 new beds• Various medical equipment	
Hepatitis B project	€ 12.250,00
<ul style="list-style-type: none">• Training of staff• Purchase of vaccinations	
School uniforms for children of school of mission	€ 480,00
Unspecified gift for emergencies	€ 500,00
Total sponsor money expenditure	€ 47.484,28

In the table above expenditure is specified by project. In general, we can say that with regard to expenditure, we followed our own basic rules as defined above.

€ 21.945,90 (46%) was invested in durable materials and infrastructure for the hospital including the paediatric ward project, the sanitation project and the oxygen concentrators. These projects will improve hospital care for a long period of time, as most materials that were purchased are sustainable.

Another € 14.250,00 (30%) was invested in human capital. By investing in social security through SACCOS and by increasing a safer work environment (Hepatitis B vaccinations) we improved working conditions of personnel on a structural basis.

The third largest expenditure was on transportation of medical equipment from the Netherlands to Sengerema. Almost all material was given to our foundation for free. After obtaining the material, we made a strict selection of material that was needed by the hospital and that would be cost-effective to send to Tanzania. Total costs for transportation were € 5.958,19 (13%). We continue to evaluate and improve this process in order to save costs (see appendix I).

Since the beginning of 2013 there is a close collaboration with SIMBA foundation that organizes surgical missions to Sengerema twice a year. These visits bring specialized care within reach of the poorest people of the local community by making hospital care more accessible. As improving access to care is one of the priorities of our foundations we strongly support these missions. € 2.850,00 (6%) was spent on these missions.

Due to a small improvement of continuity of funds received by the hospital there was less demand for support of the HIV program and other acute problems. Apart from that our foundation has not always been able to meet the demands because of several big projects running simultaneously. In total €2.000,00 (4%) was spent on HIV programme support and acute needs.

Finally, a small proportion of our received funds were spent outside the hospital on school uniforms for orphans of the primary school. In total € 480 (1%) was spent on this because of a special request made by the sponsors.

In summary, over the year 2013 there was an income of € 48.543,95 from private donations and fundraising. We used € 47.484,28 as specified above. The balance thus is € 1059,67 positive over the year 2013. With the remaining positive balance of € 1845,60 of 2012, the balance of sponsor money is € 2905,27 at the beginning of 2014.

Income for SDDH through different routes affecting SVSH:

Next to the formal channels of income there have also been financial profits that supported our foundation but were arranged through other channels and are therefore not included in our financial overview. However, we would like to mention them as a token of appreciation and to acknowledge other persons/parties with the same commitment to help Sengerema Hospital.

We are very grateful to "Aviation sans frontière" foundation (English: 'Aviation without borders', Dutch: 'Luchtvaart zonder grenzen'). This foundation supports NGOs like ours by providing free air transport. This enabled us to send the oxygen concentrators almost free of charge.

In-kind donations (materials and equipment) contributed a significant proportion of our support to the hospital since the equipment collected by different people in different hospitals is estimated to have a total value of €15.000-20.000. However, these estimates are difficult to make as all equipment is second-hand and therefore the prices vary significantly. In the attachment we included an overview of the material that was sent to Sengerema. This list includes most but not all equipment sent. All these materials are donated to the hospital and are therefore not included as non-current assets on the balance.

As mentioned before "Wilde Ganzen" contributed significantly to our water and sanitation project. After we transferred the money raised at the "Drinken voor water" event to their bank account they added another € 3637,10 and transferred it to Sengerema. Of course this cannot be seen in our balance, but we are very happy with this involvement of "Wilde Ganzen".

The bi-annual visits of Erik Staal from SIMBA foundation and his surgical team contributed a significant amount in human capital. By investing their time and knowledge in Sengerema hospital on their own expense, they made a big difference in peoples everyday lives.

Expenses not declared also contribute significantly in keeping running costs at a low level. All members of the board pay for their own travel expenses in The Netherlands. Food and drinks during meetings and office equipment are for their own account. No wages were paid.

It is hard to put a price on all combined efforts and contributions made, however, we think the total of these efforts contributed significantly to improve the quality of healthcare in Sengerema Hospital.

Overview of running costs and expenses of SVSH

Income coming from donations from members of the board.

As mentioned in the introduction we keep the money coming from our board members separated from the money from our sponsors. We do this because the money coming from this source is used to pay for running costs and expenses made by board members when they visit the project site. The total amount of money coming from donations by the members of the board in 2013 was € 4.791,00.

Running costs and expenses

The table below represents an overview of the running costs and expenses made by our foundation. We take pride in the fact that the running costs were low and could easily be paid for from our own funds. No money from our sponsors was used.

Running costs and expenses (in euros)

	Total
Running costs	
• Expenses made for the bank account	€ 217,53
• Costs Notarial deed	€ 120,00
• Christmas cards	€ 160,00
• Purchase of suitcases for transport of materials	€ 60,00
• Promotion materials	€ 278,47
	€ 836,00
Reimbursement of travel costs made for the visit of Niek Versteegde and Laura Duineveld to Sengerema in April	€ 2.656,40
Total	€ 3.492,40

In summary, in 2013 the total amount of money donated by the members of the board was € 4.791,00. A total of € 3.492,40 was spent on running costs and other expenses, which makes the balance € 1.298,60 positive for this year.

Combined with the positive balance of €1.095,88 from the previous year, the total balance of the running costs at the end of 2013 is € 2.394.48. This money will be reserved for future running costs of the foundation and expenses made by the members of the board.

Future perspectives on financial management

After two very successful years we are very proud that we were able to contribute so much to our beloved hospital in Sengerema. At the same time we realize that growth in income and expenditure is not a goal on itself. Therefore we regularly review our goals, what we strive for and how we should achieve our goals.

One of the things we consider as essential in our way of helping is that we give help in a structural way so that projects are supported for longer periods of time if needed. In other words: the hospital should be able to rely on us as a partner so they can make plans for the future knowing that we will follow-up on our projects.

The board made an agreement that we should make a distinction between once-off projects and projects that run for several years, enabling us to budget for the future.

We will base the available budget for the projects that run for longer periods of time on the donations coming from people who contribute on a regular basis. In this way we can ensure the continuity of these projects. If the required budget exceeds the money raised in this manner we will have to look for ways to increase our regular income.

For once-off projects we make a separate budget that can partly be paid from fundraising and once-off donations by private sponsors. If extra money is required for these projects we will try to collaborate with other foundations or try to organize a fundraising event ourselves in order to generate the required funds.

In summary, our foundation has been very successful in attracting funds and sponsors to support the Sengerema Designated District Hospital. As the hospital is growing rapidly and is going through some rapid changes it will be a challenge to keep/make the hospital up-to-date and ensure continuity of care. As funds for structural improvement remain low, a demand for our support remains.

We hope that we can contribute in close collaboration with the hospital in a critical but optimistic way.

Appendix I: Inventory list of materials shipped to Sengerema.

This list is meant to function as a global inventory of equipment sent to Sengerema. Although the list was carefully composed some materials may be missing from this list.

- Various fabrics for medical purposes,
- exempels and fabric rolls,
- Material for fabric,
- IV cannula 300st,
- IV syringes 1500st,
- Baby resuscitation manikin,
- Tracheostomy kits 25st,
- Bandages,
- Ankle bandages 5st,
- Colostomy bags 500st,
- Defibrillator equipment 3st,
- Clothes various,
- Surgical coats 100st,
- Surgical equipment 250st,
- Resuscitation masks 50st,
- Trolley 1st,
- 5 oxygen concentrators including spare equipment
- Resuscitation balloons
- Various medical books
- Theater gowns
- Stitching material
- Catheters
- Surgical lamps
- Pediatric hospital beds
- Plaster of Paris
- 1x Chest drain set
- 6x Reusable ambu balloon adult
- 2x Reusable ambu balloon pediatric
- 30x Mask adult/pediatric
- 5x Oxygen mask
- 30x Bandage for tracheostomy
- 100x Venflon IV
- 100x Injection needle
- 4x Soap
- 13x Medical books
- 1000x Laboratory tubes
- 1x Bakri balloon
- 20x Bedhangers/bottles
- 10x Fixation material
- 1x Laundry trolley
- 3x Suction gear
- 2x Research bed
- 7x Boxes of POP of variable size
- 1x Trolley for theater
- 6x Blanket standards for beds
- 6x Rolling mats for patient transport