

LAMB

Integrated Rural Health and Development

Our Mission

The mission of our Christian Organization is to serve God through serving the poor or underprivileged, especially women and children.

Our Vision

People of Bangladesh, transformed by the love of God, live in healthy and just communities.



Improved Health:

People most in need, especially women, children and the poorest of the poor have improved health.

Health Policies:

Women-friendly, pro-poor, appropriate health policies and systems are implemented by the Government of Bangladesh and other health care providers.

Leadership:

Leaders and people of influence including community leaders, health care providers, religious leaders and heads of families take responsibility for health and justice in their communities and advocate and apply Biblical values.

Community ownership:

Communities take ownership for their health and take responsibility to ensure equitable, accessible health and social systems.

Love of Christ:

People in contact with LAMB experience the love of Christ and are offered help to understand what they experienced.



"Moni" at 45 years of age delivered a baby girl at LAMB Hospital. When she was 15 she got married, arranged by her parents. After getting married she was unable to conceive; husband and in-laws were not happy as they wanted successors. At last they advised her to adopt a child; she did not agree with them and kept on praying to God for a child. After 30 years of prayer God listened to her, Moni became pregnant! She had an assisted delivery at LAMB, and she is happy now. This is why we all are working at LAMB.



Message from LAMB Board Chair 2012

Once again I am honored to present LAMB's Annual Report. Throughout 2012 LAMB's staff demonstrated their commitment to our expressed values of compassion, honesty, integrity, equality and quality in their service to the poor in Northwest Bangladesh. The success of LAMB's approach to training and service has resulted in continued growth and recognition by international organizations.

During the past year LAMB completed a MNCS project for UNICEF and developed an inter-church network to train church leaders in advocacy, primary health and Disaster Risk Reduction. LAMB's community work expanded to cover all of Dinajpur and Nilphamari Districts for strengthening 414 government operated community clinics. In 2012 LAMB also received approval for its Nursing Institute and its first batch of students began receiving training in LAMB's value based clinical service.

LAMB owes a special debt of gratitude to Mr. Swapan Pahan for stepping forward and assuming the responsibilities of Acting Executive Director with the sudden departure of Peter May in the previous year. Swapan's dedication and leadership enabled LAMB to continue performing at its high standards during this sad time.

We are very pleased to announce the arrival of our new Executive Director, Dr. Stephen Withington and his wife Juan, who joined the LAMB community at the beginning of 2013. Steve and Juan have many years' experience in Bangladesh and we look forward with anticipation to their contribution to LAMB.

On behalf of the LAMB Board, thank you for your prayers and support, Terry Beyer, Chair.



Board, from Left: Monique de Groot, Keiko Butterworth, Nancy ten Broek, Craig Meisner Ruth Larson, Terry Beyer. Missing: Dr Nelly Saha, Dr David Khan, Suchitra Behera

LAMB in 2012

From small beginnings in the 1970s providing mobile health education and treatment, LAMB has grown significantly over the decades since. In 2012, LAMB provided its field services to a population of nearly 2 million in four districts, while demand also continues to grow for the centre-based services of LAMB. Our development partners in 2012 included the Government of Bangladesh, PLAN International, TEAR Fund, ICDDR,B, KOICA, WHO, BRAC, UNICEF, Engender Health,



World Renew, Walk for Life, Operation Cleft, University of California, Davis, Arizona State University, and many others, local and international. We are grateful for the ongoing financial and prayer support of the World Mission Prayer League, the Lamb Health Care Foundation, and the Friends of LAMB in Australia and US.

Facilities

- A 150 bed capacity hospital
- 28 health care centres, 18 of which incorporated safe delivery units with 24 hour coverage of community skilled birth attendants, and 19 incorporating disability clinics
- 14 family welfare centres and 414 community clinics of the Government of Bangladesh, supported by the LAMB-PLAN partnership
- Residential training centre
- Nursing institute (new in 2012)
- Research unit
- English medium school
- Rehabilitation centre for disabled children
- Office, residential accommodation, guest house

Services

- Clinical services include: Obstetrics and Gynaecology; Paediatrics; Medicine; General Surgery; Outpatients
- Community programs include: primary health care; adolescent reproductive health education and counselling; disaster risk reduction; community development; health technical support;
- Training: primarily health focused, though not exclusively; a new program offering a diploma of nursing began with partnership and assistance of the Bangladesh Nursing Council in mid-2012
- Research, using extensive hospital/community/clinical/socio-economic data, both for internal programs and in partnership with external agencies

 Specialist surgical repair and rehabilitation for clients with club foot, cleft lip/palate, obstetric fistula, and burn contractures

Coverage

- The hospital covers a population of around 1 to 1.5 million, with the community heath and development program (CHDP) covering 1.7 million population, with only minor overlap.
- The LAMB-PLAN partnership continues to flourish with collaboration to strengthen community clinics and the community groups overseeing them in all of Dinajpur and Nilphamari districts, and supporting the Government of Bangladesh in rejuvenation of its union-level health services.
- Technical health support to the Char Livelihoods Project in 8 districts came to a close in June
- The UNICEF-supported Maternal, Newborn and Child Survival (MNCS) program was implemented in 4 upazilas of Dinajpur in 2012.
- The TEAR Fund-supported Disaster Risk Reduction (DRR) program spans four districts

Staff

 By the end of 2012, LAMB had 1061 staff, with an additional 1130 volunteers, including 25 expatriates.

Achievements in 2012

- There were over 3600 deliveries in LAMB hospital
- There were nearly 6800 live births attended by LAMB and LAMB-PLAN skilled birth attendants in the community, 64% of all live births in these communities covered.
- There were over 10000 inpatient admissions, and nearly 60000 outpatient visits to the Hospital
- Significant progress was made by local community organizations towards taking financial responsibility for the community clinics
- LAMB School children continue to reach their educational targets; children successfully transfer out to both Bangladeshi and foreign educational systems.
- A financially sound year was achieved

New developments in 2012

- The Nursing Institute opened with its first batch of students
- An additional floor was built on the Training Centre to cope with the high demand for LAMB training
- An Echocardiology service has begun in the hospital
- Unilever donated over 10500 blankets and 23000 clothes for distribution to the poor of north Bangladesh through LAMB and our local partners.
- A new intensive field project called Women And Their Children's Health (WATCH) has been started in partnership with PLAN in three entire upazilas of Dinajpur and Nilphamari.

Community Health and Development Program

Given the diversity of health concerns and needs, community-based organizations are encouraged to develop their own programs that will improve health outcomes for community members. CHDP has fostered strong ties with all levels and many kinds of stakeholders and faith-based organizations throughout its working community. Lasting partnership between public health departments, local governments and community based organizations are incredibly valuable in producing outcomes for the underserved community which are not achievable alone.

CHDP 2012 at a glance

Char Livelihood Project (CLP):

CHDP's CLP project expanded in 2011 with a big number of implementing organizations in a huge geographic coverage of northern char areas, and the project closed on September, 2012. CHDP worked in a livelihood component of Health & Family Planning, and implemented its skill in primary health care services towards most vulnerable groups of char dwellers. CHDP also developed its experience to work with large communities and monitored the quality of care of the implementing partners.



Happy mom with her child

Maternal Neonatal & Child Survival Project (MNCS):

The project started on July, 2011 and completed its short duration by December, 2012, with the partnership of UNICEF & Government and funded by AusAid. MNCS project covered the entire area of Parbatipur, Fulbari, Chirirbandar & Kaharol upazilas under Dinajpur district to reduce maternal and child morbidity & mortality in line with contributing to achieve national MDG 4 & 5. The project successfully involved collaboration of its various stakeholders including government, local government and community leaders to reduce the causes of maternal & child health mortality as well as strengthen existing rural health service delivery system.

Community Managed Health Care Program (CMHC):

CMHC is one of the long term projects of CHDP, operating in partnership with Plan Bangladesh in Dinajpur & Nilphamari districts. 18 safe delivery units serve the community round the clock

through skilled Birth Attendants & Midwives/Nurses and a team of Community Health workers for health education. Through a new project for revitalizing Government community health services, CHDP is strengthening 414 Community Clinic(CC) Management Groups and uplifting CC as popular rural primary health care service points. CHDP is working to involve community leaders, Union Parishad and government health & FP departments to ensure government proposed collaboration. CHDP started a new project this year named Women and their Children's Health (WATCH) to strengthen the government's existing system to ensure access to rural women & children in three upazilas of Dinajpur and Nilphamari through functioning of CC and Family Welfare Center by safe delivery service, where CHDP will implement its long term experience of community driven safe delivery units. Our existing Adolescent Reproductive Health Institutional Delivery at FWC



(ARH) project completed its duration this year, considering the needs of community adolescents under Khanshama & Chirirbandar upazilas of Dinajpur District, and CHDP integrated this project with 'Women Health Care Through Community Mobilization' (WHCM).



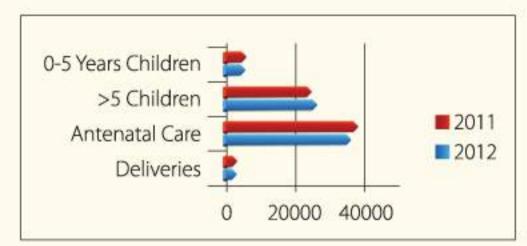
Disaster Risk Reduction (DRR) Project:

DRR project covers 22 unions in 7 upazilas of Lalmonirhat, Nilphamari, Rangpur & Dinajpur districts, in collaboration and involvement with local church members & community leaders, to enhance disaster risk reduction and adaptation to climate change through alternative livelihoods of the community. The project significantly mobilized local resources to support alternative livelihoods.

Mock drill on earthquake

Tuberculosis Control Program (TB):

LAMB has been working as a part of the national TB control program for over 25 years in 4 upazilas of 2 districts. In 2012 a total of 669 new and relapsed patients were treated. The case notification rate was 81 per 100,000 and cure rate was 95% (national 92%).



Total Union	60		
Total Village/Ward	521		
Total HH	295,524		
Total Population	1,772,866		
Total HCC/SDU	28		
Total FWC	37		
Total CC	414		



School health program on importance of hand washing

RDNS & IYCF Project:

LAMB's integrated Rangpur-Dinajpur Nutrition Research project assesses nutritional deficiency and provides appropriate supplements to pregnant mothers & their children in partnership with ICDDR,B & University of California Davis. Another Nutrition research project – Infant & Young Child Feeding (IYCF) – is operating in 2 upazilas under Nilphamari & Dinajpur districts to assess & promote Exclusive Breast Feeding (EBF) and ideal Complementary Feeding (CF) habits of mothers, families & communities with Alive & Thrive.

NCD Project:

CHDP is continuing its capacity to care for its Community. As a part of time-bound initiatives, CHDP started a new project named NCD in partnership with World Health Organization. Though this project is a pilot, CHDP is taking part in implementing Non Communicable Diseases (NCD) risk reduction through raising awareness at community level to prevent and protect from NCDs.

LAMB Hospital, Integrated Programs, Nursing

Hospital

Hospital maintained its high reputation in 2012. The patient flow remained nearly unchanged (changed by 5% on average in all parameters: OPD, ANC, Deliveries) except the paediatric in-patients, which went up by 34%. Although we had fewer doctors we maintained our service quality and reputation as before.

In 2012, LAMB Hospital had...

- 3,657 deliveries including 653 Caesarean sections (18%)
- Total number of other operations was 1,438
- We had 10,251 in-patient admissions (73% female and 28% male)
- Nearly 60,000 out-patient visits
- One new Anaesthesia
 Machine has been added to OT.

LAMB diagnostic service...

- 87,371 laboratory tests done
- 1,421 units blood transfusion given

Imaging...

- 4,000 X-ray
- 2,000 general ultrasound scan
- 713 echocardiography and
- 1,853 ECG

One new Echocardiography Machine and one new Ultrasound Machine were added to our service in 2012.

"Rahim"; 11yr old boy from Dinajpur was suffering from fever, headache and vomiting. His father spent money in different places but his son was not getting better. He took his son to LAMB at last on advice from other people. He was diagnosed as having a brain abscess. He required prolonged treatment with multiple antibiotics and received physiotherapy. He was discharged well. His total hospital bill was Tk. 33698 but paid Tk. 5500 only, for the rest he received subsidy from LAMB poor fund. LAMB aims that all may have abundant life!



Cured Rahim with Dr. Suvas Sarker

In 2012; 3,330 in-patients (30%) received subsidy from poor fund.

Integrated Programs

Fistula...

"Sabina" had successful fistula repair at LAMB. Once surgery is over, re-integration to normal family life begins. Sometimes it takes longer to rebuild relationships. Sabina was forced to get married at age 12. Fistula occurred at 1st stillbirth at 14. After 5 years of suffering she had a successful fistula repair at LAMB in 2009. Sabina reconciled with her husband. She delivered a live baby last year.

- Up to 2012, 559 VVF patients were screened and 507 fistulae have been repaired with a success rate of 80%.
- 20 Cured fistula patients were Trained to be Community fistula advocates and 22 were given knitting and tailoring training.







Before treatment

After treatment

Club Feet....

Currently 215 children receive treatment for club feet.

In 2012:

- 1324 patients received physiotherapy
- 1112 Special needs children were seen In the rehab centre and a further 400 in the community
- 330 Assistive devices distributed

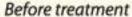
Cleft Repair...

"Beauty" used to weep having her younger brother "Amirul" on her lap: Why does he look so strange?' she thought.

Amirul, after 2 series of surgery at LAMB (right), with Beauty, the happiest member in the family with her nice looking brother!

400 Cleft repair surgery done up to 2012







After treatment

Nursing care and Nursing institute

The LAMB Nursing Institute was opened on 3 March 2012. It offers a three year course called 'Diploma in Nursing Science and Midwifery' and has been accredited by the government.

The aims of the LNI are

- To raise the standards of nursing care at LAMB Hospital and in Bangladesh
- To provide training opportunities for young women from low income families
- To train nurses able to see the physical, spiritual, emotional and socio-economical needs of patients
- To increase available numbers of nursing staff at LAMB and in Bangladesh

We started the LNI with 15 students, mainly from local families. They live in a hostel on the LAMB compound.

Girls from poor families are able to apply for a loan to help with their study fees.

Mrs. Rekha Folia has been appointed as Nursing Institute Principal and teaching and admin staff have been employed. Support for classes and clinical supervision is given also by nurses and doctors from the Hospital and the Training Center.

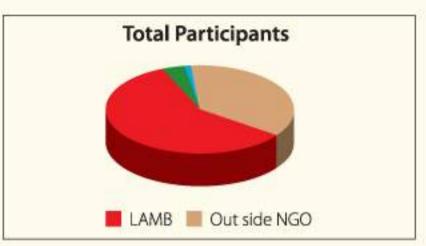


The highlight of the year was the first capping ceremony when the students recited the Florence Nightingale Pledge, promising to serve patients whole-heartedly. They then received their caps and belts.

Training Center

LAMB Training Center was fully loaded in 2012 and needed more space which resulted in construction of a 3rd floor on top of the existing Training Center building and a 25000 liter capacity new overhead water tank. The expansion added large class rooms and dorms. The construction was funded by Plan Bangladesh. Due to increased use of the Training Center by the



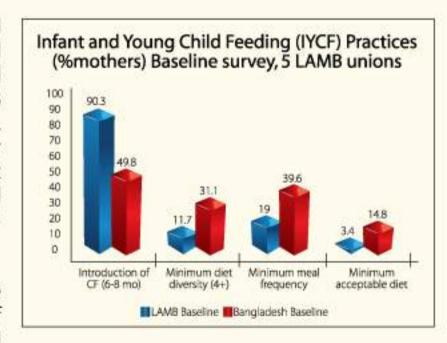


Nursing Institute and the Training Center's own programs, including training of Medical Assistants, integration with the Hospital and the Community Health and Development Program hugely increased. Two new training projects started, a six month Community Skilled Birth Attendant (CSBA) training for Plan Bangladesh, and a Community Midwifery Education Program (CMDP) funded by DFID through BRAC University. The Training Center has been visited by Dr. Md. Shawkat Ali, Civil Surgeon, Nilphamari district, Dr. Israt Nayer, Project Manager-HRH Project, Plan Bangladesh Country Office, Dr. M H Faruque, Asst Professor, Dept. of Public Health, State University of Bangladesh. LAMB Training Center not only trains its staff and outsiders, but also organizes training in house and outside for its resource people in order to maintain quality and standard of training provided.

Management Information Systems and Research (MIS-R)

MIS-R has two main foci: 1. Collecting and entering information on hospital and community beneficiaries and programs and reporting it in a way that is useful to LAMB managers, Government and donors; and 2. Carrying out research which will help us better evaluate the impact of our current interventions or develop new or improved interventions and contribute to national health policy.

Household and wealth asset surveys were completed in an additional number of community target unions in 2012, and child



health registers updated in all core and LAMB-PLAN partnership unions, enabling us to better evaluate how well we are getting services to and improving health outcomes for our target

population: women, children and the poor. Hospital reporting continues to be refined and developed based on management needs. In 2012 reporting on use of poor fund and more detailed reporting on fistula patients was added.

Two nutrition related research projects continued in LAMB working areas: 1. A five year clinical trial by UC Davis and ICDDR,B into use of nutritional supplements to improve outcomes for pregnant women and their children, and, 2. Evaluation of length of training for grass roots health workers and length of home-visit follow up by health workers on infant and young child feeding practices for Alive and Thrive, Bangladesh.

Analysis of hospital delivery data by a team from Arizona State University and LAMB was done to assess the relationship between use of oxytoxic medications pre-admission and newborn outcomes. This will be followed up by further exploration of home labor practices and decision making regarding oxytoxic use in the community in 2013. A new collaborative study with Arizona State University exploring community relationships and helping networks also began in 2012.

A paper on characteristics of fistula patients at LAMB hospital and a poster on Fistula repair and re-integration were presented at the International ISOFS congress in Dhaka in November.

LAMB English Medium School

It is now over 16 years since the school was established and in 2012, the school had 128 students from both staff and non-staff families in the local area. Regardless of their financial or social status, education is equitable for all children who attend the school.

Students of LAMB English-Medium School are taught by professional and experienced national and expatriate teachers following the English National Curriculum. Currently 55% of students are boys and 45% are girls. The majority of students are staff children (75%) and the student population is spread across all levels of staff.



Management and Internal Operations

Admin

The support of all the services that are provided through LAMB, comes from the Admin department. This department is responsible for: Finance, HR, IT, Purchasing and Storekeeping, Transport, Maintenance, Security and Public Relations.

Some major support in 2012 was given to:

- Building of a new housing block on compound
- Building of a new floor on the Training Centre and in addition a new water tank for sufficient water supply
- Project on MNCS in 4 upazilas, which was closed in 2012
- Visits to government offices to obtain papers for expatriates and for the continuation of licenses needed

Finances

In 2012 LAMB income and expenditure was approximately US \$ 2.9 million, BDT 230 million. 19 % came from patients for fees and medicines, 9 % from outside organizations as fees for training and other services, 66 % was work done in partnership with institutional donors and 6% was given as private donations. Of the private donations approximately US \$ 142,000 was given for the Poor Fund

Public Relations

Over the past year, high level visits included teams from the Bangladesh Nursing Council, and the Bangladesh College of Physicians and Surgeons. Both have confirmed official recognition of LAMB's role in training nurses and doctors, respectively. Dinajpur district health and administrative senior officials visited several times as part of the process to confirm LAMB hospital licensing matters. We continue to have very close support from the Deputy



Commissioners, Civil Surgeons, and Deputy Directors of Family Planning of Dinajpur, Nilphamari and Rangpur for which we are very grateful. We hosted visits from NGO partners including Country Director of PLAN Bangladesh and the Chairman of Operation Cleft. In addition we were honoured by visits from our local MP, the State Minister for land, and also MP and well-known actor Md Asaduzzaman Noor.

Challenges and Strategies

The main current challenges are:

- Recruitment and retention of skilled qualified human resources, particularly but not only doctors, to this remote, rural setting
- Remoteness from the capital Dhaka, which makes it deficult to contrubute to policy-making circles and collaborate with national and international agencies
- Funds for new structures such as an out-patient area extension, the MIS-R department, and the school.

LAMB strategies are currently undergoing a major review, however the four major priorities identified until the end of 2016 are integration, learning, justice and holism.

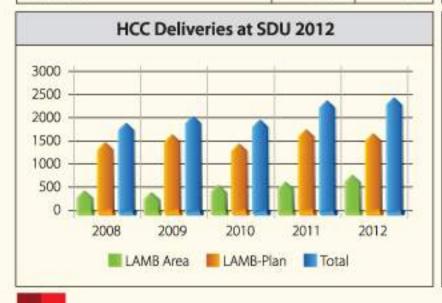
STATISTICAL DATA

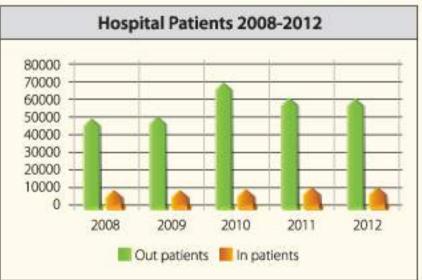
CHDP	2012	2011	
General Information			
Unions covered	60	29	
Villages/Wards covered	521	265	
Households covered	295524	138401	
Total Population	1772866	960616	
Health Care Centres (HCC)	28	28	
HCC with Safe Delivery Unit	18	17	
Family Welfare Centers (FWC)	14	3	
Community Clinic(CC)	414	0	
Health Teaching (29 unions)	984		
Mothers and Children	213383	203222	
Adolescents	11597	4205	
Trained Village Health Volunteers	1060	1400	
Community Health Workers	486	562	
HCC treated patients (28 unions)			
0-5 yrs old	5176	5614	
>5yrs old	26195	24701	
Antenatal Care	36126	38317	
Total deliveries			
(at SDU/FWC in 18 unions)	2453	2383	
Pregnancy surveillance	10550	10371	
Family planning number served	2947	3285	
Disability (clinics and centre)	5552.765		
Clinics	19	19	
Assistive devices distributed	363	249	
Teaching	45465	56796	
Referred patients			
(to LAMB rehab centre)	119	115	
Treated at LAMB Rehab centre	949 6		
TB Control Activities (4 upazilas)			
Sputum tests	6162	6468	
Patients - new and relapsed	669	700	
Patients- cured/ treatment over	s- cured/ treatment over 635		
Fistula/ Cleft activities			
Fistula workshops	31	19	
Attendees	1463	670	

HOSPITAL	2012	2011	
General Information			
Number of Beds	115	115	
In-patients			
Total	10251	9972	
Male	2873	2643	
Female	7378	7329	
<5 years	2764	2444	
Surgery patients			
- Caesarian Section	653	762	
- General surgery / Gynae	1142	1161	
Total Deliveries	3657	3821	
Medicine/ general patients	2688	2546	
Out-patients			
Total	59905	60710	
Male	21174	20682	
Female	38731	40028	
<5 years	5928	5849	
Antenatal	14621	15898	
Eye	552*	589*	
Medicine, surgery, gynecology	38804	38374	
Services			
Blood Transfusions	1421	1160	
Laboratory Tests	87371	87083	

Note: * The figure is excluded in the total

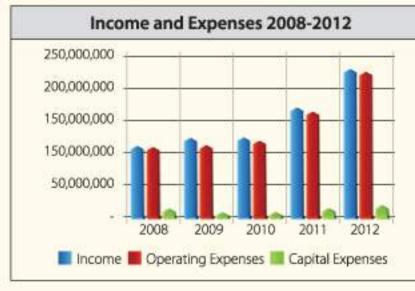
TRAINING CENTER	2012	2011	
Courses	21	18	
Trainees	932	795	
SCHOOL	2012	2011	
Students	128	125	
Teachers	22	19	
LAMB STAFF	2012	2011	
Total	1061	936	
Male	296		
Female	765 624		

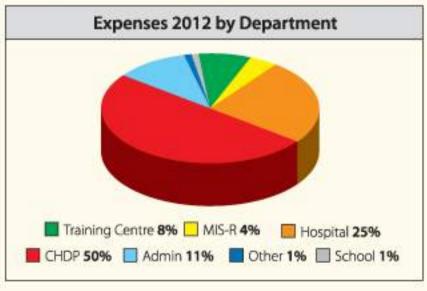


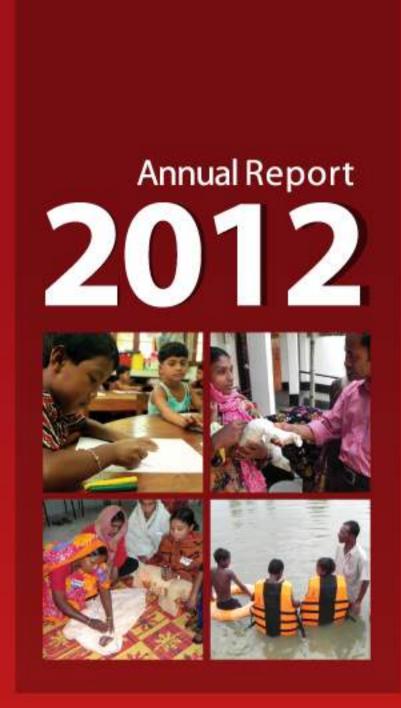


FINANCIAL STATEMENT 2012 (1ST JANUARY - 31ST DECEMBER)

Amounts in Taka	LAMB	LAMB-Plan partnership	MNCS-Unicef project	Total Year 2012	Total Year 2011
Income		2.0	1 10 10		
Hospital Fees and Medicine					
Paid by Patient	43,115,144			43,115,144	40,136,852
Paid by Poor Fund Subsidy	11,346,562			11,346,562	9,424,81
Total Hospital fees	54,461,706	4	*	54,461,706	49,561,66.
Training centre	12,404,874			12,404,874	7,758,810
School	2,902,787			2,902,787	2,498,710
Non-program income	5,599,796	26,000		5,625,796	6,691,70
Grants	55,363,924	64,366,778	31,950,182	151,680,884	98,594,64
Total Earned income	130,733,087	64,392,778	31,950,182	227,076,047	165,105,53.
Donations					
Overseas Donations	2,696,224		-	2,696,224	4,917,57
Total Donations to LAMB	2,696,224		+	2,696,224	4,917,57
Total Income	133,429,311	64,392,778	31,950,182	229,772,271	170,023,110
Expenses	33			1	
Operating Expenses	0.0000000000000000000000000000000000000	25-10-34 (2000) (Feb. 2010)	1200 C 100 C	***************************************	
Salary and Benefits	70,174,500	43,198,117	19,755,757	133,128,374	88,081,74
Drugs & Pharmaceuticals	14,374,088			14,374,088	13,525,31
Supply & Expenses	13,941,887	5,889,472	2,153,170	21,984,529	12,121,71.
Food	5,105,404	455,900	5,174	5,566,478	5,608,17
Travel/vehicle expenses	4,147,755	1,940,725	693,862	6,782,342	5,524,02
Building & Equipment maint.	4,308,819	120,464	18,261	4,447,544	8,917,97
Depreciation	6,099,594			6,099,594	5,389,27
Training	8,315,556	9,322,950	8,563,605	26,202,111	19,908,82
Other expenses	2,883,056	3,465,150	760,353	7,108,559	4,919,08
Total expenses	129,350,659	64,392,778	31,950,182	225,693,619	163,996,13
Operating result	4,078,652	5		4,078,652	6,026,97
Capital Expenditure					
Land	3 - 62 32 1-34 0-5 34 0-14			110000000000000000000000000000000000000	1,154,30
Building addition	12,198,381			12,198,381	6,922,16
Plant equip addition	5,103,552			5,103,552	4,003,93
Furniture	1,193,552			1,193,552	383,27
Vehicle/Bicycle addition	148,000		V	148,000	2,056,46
Total Capital Expenditure	18,643,485	-	180	18,643,485	14,520,12









World Mission Prayer League (LAMB Hospital) Reg. No. DSW/FDO/R-112

Head Office

Rajabashor, Parbatipur, Dinajpur-5250

E-mail: lamb@lambproject.org Phone: +88 05334 74277

Mobile: +88 01712 083675

Liaison Office

House-18 (2nd floor), Road-15, Block-D

Banani, Dhaka-1213

E-mail:dhakaoffice@lambproject.org

Tel/Fax:+88 02 8829846

www.lambproject.org