

ANNUAL
REPORT | 2013



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.

And within this -

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.

LAMB Strategic Priorities 2012-2016

INTEGRATION

LAMB is an integrated health and development organization. We will prioritise new initiatives that allow us to work together in an integrated way and that integrate well with existing work. We will plan collaboratively, communicate effectively, implement jointly, and serve one another, in partnership with others and with God.

LAMB works toward 'life in all its fullness,' which is the promise of Jesus. We will strengthen our commitment and our capacity to grow a balanced, holistic vision of health, which incorporates 5 dimensions – physical, mental, emotional, spiritual, social – and to implement it in all the ways we work currently, and in future projects, programmes and research.

HOLISM

LEARNING

LAMB is known as a center of excellence in health, research and education. We humbly seek to grow this reputation, through developing capacity to learn from experience, from our character as an intercultural mission, and from others, through good analysis, monitoring, evaluation and research. We seek new opportunities to share learning and to train others in areas of knowledge and skill.

LAMB believes justice is from God; it is about fairness to all - God's love at a population level. We will focus on justice in health. This includes fair access to quality health care and support of local initiatives that enhance health for all. We will prioritize initiatives that focus on health and justice together, and we will seek to model justice in our practices and systems.

JUSTICE



Message from the Board Chair 2013



As Chairman of LAMB's Board of Directors it is once more my pleasure to express the board's gratitude to LAMB's dedicated staff and generous donors and partners for a very productive year. While the Annual Report emphasizes the quantitative aspects of LAMB's work, the unique characteristic of LAMB's work is the spirit in which it is done. LAMB leadership's commitment to demonstrating Biblical values at all levels within the organization ensures that LAMB's beneficiaries experience a level of quality and heartfelt care unavailable elsewhere in Bangladesh. Please join us in thanking God for his provision and guidance for last year and the year to come.

Terry Beyer
WMPL
Chairman

LAMB Board



[From left: Monique de Groot, Dr. Craig Meisner, Dr. Nelly Saha, Terry Beyer, John Marsden, Labio Leon Bala. Missing: Nancy TenBroek, Keiko Butterworth]

LAMB in 2013

From small beginnings in the 1970s providing mobile health education and treatment, LAMB has grown significantly over the decades. In 2013, LAMB provided its field services to a population of around 5 million in four districts, while demand also continues to grow for the centre-based services of LAMB. Our development partners in 2013 included the Government of Bangladesh (GoB), PLAN International, TEAR Fund, ICDDR,B, CIDA, DFID, USAID, KOICA, WHO, BRAC Institute of Global Health, Engender Health, World Renew, Walk for Life, Operation Cleft, University of California, Davis, Arizona State University, the Glencoe Foundation, Interserve, Global Care, Women's Hope International, Severance Hospital, Korea, Liebenzell Mission, Good Samaritan Society, and many others, local and international. We are very 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. In 2013 we celebrated the lives and mourned the loss of former LAMB Executive Director, Peter May, and a LAMB founder, Rev. John Ottesen.

Facilities:

- A 115 bed hospital, with capacity for up to 150.
- 16 health care centres run by community-based organizations (CBOs) and supported by LAMB, 15 of which incorporated safe delivery units (SDUs) with 24 hour coverage of community skilled birth attendants (CSBAs)
- 24 outreach disability clinics
- 45 family welfare centres (FWCs) and 510 community clinics (CCs) of the GoB, supported by the LAMB-PLAN partnership
- Residential training centre
- Nursing institute
- Research unit
- English medium school
- Rehabilitation centre for disabled children
- Administrative support unit, 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 counseling; disaster risk reduction; community development; health technical support;
- Training: primarily health focused, though not exclusively; continued offering of a diploma of nursing and midwifery approved by the Bangladesh Nursing Council, also a diploma course in midwifery in partnership with the BRAC Institute of Global Health (BIGH)
- 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 1.5 million, with the core community health and development program (CHDP) covering around 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. These services cover a population of around 5 million
- The TEAR Fund-supported Disaster Risk Reduction (DRR) program completed its initial phase with a plan to work in two new upazilas in 2014

Staff:

- By the end of 2013, LAMB had 949 staff, with an additional 846 volunteers, including 23 expatriates

Major Achievements in 2013

- Skilled attendance at birth in LAMB core CHDP area rose to 69% (25% in overall Bangladesh in 2011) and maternal mortality fell to 130/100,000 (199 in Bangladesh in 2010)
- Neonatal mortality rate in LAMB core area fell to 21/1000 (32 in overall Bangladesh in 2011)
- There were over 3600 deliveries in LAMB hospital, with a Caesarian section rate of only 20%
- 124 obstetric fistula operations were performed
- 45 GoB FWCs were re-activated as places for safe normal delivery
- There were nearly 4342 births attended by LAMB and LAMB-PLAN skilled birth attendants in the community, most of them in FWCs where previously few births had taken place
- There remained over 10000 inpatient admissions, and nearly 60000 outpatient visits to the Hospital, despite significant political unrest
- Significant progress was made by local community organizations towards taking financial responsibilities 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 2013

- Our old transformer was replaced by one powered for LAMB's needs
- A community-based Midwifery Diploma programme was launched with 30 students in January
- The Reliable Health Services (RHS) project was launched in 5 unions of Badarganj, funded by KOICA through Global Care
- A new water well and tower was completed and commissioned
- The first internationally-recognized SAFE course in Bangladesh was hosted at LAMB, facilitated by overseas experts on safe anaesthesiology for obstetric emergencies
- A conference for Medical Students was conducted at LAMB in October
- A first International Scientific Congress on Nutrition in north Bangladesh was conducted at LAMB in partnership between ICDDR,B, UC Davis, and LAMB, focused on the exciting interim results of the RangpurDinajpur Nutrition Study (RDNS) project

Community Health and Development Program (CHDP)

It is LAMB's pleasure to be a part of health care provision in north Bangladesh for over 35 years, addressing Millennium Development Goals (MDGs) 4 & 5 (reduce maternal and child morbidity and mortality) through our community health and development program. CHDP is working towards developing community based organizations (CBOs) for sustainable health services in the community, especially for the poor, and women and children. We thank our donors, supporters and partners for their continued invaluable support.

CHDP 2013 at a glance

Women and Their Children's Health(WATCH) Project

Jointly funded by CIDA and Plan International Canada with an aim to improve maternal, neonatal and child health for underserved population, this project is being implemented in Chirirbandar, Jaldhaka and Domar upazilas since January 2012. The aim is to build capacity of the community for recognizing, preventing and responding to basic Maternal, Newborn and Child Health (MNCH) issues at the household and community level, simultaneously improving the quality of health care services and accountability of health personnel through strengthening rural, women-friendly health care systems.

This project is contributing to achieving the national goals for MDG 4 & 5, in part by improving the infrastructure of FWCs and CCs as necessary, making them functional and strengthening and establishing referral systems for MNCH.

The project introduced Information Communication Technology for Health (ICT4H) approach through partnership with GoB MIS Director's office. Through this initiative project will ensure rapid generation and sharing of reliable data. 40 Community Health Workers (CHWs) are engaged in this new initiative, collecting data through Tablet PC.

Community Managed Health Care (CMHC) Program

CMHC is a long-term core partnership project of CHDP funded by Plan International, Bangladesh. Strategies for health service delivery include LAMB-run safe delivery units (SDUs) providing round-the-clock care by skilled birth attendants (CSBAs and nurse midwives). CHWs facilitate women's groups which develop local community mobilization initiatives to reduce social barriers to health. Trained volunteers act as household advocates for family health. CBO committee members have been trained in the basic issues of rural health clinic management including advocacy with GoB, financial management, staffing, patient flow, security, and integrated concerns of clinical services with social determinants of health. LAMB facilitates meetings of community leaders, Union Parishad and government health and family planning department staff to develop accountability mechanisms. The CMHC and the related, PLAN-funded, Women's Health through Community Mobilisation (WHCM) seek to strengthen 510 Community Clinic Management Groups in two districts to support CCs as functional and accessible rural primary health care service points.



CHW using Tablet PC

Reliable Health Services project (RHS)

CHDP is strengthening integrated primary health care system at community level by implementing Reliable Health Services (RHS) project in Badarganj upazilla assisted by Global Care and funded by Korean International Cooperation Agency (KOICA). This project works in 5 new unions of Badarganj upazila to increase access and sustain health services at community level,

managed by community groups together with respective GoB health authority. Two SDUs were opened in two unions with the help of Government Authority and total deliveries were 110.

Disaster Risk Reduction (DRR)

LAMB has successfully completed 3 years DRR work in partnership with TEAR Fund in December 2013. Project team worked with 37 communities under 22 unions in 4 districts for building disaster-resilient communities through local churches, as well as Ward Disaster Management Committees (WDMC). Activities included mobilization of local resources, alternative livelihood activities, disaster preparedness, information centre establishment, PAD groups, mitigation activities and emergency response. In 3 years the project recruited and trained 444 Volunteers at local level on emergency rescue, early warning and first aid system. LAMB DRR project will start new phase from January 2014 in two new upazilas namely Nawabganj and Kaunia.

Tuberculosis Control Program (TB)

LAMB has been working as part of the national TB control program for over 25 years in Parbatipur, Chirirbandar, Khansama and Saidpur upazilas. In 2013 a total of 873 patients were detected by lab sputum tests. The case notification rate was 111 per 100,000, over the national target, and the cure rate was 95% (national 93%).

Community Based Organization (CBO) Development

CHDP started CBO development many years ago, and this is operating in Chirirbandar and Badarganj upazilas, 7 CBOs are managing clinics by their own initiative and resources and supervision. So far CHDP has provided training to CBO leaders and continues technical support to run the health services in the community. In 2013 all CBOs conducted their annual general meetings and presented their budget and plans.



CBO member collecting funds

Non Communicable Disease (NCD) Project

This NCD project in Ramnathpur union of Badarganj upazila completed its one and half year term in December 2013, supported by WHO with technical assistance from GoB Bureau of Health and Education. The aim of the project was to sensitize and raise awareness of community and school students on non-communicable diseases and change life style to prevent and protect from NCDs.

RDNS Project

CHDP continued its 3rd year as implementing partner of Rangpur-Dinajpur Nutrition Study. CHWs provide supplements to pregnant mothers and their children in partnership with ICDDR,B and University of California, Davis while ensuring a sound primary health care system.

Early marriage can be stopped!

Alefa Begum is a poor women who lives in a village with her husband and four children. Though her family is poor and her husband is a day labourer, they manage to send their 14 year old daughter Rasheda to school, who reads in class eight. Alefa Begum, like other women in the community, worried about her daughter and therefore arranged her daughter's marriage with a disabled man who was from a rich family. She didn't even think she needed to talk to her daughter about the marriage. When Rasheda heard that her marriage was settled, she was shocked and did not agree to get married. At this time Rasheda noticed that LAMB's Adolescent Facilitator was in the village. She contacted her and shared her problems and feelings. The Adolescent Facilitator of WHCM program then took time to visit Alefa's family. She discussed with Alefa and her husband in detail about the potential problems their daughter might be facing if she gets married. Eventually Rasheda's parents were convinced to cancel the marriage plans and they promised not to make same mistake again. Rasheda is very happy to get her life back! She is encouraged to share this with her relatives and friends around her. She hopes through WHCM many adolescent girls will be protected from early marriage.



LAMB Hospital, Integrated Programs, Nursing

Hospital

We are grateful to God that 2013 was a blessed year for us. The Hospital maintained its good reputation throughout the year. The patient flow remained nearly unchanged despite significant political unrest in the country. The hospital was relatively well staffed although we were sad to farewell Dr. Felicity Mussell from LAMB in November 2013 after many years of service.

We had a lot of successes that gave us encouragement to continue our good work for the community.

Ayesha:

7 month-old Ayesha fell into a big pot of boiling water from his 7 yr old uncle's lap. Ayesha was badly burned over much of her body surface. Her parents, who are day-labourers, took her to LAMB immediately from 1 hour cycle distance on 18th November 2013. She had more than 30% burns. Ayesha received treatment for her acute burn but she developed surgical site infection. She had several times skin grafting, malnutrition (kwashiorkor), corneal scarring and several other complications. She had to stay nearly three months in the hospital but recovered and was discharged to her family's care.



Ayesha: After treatment

In 2013, we had...

- 3,624 deliveries including 715 Caesarean sections (20%)
- 1,924 other operations (Emergency 871, Elective 1053)
- 10,040 in-patient admissions (73% female and 27% male)
- 58,610 out-patient visits (this includes 8,947 children and 14,725 antenatal visits)
- 85,638 laboratory tests done
- 994 units of blood transfused
- 3,466 X-ray, 566 ECG and 5,659 Ultrasound scans done

Poor fund

In 2013, 3632 in-patients (37%) received subsidy from poor fund and 638 out patients (6.2%) received subsidy from the poor fund.

Story of Banu Begum:

Banu Begum and her husband Abdul Alim both live on begging. Abdul Alim is physically disabled. Banu heard that LAMB has treatment facilities for the poor. She has a 3 year old boy and this time she had to have a C-section for a baby girl. Her total treatment cost was Tk. 12,270 but she hardly managed to pay Tk. 1,000. Banu Begum was so happy she had the same care here at LAMB as others!



Banu Begum: Benefited from poor fund

Fistula Care

- Up to 2013, **737** Fistula patients have been screened and **662** fistulae have been repaired with a success rate of 81%
- **39** cured fistula clients were given training so they can work as Community Fistula Advocates. **24** were given tailoring training, **26** were given knitting, and **4** were given weaving training.
- In 2013, **124** Fistula operations were performed

Disability:

Currently 282 children receive treatment for club feet.

In 2013...

- 1457 patients received physiotherapy
- 1260 special needs children were seen in the rehab centre and a further 2740 in the community
- 493 assistive devices were distributed



Khalequl can see the sky

Nursing Institute

The LAMB Nursing Institute (LNI) is becoming more established. The first 15 students completed their second year and another batch started in January 2013. The LNI now has a total of 35 students. They live in a hostel on compound. Classes are taught by four full-time LNI staff and also by doctors, nurses and other health professionals from LAMB hospital and Training Center. The LNI students are proving to be a great asset for the hospital wards, joining hospital staff in hands-on care for many patients that come to LAMB hospital. Supervision of the nursing students is provided by nurse instructors as well as senior and junior nurses on the wards. Skills and competencies



Nursing student doing practical in hospital ward

are evaluated through practical exams in the skills labs and on the wards. Students are also gaining experience through placements in Dinajpur Medical College Hospital and in LAMB's community clinics. LAMB plans to take in a third batch in January 2014.

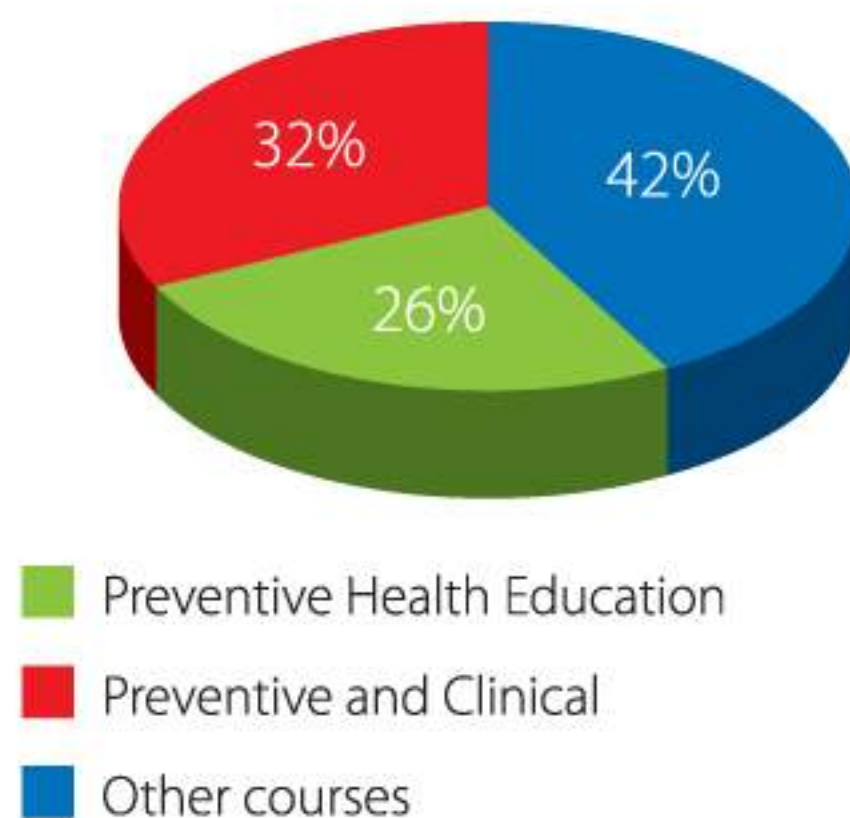
Training Centre

The Training Centre aims to develop skills and competent health service providers through quality training to serve the hardcore poor community especially in Maternal and Child Health. Training Centre offers more than 30 courses, and in 2013 more than 20 of these courses were run for different levels of CHWs, Health Volunteers, Community Midwives, Senior Nurses & Midwives, Paramedics, Doctors and Consultants from LAMB and other national and international organizations. Some on-demand training was also provided to different organizations e.g. Community Skilled Birth Attendant (CSBA), Community Midwifery Development Program (CMDP), which have attachment program in the community and in hospital for learning by doing practically. LAMB training centre also offers venue for large training programs eg. Safe Obstetric Anaesthesia course, where high level medical professionals participated.

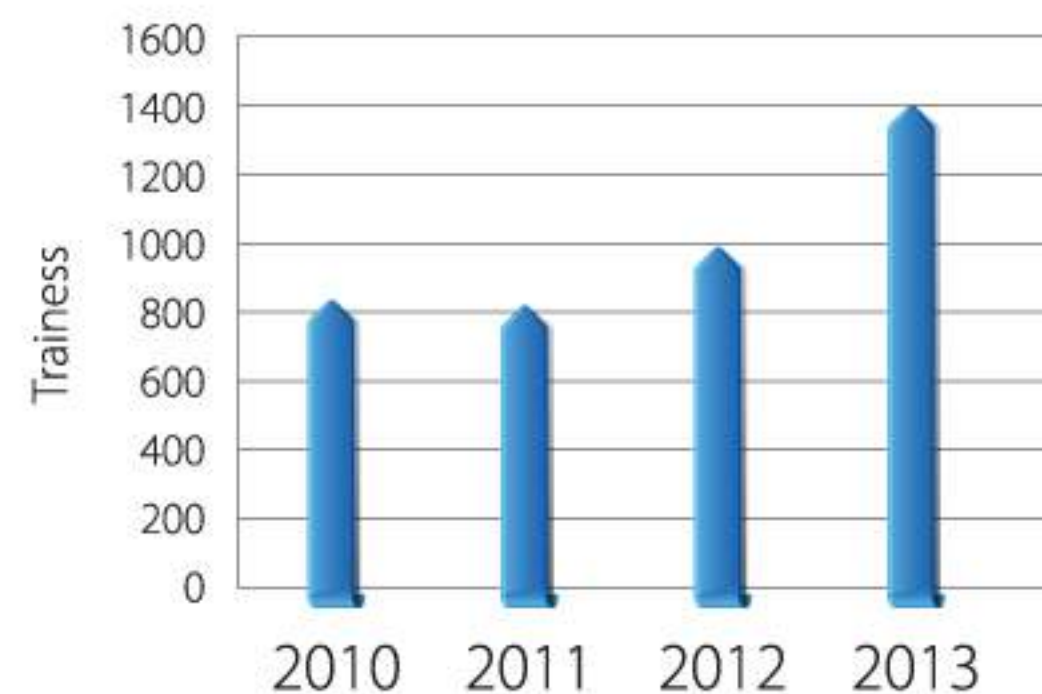


CSBA trainee operating autoclave during community attachment under supervision of a CMW

Trainees by Training Category in 2013



Year wise trainees trend



In a total of 25,226 trainee days in 2013, 1353 participants completed their training courses, 97% were for clinical and preventive Health Care Providers in the community. The remaining 3% were for Hospital Service Providers, trainers or clinical instructors and others.

Management Information Systems-Research (MIS-R)

The aim of the MIS-R department is to seek to help LAMB fulfill the organisational value “Model of Excellence: We will strive to monitor and evaluate all programmes, with research and dissemination of our methods and expertise as appropriate”.

MIS-R manages LAMB data for

1. LAMB departments, including health indicators for CHDP and LH, focusing on improved health for the poor (eg. skilled attendance at birth, causes of deaths etc)
2. Government reports /WHO surveillance
3. Research partners (quantitative and qualitative research).

In 2013 MIS-R

- Completed a three year project with Alive and Thrive, Bangladesh, ‘Scalability of an Infant and Young Child Feeding (IYCF) Intervention Package in Bangladesh’.
- Continued the 2nd year of research with Arizona State University, USA: “Community Co-operation”
- Assisted a UK Masters student with research into the role of occupational therapy in Bangladesh
- Continued 3rd year of research with ICDDR.B and UC Davis, USA “RangpurDinajpur Nutrition Study”

Publications by LAMB staff in 2013 include:

- “Global paediatric advanced life support: improving child survival in limited-resource settings” in the Lancet (Dr. Louise T Day and others).
- “The Bangladesh Clubfoot Project: The First 5000 feet” in the Journal of Pediatric Orthopaedics (Vikki Ford-Powell and others).
- “Profiles and experiences of women undergoing genital fistula repair: Findings from five countries” in Global Public Health: An International Journal for Research, Policy and Practice (Dr Felicity Mussell and others)
- “Hampton’s Hump in a Patient with Severe Left Ventricular Dysfunction and Biventricular Thrombosis” in Korean Circulation Journal (Drs Saidul Islam, James Hayton, and Dong-Yeon Kim.)



Interviewing a TBA

MIS-R Plans for 2014

- Disaster Risk Reduction Survey for CHDP
- Collaborative research on “Changing role of the Traditional Birth Attendant”
- Collaborative research on “Reconciliation”
- Beneficiary satisfaction survey for LAMB
- Community household surveys for CHDP areas
- Computerisation of the outpatient registration system for LAMB Hospital
- Follow up of proposals submitted for several research projects

LAMB English Medium School



Students taking part in Independence Day celebration activity

LAMB School is an integrated part of a varied and complex organisation. We work to provide for the needs of staff families from every department at LAMB. This is perhaps the most visible evidence of our integration. The school seeks to emulate all the strategic priorities of LAMB through the ethos of the school.

Our staff continue to develop their skills and humbly learn from the experiences and input we get. During last year 149 children were registered at the school at one time or other; 136 students when we had most. The fluctuation has been a natural consequence of staff comings and goings at LAMB.

During 2013 five students passed their O Level Exams, of these four have started their A Levels and one has started a pre-business course in preparation for studying for a BBA in 2014.

Our current students are from several different backgrounds as shown in the following: Bangali 67%, Santali 21%, Foreign 8%, Oraon 2%, Garo 2%.

Former students are studying or working in Australia, Canada, England, India, Italy, Malaysia, Sweden, The Netherlands and in the USA.



Students doing practical in the science lab

Management and Internal Operations

Admin

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

In 2013 the process was started to replace the transformer. The previous transformer had a capacity of 120 KVA, this has been replaced by a new one of 500 KVA. This gives us a capacity that is more than is currently needed, but anticipating more use of electricity in the future.

As mentioned earlier, 2013 was difficult as there were many hartals, which affected the work severely. The Vehicle Maintenance was not able to go out with the cars, the transport of materials and people was difficult and purchasing was sometimes delayed. We hope 2014 will be more peaceful.



District level monthly health coordination meeting held at LAMB

Public Relations:

Over the past year Abul Hasan Mahmud Ali, MP (Minister for Disaster Management and Relief), and Md. Nurun Nabi Talukder, DG, NGO Affairs Bureau visited LAMB. Besides, the Divisional Health Director – Rangpur, CS Rangpur and Dinajpur, high level officials from different NGOs, private and government hospitals, embassies and partner organizations visited LAMB. One of the monthly district level health meetings of Rangpur district was held at LAMB.

Challenges and Strategies

Our main current challenges are:

- Roll-out and embedding of our Strategic Priorities of Integration, Learning, Justice and Holism.
- Sustainability of primary health care services for the rural poor after project closure
- Recruitment and retention of skilled qualified human resources to this remote, rural setting
- Remoteness from the capital Dhaka, which presents challenges in being able to input into policy-making circles and in working with national and international agencies
- Funds for extensions to out-patients and inpatients, the MIS-R department, and the school.

Statistical Data

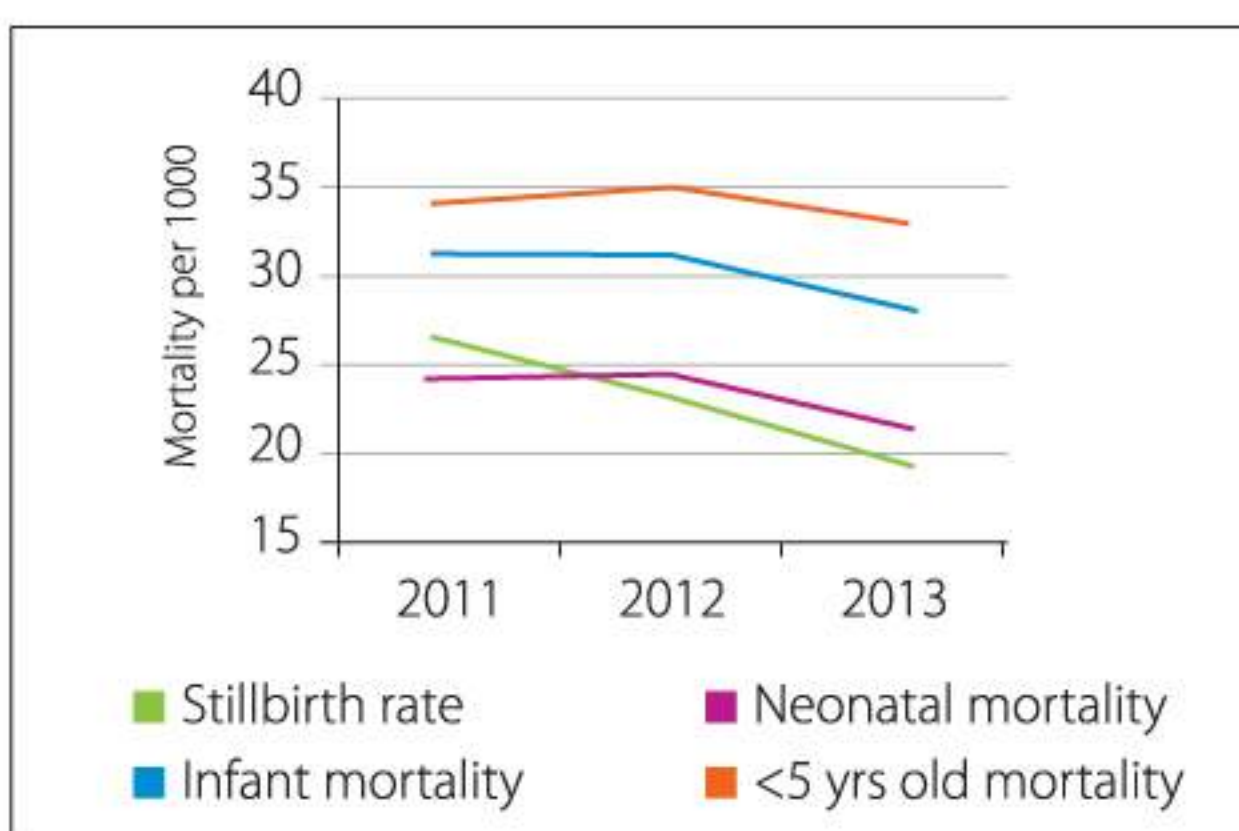
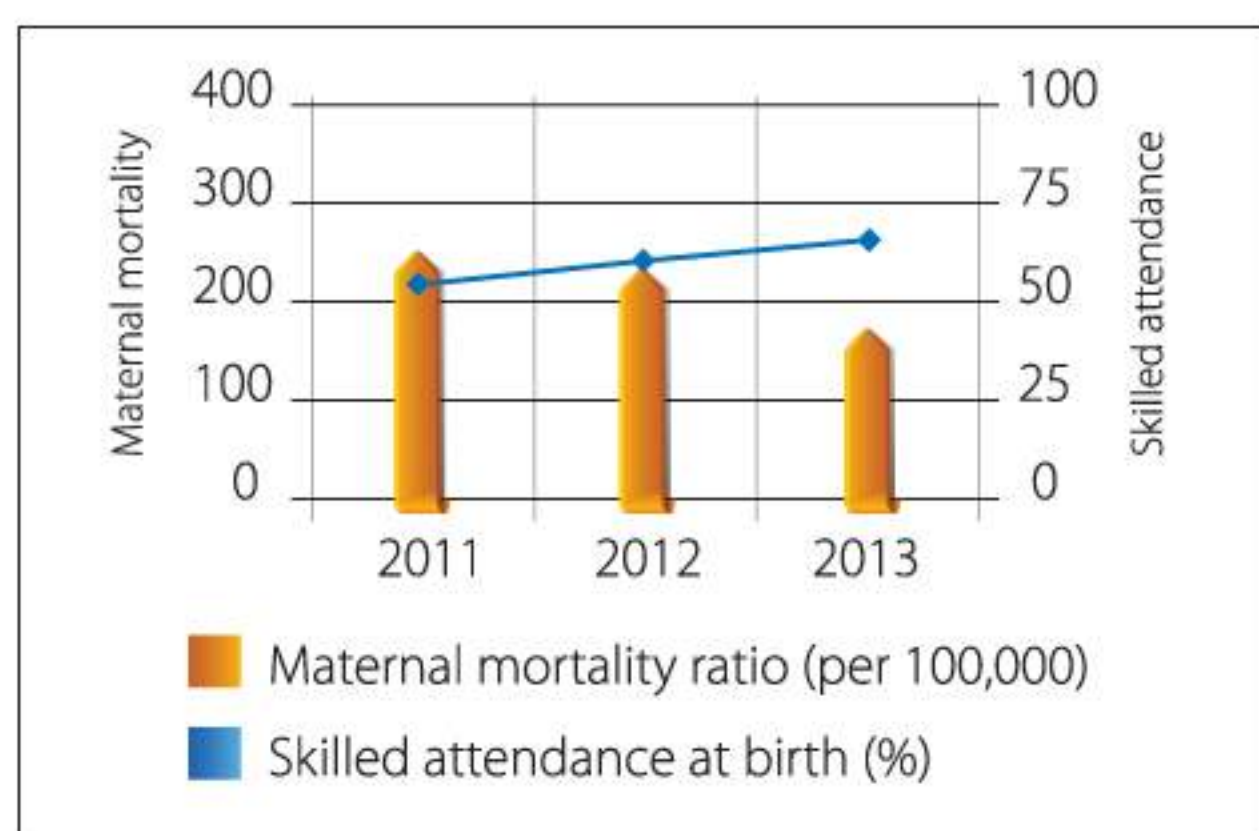
CHDP	2013	2012
General Information		
Upazillas working in	21	23
Total Population estimate	5 million	5 million
Community Health Workers	389	486
Trained Village Health Volunteers	846	1,464
Mother child health (MCH)	65 unions	60 union
Villages covered	599	521
Households covered	323,561	295,524
Safe Delivery Unit	15	18
Family Welfare Centers (FWC)	45	14
Community Clinic(CC)	510	414
C-SBA/nurse	140	91
MCH SDU data (LAMB data)	15 unions	28 unions
Antenatal Care	22,936	36,126
Family planning	4,775	6,865
Child 0-4 yrs old	2,687	5,176
Child >5yrs, adult	16,156	26,195
Total deliveries in LAMB SDU	1,704 (15 unions)	2,453 (18 unions)
Pregnancy surveillance	10,162 (21 unions)	10,550 (21 unions)
MCH FWC data (GOB data)	45 unions	14 unions
0-5 yrs old	41,226	not known
>5yrs old	187,898	not known
Antenatal Care	30,088	not known
Family planning	25,174	not known
Total deliveries in FWC	2,638	not known
MCH CC data (GOB data)	510 clinics	414 clinics
Total patients	4,473,399	3,988,496
Adolescent Health	8 unions	8 unions
Teaching/ counseling	13,377	11,597
Library	57	57
Theatre for development	22	22
Disability (Clinics and centre)	4 upazillas	
Clinics	24	19
Assisted devices distributed	493	363
Health Teaching	72,893	45,465
Referred to LAMB Rehab centre	142	119
Treated at LAMB Rehab centre	1,254	949
TB Control Activities	4 upazillas	
Sputum tests	6,494	6,162
Patients - new and relapse	873	669
Patients- cured/ treatment complete	625	635
Disaster Risk Reduction	7 upazillas	
Awareness Session on DRR	499	1,386

HOSPITAL	2013	2012
General information		
Number of Beds	115	115
In-patients		
Total	10,040	10,250
Male	2,716	2,872
Female	7,324	7,378
Obstetric	4,392	4,492
Children 0-4 years	2,522	2,702
Children 5-14 years	380	361
Medicine, surgery, gynaecology	2,746	2,695
Operation /procedure done		
Mothers delivered	3,624	3,657
Caesarian Section	715	653
General surgery/ gynae	1,091	1,142
Obstetric fistula cases	122	78
Club foot treated	55	52
Out-patients		
Total	58,610	59,905
Male	19,698	21,174
Female	38,912	38,731
Antenatal	14,725	14,621
Children 0-4 years	5,739	5,928
Children 5-14 years	3,208	2,731
Medicine, surgery, gynecology	34,445	36,073
Eye	493	552
Services		
Blood Transfusions	994	1,421
Laboratory Tests	85,638	87,371
Fistula/ Cleft activities		
Fistula workshops	47	31
Workshop participants	2,383	1,463

TRAINING CENTER	2013	2012
Courses	17	21
Trainees	1,353	932

SCHOOL	2013	2012
Students	138	128
Teachers	22	22

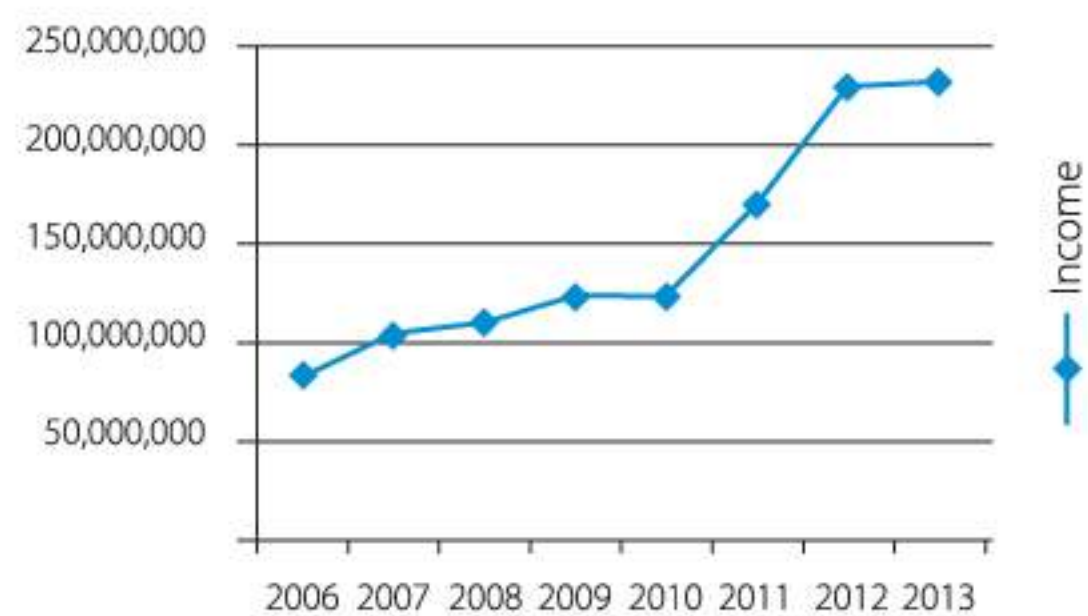
LAMB STAFF	2013	2012
Total	949	1,061
Male	307	296
Female	642	765



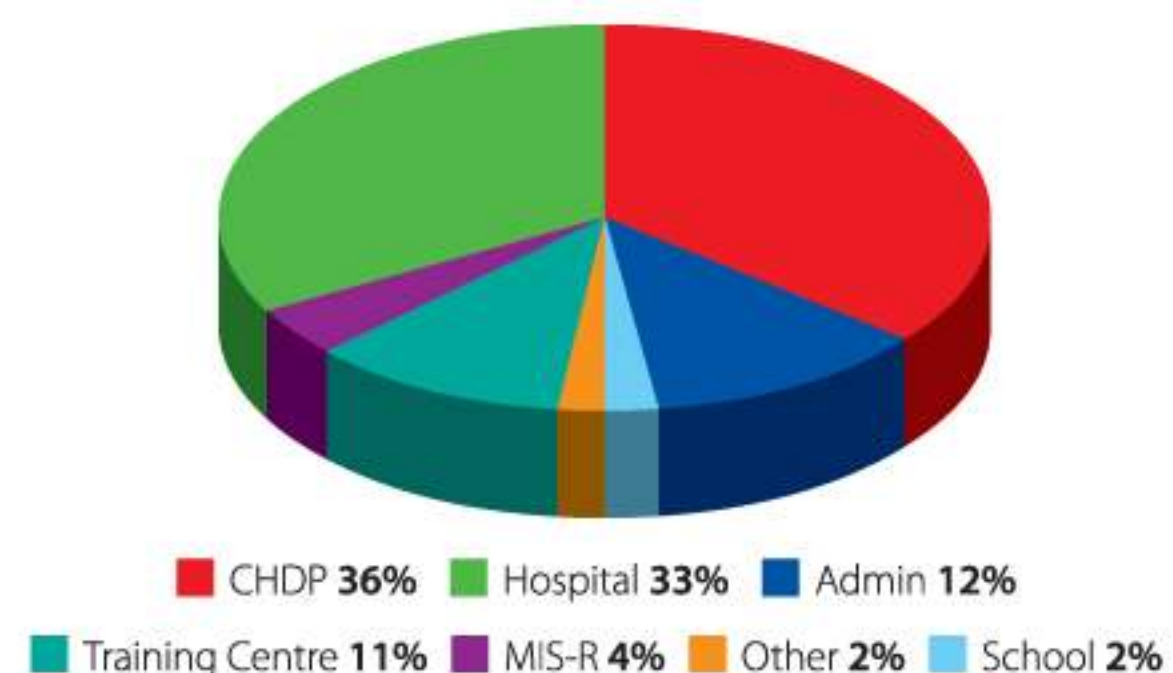
Financial Statement 2013 (1st January - 31st December)

Amounts in Taka	LAMB	LAMB-Plan partnership	Total Year 2013	Total Year 2012
Income				
Hospital Fees and Medicine Paid by Patient	42,682,510		42,682,510	43,115,144
Paid by Poor Fund Subsidy	16,297,242		16,297,242	11,346,562
Total Hospital fees	58,979,752	-	58,979,752	54,461,706
Training centre	5,569,454		5,569,454	12,404,874
School	3,065,780		3,065,780	2,902,787
Non-program income	13,575,819	8,314	13,584,133	5,625,796
Grants	71,245,818	75,035,110	146,280,928	151,680,884
Total Earned income	152,436,623	75,043,424	227,480,047	227,076,047
Donations	4,810,234		4,810,234	2,696,224
Total Donations to LAMB	4,810,234	-	4,810,234	2,696,224
Total Income	157,246,857	75,043,424	232,290,281	229,772,271
Expenses				
Operating Expenses				
Salary and Benefits	81,653,160	49,482,966	131,136,126	133,128,374
Drugs & Pharmaceuticals	16,276,315		16,276,315	14,374,088
Supply & Expenses	16,528,391	5,868,651	22,397,042	21,984,529
Food	6,710,815	393,605	7,104,420	5,566,478
Travel/vehicle expenses	3,696,429	1,768,603	5,465,032	6,782,342
Building & Equipment maint.	3,683,788	7,162,210	10,845,998	4,447,544
Depreciation	6,723,400		6,723,400	6,099,594
Training	13,802,561	9,197,432	22,999,993	26,202,111
Other expenses	2,190,365	1,159,660	3,350,025	7,108,559
Total expenses	151,265,224	75,033,127	226,298,351	225,693,619
Operating result	5,981,633	10,297	5,991,930	4,078,652
Capital Expenditure				
Land	-		-	-
Building addition	-		-	12,198,381
Plant equip addition	1,635,237		1,635,237	5,103,552
Furniture	532,898		532,898	1,193,552
Vehicle/Bicycle addition	-		-	148,000
Total Capital Expenditure	2,168,135	-	2,168,135	18,643,485

LAMB Income over last 8 years



Expenses 2013 by Department %



You are in our heart



REV. JOHN OTTESEN
Founder Member of LAMB

Born: 19 April 1926
Died: 22 December 2012



LAMB

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

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