Everyone Deserves High Quality Healthcare
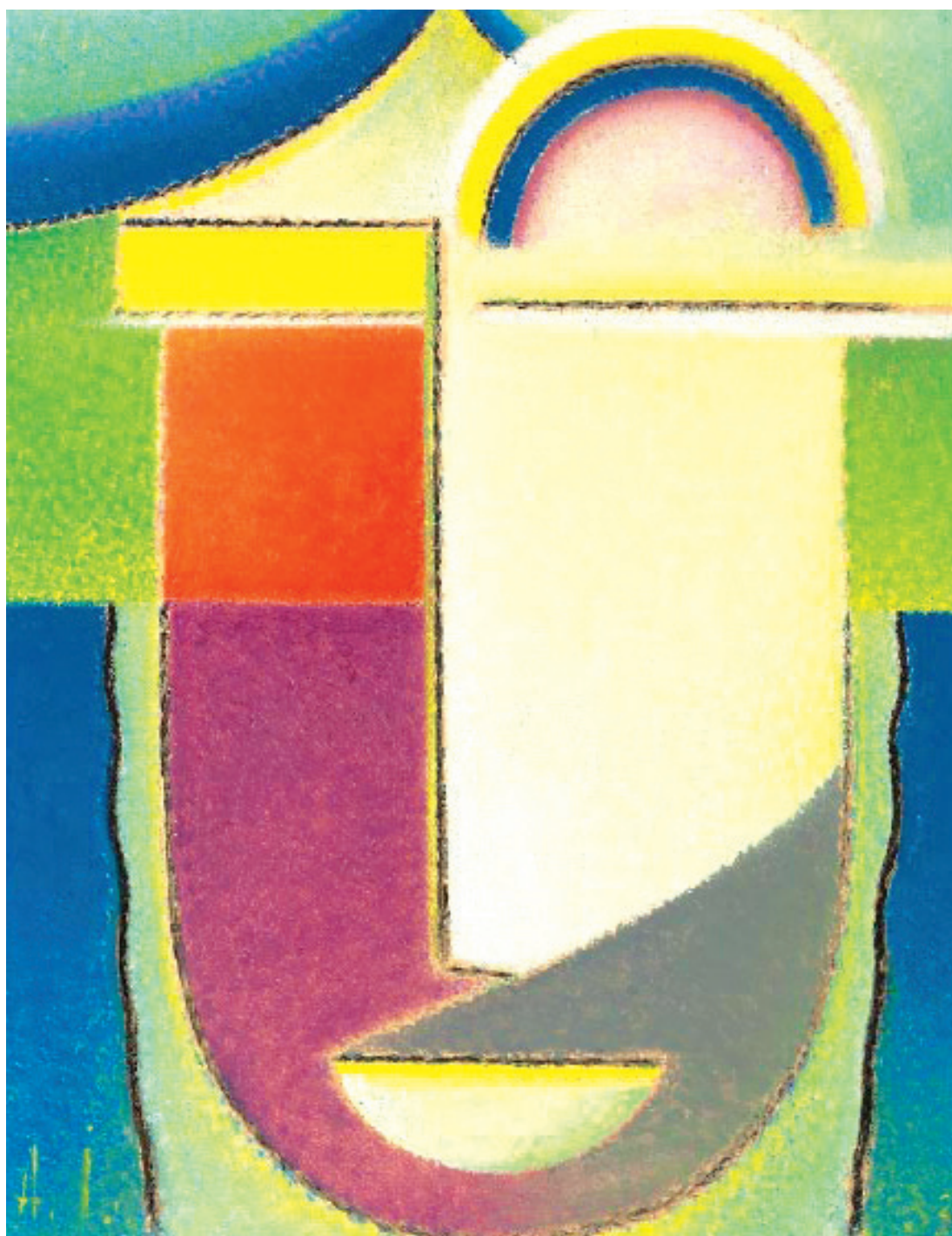
ACCESS
health international

A N N U A L
R E P O R T
2 0 1 4

Our vision is that
all people, no matter
where they live,
have a right to
access high quality
and affordable
healthcare.

INDEX

CHAIRMAN'S MESSAGE

Dear Friends and Supporters,

The year 2014 was one of progress and growth of ACCESS Health International.

We strengthened and broadened our senior management group.

Sofi Bergkvist assumed her responsibilities as Executive Director of ACCESS Health, supervising our activities across all countries. Sofi previously led our work in India as Country Manager.

Siddhartha Bhattacharya, was recruited as Country Director, India. Siddhartha oversees our ever growing activities in India. He was most recently Chief Operating Officer of the Emergency Management and Research Institute of India.

We recruited Chang Liu, a professor at Duke-NUS Medical School in Singapore, as Managing Director for Singapore, Mainland China, and Hong Kong. His appointment consolidated our work in Singapore and initiated our work in mainland China and Hong Kong.

We increased and broadened our support.

Our annual income of three million dollars more than doubled from the previous year. We received support from the Children's Investment Fund Foundation to improve the quality of care available to neonates in the neonatal intensive care units in India.

We received a grant from the Bill & Melinda Gates Foundation to expand our work on primary care in India, beginning with the state of Uttar Pradesh.

We received support from Harnessing Non-State Actors for Better Health for the Poor (HANSHEP) to strengthen public private partnerships in healthcare delivery.

We expanded the scope of our research and advisory services

Healthcare financing and healthcare systems delivery have been the mainstay of our work in India and in other countries. We continued this work with the support of the Rockefeller Foundation in partnership with Results for Development, serving a co-secretariat and manager of the Joint Learning Fund for the Joint Learning Network for Universal Health Coverage.

In 2014, we added Quality and Process Improvement in healthcare as a new focus area. We work with state sponsored healthcare programs in India to reduce neonatal mortality in high incidence areas.

We also increased our focus on elder care in Singapore and Sweden. Modern Aging Sweden, a program to encourage young entrepreneurs to create businesses for the elderly, was successfully completed. We began to explore opportunities to expand our work in elder care in the United States, Singapore, and mainland China.

We thank you for your continued interest and support.

William A. Haseltine
Chairman and President

5

EXECUTIVE DIRECTOR'S MESSAGE

Dear Friends,

Looking back at 2014, it was one of the most important years in the history of ACCESS Health International. We reached several milestones, and new team members joined to bring the work to new levels.

We started the year convinced that we had found a new way of working to spread good practices across healthcare providers. We had just completed our first program to improve quality of care across many hospitals in newborn care and eye care. We were positively surprised with the outcomes. We had also established strong relationships with government funded insurance programs through our health financing work. These programs purchase healthcare services from public and private hospitals. Our dream was to bring these two areas of work together to make a difference to the health system and touch more lives, spreading quality improvement work in partnership with government funded insurance programs. This happened in 2014. We partnered with two state governments in India to bring to scale the work on quality improvement for newborn care. The launch of this work on health system change was a major milestone.

I believe the main change in 2014 was the recruitment of Siddhartha Bhattacharya to lead our work in India and Chang Liu to launch our work in China and lead our work in Singapore. They joined ACCESS Health with unique experiences that will influence the growth of the organization in the years to come.

Our work grew across geographies, with new team members and new funding partners in 2014. This growth puts more pressure on the organization to professionalize management and standardize processes. Priya Anant was promoted to Chief Operating Officer for our global operations to strengthen the administrative process across the countries of operations. I know this investment and commitment is critical as we evolve our culture and continue to be a place for smart and curious people to do great work.

As Executive Director, I am committed to guiding and supporting the team to take on new approaches and challenges in the work toward our vision that all people, not matter where they live, have the right to access high quality and affordable healthcare.

I want to thank all of our partners joining us in these efforts.

Sofi Bergkvist
Executive Director
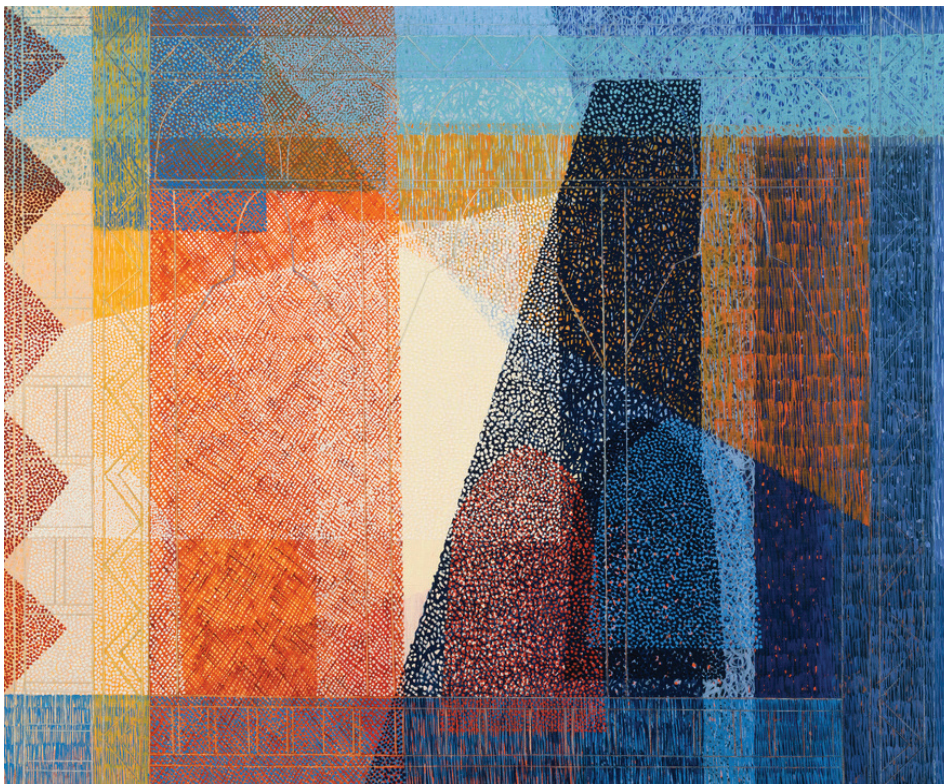
ACCESS Health India

Siddhartha Bhattacharya
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Team Building

The ACCESS Health team almost doubled in size during the year. The Board of Directors of ACCESS Health appointed Siddhartha Bhattacharya as Country Director, India. Most recently, Mr. Bhattacharya was chief of operations and technology for the Emergency Management and Research Institute, a not for profit foundation that provides emergency services to more than 750 million people in India. Siddhartha assumed the responsibilities of the previous Country Director, India, Sofi Bergkvist, who was appointed Executive Director of ACCESS Health International.

Projects

Safe Care, Saving Lives

ACCESS Health launched the Safe Care, Saving Lives project in partnership with the governments of Andhra Pradesh and Telangana. The program is implemented in partnership with the government sponsored insurance program. The aim is to reduce infant mortality by twenty five percent in public and private hospitals. By the end of 2014, all twenty five participating hospitals had functional quality improvement teams.

Safe Care Saving Lives is funded by the Children's Investment Fund Foundation and the Aarogyasri Health Care Trust.

Health Financing Support Program

The government of Madhya Pradesh asked ACCESS Health to help assess the health system in two districts. We will also help the government set priorities to reduce infant and maternal mortality through health financing reforms in the state. ACCESS Health reviewed evidence about current national and state reforms in health financing in India.

ACCESS Health has a mandate to help low income countries benefit from expertise in health financing in India. We established partnerships in Ethiopia, Bangladesh, and Mozambique for the program.

The Health Financing Support Program is supported by the UK Department for International Development (DFID).

Primary Care Pilot Program

ACCESS Health is working with the Bill & Melinda Gates Foundation to design a pilot program in Uttar Pradesh. The program goal is to improve the primary healthcare system based on best practices in India and other countries. The program will align payments for primary care with service delivery. The pilot program will serve as a demonstration site for Uttar Pradesh, the national government, and other states.

The Joint Learning Network for Universal Health Coverage and the Joint Learning Fund

ACCESS Health manages the Joint Learning Fund of the Joint Learning Network for Universal Health Coverage. We also support the coordination of the Steering Group and Country Core Groups of the Network. In 2014, ACCESS Health was selected to manage the next phase of the Costing Collaborative. The Costing Collaborative is an initiative to help countries estimate the costs of healthcare services. We also received a grant from Results for Development to support the assessment of primary care by the governments of Tamil Nadu and Kerala.

Center for Health Market Innovations

In 2014, we identified and documented more than twenty innovations in healthcare, including health technology innovations, service delivery innovations, and low cost diagnostics products. We organized events to improve the dialogue between innovators and governments. We also launched the Center for Health Market Innovations Learning Exchange. The Learning Exchange supports joint learning between innovative healthcare organizations.

Public Private Partnerships Project

The Public Private Partnerships Project strengthens capacity to improve the quality of public and private sector collaborations in healthcare. The project is funded by Harnessing Non-State Actors for Better Health for the Poor. In 2014, ACCESS Health assessed private sector engagement in health in the state of Rajasthan. In October, Rajasthan engaged us to draft a policy for public private partnerships in health and to establish a health specific cell to support partnerships in the state. The state also engaged us to build the capacity of the cell to implement the new policy.

Kerala Neonatal Quality Collaborative

The Kerala Neonatal Quality Collaborative is a learning collaborative to improve neonatal care in the state of Kerala. In 2014, the Kerala Neonatal Quality Collaborative team organized workshops for practitioners. We also formed an expert group to develop a set of evidence based interventions to improve neonatal care. The group developed interventions for sixteen areas of neonatal care. These interventions have been published by the government. The project team selected fifteen public hospitals and two private hospitals to participate in the collaborative.
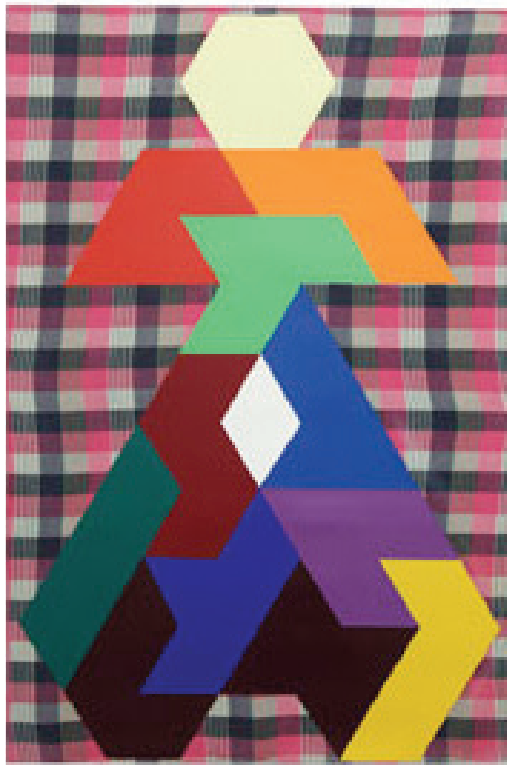
ACCESS Health Singapore

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Team Building

In 2104, Adrienne Mendenhall, Country Manager for Singapore, was joined by Chang Liu to oversee and cultivate programs of regional expansion. Together, they have developed the programs Modern Aging and Stay Young Navigators. The teams to support these programs will grow in 2015.

Projects

Modern Aging

Adrienne Mendenhall and Chang Liu received funding from the Ministry of Health in Singapore and NUS Enterprise to create an educational program to encourage Singaporeans to create new businesses to meet the needs of the elderly. The program is called Modern Aging. Partners for the Modern Aging program include NUS Enterprise, the Duke-NUS Graduate Medical School Center for Aging Research and Education.

Modern Aging Singapore builds on the success of the 2013 Modern Aging program in Sweden.

Stay Young Navigators

ACCESS Health Singapore developed the Stay Young Navigators program in collaboration with Dr. Michelle Thai, an American physician, and the Alexandra Health System in Singapore. Stay Young Navigators trains and employs the younger old to help the older old navigate community and healthcare resources. Navigators provide education and motivation for hard to reach elders to help them manage their chronic conditions. Our partners include Duke-NUS Graduate Medical School Center for Aging Research and Education and the Alexandra Health System. Stay Young Navigators is partially funded by Medtronic. The program is scheduled to begin in late 2015.
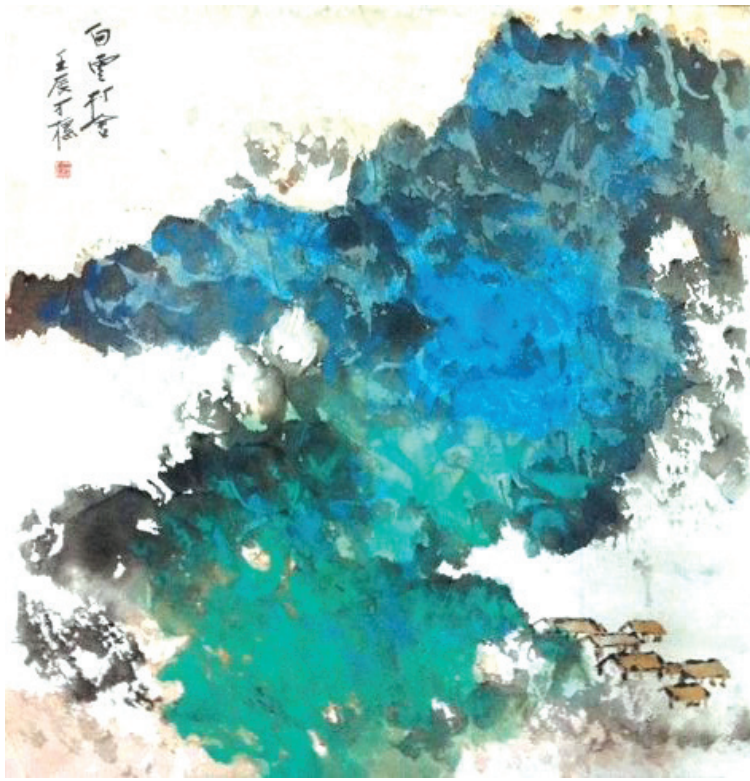
ACCESS Health China

Chang Liu
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Team Building

In 2014, we expanded our work in Asia with work in mainland China, under the direction of Chang Liu, Managing Director for Singapore, Mainland China, and Hong Kong. ACCESS Health is actively recruiting members for these teams.

Partnerships

Over the past year, ACCESS Health has established partnerships in mainland China and Hong Kong. Our partners include Peking University, the Strategic Alliance for the Medical and Healthcare Industry of China, the China Social Worker Association, the International China Ageing Industry Association, NYU-Shanghai, the Peking Union Medical School, and the World Bank.

Projects

The Joint Learning Network for Evolving Health Systems

The Joint Learning Network for Evolving Health Systems will focus on government healthcare policy in mainland China and Hong Kong. ACCESS Health International plans to contribute to healthcare reform in China through the Joint Learning Network for Evolving Health Systems. We will assist policymakers in the design and implementation of healthcare and social systems.

The Joint Learning Network for Evolving Health Systems adopts and builds on the knowledge sharing and joint learning model from our work with the Joint Learning Network for Universal Health Coverage in India, Indonesia, and the Philippines.

Modern Aging

ACCESS Health intends to establish Modern Aging programs in mainland China and Hong Kong. Modern Aging is designed to encourage the creation of new companies that address the needs of the elderly. These programs will be modeled on the Modern Aging programs of Singapore and Sweden.

Elder Care Training

ACCESS Health China has the opportunity to create content for the training of caregivers for the elderly. We have been asked by the Chinese Social Workers Association to develop a training program for elder care social workers and elder care facility managers. We are also developing the Health Leadership and Executive Training project for elder care policymakers, in collaboration with the Social Workers Association.

Mainland China-Taiwan Project

We are planning to create a joint learning center for health policymakers and the private sector. This joint learning center will support knowledge sharing between mainland China and Taiwan. This project focuses on elder care.

ACCESS Health Sweden

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Team Building

Sofia Widén joined ACCESS Health Sweden as a Program Manager. Sofia analyzes and documents best practices in elder care in Sweden and the Baltic region. Sofia plans to integrate studies of elder care in Sweden with work in elder care in Singapore, Hong Kong, mainland China, India, and the United States.

Projects

Modern Aging

Sofia Widén's initial task was to edit the presentations from Modern Aging Sweden for publication. She prepared this vast body of information for publication as an eBook in 2015, titled *Modern Aging: A Practical Guide for Developers, Entrepreneurs, and Startups in the Silver Market.*

Elder Care Case Studies

Sofia Widén began a series of case studies on elder care in Sweden. By the end of 2014, she had completed a summary titled *Patient Centered Swedish Healthcare* and had begun work on several other case studies for publication in 2015.

ACCESS Health Hong Kong

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Team Building

In 2014, we expanded our work in Asia with work in Hong Kong. In 2014, we focused our initial efforts on team building, office registration, partnership cultivation, and project development and design.

Partnerships

Over the past year, we have established partnerships with the Chinese University of Hong Kong and the International China Ageing Industry Association.

ACCESS Health United States

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Team Building

In 2014, Sofi Bergkvist, Executive Director, and Susan Wile Schwarz, Director of Communications, joined the office in New York. Sofi Bergkvist leads the strategic direction of ACCESS Health International and oversees the development and management of all programs, projects, and staff in the eight countries in which we work. She is also working with William Haseltine to develop a strategy for ACCESS Health in the United States. Susan Wile Schwarz oversees content, branding, and general communications strategies for the global team.
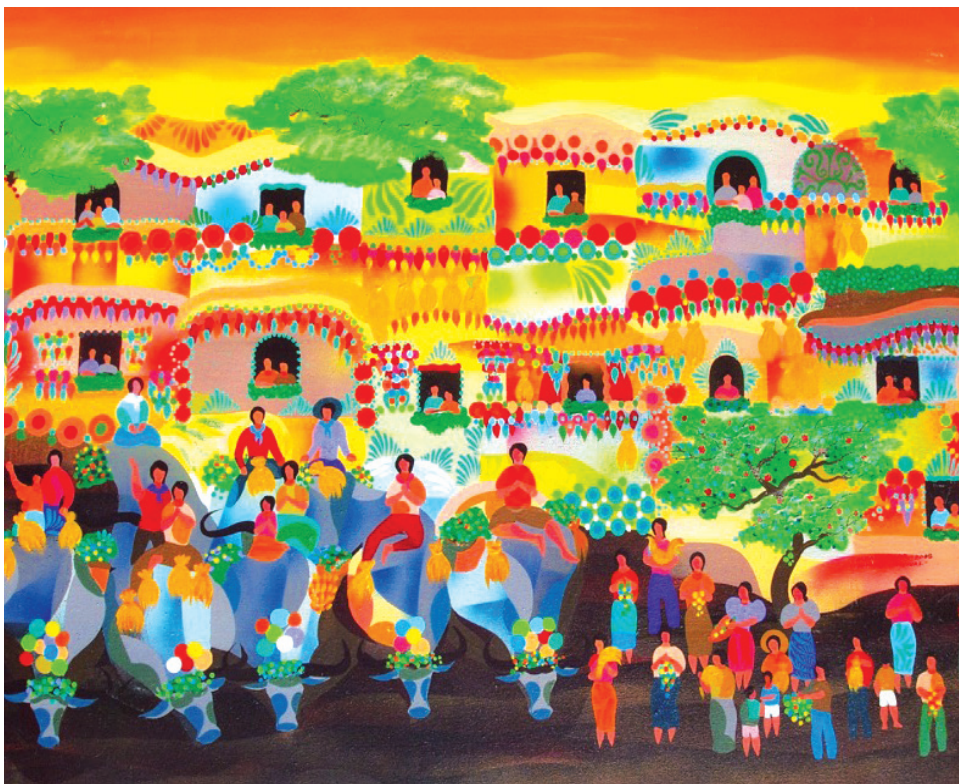
ACCESS Health Philippines

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Team Building

Vera Siesjö was appointed Country Manager of ACCESS Health Philippines in early 2014. Vera has a background in public health and has managed healthcare projects in several countries.

Partnerships

ACCESS Health Philippines formed partnerships with the Rotary Club of the Philippines and the Asian Pacific Observatory for Health Systems and Policies.

Projects

The e-AKaP Project (e-Action for Universal Health Coverage)

In March, ACCESS Health Philippines launched the e-AKaP Project in Bagong Silang, Caloocan City, Philippines. The e-AKaP Project uses a mobile health application to improve the efficiency and effectiveness of frontline health workers called community health team partners.

The e-AKaP Project provided more than one hundred health workers with a tablet containing a mobile health application that allows the workers to profile households, develop health use plans, and to deliver standard health messages to household members. The mobile health application also helps health workers refer patients to healthcare facilities and monitor adherence to treatment. Six thousand families participated in the initial project.

An economic evaluation report by the University of the Philippines Econ Foundation showed that the e-AKaP application produces an annual savings of about two hundred US dollars per health worker. In late 2014, we analyzed data from the first project round and began making improvements based on the results.

Stop TB Now Project

In April, ACCESS Health signed a memorandum of agreement with the Rotary Club of Makati and Kabisig ng Kalahi to develop the Stop TB Now Project. The project provides continuous capacity building and tuberculosis control training for local health workers in the fight against tuberculosis in children. We launched the project in Manila in June and in Laguna in September. ACCESS Health is contracted to conduct an evaluation of the project.

Joint Learning Network for Universal Health Coverage

The Philippines is a member of the Joint Learning Network for Universal Health Coverage. Activities included hosting a meeting on the Primary Healthcare Assessment Tool in April, attending a meeting of the Population Coverage Technical Collaboration Team, and participating in the Information Technology Technical Collaboration Team Meeting.

ACCESS Health organized site visits for delegations from all nine Network countries – Ghana, India, Indonesia, Kenya, Malaysia, Mali, Nigeria, Philippines, and Vietnam – to hospitals, primary healthcare facilities, and PhilHealth regional offices. We also prepared background papers and policy briefs related to the technical initiatives of the Joint Learning Network. We provided logistical support to PhilHealth and Results for Development in organizing Joint Learning Network activities.

ACCESS Health Morocco

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Partnerships

In 2014, ACCESS Health Morocco established partnerships with the public sector, the private sector, and academia. Potential partners include the World Bank in Morocco; Essilor; Enactus; the National Union of Doctors of Morocco; the British Council; the Office Chérifien des Phosphates Foundation; and the Institute of Tropical Medicine in Antwerp, Belgium.

Projects

The Naddar Ati Project

ACCESS Health Morocco launched the Naddar Ati Project in March, in collaboration with the Ministries of Health and Education, the Hassan II Foundation for Ophthalmology, the Saham Foundation, and VisionSpring. The Naddar Ati Project will provide free vision screening, follow up care, and affordable eyeglasses to Moroccan schoolchildren. The pilot program aims to reach all rural schools in the region of Marrakech. Following the pilot run, we will expand the project to every region in Morocco. We supported the government purchase of ten thousand pairs of low cost and high quality glasses for this project.

The Naddar Ati Project is based on lessons learned from our work in eye care in India. Our India team has studied the good practices and outreach efforts of high quality Indian eye care providers, such as Aravind and LV Prasad.

The RAMED Project

ACCESS Health Morocco initiated work on a case study of RAMED. The case study will help us to understand how healthcare is financed throughout the Moroccan healthcare system.

Hearing Aids

As part of our Hearing Aids project, we participated in the first national technical committee for hearing. The Moroccan government wrote the first national hearing strategy in 2014. Along with the World Health Organization, ACCESS Health was one of only two international organizations invited to be on the committee.

How to Create, Manage, and Finance High Quality, Cost Effective Eye Hospitals: A Handbook of Best Practice

ACCESS Health Morocco is preparing an instruction manual for establishing high volume, low cost eye surgery hospitals in resource limited settings. The book is based on our knowledge of the eye hospitals in India, Africa, and Central America. Hospitals visited included the Aravind Eye Care Hospital in Maudurai; the LV Prasad Eye Institute in Hyderabad; Dr. Daniel Kiage's Innovation Eye Center in Kisii, Kenya; Dr. Fitsum Bekele's Fitsum Birhan Specialized Eye Clinic in Mekele, Ethiopia; and Visualiza Eye Clinic in Guatemala City.

The manual will share lessons we have learned about how to provide high volume, high quality eye care for all. The lessons in the book are inspired by and taken from hospitals in low and middle income countries that manage to cure blindness while being innovative, equitable, and financially sustainable.

## The Joint Learning Network for Universal Health Coverage

ACCESS Health Morocco worked closely with the office of the Secretary General of the Ministry of Health and the National School of Public Health to prepare and support the application to become a member of the Joint Learning Network for Universal Health Coverage. In October 2014, Morocco was accepted into the Network.

FINANCIAL STATEMENT FOR 2014

All figures in US dollars.

REVENUE

Revenue Sources	USD
Foundations	905,476
Governments	409,357
Universities and Nonprofit Organizations	379,047
Individuals/Others	248,968
Corporations	59,636
TOTAL REVENUE	**$ 2,002,485**

SOURCE OF REVENUE

- 45% Foundations
- 21% Governments
- 19% Universities and Nonprofit organizations
- 12% Individuals/other
- 3% Corporations
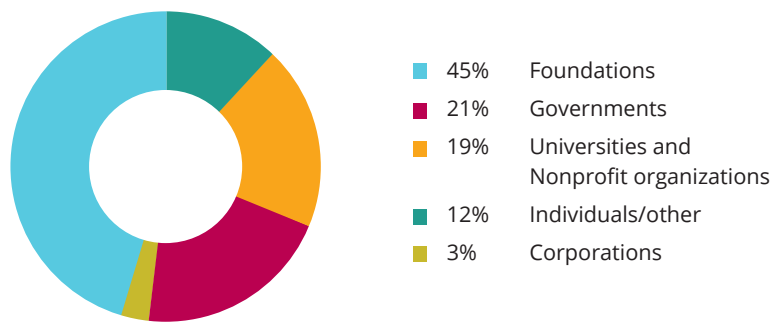
TOTAL EXPENSES PER CATEGORY

Salaries	834,115
Subgrants	420,811
Program Services	413,130
Administration	245,017
TOTAL EXPENSES	**$ 1,913,073**

EXPENSE ALLOCATION

- 44% Salaries
- 22% Subgrants
- 21% Program Services
- 13% Administration
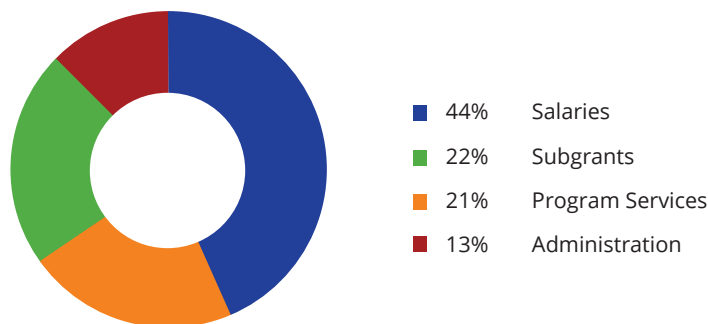
EXPENSE ALLOCATION PER GEOGRAPHY

	Global	China	Morocco	Philippines	Sweden	India
Salaries	323,571	-	54,787	-	14,496	441,261
Program Services	286,329	9,132	7,691	6,168		103,810
Subgrants	143,970	-	-	-	16,540	260,301
Administration	132,804	-	10,361	11,502	6,238	84,112
TOTAL EXPENSES	**$ 886,674**	**$ 9,132**	**$ 72,839**	**$ 17,670**	**$ 37,274**	**$ 889,484**

ASSETS

Cash and Cash Equivalents	1,258,282
Accounts Receivable and Other Assets	11,769
Grant Receivable	84,860
Equipment	1,193
TOTAL ASSETS	**$ 1,356,104**

LIABILITIES AND NET ASSETS

Total Liabilities	$ 89,084
Net Assets	
Temporarily Restricted	1,304,102
Unrestricted	(37,082)
Permanently Restricted	0
Total Net Assets	$ 1,267,020
TOTAL LIABILITIES AND NET ASSETS	**$ 1,356,104**