

FUNDING PROPOSAL



Operation Healing Hands NPC 2016/180180/08
www.ohhsa.net

“Do your little bit of good
where you are; it’s those
little bits of good put
together that overwhelm
the world.”
~Desmond Tutu



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WORD FROM THE CEO

Word from the CEO

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Summary

In 2016 a group of registered surgeons in the private sector decided to launch a Mandela day initiative to honour the legacy of former president Nelson Mandela, by operating on patients desperately awaiting surgery. The hope was that this small gesture would change the lives of a few people who primarily depend on the heavy burdened South African state hospitals for relief of pain and disability.

Since 2016, this initial one-week charity drive has expanded into a full-blown Non-Profit Company. In the past 6 years, 569 underprivileged patients have been given the opportunity to experience a new, fully functioning life by receiving life-changing surgery. By doing this, we empower them to be absorbed back into the working market as contributors to our country's economy.

All the medical personnel involved, from the surgeons to the rehab teams, work *pro bono* while the private hospitals sponsor limited theatre time and in-hospital stay. X-rays, blood work-up and other special investigations by respective service providers are also done free of charge, while orthotics and prostheses such as hip and knee replacements and other implants are sponsored by relevant medical companies.

The procedures we perform are from various disciplines and includes, but is not limited, to ophthalmology, orthopaedics, arthroplasty, general surgery, urology, gynaecology, ENT and plastic surgery for skin cancer excisions. During 2020 we were forced to adapt due to minimal funding and our primary health care projects were born. Since 2020 our women's health clinics helped 256 women with Pap smears, contraception, and cancer treatment and during our eyecare days we screened 166 patients and dispensed 111 pairs of glasses.

NEED ANALYSIS

Osteoarthritis (OA) is the single most common cause of disability in older adults and of the 291 conditions, ranked as the 11th highest contributor to global disability. According to the United Nations, by 2050 people aged over 60 will account for more than 20% of the world's population. Of that 20%, a conservative estimate of 15% will have symptomatic OA, and one-third of these people will be severely disabled. This means that by 2050, 130 million people will suffer from OA worldwide, of whom 40 million will be severely disabled by the disease.

OA is responsible for limitations of activities of daily living, particularly walking. Most of the patients presenting to our clinics are already walking with at least one crutch and delaying treatment another 2 years or more, renders these patients severely disabled, not being able to work anymore and having to use either two crutches, a walker or a wheelchair.

Our biggest challenge and concern are the growing need for an arthroplasty fund as there are more than 100 patients on our own OHH waiting list and more than 650 currently on the active waiting list at **Steve Biko Academic Hospital** in acute need of replacement surgery.

This is not the exception as all the other government hospitals across the country have objectionable long waiting times for joint replacements. In the years preceding 2020 a maximum of 120 elective replacements a year were done at Steve Biko Academic Hospital, this percentage has reduced by 75% in 2020. Annually there are always around 600 patients on the active arthroplasty waiting list with currently >800 patients still waiting to be seen and booked for their replacement at the arthroplasty specialist clinic. This means a waiting time of up to 5 years or more for a hip or knee replacement and a waiting time of > 1 year just to be seen in the arthroplasty clinic. These figures are enormous and a cause of great concern to us.

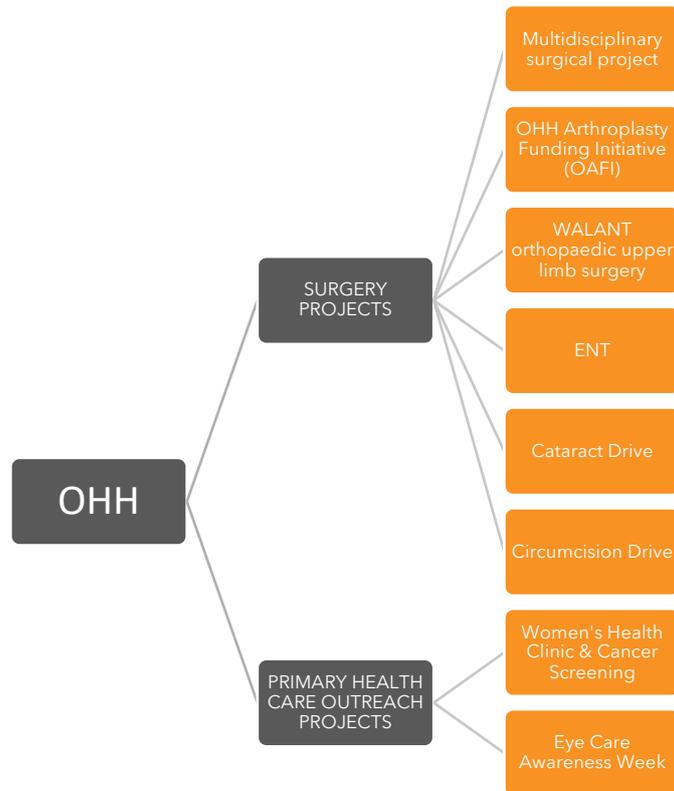
The last formal study on arthroplasty waiting times was done at **Groote Schuur Hospital** in Cape Town and published in 2017. More than 700 patients were awaiting surgery. Those that had surgery waited an average of 2 years but for those that were still waiting, the average was almost 3 years with some patients having to wait over 4 years.

Cancelling elective surgeries due to various reasons is quite common in government hospitals. A study done in **Pietersburg Hospital** showed that in general surgery alone over a 12-month period, 44% of patients who were already admitted for elective surgery, were cancelled, costing the hospital a R6 000 000 financial loss. It is estimated that in 2020, over 150 000 elective surgeries were cancelled in South Africa due to the Covid-19 pandemic and even if we increase our productivity with 10%, it will take us 2 years to eradicate the backlog created only in 2020, not even taking into account the impact of covid on 2021.

Studies done amongst overseas countries show that waiting times to see a specialist ranges from 6 weeks – 3 months. The average time from specialist evaluation to elective surgery across all disciplines are between 40 days – 2.5months. The median waiting time for hip and knee replacements across Europe in 2017 was <12 months (hips) and <15 months (knees). If we compare the above-mentioned statistics with our South African counterpart we shall fall into medical unrest.

Unfortunately, we cannot accommodate all the arthroplasty patients through our normal OHH project as we will deplete our resources and flood our current system. I therefore propose the **OHH Arthroplasty Funding Initiative (OAFI)** as a separate division, where we will assist these patients by paying a global fee of R140 000-R150 000 to the private sector per patient for a primary joint replacement.

PROJECT OBJECTIVES



The **Multidisciplinary Surgical Project**: To maximize our core project, we need approximately R1 250 000 per annum to cover hospital expenses and company costs if we separate arthroplasty from the main project. This works out at an average of R7 500 per patient if we continue the current module where the prostheses, blood work-up, X-rays and orthotics are sponsored and the surgeries, anaesthesia, physiotherapy and physician consultations are done pro bono.

The **OHH Arthroplasty Funding Initiative (OAFI)** will be a global funding scheme based on Discovery's global arthroplasty funding. By running this project separately, we can assist/cope with massive amounts of government patients entering the private sector, without depleting our resources. The OAFI will be governed by a committee of arthroplasty specialists in consultation with the South African Orthopaedic Association (SAOA) and the South African Arthroplasty Society (SAAS).

The past two years we were able to do 30 replacements at an average cost of R31 500 per patient, but this is not sustainable if we want to operate >400 patients per year. The realistic global cost is minimum R150 000 per patient, and we thus need R54 000 000 to start making a difference to the dire need we face. It would be penny wise, pound foolish to not operate patients as early as possible due to the exponential increase in cost, theatre time, prostheses and post-operative recovery period associated with delaying treatment.

Operation Healing Hands – Application for Funding

Circumcision Drive: This project was started to try and minimize the risk involved in traditional circumcisions and to alleviate the trauma accompanied by this. Because the long-term plan is to help large amounts of patients, this project is also destined to operate on a global funding scale.

Cataract Drive: Since 2018, we did 150 cataract procedures. This is an initiative very close to the heart of OHH as cataracts have a very high morbidity, rendering patients unable to work due to blindness that is treatable with a very affordable procedure. The cost benefit ratio for cataract surgery is sterling and we cannot afford this project not to proceed or succeed.

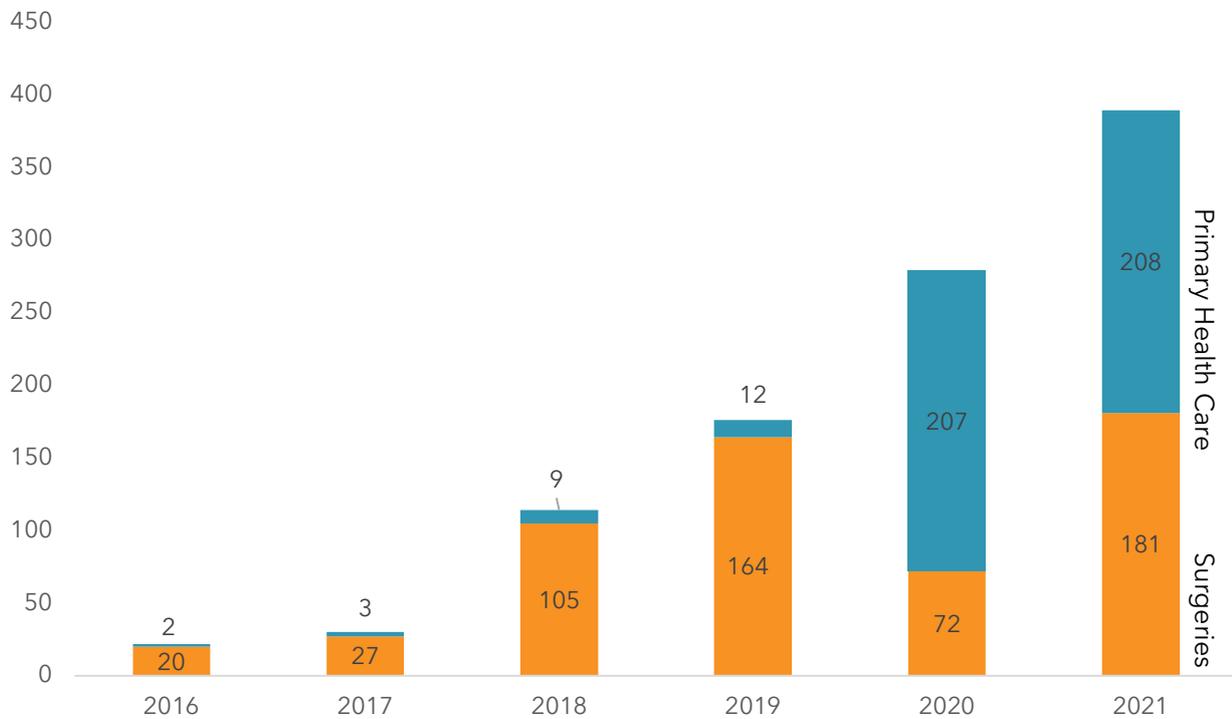
WALANT (Wide Awake Local Anaesthetic No Tourniquet): This is a brand-new initiative started in 2021. We perform minor orthopaedic upper limb surgery, i.e., carpal tunnel and trigger finger release in rooms, with WALANT technique at <5% of the normal theatre cost. This implies that we can help up to 30 patients at a minimal cost of R15 000 a year. Additional funding for surgical instrumentation would however make a huge impact on efficiency.

Women's Health Clinic: Since 2020 we assisted 256 female patients through our Women's Health Initiative and in 4,7% of the patients, we caught cancer early enough to be treated through an in-rooms LLETZ procedure (using a colposcope and an electrosurgical loop to excise early cancerous cervical tissue). Our aim is however to increase this number to at least 200 female patients **per year**. Of these 200 patients, at least 10% will need contraceptive devices which will amount to R35 000 and 8-10% will present with early cervical cancer lesions/Human papillomavirus (HPV). Pap smears will amount to R100 000 for 200 patients at our clinic this year at a discount of 50%. According to the WHO if by 2030, 90% of girls are vaccinated against HPV, 70% of women receive Pap smears and 90% of those diagnosed are treated, we can eliminate cervical cancer and save up to 2 million lives by 2040.

Eyecare Awareness Day: This happens during the month of October every year and is a multi-faceted project where we screen up to a hundred patients for eye pathology, general eye tests and the distribution of glasses.



PROJECT EVALUATION



"I have the highest admiration for the initiative of the group of young professionals who have founded Operation Healing Hands. All of them are experts in their own fields of medicine, and they are devoting their time and expertise to help fellow South Africans in dire need. In a situation where public services are stretched to the limits, the efforts of these professionals to treat patients at no cost are remarkable.

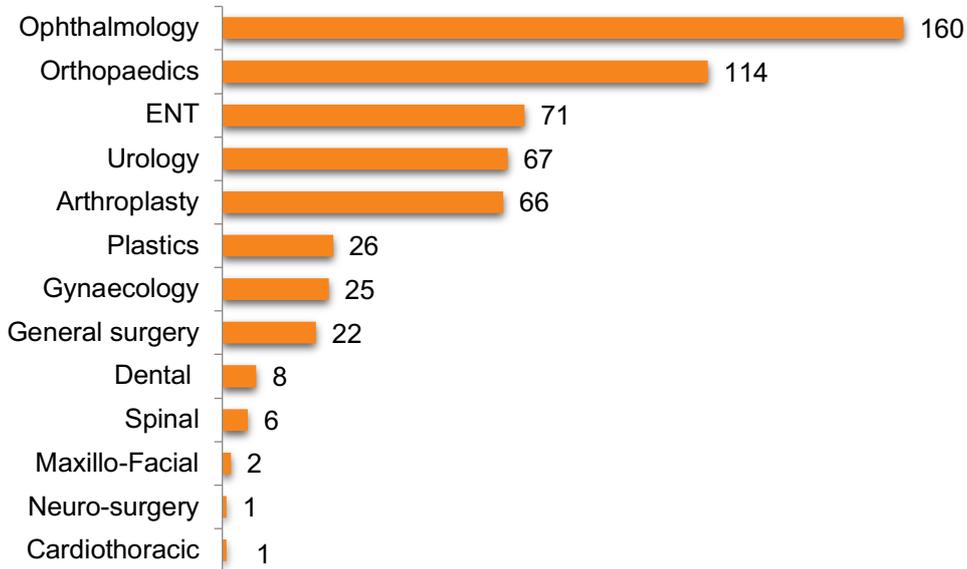
They are indeed rising to the challenge of Nelson Mandela to put reconciliation and nation-building into practice."

~Professor Piet Meiring

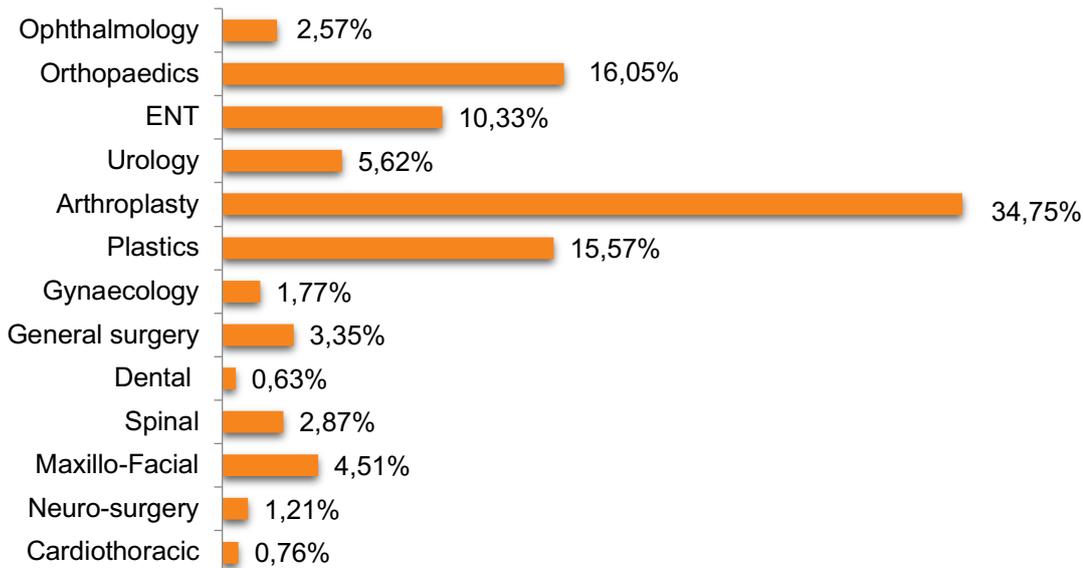
Emeritus Professor of Theology, University of Pretoria

Member of the South African Truth and Reconciliation Commission

PROJECT EVALUATION SINCE INCEPTION



SHARE OF SPEND SINCE INCEPTION



Arthroplasty – 2019, 2020 & 2021 Combined

Number of surgeries	45	
Total cost to OHH	R 1 215 919	18,01%
Cost per patient to OHH	R 27 020	
Value of surgeries	R 6 750 000	81,99%

Based on a global funding fee of R150,000 per patient

Total cost to OHH as a percentage of total value of surgeries 18,01%

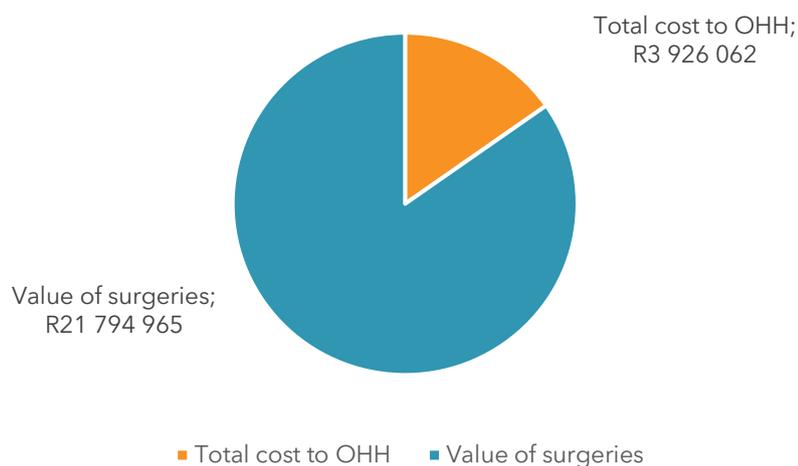
Total surgeries, excluding arthroplasty – 2019, 2020 & 2021 Combined

Number of surgeries	372	
Total cost to OHH	R 2 710 143	18,01%
Cost per patient to OHH	R 7 285	
Estimated value of surgeries	R 15 044 965	81,99%

Based on the percentage of cost to OHH, compared to a global funding fee on arthroplasty

Total cost to OHH as a percentage of total estimated value of surgeries 18,01%

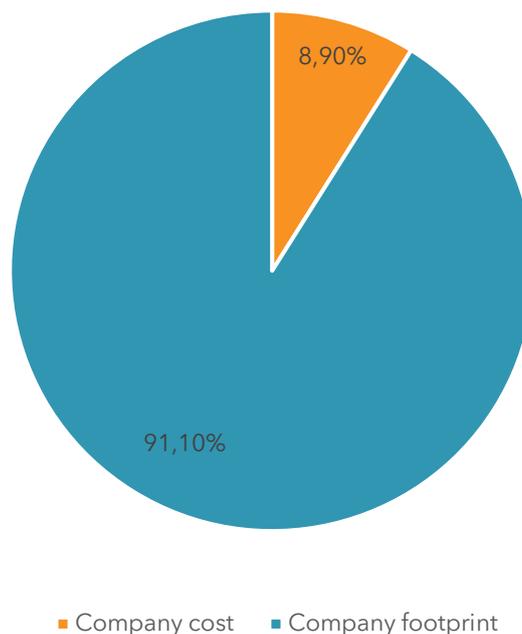
Rand value of actual cost vs estimated value of surgeries (2019, 2020 & 2021 combined)



Total operational costs - Financial years 2017 to 2021 Combined

Total operational costs	R 2 242 369
2017	R 57 746
2018	R 288 816
2019	R 558 878
2020	R 746 226
2021 projected	R 590 703
Total actual cost of surgeries, including arthroplasty	R 4 536 168
Total value of surgeries, including arthroplasty	R 25 181 879
Total operational cost as a percentage of total actual company costs	49.43%
Total operational cost as a percentage of total estimated company costs	8.90%
Total patient cost as a percentage of total estimated company footprint	91.10%

Operational costs as a percentage of estimated total company footprint (financial years 2017 to 2021 combined)



PROJECT BUDGETS

SURGERY PROJECTS

Multidisciplinary surgical project (>150 patients per annum)	R 1 250 000	
Adjusted costs based on actual costs of 2019 /2020		R 7500 p/p
OHH Arthroplasty Funding Initiative (OAFI) (>400 patients over 2-year period)	R 55 000 000	
Based on global multidisciplinary fee		R 135 000 p/p
Circumcision Drive (24 patients per annum)	R 200 000	
Global theatre fee per patient based on actual costs 2018/2019		R 5000 p/p
Surgeon fee per patient		R 2000 p/p
Anaesthetist fee per patient		R 1500 p/p
Cataract Drive (50 patients per annum)	R 500 000	
Global theatre fee based on actual costs 2018/2019		R 8500 p/p
Consumables per patient i.e. lenses		R 2500 p/p
WALANT orthopaedic upper limb surgery (30 patients)	R 35 000	
(wide awake local anaesthetic no tourniquet)		
Cost < 5% of normal theatre cost		R300 p/p
Once off funding for surgical equipment		R 20 000

PRIMARY HEALTH CARE OUTREACH PROJECTS

Women's Health Clinic (200 patients per annum)	R 210 000	
LLETZ procedures estimated 8-10% of patients		R 15 000
Contraceptive devices estimated at 10% of patients		R35 000
Pap smears for 200 patients at 50% laboratory discount		R 100 000
Reduced GP fee of R300 per patient (200 patients) No surgical procedure fee		R 60 000
Eye Care Awareness Day (100 patients)	R 25 000	

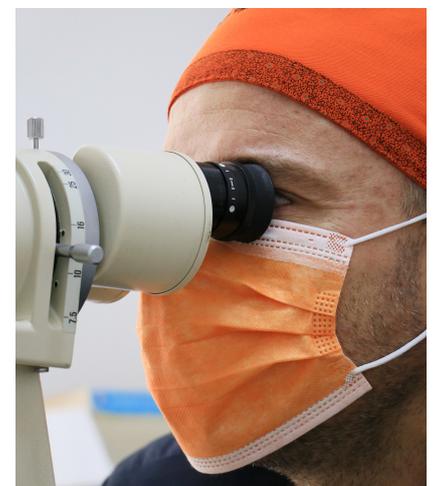
COMPANY COST PER ANNUM

COMPANY COST PER ANNUM	R 1 200 000	
Based on operational costs of 2019		R 800 000
Estimated costs for running of OAFI		R 350 000
Theatre caps (500 at R100 each)		R50 000

READY TO DONATE TO OUR CAUSE?

HERE IS WHY OHH WOULD BE A PERFECT MATCH FOR YOU

- We really care about making a difference in our country.
- All doctors and patients are South African citizens, making us a proudly South African organization.
- All OHH patients go through an ethical-, financial- and medical screening to ensure that everyone is treated equally.
- For BEE purposes, OHH can ring-fence donations making us qualifiable for your SED donations as at least 75% of your donation will benefit 100% black patients.
- We can customise our beneficiaries according to your preferences.
- OHH is a registered Public Benefit Organization (PBO) and you will be issued with a Section 18A tax certificate after you have donated.
- OHH is POPIA and PAIA compliant.
- OHH is audited regularly by external auditors and accounts are freely available to any of our funders, at any given time.
- Medico-legal coverage by MacRobert Attorneys.
- We provide funders with both an Annual OHH- and Personal Report indicating whom benefitted from your donation.



SUMMARY

According to Section 27(1) and (3) of the South African Constitution, Act 106 of 1996, everyone has the right to access to healthcare services, including reproductive healthcare and no-one may be refused emergency treatment. With your help, we can ensure that we do not create our own healthcare state-of-emergency as operations can be performed more timeously, continuously, and more effectively which in return contributes to the overall emotional and social well-being of our fellow South Africans.

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