



GLOBAL EMERGENCY CARE 2017 ANNUAL REPORT



GLOBAL EMERGENCY CARE

Dear Friends and Supporters:

What a year 2017 has been! GEC officially turned 10 years old and we could not think of better way to celebrate than to receive news that the National Council of Higher Education gave final approval for the Diploma in Emergency Medicine. This paved the way for the September start of the first class of ECPs who will earn their degree from Mbarara University of Science and Technology (MUST). This was an essential step in making the ECP program sustainable and integrated into the Uganda medical education system—a very significant milestone.

The ECP Trainers kicked off the inaugural class at Masaka Hospital in September with eight students. At the same time, Mbarara University, in partnership with GEC, commenced the Masters in Emergency Medicine Program (MMed), a three year emergency medicine residency program for Ugandan doctors wishing to become leaders in Emergency Care Development. The ECP and MMed programs are working collaboratively to integrate the trainees to build a strong working relationship among Uganda's future emergency care providers.

In the meantime, at Nyakibale, our fifth ECP class celebrated their graduation. Congratulations to Benifer, Baniga, Cleophas, and Pearl Mary who joined the ranks of qualified ECPs. We were also very excited to welcome back Pellone Koshaba, one of our originally trained ECPs to the group at Nyakibale. We continue to be grateful for our strong partnership with Nyakibale Hospital and look forward to continuing to work with them to support emergency care development.

From a research perspective, GEC published several papers highlighting the excellent care our ECPs provide. The first paper, published in the [World Journal of Surgery](#), highlighted the effect ECPs have resuscitating patients with surgical conditions who

need acute operations. Their care led to patients receiving efficient pre-surgical care and prompt transfer to the operating room—remarkable given the rural location and resources available. The second paper in [Pediatric Emergency Care](#) looked at poisonings in young children treated by the ECPs and provided a rare look into a relatively common problem in rural Africa.

We are greatly looking forward to all 2018 will bring as Emergency Medicine continues to develop in Uganda. As always, the work GEC does would not be possible without the generous support of our donors. We hope you each appreciate the impact you have had on the over 80,000 patients who have benefit from the care they received from the ECPs over the past ten years. We remain both grateful and humbled by your ongoing generosity and support.

With our deepest gratitude,

Heather Hammerstedt, Mark Bisanzo, Stacey Chamberlain,
Sara Nelson, and Brad Dreifuss
GEC Board of Directors



GEC MISSION

To make lifesaving medical care
available to all Ugandans



GEC 10-YEAR ANNIVERSARY

SIGNIFICANCE OF 10 YEARS

Global Emergency Care had our ten-year anniversary in 2017, and it ushered in a year that has been one of many humbling and exciting moments for me. One of my main goals as Executive Director, a role I've had for the last five years, was to get the Emergency Care Practitioner program approved at the university and national level.

Just as we entered into our anniversary month last summer, it happened!

I can't even begin to guess how many hours of our team has put into work, tears, jubilation, long meetings, cups of chai tea, email chains and zoom calls, negotiation, sacrifice, missed kid events, chapatti snacks, ginger soda, heartache, airplane seats, humid bus rides, and meeting new friends, colleagues and students.

I can tell you that our executive team has birthed not just a new emergency medicine specialty in Uganda, but eight children in our own families, so you can imagine we've been busy!

When we all individually first visited Uganda in 2007 as dusty, bright eyed and naïve emergency medicine residents, there was no emergency medicine in the entire country. This ten-year milestone has culminated into not only the first non-physician emergency training program at the university level, but also a physician residency program and a large multi-organization collaboration to build a national coordinated emergency system.

I am beyond thankful for the support and friendship my GEC family has brought to me personally and professionally. Our executive committee is the most well-rounded, respectful, transparent, kind and effective that I've ever been a part of.

Each person brings unique perspective and expertise to the discussion and without each one of us, we would never have accomplished what we have.

Mark brings the heart and long-term novel vision; Stacey brings the quiet resolve and pragmatism; Sara brings the deep educational expertise and big picture thoughtfulness; Brad brings the spirit of social entrepreneurialism and an unbridled ability to foster partnerships and friendships cross cultures.

And with that, I'm pleased and honored to announce the Executive Director torch is transitioning to Tom Neill, our current Operations Director. I will be continuing on the executive team in a different role, but am, without hesitation, sure that Tom will usher our vision in the years to come with vigor and success. To another ten years! I can't wait to see what I'll be writing about then.

—Heather Hammerstedt MD, MPH, Executive Director

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GEC 10-YEAR ANNIVERSARY

10 YEARS OF SUCCESS

This year was a landmark year for Uganda and for our GEC executive team and Ugandan trainers and staff. For a decade, our GEC volunteers and staff in the US and in Uganda have been working diligently and passionately toward the goal of national recognition of the importance of emergency care, national approval of the cadre of the non-physician emergency care provider, and Ugandan university adaptation of the program. Not only did it happen, it happened all in the same year!

The faith that our students and staff had in us while we navigated this (very long) process, and their commitment to us while we educated them and trained them and employed them with no guarantee of the timeline, is what kept me going day to day along the way.

In June 2007, we had a dream of emergency care in Uganda. We were lonely, but inspired and persistent. Today after over

13,000 hours of volunteer time per year and almost \$2,000,000 of in-kind donations annually, we remain inspired and persistent, but are no longer lonely in our vision.

We now are a part of a team of engaged and enthused Ugandan partners spanning the physician community, the nursing community, the national ministry of health's government medical system, the private medical system, and the university system, all of whom are committed to this same vision.

With 17 GEC administrative staff, 17 GEC ECP trainers, 12 GEC researchers active in Uganda now, I'm confident that the non-physician and physician educational programs we are collaborating on with MUST will be successful and the future is brighter than ever. A future that will see Uganda able to provide lifesaving care, for all.



ECP DIPLOMA PROGRAM

It is so exciting to announce that in September 2017 GEC started the first class of Emergency Care Practitioners that will receive Diplomas upon completion of their training program from our partner university, Mbarara University of Science and Technology (MUST)! This is a landmark accomplishment that will greatly improve the sustainability of our programming as it truly integrates our training program into the local educational system.

Imagine if you went to nursing or medical school, and at the end, you didn't receive an actual diploma and a nationally recognized degree. You wouldn't be able to use your lifesaving clinical skills because employers would not recognize your expertise without that piece of paper. So, after many years of fine-tuning our curriculum and working with our Ugandan partners including Masaka Hospital, MUST, and the Ministry of Health, this roll-out is a big step in the creation of a workforce of Ugandan emergency practitioners that will have the skills to treat acutely sick and injured patients.



MASTER OF MEDICINE IN EMERGENCY MEDICINE

In conjunction with the ECP Diploma program, GEC partnered with the members of the Departments of Medicine, Critical Care, and Anesthesiology at Mbarara University of Science and Technology (MUST) in Mbarara, Uganda to implement the country's first Master's program in Emergency Medicine for physicians in September 2017. This collaboration will create a new specialist physician for Uganda, the Emergency Physician, who will be able to work in and supervise ECPs in national and regional referral EDs, and function as educators and quality supervisors for district ECP staffed EDs.

The first class consists of five dynamic, intelligent, and hard-working physicians who will, upon completion of the three-year program, become Uganda's first specialized emergency physicians. GEC is honored to be an active collaborator, participant, and funder of this program. Coupled with GEC's development of the Diploma in Emergency Care, this essential program will contribute to the advancement of a viable emergency care system and set the stage for emergency care development across Uganda.





ECP SPOTLIGHT

MUGISHGA OWEN

Owen brings life to patients in critical condition. The ECP of over three years takes great pride in his work and the education GEC provided him. "I have been able to learn about a lot of procedures," said Owen. Being able to identify life-threatening conditions, treating patients with efficiency and speed, and train new ECPs to do the same is the most thrilling part of working with GEC. Owen said his life has been changed for ever.



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NATUKUNDA ELIZABETH

Elizabeth had been an ECP for 8 years. Being an ECP has allowed her to handle several emergencies on her own, something that she was not used to doing before. She also has the opportunity to teach junior ECP's. Elizabeth finds her job as an ECP incredibly rewarding because patients appreciate what she does for them. She has also gotten the chance to do procedures that would be done by doctors and identify surgical cases using an ultrasound scan.



Elizabeth stressed several reasons how being an ECP has changed her life. She is now more confident in saving lives after acquiring more knowledge and improving her skills. She also thoroughly enjoys teaching others and working in a team setting. She has been able to share her knowledge with different health workers from other countries, and ultimately earn a living doing something she is passionate about. She is empowered by the fact that she is now able to interpret x-rays, teach nurses, handle several emergencies, and perform FAST exams as an ECP. Elizabeth no longer has to wait for doctor in order to save a life.

BIRUNGI ALFUNSI

Alfunsi has been an ECP for the last 7 years. Being an ECP has been truly inspiring to Alfunsi because he enjoys working in a team and acquiring new skills. He loves that he is constantly learning and adding to his skillset and knowledge in patient care. In addition, Alfunsi has had the opportunity to form great friendships.



Alfunsi is proud to be an ECP because he genuinely loves the feeling he gets when he saves a life. When a severely ill baby with hypoglycemia is saved from the brink of death, that's a proud moment to be an ECP, Alfunsi said.



FINANCES

In 2017, Global Emergency Care's revenue increased 5% from 2016, while our expenses decreased by 2%, giving us a 25% increase in net operating income from 2016 to 2017.

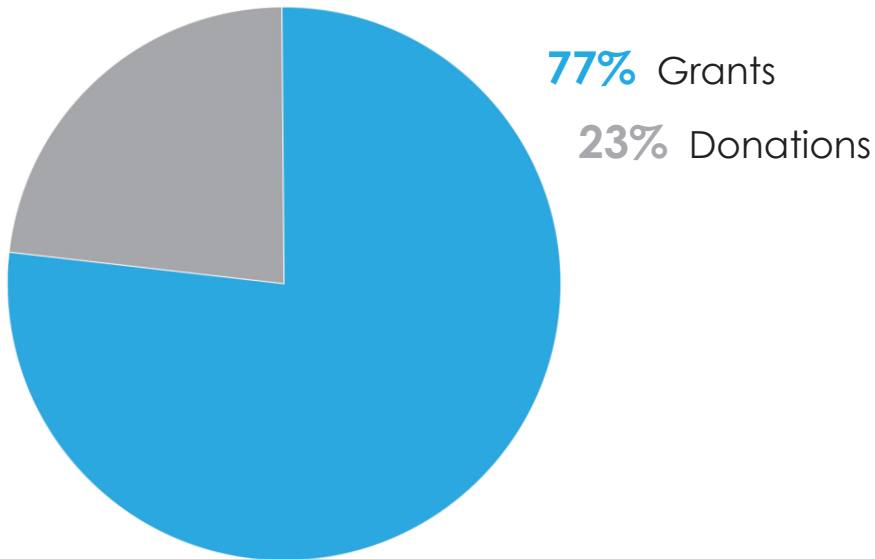
Our grant revenue decreased from 2016, but we made up for that decrease with a successful fundraising year. Our fundraising revenue increased by 54% in 2017.

We continue to work to expand our donor base and overall donation revenue.

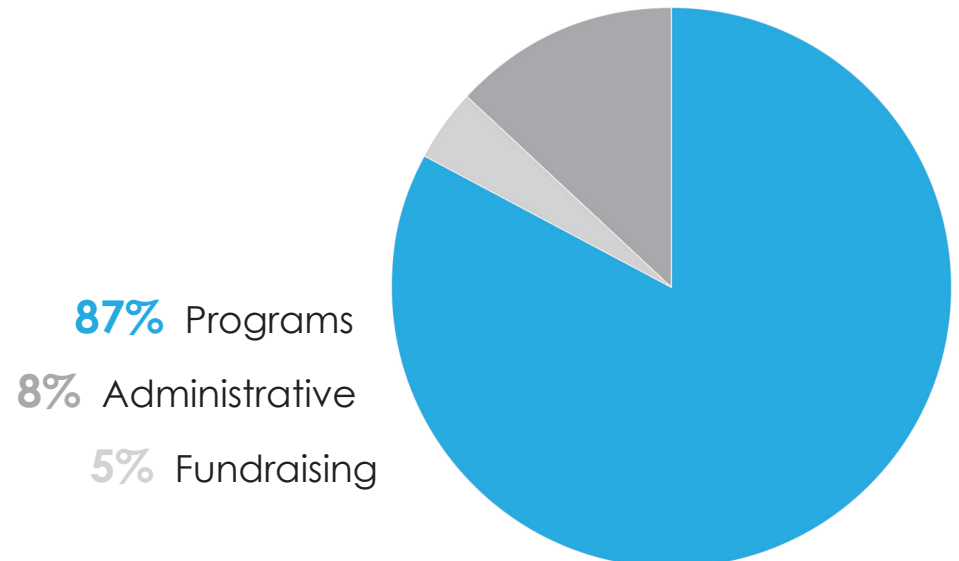
\$1,371,274

in-kind professional services
donated by GEC board, staff,
and volunteers

TOTAL INCOME \$127,062



TOTAL EXPENSES \$151,205





THANK YOU

The accomplishments of 2017 have been a culmination of a decade of hard work and dedication from GEC's ever-supportive foundation partners and our tireless and dedicated volunteers. In 2017 alone, GEC volunteers donated over \$1.3 million of their time to grow emergency medicine development in Uganda. None of our work or our successes would be possible without the support of these incredible volunteers. Thank you for your generosity, dedication, and continued support!

2017 FUNDING PARTNERS



HOLMES FAMILY FOUNDATION

FREAS FOUNDATION

2017 VOLUNTEERS

NORTH AMERICAN VOLUNTEERS: Bonni Theriault, Mélissa Langevin, Usha Periyannayagam, Brian Rice, Ryan Brandt, Mike Schick, Ryan Joseph, Ben Terry, Mariah McNamara, Lori Stolz, Katie O'Brien, Elizabeth Wolpaw, Gian Brown, Fernanda Crosby, Katie Wells, Carrie Hawthorne

GLOBAL HEALTH FELLOWS: Mariel Collera and Alex Wang

U.S. INTERNS: Sarah Luedke and Laura Siewert

UGANDA VOLUNTEERS: Ashley Pickering, Puneet Gupta, Megan Rybarczyk, Joseph Henderson, Amity Chu, Amy Stoesz, Ryan Joseph, Claire Ostertag-Hill, Elizabeth Wolpaw, Mike Schick, Christine McBeth

BUSINESS DONORS: MDF Instruments, Proportion Design, Fernanda Crosby Consulting, Malesardi, Quackenbush, Swift & Company CPAs