

 **Bulamu**
Healthcare

2019 ANNUAL REPORT

Healthcare Delivery Innovation in Africa

SUPERCAMPS

61,588
patients

\$6.03
average cost per patient
(2019)

**MEDICAL CAMPS
& ANGEL PROGRAM**

1,433
surgeries

**HEALTH CENTER
EXCELLENCE PROGRAM**

Installed in
26
public hospitals & clinics,
treating more than

200,000
patients annually

Wilderd (12), Bulamu Angel Program patient, after recovering from surgical repair of a broken leg that went untreated for two years (continued on p. 4)

A Letter from Our Board Chair

Bulamu's mission is: *To treat the sick and strengthen health systems serving Africans most in need.* We revised our mission statement this year, as we broadened our activities beyond medical camps to include partnering with the Ugandan Ministry of Health in launching the Bulamu Health Center Excellence (HCE) Program. With the faces and facts in this report, you will see the progress we have made on all fronts, always with an emphasis on treating those who are impoverished or underserved.

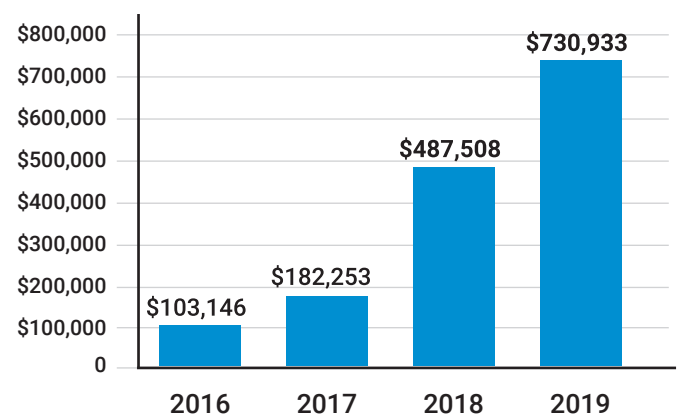
The theme of this annual report is the *innovation* we have brought to our three healthcare programs in Uganda, each with different time frames serving patients in novel ways.

- **Primary Care: Supercamps:** We provide free healthcare to thousands of impoverished Ugandans whom the existing system is failing. In 2019, our five weeklong camps offered **21** different medical services and treated a total of **61,588** patients, an increase of **44%** over prior year. These patients received **97,873** free drug prescriptions, and **1,284** had surgeries performed. Since 2016, our 17 camps have treated **154,690** patients at a cost of **\$6.22** each.
- **Continuing Care: Angel & Follow-up Programs:** In 2019 we sponsored **373** Angel Patients needing after-camp treatment with direct referral to specialty hospitals, at an average cost of \$159 each, including **149** requiring surgeries. For those with less severe but chronic ailments, we arrange follow-up services at local public clinics.
- **Health Systems Strengthening: HCE Program:** We Installed this technology-based, hospital/clinic management system in Sheema District, with **26** public hospitals and clinics serving more than **200,000** patients a year. The HCE-IT system provides weekly dashboard reports on key performance indicators at all facilities. We are now planning to extend this train-the-trainer program to other districts. The first year HCE cost of **\$.85** per patient is expected to drop to **\$.30** in subsequent years.

Together these programs are transforming how medical care is being delivered in Uganda, and they are doing it much more cost-effectively than any other programs we know of. Our donors have recognized the innovation built into these programs by steadily increasing their support over the past four years, with revenue growth of **50%** in 2019.

We started strong in 2020 at the February Supercamp in Budaka District, where we treated a record **17,206** patients at a cost of **\$5.10** per patient. The "True Value" of those services is **\$29.90** when converted to fair market value prices in Uganda, or **5.9 times** our out-of-pocket cost. If the same services were being provided in the U.S., the cost might be 100 times greater. We build this leverage into the Supercamp model by partnering with local district governments and

Total Donations/Revenues



an ecosystem of 15-20 other agencies and NGOs in a free exchange of services. They come because of the efficiency of treating so many patients at one time and place.

Our longer-term strategy is to build on the credibility and trust we have earned with Uganda's local government districts and the Ministry of Health (MoH) in order to strengthen their existing health system. With 3200 public hospitals and clinics treating 45 million people in an area the size of Oregon, Uganda does not need more bricks-and-mortar facilities. They need better clinical practices and patient records, more computers and diagnostic devices, improved management systems, and a culture of caring—all key elements in the Bulamu HCE Program.

We strengthened our organization this year with the addition of President Richard Siegler, a Fulbright Scholar and experienced NGO program leader who lived and worked for ten years in Africa. Our Board of Directors was expanded to **10** members and our Advisory Council to **18** members. Of these **28** highly educated and experienced professionals, **18** are medical doctors or have public health or nursing degrees; **6** are Ugandans and another **12** have lived or worked in East Africa. Noteworthy also, our 2019 financial statements are audited by PKF International, a global firm with an office in Uganda, where our operations all take place.

As I write this letter, the world is being turned upside down by the rapid spread of the COVID-19 pandemic. It is too early to predict what impact this will have on our operations in Uganda or our ability to raise funds in the US. We will update you via email of important events. We appreciate the ongoing support of our donors as we adjust to meet these unprecedented challenges. At this time the health of the world's population depends on the frontline medical workers who utilize their skills and demonstrate their courage in acts of daily service, among whom Bulamu's dedicated staff in Uganda will do our part.

Dick Chandler

Richard H. Chandler,
Board Chair and CEO



What does treating 17,206 patients in one week look like?



Meet Patients from Bulamu's 3 Programs

Medical Camps: Faith

After 16 years of suffering from a large goiter, Faith found the answer to her prayers at Bulamu's August 2019 medical camp in Kyegegwa. Faith and her daughter traveled for 14 hours by bus, arriving at 1 am. The next day, a Bulamu surgical team removed the goiter that Faith had suffered from for years because she did not have the funds for a private operation. Overjoyed, Faith and her daughter returned home after a short recovery period.



Faith and her daughter.

Angel Program: Wilderd



Compare Wilderd's glum face when arriving at the June 2019 camp vs. all smiles when playing with his favorite dog, Police, after recovering from surgery.



For two years, Wilderd suffered at home with an untreated infection from a broken leg, unable to go to school or walk without pain. After his injury, Wilderd's mother couldn't afford transport to the distant hospital, let alone the cost of orthopedic surgery. The local clinic sent them home with only painkillers. Wilderd's life changed in June 2019 when Bulamu held a medical camp near his village. He was sponsored by Bulamu's Angel Program and treated over the following months at CoRSU Hospital. Today, he is smiling and pain-free, excited to be attending school with his friends once again.

Health Center Excellence Program: Jadress

In October 2019, Jadress became gravely ill and could not breathe without support. Fortunately, Bulamu's HCE program had provided vital equipment to her hospital, including the \$1200 oxygen concentrator machine that kept her alive until her medicines could take effect. Within two weeks, her condition was stable enough for her discharge, and she feels much better today. The hospital staff reports that the oxygen concentrator is now helping 8 patients per month, including some young children struggling to breathe. Bulamu has since provided two more oxygen concentrators to Sheema District hospitals, helping other patients survive when cylinder oxygen gas frequently runs out.



Jadress, the 1st patient to benefit from the oxygen concentrator in Sheema District, with her children.

We thank the patients and family members featured throughout this report for giving their permission to share their photos and stories. They speak on behalf of the thousands of patients Bulamu's team treated in 2019.

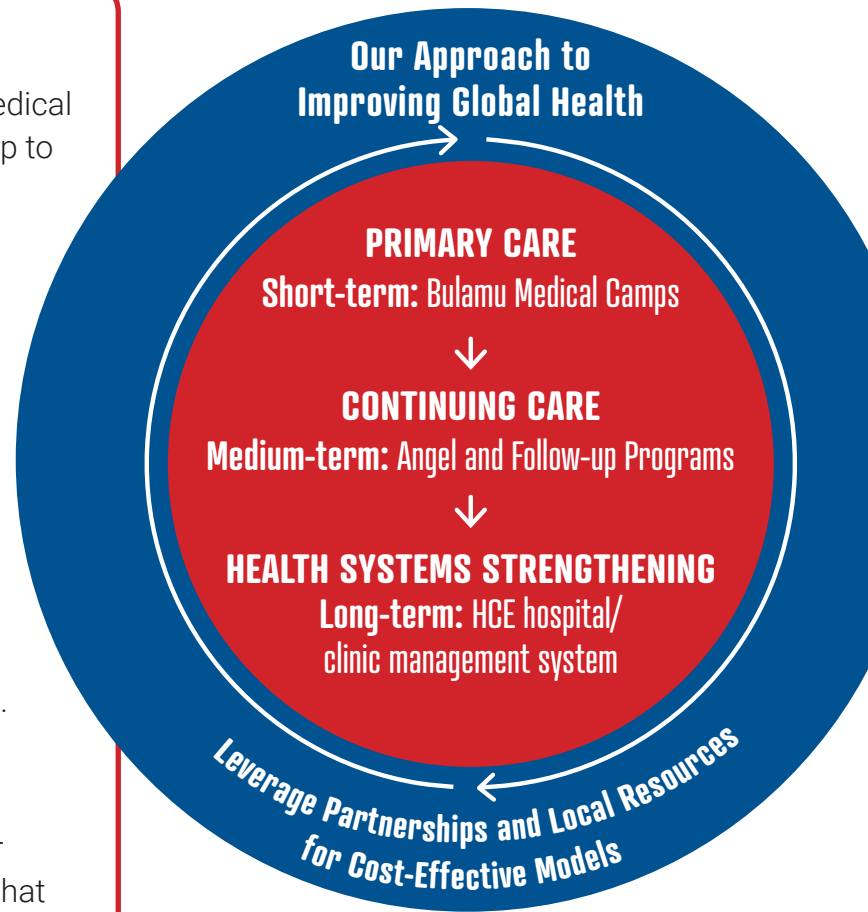
Now is the Time to Strengthen Every Country's Health Systems

From our President

In August 2019 when I saw my first Bulamu medical camp, where 2,000 people in Kyegegwa lined up to be treated every day, I was a bit overwhelmed! They came to see Bulamu's Ugandan doctors and get the care that many had been needing for months or years. The first patient I met was Benjamin, a toddler with advanced hydrocephalus (see p. 8) His desperate mother had been trying to get him treated for 15 months and had almost given up hope. Six days later, when Dick and I saw them again at CURE Hospital 400 kilometers away, Benjamin was already recovering from his life-saving surgery. Thanks to Bulamu's partnership with CURE, he received care at last.

Importantly, this year we have re-defined our strategy (see model to right) to focus on three different time frames and operating models for improving healthcare in Africa. I am confident that our innovations in management disciplines and data analysis can positively impact the quality of care that government health facilities are providing the poor. The current pandemic crisis will pass, and when it does, I hope we remember one key lesson: Now more than ever is the time to strengthen healthcare systems globally, especially in the areas that are most in need. It is an honor to work with Bulamu's team and serve this essential cause.


- Richard Siegler




2.9X increase in staff productivity (2020 vs. 2018)

	Feb. 2018	Feb. 2020
District	Sheema	Budaka
Patients Treated	7,740	17,206
Staff Members	318	249
Patients Per Staff Member	24	69 (2.9x)

PATIENT CARE TOTALS (All time)

 **154,690**
Medical Camp
Patients Served


 **849**
Angel Program
Patients

 **3,525**
Surgeries
(Medical Camps Only)

Primary Care: Bulamu Supercamps

In 2019, we achieved significant improvement in four key medical camp metrics, as seen in the graphs on the right showing performance over our 4-year history. While the patients treated have been growing each year, the average cost per patient has been coming down due to staff productivity improvement and other operational efficiencies.

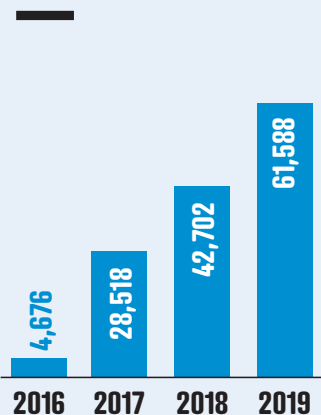
These cost savings occurred while we expanded the different medical treatments and services offered from 8 to 21 over that period. In 2019 we provided **140,836** services for the **61,588** camp attendees, or an average of **2.3** services per person. This breadth of treatments explains why we use the term “Supercamp” to differentiate our unique model from the many other medical camps that are held in Africa, all of them smaller, more narrowly focused, and less cost-effective. This model has the potential to redefine how healthcare services are being delivered in many African countries by taking advantage of available in-country public healthcare facilities and well trained but under-utilized human resources.

 **6%** of Budaka District population attended our February 2020 medical camp

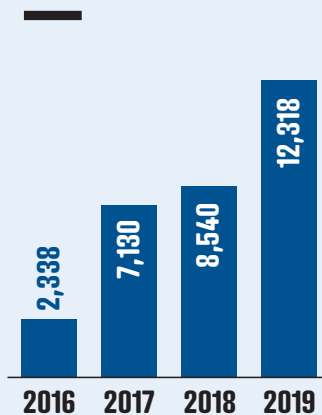
Bulamu Medical Camps Services Provided, 2019

Treatment/Service	Patients
1. General medicine	42,295
2. Surgeries	1,284
3. Pharmacy prescriptions	46,739
4. Maternity services	1,953
5. Births	96
6. Maama Kits	640
7. Gynecology exams	1,393
8. Cervical cancer screens	2,290
9. Breast cancer screens	1,755
10. HIV tests	3,024
11. RUMP training	3,347
12. Prostate screens	785
13. Cataract procedures	101
14. Eye patients	8,051
15. Eye glasses dispensed	4,868
16. Dental patients	3,267
17. Immunizations	1,451
18. Lab tests	14,804
19. ENT	846
20. Spiritual counseling	1,847
21. Angel Program Patients	375
Total Patients	61,588
Total Services Provided	140,836

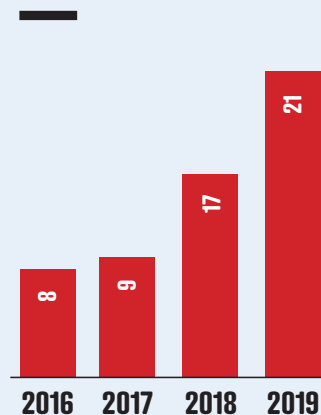
Medical Camp Patients Treated



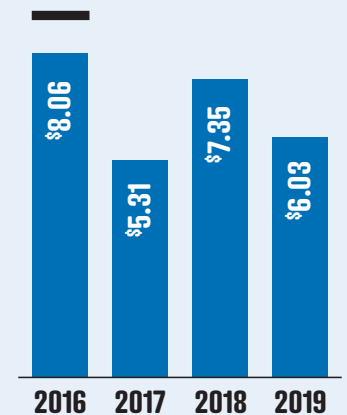
Average Patients per Camp



Different Medical Services Offered



Total Cost per Patient Treated



Women's Health is a Major Focus at Our Medical Camps

We provide a range of health services for women, who account for 67% of camp attendees. Many bring their children or elderly parents with them. In 2019, maternity services, gynecology exams, and cervical or breast cancer screening represented 8,127 total treatments.



Women's Health is a major focus at Bulamu medical camps. We delivered 96 babies in 2019 and had a record 49 births at the Budaka camp in February 2020.



Betty, age 49, before and after her surgery for a massive goiter that she could not afford to get treated.

“Thank you, I feel so much better now! I hope that you can continue doing such great work.”

What is the “True Value” of Treatment at a Bulamu Supercamp?



5.9x

Budaka Camp: \$5.10 cost per patient equals **\$29.90** at average available prices in Uganda.

True Value Means *Leverage!*

\$100 = \$590

in donation to Bulamu

worth of services at local prices Uganda

Bulamu's Program Costs in 2019

\$371k

Fair Market Value in Uganda

\$2.2M

Bulamu Patient Surgeries, 2019*

Rank	Surgical Procedure	Cases	%
1	Tumor Excision	338	24%
2	Hernia Repair - Adults	448	31%
3	Hernia Repair - Children	146	10%
4	Cataract surgeries	101	7%
5	Hydrocelectomy (testicular fluid removal)	54	4%
6	Thyroidectomy (goiter removal)	53	4%
7	C-section	36	3%
8	Haemorrhoidectomy (haemorrhoid removal)	31	2%
9	Cystectomy (cyst removal)	29	2%
10	Orchiectomy (testicle removal)	25	2%
11	Laparotomy (abdominal exploration)	24	2%
12	Perineal/Vaginal Repair	22	2%
13	Incision & Drainage (abscess)	19	1%
14	Uterine Evacuation (dead fetus removal)	19	1%
15	All Other	88	6%
Total Surgeries		1433	100%

* Summary including medical camp and Angel Program patient care.

Continuing Care: Bulamu's Angel Program

Every medical camp presents us with some very serious cases that need referral to specialty hospitals, often hundreds of kilometers distant. In 2019, we arranged and supported treatment for **373** Angel patients, with **149** cases requiring surgery. At an average cost of only **\$159** per patient, this is an incredibly cost-effective way to transform the life of someone who is critically ill and has usually lost hope. We pay for diagnostic tests, arrange direct admission to the appropriate hospital, provide transportation and family upkeep, and cover the patient's share of treatment costs. The Angel Program is now budgeted at about \$8000 per camp, although the treatments extend for 1-3 months afterward. This is one area where Bulamu's services are clearly saving lives.



In 2019, our Angel Program referred 14 patients for hydrocephalus surgery to our partner, CURE Hospital in Mbale. Here are three grateful mothers, whose prayers were answered for their young sons:



Juliet Kyomugisha and her 17-month old son, Benjamin, are seeking help at the Bulamu Angel Tent. The next morning, they were transported to Mbale, and three days after that the endoscopic surgery for post-infectious hydrocephalus was successfully completed.



Mother Fredian Ayebale holds her 9-month old son, Joshua, who has completed his pre-op exam and will have surgery at CURE the next day. Mom is joyous her son will get the life-saving treatment he needs. Joshua is not so sure.



Travis Ainomugisha, 4 months old, is shown with his mother Vastine as he recovers in the post-surgery ICU at CURE Children's Hospital, which has highly skilled surgeons and the latest patient monitoring equipment.

Benjamin, Travis, and Joshua have all since made a full recovery from their procedures!

Angel patients with complex orthopedic conditions get direct referral to our partner, CoRSU Rehabilitation Hospital near Kampala.

Mackline suffered from clubfoot for almost 3 years, but her family could not afford to get her the care she needed. Thanks to the support of Bulamu’s Angel Program, Mackline received surgery at CoRSU Hospital and is now making a full recovery.



“

I pray for the Bulamu team every night before going to bed so that they will continue to provide services to many other patients like me.”

Francis (22) lived in pain from 2010 on with an untreated fracture in his leg. He stopped trying to get medical care in 2015 and was waiting to die, immobile at home, until he heard of Bulamu’s Kyegegwa medical camp in 2019. Thanks to Bulamu and the care he received at CoRSU Hospital, Francis has now fully recovered.

Bulamu Angel Program Summary of Patients Treated, 2019

Rank	Patient's Condition	# of Patients	Percent
1	Orthopedic Conditions	88	23.6%
2	General Surgery (Hernia, mastectomy, hemorrhoidectomy, etc.)	66	17.7%
3	Skin and Plastics	27	7.2%
4	Oral Surgery (Tumor resection, mandibulectomy, excision & biopsy, etc.)	26	7.0%
5	Cervical Cancer	23	6.2%
6	Neurology (Hydrocephalus, tumors, palsy, etc.)	21	5.6%
7	Heart Conditions (Rheumatic heart disease, etc.)	18	4.8%
8	Fistulae (Vaginal-rectal, rectal-vaginal, vesicle vaginal fistulae)	15	4.0%
9	Urology (Obstructive uropathies e.g. BPH, congenital abnormalities)	13	3.5%
10	All Other (General medicine, ophthalmology, OB/GYN, hematology)	76	20.4%
	Total	373	100.0%

Continuing Care: Bulamu Follow Up Program

We extended our Follow Up Program to all 5 camps in 2019. This program partners with District governments and their Village Health Teams (Uganda’s Community Health Workers) to conduct surveys with patients who attended medical camps. In addition to providing us with valuable feedback, the Follow Up Program allows VHTs to provide referral forms on the spot to all patients who need additional care. **17,327** Follow Up Program interviews took place in 2019, yielding the following insights:

79%

of patients felt much better or had symptoms eliminated.

22%

of patients were referred to a local government facility for follow-up care.

81%

of patients were satisfied or very satisfied with medical treatment received at camp.

Health Center Excellence (HCE) Program

When Bulamu treats **17,000** patients in one week at a government community hospital that would normally serve that many patients in a year, it shows that the existing healthcare system needs help. The challenge is: How to improve patient care at Uganda's **3,200** public health facilities in a cost-effective and scalable way? We developed the HCE Program using solutions that could be implemented within the existing system by applying proven management techniques and providing relatively inexpensive, off-the-shelf medical devices.

Our pilot HCE partner, Sheema District in southwestern Uganda, has **26** public facilities: **7** hospitals with from 20 to 120 inpatient beds, and **19** small outpatient clinics. Together Sheema District's **26** health units treat over **200,000** patients per year with a total staff of **305** health workers. We decided that the best way to improve the productivity of this staff was with new management information that gives facility managers and district officials actionable weekly data on Key Performance Indicators (KPIs) for facilities and on productivity for clinicians.

The HCE Program Implements Management Solutions to Correct Common Weaknesses at Government Health Facilities

System Weaknesses	HCE Program Solutions
Patient Information: No patient treatment forms or easily accessible patient records.	Providing patient treatment forms and files in order to keep patient histories organized by name. One copy for patient, one for health system data and patient files at the hospital/clinic.
Equipment: Shortage of medical devices and office equipment	Supplying health units with basic medical equipment (scales, stethoscopes, thermometers), diagnostic devices, computers, printers.
Clinical Practices: Not providing today's standard of care (e.g. vital signs)	New clinical procedures require taking vital signs, increased hand washing, more training.
Medicine Supply Chain: Out-of-stock medicines, unfilled prescriptions.	Installing system for tracking stockouts, monitoring inventories, re-allocating supplies within District.
Staff Attendance: Absenteeism, low clinician productivity.	Installing biometric time clocks. Tracking weekly attendance, "payroll yield", clinician productivity.
Timely Data: No use of information technology for collecting actionable management data at facility level.	Installing HCE-IT System, with HCE forms library, data warehouse, and suite of 14 Tableau reports. Weekly Dashboard tracks 51 Key Performance Indicators.
Culture: Little emphasis on building teamwork or a motivating culture.	Providing white boards for visual management. Publishing league tables that rate health unit performance and recognizing both successes and failures.

Vital Signs

Results based on survey of 5,206 patient treatment records at 26 Sheema facilities conducted in February 2020.

Before (Nov. 2018 to Jan. 2019)

3% of patients had blood pressure taken

1 Year Later (Nov. 2019-Jan., 2020)

55% of adults had blood pressure taken

Clinical Benefit

25%

of adults tested had Stage 1, Stage 2, or Crisis level hypertension

For the first time in Uganda, managers and district officials now have factual weekly information to properly manage public health facilities and take corrective action where needed. They can enforce compliance with standard of care clinical regimens such as taking vital signs, maintaining up-to-date patient files, and improving patient treatment times. What gets measured gets done! With league tables and rankings, KPIs such as staff attendance, clinician productivity, and medicine stockouts are being measured and managed to improve performance.

Doctors and nurses like the HCE program because they have the diagnostic tools and patient information needed to do their jobs. Patients like the new system because they are getting treated more professionally and leave with a copy of their diagnosis and treatment record to share with family members. Managers like it because they can now manage with facts rather than anecdotes. The HCE program changes the status quo in Uganda by providing critical data to clinics, hospitals, and district officials on a weekly and monthly basis. As one Sheema doctor summarized it, "The HCE Program is a game-changer!"



Bulamu donated much appreciated PPE to prepare Sheema health workers to treat COVID-19 patients.

Sample Key Performance Indicators (KPIs) Being Tracked at HCE Facilities

- Outpatients treated
- Surgeries performed
- Inpatient days
- Total patients per headcount
- Payroll yield (% days on duty)
- Patients treated per clinician
- Mothers counseled per midwife
- Unfilled drug scripts %
- Drug SKUs out-of-stock
- Infectious disease cases
- Antenatal visits
- Perinatal deaths
- Immunizations
- HIV tests (% positive)
- Onsite CME classes
- Staff training hours
- Public health education classes
- Average patient treatment time

“ Before the HCE Program, patients tended to go to private clinics for care first, because they had so little confidence in the public healthcare system. That trend has now reversed. People are coming to our facilities first!”

Marion Alowo

Principal Health Inspector,
Sheema District

“ Bulamu’s HCE Program has changed the state of healthcare in Sheema District. Its impact can be seen in the supplies and equipment, in the management of the health centers, and the progress our healthcare has made in the past year. We are determined to continue this improvement.”

David Kabigumira

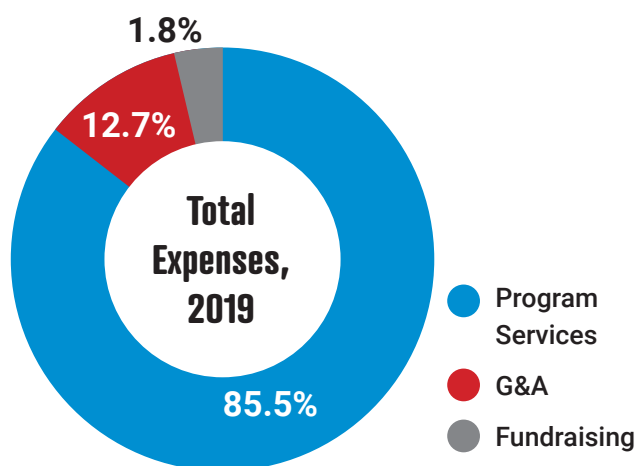
Chairman,
Sheema District



Management's Discussion and Analysis, 2019

In 2019 Bulamu's financial statements were audited according to **US Generally Accepted Auditing Principles** by PKF International, a global firm with affiliate offices in more than 100 countries. With their strong presence in Uganda, where all of our program activities and 86% of our expenses occur, they were able to observe our accounting procedures both in the field and at headquarters while providing constructive recommendations. In year 4, this was an important milestone in our growth. Other 2019 highlights:

- Revenues increased by 50%, from \$487,508 to \$730,933, after a jump of 167% in 2018. Contributions from foundations grew from 29% to 42% of total donations this year, reflecting our goal of moving toward institutional donors with longer time horizons and multi-year commitments.
- Expenditures on program services rose 43% in 2019. We now divide these into three program areas: **Primary Care, Continuing Care, and Health Systems Strengthening**. The Program Management team in Kampala provides on-site leadership in each area, so its expenses are divided between the different programs based on estimated time spent and related costs.
- We held five Supercamps again in 2019, with the average cost rising 18% to \$74,284 per camp from \$62,753 last year. Total patients treated at those camps jumped 44%, however, so our average cost per patient dropped 18% from \$7.35 to \$6.03. Our Ugandan team continues to perfect the Supercamp model while adding new services.
- Continuing Care program expenses jumped 129%, primarily because the cost per Angel Patient more than doubled. As word of Bulamu spreads, patients are coming longer distances with cases requiring more complicated surgeries. Yet treating the average Angel Patient still costs only \$159.47, a fraction of what it would in the U.S. We benefit from partnering with NGO specialty hospitals that rely on donor funds to reduce the patient's cost, which we cover along with travel and family upkeep.
- HCE Program expense climbed 115% as we moved from R&D in 2018 to implementation in 2019, while also investing heavily in HCE-IT computer programming. As we add more districts in 2020 and beyond, we expect the HCE share of total program services to grow steadily from 25% today.
- US support activities (admin and fundraising) edged up to 14% of revenues in 2019 from 10% the prior year, due to adding a full-time president and auditing our financials. We expect continued modest increases in this percentage as we build the US infrastructure and fundraising capability needed to support our innovative programs that are improving so many lives so cost-effectively.



Medical Camp Cost Summary, 2019

Partner Districts	Patients Treated	Camp Cost
Kamuli	8,593	\$67,379
Kiruhura	11,570	\$64,106
Bugiri	13,661	\$76,467
Kyegegwa	15,625	\$80,693
Masindi	12,139	\$82,774
Total	61,588	\$371,419

Financial Summary

BULAMU HEALTHCARE INTERNATIONAL - STATEMENT OF ACTIVITIES			
	Year Ended December 31		
	2017	2018	2019
			Audited
Support and Revenue			
Contributions from Individuals ¹	\$181,554	\$348,008	\$430,437
Contributions from Foundations	-	\$139,500	\$300,005
Interest Earned	-	-	\$491
Other Income (Loss)	\$699	-	-
Total Support and Revenue	\$182,253	\$487,508	\$730,933
Expenses			
Program Expenses (Uganda)			
Primary Care: Medical Camps	\$151,441	\$313,763	\$371,419
Continuing Care: Angel & Follow-up Programs		\$29,917	\$68,528
Health System Strengthening: HCE Program		\$70,118	\$150,924
Total Program Services	\$151,441	\$413,799	\$590,871
Support Activities (U.S.)			
General and Administrative	\$19,013	\$34,264	\$87,708
Fundraising	\$2,213	\$13,542	\$12,520
Total Support Expenses	\$21,226	\$47,806	\$100,228
Total Expenses	\$172,667	\$461,605	\$691,099
Change in Net Assets	\$9,586	\$25,903	\$39,834
Net Assets, Beginning of Year	\$65,702	\$75,288	\$101,191
Net Assets, End of Year	\$75,288	\$101,191	\$141,025

¹ Gifts in-kind in 2018 and 2019 were \$46,111 and \$33,629, respectively.

BULAMU HEALTHCARE INTERNATIONAL - STATEMENT OF FINANCIAL POSITION		
	Year Ended December 31	
	2018	2019
		Audited
Assets		
Current Assets:		
Cash and Cash Equivalents	\$144,249	\$126,058
Donations Receivable	\$10,530	\$12,023
Prepaid Rent	-	-
Inventory	\$6,514	\$3,254
	\$161,293	\$141,335
Non-current Assets:		
Equipment at cost, net	\$14,984	\$16,601
Total Assets	\$176,277	\$157,936
Liabilities and Net Assets		
Current Liabilities:		
Deferred Contributions	\$75,000	-
Accounts Payable	\$86	\$16,911
	\$75,086	\$16,911
Net Assets:		
Unrestricted	\$101,191	\$141,025
Total Liabilities and Net Assets	\$176,277	\$157,936

BULAMU MEDICAL CAMPS

\$6.22

cost per patient
(All time)

ANGEL PROGRAM

\$119

cost per patient
(All time)

HEALTH CENTER EXCELLENCE PROGRAM

\$0.85

cost per patient
(Year 1)

HCE PROGRAM

\$0.30

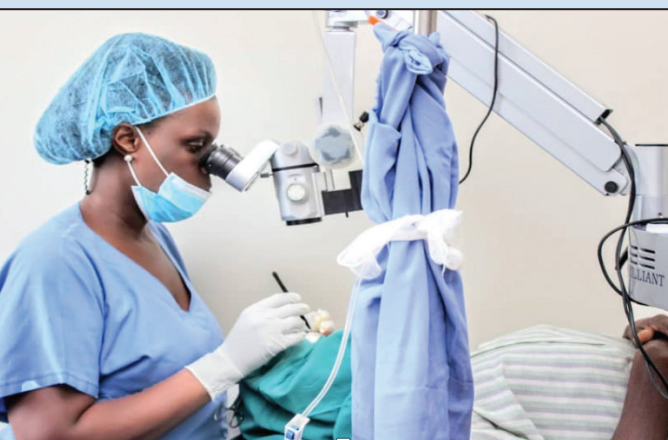
cost per patient
(Year 2 on)

Thank You to Our Program Partners!

Bulamu works as the “Great Organizer,” bringing together many program partners with complementary skills that allow us to provide such a broad range of medical treatments so economically. Some examples of our valued partnerships:

- Uganda Ministry of Health oversees 3,200 government hospitals and health centers and has overall responsibility for Uganda’s public health policy. In a recent letter of endorsement, Dr. Henry Mwebesa, Director General of the Ministry of Health, said, “In the context of Uganda’s healthcare system, Bulamu is a highly effective catalyst for mobilizing local resources and is an organization that the Ministry of Health is proud to have as a partner.”
- The Uganda Cancer Institute screened **2,250** women for cervical cancer at this year’s Supercamps, an average of **458** women per camp.
- Uganda Infectious Disease Institute provided **50** free circumcisions to men at the November 2019 camp, part of Uganda’s highly successful strategy to reduce HIV/AIDS rates—currently down to about 5.5% nationwide.
- Local District Governments host each camp, sharing a Health Center IV campus with our team for 8-9 days and helping with publicity, staffing, ambulances, security, and other support—all in a free exchange of services with Bulamu.
- Bulamu Angel Program approved referral hospitals include: CoRSU Hospital, CURE Hospital, Mulago National Referral Hospital, Uganda Cancer Institute, Reproductive Health Uganda, Kirudu National Referral Hospital, MoH regional referral hospitals and District general referral hospitals.

Featured Partner: Lions Club of Kampala



In 2019, the Lions Club of Kampala Central became our new ophthalmology partner, bringing their eyecare team to Bulamu’s medical camps with exceptional results. Led by club president Frank Muramura and ophthalmologist Dr. Grace Ssali Nsibirwa, their team has removed cataracts and restored sight to about **100** patients at each camp, many of whom have been living without eyesight for years.



What I saw at the Masindi camp changed me, personally and as a Lion. As the Lions Club of Kampala Central, we are proud to serve with Bulamu Healthcare as your partner. We are going to be with you for a long time.”

Benon Twebanze, speaking at the Lions Club of Kampala meeting, following Bulamu’s November 2019 medical camp

The Meaning of Bulamu

In the Luganda language of Uganda, Bulamu means: *The physical, mental, and spiritual well-being of the individual.* In essence, Bulamu means Life!

Our Mission

To treat the sick and strengthen health systems serving Africans most in need.

Our Strategic Vision

Our vision is to transform medical care in Africa by providing innovative primary care, continuing care, and health systems strengthening programs that leverage local partnerships to maximize patient impact.

Bulamu Healthcare's Leadership Team

MANAGEMENT



Dick Chandler
Board Chair & CEO



Richard Siegler
President



John Schniedwind
Secretary & CFO



Mackay Masereka
Vice President & Program Director



Esther Kabugho
Director of Administration



Joseph Bisaso
Field Operations Manager



Victor Walugembe
IT Operations Manager



William Wasanand
Angel Program Manager



Solomon Wasswa
HCE Operations Manager

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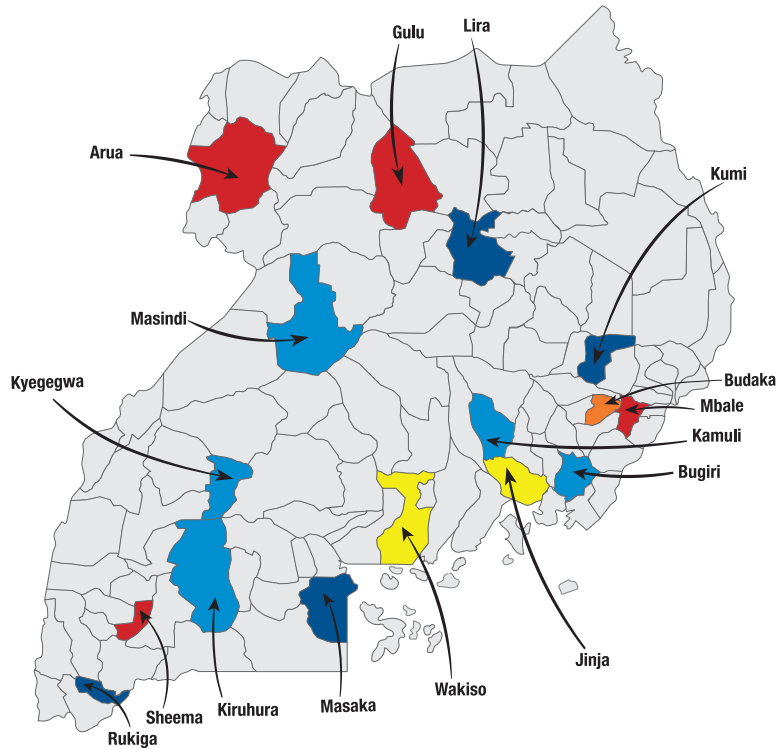
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Help Bulamu and Our Partners Transform One Life at a Time...

Bulamu Medical Camp Attendance

2016	Wakiso	1,820
	Jinja	2,856
2017	Sheema	4,765
	Gulu	5,480
	Mbale	7,996
	Arua	10,277
2018	Sheema	7,740
	Kumi	11,787
	Masaka	6,353
	Lira	9,446
	Rukiga	7,376
2019	Kamuli	8,593
	Kiruhura	11,570
	Bugiri	13,661
	Kyegegwa	15,625
	Masindi	12,139
2020	Budaka	17,206
TOTAL		154,690



Bulamu's Core Values

- 1. Healthcare Is a Human Right:** Operate with the underlying belief that access to professional healthcare is a basic human right.
- 2. Local Solutions:** Mobilize in-country organizations and local resources to provide more cost-effective healthcare delivery models that are dedicated to continuous improvement.
- 3. Culture of Caring:** Create an organizational culture that puts the patient first, is consistently caring, turns no one in need away, and attracts dedicated associates committed to our mission.
- 4. Information Driven:** Use information technology to strengthen health systems by collecting patient data, tracking outcomes, and improving management systems with weekly performance reports.
- 5. Evolve Toward Sustainability:** Leverage our resources by partnering with local government and private organizations and move toward economic sustainability that is independent of private donor contributions.
- 6. Spiritual Health:** Provide faith-based counseling as a component in the process of acceptance, treatment, and recovery from disease.
- 7. Do the Right Thing:** Act with honesty and integrity in everything we do.

Contact Us

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