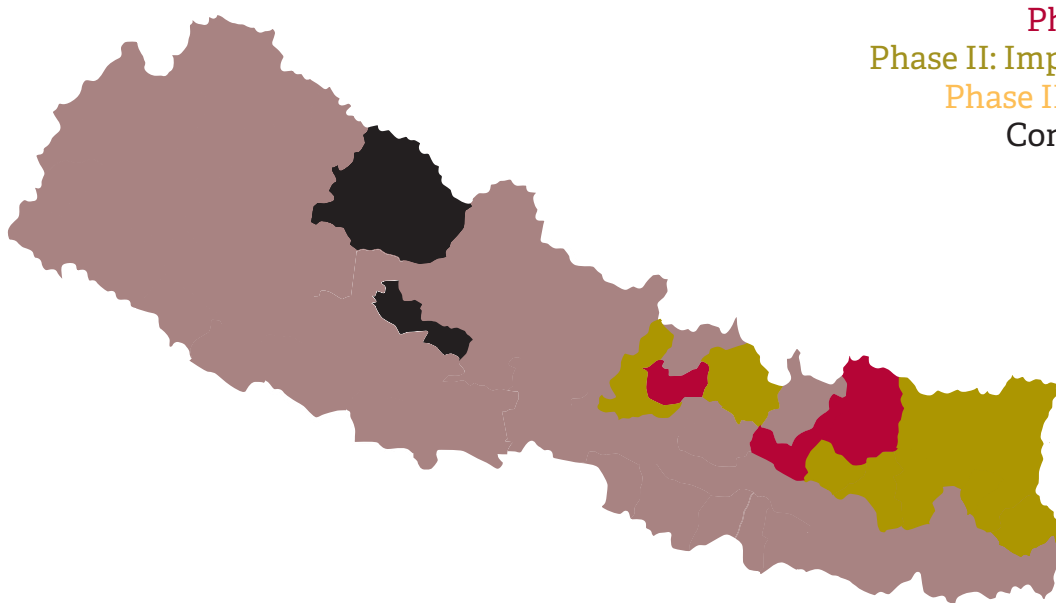


WHERE WE WORK

One Heart World-Wide (OHW) is currently active in 13 program sites (previously referred to as “districts”) representing a population of 2,626,970 and 70,448 annual pregnancies distributed in 122 palikas (municipalities) of 2 provinces (1 and 3).



Phase I: Set-up
Phase II: Implementation
Phase III: Transition
Completed Sites

PHASE I SITES (START-UP)

During Phase I, OHW collaborates closely with the government officials at the municipal level to establish our programs. New program sites (previously districts) usually include 6-12 municipalities (palikas), typically requiring a 12-month timeline for completion. Activities lay the foundation for program implementation and focus on human resources, as well as internal and external baseline data collection.

Our programs are currently being set up in 28 new palikas (municipalities), representing a population of 595,706, and 16,034 annual pregnancies.

Province	Former District	Terrain	Palikas	Population	Pregnancies per year
1	Solukhumbu	Mountain	8	104,045	2,741
3	Ramechhap	Hills	8	207,510	5,671
3	Nuwakot	Hills	12	284,151	7,622

Program notes: We hired the District Coordinator for the Solukhumbu program site.

PHASE II SITES (IMPLEMENTATION)

Phase II is the most resource-intensive phase of program development, typically requiring a three-year timeline for completion. All training programs and facility upgrades occur during this phase as we establish the tailored systemic support structures necessary within each program site to build a framework for long-term change. Once implemented, all activities are strictly monitored by our field teams for quality assurance.

Our programs are currently being implemented in 94 Palikas representing a population of 2,031,264 and 54,414 annual pregnancies.

Province	Previous District	Terrain	Palikas	Population	Pregnancies per year
3	Dhading	Mountains	12	349,827	9,483
3	Sindhupalchok	Mountains	12	293,180	7,741
1	Bhojpur	Hills	9	163,711	4,360
1	Khotang	Hills	10	183,511	4,943
1	Terhathum	Hills	6	101,242	2,778
1	Panchthar	Hills	8	196,038	5,309
1	Taplejung	Mountains	9	130,132	3,474
1	Sankhuwasabha	Mountains	10	157,091	4,196
1	Okhaldhunga	Hills	8	150,881	4,113
1	Ilam	Hills	10	303,381	8,017



Community Stakeholders Trained



Community Outreach Providers Trained



Skilled Birth Attendants Trained



Medical Providers Receiving CME



New Birthing Center Upgrades

Q1 Target	994	2,203	22	46	12
Q1 Actual	613	1,589	22	46	4
Variance	-381	-614	0	0	-8

We are required to wait for the Ministry of Health to provide new guidelines for the newly elected Health Facility Management Committee (HFOMC) members before we can complete this training.

The recent governmental changes delayed the purchase of misoprostol (an essential component of our outreach provider training program that is usually provided by the government). This forced us to delay our training rollout for Q1. We expect to catch up in Q2.

CME = Continuing medical education, which includes MNH updates for medical providers, USG training for SBAs and SBA coaching and mentoring.

In response to feedback from our Nepali auditors, we worked with the HFOMC to revise existing agreement templates, requiring a brief delay in activities. OHW will hire two short-term construction consultants in an effort to recover from the delays; we expect significant progress in both Q2 and Q3.

PHASE III SITES (TRANSITION)

During Phase III, program leadership transitions to the local municipality, typically requiring a two-year timeline for completion. OHW maintains regular contact with the local municipalities, trainees, and birthing centers, offering refresher trainings and providing support as necessary.

As of Q1 2018, there are no program sites currently in Phase III. Given recent political restructuring, OHW leadership determined that transition in the earthquake-affected program sites in Dhading and Sindhupalchok would be delayed until 2019.

COMPLETED SITES

Our programs were completed in 18 palikas, representing a population of 318,401, and 9,082 annual pregnancies.

Province	Previous District	Terrain	Palikas	Population	Pregnancies per year
4	Baglung	Hills	10	278,244	8,058
6	Dolpa	Mountains	8	40,157	1,024

PROGRAM SCALE-UP: STATUS UPDATES

With the new federal structure now in place, our partnership has shifted from the district level to the municipal level. The new political system now requires OHW to seek approval from each individual municipality to operate. Overall, the municipal level representatives have been supportive of our work, particularly in areas where our programs were already in existence. As an example, in order to improve institutional delivery rates, the Tripurasundari Rural Municipality (Dhading) decided to provide an additional cash incentive to all pregnant women delivering in one of their health facilities in addition to the pre-existing government cash incentive.

Some of the newly elected local representatives in the municipalities are struggling to understand the intricacies of the Nepali healthcare system, highlighting the need for additional training for community stakeholders. OHW has started to implement the relevant Family Health Division training package to address this specific issue (41 participants from Sankhuwasabha and 24 from Terhathum were trained during Q1).

We are in the process of codifying our program transition and completion processes under the new federal structure. Programs will now be transitioned to the municipal leadership (instead of the district health offices). We are also currently assessing our completed sites in Baglung and Dolpa where the program was transitioned to the now-defunct district government. It is likely that we will have to reach out to the new municipalities to ensure that our original investment can and will be maintained in both locations. However, this would require us to seek approval from the Social Welfare Council as our project agreement for these two program sites expired in December 2017.

Staff Count: Full-time: 68, Part-time: 8

PARTNERSHIPS

Medic Mobile mHealth project Baglung and Dhading



Pregnancy registration dropped significantly this past quarter, from 59% to 47%. Our team is monitoring the program carefully to assess whether this trend simply indicates the potential peak saturation point for registration or whether it is a result of something else.



Infant Warmer Project Sindhupalchok

Feedback from local health workers during the mid-term evaluation was largely positive, identifying the Embrace warmers as both useful to the health workers and culturally accepted by the community. All eight preterm infants used the warmers during transport to a referral center, reflecting 100% usage. In light of these successes, we plan to seek approval from the Child Health Division to scale up the program.

Dartmouth College Supply Chain Project Terhathum



The mobile app was updated to ensure municipalities were included when monthly stock reports are issued. We provided an orientation session to the supply chain project for Municipality Health Coordinators where our team successfully tested the system with participants. Thus far, we are excited to see full participation from the health facilities.

MedicalAidFilms

Training Materials Project Countrywide

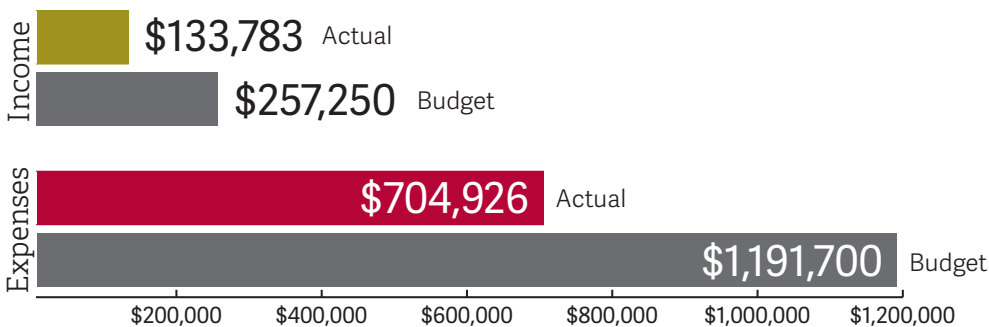
The Reproductive Health IEC/BCC technical committee lead by National Health Education, Information Communication Centre approved all the film scripts that will be used to make short educational videos for national maternal and neonatal health training programs. Medical Aid Films sent a team to Nepal to take the initial footage required for each of the films.



Brilliance Pro Phototherapy Project Countrywide

We received approval from the Child Health Division to distribute 39 phototherapy devices in 24 hospitals. The study protocol is currently being finalized for IRB approval.

Q1 FINANCIALS



New Commitments

- Evolve Foundation - \$13,000