

NOORAHEALTH

**IMPACT REPORT | Q1 | 2018**



Dear Friends,

Q1 marked the beginning of an exciting new chapter for Noora. Shahed, Noora co-founder, recently graduated with his MD from Stanford University, where we had met at the d.School. After a brief time away from the organization, he has decided to return to Noora and India full-time. In his words, “I wanted to dedicate myself to our mission and felt most connected and effective when I was on the ground with the team.” His passion for the work, instinct and brilliance are going to catapult us forward, and the team and I could not be more excited. Shahed returns in the role of President, based full-time in India, where he will focus more internally, allowing me to focus more externally to continue our close engagement with funders and partners.

On the programs side, our most promising implementing partner to reach our target population is Indian state governments; working with and through this massive infrastructure has been both thrilling and humbling. In our 2017 Impact Report we shared that quality would be a focus for this year because we have seen the direct link between quality of program delivery and impact on the patient/family. In Q1 we launched several experiments and prototypes to improve and better manage quality in the district government setting. We have featured some of the results in this report and look forward to sharing more next quarter as we have more data.

As always, reach out to us with any questions or input. We value it more than you know!

Warmly,  
Edith

# What Happened in Q1?

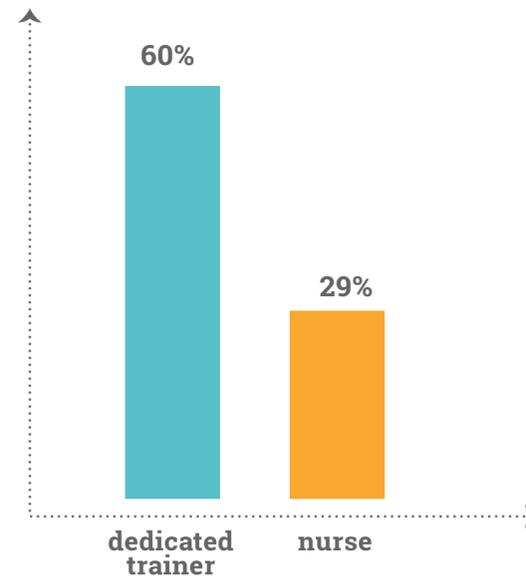


**24,716** family members trained in Q1 2018

**181,510** family members trained till date

We trained double the number of people in Q1 2018 vs. in Q1 2017 (12,613) and are on target to reach our goals in this area for the year.

% of admitted patient families trained



We reached 2x as many mother and newborn families in hospitals where we placed dedicated trainers vs. those where we have the traditional nurse model.

**154**

**Training Spot Checks Conducted**

We modified the way we conduct unannounced, random audits to understand quality. So far, we have audited sessions in 11 of 12 district hospitals in Karnataka and Punjab.

# Highlights



## mHealth Testing

We are piloting WhatsApp and SMS to disseminate health information to patient families. Over 1,500 patients have enrolled. 55% have basic mobiles and have received our text messages, and 45% are active WhatsApp users with smartphones and have received our training videos. Our WhatsApp users have read 84% of the messages sent and initial data indicates they are successful in promoting key health behaviours. Over the coming months we plan to expand the pilot and have outcomes data to share.



## Hiring Dedicated Trainers

We hired 4 additional trainers who are employed by Noora vs. the government/hospital to coordinate and run sessions. They are all local women, and come from a variety of backgrounds and experiences. We are already seeing positive results from this test - it is helping us expand across wards in some of the hospitals where we previously faced human resource constraints, is increasing the number of people we reach within the hospitals where we work, and it gives us more control on session quality.



## Training Delivery

We have adopted new methods to determine how changes in our neonatal class format and delivery affect engagement, knowledge retention, and behaviour uptake. Early testing across 4 hospitals has shown that we consistently improved audience engagement by reducing class length, reordering the playback of our new videos and increasing the use of practical demonstrations during class.



## Meet Sureka

We met Sureka and her aunts, Ningama and Nangama, during a recent visit to the Sri Jayadeva Institute of Cardiovascular Sciences and Research in Bangalore. Originally from a district in north-eastern Karnataka, the trio travelled all the way to Bangalore when the local District Hospital referred Sureka for more specialized cardiac care. “We knew something was really wrong when Sureka started having breathing problems, especially when she would carry her backpack to school,” her aunts told us. Ningama and Nangama have been supporting Sureka in the hospital for over 2 weeks awaiting her surgery.

Sureka and her aunts shared that, before the training, they were not aware that there are serious warning signs to look out for after the surgery. They thought post-surgery everything would be better and there would be nothing else to look out for or for them to do. When we asked Sureka how she felt about her upcoming surgery, she told us confidently “Now I have no fear.”

**Sureka, Ningama, and Nangama are 3 of 8,181 people trained in the Cardiac Care Companion Program in Q1.**

# Challenges

Here are a few areas where we could use your help.

## Aligning Work Plans

Working closely with government health departments requires aligning our work plans with public budgeting and planning procedures. We have adapted, but it feels slow. Do you know organizations that are doing this well, maintaining strong government relationships, but not slowing down as a result?

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## Hiring

Hiring dedicated trainers in Karnataka has proven to be challenging from an HR perspective and required more localized approaches. Do you know organizations in India that have strong local hiring and management practices?

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## Content Focus

We have been humbled by the amount of interest we receive to develop new content areas. While it is exciting to witness the extreme need and demand for the intervention, it also means that we are being pulled in multiple directions. Keeping the team and our partners focused has taken a lot of learning and negotiating.



# Financials

## Balance Sheet

	Audited As of 31 Dec 2017	Unaudited As of 30 Sep 2018
<b>CURRENT ASSETS</b>		
Cash and Cash Equivalents	2,609,644	2,559,019
Accounts Receivables	116,383	1,155
Programs Receivables	1,950	1,950
Receivables from Employees	- 0	- 0
Prepaid Expenses	4,035	5,778
<b>Total Current Assets</b>	<b>2,732,012</b>	<b>2,567,902</b>
Other Assets (Rental Deposit)	5,203	5,203
<b>TOTAL ASSETS</b>	<b>2,737,215</b>	<b>2,573,105</b>
<b>CURRENT LIABILITIES</b>		
Accounts Payable	16,686	37,596
Accrued Expenses	86,654	33,821
<b>Total Current Liabilities</b>	<b>103,340</b>	<b>71,417</b>
<b>NET ASSETS</b>		
Unrestricted Net Assets	2,633,875	2,501,688
<b>Total Net Assets</b>	<b>2,633,875</b>	<b>2,501,688</b>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>2,737,215</b>	<b>2,573,105</b>

## Income Statement

	Unaudited 31-Dec-2017	Year-to-Date 31-Mar-2017	Year-to-Date 31-Mar-2018	Y-o-Y Difference	Variation (%)
<b>Income</b>					
<b>Donations</b>					
Foundation	2,189,394	51,052	152,015	100,963	198%
Corporate	250	250	- 0	(250)	-100%
Individual	2,178	375	376	1	0%
Stipends from Non-Profits	22,500	22,500	- 0	(22,500)	-100%
<b>Total Donation Income</b>	<b>2,214,322</b>	<b>74,177</b>	<b>152,391</b>	<b>78,214</b>	<b>105%</b>
Other Income	- 0	- 0	3,200	3,200	0%
<b>Total Income</b>	<b>2,214,322</b>	<b>74,177</b>	<b>155,591</b>	<b>81,414</b>	<b>110%</b>
<b>Operating Expenses</b>					
Personnel Expenses	839,306	158,353	220,146	(61,793)	-39%
Benefit Expenses	11,807	3,164	1,981	1,183	37%
Outside Services	55,869	7,813	10,044	(2,232)	-29%
Direct Program	151,407	37,641	32,505	5,136	14%
Fundraising	2,040	390	1,475	(1,085)	-278%
Overhead Expenses	88,414	17,180	21,626	(4,446)	-26%
<b>Total Operating Expenses</b>	<b>1,148,843</b>	<b>224,541</b>	<b>287,777</b>	<b>(63,237)</b>	<b>-28%</b>
<b>Net Income</b>	<b>1,065,479</b>	<b>(150,363)</b>	<b>(132,186)</b>	<b>18,177</b>	<b>12%</b>

\*all values are in USD

Thank You!

