



ANNUAL REPORT 2020

**EAST
TIMOR
HEARTS
FUND**



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BENVINDU/ WELCOME

We are delighted to present East Timor Hearts Fund's 2020 Annual Report. This report is designed to provide an overview of our performance against our financial and service objectives. 2020 also marked our 10th year of operation, which is a testament to our dedicated partners, volunteers and supporter community who have saved lives and improved health outcomes for heart patients in Timor-Leste.

Mission

La'o Hamutuk – Walking together for heart health

We will collaborate with people, government and health institutions in Timor-Leste to support development of local capacity and improve access to cardiac care and heart disease prevention in Timor-Leste.

Acknowledgement of Traditional Owners

We acknowledge the Traditional Owners of the land on which we meet today, the Wurundjeri people of the Kulin Nation.

We recognise their continuing connection to land, waters and culture. We pay our respects to their Elders past, present and emerging.

We commit ourselves and our organisation to helping Timor-Leste to reduce the country's very high rates of cardiovascular disease and in particular rheumatic heart disease.

CEO REPORT

The global COVID-19 pandemic brought us many challenges in 2020, but we were able to remain relevant, effective and active despite the travel restrictions, border closures and lockdowns. This was also the start of our celebrations of ten years of saving lives in Timor-Leste.

Despite difficulties in providing surgeries and getting our volunteer clinical team into Timor-Leste during much of the year, we were still able to deliver four life-saving surgeries in Australia, an in-country clinic in February screening 125 patients in 3.5 hectic days before the borders closed, and our penicillin RHD prevention program continued under sometimes very difficult conditions due to COVID-19 restrictions.

It was also a difficult year in that we farewelled our great partner Dr Dan Murphy who sadly passed away in April. Dr Dan was a great friend to East Timor Hearts Fund, and more importantly a great advocate for healthcare for his young patients in Timor-Leste.

As always, we thank our hospital partners Royal Melbourne Hospital, Eastern Heart Clinic, Monash Heart and Hospital Nacional Guido Valadares.

The pandemic and the ever changing environment created the need to be innovative and think on our feet. With this in mind, we delivered:

- Many thousands of pieces of personal protective equipment to help keep frontline healthcare workers in Timor-Leste safe;
- Our first webinar focusing on Timorese leaders and health experts speaking on the handling of the pandemic in Timor-Leste;

- Our first online cardiac screening clinic so we could check on the condition of some of our more at risk patients;
- Thirty Buzzy Bee needle pain relief kits for regional clinics around Timor-Leste to improve the penicillin injection experience and encourage participation for the children on our penicillin program;
- We procured a new second-hand echo machine with paediatric scanning capability which we used at our February clinic;
- A follow-up study on Timor-Leste school students with rheumatic heart disease for the European Heart Journal;
- An independent report from ACIL Allen found that our impact added 54 years to the life expectancy of our patients and that a dollar donated to us delivered \$20 of benefits;
- Our first volunteer and partner recognition awards to provide recognition and appreciation to the wonderful people who make everything possible. Congratulations to Ari, Virag, James, Belinda and the RHD team at Maluk Timor for their awards, recognising their outstanding contributions towards improving access to heart healthcare services in Timor-Leste;
- An agreement with Give2Asia to allow US and Hong Kong based donors to support our work with tax deductible donations; and
- More online fundraising, such as Virtual Run Melbourne, to enable us to keep delivering while lockdowns and restrictions

prevented face-to-face fundraising events.

And although we were sad to see our co-founder and inaugural Chair Ingrid Svendsen step down as Chair of our Board after a long innings, it was wonderful to welcome the very experienced NFP leader David Lloyd to the Board as our new Chair in December. I look forward to working with David to deliver great benefits to the people of Timor-Leste.

I must thank our amazing supporters and volunteers for continuing to support our work to save lives in Timor-Leste through life-saving surgery, in-country and online cardiac screening clinics, heart healthcare capacity building and heart disease prevention.

Our ambassadors Sir Peter Cosgrove, Anche Cabral and Lin Jong were tremendous support through the year. And we appreciate their every effort and support for our essential work.

I would also like to thank our terrific healthcare partners and especially our professional staff, Operations Manager Diana Marques and Fundraising Manager Kim Gasperino for their professionalism, commitment and dedication during a very challenging year.

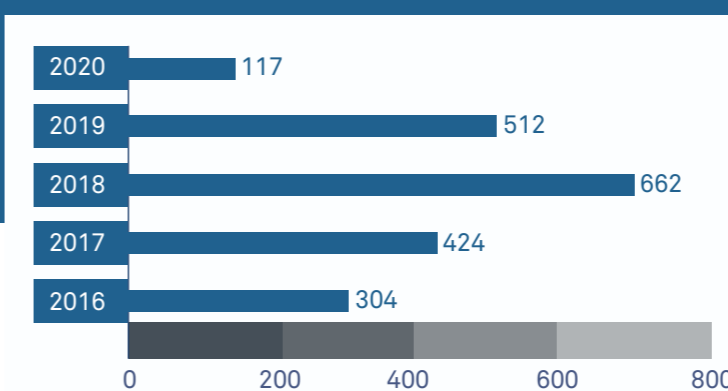
David Marlow
Chief Executive Officer



SERVICE DELIVERY

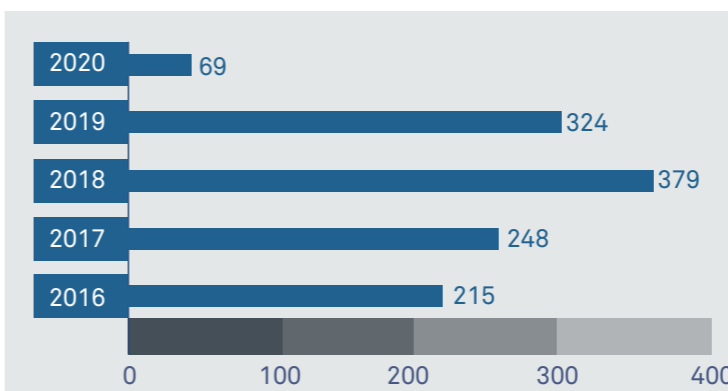
Our first in-country clinic for the year was held in February followed by three patient surgeries in Australia the following month. A further surgery was undertaken in November. As COVID-19 restrictions closed international borders, we adapted our support for our healthcare partners through the provision of PPE whilst reconfiguring our patient clinics to be delivered online. Our new online format not only provided support to patients waiting for surgery, it also provided an opportunity to further upskill our healthcare partners in Timor-Leste.

PATIENTS SCREENED



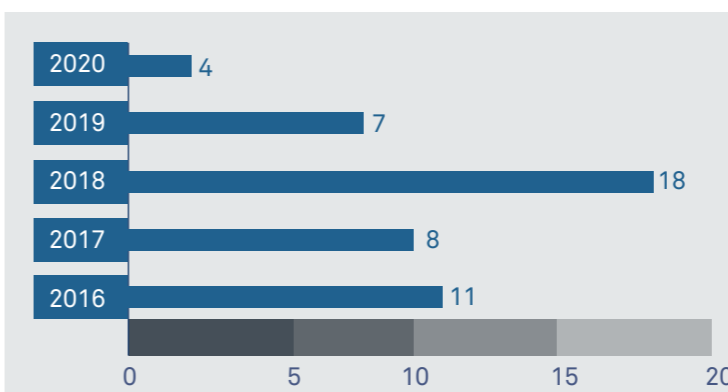
WOMEN & GIRLS

*RHD has a higher prevalence in women and girls (1 in 20) in Timor-Leste



SURGERIES

**2018 – includes 10 in Timor-Leste. 2020 planned in-country surgery delayed due to COVID-19 restrictions.



CHAIR REPORT

2020 was a year of transition for East Timor Hearts Fund. As we came to the end of our first ten years, our founders Noel Bayley and Ingrid Svendsen were able to look back on their vision and leadership with justified pride, having not only responded with great humanity and generosity to the needs of the people of Timor-Leste by enabling hundreds of lives to be saved in the short term, but having also built an organisation that now has realistic ambitions to make a serious, long term contribution to the cure, prevention and treatment of heart disease there.

This transition from emergency response to long term strategic contributor, puts East Timor Hearts Fund in a position of greatly increased potential. But with this comes a number of responsibilities, not the least of which is to listen to and be guided more than ever by the community and the authorities in Timor-Leste as they identify and articulate their needs and aspirations.

Reflecting this, we have adopted the Timorese saying 'La'o Hamutuk' – walking together – as our guiding principle for this next period of our development. The devastating rates of Rheumatic Heart Disease experienced in

Timor-Leste, and the associated wider incidence of heart disease more generally – rest on a wide range of social, economic and health service capacity factors that even as we continue to respond to the ongoing need for surgery, must be addressed if these rates are one day to fall. Getting this right, and making a systemic contribution to Timor-Leste's long term cardiovascular health, means that organisations such as ours must listen, listen and keep listening to our friends and colleagues on the ground there, and be guided by their deep understanding of priorities and needs.

2020 was of course a massive challenge globally, but our incredible clinical team did everything possible to ensure that we remained active, running remote clinics and even co-ordinating one patient to access heart surgery in Melbourne. Their determination for surgery. Their determination that our work should continue was inspiring and as ever, we owe a huge debt of gratitude to them for their continued dedication and generosity.

Similarly our many supporters in Australia and beyond – in particular donors and volunteers – maintained their enthusiasm

for our work and continued to work hard to find new ways, in unparalleled circumstances, to be useful and to contribute to our mission of improved cardiovascular health in Timor-Leste.

Looking back on 2020, all of us who are associated with East Timor Hearts Fund whether as clinicians, volunteers, donors, board members, or staff, feel proud to be involved with the organisation first imagined into existence by Ingrid Svendsen and Noel Bayley. It is our great privilege to carry on the legacy of their work, walking together with the people of Timor-Leste towards better heart health.

David Lloyd
Board Chair



ADJUSTING TO COVID-19 NORMAL

In March 2020, as the impacts of COVID-19 global pandemic began to infiltrate our region, it soon became apparent that our planned service provision for the remainder of the year was going to have to be redesigned.

Uncertainty around the timing of ongoing international border closures and the ever-changing healthcare environment here in Australia led us to develop a 'COVID-19 normal' model. Our priority was to ensure our health care partners in Timor-Leste were provided practical help during a time of unprecedented crisis so they could support our heart patients. Timor-Leste does not have adequate ICU capability to support many patients needing ventilation should they be affected by COVID-19.

We helped Timorese healthcare workers and their patients, by sending over urgently needed personal protective equipment (PPE).

PPE was vital to support efforts to contain and prevent COVID-19. We are grateful to the volunteers who got involved in making the equipment, while others helped with the coordination of delivering the items to a central location to be shipped to Timor-Leste.

As Victoria plunged into a second major lockdown, planned in-country clinics and surgeries were no longer viable for the remainder of the year. Our team of medical volunteers worked hard with our in-country health partners to design alternative services.

We held our first online clinic with patients in Timor-Leste and cardiologists in Melbourne and Sydney, to monitor patient health and continue to manage treatment options and medications.

We are so grateful to our Australian-based volunteer cardiologists Drs Liz Paratz, Will Wilson, Simon Eggleton, Virag Kushwaha and Noel Bayley, as well as our in-country

partners at Maluk Timor, especially Dr A Joaquina Maurays, Ricky Flavio, Jess Harries, Sergio da Silva, Juliana Sarmiento and Anary dos Santos.

The clinic was a great success and an important step in keeping in touch with our patients during this constrained COVID-19 world.

It was also an important opportunity to check on how our March surgical patients were going.

Our online clinic model has been further developed and will provide a complement to our ongoing service provision in the future



October on-line clinic providing care to Anina after her surgery in March 2020.



Health partner Maluk Timor supporting our new online clinic format.

SOCIAL IMPACT

For every dollar you invest, we create 20 dollars in benefits

For the past decade we've been inspired by the extraordinary work our expert volunteers and partners undertake to save young lives. Witnessing the courage shown by our heart patients, as they trust us to support them back to good health, is a privilege we don't take for granted. On behalf of our donors, we are committed to ensuring their generosity is delivering the maximum benefit to a community they are most passionate about.

We have broadened our range of programs since our inaugural benchmark report was delivered in 2015 and so it was timely we commission another independent Social Impact Return On Investment (SIROI) study to continue to track the health, social and economic impacts our work has in Timor-Leste.

Your gift generates 20 times the benefit to young heart patients in Timor-Leste

Our study demonstrates that our primarily volunteer-based model is highly effective. Our positive impact has increased in the past five years, showing that for every dollar invested, our programs now drive a staggering 20 dollars in benefits. Harnessing our dedicated volunteers' expertise in cardiac care and supporting health services, ensures our supporters are investing in quality sustainable outcomes for young heart patients in Timor-Leste. Conducted by independent researchers ACIL Allen Consulting, the study highlighted on average that our patients experience:

- 54 additional years of life
- a 95 per cent increase in quality of life

On average the economic value of these additional years per patient is AU \$29,914. Overall the social return on investment is AU\$1 : AU\$20.

Every day we see the measures of our positive social impact come to life, as with the story of Tomas who had life-saving heart surgery in 2014. Now 38 years old, he and his wife have become parents to a beautiful little boy and he was able to resume his job as a school teacher. Now thriving, Tomas not only provides an income for his young family and helps with household activities, but he also positively contributes to his community as an educator. As Tomas reflects:

'When I had this disease, I often felt weak, trouble breathing, I could not lift things and (I lost) weight dramatically. I appreciated .. everything .. being done ... to save my life. I can ... go to work and continue my career as (a) teacher in public school and help my wife (with) other work at home.'

Our donor community has provided hundreds of young patients with access that vital heart healthcare they need across our services, enabling patients to study, work and thrive in their communities. Our supporters' investment in our model continues to deliver substantial benefits to the Timorese community.



*Independent research conducted by Acil Allen Consulting 2020

FINANCIAL OVERVIEW

I am pleased to present to you this summary of our financial statements for the year ending 31 December 2020. Independent auditor Crowe Australasia has audited the financial statements, which we have prepared in accordance with Australian Accounting Standards.

A surplus was achieved during the year which partly reflects one-time income results and reducing, deferring and cancelling expenditure in response to the pandemic.

JobKeeper has been a critical protection from adverse financial impacts from COVID-19 (now and in future) that has enabled staff to be employed longer than would otherwise have been possible and remain focused on supporting the people we serve. Prudent and professional disciplines are applied to all aspects of managing our financial performance and capital.

Donors

2020 has seen a challenging environment for attracting charitable donations, the

devastating impact of bushfires and the pandemic have meant that available resources have been highly sought after. Despite this ETHF continues to prioritise generating income to fund and support the Timor-Leste community.

Investment Governance

ETHF's Finance and Audit Committee continued to spend significant time developing the investment approach this year to ensure our donors and bequests are creating an impact.

ETHF Finance and Audit Committee and Board developed a Financial Reserves policy which underpins our Investment Management Strategy.

Investment risk appetite was considered to further develop the investment philosophy to ensure we are maximising returns, maintaining corpus assets and growing our ability to be agile to program deliverables.

ETHF maintains a lower risk appetite and investment risk

profile. This approach may lead to lower expected returns from the portfolio when compared to riskier approaches. However, the Board and Finance and Audit Committee has greater confidence regarding the sustainability of its operating activities and reduce the volatility of the investment returns.

The Board and management have maintained a strong cash flow and balance sheet for ETHF.

ETHF was solvent as at 31 December 2020 and the Board expects this trend to continue. We invite you to share in our meaningful work by making a personal tax deductible donation.

Katrina Thurston
Chair, Finance and Audit Committee



Summarised financial statements

Income summary 2016-2020	2020	2019	2018	2017	2016
Charitable support - Non-Bequests	281,465	305,659	384,387	218,075	1,184,864
Charitable support - Bequests	-	2,237,973	-	-	-
Interest and Investment Income	85,647	27,888	31,381	10,131	24,495
COVID-19 Income	125,098	-	-	-	-
Total	492,210	2,571,520	415,768	228,206	1,209,359

Key expenditure items	2020	2019	2018	2017	2016
Salaries & wages	268,009	236,148	176,425	127,118	99,153
Patient costs	156,121	217,741	215,332	182,723	224,235
Total	424,130	453,889	391,757	309,841	323,388

Summarised statement of profit and loss	2020	2019	2018	2017	2016
Income					
Donations	281,465	2,543,632	384,387	218,075	1,184,765
Interest and Investment Income	85,647	27,888	31,381	10,131	24,495
COVID-19 Income	125,098	-	-	-	-
Total revenue	492,210	2,571,520	415,768	228,206	1,209,260

Expenditure	2020	2019	2018	2017	2016
Patient support services	156,121	217,741	215,332	182,723	224,235
Subscriptions	1,906	3,189	2,264	5,126	2,014
Insurance	6,269	6,640	5,479	1,815	4,436
Bank charges	1,310	752	1,003	827	262
Promotional expenses	19,233	47,988	37,615	17,779	16,379
Employee expenses	268,009	236,148	176,425	127,118	99,153
Depreciation	7,052	1,544	-	-	-
Other expenses	82,119	38,786	39,399	56,021	13,668
Total expenditure	542,019	552,788	477,517	391,409	360,147

(Deficit)/surplus for the year	(49,809)	2,018,732	(61,749)	(163,203)	849,113
Other comprehensive income	99,270	31,271			
Total comprehensive income for the period	49,461	2,050,003			

Summarised statement of financial position

Current assets	2020	2019	2018	2017	2016
Cash and cash equivalents	322,044	543,892	540,369	1,069,256	1,185,870
Financial Assets	2,730,681	2,457,323	426,047	-	-
Receivables	30,231	15,996	8,233	1,676	2,264
Prepayments	-	4,912	6,012	4,184	24,348
Total current assets	3,082,956	3,022,123	980,661	1,075,116	1,212,482

Non-current assets	2020	2019	2018	2017	2016
Property, plant and equipment	12,448	-	-	-	-
Total non-current assets	12,448	-	-	-	-
Total assets	3,095,404	3,022,123	980,661	1,075,116	1,212,482

Current liabilities	2020	2019	2018	2017	2016
Payables	35,349	21,908	28,514	72,339	46,502
Employee entitlements	15,867	5,654	11,119	-	-
Total current liabilities	51,216	27,564	39,633	72,339	46,502
Total liabilities	51,216	27,564	39,633	72,339	46,502
Net assets	3,044,188	2,994,531	941,028	1,002,777	1,163,250

Equity	2020	2019	2018	2017	2016
Retained earnings	2,931,387	2,980,999	941,028	1,002,777	1,165,980
Revaluation reserve	112,801	13,532	-	-	-
Total equity	3,044,188	2,994,531	941,028	1,002,777	1,165,980

The summarised financial statements have been derived from the audited financial statements of East Timor Hearts Fund for the year ended 31 December 2020



STRONGER TOGETHER

Our healthcare partners in Australia and Timor-Leste have effectively collaborated throughout 2020 to support essential heart health services. We kicked off the year liaising with Maluk Timor to send a team of ETHF medical volunteers to run a successful in-country clinic

The teams from Royal Melbourne Hospital and Sydney's Eastern Heart Clinic worked tirelessly to ensure our heart patients had successful heart surgeries before being safely returned to Timor-Leste just days before international borders were closed. When the global pandemic forced ETHF to pause international surgeries, we worked closely with our in-country partners to identify their changing needs. Their immediate concern was sourcing sufficient PPE so their health workers could remain safe and minimise the spread of COVID19 should it enter the country. Australian supporters and partners helped with sourcing PPE and coordinating shipments to Timor-

Leste.

Concern for our surgical patients grew. Our volunteer cardiologists worked with our in-country partners Maluk Timor, HNGV and RACS to create our first online clinic. The new service provided a continuity of care to our former overseas surgical patients who could be monitored to ensure their post-surgical care plans were maintained and adapted to safeguard their heart health. The online clinic was also an important opportunity for medical teams to work in collaboration to assess and adjust individual care plans and prioritise our patient surgery list for when overseas surgery resume.

We expanded our prevention programs to address barriers to Rheumatic Heart Disease (RHD) prevention. Penicillin programs offer a line of protection from RHD developing to advanced heart disease in young people. Unfortunately, the injections can be painful and some children and

their families resist participation through fear. To address this, we supported the roll-out of the Buzzy Bee program which uses a device to reduce pain at the injection site. The feedback has been positive with many patients reporting a reduction in pain. One of our patients, Tomazia reported "I'm happy when using the buzzy bee because it helps to reduce the pain when I get the injection because of the vibration". We have distributed them to eight clinics across the country, with further roll-out planned in 2021. Healthcare workers have received training and ongoing mentoring to improve the patient experience and increase participation in immunisation to treat and prevent advanced heart disease in the young.



February clinic team with MT



Maluk Timor running Buzzy Bee training for childhood penicillin programs

MEDICAL ADVISER REPORT

It is a pleasure to provide this, my last annual report as Medical Adviser to East Timor Hearts Fund. In some respects, this has been the most difficult year since we founded the organisation.

Direct patient care, and in particular life saving procedures, have largely been stalled by the COVID-19 pandemic.

Although we did just sneak in three surgeries, who were literally on the last Darwin to Dili flight before shut down.

Special kudos to the Sydney team, who literally performed miracles. But despite the difficulties, a great deal has happened.

First, and tragically, the sudden death of Dr Dan Murphy needs to be acknowledged. Dan was a good friend to me, and a hugely competent and enthusiastic supporter of our work. We shall not see his like again.

We've run online clinics to support our patients and colleagues in TL. An unsatisfactory substitute for boots on the ground, but worthwhile nonetheless.

There has also been an energetic and practical response to the needs arising from COVID-19.

And a lot of forward looking work is in progress, aimed at both prevention and effective treatment

of RHD (our principal foe), and at improving the long term capacity of local services in-country.

So I find myself simultaneously somewhat depressed by the immediate reality, and rather exhilarated by the future. We, and our Timorese friends, will get through this.

With your support, the medium term looks very good indeed.

Noel Bayley
Honorary Medical Adviser



SUPPORTER COMMUNITY

Generosity and a 'can-do' attitude is at the heart of ETHF's supporter community.

For the past decade, our supporters have remained focused on creating a healthier future for heart patients in Timor-Leste. This year, their determination stood out in the face of unprecedented uncertainty. With several of our planned fundraising and community engagement activities cancelled, our donors remained steadfast in supporting our neighbours in Timor-Leste.

Whether it be donating to our fundraising appeals, participating in virtual

fundraising events, giving in memory of a loved one, attending our supporter webinars, or sharing our campaigns on social media, our supporter community continued to give so our service model could adapt to provide ongoing care to patients in crisis during the global pandemic.

We were disappointed we could not engage with our supporters in person at our regular events such as our annual Golf Day or Run Melbourne, however our supporters soon embraced our virtual events, generously responding to our appeals and online activity. We are so grateful for our supporters' enthusiasm

and determination during a tough and uncertain time.



Kim Gasperino & Fundraising Marketing Manager

ALL IN A DAY'S WORK



organisation has what they need, when they need it.

The best part of my role is meeting our patients and seeing first-hand the results of their surgeries and consultations, performed by our volunteer cardiologists. In early 2020, just as COVID-19 was making its way around the world, we had three patients in Australia about to undergo life-saving surgery. It was a battle against time and borders were quickly closing.

We reached out to our supporters and partners and did everything we could to ensure that the surgeries went ahead and that we'd be able to get our patients and two patient escorts back home quickly and safely to Dili. Our partners at the Royal Melbourne Hospital and Eastern Heart Clinic in Sydney came through for us and the surgeries were a success. The challenge then became getting everyone home.

We liaised with our contacts at Reho Travel who scrambled to find flights from Melbourne and Sydney into the Northern Territory and then

onto Dili, as airlines quickly began to cancel flights. We pleaded with our government contacts in the NT and airport personnel, to allow our patients and their escorts to catch the last flight back to Dili for the foreseeable future. There were already talks about going into quarantine for two weeks in Australia and after the surgeries our patients had just undergone, this was not an ideal option.

We got them back home to Dili safely, but their journey had not ended there, as they were required to quarantine in Dili for two weeks. However, they were safe and happy to be back in Timor-Leste, with their post-surgery improved health. Everyone gave a huge sigh of relief, that we were able to help three more patients, before the world as we knew it changed. I can't wait to see our patients again and have more of them come to Australia, for the life-saving surgery that literally changes their lives. This is why I love being a part of ET

Diana Marques Operations Manager

2020 Supporter Highlights



COVID-19 webinar



Diana with volunteer patient support coordinator Anabela Marcal, patient escort Dr Joaquina Maurays, and patients Anina and Maria in Sydney.

FOUR PRECIOUS LIVES ARE SAVED



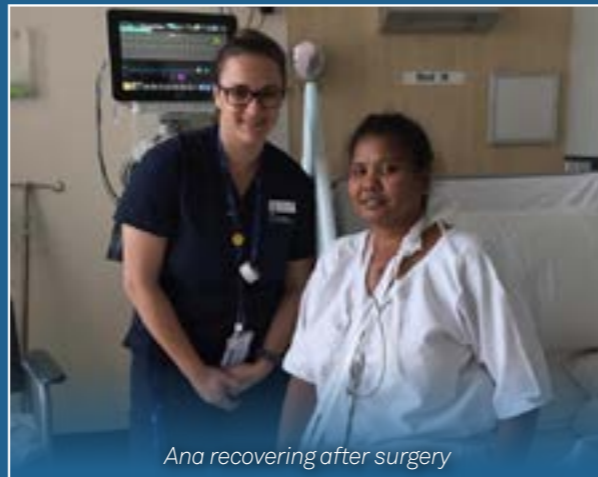
Dr Eggleton checking on Anina after surgery

Anina

Anina was living with a debilitating, life threatening heart condition. Anina told us,

“I could not look after my children at home and take them to school. I could not wash clothes and I struggled to do any activity at home as I felt short of breath all of the time,”

Anina was one of three patients who were brought to Australia for urgent heart surgery in March 2020. Her surgery was a success and she is now thriving, no longer suffering from her condition and enjoying her time caring for her young family.



Ana recovering after surgery

Ana

Ana has been living with heart disease since 2014. Experiencing severe shortness of breath and fatigue, she was forced to stop attending secondary school. Desperate for answers, she attended Bairo Pite Clinic and consulted with Dr Dan Murphy who referred her to an ETHF in-country clinic and was subsequently sent to Australia. Ana explained,

“I felt so well and continued my study at secondary level and helped my parents at home.”

Fortunately, Ana had continued to attend ETHF's clinics. In recent times Ana's health started to deteriorate again and in February 2020 it was discovered that she urgently needed to return to Australia for a second surgery which saved her life. Ana's health has improved and she is now pursuing tertiary study.



Maria with Dr Eggleton after surgery

Maria

Maria was diagnosed with heart disease in 2017. Maria shared,

“At that time I was very sick and could not walk far and was short of breath most of the time. My heart palpitations beat so fast, I was tired and lacked energy to go to school and had no appetite to eat.”

After having her surgery in Australia in March, Maria is now able to resume her university studies and is in good health, enjoying everyday life, free from the debilitating symptoms she once endured.



Jose's post-surgery consultation with Dr Cochrane

Jose

Early in 2020, Jose reunited with his brother Victor and his family during a long-awaited holiday in Melbourne. One day, Jose suddenly became unwell, experiencing shortness of breath.

He was rushed to hospital where they diagnosed a severe heart problem. He was in urgent need of surgery. During that period international borders had shut and he could not get surgery through our public health system as he is not an Australia resident.

Jose was referred to ETHF who worked with our health partners in Melbourne who performed heart surgery in November 2020. Since the surgery, Jose's health has improved and the father of six is looking forward to returning home to Timor-Leste as soon as international borders open.

BOARD REFLECTIONS

Our dedicated volunteer board directors have invested many hours into steering East Timor Hearts Fund through a year of unparalleled change. 2020 was a year of transformation on many fronts. Aside from supporting our programmatic adaptation to COVID-19 normal, we welcomed our new Board Chair David Lloyd, acknowledged our ten year milestone, developed the new 2021-20214 strategic plan and launched our annual volunteer recognition awards.

Our directors reflect on their personal highlights from 2020.

Vijaya Joshi

“2020 saw a completely different operating environment for ETHF. I was heartened to see such successful management of the pandemic in Timor-Leste, a real achievement for a country that has a fraction of the health systems resources of Australia.”

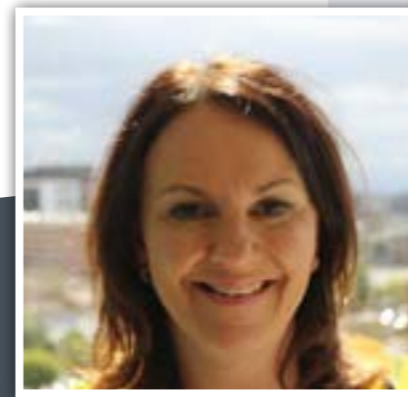
A personal highlight was that, as an organisation, we were able to quickly adapt to support our colleagues in Timor-Leste in a practical way. As the impacts of the pandemic continue to unfold, my hope is that ETHF can continue to adapt our activities to be as relevant and effective as possible.”



Ingrid Svendsen

“In a COVID-constrained year, 2020 offered many highlights. We celebrated our 10th birthday (albeit without a party) and stepped up during the pandemic, offering online clinics and shipping personal protective equipment to support the Timorese COVID 19 response. I’m proud of how our board and organisation pulled together in a challenging year.”

My eight-year stint as inaugural chair ended in December 2020, as part of a structured succession process. It’s been an immense privilege to share in East Timor Hearts Fund’s growth and development. I’ll continue to watch with pride.”



Katrina Thurston

“2020 was the year for highs and lows. With the impact of COVID-19 ceasing the majority of ETHF’s surgeries, we continued to support our partners in Timor-Leste as best we could. In the meantime, we spent time creating an amazing new membership model and I am inspired by the many volunteers and our staff who continue to dedicate valuable time to ETHF to ensure it flourishes and is a success.”

We continue to support our partners in Timor-Leste through the ever changing landscape as we prepare the organisation for surgeries to commence as soon as practicable.”



Professor Peter Barlis

Joining East Timor Hearts Fund has been an honour and privilege. Working as a cardiologist I am confronted daily with the challenges of cardiovascular disease. In particular, the community in Timor-Leste face a significantly high burden of Rheumatic Heart Disease that unfortunately continues to impact the lives of all the community. I am proud to see the wonderful work the organisation has achieved at driving down rates of RHD through a variety of health prevention and intervention strategies. Hearing the stories of patients and their families about the positive impact East Timor Hearts Fund has had on the local community gives me great enthusiasm about the future of the organisation and the enduring impact we can have when we work collaboratively with the support of our members, volunteers, and partners.



Belinda Macdonald

“Like many of us, COVID-19 has meant a change of plans for 2020. I was planning to join our clinical team in Dili in June, and instead have been thoroughly impressed by the work of our clinical volunteers to run our first online clinics.”

These online clinics have been essential to check in on our patients in Timor-Leste, and have been a credit to all involved.”



Dr Will Wilson

“In my first year as a board member I was impressed with ETHF’s continued evolution as an organisation, reflected in particular in the development of a new membership model.

With the inability to perform its core clinical work in 2020, the medical team’s online clinics have provided valuable support for the Timor-Leste clinical team and afforded refinement of the waitlist for procedures once travel to Australia is permitted.”



David Mayne

“COVID-19 brought our life saving work to a complete halt due to the inability of our people getting to Timor-Leste or them being able to come to Australia. It also made it extremely difficult for us to fundraise during this period. However, during this time we have set out a strategic plan that will increase the number of operations we can do once the pandemic is contained.

We have also reviewed our policies and procedures to ensure they are relevant for the future of our organisation and formalised several important relationships that will be valuable when our work recommences.”



Nick Oats

“My highlight for the year was seeing the organisation adapt to the challenges of COVID-19, making sure it could still make a difference on the ground in Timor-Leste despite the obvious challenges of travel restrictions.

Whether it was sending PPE to help the national response to the pandemic, or partnering with Maluk Timor deliver online screening clinics, the flexibility of the organisation, its volunteers, and supporters shone through.”



David Lloyd

“I joined the board of East Timor Hearts Fund towards the end of 2020 and was honoured to be invited to take on the role of Chair in December.

Mostly all I’ve done since is listen and learn, but if there’s one thing I take away from the year it’s the impressive passion and commitment that the CEO and staff, the board, our volunteers, clinicians and donors bring to the organisation.

The move to expand our membership base to allow people in all these categories of supporter to become members was far sighted and necessary, and I congratulate my board colleagues on the work they all did to make this happen. We have a lot to do over the next few years, but I’m certain that this inspiring community of support will enable us to deliver on our mission to reduce the burden of heart disease in Timor-Leste.”

DIRECTORS MEETINGS

The following table sets out the number of directors’ meetings held during the financial period and the number of meetings attended by each director (while they were a director). During the financial period, nine board meetings were held.

	Directors	Eligible to Attend	Attended
1	Ingrid Svendsen	9	9
2	David Lloyd	2	2
3	Professor Peter Barlis	9	9
4	Professor Andrea Driscoll	8*	0
5	Vijaya Joshi	9	9
6	Belinda Macdonald	9	8
7	David Mayne	9	8
8	Nick Oats	3	3
9	David Thomas	3	2
10	Katrina Thurston	9	8
11	Dr William Wilson	9	8

**Note: Whilst eligible to attend, Professor Andrea Driscoll was on a board-approved leave of absence at 7 board meetings in 2020.*

FOUNDATIONS, FOCUS, FUTURE

Developed by our Board, in consultation with staff, volunteers, health partners and government, and facilitated by Price Waterhouse Coopers, our plan has been created under three core themes: Patient treatment; Skills transfer and education, and Prevention and research. The 2021-2024 plan builds on our decade of achievements, and continues to be delivered primarily by volunteers. Our focus will be directed towards delivering four main goals as outline below.

1 HELP GROW THE CAPACITY OF TIMOR-LESTE TO DELIVER QUALITY HEART HEALTH CARE.

ACTIONS

1. Work towards eradication of Rheumatic Heart Disease (RHD) in Timor-Leste by developing and funding research to advance understanding of heart disease and its prevention in Timor-Leste.
2. Augment clinical skills in, and relevant to, cardiology in Timor-Leste, including paediatric cardiology.
3. Enhance delivery of training and skills development for allied healthcare and other support professionals in Timor-Leste.
4. Improve access to essential medical supplies and equipment to build capability in the Timor-Leste heart health system.

MEASURES

1. Publish at least six relevant research studies in recognised international medical journals by the end of 2024, that are referenced by Government and development assistance providers, and inform policy and practice.
2. Support the training of at least one Timorese medical professional to become Timor-Leste's first paediatric cardiologist by end of 2023.
3. Deliver at least 400 hours of training to healthcare workers by end of 2024.
4. Invest at least \$100,000 in local medical equipment, maintenance and supplies in line with the needs of Timor-Leste health authorities.



2 SAVE MORE LIVES THROUGH ACCESS TO SURGERY.

ACTIONS

1. Establish in-country presence to enhance patient management, clinical administration and surgical program support.
2. Expand our hospital network to six to double our capacity for patient surgeries.
3. Extend our telehealth service delivery, such as for regional clinics.
4. Increase paediatric cardiac surgery capacity.
5. Partner with an international organisation to deliver an in-country open heart surgical program.

MEASURES

1. Provide a cumulative total of more than 140 surgeries by end of 2024 and average 20 surgeries per year over four years.
2. Increase our number of hospital partnership MOUs to at least six.
3. Conduct at least two telehealth clinics a year.
4. Provide at least four paediatric cardiac surgeries annually by 2023 and at least three PDA surgical trips in Timor-Leste by end of 2024.
5. Partner to deliver an in-country open heart surgical mission.



3 PARTNER WITH LEADING LOCAL ORGANISATIONS TO PREVENT AND REDUCE THE BURDEN OF HEART DISEASE IN TIMOR-LESTE.

ACTIONS

1. Work with partner organisations to develop and support implementation of an RHD action plan for Timor-Leste.
2. Deliver education, awareness and hygiene programs that contribute to the elimination of RHD.
3. Work with partner organisations to enhance women and children's heart health in Timor-Leste.
4. Continue to deliver prophylaxis and collaborate in the development of new prevention programs.
5. Collaborate with and support local organisations whose work has the capacity for a positive impact on the social and economic causes of RHD.

MEASURES

1. Support and participate in an RHD summit in collaboration with Timor-Leste authorities and relevant Australian and international organisations, culminating in support for the development of the Timor-Leste government's RHD Action Plan.
2. Deliver RHD community education and awareness to more than 100,000 households in Timor-Leste.
3. Support at least one women and children's heart health program.
4. Introduce at least two new preventative health initiatives by the end of 2024.
5. Support at least one water, sanitation and hygiene awareness program.



4 STRENGTHEN OUR ORGANISATION AND GROW OUR COMMUNITY OF SUPPORTERS.

ACTIONS

1. Expand our donor base in Australia, Timor-Leste and the USA to support our program ambitions.
2. Implement initiatives to make our values live with our volunteers, staff, donors and community.
3. Identify and meet technology needs to support future service delivery.
4. Improve our access to advice from experts and community stakeholders in Timor-Leste.
5. Increase engagement among individuals and organisations with an interest in our work.
6. Ensure continued high standards of clinical governance and clinical data management.

MEASURES

1. Achieve more than \$1m in annual revenue from a diverse and growing funding base by the end of 2022.
2. Recruit more than 100 diverse company members by end of 2022.
3. Deliver at least one new technology-based service improvement by the end of 2024.
4. Establish a Timorese Advisory Council with direct input to strategic and operational planning by end of 2021.
5. Introduce a regular stakeholder experience survey by end of 2022.
6. Introduce regular auditing of clinical service delivery by end of 2022.





WITH GRATITUDE

Thank you to our volunteers who contributed so many hours of their time to support health services, governance, advocacy, promotion and engagement. Thank you to the thousands of supporters who engaged with our social media, online events, and newsletters to help us educate and advocate for improved cardiac services in Timor-Leste. Thank you to our amazing healthcare, corporate and community partners who worked with us to improve our programs. Thank you to our incredible donors - your generosity throughout 2020 has saved more lives through surgery, clinics and prevention programs as well as support in-country partners with urgent medical supplies during an unprecedented COVID-19 period.

Philanthropics and funds

• Give2Asia • Lord Mayor's Charitable Foundation • San Carlos Foundation • Silicon Valley Community Foundation
• The AL Lane Foundation • The Good Business Foundation • Willfish Gift Fund

Major donors

• Alan & Jancis Dixon • Annie Fisher • David Beanland AO • David Mather • David Radonich • Geoffrey Woodman
• Graham and Alison Ridley • Heather Morris • Ian Gray • Jackie Power • James McCaughey • Jane Gorman
• Jane Shennan • Ken Leongue • Leo Collins • Leon Poggioli • Liam Callaghan • Maureen Murphy • Michael Maley
• Neville & Jacqui Jones • Dr Noel & Mrs Yve Bayley • Peter & Mary Hughes • Peter McMullin • Robert Dempster
• Rosalie Murnane • Stephen Draper • Susan Bell • Tania Burstin • Tom Tootell

Corporate and community

• ACIL Allen • Beleza Group • Dandee Donuts • Ernst & Young • GE Healthcare • Gorman Clothing • Hyland Healthcare
• Mayers Recruitment • Pfizer • Procurelink • PwC • Reho Travel • Rotary in Kind • Russell Kennedy • Timor Plaza Hotel
• Truly Deeply

Health and medical

• Bairo Pite Clinic • Eastern Heart Clinic • Hospital Nacional Guido Valadares (Guido Valadares National Hospital)
• Maluk Timor • Monash Health • Prince of Wales Private Hospital • Royal Australian College of Surgeons (RACS)
• Royal Melbourne Hospital • St John of God Outreach Services • Timor-Leste Ministry of Health • WHO Timor-Leste

Volunteers and supporters

• Dr Alan Appelbe • Alzira dos Reis • Amelia Pickering • Ana Saldanha • Anabela Marcal • Anche Cabral • Andrew Mahar
• Dr Ari Horton • Professor Andrea Driscoll • Professor Andrew Cochrane • Belinda Macdonald • Bill Appleby
• Daniel Mendelbaum • David Gerrard • David Lloyd • David Mayne • David Thomas • Dr Derk Pol • Eddie de Pina
• Dr Elizabeth Paratz • Dr Flavio Brandao • Dr Frederico Bosco • Inacio Carvalho • Inacio dos Santos • HE Inês Maria de Almeida
• Dr A Inês Teodora • Ingrid Svendsen • Jacqueline Tan • James Dickie • Senator James Paterson • Januario dos Santos da Silva
• Dr Jeremy Beckett • Jess Harries • Dr Joaquina Maurays • Dr Josh Francis • Juliana Sarmento • Julie Kean
• Karsten Horne

CELEBRATING 10 YEARS

It started with a news story

In September 2010, newspapers reported on a desperate plea by Dr Noel Bayley and Dr Dan Murphy for help to urgently get teenage patients Ursula and Flavia to Australia for life-saving heart surgery. When the news stories appeared, the response was immediate. Donations poured in; corporate travel support was pledged. Within six weeks, East Timor Hearts Fund was born.

Inspired by the media coverage, our co-founder Ingrid Svendsen joined with cardiologist Dr Noel Bayley to create an organisation to support Dr Bayley's heart health work in Timor-Leste.

Saving teenagers as simple as an airfare

Two East Timorese teenagers could die soon unless they receive heart treatment available in Australian hospitals. But officials in Dili have refused to pay their airfares from a government fund set up to cover the cost of patients travelling overseas for urgent medical treatment.

Dan Murphy, an American doctor at the Bairo Pite clinic in Dili, says Flavia Lucilda Guterres, 19, could die at any moment from a heart condition that cannot be treated in East Timor.

"It appears the fund is reserved exclusively for the elite, and ordinary Timorese are not eligible," Dr Murphy said. ***"Our application was rebuffed in no uncertain terms."***

Dr Murphy has been able to keep Ms Guterres alive since she became extremely unwell a week ago. ***"We can't keep doing that for much longer,"*** he said.

Dr Noel Bayley, a cardiologist from Warrnambool in Victoria who has helped Timorese patients for years, has offered to pay for Ms Guterres to travel to Melbourne as soon as arrangements can be made.

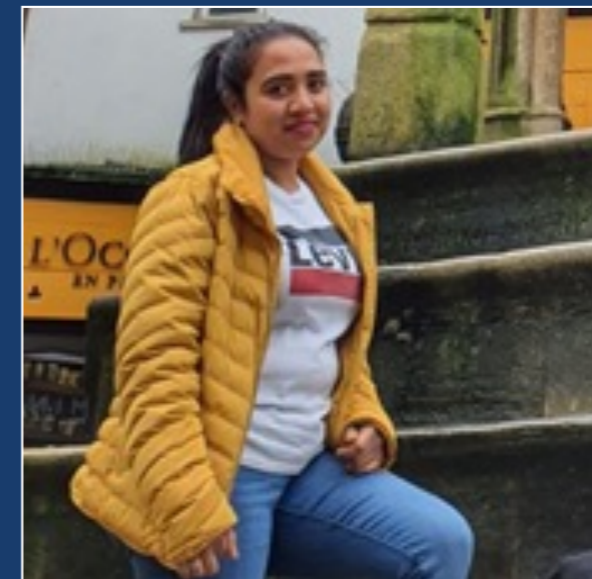
But Dr Murphy's clinic does not have the funds for the airfare of another teenager, Ursula de Carvalho Soares, 17. Professor Richard Harper, a cardiologist, and staff at the Monash Heart medical centre in Melbourne have offered to provide life-saving treatment for both teenagers, who are suffering from severe mitral stenosis, the narrowing of a heart artery.

The disease is often caused by childhood rheumatic fever, which is rife in East Timor. Dr Bayley said that if ***"push comes to shove"*** he will pay to bring both teenagers to Australia, as he had done with other Timorese patients.

"It becomes an expensive hobby so any help would be welcome," he said.



Prof. Richard Harper and Dr Noel Bayley with our first patient Flavia



Flavia is still thriving 10 years later

CONTACT

East Timor Hearts Fund
PO Box 5146 Melbourne VIC 3001
info@easttimorheartsfund.org.au
ABN: 59 160 158 074

**EAST
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