



Little
Hearts

Little Hearts

Project Brochure

JOIN US IN BUILDING A HOSPITAL WING FOR CRITICALLY ILL CHILDREN OF SRI LANKA
Project supported and endorsed by Sri Lanka College of Paediatricians

LITTLE HEARTS: PROJECT SUMMARY

We, the concerned citizens of Sri Lanka, joined hands with Sri Lanka College of Paediatricians to launch “Little Hearts” - a nationwide campaign with a goal of providing immediate access to critical care to all Sri Lankan children struggling with congenital heart disease (CHD) and other critical illnesses.

With your support, over the next two years we will collect sufficient funds for the construction of a Cardiac and Critical Care Complex of the Lady Ridgeway Hospital. Together we will expedite the expansion of this landmark institution to provide the necessary treatment to all our little ones in need.

In two years, we will have secured a more certain future for generations to come and saved thousands of lives in so doing.

This project is government-approved and deemed a national priority, as well as endorsed by [Sri Lanka College of Paediatricians](#).

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LADY RIDGEWAY HOSPITAL FOR CHILDREN

The Lady Ridgeway Hospital for Children (LRH) is a tertiary care children's hospital in Colombo, Sri Lanka. With a bed-strength of over 900 and nearly 3,000 patients visiting for outpatient care daily, it is now considered to be the largest children's hospital in the world.

All services are free of charge in keeping with the free state healthcare policy of the Sri Lankan government.

UNEQUAL ACCESS TO CRITICAL CARE:

THE DANGER OF WAITING

Children's Heart Centre

LRH is the only tertiary care referral centre for children with congenital heart disease (CHD) in the country at present.

Over the years, the Children's Heart Centre (CHC) of LRH has evolved to encompass different treatment options, as well as increase resources to accommodate greater numbers of patients. For instance, the cardio-thoracic surgery at LRH became available in 2007. In the five years that followed, the hospital tripled its number of annual surgical procedures from 273 to 882 cases.

The LRH cardiology team's passion and efforts have pushed the hospital's capacity for treatment of children with heart disease from 15% to 60% in just a few years, earning them the prestigious [BMJ Medical Award](#) for Cardiology Team of the Year in 2015. Their ambition is to push the limits even further until they reach 100% - i.e. until they can provide quality treatment to all children in need of cardiac and critical care.

CCU Milestones:

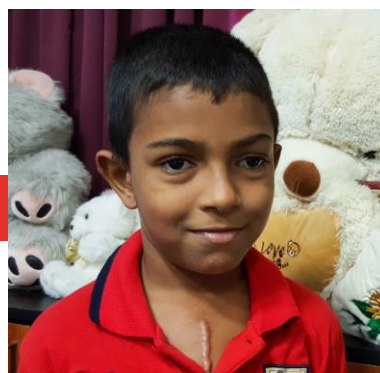
1999 - Paediatric Cardiology unit established with one consultant cardiologist, a medical officer and an attendant.

2001 - Cardiology ward

2005 - Catheterisation laboratory

2007 - Cardiothoracic operating theatres and a six-bedded cardiothoracic ICU

2010 - Cardiothoracic ICU II with 12 beds



Meet LRH's little hearts

However, the CHC's capacity is now capped. This hospital wing can no longer expand and it can treat only up to 1,700 children with CHD annually, while the number of children in need of treatment is far greater: *it is estimated that over 3,000 children are born with CHD in Sri Lanka per year*. Consequently, *every year over 40% of these children do not have appropriate access to the treatment they desperately need*.

Children in Need of Treatment	CHC Capacity	Children Forced to Await Treatment
~3000	<1700	≥40%

Paediatric Intensive Care Unit

LRH's growing waitlists testify to the hospital's current inability to cope with the number of critically ill children in need of its services. With an inventory of 11 medical intensive care unit (ICU) beds, the hospital can currently accommodate only 40% of the total of its medical requests, *leaving 60% of critically ill children at risk*. Left to their own devices, parents of these children must nurture their little ones in general wards, or in severe cases, check them into *private institutions where intensive care costs anywhere from LKR 100,000 – 500,000 per day!*

In ideal circumstances, a hospital would allocate 10-30% of all of its beds for intensive care. At LRH, however, *the medical ICU beds constitute only 1% of the total*.

Ideal % OF ICU BEDS	% OF ICU BEDS currently available
10-30	1

Unless placed under proper care, critically ill children are at great risk of succumbing to the illness.

UNDERSTANDING THE GRAVITY AND SCALE:

THE IMPORTANCE OF LRH AND THE NEED FOR UPSCALING

Vulnerability of Child Patients

Children are fragile and their health is unpredictable – it is a universally acknowledged truth. Yet, no parent ever dreams that **their** child would suffer from life-threatening conditions such as CHD, pneumonia or dengue. No one is ever prepared.

Unlike adult patients, children are fully dependent on their parent’s resources. Most of these parents are young and incapable of paying the premium fees for private hospitals or foreign institutions, so all their hopes lie with government institutions that provide fully subsidised treatments.

But what happens when the public hospital has no room for your baby?

When faced with waitlists with a severely ill child in hands, desperate parents resort to private hospitals. Insurance does not cover conditions such as CHD, so they sell property and move mountains to defeat the odds. However, **almost no property sale or loan is enough to tackle the cost of intensive care that exceeds LKR 100,000+/day and is often required for weeks and even months.**

Adult Care	Child Care
Need for treatment (usually) arises towards retirement	Newlywed / Young parents
Financial reserves for treatment	- Wedding expenses, No reserves
Children emancipated	- Carrying pregnancy to term + cost of child upbringing
Insurance	No insurance covers
Workplace benefits	Workplace benefits do not cover children

LRH’s free services and exceptional medical staff make this hospital the beacon of hope for many - if not most – families in Sri Lanka with children suffering from various critical illnesses. **If we are to provide all our children equal opportunities at a healthier and happier life, it is crucial that we invest our efforts into the maintenance and expansion of this institution.**



IT CAN HAPPEN TO ANYONE: The Story of Sakila's Second Birth

Sajeewa and his wife will never forget the year of 2005. They were awaiting the birth of their first child. Friends and family were waiting by the phone while the parents-to-be drove off to hospital with an anxious tickle in their bellies. The crib was prepared; toys, blankets, nappies and feeding bottles neatly organised; ceremonies and celebrations planned – all was ready to welcome their first bundle of joy. But they would soon discover that their immense joy came hand-in-hand with heartache.

Their son Sakila was born at the Negombo Hospital. His first cries thrilled the parents, but not the doctors who observed Sakila's face as it changed colours towards the deep shades of blue. The baby's health was worrisome and after just a few examinations, it was determined that Sakila was born with CHD. And so, instead of welcoming their baby to their carefully prepared home, Sanjeewa and his wife began their long tour of Sri Lanka's hospitals.

In 2005, no public institution in Sri Lanka had a centre or staff specialised in the treatment of infants with CHD. Sakila was admitted to the National Hospital in Colombo, but he was deemed too tiny to be treated by the hospital's staff specialised in adult cardiac care. He was then referred to the Sri Jayawardenapura Hospital which as well was unable to perform the complex surgery on such a fragile patient. Soon, it became apparent to Sanjeewa and his wife that public hospitals simply did not have the resources to aid their child.

Even though a family of humble means, they refused to let finances step in the way of Sakila's life. They raised loans and checked him into a private healthcare institution in Colombo. There, Sakila underwent a heart surgery and spent his first birthday in a hospital bed. In 2010, he needed another procedure due to unexpected complications after the surgery. Even after a few weeks, Sakila was still unwell. He had a swinging fever and needed a prolonged hospitalisation which his parents could no longer afford.

He was transferred to LRH for further care. His condition deteriorated and one Saturday morning he had a cardiac arrest. He was taken to the operating theatre for emergency surgery. After a few hours, he was transferred back to intensive care, now ready to begin his life as a healthy child.

"We call the day he was taken out of that operating theatre his 'second birth,'" said Sanjeewa who to date passionately supports LRH in any way he can. No matter how busy, he is always happy to take time to share his story and encourage others to pay attention and give their support to the institution that saved his child's life.

Since his last surgery, Sakila's health has improved tremendously. Today he is 11 years old and besides daily medication, nothing remains to remind him of the blue-tainted years of his infancy.

His 'second birth' was the one any parent hopes for: filled with nothing but tears of joy.

Parents from all parts of the island gather at LRH to submit their child into the hands of the country's most skilled medical team. Most of them must wait for treatment for months and even years on end.

AVERAGE WAITING
TIME

months - years

The hospital's current infrastructure forces even the children in need of urgent surgery into home care. This not only greatly increases the risk of succumbing to the illness, but it also glues the parents by their child's side, letting all other spheres of their lives slip away. It is not rare that these mothers and fathers would lose jobs, fall into unrepayable debt and even unknowingly neglect their other children.

Waiting for treatment, therefore, not only lessens a child's chance of successful recovery, but it also tends to leave grave consequences on their families.

Conclusion: Time Is Not Money – Time is Life

We are one of the few nations in the world that pride themselves with providing free public healthcare for all. While millions of families worldwide are incapable of saving their children's lives due to the cost of healthcare, our children are promised equal opportunity. However, this equal opportunity comes at the cost of time.

The construction of the LRH's Cardiac and Critical Care Complex will ensure that every critically ill child in Sri Lanka has immediate access to quality care. The Complex is deemed a government priority, but unless backed with external funding and our support, **massive projects like these tend to develop over several years to well over a decade**. In the meanwhile, critical care remains outside of timely reach for thousands of our children.

So the only fight we are fighting is against time, but we all know that critically ill children are too frail to fight it on their own; time is a luxury they cannot afford and every second is a heartbeat closer to the end.

Instead of waiting for things to change and letting our little ones slip through our fingers, **we can take action and give them the support they need! Together we can greatly expedite the construction of LRH's Cardiac and Critical Care Complex.**

The time is ticking, but together we can beat the clock.

TOGETHER WE CAN BEAT THE CLOCK:

EXPANDING LRH'S CURRENT CAPACITY

It is clear: if we are to give all our children equal chance at a healthier and happier life, waitlists must dwindle and critically ill children awaiting treatment must have access to proper care.

For that purpose, *we – the concerned citizens of Sri Lanka - have initiated this campaign with the support of Sri Lanka College of Paediatricians to gather funds to help expedite the construction of a new Cardiac and Critical Care Complex that will accommodate all the necessary operating theatres and ICU facilities.* The new hospital wing will uplift the LRH's quality of care for critically ill children and save not only thousands of lives, but preserve the wellbeing of their families as well.

This new ten-storey building will introduce four state-of-the-art cardiac operating theatres, increase the number of cardiac ICU beds from 18 to 40, include over 100 medical and neonatal intensive care beds, as well as the areas for advanced cardiac investigations and staff training facilities to provide optimum care for these children.

According to the master plan, the building will be erected on the premises of the Lady Ridgeway Hospital in Colombo 8.



Central Engineering Consultancy Bureau created the initial building plan. The cost of the project is estimated to be approximately 2 billion rupees.

Project Target and Legitimacy

Little Hearts project is set to span over two years during which we will collect funds for establishment of the new Cardiac and Critical Care Complex of LRH.

Our target is to raise over

LKR 2 BILLION

The project proposal was made to the Ministry of Health in 2014 and it was deemed a priority. It was later approved by the Department of National Planning and the first steps have been taken with the allocation of land, building projections and cost estimates.

THE LIVES WE CAN SAVE

According to estimates that factored in the average time a child spends in the ICU and the number of cardiac surgeries alone performed per year, the new LRH wing could **save more than 200,000 critically ill children in Sri Lanka over the next 20 years.**

TOTAL OF THE LIVES SAVED IN THE NEXT 20YRS

200,000

If our goal is to raise LKR 2 billion, the amount we would invest in saving each life would be LKR 10,000. **This investment can be viewed as the insurance for all of our children.** It will help secure facilities that will finally put an end to waitlist nightmares and provide immediate critical care to all the children in need.

Is saving a child's life worth paying LKR 10,000 today?

Is insuring the life of your own worth paying LKR 10,000?

HELP OUR LITTLE FIGHTERS
BEAT THE CLOCK!



HOW WE CAN DO IT

The project starts in October 2016. The initial six months will be spent on fundraising and fine-tuning the plan, as well as carrying out a nationwide campaign to create awareness and call to action.

Once we reach 50% of our target, we will commence the construction of the new hospital wing which will take approximately two years. The success and actual duration of this initiative **will solely depend on the commitment of its contributors.**

Fundraising

After exploring numerous funding options, it became apparent that we cannot and should not do it without the support of our people. **This project is time-critical and of national importance, so we must do it jointly – citizens, government, non-profits, SMEs and large corporations together.** Every day that passes by lessens the hopes of survival for many of our children, so we must act immediately.

We need to start now!

Given the nature of the cause and the fact that we are among the top ten most generous nations in the world¹, we are confident in the success of this project.

We are engaging the entire nation and calling them to participate in any way they can.

To provide everyone a chance to contribute, we currently have three different **donation methods and options** available:

SMS and BANK SUBSCRIPTIONS

Donors can subscribe for a monthly donation of LKR 100,- via numbers dedicated for the cause, or solicit a standing order for this or similar amounts.

We are partnering with the country's leading telecom companies to optimize the reach and give everyone a chance to pitch in.

¹ according to the [2015 World Giving Index](#)

Dialog and Hutch:

LKR 100 monthly donation plan:

REG<space>LH to 77100

One time donations:

LH<space><donation amount> to 77100

BANK TRANSFERS

Donors can donate any amount via one time bank transactions or standing orders for monthly donations to Little Hearts.

*Make a donation to:*Bank: **Bank of Ceylon, Borella Branch**Account Name: **Little Hearts**Account Number: **79738633****ONLINE DONATIONS**

Donors can visit the [Little Hearts official website](#) and make a donation using their Master or Visa cards.

MOBILE DONATIONS

Donors can use their MCash credit to make a donation to Little Hearts.

SPONSORSHIP

Donors who wish to contribute grand sums ranging from LKR 10,000,000 and above, can sponsor hospital equipment or treatment areas like theatres and ICU beds. The grand sum donors can also sponsor full theatres that cost approximately LKR 100,000,000 and the cath lab which costs LKR 200,000,000.

Grand sum donations will be processed in correspondence with the Sri Lanka College of Paediatricians' board.

Little Hearts will in turn recognise three **types of donors**:

Life Supporter

Donors who contribute via monthly subscriptions or one-time donations of under LKR 10,000 are descriptively called 'Life Supporters'. Their donations help maintain hope and bring us closer to the goal of providing all critically ill children an equal chance at a healthier and happier life.

Life Saver

LKR 10,000 is the sum estimated to save one child's life which is why it is a starting point for this donation type. By donating multiples of LKR 10,000, Life Savers quite literally save the lives of critically ill children of Sri Lanka.

The total contribution a donor will ultimately make depends on their ability and good will.

National Hero

Sponsoring hospital equipment and halls earns donors the title of a 'National Hero'. This contribution will not only help thousands of children receive treatment on time per year, it will serve and save hundreds of thousands of children for generations to come.

The Campaign

The campaign will run both online and offline to maximize its reach. Online publicity will be generated through the Little Hearts' official website, social media and email marketing. Further, online news portals have also shown great interest in disseminating information regarding the project on their channels. Offline publicity will be generated mainly through broadcast television and print media.

Additionally, **we will welcome any kind of creative campaign support from individuals, businesses and organisations.**

This is your project – give it your twist!

HOW YOU CAN HELP

Little Hearts is a national project. **It is YOUR project.** So every man, woman or business willing to support it and save the lives of our children, will be welcomed with open arms.

If you represent a business or you believe your organization might be interested in partnering with us, please contact corporate@littlehearts.lk. **We also welcome businesses and organizations who wish to join**

this project and run creative Little Hearts fundraising and awareness campaigns of their own. The more, the merrier!

If you are an expert interested in contributing your skills to the growth of Little Hearts campaigns, please contact info@littlehearts.lk.

If you are eager to help save our children's lives, please visit www.LittleHearts.lk/donation and make any contribution you can.

MEET THE ORGANISERS

Little Hearts is a nation-owned project supported by Sri Lanka College of Paediatricians (SLCP).

SRI LANKA COLLEGE OF PAEDIATRICIANS

[Sri Lanka College of Paediatricians](#) (SLCP) is the apex professional body in child care in Sri Lanka. It is represented by the paediatricians from all districts of Sri Lanka. At present 240 doctors are members of the college inclusive of all the Consultant Paediatricians in the country.

SLCP acts as the advisory body of the Ministry of Health in decisions related to childcare in Sri Lanka.

These professionals have first-hand experiences and a profound understanding of the children's healthcare needs nationwide. For that reason, when Little Hearts idea was presented at the council meeting, SLCP unanimously approved and supported the project.

SLCP is responsible for monitoring Little Hearts activities, as well as managing the funds raised by the campaigns.

WANT TO KNOW MORE?

Please email any comments or questions to Info@LittleHearts.lk.

A heartfelt thank you to all the contributors and supporters of Little Hearts!