



## Our Focus

On-Site Clinical Missions

Educational Programmes

Virtual, On-Demand expert guidance and consultation

Global Collaboration

Research

# Operation Childlife

*Bringing lifesaving and transforming surgeries to children in the developing world and enhancing healthcare systems and expertise.*

***Strategy 2023-2027***

## Our Mission

*To provide optimal surgical, anaesthetic, medical and nursing care to infants and children of low and middle income countries.*

## Our Vision

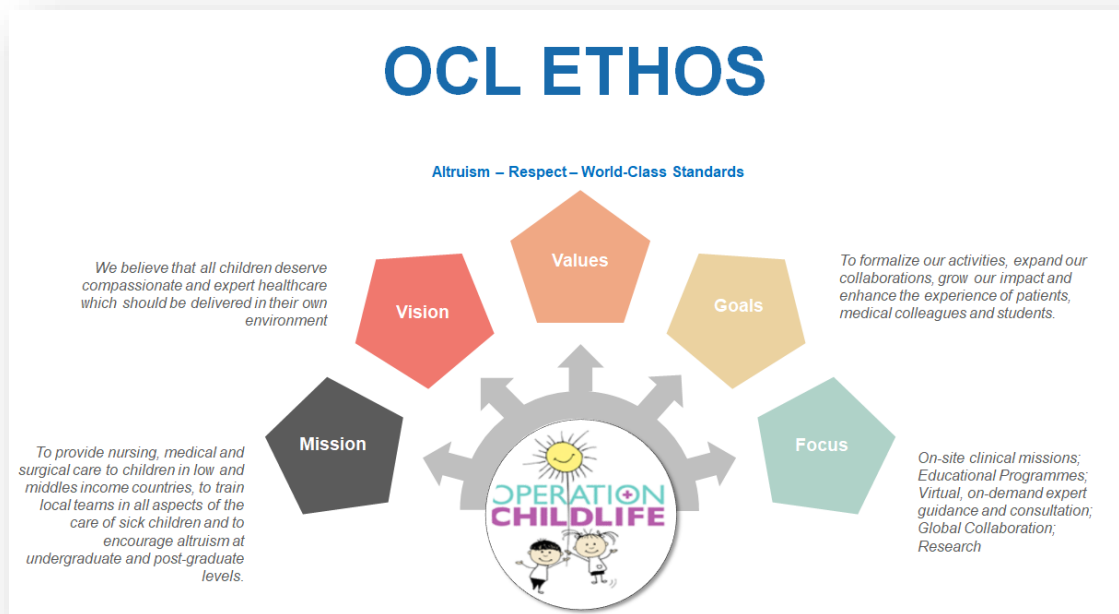
*We believe that all children deserve compassionate and expert healthcare, which should be delivered in their own environment.*

## Our Values

*Altruism – Respect - Worldclass Standards*

## Background and Context

In 2004, a number of Irish medical professionals received a request from the Christina Noble Children's Foundation (CNCF). They were asked to carry out a number of complex surgeries and to upskill and mentor paediatric doctors and nurses in Children's Hospital Number 2, Ho Chi Minh City. Since this initial activity, OCL has, to date expanded to Tanzania, Mongolia and Jordan. Over 40 senior-level consultants have travelled (as volunteers) for one and two week missions, conducting complex surgeries, providing pre- and post-operative support, guidance, training,



mentoring and developing local colleagues on a continual basis. The countries and regions we visit lack, or have limited expertise in, key disciplines such as paediatric cardiology, oncology, orthopaedics, intensive care, anaesthesia, interventional radiology, urology, plastic surgery, ear, nose and throat surgery and related nursing care. Collectively our paediatric partners have a fast

growing catchment of 45 million people, with 15 million under the age of 5 years.

Save The Children estimates that 1.1 billion infants and children in low-income countries in Africa and Asia have limited access to basic healthcare.











In Sub-Saharan Africa and South-Asia, over 5 million children under the age of five are dying from treatable illnesses such as diarrhoea and pneumonia or from neglected injuries, every year.

The work of OCL is also strongly aligned to the UN Sustainable Development Goals, in particular, SDG 3 (Good Health and Wellbeing), 4 (Quality Education) and 10 (Reduced Inequalities). We believe that we can make a difference directly through our specific interventions, but also that we have developed a model that can be replicated and scaled by healthcare professionals across the world.



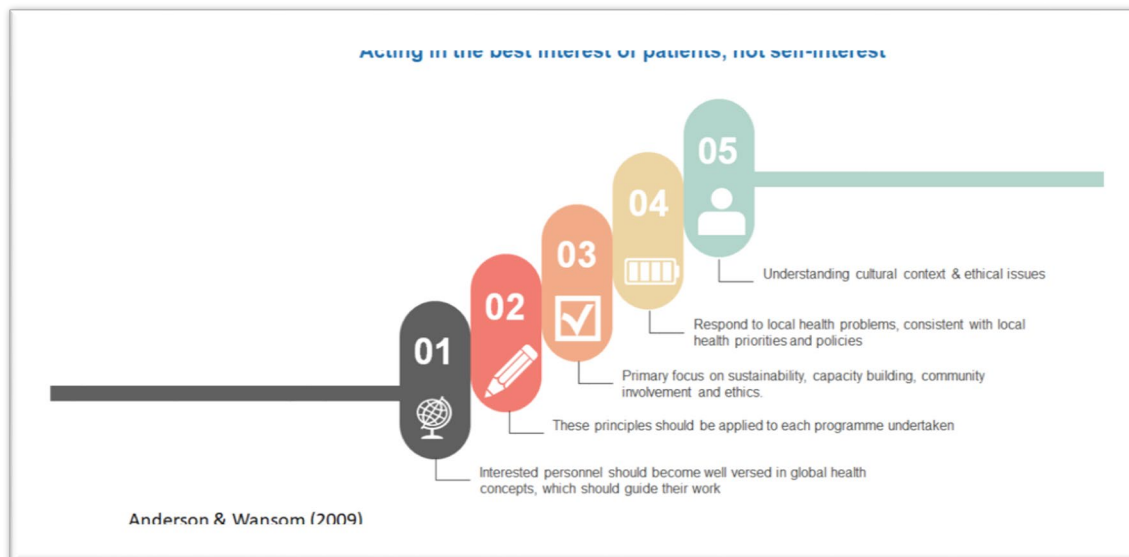
Educating and training our local colleagues moves our activities from “point in time” interventions that affect a small number of children, to a more systemic impact that can improve the lives and outcomes of more children into the future.

## Who We Are: OCL Board

	<b>Mr John Collins</b> Chair <i>Businessman</i>		<b>Prof Martin Corbally</b> Founder & Programme Director <i>Chair in Surgery, RCSI Bahrain;</i>		<b>Prof J Mark Ryan</b> Deputy Programme Director <i>Interventional Radiologist, CHI</i>		
	<b>Dr Brendan O'Hare</b> <i>Consultant Paediatrician Anaesthetist &amp; Interventionist, CHI</i>		<b>Prof Paul Oslizlok</b> <i>Consultant Paediatric Cardiologist, CHI</i>		<b>Prof Naji Alamuddin</b> <i>Consultant Endocrinologist, RCSI Bahrain</i>		
	<b>Dr Eamon Tierney</b> <i>Consultant Anaesthetist &amp; Interventionist</i>		<b>Prof Sameer Otoom</b> <i>President, RCSI Bahrain Clinical Pharmacologist</i>		<b>Dr Jean Hughes</b> <i>Educator &amp; Strategist</i>		<b>Dr Cormac Kilty</b> <i>Entrepreneur</i>

The OCL Board comprises seven clinical doctors and three other members. Our Founder and Programme Director is Prof. Martin Corbally who is the Head of Department of Surgery at RCSI Bahrain and Chief of Medical Staff at King Hamad University Hospital Bahrain.

We work in partnership with a growing number of organisations, which enables us to increase our geographic reach and the suite of expertise that we can bring to our partner countries.

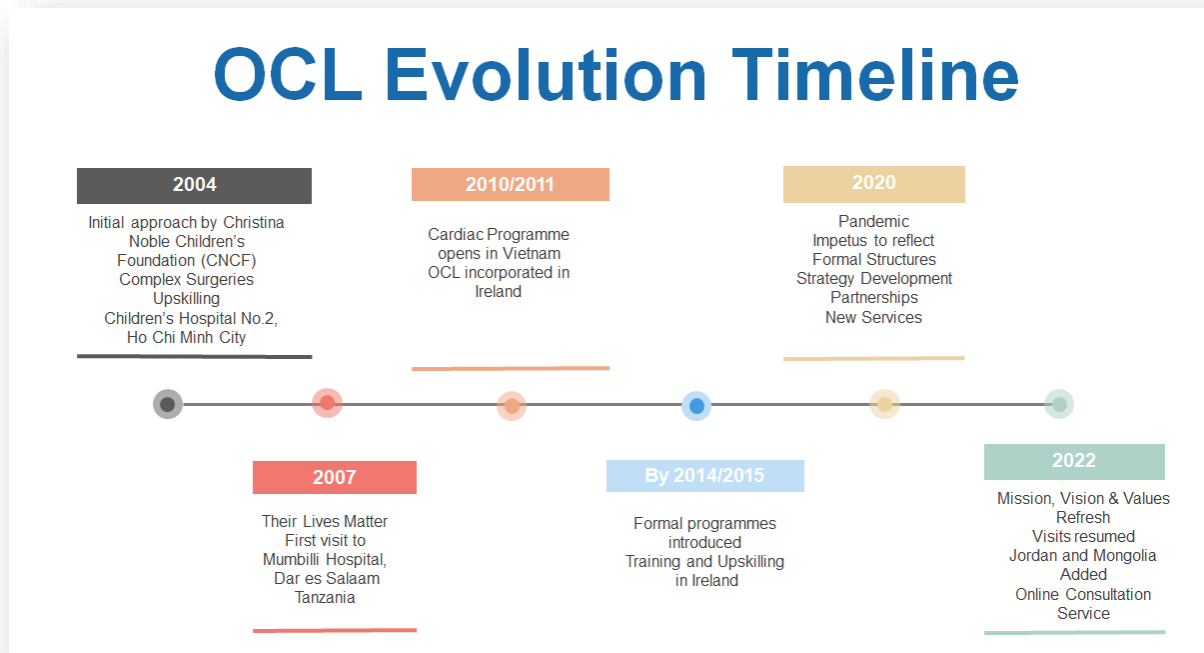


Our values, and everything we do, are rooted in medical altruism. We only go where our presence is **requested** and a clear, long-term need has been **mutually identified**. As Operation Childlife volunteers, we are working at the edge of our personal and professional comfort zones because we are dealing with extremely complex patients, almost always under profoundly challenging circumstances.

## Evolution

In our 18 year history we have consistently and increasingly delivered well in excess of what might be expected from a very small, completely volunteer-based charity. Starting in 2004, at the request of the Christina Noble Children's Foundation (CNCF), we have grown our activities to

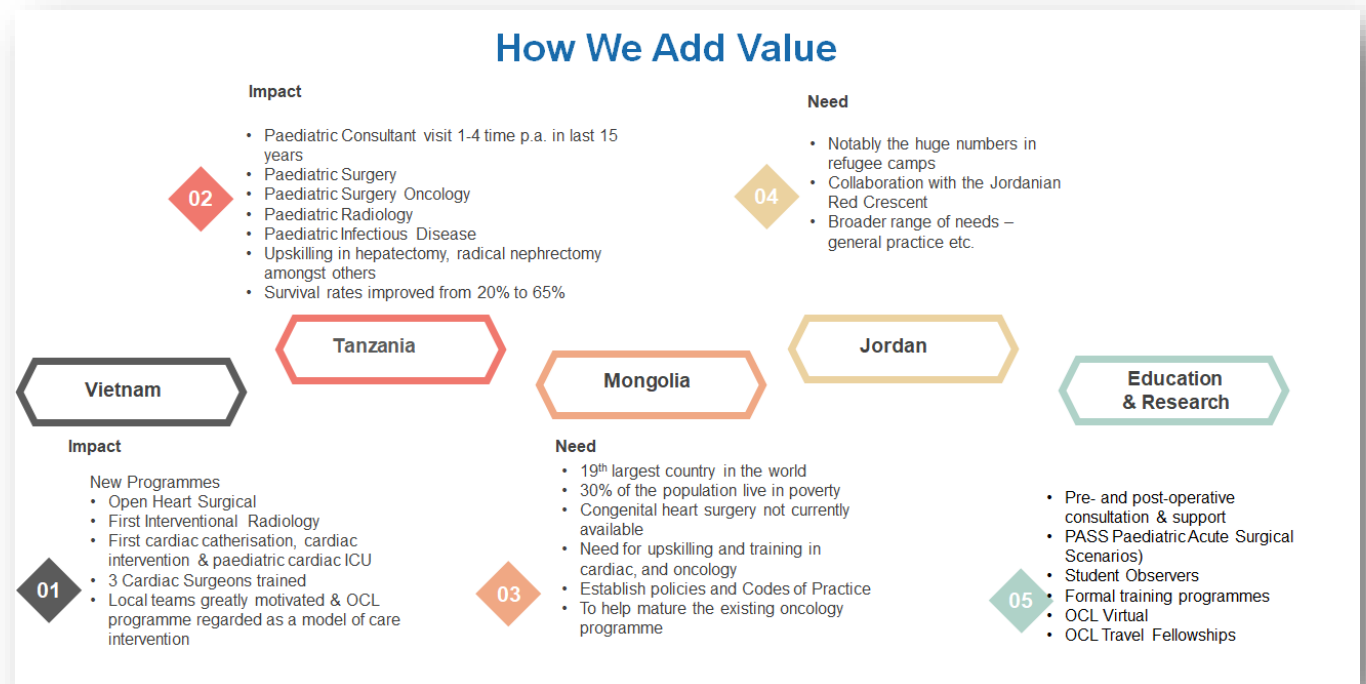
Tanzania (2007) and more recently to Mongolia and Jordan (2022). Prior to engaging in any new activity or entering into a new country, we conduct in-depth investigation, including an inspection of the facilities available, to ensure that we can add value and that the partnership aligns with our core values.



## Impact

All of our activities must add value and impact, bridging gaps in local expertise, building capacity and strengthening the local healthcare system. Given our short history and relatively small size, we continue to impact disproportionately, mainly due to the huge commitment, effort and personal investment of our volunteers.

- Complex surgeries where appropriate expertise is not available
- Continuous in-person and remote training, upskilling, education and support
- Increased sustainability through capacity building in partnership with local professionals and informed by mutually identified need.



We have introduced many new paediatric surgical and associated services and programmes which did not exist prior to our partnerships and we continue to grow and develop these as well as new services as needed.

## OCL Strategic Plan Context

Between 2020 and 2022, when travel was curtailed due to the Covid-19 pandemic, we took the time to reflect on our activities to date, our structure and organisation and how we could continue to add value outside of in-person clinical visits. We examined our strengths – clinical expertise, remote/online engagement and global partnerships and looked at how we could optimise these. We also looked at our ad hoc fundraising approaches and the structure of our board. We made a number of decisions to address these matters and these now underpin our strategic objectives for the next 5 years. Our Strategic Plan 2023-2027, will see us focus on deepening and expanding what we have done so successfully to date, as well as growing new initiatives which are currently in pilot. Focus on our core activities enables us to set strategic objectives and targets in each activity area and a Fundraising Plan to ensure financial viability and support for each activity has been developed to support the attainment of our strategic objectives.



From 2020-2022 we made a number of strategic decisions including:

- Restructuring of the board
- Mission, Vision and Values Refresh
- Addition of a number of activities
  - Two new countries –  
Mongolia and Jordan
  - OCL Virtual
  - Provision of the Paediatric  
Acute Surgical Scenarios  
(PASS) Programme
  - OCL Travel Scholarship
- Increasing Global Partners
- Structured Fundraising
- Recruitment of our first employee – a half-time Operations Executive



Our strategic activities and the relevant targets are set out in the next section.

## Strategic Objective 1: Clinical Missions

Clinical missions remain our primary activity and under this strategic plan, we will focus on strengthening our current partnerships to continue to grow local capacity and ensure the sustainability of our programmes into the future.

### Clinical Missions

Conduct complex cases and upskill & train colleagues

*Mutually identify cases, agree approaches, address ethical, practical and logistical matters.*

#### Targets:

- At least 3 visits p.a.

- The number of visits to each country each year will depend on need.
- Each visit must count and as we bridge the gaps in local expertise, the visiting team will be addressing increasingly complex cases, which may require a larger team of experts.
- The ethical considerations, in particular with respect to complex cases, will be given in-depth consideration and external advice will be sought when required.

## Strategic Objective 2: Education and Scholarship

To ensure capacity building, system strengthening and sustainability of our activities, our clinical visits must be underpinned and complemented by education and research. To date our activities in this area have been informal, ad hoc and needs based and under this plan, they will be more structured, focussed and extensive. Our education activities will be provided through OCL Virtual, which will become our primary education and support platform for

- Formal training
- Webinars
- Online Case Consultation
- Pre-and Post-Operative Support

### OCL Virtual

- 01 Expertise**  
**Case Consults**  
Bookable "second-opinion" sessions with OCL expert volunteers.
- 02 Information**  
**Live Webinars**  
Live "Hot topic" webinars tailored to local needs, leading to immediate, actionable takeaways.
- 03 Upskilling**  
**PASS**  
Blends didactic lectures with case analysis, procedural skills training sessions and simulated clinical scenarios.
- 04 Clinical Cases**  
**Pre- and Post-Operative Support**  
Multi-disciplinary team review of cases in advance of visits and post-visit support to the local clinicians and healthcare staff, to maximise positive outcomes.

*"Information and communication technologies (ICT) have great potential to address some of the challenges faced by both developed and developing countries in providing accessible, cost-effective, high-quality health care services. This is particularly beneficial for rural and underserved communities in developing countries – groups that traditionally suffer from lack of access to health care".*  
*WHO 2010 Report Telemedicine: Opportunities and Developments in Member States.*

## Education & Scholarship

Education, Mentoring and Support

Evidence-based

*Delivering formal and informal training and development*

*Being evidence-based and contribution to research in altruism and global health*

Targets:

- 2 PASS Programmes p.a.
- 2 Travel/Research Fellowships p.a.
- Regular online training and development provision

- **PASS – Paediatric Acute Surgical Programme**

The PASS programme will be delivered on at least 2 trips each year. OCL Volunteers will be accredited PASS Tutors and will train, assess and certify our colleagues in our partner sites.

OCL volunteers will become accredited PASS Tutors, enabling them to deliver the PASS

Programme to healthcare professionals in our partner countries, so that they can become

PASS certified. PASS education materials will be provided, min advance, via OCL Virtual.

- **Travel Scholarships**

In 2022, in partnership with RCSI, OCL launched the OCL Travel Scholarship Programme. Our

Scholarships will enable two members of the medical community in Ireland to spend 2 weeks

accompany an OCL mission. The recipients will undertake research in the area of altruism

and/or global health. This will build on OCL's research and scholarship activity. It is intended to

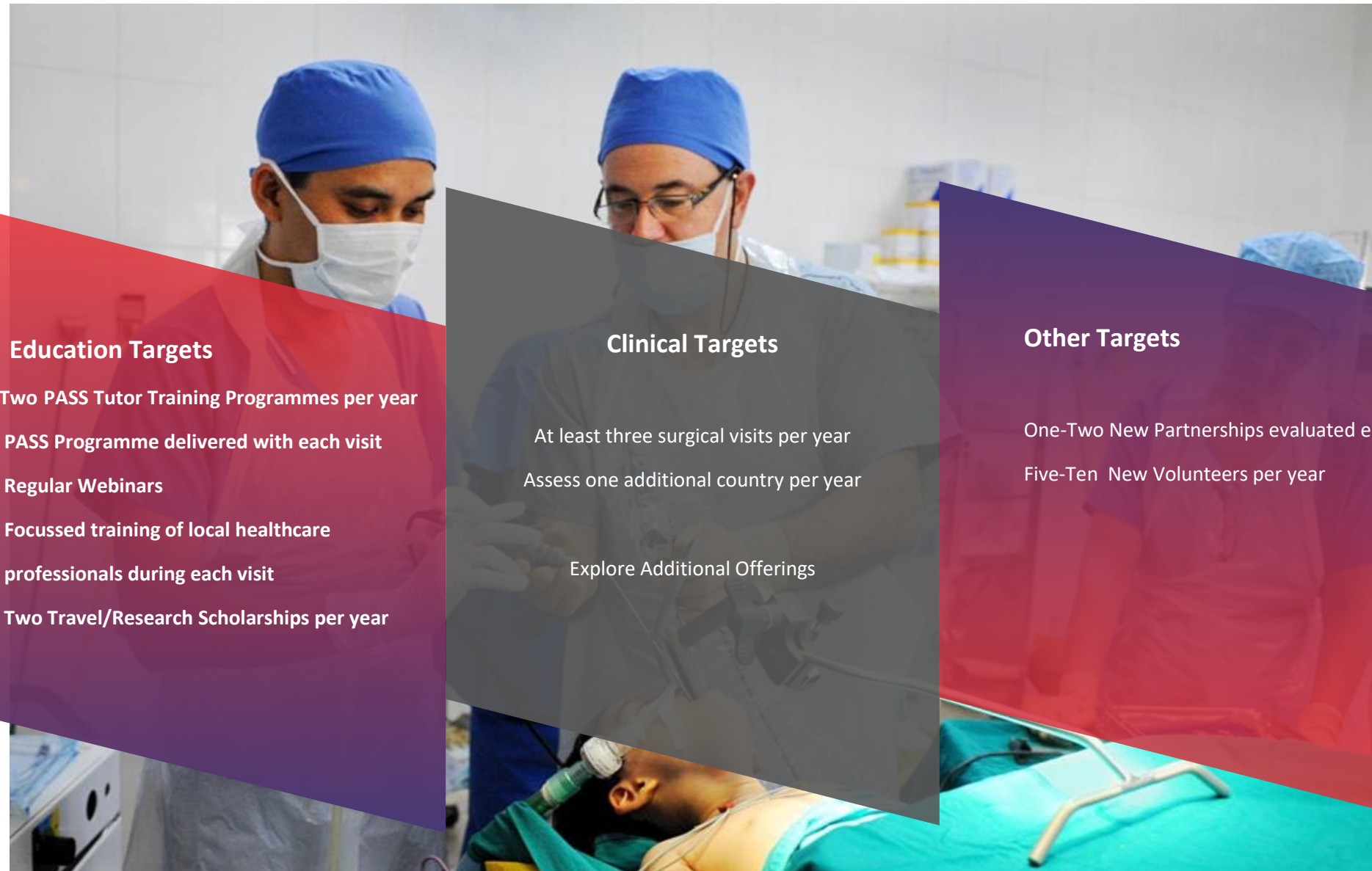
offer two scholarships per year for 5 years initially.

## Strategic Objective 3: Organisational Capability

OCL is moving from an informal to a more formal footing and it is timely and appropriate that we examine our fundamentals to ensure that we are resilient and robust into the future. Our areas of focus are people and funding:



- Having a fund raising expert on our board has transformed our ability to secure ongoing donations, we aim to focus on fundraising to support and ensure our activities.
- We are wholly dependent on our volunteers and, given that they are also full-time and very busy clinicians, we must expand the pool to ensure availability of skills to support our missions. We aim to recruit 5-10 volunteers each year.
- Partnerships enable us to grow geographically as well as in capacity and we aim to engage in 1-2 new partnerships (if appropriate) each year of this plan.
- Having refreshed our web site ([www.operationchildlife.com](http://www.operationchildlife.com)) in 2022 and secured the services (pro bono) of a professional videographer/photographer, we will focus on raising awareness of the need for our activities and publicising our engagements. Plans for each of these areas will be developed to put this area on a firm footing into the future.



### Education Targets

- Two PASS Tutor Training Programmes per year
- PASS Programme delivered with each visit
- Regular Webinars
- Focussed training of local healthcare professionals during each visit
- Two Travel/Research Scholarships per year

### Clinical Targets

- At least three surgical visits per year
- Assess one additional country per year
- Explore Additional Offerings

### Other Targets

- One-Two New Partnerships evaluated each year
- Five-Ten New Volunteers per year