

June 11<sup>th</sup> 2024

G'day Amon, Eli, Eli, Teddy, Roberts, Macha, Maggie, Batro, Allen, Light and Naomi.

Asante sana kwa mabadiliko ya ajabu.

Sasa tuna fursa ya kubadilisha na kufanya mpango mzima wa upasuaji wa watoto kuwa kiongozi nchini Tanzania, Afrika na duniani kote.

Mpango wa upasuaji wa watoto ambao hufanya kazi zaidi na chini, ikilinganishwa na hospitali za Magharibi, ambayo huwafanya wafanyakazi kujisikia sehemu ya mahali pazuri pa kazi na huhamasisha hospitali zingine za Ngazi ya 1, 2 na 3 kuendesha mpango wao wa upasuaji wa watoto.

Kwa hiyo sasa hivi, napendekeza ufikirie kuhusu njia bora ya kuendesha programu yako na uthibitishé katika bajeti yako jinsi Huduma ya Upasuaji wa Watoto Tanzania itafanya kazi na Hospitali ya Watoto ya Selian.

Malengo yanabaki sawa

1. Upasuaji zaidi wa watoto wenye dawa bora kwa watu maskini waliokithiri
2. Vivutio bora vya wafanyakazi
3. Selian Continuity (na hospitali zingine)

Bajeti na Msaada

Nimechanga \$7,500 USD kwa mwezi na nitafanya kazi katika programu yako (CST na Selian) hadi mwisho wa 2027. Hii ni ikiwa utafanya upasuaji 20 kwa mwezi kwa watu maskini sana (imethibitishwa na video 3) kwamba hutafanya vinginevyo.

Jinsi ya kutumia pesa hizo?

Unaweza kutumia pesa upendavyo mradi tu ufikie malengo yako hapo juu na ufanye upasuaji 20 kwa mwezi. Unaweza kutumia yote kwa ajili ya motisha ya wafanyakazi, kumaanisha kuwa unalipa madaktari na wafanyakazi na kupata wafadhili wengine kulipia upasuaji ambao haungefanywa vinginevyo.

Maadili na Uadilifu

Ninaamini una maadili - kupata watoto maskini wa kweli ambao maisha yao yanabadilika kweli. Naamini utawaangalia kabla hawajafika na usafiri salama (lakini labda wanaweza kulipa). Ninakuamini utafanya kazi kwa viwango vya juu zaidi vya matibabu unavyoweza na W.H.O. Tazama video naamini utamtunza na kumrekebisha mtoto kwa malezi bora hapo baadae. Nakuamini.

Kwa kurudi unaweza kuniamini kutuma CST \$7500USD kwa mwezi kwani nimetuma pesa kila mwezi kuanzia 2018 kuititia jaribu hili hadi sasa.

Ninakuhimiza utafute upasuaji wa bei nafuu lakini bora zaidi wa kutunza watoto, wafanyakazi na hospitali.

Ninakuhimiza uangalie dawa bora, lakini pia waweke wafanyikazi motisha kwa chakula cha mchana cha Ijumaa, tuzo za kusafisha, na malipo ya motisha kwa wale wote walio kwenye orodha ya ukaguzi ya WHO. Ninakuhimiza uwaunge mkono Batro, Allen, Macha, na Light na kuwalipa kwa kazi yao. Watieni moyo nyote kuzingatia sayansi ya matibabu na madaktari wakuu kama Eli(2), Roberts, Amon, na Teddy, na kuwatia moyo pia. Ninahimiza malipo ya motisha yawe ya ubora na uvumbuzi katika upasuaji wa watoto - sio tu zawadi za pesa.

#### Ushirikiano

Hakuna mtu mmoja aliye na majibu yote kwa umaskini wa matibabu barani Afrika, huko Selian, CST, au hapa kama wafadhili nchini Australia. Tukiwasikiliza tu madaktari, haitafanya kazi; tukisikiliza wafadhili tu, haitapanuka; tukisikiliza admin uzuri wa sayansi ya matibabu hautang'aa.

Nyote mnahitaji kufanya kazi pamoja, kuangalia zaidi ya nafsi zenu, kudai zawadi fulani kwa upasuaji bora wa watoto, na kushiriki na wengine.

Hatimaye, ustawi wa mtoto daima huja kwanza. Lakini hilo haliwezi kudumu ikiwa wale wanaosaidia hawatatuza kwa njia wanazotaka na kujisikia vizuri. Kwa hivyo tafadhal fanya kazi kwa busara, na Allen, Batro, na Eli wanaweza kuja na bajeti inayoweza kutekelezeka, inaweza kuhitaji marekebisho fulani mara kwa mara, lakini hatimaye geuza unachofanya kuwa mpango wa kiwango cha kimataifa wa upasuaji wa watoto.

Ninajivunia kujua na kufanya kazi nanyi nyote.

Mal

**Thank you very much for the wonderfully smooth transition.**

We now have an opportunity to transform and make the entire child surgery program a leader in Tanzania, Africa and indeed the world.

A child surgery program that gets a lot done with a little, compared to Western hospitals, that makes the staff feel part of a brilliant workplace and inspires other Level 1, 2 and 3 hospitals to run their own child surgery program.

So right now, I suggest and ask that you think about how best to run your program and confirm in your budgets how the Child Surgeries Tanzania will work with Selian Childrens Hospital.

#### **Goals remain the same**

1. More child surgeries with better medicine for the extreme poor
2. Better staff incentives
3. Sustainable Selian (and other hospitals)

#### **Budget and Help**

I have committed \$7,500 USD per month and will work in your program (CST and Selian) until the end of 2027. This is if you do 20 surgeries per month for the very poor (proven by 3 videos) that you would not have done otherwise.

### **How to spend that money?**

You can spend the money however you wish as long as you meet your goals above and do 20 child surgeries per month. You can use it all for staff incentives, meaning you pay doctors and staff and get other donors to pay for the surgeries that would not have been done otherwise.

### **Ethics and Trust**

I trust you to be ethical – to find genuinely poor children who you genuinely change their lives. I trust you to look after them before they arrive with safe transport (but maybe they can pay). I trust you to operate at the highest medical standards you can with W.H.O. Checklists and videos and I trust you to look after and rehabilitate the child with the best possible aftercare. I trust you.

In return you can trust me to send to CST \$7500USD per month as I have sent money every month from 2018 through the pandemic to now.

I encourage you to find the cheapest but best practice medicine ways to look after the children, the staff and the hospitals.

I encourage you to look at the best medicine, but also keep up staff morale with Friday lunches, awards for cleaning, and payments of incentives to all on WHO checklists. I encourage you to support Batro, Allen, Macha, and Light and pay them for their work. Encourage all of you to stay focused on medical science with great doctors like Eli(2), Roberts, Amon, and Teddy, and incentivise them too. I encourage the incentive payments to be for excellence and innovation in child surgery – not just money handouts.

### **Partnerships**

No one person has all the answers to medical poverty in Africa, at Selian, CST, or here as donors in Australia. If we only listen to doctors, it will not work; if we only listen to donors, it will not expand; if we only listen to admin, the brilliance of medical science will not shine through.

You all need to work together, look beyond yourselves, claim some reward for child surgery excellence, and share with others.

Finally, the child's welfare is always first. But that cannot last if those helping are not rewarded in ways they want and feel good about. So please work smart, and Allen, Batro, and Eli can come up with a budget that can work, may need some changes now and again, but ultimately turn what you are doing into a world-class child surgery program.

I am so proud to know you and work with you all. Mal