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POLICY PLAN / BELEIDSPLAN 2019 - 2022



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Business information:

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Foundation Open Hearts for Kids
Policy plan (Beleidsplan in Dutch) 2019 - 2022

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- **Introduction.**
 - **What is the Foundation Open Hearts for Kids**
 - *Our statutes*

The formal / legal name of our foundation, registered in Katwijk the Netherlands with registration number 27367787, is “Stichting Open Hearts for Kids”.

We have been registered since 20 January 2010 and have been given the so-called RSIN (Legal Persons and Partnerships Information Number) / tax number 821872576.

Our postal / visiting address of the foundation is: De Klok 543, 2231 DX RIJNSBURG, the Netherlands.

We are recognized, by the Dutch tax authorities, as an ANBI institution. This recognition entitles (Dutch) donators to deduct donations to our foundation from their taxes.

Former statutes, which were applicable until 13th of November 2019 (*please see motivation for the change on the next pages*):

Article 2, section 1:

a. commitment to sick children abroad who need a medical intervention, which is not possible in their own country and / or for which no financing is possible in their own country.

b. to perform all further actions that are related to the foregoing in the broadest sense or that are conducive thereto.

Section 2:

The foundation seeks to achieve its goal through, amongst other things, cooperation with doctors, hospitals and host families, both in the Netherlands and in the country of origin.

Amended Sections from Article 2 from the Statutes (changed on 13th of November 2019 per notarial deed):

Section 1:

a. commitment to children, their (future) (foster) parents to offer them a better future perspective;

b. to perform all further actions that are related to the foregoing in the broadest sense or that are conducive thereto.

Section 2:

The foundation seeks to achieve its goal through, amongst other things, collaboration with doctors, hospitals and host families, both in the Netherlands and in the country of origin.

The realization of medical facilities, materials and instruments are also among the possibilities for achieving its goal.

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- **motivation to make a minor change to our former statutes**

During the past years we have found that it is getting more and more difficult to raise the (minimal) needed amount of EUR 30.000,- to have the open heart operation done. Almost 10 years ago, when we started, the costs for an operation were between EUR 12.000 – 15.000. However, hospital (and any professional medical) care have increased their fees. And currently we have to try to get EUR 30.000,- for one (1) open heart operation. It is just a lot of money for a small organization like ours to raise. During the last board meeting on October 3rd, 2019 we reviewed our statutes and concluded the following:

1. The board has the continuous desire to help children and their (foster) parents with care, but our statutes “limit” us to “medical intervention” only. In order for us to be able to provide help for children, whether with an operation, medicines, local help in their own country and/or otherwise, we need to make an adjustment to our statutes.
2. The board also is investigating to collaborate with other (smaller) organizations, who are already active in countries where (medical) help is provided; specifically for children.

The above 2 points were addressed in the amended statutes in Article 2, sections 1a and 2 (last sentence).

This brings us to the next point:

- **How will we reach our goals**

Better said, how will we be able to raise sufficient funds to help those children and their (foster) parents?

During the last board meeting we had approximately EUR 14.000,- in our bank account and missing therefore EUR 16.000,- We had a boy, Renfred Sarfo (7 years old, 7 May 2012) from Ghana on the waiting list to get an open heart operation; but we had come to the conclusion that we would just not be able anymore to raise another EUR 16.000,-

As mentioned, we were changing our statutes / goals and as part of that want to collaborate more with other organizations. We had a meeting with the board of another smaller organization, who are providing medical instruments to Ghana and want to start a hospital for (young) women to have a save labour (childbirth), and they encouraged us to continue and provided some ideas to reach this goal of getting the extra needed EUR 16.000,-

These ideas, specific mailings and ads in local newspapers and sending “Tikkie” requests (possibility to donate by mobile phone) turned out to be extremely effective and the funds were raised within a short period.

Renfred Sarfo will be invited to come to the Netherlands for his open-heart operation!

So, to answer the question in how we will reach our goals?

- ✓ Collaborate with more organizations, who have the same / similar goals as we have: help children to have a better future perspective.
- ✓ See what possibilities there might be in the countries where the children are living, to see if there is any way to raise funds for local initiatives to help these children.
- ✓ Raise funds by making use of more current ways (Tikkie, Crowd funding, More local ads).

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- **Three (3) year plan**

First, we will have Renfred Sarfo come and have his operation. This means that this will take a few months and by the end of the 1st quarter of 2020 we will know what the actual costs were, and how much funds will remain.

Secondly, as a board we are now in contact with other organizations and seek how we can collaborate. One of our concerns is, to know 100% sure that the other organizations are well organized; meaning:

- Do they do what they say they do?
- Are they transparent about their (financial) situation?
 - Do they, as we must, create the required reports?
- Do they match our long-term goals /vision?

Thirdly, get to know more (medical) professionals in the countries where the children are from and see if we can collaborate with them and/or support them in their local initiatives. Also here we have similar concerns, as in the previous point, because in a lot of countries (where we had the children come from) there is corruption and funds do not end up where they were intended for. We want to make sure that the donations provided will be invested 99.99% in the children we are helping and not spent on (unexplainable overhead of) persons and/or organizations.

Fourthly, find more ways to raise funds via social media, being bolder to request financial support, have special programs to increase people's involvement with our foundation.

And finally, in what other ways can we help children to have hope and assurance for a better future; with still our main focus on those who need medical care, but not limited to.

All of the above will take time and investigation, but as a board we are now very excited and encouraged as we have been (pleasantly and gratefully) surprised by the tremendous funding within a months' time to help Renfred Sarfo.

None of the people who have donated know him, but they are as willing and concerned as we are to provide him a possible better future.

This brings us the next point of our policy plan:

- **Our long-term mission / vision**

Our mission / vision has not changed namely to continue to help children, and directly related to this of course, their (foster) parents. We, in the Netherlands, have a lot of (medical) benefits and these are verily easy at hand; but in many countries, where the children live, there are no (financial / medical) means to help them. We want to continue to help these children.

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- **Current situation**

Currently, we have sufficient funds to help Renfred Sarfo to get his open-heart operation. We are corresponding with local authorities in Ghana, have contact with family and friends from him and are excited to have him come over.

As a board we are just encouraged by the generosity of many and have renewed energy, after almost 10 years of existence, to keep helping many children.

- **Board members**

- Our reimbursement policies
- Our volunteers

First, we like to state the following:

- None of the board members is independently authorized to make decisions on behalf of the foundation.
- The remuneration / reimbursement policy (beloningsbeleid): There are no employees employed by the foundation. None of the board members receives a payment for the work performed for the foundation.

The board and advisory team of Open Hearts for Kids:

- ❖ Chair: Mrs. M. Boesaard - Pommer in Rijnsburg
- ❖ Secretary: Mrs. Van Rijn - Boesaard in Leiden
- ❖ Treasurer: Mr. O. Koorn in Amsterdam
- ❖ Medical advisor: Dr I. Velberg in Katwijk
- ❖ General advisor: Mr. G. Alderden in Rijnsenhout

There are many volunteers involved, not just in the Netherlands but also in the country where the child is coming from. They all do this in their free time without receiving payment / salary for their work. Of course, direct costs related to the care of the child and/or fundraising programs are reimbursed.

- **Finances and annual report in one.**

On our website, www.openheartsforkids.nl, under the section "[Donaties / ANBI](#)" you will find our annual financial reports since 2011. In the financial accounts you will find also the annual report on how we have been able (or not) to help a child. The annual (financial) reports will be available online during the 1st quarter of the year.

In the annual report we also explain about some of the procedures and answer some reoccurring questions. A copy of this is at the end of this policy plan.

- ***What happens if we stop, with any remaining funds?***

As per our statutes, Article 12 section 3, any remaining funds will be donated to an organization which has the same/similar goals as the Foundation Open Hearts for Kids.

This brings us the children, for whom we exist and do our best efforts!

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○ **The children**

- How did it start and who did we help
- Who will we help



It started in 2010, when the treasurer Okko Koorn (at that time for a different non-profit organization) was contacted about Rota from Madagascar. She needed an urgent open-heart surgery, which could not be done in her home-country. This is always the case in these countries, due to their health / medical systems (or better said lack thereof). The chair of Open Hearts for Kids, Mrs. Margreeth Boesaard-Pommer, was already familiar with these type of situations as she had been involved with another non-profit organization for similar reasons.

And so more followed, as we were able to raise funds with the help of many volunteers and people with a (com)passion for these kids. An operation was a lot cheaper than, but despite the increase throughout the past years, we have been able to help many by the generosity of others. Just a few below and on the next page a copy of a letter from one of the parents, which just encourages us to keep doing this.

✚ Who will we help? Anyone, no matter what (social) background / culture / colour of skin / etc. etc.



Ethel from Malawi
Open heart surgery



Mariëtte from Burkina Faso
Spina bifida



Ihary from Rwanda
Medicines brought to him

And others...



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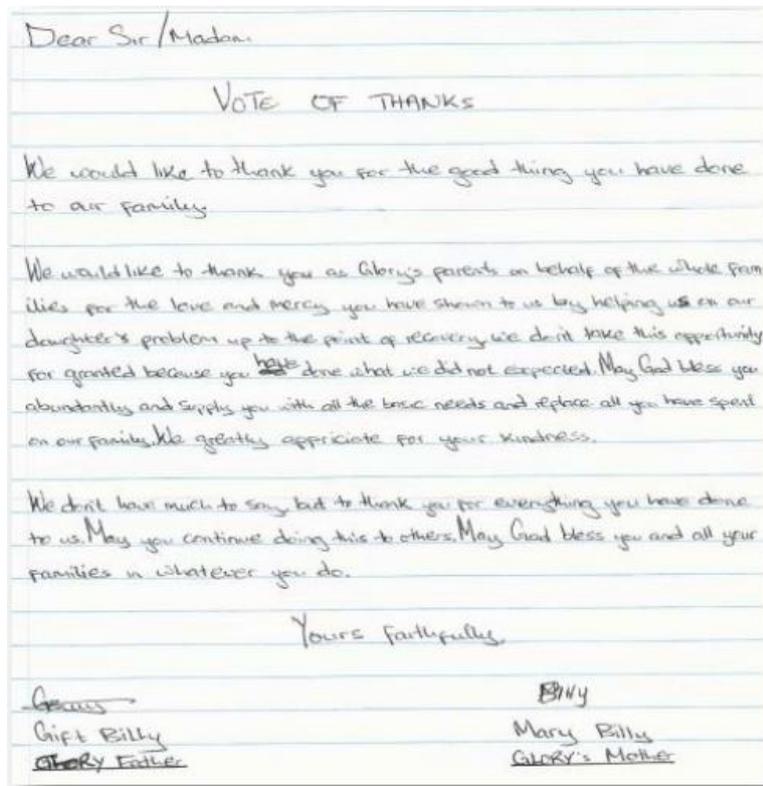
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There are many, many people / volunteers involved to help the organization.

(Foster) parents are every time grateful to have their son/daughter come back with a better future perspective for their child.

Below a copy of a letter we received from one of these parents. This is the reason why we continue to try and help them.



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- **Closing words**

In all our annual reports we write the below closing words, and we like to do the same in this policy plan as well:

The board and all the volunteers are extremely grateful for each individual, club, church, organization that is investing in one of these children. These investments are either financially and/or spending time preparing and helping out in whatever way possible.

On behalf of each child and its family we want to extend our thanks!!

The board and advisory team of Open Hearts for Kids:

- ❖ *Chair: Mrs. M. Boesaard - Pommer in Katwijk*
- ❖ *Secretary: Mrs. M. van Rijn - Boesaard in Leiden*
- ❖ *Treasurer: Mr. O. Koorn in Amsterdam*
- ❖ *Medical advisor: Dr I. Velberg in Katwijk*
- ❖ *General advisor: Mr. G. Alderden in Rijsenhout*

Correspondence to the board can be addressed to board@openheartsforkids.nl



Mr. Okko Koorn
Treasurer

On behalf of the Board of the Foundation Open Hearts for Kids

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- **Additional documents.**

Below we added a copy of a letter which we send to family and/or friends, answering some general and important questions. We thought it might be good to add this to our annual reports, so that you are also well informed about our motivations / considerations.

Some general questions and answers:

- **If the child will be sent from the home country to the Netherlands, will he/she travel alone or with a parent or someone else? Is the cost of this included or is it apart?**

The child will have to come alone; WITHOUT its parents or family to the Netherlands. If all goes as planned, he/she will be accompanied by someone from the organization called Luchtvaart Zonder Grenzen (LZG; Flights without Borders) or by a stewardess from the airline company. In both cases it will be someone with a medical background / training. The child will not be left alone at all. At Schiphol airport he/she will be handed over to the care of the family Boesaard (Gerard and Margreeth). Family cannot come along, mainly due to the following facts:

- it will raise the travel and costs of housing too much. We cannot afford these costs as an organization
- it adds another person to worry about and we will have concerns about his/her wellbeing as well
- there might be language barriers and emotional issues and maybe health issues to deal with
- besides these issues there are the logistical and insurance issues as well. Where does the person stay, how do we get him/her to the hospital and back to the place where they are staying, what to eat and what if this person becomes (very) ill. What if another family at home (in your home country) becomes very ill, does the person go back, do they stay etc. etc.
- As a small organization we have special permissions and arrangements with local and/or national agencies / authorities. They give us certain privileges in order to help a child, but only the child. We do not want to compromise the relationship we have with these organizations and therefore will not make any exceptions.

- **How long is the child supposed to stay in the hospital?**

This is dependent of several factors.

At arrival the child will stay for a period at the family Boesaard in Katwijk to recover from the flight.

Then he/she will go to the hospital the moment they will be able to operate her.

The time in the hospital is dependent upon the final diagnose, and no complications:

- In case of catheterization it could be 3 days
- In case of a heart operation it can be between 10 – 15 days.
- Depending on the type of treatment and recovery he/she will stay for a few weeks with the family Boesaard, and after the hospital will have completed all checks and they think it is safe for the child to go back home, it will fly back with someone accompanying it again.

Please, as parents and/or family and friends, be prepared to miss your child for about 5 – 6 weeks. During the whole time of her/his stay we will do our utmost to provide communication (phone, e-mail, Skype, pictures etc.) with you.

Your child will mainly be staying at the following address in the Netherlands:

We hope, of course, that your son / daughter will be able to return as soon as possible after the operation.

Thank you for your understanding and co-operation.

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