



U.S. AGENCY FOR  
INTERNATIONAL  
DEVELOPMENT

PD-ABF-835

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82276

MAR 27 1992

William L. Brockschmidt  
Vice President, Finance  
People-to-People Health  
Foundation, Inc. (Project HOPE)  
Millwood, Virginia 22646

Subject: Grant No. EUR-0037-G-00-2035-00

Dear Mr. Brockschmidt:

Pursuant to the authority contained in the Foreign Assistance Act of 1961, as amended, the Agency for International Development (hereinafter referred to as "A.I.D.") hereby provides to the People-to-People Health Foundation, Inc. (hereinafter referred to as "Project HOPE" or "Grantee") the sum of \$2,407,975 in support of the program entitled "Proposal for the Development of the Center for Pediatric Cardiology and Cardiac Surgery in Bratislava, Czechoslovakia," under the Partnerships in Health Care in Eastern Europe Project, as more fully described in Attachment 2, entitled "Program Description".

This Grant is effective and obligation is made as of the date of this letter and shall apply to commitments made by the Grantee in furtherance of program objectives through the estimated completion date of approximately three years thereafter. Funds disbursed by A.I.D. but uncommitted by the Grantee at the expiration of this period shall be refunded to A.I.D.

The total estimated amount of the program is \$2,407,975. Initial funding herein obligated is in the amount of \$1,200,000 (hereinafter referred to as "Obligated Amount"), and the incremental (additional) funding may be provided, subject to availability of A.I.D. funds, after the effective date of this Grant. Such incremental funding, if authorized, shall be provided through grant amendments. A.I.D. shall not be liable for reimbursing the Grantee for any costs in excess of the Obligated Amount.

This Grant is made to the Grantee on the condition that the funds will be administered in accordance with the terms and conditions as set forth in this Cover Letter, Attachment 1, entitled "Schedule", Attachment 2, entitled "Program Description", and Attachment 3, entitled "Standard Provisions", which together constitute the entire Grant document and have been agreed to by your organization.

Please acknowledge receipt of this Grant by signing all copies of this Cover Letter, retaining one copy for your files, and returning the remaining copies to the undersigned.

Sincerely,



Diane M. Miller  
Grant Officer  
Eastern Europe  
Office of Procurement

Attachments:

1. Schedule
2. Program Description
3. Standard Provisions
4. Special Provision "Restrictions on Lobbying"

ACKNOWLEDGED:

PROJECT HOPE

BY: \_\_\_\_\_



TYPED OR PRINTED NAME: WILLIAM L. BROCKSCHMIDT

TITLE: VICE PRESIDENT, FINANCE

DATE: APRIL 7, 1992

FISCAL DATA

A. GENERAL

- A.1. Total Grant Amount: \$2,407,975
- A.2. Total Obligated Amount: \$1,200,000
- A.3. Project No.: 180-0037
- A.4. A.I.D. Project Office: EUR/DR/HR, Julia Terry  
Room 4720, NS  
Washington, D.C. 20523-0053
- A.5. Funding Source: A.I.D./W
- A.6. Paying Office: Office of Financial Management  
FA/FM/CMPD/LC - Room 700 SA-2  
Washington, D.C. 20523-0209
- A.7. DUNS No.: 09-866-1135
- A.8. TIN: 3-0242962

B. SPECIFIC

- B.1.(a) PIO/T No.: 180-0037-3-2622410
- B.1.(b) Appropriation: 72-11X1010
- B.1.(c) Allotment: 184-62-180-00-69-21
- B.1.(d) BPC: QAIX-92-32180-KG-12
- B.1.(e) Amount: \$1,200,000

3)

ATTACHMENT 1

SCHEDULE

A. PURPOSE OF GRANT

The purpose of this Grant is to provide support for Partnerships in Health Care between medical facilities in the United States and medical facilities in Eastern Europe, as more specifically described in Attachment 2 of this Grant entitled, "Program Description."

B. PERIOD OF GRANT

B.1. The effective date of this Grant is the date of the Grant Officer's signature on the Grant Cover Letter, and the estimated completion date is three years thereafter.

B.2. Funds obligated hereunder are available for program expenditures for the estimated period from the effective date of this Grant to approximately January 31, 1993.

C. AMOUNT OF GRANT AND PAYMENT

C.1. The total estimated amount of the program described in Attachment 2 of this Grant is \$2,407,975.

C.2. The total amount of the A.I.D. contribution to the total estimated program costs shown in C.1. above, to be provided through this Grant (hereinafter referred to as "Total Grant Amount") for the period shown in B.1. above is \$2,407,975.

C.3. A.I.D. hereby obligates the amount of \$1,200,000 (Hereinafter referred to as "Obligated Amount") for program expenditures during the estimated period set forth in B.2. above.

C.4. Payment shall be made to the Grantee in accordance with procedures set forth in the Standard Provision entitled "Payment - Letter of Credit", as set forth in Attachment 3.

D. GRANT BUDGET

D.1. The following is the Budget for this Grant. Except as specified in the Standard Provision of this Grant entitled "Revision of Grant Budget", as set forth in Attachment 3, the Grantee may adjust budget amounts within the total agreement amount as may be reasonably necessary for the attainment of program objectives.

D.2. Financial Plan

A.I.D. FUNDING (Grant Cover Letter Date - 3/26/95)

<u>Item Description</u>	<u>Year 1</u>	<u>Years 2-3</u>	<u>Total</u>
(a) DIRECT COSTS			
Salaries	\$126,899	\$243,616	\$370,515
Fringe Benefits (17%)	21,573	41,415	62,988
Consultants	100,760	255,684	356,444
Travel/Per Diem	66,692	127,663	194,355
Participant Training	69,772	69,772	139,544
Nonexpendable Equipment	576,241	0	576,241***
Expendable Supplies	172,566	181,831	354,397***
Other Direct Costs	53,902	61,163	115,065
<u>SUBTOTAL</u>	<u>\$1,188,405</u>	<u>\$981,144</u>	<u>\$2,169,549</u>
(b) <u>INDIRECT COSTS</u>	<u>81,659</u>	<u>156,767</u>	<u>238,426</u>
TOTAL AMOUNT	\$1,270,064	\$1,137,911	\$2,407,975

\*\*\* Included in nonexpendable equipment and expendable supplies line items is a total amount of \$60,400 for procurement and materials handling. The Grantee shall obtain the prior written approval of the Grant Officer for authorization to exceed said amount. Upon receipt of a negotiated indirect cost rate agreement pertaining to these costs, the Grant Officer may amend this Grant to incorporate a rate which replaces said amount, provided the rate applied to the applicable cost base does not result in an amount in excess of \$60,400.

D.3. Inclusion of any cost in the budget of this Grant does not obviate the requirement for prior approval by the Grant Officer of cost items designated as requiring prior approval by the applicable cost principles (see the Standard Provision of this Grant set forth in Attachment 3 entitled "Allowable Costs") and other terms and conditions of this Grant, unless specifically stated in Section J. below.

D.4. A.I.D. funds may not be used to pay or supplement salaries of host country government personnel.

E. REPORTING REQUIREMENTS

E.1. Financial Reporting

E.1.(a) Financial reporting requirements shall be in accordance with the Standard Provision of this Grant entitled, "Payment - Letter of Credit," as set forth in Attachment 3.

E.1.(b) All financial reports shall be submitted to A.I.D., Office of Financial Management at the address specified on page 3 of this Grant's Cover Letter. In addition, three copies of

all financial reports shall be submitted to the A.I.D. Project Office at the address specified on page 3 of this Grant's Cover Letter.

E.1.(c) With the exception of the final financial report, all financial reports shall be submitted within 30 days following the end of the reporting period. The final financial report shall be submitted within 90 days following the estimated completion date of this Grant.

E.2. Program Performance Reporting

The Grantee shall submit the following:

E.2.(a) Workplans

The initial workplan shall include an implementation plan for the initial, authorized year of the project. It will be due within 45 days after the signature date of the grant, and shall indicate the timing, by month, of the various components and subcomponents of the program over the 12 month period of implementation. It shall indicate the responsible organization and/or individual for each subcomponent or activity.

At least 45 days before the end of the initial workplan period, Grantee shall submit a workplan for the next 12 month period. If Grant is authorized for a third year, a workplan for the third year of the project will be due at least 45 days before the end of the year covered by the second workplan.

E.2.(b) Quarterly Reports by Reference to Quantifiable Indicators and Other Evaluation Benchmarks

E.2.(b)(1) The Grantee shall submit five copies of quarterly program performance reports which coincide with the financial reporting periods described in Section E.1. above to the A.I.D. Project Office at the address specified on page 3 of this Grant's Cover Letter, and to the A.I.D. Representative (or AID Affairs Officer, Economic Section at the Embassy) of the country where the program is being undertaken. These reports shall include quantitative and qualitative measures of performance; shall be submitted within 30 days following the end of the reporting period; and shall briefly present the following information:

E.2.(b)(1)(A) Implementation status including a comparison of actual accomplishments with the established evaluation benchmarks for the period, the findings of the investigator, or both. If the output of programs can be readily quantified, such quantitative data shall be related to cost data for computation of unit costs.

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**E.2.(b)(1)(B) Reasons why established goals were not met, if applicable, including any problems or difficulties requiring U.S.G., possibly host country, or implementing organization attention.**

**E.2.(b)(1)(C) Summary financial report of all project expenditures, by subcomponent.**

**E.2.(b)(2) Between the required performance reporting dates, events may occur that have significant impact upon the program. In such instances, the Grantee shall inform A.I.D. as soon as the following types of conditions become known:**

**E.2.(b)(2)(A) Problems, delays, or adverse conditions that will materially affect the ability to attain program objectives, prevent the meeting of time schedules and goals, or preclude the attainment of work units by established time periods. This disclosure shall be accompanied by a statement of the action taken, or contemplated, and any U.S.G., or possibly host country, assistance needed to resolve the situation.**

**E.2.(b)(2)(B) Favorable developments or events that enable time schedules to be met sooner than anticipated or more work units to be produced than originally projected.**

**E.2.(b)(2)(C) If any performance review conducted by the Grantee discloses the need for change in the budget estimates in accordance with the criteria established in the Standard Provision of this Grant entitled "Revision of Grant Budget", the Grantee shall submit a request for budget revision to the Grant Officer and the A.I.D. Project Officer at the address specified on page 3 of this Grant's Cover Letter.**

**E.2.(b)(3) Quarterly updates and proposed modifications of annual work plans, specifically to include travel projected for the subsequent quarter.**

**E.2.(c) Participant Training Reports**

**E.2.(c)(1) As participant training is being funded under this Grant, the Grantee shall comply with reporting and information requirements of the Standard Provision of this Grant entitled "Participant Training" (see section L.2.), as well as A.I.D. Handbook 10.**

**E.2.(c)(2) The Grantee shall provide two (2) copies of all training manuals produced under this Grant to the A.I.D. Project Officer.**

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**E.2.(d) Annual Report of Project**

The annual report will be submitted to both EUR/DR, A.I.D. Washington and to the A.I.D. Representative (or the AID Affairs Officer, Economic Section at the Embassy) of the country where the program is being undertaken. The annual report will substantively review performance against planned quantitative and qualitative measures, including a discussion and analysis of the success of the program's impact per the established mechanism(s) for measuring the partnership's impact on (a) excess mortality and morbidity rates for the chosen medical problem in the area served by the Eastern European partner; (b) knowledge and skills of each partners' staff; and (c) the extent to which the partners incorporate joint activities into their individual operations. Incremental funding will be contingent on submitting complete reporting, effectively resolving implementation problems, as well as on the availability of funds and any revisions in the overall program structure that A.I.D. may require.

Within 60 days following the estimated completion date of this Grant the Grantee shall submit five copies of the final report as indicated in the preceding paragraph. It should include: (1) an executive summary of the Grant's accomplishments or failings; (2) a description of the Grant activities from its inception; (3) significance of these activities; (4) comments and recommendations; (5) a fiscal report that describes in detail how the Grant funds were used.

**E.2.(e) Evaluations**

E.2.(e)(1) The project will be closely monitored on a continuing basis by the Project Office shown in the Cover Letter of this Grant (under Fiscal Data, Item A.4.).

E.2.(e)(2) An independent evaluator will assess the effectiveness of the health care partnership. Grantee shall cooperate fully with the assessment of partnership activities.

**F. CLOSEOUT PROCEDURES (OMB Circular A-110)**

1. This paragraph prescribes uniform closeout procedures for AID grants and cooperative agreements.
2. The following definitions shall apply for the purpose of this paragraph:
  - (i) Closeout. The closeout of a grant is the process by which AID determines that all applicable administrative actions and all required work of the agreement have been completed by the grantee and AID.

(ii) Date of completion. The date of completion is the date on which all work under grants is completed or the date on the award document, or any supplement or amendment thereto, on which AID sponsorship ends.

(iii) Disallowed costs. Disallowed costs are those charges to a grant that AID or its representative

determines to be unallowable, in accordance with the applicable Federal cost principles or other conditions contained in the grant.

**3. AID closeout procedures include the following requirements:**

(i) Upon request, AID shall make prompt payments to a grantee for allowable reimbursable costs under the grant or agreement being closed out.

(ii) The grantee shall immediately refund any balance of unobligated (unencumbered) cash that AID has advanced or paid and that is not authorized to be retained by the grantee for use in other grants or cooperative agreements.

(iii) AID shall obtain from the grantee within 90 calendar days after the date of completion of the agreement all financial, performance, and other reports required as the condition of the grant. AID may grant extensions when requested by the grantee.

(iv) When authorized by the grant, AID shall make a settlement for any upward or downward adjustments to AID's share of costs after these reports are received.

(v) The grantee shall account for any property acquired with AID funds, or received from the Government in accordance with any provisions of this grant.

(vi) In the event a final audit has not been performed prior to the closeout of the agreement, AID shall retain the right to recover an appropriate amount after fully considering the recommendations on questioned costs resulting from the final audit.

**G. INDIRECT COST RATES**

Pursuant to the Standard Provision of this Grant entitled, "Negotiated Indirect Cost Rates - Provisional", a rate or rates shall be established for each of the Grantee's accounting periods which apply to this Grant. Pending establishment of revised predetermined, provisional or final indirect cost rates for each of the Grantee's accounting periods which apply to this Grant, provisional payments on account of allowable indirect costs shall be made on the basis of the following negotiated predetermined and provisional rate(s) applied to the base which is set forth below:

<u>Description</u>	<u>Rate</u>	<u>Base</u>	<u>Period</u>	<u>Type</u>
Medical Programs	55.0%	<u>1/</u>	Grant Period	Provisional

1/ Base: Salaries and wages including all fringe benefits.  
Special Remark: For the Fiscal Year Beginning 7/1/90, General and Administrative expense is 33.2% of salaries and wages including fringe benefits.

**H. TITLE TO PROPERTY**

Title to property purchased by the Grantee under this Grant shall be vested in the Grantee. The Standard Provision of this Grant entitled "Title to and Care of Property (Grantee Title)" applies. Disposition of property shall be in accordance with said Standard Provision.

**I. PROCUREMENT AND (SUB) CONTRACTING**

**I.1. Authorized Geographic Code**

All services shall have their nationality in the United States (A.I.D. Geographic Code 000), except as A.I.D. may otherwise agree in writing. The authorized source and origin for all goods/commodities shall be in accordance with the Optional Standard Provision entitled, "A.I.D. Eligibility Rules for Goods and Services (November 1985)". In reference to this Standard Provision, although not yet implemented into A.I.D. Handbooks, A.I.D. Geographic Code 935 has been amended to include the cooperating country. Requests for deviations to this requirement must include a full justification to be submitted to the Project Office at the address specified on page 3 of this Grant's Cover Letter. Approval of the Grant Officer and the Project Office is required before procurement of this nature can be undertaken. Ocean shipping financed by A.I.D. under the program shall, except as A.I.D. may otherwise agree in writing, be financed only on flag vessels of the United States.

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**I.2. Procurement Cost Detail**

Whenever feasible, the lead U.S. Grantee will be responsible for purchasing the U.S. equipment and commodities required for the technical assistance components of the program. This equipment must be specifically and directly linked to the training programs undertaken under the various subcomponents. No drug or device procured in the performance of this Grant shall be in violation of the Federal Food, Drug, and Cosmetic Act, as amended, and related U.S. laws and regulations.

**I.3. Local Cost Financing**

Local cost financing is hereby authorized under this Grant, provided such financing falls within the legitimate needs of the Program Description of Attachment 2, and does not exceed the following limitations: —

a. Procurement locally of items of U.S. origin up to a per transaction limit of the local currency equivalent of \$100,000.

b. Procurement locally of items of non-U.S. origin up to a per transaction limit of the local currency equivalent of \$5,000.

c. Commodities and services available only in the local economy (no specific per transaction value applies to this category). This category includes the following items:

(1) utilities - including fuel for heating and cooking, waste disposal and trash collection;

(2) communications - telephone, telex, facsimile, postal, and courier services;

(3) rental costs for housing and office space;

(4) petroleum, oils, and lubricants for operating vehicles and equipment;

(5) newspapers, periodicals, and books published in the cooperating country, and

(6) other commodities and services (and related expenses) that, by their nature or as a practical matter, can only be acquired, performed, or incurred in the cooperating country.

In cases where local cost procurements are expected to exceed the above limitations, and authorization for such procurement does not already exist in the Grant, the Grantee must obtain approval from the A.I.D. Grant Officer prior to proceeding with the procurement.

Except as otherwise changed by the above limitations, the conditions of the Optional Standard Provision entitled Local Cost Financing (November 1988), hereby incorporated into this Grant, apply, including paragraphs (b), (c), (d), (e), and (f).

#### I.4. Government Owned Organizations

A Government Owned Organization, i.e., a firm operated as a commercial company or other organization (including nonprofit organizations other than public educational institutions) which are wholly or partially owned by governments or agencies thereof, are not eligible as suppliers of goods and commodities, commodity-related services, or services (other than commodity-related services), except as the Grant Officer may otherwise agree in writing.

#### I.5. Travel

The standard provision entitled "Air Travel and Transportation" which requires advance notification to the Project Officer of the Grantee's travel intentions overseas, is required. The Grantee is also required to provide advance notification of intention to travel to the Embassy or A.I.D. Mission in the Cooperating Country.

All air travel and transportation under this grant are required to be made on U.S. flag carriers to the extent service by such carriers is available, in accordance with the aforementioned Standard Provision.

#### J. SPECIAL PROVISIONS

For the purposes of this Grant, references to "OMB Circular A-122" in the Standard Provisions of this Grant shall include the A.I.D. implementation of this Circular, as set forth in Subpart 731.7 of the A.I.D. Acquisition Regulation (AIDAR) (48 CFR Chapter 7).

#### J.2. Equipment and Other Capital Expenditures

##### J.2.(a) Requirement for Prior Approval

Pursuant to the Standard Provisions of this Grant entitled "Allowable Costs" and "Revision of Grant Budget," the Grantee must obtain A.I.D. Grant Officer approval for the following:

Purchase of General Purpose Equipment, which is defined as an article of nonexpendable tangible personal property, the use of which is usable for other than research, medical, scientific, or other activities (e.g., office equipment and furnishings, air conditioning equipment, reproduction and other equipment, motor vehicles, and automated data processing equipment, having a useful life of more than two years and an acquisition cost of \$500 or more per unit.)

Purchase of Special Purpose Equipment, which is defined as equipment which is usable only for research, medical, scientific, or technical activities (e.g., microscopes, x-ray machines, surgical instruments, and spectrometers).

**J.2. (b) Approvals**

In furtherance of the foregoing, the Grant Officer does hereby provide approval for the following purchases, which shall not be construed as authorization to exceed the Total Estimated Amount or the Obligated Amount of this Grant, whichever is less (see Section C. above):

<u>Item Description</u>	<u>Quantity</u>
Personal computer (CPU/drives/monitor) plus software (not to exceed 3 packages per unit)	4 —
Computer printer	4
Injector	1
Pump, IV Syringe	8
Pump, IV Volumetric	8
Pump, Extra Corporeal	1
Portable Echocardiograph	1
Volume Ventilator	4
Blood Gas Analyzer	1
Open Incubator	4
Analyzer, Blood Gas/pH	1
Analyzer, Hemochrom	1
Eight Channel Recorder	1

**J.3. Salaries**

Except as the Grant Officer may otherwise agree in writing, A.I.D. shall not be liable for reimbursing the Grantee for any costs allocable to the salary portion of direct compensation paid by the Grantee to its employees or to subcontractor employees for personal services which exceed the highest salary level for a Foreign Service Officer, Class 1 (FS-1) as periodically amended.

**J.4. Consultant Fees**

Compensation for consultants retained by the Grantee hereunder shall not exceed, without specific approval of the rate by the Grant Officer, either the highest rate of annual compensation received by the consultant during any full year of the immediately preceding three years, or the maximum rate of a Foreign Service Officer, Class 1 (FS-1), as periodically amended, whichever is less. A daily rate is derived by dividing the annual compensation by 2,087 and multiplying the result by 8.

**J.5 Participant Training**

All participant training performed hereunder shall conform to the Standard Provision entitled "Participant Training" (see section L.2.) and A.I.D. Handbook 10.

**K. ORDER OF PRECEDENCE**

In the event of any inconsistencies in this Grant, they shall be resolved by applying the following descending order of precedence:

Attachment 1 - Schedule  
Cover Letter  
Attachment 3 - Standard Provisions  
Attachment 2 - Program Description

**L. STANDARD PROVISIONS**

L.1. The Standard Provisions set forth as Attachment 3 of this Grant consist of the following Standard Provisions marked by an "X", which are attached hereto and made a part of this Grant:

**L.2. MANDATORY STANDARD PROVISIONS FOR U.S.,  
NONGOVERNMENTAL GRANTEES**

- ( X ) Allowable Costs (November 1985)
- ( X ) Accounting, Audit, and Records (September 1990)
- ( X ) Refunds (September 1990)
- ( X ) Revision of Grant Budget (November 1985)
- ( X ) Termination and Suspension (May 1986)
- ( X ) Disputes (November 1989)
- ( X ) Ineligible Countries (May 1986)
- ( X ) Debarment, Suspension, and Other Responsibility Matters (March 1989)
- ( X ) Nondiscrimination (May 1986)
- ( X ) U.S. Officials Not to Benefit (November 1985)
- ( X ) Nonliability (November 1985)
- ( X ) Amendment (November 1985)
- ( X ) Notices (November 1985)

**L.3. OPTIONAL STANDARD PROVISIONS FOR U.S.,  
NONGOVERNMENTAL GRANTEES**

- ( X ) Payment - Letter of Credit (November 1985)
- ( ) Payment - Periodic Advance (January 1988)
- ( ) Payment - Cost Reimbursement (November 1985)
- ( X ) Air Travel and Transportation (November 1985)
- ( X ) Ocean Shipment of Goods (May 1986)
- ( X ) Procurement of Goods and Services (November 1985)
- ( X ) AID Eligibility Rules for Goods and Services (November 1985)

- ( ) Subagreements (November 1985)
  - ( X ) Local Cost Financing (November 1988)
  - ( X ) Patent Rights (November 1985)
  - ( X ) Publications (November 1985)
  - ( ) Negotiated Indirect Cost Rates - Predetermined (May 1986)
  - ( X ) Negotiated Indirect Cost Rates - Provisional (May 1986)
  - ( X ) Regulations Governing Employees (November 1985)
  - ( X ) Participant Training (May 1986)
  - ( ) Voluntary Population Planning (August 1986)
  - ( ) Protection of the Individual as a Research Subject (November 1985)
  - ( ) Care of Laboratory Animals (November 1985)
  - ( ) Government Furnished Excess Personal Property (November 1985)
  - ( X ) Title To and Use of Property (Grantee Title) (November 1985)
  - ( ) Title To and Care of Property (U.S. Government Title) (November 1985)
  - ( ) Title To and Care of Property (Cooperating Country Title) (November 1985)
  - ( ) Cost Sharing (Matching) (November 1985)
  - ( ) (1) Use of Pouch Facilities (November 1985)
  - ( X ) Conversion of United States Dollars to Local Currency (November 1985)
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1. The address in paragraph (a) (4) of this Provision should be changed to add -0001 after 20523 (the zip code).

## PROGRAM DESCRIPTION

Project HOPE proposes a three-year program to establish the first and only dedicated pediatric cardiology/cardiac surgery capability in the Slovak Republic. The program will be implemented in partnership with the Divisions of Pediatric Cardiology and Cardiovascular Surgery of The Children's Hospital of Philadelphia (CHOP) with its professional counterparts in the Pediatric Cardiovascular Institute in the University Children's Hospital in Bratislava, the capital of the Slovak Republic. The goal of the project is to establish a high level of diagnosis and care for the children of republic with congenital heart disease, by expanding the capacity of the faculty and staff of the hospital. As with all Project HOPE long-term programs, a major effort of this partnership will be education.

The Slovak Republic, with a population of approximately five million people, can expect in excess of 700 infants per year to be born with major structural cardiac defects. At least one-half of these infants either require definitive management of their congenital heart disease or die of their illness during the first year of life. The medical institutions of Bratislava serve as referral centers for virtually all children with congenital heart disease in the entire republic. At the present time, pediatric cardiology services in Bratislava are disjointed and located in an outdated children's hospital which houses the out-patient clinics, non-invasive laboratory (echocardiography) and in-patient services for infants and children. Children requiring invasive diagnostic procedures must be transported to a separate facility for radiology and cardiac catheterization. The adult Cardiac Institute, an entirely separate institution in another part of the city, is the only hospital in the Slovak Republic where any open heart surgery is performed. To compound the situation, although almost 500 children require surgery each year, only 100-150 receive it in Slovakia. Furthermore, virtually no surgical treatment is available within the republic for children with the complex forms of congenital heart disease that are most likely to result in significant morbidity or in mortality during infancy or the first years of life.

The planned move later this year of the entire faculty of pediatric medicine of Bratislava into a new children's hospital offers a timely opportunity to take significant steps toward the reorganization and improvement of services available to children with heart disease in the Slovak Republic. Project HOPE will develop the comprehensive program necessary to achieve this objective through the following activities:

- o Intensive training in clinical cardiology, cardiac surgery, critical care medicine, nursing, anesthesia, and extracorporeal circulation. Sixteen trainees will receive six months intensive tutelage at CHOP over the three year

period. In addition, clinical teams from CHOP will travel to Bratislava 9 times to provide local guidance and training to their counterparts.

- o Facilities will be established or upgraded to a level of contemporary medical practices by the provision of such equipment as an extracorporeal pump oxygenator, together with consumable supplies, mechanical ventilators, a blood gas analyzer, equipment to monitor blood coagulability, a physiologic recorder, and diagnostic echosonographic equipment.
- o Treatment methods will be improved to shorten the time to accurate diagnosis, particularly for newborns.
- o Support services will be established to assure contemporary diagnostic and treatment capabilities.

It is anticipated that this program will significantly improve the level of care of children in the Slovak Republic with heart disease and will serve as a model for other disciplines in pediatric subspecialties. In addition, this new center of excellence will stimulate and educate practitioners throughout the republic with regard to the early recognition, initial management, and appropriate referral of children with significant heart disease. The results will be earlier identification, more accurate diagnosis, better follow-up and a broader range of effective treatment options for a shorter and safer hospital stay.

The program would be managed through the International Division of Project HOPE. The Foundation's Division of Medical Education would assure the quality of medical education and monitor the medical aspects of the program. Field monitoring and support will be provided through Project HOPE's regional office in Bratislava, Czechoslovakia, established earlier this year to implement and monitor its Eastern European activities. Project HOPE, which has been involved in the region since 1974, has ongoing educational and humanitarian assistance programs involving Poland, Czechoslovakia, Hungary, Bulgaria, and Romania.

Project HOPE's U.S. partner in the program, The Children's Hospital of Philadelphia, is affiliated with the University of Pennsylvania School of Medicine. It is one of the world's largest Children's Hospitals with particular expertise in the treatment and research of pediatric cardiac/vascular diseases. A pioneer in the development of new surgical techniques, it offers the children of Slovakia one of our country's best technological and human resources.

A unique aspect of this program is the use of the pediatric cardiology and cardiac surgery program in Krakow, Poland. In

addition, the biomedical engineering facility at the Institute of Pediatrics in Krakow, will be used to support a biomedical engineering program in Bratislava. Both of these programs were developed with A.I.D. funding and Project HOPE management. Both are a valuable resource in the training of nurses, therapists, and paraprofessionals in pediatric cardiovascular care. These programs have been in place in the Institute of Pediatrics as part of the Project HOPE/A.I.D. collaboration since 1974. It was the Division of Cardiovascular Surgery and Cardiology of the Children's Hospital of Philadelphia that initiated the cardiology and cardiovascular surgery unit, together with Project HOPE, at the Institute of Pediatrics in Krakow. This program has significantly improved child health in Southern Poland.