



QUARTERLY IMPACT REPORT

Q3 FY 2014

02.01.2014–04.30.2014

VISIT WEBSITE

CULTURE CODE

LETTER FROM THE CEO

I'm excited to share with you our first Quarterly Impact Report (QIR).

This QIR, covering a period of great growth and change from 02.01.2014–04.30.2014, was designed to improve our performance in a few key areas.

First: transparency.

When we re-named from Nyaya Health to Possible in March, we retired our wiki. With the QIR, we've filtered out the unnecessary and bring you the most important insights with simple, great design.

Second: learning.

Behind the QIR is an internal process we developed in our project management system Asana to drive benchmarking and data collection for leaders of our teams. Hence, this isn't just an external report—we optimize the entire organization's learning and improvement around the QIR process.

Third: efficiency.

It's part of our For-Impact Culture Code to try to minimize complexity as our organization grows. Our plan is to create such a high-quality and consistent QIR that it replaces the need for many, if not all, customized reporting requests and timelines from a growing set of partners.

We've always felt our organization should outperform the standards of the quarterly earnings reports of public companies. This first iteration of the QIR is our effort to do so and to do better for our patients as a result.

If you have questions or feedback for improving future QIRs, please write me directly at mark@possiblehealth.org.

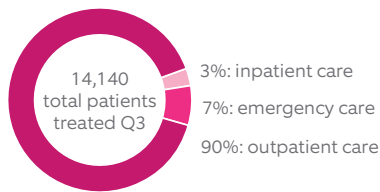
A handwritten signature in black ink, appearing to read 'Mark Arnoldy', with a stylized, cursive script.

Mark Arnoldy, CEO

p.s. Don't forget to download the additional documents that provide deep insight at the end of each section—from line by line financials to our full data set in our impact dashboard.

IMPACT

IMPACT HIGHLIGHTS:



173,469
total patients treated to date

\$30.28
cost per patient treated
(total expenses/total patients)

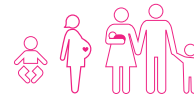
COMMUNITY HEALTH PROGRAM EXPANSION:



The CH program grew from 9 to 14 village communities.



Increase in # of CHWs from 93 to 170 (83% growth)



Increase in population served from 19,347 to 45,313 (134% growth).

KEY PERFORMANCE INDICATORS:

This is our first quarter measuring our overall KPIs.



SURGERY ACCESS
(measured quarterly)
of days when surgical services are fully available to patients.



EQUITY
(measured quarterly)
Rate at which lower castes access care vs. the general population.



SAFE BIRTH
(measured yearly)
% of women giving birth in a healthcare facility with a clinician.



FOLLOW UP
(measured quarterly)
% of chronic disease cases followed-up by Community Health Workers.



OUTPATIENT USE
(measured quarterly)
% of the population that utilizes our healthcare services.



FAMILY PLANNING
(measured yearly)
% of contraceptive use among women of reproductive age.

KPI RESULTS*:

*We have results for 3 of the 6 KPIs. Two KPIs can only be measured annually, and there is not yet enough data collected to measure the other.

SURGICAL ACCESS
Results: 51% vs. target of 82%
This means the full set of resources and people to perform surgeries were available half the quarter.

EQUITY
Results: 1.9 vs. target of 1
This means marginalized patients are accessing our healthcare almost twice as much as non-marginalized people.

OUTPATIENT USE
Results: 1.5 vs. target of 1.3
This means each person in our catchment area visited one of our healthcare facilities 1.5 times on average this quarter.

DOWNLOAD ADDITIONAL INSIGHT: IMPACT



Dive into our full set of quarterly data, published openly in our Impact Dashboard.

MILESTONES

Our team identified six high-level goals for Q3 at the start of FY 2014.

✓ Grow 501c3 Board of Directors from 4 to 6 members.	✓ Submit long-term, performance-based contract to Nepali government.	✓ Hire an Operations Director—Nepal.
✓ Expand Community Health Worker (CHW) program from 9 to 14 communities.	✗ Complete clinic expansion from 0 to 6 clinics.	➔ Identify next, expanded NYC office.

✓ **ACCOMPLISHED INSIGHT:** The Board grew to 7, we hired an Operations Director—Nepal, signed a short-term performance-based grant agreement and submitted a 20-year public-private partnership investment proposal with the Nepali government. Our CHW program grew from serving 19,347 to 45,313 people (134% growth).

✗ **MISSED INSIGHT:** We were only partially operational at 6 clinics by quarter close. This was slowed after placing our expansion leader on long-term sick leave. Will be completed in Q4.

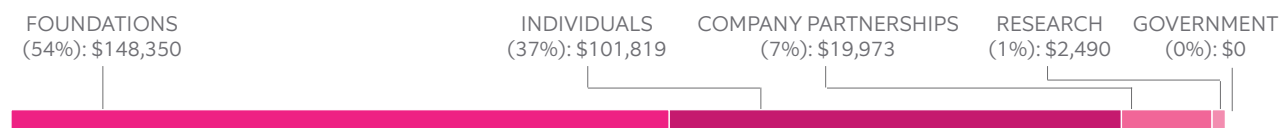
➔ **SHIFTED INSIGHT:** Expanding the office would have been premature. This will shift to Q2 of FY 2015.

INCOME

TOTAL INCOME:

\$272,631

50% restricted, 50% unrestricted



\$34,209

in-kind value for 501c3

\$31,000

in-kind value for NGO

\$1,066,890

total \$ applied for

NEW IN-KIND PARTNERS:

asana:

Asana provides its product so we can execute everything from getting patients care to organizing meetings.

bamboohr™

Bamboohr provides a discounted product so we can attract great talent and organize our global team.

Si

Small Improvements provides its product so we can have a world-class performance evaluation system

SEE ADDITIONAL INSIGHT: INCOME



Possible was awarded **Merck's Richard T. Clark Fellowship** in April 2014. Merck will pay 3 of their top employees to work with our team for 3 months in Nepal on creating efficiencies and cost reduction in our pharmaceutical supply chain—our 2nd largest expense in Nepal.

EXPENSES

\$429,539

total Q3 expenses

101%

% of expected Q3 budget spent

DOWNLOAD ADDITIONAL INSIGHT: EXPENSES

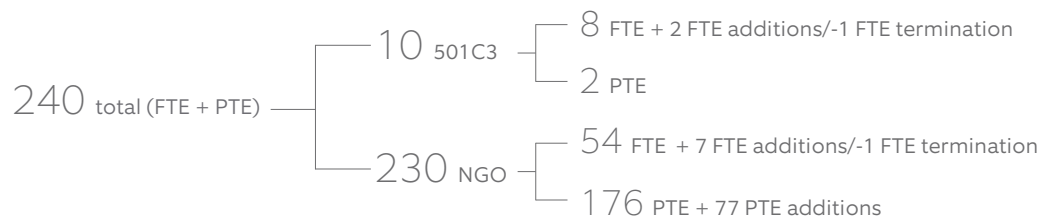


View our 501c3 quarterly expense summary and full line-by-line detail.



See how our money was spent within Nepal by viewing our NGO quarterly expense summary and full line-by-line detail.

TALENT



TALENT SPOTLIGHT:



JESSICA KRIBBS (bio)
Director of Finance + Operations



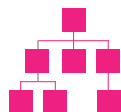
AMRIT BANSTOLA (bio)
Program Officer



CAMERON BOPP (bio)
Hospital Director

SEE ADDITIONAL INSIGHT: TALENT

Due to illness, we placed our Nepal Country Director on long-term leave, and recruitment for the replacement (Managing Director) is the top hiring priority.



View our organizational chart.



Share our top hiring priority: Managing Director—Nepal.



See the goals and tools we use to manage.

AUDIENCE

WEBSITE:

03/18

new site launched

38,882

pageviews from 03/18–05/01

2:47 minutes

average duration of site visit

FACEBOOK:

17,650

likes

+1,600

likes vs. last quarter

TWITTER:

1,967

followers

+222

followers vs. last quarter

DOWNLOAD ADDITIONAL INSIGHT: AUDIENCE



On March 18th, we changed our name from Nyaya Health to Possible and launched a new website at www.possiblehealth.org.



We also launched Possible's **For-Impact Culture Code**—an articulation of the principles that drive our organizational culture.

BOARD

The Global Board grew from 4 to 7 members.

BOARD ADDITIONS SPOTLIGHT:



BETH KITINGER ([bio](#))
Chief of Operations, Fenton



GABRIELLE HADDAD ([bio](#))
Legal Officer, The Global Fund



ROBERT CHANG ([bio](#))
Managing Partner, Mogility Capital

DOWNLOAD ADDITIONAL INSIGHT: BOARD



Possible is seeking a Board Chair.
Read about and share the position.