



**WFSA**  
WORLD FEDERATION OF SOCIETIES OF  
ANAESTHESIOLOGISTS

# ANNUAL REVIEW

2017/18



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**WFSA**  
WORLD FEDERATION OF SOCIETIES OF  
ANAESTHESIOLOGISTS

# OVERVIEW

**The World Federation of Societies of Anaesthesiologists (WFSA) strives to achieve universal access to safe anaesthesia. We unite anaesthesiologists around the world to improve patient care and access to safe anaesthesia and perioperative medicine.**

Our programmes tackle the key barriers to access and are run in partnership with our Member Societies and other organisations that share our goals.

We have official liaison with the World Health Organisation (WHO), and also work with governments, other legislative bodies, surgical organisations, NGOs, hospitals and training centres to advance the important role of anaesthesia in the global health agenda.

Together with our partners and members we have done much to achieve our aims, but with 5 of the world's 7 billion people without access to safe and affordable anaesthesia and surgical care when needed, there is a long way to go. ■

**16.9 million lives were lost from conditions needing surgical care in 2010.**

**This is over 4x the number of people who died from HIV/AIDS, TB and Malaria combined.**

## PRESIDENT'S LETTER

As the WFSA continues to work tirelessly to close the gap in anaesthesia and surgery provision that has left five of the world's seven billion people without access to safe and affordable care when needed, I would like to recognise the hard work of societies and individuals playing a role.

The scale of the crisis is so huge that it is impossible for one organisation working alone to make a difference. The WFSA is extremely grateful for our network of 130+ Member Societies, and their individual members, who contribute to our projects around the world.

As we continue to tackle the surgery and anaesthesia crisis, and ensure anaesthesiologists are represented in the highest level discussions, we need to take a multidisciplinary approach. Anaesthesiologists must work with surgeons, nurses, physician and non-physician providers, decision-makers, and industry to create National Surgical, Obstetric and Anaesthesia Plans (NSOAPs) that will be the policy roadmaps for improved national anaesthesia provision and patient safety in the future.

We will continue looking for anaesthesia champions everywhere as the next World Congress of Anaesthesiologists (WCA) approaches. The WCA in September 2020 in Prague will see new Board, Council and Committee members elected, and we will need passionate and hardworking anaesthesiologists from each geographical region to lead our organisation.

There is no room for volunteerism without lasting solutions. Patient safety goes first and inadequate surgical treatment will have disastrous effects on the whole health system. The WFSA intends to lead the way as the voice of global anaesthesiology and looks forward to collaborating with other individuals and organisations who share our objectives to advance safe anaesthesia and perioperative medicine globally. ■



Dr Gonzalo Barreiro, WFSA President

**94% of the population in low and middle income countries (LMICs) are without access to surgery and anaesthesia, compared with 14.9% of the population in high-income countries.**

# ADVOCACY

In 2015 The Lancet Commission on Global Surgery highlighted that more than 5 billion of the world's 7 billion people are without access to safe and affordable surgical care when needed. The WFSA is a leader in global advocacy efforts to address this inequity.

## OUR ROLE IN GLOBAL ANAESTHESIA AND SURGERY

**THE WFSA seeks to ensure universal access to safe anaesthesia and unites hundreds of thousands of anaesthesiologists behind this goal.**

We deliver our mission through programmes that tackle the key barriers to access to safe anaesthesia around the world.

The WFSA Global Position Statement on Anaesthesiology and Universal Health Coverage highlights the need for WFSA and anaesthesiologist leadership in addressing the human resource crisis in anaesthesia, as well as acknowledging the important role of non-physician providers in reaching the goal of Universal Health Coverage by 2030. ■



## SAFE ANAESTHESIA SAVES LIVES

**It is essential that safe practices are followed internationally to ensure the best possible care.**

The WFSA International Standards for a Safe Practice of Anaesthesia, first published in June 1992 and periodically revised, provide an expert guide to what is required in order to provide safe anaesthesia and safe surgery around the world. ■

“ *The International Standards represent minimum standards and the goal should always be to practice to the highest possible standards, preferably exceeding the standards outlined.* ”

**International Standards for a Safe Practice of Anaesthesia**

## NATIONAL SOLUTIONS

**As we continue to gain traction in making surgical scale-up a global health priority, national governments must commit resources to improve the availability, quality and affordability of anaesthesia and surgery.**

The WFSA is actively involved in this planning, and is able to assist our Member Societies in compiling a National Anaesthesia Plan which can be integrated into national health policy, to help engage governments and the wider medical community.

The Tanzanian National Surgical, Obstetric and Anaesthesia Plan describes anaesthesia as “universally identified by all cadres as the most acute problem preventing safe surgical care”. Additionally, the recently published Zambian NSOAP highlights the SAFE Obstetric and SAFE Paediatric anaesthesia training programmes, co-created by the WFSA, as part of the Ministry of Health’s strategy for service delivery. ■

# SURGICAL CARE SYSTEMS STRENGTHENING

Developing national surgical, obstetric and anaesthesia plans



## WFSA AT THE WORLD HEALTH ASSEMBLY (WHA)

The WFSA co-hosted *What's next for surgery & anaesthesia? Civil society & global solutions, alongside Lifebox and the InciSioN student network.*

The side event focused on the surgery and anaesthesia workforce as well as the WFSA Global Position Statement on Anaesthesiology and Universal Health Coverage which highlights the need for WFSA and anaesthesiologist leadership in addressing the crisis.

Additionally, we were integral in ensuring the Assembly's decision to report on the implementation of WHA Resolution 68.15 every 2 years. ■

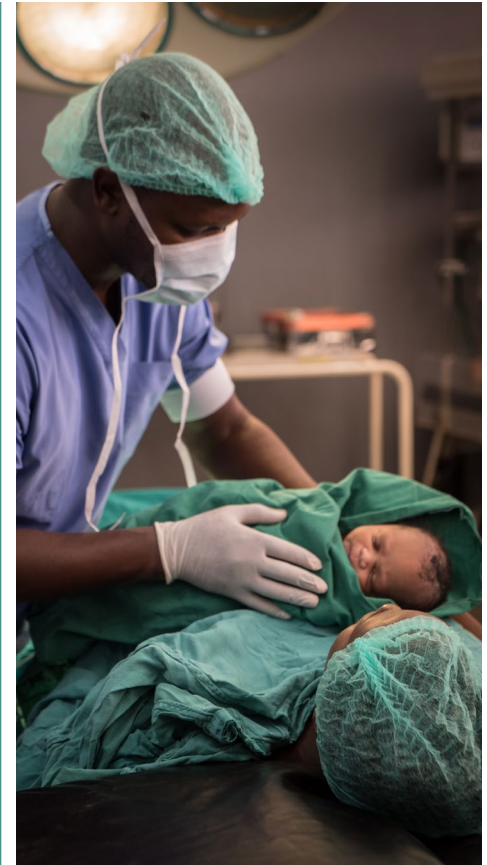
## STATEMENT AT WHO BOARD MEETING

**WFSA Council Member Dr Philippe Mavoungou addressed the delegation at the Special Session of the Executive Board on a draft thirteenth General Programme of Work (GPW13).**

He gave a statement on the importance of WHA Resolution 68.15 'Strengthening Emergency and Essential Surgical Care and Anaesthesia as an essential component of Universal Health Coverage', urging the Executive Board to prioritise surgery and anaesthesia in GPW 13 in support of the Resolution. ■

“ *There cannot be UHC without a scale up of surgical services. WFSA calls on the Executive Board to prioritise surgery and anaesthesia in GPW 13 in support of Resolution 68.15 and the achievement of UHC by 2030.*

Snippet from Dr Mavoungou's statement on GPW13





## G4 ALLIANCE

The WFSA is a member of the **Global Alliance for Surgical, Obstetric, Trauma and Anaesthesia Care (G4 Alliance)**.

The G4 alliance is an advocacy-based organisation dedicated to building political priority for surgical care as part of the global development agenda.

In 2017 the G4 Alliance continued to build greater awareness around the importance of surgical and anaesthesia care as part of the global health agenda. Several WFSA Board and Council members attended the G4 Alliance Permanent Council Meeting in Maputo, Mozambique. ■



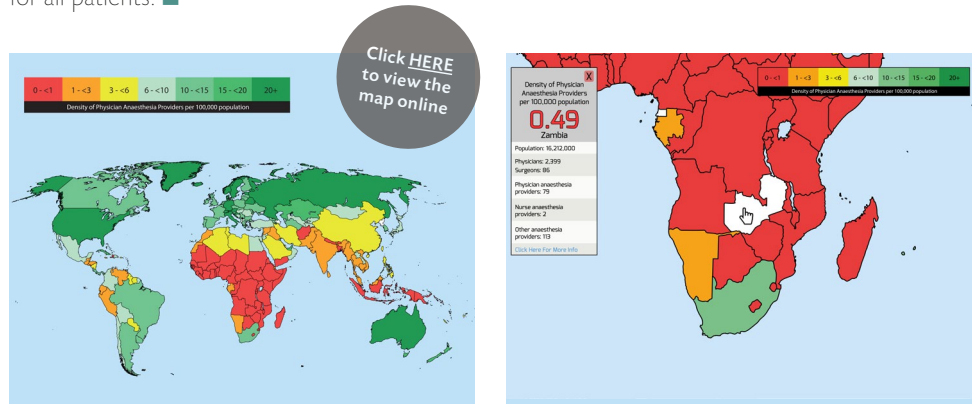
SURGICAL, OBSTETRIC, TRAUMA, & ANAESTHESIA CARE

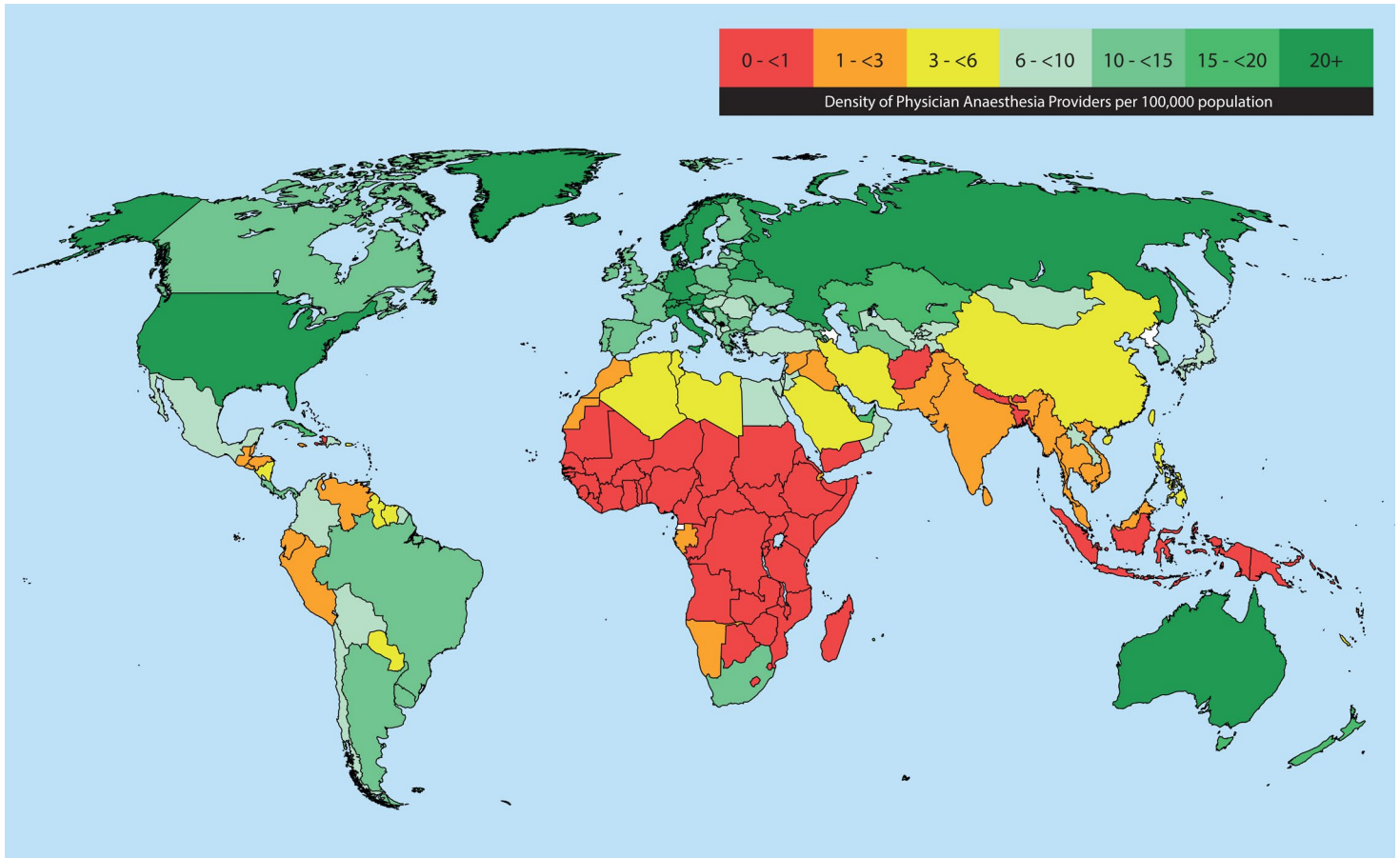
## GLOBAL ANAESTHESIA WORKFORCE MAP

The WFSA launched a landmark online resource tool mapping the total number of anaesthesia providers worldwide.

The online resource created by the WFSA, which shows data for countries representing more than 7 billion people, highlights the extent and location of the anaesthesia workforce deficit around the world. A high number of countries reported a total anaesthesia provider number of less than 5 per 100,000 population. Using current population data, more than 136,000 physician anaesthesia providers are needed today to achieve an interim target density of 5 per 100,000 population in all countries.

Without adequate numbers of both physician and non-physician providers it will be impossible to scale-up anaesthesia provision worldwide, and impossible to ensure access to safe anaesthesia for all patients. ■





# EDUCATION

Our education and training programme provides essential information and training to improve the knowledge and competencies of anaesthesia providers, including those from underserved and rural areas. With a sustainable, localised approach our programmes are spread across Latin America, Europe, Africa, Asia and the Pacific and improve the skills of thousands of anaesthesiologists every year. This leads to better patient outcomes and brings us closer to achieving our vision of safe anaesthesia for everybody.

## FELLOWSHIPS

**Fellowships form a central part of how the WFSA supports improved safety.**

In 2017 43 fellows from 27 different countries undertook fellowships across Africa, Asia, Europe and Latin America.

Dr Rupesh Kumar Gami from Nepal undertook a 12 month WFSA Critical Care Fellowship Vellore, India. As Dr Gami was approaching the end of his Fellowship we asked him about the impact of the fellowship and what his plans for the future were. ■

[Fund A Fellow: Help us train 500 Fellows and reach 1 million patients by 2020.](#)



“ Back home I work in a medical college located far from the capital in a region with low economic status. When I return home, I will work to make everyone at the medical college understand the importance of critical care and how it will help our patients, then establish a dedicated team.

All of the departments in a hospital need to come together to ensure better outcomes for critically ill patients, so I will train my fellow doctors in managing the types of cases and the methods I have learnt about since beginning the fellowship. I will also train the nursing staff by organising cases and skills sessions.

Finally, I will keep myself and my colleagues updated with regular classes, CME, workshops, training and conferences to ensure the lessons learnt during the fellowships will have a lasting impact on my region in Nepal.

**Dr Rupesh Kumar, WFSA Fellow from Nepal (centre)**

## SCHOLARSHIPS

Since 2008 Baxter Healthcare has generously sponsored anaesthesiologists from low resource countries to attend WFSA Regional Congresses.

The learning gained and networks created during these events prove invaluable to these future leaders in anaesthesia.

The WFSA would also like to thank Gradian, Diamedica and Masimo for their donations in 2017 which allowed additional scholars to attend the All Africa Anaesthesia Congress (AAAC) in Nigeria and ASA's Anesthesiology. ■

In 2017, 31 scholars from 19 countries attended 6 congresses in

- Sri Lanka (SAARC-AA)
- Switzerland (Euroanaesthesia)
- Uruguay (CLASA)
- USA (ASA's Anesthesiology)
- Gabon (SARANF)
- Nigeria (AAAC)



“ One highlight of my scholarship was attending a symposium on training and mentoring in anaesthesia. As a young anaesthesiologist, this is one of the areas where I want to build my capacity. The most fascinating lecture in this symposium was ‘Collaborative partnership: Advancing the discipline of anaesthesia’. I learned about the concept of collaborative partnership, its types and components, and most importantly, I learned about how we Africans should create partnerships. I really appreciated the Ugandan experience.

The AAAC was the biggest congress I have attended so far in my career and gave me the chance to meet many people at once. I got exposed to so many different cultures, ideas, ways of thinking and living. I was able to make many friends from all over the world.

**Dr Ananya Abate Shiferaw, Diamedica scholar, AAAC 2017 Nigeria**



## SAFE

**SAFE (Safer Anaesthesia From Education) is a joint project developed by the AAGBI and the WFSA.**

The 3 day course in either Obstetric or Paediatric Anaesthesia brings regional and UK faculty together to deliver training local to physicians and anaesthetic officers on how to give the safest possible anaesthetic care: with clinical scenarios taught on the course based on conditions causing 80% of deaths . The 'train the trainer' component of the course supports knowledge retention and sustainability by allowing participants to return to their hospitals, and teach others the techniques they learned ■

**In 2017 there were 502 SAFE Obstetrics course participants and 814 SAFE Paediatrics participants from 12 countries in total.**



## EPM

**Essential Pain Management (EPM) is a cost-effective, multi-disciplinary program.**

Run in over 40 countries it brings together local health workers to improve pain knowledge, implement a simple framework for managing pain and address pain management barriers.

The program encourages early handover to local instructors so that local solutions can be found for local problems. ■

**In 2017 37 EPM workshops were run with 1,429 participants, and 11 instructor workshops were run with 342 instructors trained.**





## PALESTINIAN ANAESTHESIA TEACHING MISSION (PATM)

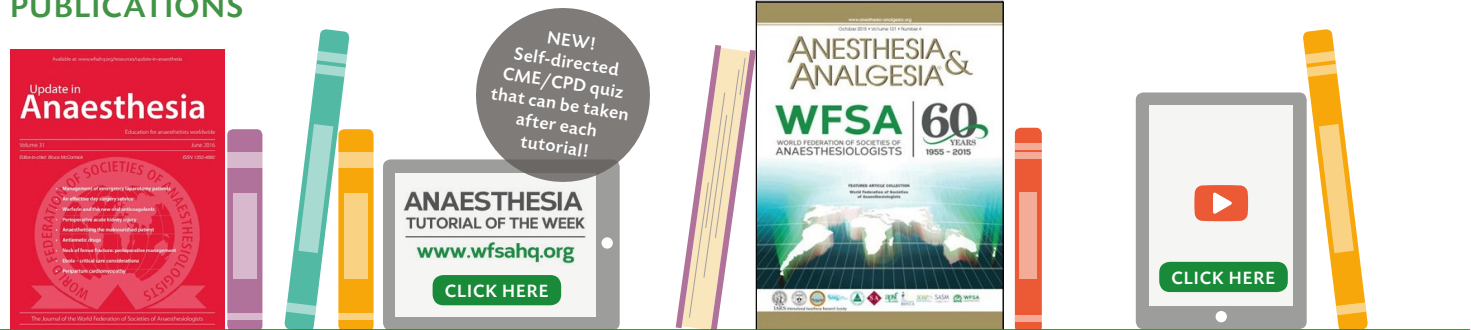
**PATM provides in-country anaesthesia training for resident doctors in Palestine, with training taking place in hospitals in East Jerusalem and the West Bank.**

The programme was started by the Canadian Anesthesiologists' Society International Education Fund (CASIEF) and WFSA in 2009.

Today the WFSA continues to provide administrative support and IMET 2000 support, a UK-based organisation, now generously provides funding and local management.

In 2017 three PATM volunteers travelled to Palestine and taught at four hospitals within the West Bank focusing on professional development and clinical teaching of physician and non-physician anaesthesia providers. ■

## PUBLICATIONS



### UPDATE IN ANAESTHESIA (UIA)

Update In Anaesthesia is the official CME publication of the WFSA. UIA Volume 32 was published in August 2017 and included articles on rapid sequence induction, typhoid enteric fever, wrist blocks and management of paediatric sepsis. Similar to the response to UIA Volume 31 in 2016, there was a noticeable spike in web traffic as several thousand people visited the WFSA website within hours of the volume's release. ■

### ANAESTHESIA TUTORIAL OF THE WEEK (ATOTW)

ATOTW, the WFSA's web tutorial, aims to support anaesthesia education across the globe. ATOTW is read by thousands across high, middle and low resource countries making it an invaluable open access resource for everybody. In 2017, 25 tutorials covering various different anaesthesia specialities were published in English. Many of these tutorials were also translated in Spanish, French, Portuguese and Chinese. ■

### ANESTHESIA & ANALGESIA

Through a partnership between the WFSA and the International Anesthesia Research Society (IARS), the Global Health Section of Anesthesia & Analgesia (A&A) was formed in 2014 and has been going from strength to strength. In 2017 Anesthesia & Analgesia continued to publish articles with a focus on global anaesthesia, health and development. Articles published in the Section are now available free to download. ■

### ANAESTHESIA FILM TUTORIALS (YOUTUBE)

Through a partnership with Southampton Hospital, the WFSA offers a series of subtitled educational videos on Adult and Paediatric Anaesthesia on our Virtual Library and YouTube channel. In 2017 the videos were updated to also include voiceover explanations of each topic being taught. These videos were viewed more than 500,000 times over the year. ■



# INNOVATION AND RESEARCH

Innovation and research is vital to improving safety and standards in anaesthesia care globally. Advances in these areas will create innovative equipment for the future, novel drugs to better treat patients, advanced learning methods for safer anaesthesia, and effective pain relief in resource poor settings.

## FRESENIUS KABI ANAESTHESIA INNOVATION AWARDS

**The WFSA and Fresenius Kabi launched the Innovation Awards.**

This unique innovation development awards programme identifies and supports the development of innovations that have the potential to transform the field of anaesthesia and improve patient safety worldwide.

Encouraging applications from around the world, the WFSA Fresenius Kabi Anaesthesia Innovation Awards will identify innovations in the field of anaesthesia which have the potential to benefit patients worldwide.

One award will be given per year until 2020. Dr Caroline Corbett from South Africa was announced as the winner of the first award in December 2017 and is developing an innovative, low cost video laryngoscope. ■

## WFSA-OHIO STATE UNIVERSITY FELLOWSHIPS

**Ohio State University, Wexner Medical Center agreed to partner with the WFSA to provide two research fellowships.**

These unique positions are based at the university's Department of Anesthesiology and are open to anaesthesiologists from low and middle income countries.

The aim of the fellowship programme is to foster the development of research in less affluent countries. The fellows will work on a research project for a period of 12 months, with the final goal of publishing an original paper in an indexed journal.

In 2017 two fellows were selected from Cambodia (Dr Sophallyda Krouch) and India (Dr Tanmay Tiwari) to undertake the fellowship. ■

## UCSF RESEARCH FELLOWSHIPS

**The WFSA and the Department of Anesthesiology and Perioperative Care, University of California San Francisco (UCSF) offer a research fellowship.**

The Medical Education Simulation fellowship is a 1-year, non-accredited program partly based at UCSF (1-3 months) and partly at the fellow's home institution. The overall goal of the fellowship is to provide opportunities for anaesthesiologists from LMICs to gain expertise in medical education, develop educational leadership and acquire foundational skills to conduct research in education.

Fellows will complete scholarly work and return to their home institutions to implement mentored education projects. In 2017 Dr Fred Bulamba from Uganda undertook the UCSF Research Fellowship in Uganda. ■

# SAFETY AND QUALITY

Safety is an essential component when seeking to improve anaesthesia care globally. The WFSA's Safety and Quality programme promotes the International Standards for the Safe Practice of Anaesthesia around the globe and seeks to break down the barriers that prevent anaesthesia providers from following these Standards.



## LIFEBOX

**Lifebox is a global nonprofit working to make surgery and anaesthesia safer in low-resource settings.**

For billions of people around the world there is no such thing as a 'routine operation.' But effective surgical care is possible in the most challenging environments. Lifebox programmes are framed by the World Health Organization's Surgical Safety Checklist and target three critical components of a patient journey: anaesthesia safety, reduction of surgical site infection (SSI), and improved teamwork in the operating room.

Results from the 'Clean Cut' pilot site targeting SSI at a hospital in Ethiopia show a 180% improvement in the use of appropriate hand hygiene, and a 92% improvement in the proper timing of prophylactic antibiotics.

The WFSA is a proud co-founder of Lifebox, working closely with the charity and its partners. Together we raise awareness of the fundamental role of anaesthesia in surgery, and support the life-saving work of anaesthesia providers around the world. ■

**In 2017, Lifebox delivered more than 2800 pulse oximeters to partners in 41 countries, alongside training for nearly 2000 anaesthesia providers**

FOUNDER AND SUPPORTER OF

**lifebox**

## ICRC PARTNERSHIP UPDATE

The WFSA and the International Committee for the Red Cross (ICRC) formed a partnership in 2015 to help deliver safe anaesthesia for patients admitted to ICRC facilities worldwide.

The ICRC-WFSA Liaison Group reviewed the ICRC's anaesthesia guidelines and an ICRC Anaesthesia Handbook was subsequently published in February 2017.

The ICRC Anaesthesia Handbook provides invaluable guidance for anaesthesia providers working in austere environments. ■



## UNFPA ANAESTHESIA MACHINES

The WFSA is working with the UNFPA to ensure that its tender notices and product descriptions for anaesthesia machines are updated.

This work aims to ensure that the most appropriate anaesthesia machines for low resource settings are sourced.

As there is not universal access to safe or reliable supplies of electricity, oxygen, nitrous oxide or other gases in all facilities around the world, it is essential that anaesthesia machines have the most suitable specifications. ■



## INTERNATIONAL STANDARDS REVISION SUBMITTED TO WHO

The International Standards For A Safe Practice of Anaesthesia are intended to provide guidance and assistance.

They are designed to be utilised by anaesthesia professionals around the world for improving and maintaining the quality and safety of anaesthesia care.

The process for undertaking the latest revision was agreed at the WFSA's General Assembly at the World Congress of Anaesthesiologists in September 2016 and in 2017 the WFSA submitted the revised Standards to the WHO with the aim of co-publishing them for the first time. This milestone was achieved in May 2018. ■



# WORKING TOGETHER

As a Federation, much of what the WFSA does is based on collaborations between our Member Societies. Supporting and connecting our members is at the heart of our Working Together programme and is showcased through our Regional Congresses which take place across the world each year.

## OUR MEMBERS

The WFSA is now made up of 133 Member Societies, representing hundreds of thousands of anaesthesiologists around the world.

It is this huge reach and the diversity of our Federation that makes the WFSA a unique organisation, leading the way in promoting safe anaesthesia and perioperative care on a global scale.

We are very grateful for the engagement, positivity and generosity of the WFSA Member Societies, Board, Council and Committees which have allowed us to continue growing as an organisation and improving anaesthesia in every region of the world. ■



The WFSA Council

At the WCA in 2016 the new Board and Council were officially elected for a four year term.

- Dr Gonzalo Barreiro (President)
- Dr Jannicke Mellin-Olsen (President-Elect)
- Dr Adrian Gelb (Secretary)
- Dr Alan Merry (Treasurer)
- Dr Wayne Morriss (Director of Programmes)
- Dr Berend Mets (Director of Partnerships)
- Dr Daniela Filipescu and Dr Philippe Mavougou were co-opted onto the Board in 2017 and will serve for the calendar year 2018.

## PAST AND UPCOMING CONGRESSES

**The World Congress of Anaesthesiologists (WCA) is the foremost global gathering of anaesthesia providers interested in learning, networking and engaging in open dialogue on important topics in the field of anaesthesia.**

The Congress is held every four years, with the 17th WCA taking place in Prague in 2020. As well as the World Congress of Anaesthesiologists a number of Regional Congresses take place with the support of the Regional Sections of the WFSA. In 2017 regional congresses took place in Sri Lanka, Switzerland, Uruguay, Gabon and Nigeria. ■

In 2018 regional congresses will be held in

- Copenhagen Denmark (Euroanaesthesia)
- Dubai UAE (Pan-Arab)
- Beijing China (AARS)
- Yamoussoukro Ivory Coast (SARAF)







## THE SAFE-T CAMPAIGN

The SAFE-T (Safe Anaesthesia For Everybody- Today) Campaign is a unique network of individuals, and organisations who join together to help promote safe anaesthesia around the world.

2017 was an exciting year for the SAFE-T Campaign, as the SAFE-T Network reach more than 1,000 members while the SAFE-T Consortium of organisations continued to grow.

The WFSA and the Royal College of Medicine (RSM) also announced that the first ever SAFE-T Summit would take place in London in April 2018.

The event will advance the global patient safety agenda by bringing together leading providers from the perioperative team to highlight the importance of working together to address the healthcare challenges identified by the Lancet Commission on Global Surgery. ■

# SUPPORT AND PARTNERSHIPS

The WFSA is extraordinarily grateful to all of our Members Societies, Partners, Donors and Volunteers who supported us in 2017. Their time, money and expertise enables us to continue our mission to improve patient care and access to safe anaesthesia for all.

## GLOBAL IMPACT PARTNERS UPDATE

**Since the WFSA's first Global Impact Partners were announced at the opening ceremony of the WCA, projects with Masimo and the Laerdal Foundation have started successfully.**

Global Impact Partners work with the WFSA to deliver anaesthesia patient safety programmes in a particular country, or countries, where access to safe anaesthesia is particularly limited. Laerdal will focus on SAFE training in obstetric anaesthesia in Bangladesh, Nepal Tanzania and Zimbabwe, whilst Masimo will focus on building the capacity of the anaesthesia workforce in Telangana State, India.

The Laerdal 'Better Births – Safer Births' project trained 258 anaesthesia providers, as well as 55 trainers by February 2018, with all courses to be delivered by March 2018. The Laerdal funding has enabled us to further develop SAFE MØE through the development of questionnaires looking at changes in clinical behaviours and more detailed key informant interviews. It has also allowed us to produce the short film 'Happy Birth Days' which explores the impact of the course from the perspective of a nurse anaesthetist participant.

The Masimo project has seen the development of an Anaesthesia Capacity Development Tool to identify gaps across 4 key areas in Telangana State: Infrastructure, Workforce, Clinical Practice and Resources. Additionally, the first ever Safer Anaesthesia From Education (SAFE) Paediatric Course was delivered in India with 40 anaesthesia providers in attendance. The Knowledge levels of participants increased by more than 20% by the end of the course. Finally, WFSA – Masimo Scholarships have allowed anaesthesiologists from the region to attend anaesthesia congresses. ■

“ In 2016 the Laerdal Foundation became a Global Impact Partner of WFSA for the scale up of the SAFE course. This course in obstetric anaesthesia has already reached thousands of anaesthesia providers. I was very impressed by how nurse-anaesthetists having only taken a SAFE course plus a short subsequent train-the-trainer course, were able to deliver the SAFE course.

**Tore Laerdal, Executive Director, Laerdal Foundation.**



Support from these organisations has enabled the WFSA to expand our vital education and training programmes around the world. We thank these partners for their continued financial support and dedication to safe anaesthesia and global health.



Laerdal Foundation  
helping save lives  
GLOBAL IMPACT PARTNER



GLOBAL IMPACT PARTNER



GE Foundation



PARTNERSHIPS FOR GLOBAL HEALTH



FRESENIUS  
KABI  
caring for life



SmileTrain



CRISTÁLIA  
PRODUTOS QUÍMICOS FARMACÉUTICOS LTDA.



Gradian Health Systems.

Society for Pediatric Anesthesia



education • research • patient safety



Obstetric  
Anaesthetists'  
Association



APA



International Medical Education Trust - Palestine



diamedica

## INDIVIDUAL DONATIONS

**The WFSA is very fortunate to receive donations from generous individuals who recognise the importance of our work.**

We are enormously appreciative of the support given to our Fund a Fellow and SAFE-T campaigns and look forward to continuing our engagement with you in 2017 and beyond. We would like to thank the Alistair Davies Memorial Fund for their generous donation to the Fund a Fellow campaign. ■

[Learn more about our Fund a Fellow campaign](#)

## MEMBER SOCIETIES

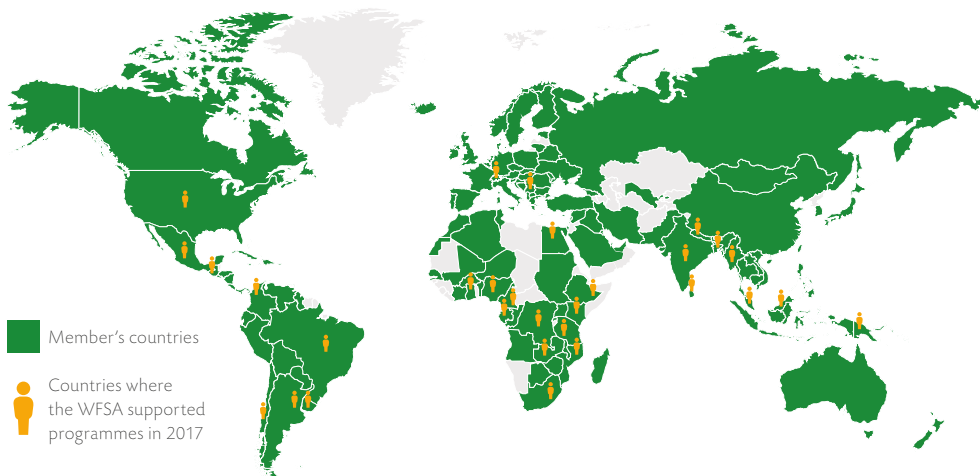
**The support of our 133 Member Societies is essential to our work.**

We are honoured to be able to represent this truly global federation and thank each of our members for investing in your colleagues in low resource settings and in the lives of patients worldwide. ■

## VOLUNTEERS

**The WFSA is supported by an extraordinary network of thousands of volunteers.**

They generously and graciously dedicate their expertise and time to our work year on year. They are the foundation of what we do, and we could not succeed without them. ■



# FINANCE

Conservative estimates of the value of specialist volunteer time utilised by the WFSA mean that WFSA Council and Committee members contribute over \$1,000,000 of professional time each year. In addition, the teachers and mentors at WFSA teaching centres donate an estimated \$2,000,000 in time each year.

## INCOME

WFSA revenue is derived from member subscriptions, interest, investment gains losses and donations.

<b>2017 Revenue total \$1,446,458*</b>		
Membership dues <b>\$447,012</b>	Investments <b>\$299,612</b>	Donations / other <b>\$699,834</b>
<b>2017 Expenditure total \$1,428,189*</b>		
Programmes <b>\$791,800</b>	Staff costs <b>\$398,722</b>	Other mgt <b>\$237,667</b>

## EXPENDITURE

The majority of WFSA's expenditure is allocated across Education, Publications and other grants, as well as support costs such as salaries, legal fees, accountancy, and investment fees.

\*These are non-audited figures. A copy of the audited accounts can be requested from the Secretariat. The value of volunteer time made available to the WFSA is over US\$3m per annum, however this is an estimate and is not included in the accounts.

## RETURN ON INVESTMENT

Conservative estimates of the value of volunteer time utilised by the WFSA mean that the WFSA council and committee members contributed over \$1,000,000 of professional time in 2017.

All programmes are delivered by physicians and trainers who provide their time free of charge and are organised by our Council and Committees, made up of highly experienced and renowned anaesthesiologists, on an entirely voluntary basis. The teachers/mentors at WFSA teaching centres donated an estimated \$2,000,000 in time in 2017.

The WFSA provides a return of over \$10 for every \$1 invested in the organisation by its membership. However the WFSA will need to significantly increase the income derived from subscriptions and donations over the period 2018-2020 to continue to respond to the global crisis in surgery and anaesthesia. ■