

Scottish Government Zambia Development Programme

End of Year 1 Report

1. General Project Information			
1.1	Project Reference Number:	ZAM 1	
1.2	Name of Organisation:	Christian Blind Mission (CBM) UK	
1.3	Lead Partner(s):	Beit Cure Hospital	
1.4	Project Title:	PrevENT: Community ear and hearing care and rehabilitation of disabling hearing loss	
1.5	Reporting Period:	From: 01/10/2017 To: 31/03/2018	
1.6	Reporting Year:	Year 1	
1.7	Project Start date	01/10/2017	
1.8	Project End date	31/03/2021	
1.9	Total Project Budget*	£1,251,578	
1.10	Total Funding from IDF*	£1,251, 578	
1.11	<p>Have you made any changes to your logframe? If so please outline proposed changes in the table below. Please note all changes require Scottish Government approval. If changes have already been approved please indicate this in the table.</p> <p>No changes have been made to the Logframe.</p>		
	Outcome/Output	Proposed /Agreed Change	Reason for Change
	N/A		Date Approved and by whom
1.12	Supporting Documentation Check box to confirm key documents have been submitted with this report	Up to date Logical Framework, which reflects any changes detailed above.	Y
		Up to Date Budget Spreadsheet	Y
		Case Study	N/A
Report Author: [Redacted]		Signature: [Redacted]	

2. Progress and Results

2.1 Please give an update on the progress your project has made during the reporting period. Please use this space to update us on what has gone well and any challenges you have experienced, detailing how you have overcome these. (Max 500 words)

Since receiving funds, this project has made good progress with a number of key activities being achieved in the first six months of the project

Beit Cure Hospital (BCH) recruited a project manager and a project accountant as well as a designated ENT Nurse and Audiology Technician as full time project employees.

A **kick-off workshop** was held at BCH's training facilities to ensure that all key partners and key representatives from the Ministry of Health (MoH) under the directorate of Clinical Services, and the National ENT Coordinator, were fully aware of the impact, outcome and output deliverables of the project from the onset. The MoH pledged total support towards the project and welcomed the first ever roll out of ENT services under the National ENT Strategic Plan (NENTSP). The University of Edinburgh was also present to provide technical expertise on the M&E framework.

Over 500 people attended the **official PrevENT launch** on 28th March 2018 at Kabwe General Hospital (KGH) in Kabwe District. This was an opportunity to raise awareness about the project's objectives and planned activities through free public ENT screening for 300 people. Participants were also sensitised about the PrevENT Project via flyers, banners and role play by the Kabwe School of Nursing student drama group to disseminate information about hearing loss, how to prevent it and reduce its impact. The same message was echoed in the mobile public address announcements. Due to the large number of people who turned up, another screening day had to be arranged at which a further 103 people were seen and treated (please see attached report).

Nine (two female, seven male) clinical officers/nurses were trained in hearing loss identification, treatment of common ear diseases, referral, health promotion and inclusion at BCH in February. Following their training, they each received a diagnostic set. Nine health facilities were equipped soon after the training of the respective officers. The remaining health facilities will be equipped as the trained nurses/clinical officer return back to their duty stations. Previously, the equipment and technical know-how was unavailable in the nine clinics where the trained participants came from

A **national workshop** took place to discuss the operationalisation of NENTSP nation-wide. The workshop developed an implementation plan for ENT human resource development, infrastructure, equipment, transport and consumables, disease control, partnership, collaborations and resource mobilization and Health Management Information System (HMIS) and data management, ensuring that ENT is mainstreamed in the primary health care services in Zambia, a key strategic objective for this project.

Quarterly **provincial meetings** took place to build engagement and buy-in from health decision makers. Collective commitments were made regarding Nurses/Clinical Officers and Community Health Workers' training and selection criterion.

	<p>Due to delays at the start of the project, certain key activities such as the training of the first 20 Nurses/Clinical officers and procurement of basic equipment as well as consumables which were not fully implemented as originally scheduled. An underspend was also incurred (see section 4.2).</p>
2.2	<p>Have you completed all baselines for the project? If not please explain why and describe what plans are in place to ensure these are completed. If you have please ensure these have been added into your logframe. (Max 200 words)</p> <p>Due to the total deficit of Community ENT services in Central Province, no baseline data was to be collected directly against the output indicators in the Logframe.</p> <p>However, baseline data is still being collated consisting of two distinct themes of the training assessment and the Mid-Term Review:</p> <ul style="list-style-type: none"> • Each nurse trained will be asked to complete a pre-test questionnaire on his/her own knowledge/attitude/practice • This questionnaire will be repeated directly after the training and again 1 year after the training • Each nurse will also be asked to interview 10 patients prior to his/her training on their awareness of ear health practice • The nurses will repeat this at one year post Training <p>Mid-Term Review</p> <ul style="list-style-type: none"> • A Review will be undertaken that would aim to capture lessons learned in the first half of the project with specific focus on what recommendations can be drawn from the project to contribute to the National Strategic Plan for Ear Health, which will be revised in 2020. • This review will focus specifically on the challenges, successes, and what the project team and key stakeholders feel are the most pertinent lessons to be translated into the next National Strategic Plan. • The review will take place towards the end of 2019/early 2020 TBC.
2.3	<p>Have you experienced any delays to planned activities? Please provide full details including what action is being taken to bring activities back on track. (Max 250 words)</p> <p>Due to the delays in the funding contract, the following activities are currently planned to be carried out by May-June 2018 without having any impact on the plan for the first quarter activities for Year 2.</p> <ul style="list-style-type: none"> • Training by UoE partners (ZUKWHA) in audiology has to be postponed to Year 2 due to the priority of getting project set up (£2,212) • Due to delays in start-up, timing issues and availability of trainers meant that 9 out of original nurses/clinicians were able to attend the first scheduled training. The remaining 11 trainees are scheduled to undergo their training in the first quarter of Year 2 (£4,572 plus T&S costs) • Community Engagement (£1,560) been deferred and will be synchronized with Training of Community Health Assistants

- Due to delays in implementation, field visits to health clinics and communities are delayed to first quarter of Year 2 (£1,230)
- Workshop with training institutions (£2,080)
- Audit was not carried out as project had only just started – Year 1 will be jointly audited along with Year 2.
- Procurement of furniture, equipment and books for the Training Centre costing (£7,170) and procurement of ENT supplies primary level per unit equipped (£1,310) delayed due to lack of funds at beginning of project
- In-country overheads/office costs request to be carried over due to need to finalise cost-share policy with BCH

2.4 Project Outcomes

In the table below, please list each of your project Outcomes, and provide further detail on your progress and results over this reporting period. Describe any delays or other challenges that you have experienced and how these have been addressed, and provide information about any unexpected results (for example where targets have been vastly exceeded). Progress should also be updated within the relevant fields of your log frame.

Outcome:

Community related PEHC services are established as part of the ENT National Health Operational Plan

Outcome Indicator	Milestone / Achievement	Progress
1. Number of consultations for people with, or at risk of, hearing loss to receive diagnostic, treatment and rehabilitation by trained hearing aid technicians	N/A	N/A
2. Number of consultation of people with ENT conditions seen by nurses trained	Not achieved due to delay in training	We envisage that the trained Nurses/Clinical Officers would commence patient screening starting April 2018.

2.5 Project Outputs

In the table below, please list each of your project Outputs, and provide further detail on your progress and results over this reporting period. Describe any delays or other challenges that you have experienced and how these have been addressed, and provide information about any unexpected results. Progress should also be updated within the log frame

Output 1

National and provincial health authorities and relevant CSOs coordinate their efforts towards an effective roll-out of community oriented PEHC services

Output Indicator	Milestone / Target	Progress
------------------	--------------------	----------

1.1 Number of provincial coordination events with National ENT Planning Office	4 Provincial Meetings Held 1 National workshop conducted	4 Provincial Meetings Held 1 National workshop conducted
1.2 No of radio advertisements and events at outreach clinics in public areas to raise and generate public awareness	1 radio advertisement	1 Radio Advert was aired 20 times to sensitise and inform the community about ENT health care services that were going to be provided during the PrevENT project public launch 1 Television appearance
1.3 Mid-level medical staff developed recommendation on how to improve qualification around ENT and PEHC	0 meeting held	Due to delays, meeting with Training institutions postponed to Y2.
Output 2 Adequate services and qualified workforce for community level PEHC services in the Central Province are available		
Output Indicator	Milestone / Target	Progress
2.1 100 Nurses/clinical officers from Kabwe, Chibombo and Kapiri Mposhi districts have been trained in hearing loss identification, management of common ear diseases, referral, health promotion and inclusion (PEHC intermediate) and other ENT conditions at Beit Cure Hospital	20 Nurses/Clinical Officers Trained	9 Nurses/Clinical Officers Trained. The project will catch on this result area. The number of clinical officer/nurses per training session will increase. The project aims to catch up in first half of Year 2.
2.2 Health facilities within the Central Province have been equipped with necessary equipment to provide ear and hearing care services	20 Health facilities equipped soon after the training of the respective officers	9 Health facilities equipped soon after the training of the respective officers. The remaining health facilities will be equipped as the trained nurses/clinical officer return back to their duty stations. The project aims to catch up in first half of Year 2.
3. Operational plans and partnerships		
3.1	Are all staff required to deliver the project now in place? If not, please explain	

	<p>what action you are taking to ensure all essential roles as outlined in your application, are in place as you move into year two of the project. If plans for staffing has changed, please tell us about this. (Max 200 words)</p>		
	<p>The project planned to recruit a Project Manager, Project Accountant, ENT Nurse and Audio Technician. All these have been engaged and already assisting in implementing the project.</p> <p>The plan is to further train 20 nurses/Clinical Officers as well as 60 Community Health Workers (CHWs). These will be assisting the aforementioned project employees in executing planned activities. During the reporting period a total of 9 out of 20 officers were trained and have already been equipped with basic instruments to commence screening people with ear and hearing difficulties within and around health facilities where they work. In addition, CHWs once trained in May and June 2018, will assist in the promotion of primary ear and hearing healthcare at community level.</p>		
3.2	<p>Are all partnerships on the project now in place? Please update on how these partnerships are progressing, letting us know about any highlights, challenges or changes to roles and responsibilities. (Max 300 words)</p>		
	<p>The principal partnership is between CBM and BCH, with strong support from the MoH in Zambia. This collaboration has already started bearing fruit as was evidenced by the successful hosting of the public launch/ear screening which was a joint effort. A great team spirit has also been exhibited in the nomination of Nurses/Clinical Officers and their subsequent training. There has also been very positive engagement with the University of Edinburgh who attended the kick-off workshop.</p> <p>The PrevENT key partners also took the opportunity to meet with representatives from the Scottish Government International Development team while they were visiting Zambia in January and February, presenting the project's work to the Minister for International Development, Dr Alasdair Allan, and meeting with other grantees awarded this fund.</p>		
3.3	<p>Have any visits to the project taken place in this period? Please give details including key activities and outputs of these visits.</p>		
	<p>Date of Visit</p>	<p>Key achievements / outputs of visit</p>	<p>Follow up actions</p>
	<p>07/01/2018</p>	<p>Successful initial meeting with Ministry of Health District Officials</p> <p>The meeting resolved on a number of issues that included the following:</p> <ul style="list-style-type: none"> • Numbers of trainees each district was meant to nominate • Proposed date of the next quarterly meeting 	<p>Continuation with meetings</p>
	<p>16-19/01/18</p>	<p>Kick off workshop attended by CBM UK PM, CBM Regional and Zambia Country Office, National ENT Coordinator and representatives from the MoH.</p>	<p>Project Implementation</p>

05/02/2018	A follow-up quarterly meeting was successfully held	Selection of nurses/clinical officer to consider gender balance
28/03/2018	<ul style="list-style-type: none"> • PrevENT project public launch conducted in Kabwe • Screened at least 300 patients 	A follow-up screening session was conducted on the 3 rd of April and a further 103 people were seen and treated.

Financial Information

This section will be reviewed alongside your end of year financial report, which must be included with this report. Please ensure an explanation for any variance to planned expenditure is provided against each budget line in the space provided in the budget spreadsheet.

4.1 If your spending is not on track as expected, please outline the reasons why, and detail what plans are in place to bring spending back on track. If you are requesting changes to your budget at this stage, please outline them below. (Max 350 words)

A total underspend of £44,216 has been incurred. Of that, £29,767 are delayed activities to be carried over to Year 2. The remaining training and procurement of equipment has been rescheduled to the beginning of Year 2 (see 2.3).

There is also an actual underspend incurred of £14,449 due to the delay in the start of the project with certain costs not being able to be carried over such as staff salaries and annual audit. The below request summarises how we would like to re-profile this underspend for the benefit of the project:

- 1. Training and equipment for an additional 5 nurses/clinical officers (£8,380)** Required at Kabwe General Hospital due to the high referral rate in Kabwe District. Would increase total target to 105 nurses/clinicians.
- 2. Transport refund for 4 planned sensitisation visits/CHW per month (£1,423)** to increase awareness in rural areas and referral opportunities
- 3. Top-up on outreach district visits (£1,604):** Hold quarterly clinics at district level to screen large amounts of patients in one location.
- 4. Provision of data-bundle for Audiology Technician Student at BCH (£593).**
- 5. Top-up on BCH Cleaning, Telephone and Electricity in country running costs (£1,810)** - originally under-budgeted
- 6. Travel for 20 nurses/clinicians (line 43 T&S Y1) (£639)** - Due to an omission in the original submission of the budget this amount was not included.

TOTAL: £14,449

Costs are total per items. A more detailed breakdown is available.

5. Any other Information

Please use this section to tell us any other relevant information regarding your project. (Max 350 words)

Given the strategic project location, the launch of PrevENT has already triggered

opportunities for similar developments in other Provinces of Zambia. This is in close conjunction with the National Coordinator for ENT and supported by CBM Federation and additional donors and following this sustainable training model. Not only will it contribute towards the geographical expansion of Primary Ear and Hearing care and ENT service coverage but it will also contribute towards a strengthening and deepening of ENT services. By piloting these services at community level, the project will enable further developments on secondary and tertiary level as specialist services strengthen a network of services and human resources qualified at primary level.

In addition, it has been agreed by the Scottish Government that due to the error in the Master budget in TAB 6 Travel and Subsistence lines 57 (ZUKWHA Partner visit Zambia end of project) and 58 (BCH partner visit UK End of project), the costs allocated for these two lines in Y2 in line 57 (£140) and line 58 (£140) will be reallocated into the Y2 budget line on Stationery (In country running tab). This reallocation will be repeated in Y3 and Y4 for line 57 and Y3,4,5 for line 58.