

**Scottish Government International Development Programme
End-Year Report**

1. General project information		
1.1	Project reference Number	
1.2	Name of organisation	Scotland Malawi Mental Health Education Project
1.3	Lead partner(s) organisation	College of Medicine, University of Malawi Ministry of Health, Government of Malawi Department of Psychiatry, University of Zambia
1.4	Project title	Consolidating Psychiatry Malawi Zambia
1.5	Reporting period	From: 01/04/2019 To: 31/03/2020
1.6	Reporting year	2
1.7	Project start date	1/11/2018
1.8	Project end date	31/1/2020
1.9	Total project budget*	£185,750
1.10	Total funding from Scottish Government*	£185,750
1.11	Provide a brief description of the project's aims, highlighting which of the Sustainable Development Goals (SDGs) your project is working towards? (200 words)	<p>This project will consolidate the achievements of the existing Scotland Malawi Psychiatry Capacity Development Project (SMPCDP); improve the quality of care in clinical teaching environments; and develop a Malawi-Zambia mental health link. Specifically, to:</p> <ol style="list-style-type: none"> 1. Support psychiatric hospitals in Malawi and Zambia to develop appropriate standards of clinical care, through standard-setting and audit, with workshops in quality improvement (QI) and reciprocal visits to each other's services. 2. Standardise and improve existing teaching materials (particularly e learning) for use by postgraduate trainees in Malawi and Zambia; conduct workshops in Curriculum development and Teaching methods 3. Continue support for undergraduate teaching at COM, Malawi
2. Project progress and results		
<p><i>Please use this section to give an update on the progress the project has made during this reporting period.</i></p>		

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2.1	<p>Provide an update on the progress your project has made over the past 12 months. 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)</p> <p>The Project aims to develop a body of appropriately trained psychiatry specialists and other cadres in Malawi and Zambia, with a peer support structure and the skills to improve government mental health services, by developing and enhancing clinical services and teaching. Achieved through 3 work-streams: (1) QUALITY IMPROVEMENT, (2) MMED CURRICULUM DEVELOPMENT, TEACHING and E-LEARNING RESOURCE DEVELOPMENT, (3) UNDERGRADUATE TEACHING IN MALAWI</p> <p>(1) Up to March 2020: Project staff recruited in Malawi. QI training and activities conducted. Project leads and coordinator trained in QI methodology by NES in Scotland. Two day QI workshops in both Malawi and Zambia, with expert input from NES. QI projects ongoing in both Zomba Mental Hospital, Malawi and Chainama Hills Hospital, Zambia.</p> <p>(2) Up to March 2020: review of postgraduate curricula and e-learning resources conducted. Internal curriculum development meeting held at COM. Malawi/Zambia curriculum development workshop held Oct 2019. M.Med. curriculum being revised as a result in collaboration with COM. Curriculum revision substantially complete. E-learning materials reviewed, editing tasks identified and editing under way.</p> <p>(3) Progress as expected. Up to March 2020: SMMHEP volunteers taught mental health knowledge and skills to 120 medical students</p>
2.2	<p>Has the focus or plans for delivery changed significantly during the last year? Please highlight what issues or challenges prompted this change and how you anticipate any changes in focus will impact on the previously agreed outcomes (Max 500 words)</p> <p>No significant changes, until outbreak of Coronavirus pandemic in March 2020. (See separate Impact Assessment and Covid 19 Report)</p> <p>The project was due to run 2 years from Nov 2018-20. Some activity and spending on the undergraduate teaching component commenced on receipt of funding in Nov 2018. However, the bulk of activities started in January 2019; in the light of this start date, we requested that the project run until January 2021 to allow completion of planned activities. The COVID19 situation likely to have further impact.</p>
2.3	<p>Taking into consideration what you have achieved during the last 12 months, along with any challenges you have experienced, please highlight to us what lessons you have learned, and how these will be applied in the project in the future. (Max 500 words)</p> <p>The key lesson has been the need to include a broad range of mental health professionals in the project, and to clarify the log-frame and budget to ensure that the Malawian administrative support has clear processes to work to.</p> <p>A further lesson is the difficulties of working across 2 countries (Malawi and Zambia). Future projects involving our Zambian partner would benefit from further relationship building and programmed monitoring visits.</p>
<p>3. Partnerships and collaboration</p> <p><i>This section allows you to discuss how partnership working is progressing on the project, as well as wider collaboration and sharing of learning.</i></p>	

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3.1	Provide an update on how partnership working has gone in the past 12 months. Let us know about any highlights, challenges or changes to roles and responsibilities. (Max 350 words)	
	Partnership working with COM has gone well. COM has helped facilitate curriculum development meetings and has been very supportive of volunteers undertaking UG teaching. Our Zambian COM partners have joined in joint QI and Curriculum Development workshops and ongoing QI and curriculum development work.	
3.2	Have any Scotland-based staff visited the project in the past 12 months? Give details including key activities and outputs of these visits.	
	September- October 2019. Dr M Osborn visited to review project progress, support volunteers and participate in Curriculum Development Workshop. Dr Douglas Blackwood visited to support volunteers and assist with UG teaching in December 2019.	
Date of visit	Key achievements / outputs of visit	Follow-up actions
September- October 2019 [Redacted] (NB Trustee, not staff)	UK input into Curriculum Development Workshop; supervision of ongoing curriculum work by long-term volunteer. Supervision of Project staff; liaison with COM re future teaching programmes.	Continued involvement in supervising curriculum development work. Continued support to COM staff.
December 2019 [Redacted] (NB Trustee, not staff)	UG teaching; volunteer support	
3.3	Please tell us about any dissemination and learning throughout this reporting period. How have you promoted effective learning across the project? Please explain what processes you have used both internally and externally to share learning from the project so far, and how this learning is being used. (Max 500 words)	
	The project activities are disseminated on the SMMHEP website and Facebook page. SMMHEP also advertises its activities through the Voluntary and International Psychiatry Special Interest Group (VIPSIG) of the Royal College of Psychiatrists. In Malawi, we disseminated lessons learned so far at the Malawi Mental Health Research and Quality Improvement Conference in June 2019.	
3.4	Has the project completed a mid-term project evaluation in the past 12 months (or is one planned for the next 12 months)? Please provide detail of the outcome of the evaluation. (Max 500 words)	

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	Yes. The Project is going as planned, but note some issues regarding monitoring of QI activity in Zambia.
3.5	Please highlight how you are maintaining an awareness of others working in this region, giving details of collaboration, joint working or partnerships with others. (Max 500 words)
	Meetings in Zambia and South Africa. Research collaborations and discussions with eg AMARI, MEIRU, MRF. Malawi Mental Health Research and Quality Improvement Conference in June 2019.
4. Safeguarding and fraud	
<i>Please ensure you complete questions 4.1 and 4.2 even if you have no incidents to report.</i>	
4.1	Have there been any safeguarding incidents, either relating to staff/volunteers or beneficiaries of the Grant or the Project, in the last 12 months?
	No
4.2	Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom?
4.3	Describe what action has been taken, and highlight any lessons learned.
4.4	Have there been any incidents in the last 12 months of financial mismanagement, theft, fraud etc, either relating to the Grant or the Project or which affects the organisation?
	No
4.5	Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom?
4.6	Describe what action has been taken, and highlight any lessons learned.

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5. Risk assessment			
5.1	<p>Have any issues materialised during this reporting period? If so, how were they addressed?</p> <p><i>Please refer to risk assessment provided at application stage.</i></p>		
Assumption	Risk	Action taken	Was this included in the Risk Assessment Table in your application?
Volunteer teachers may fall ill in Malawi	Viral Pandemic	Visits of volunteer teachers cancelled in March 2020. Long-term volunteers repatriated 1 March 2020 QI activities suspended; this part of the Project repurposed to monitor and support mental health responses to pandemic. E learning development continuing in UK.	Risk of individuals becoming ill was included; global pandemic was not.
6. Inclusion & accountability			
<p><i>Thinking specifically about the past 12 months, please use this section to tell us how you are mainstreaming through your project, ensuring that you are aware of and actively working to reach vulnerable and marginalised groups.</i></p>			
6.1	<p>Is the project still relevant for the beneficiaries you are working with? Please highlight how you ensure accountability on the project, ensuring beneficiaries have the opportunity to feedback on the project and influence its development? (max 350 words)</p>		
	<p>All aspects of the Project remain highly relevant.</p> <p>The QI Project leads in Malawi and Zambia are working with clinical staff groups. QI projects are selected by discussion with and agreement of staff.</p> <p>Medical undergraduates give feedback at the end of every teaching block. The HOD meets them to discuss their views about, and their experience of their teaching programme.</p> <p>The E learning has not yet been disseminated to staff groups but we expect the current MMed trainees to be involved in its evaluation and further development.</p>		

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6.2	Do you have an awareness of particularly vulnerable or marginalised groups within the community in which your project is working? Please give details on how you are disaggregating data to recognise these groups across the project. (Max 350 words)
	<p>The QI part of the Project is working to improve standards in mental hospitals in Malawi and Zambia. The psychiatric patients who will benefit from the QI work are among the sickest and most disadvantaged groups in the country. QI data will measure outcomes for this group.</p> <p>Training medical students and postgraduates likewise aims to benefit the mentally ill in Malawi, who are one of the country's most vulnerable and marginalised groups. Directly measuring the benefit to this group is beyond the scope of this Project. Indirect measures, such as medical student attitudes and expressions of interest in Psychiatry as a career, will be used as proxy measures</p>
6.3	How is your project working to actively meet the needs of these vulnerable and marginalised groups, ensuring they are benefiting from the project? Please outline any mechanisms you are using. (Max 350 words)
	See 6.2
6.4	Taking into consideration some of the challenges of mainstreaming, please describe any challenges you have faced in reaching vulnerable and marginalised groups, how you have overcome these or plans you have developed to support inclusion on the project. (Max 350 words)
	See 6.2
7. Financial information	
<p><i>This section will be reviewed alongside your budget report, which should be included alongside your narrative and logframe. Please ensure this spreadsheet is completed with both a detailed breakdown of expenditure for this financial year, along with your projected spend for the next financial year.</i></p> <p><i>Please note carry-over of funds to the next financial year should have been agreed with the Scottish Government by January 31st of the current financial year.</i></p>	
7.1	With reference to your budget spreadsheet, please give a detailed explanation of any variances between planned and actual expenditure, including reasons for the variances and whether these are as a result of timing issues, price achieved, quantity etc. If these are temporary variances, please outline plans for expenditure. (Max 500 words)
	The e-learning resource development is behind schedule so costs for UK input to e-learning and other resource development and IT technicians costs are underspent but this spend will take place as activity is still planned. We had an overspend on Admin salary as she was paid 2 days /week from this grant by COM rather than 50/50 with SMPCDP. Apprarrnt underspend on salaries for lead and coordinator are result of COM claim being on the grant being delayed. Re running costs we had underspend on rent and utilities but costs for security and cleaning were higher than we had budgeted. There were higher

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salary and upkeep costs than predicted. Re flights and other costs, fares regionally were more than expected. Similarly the meeting costs were higher than budgeted. Vehicle maintenance costs were higher than expected. All these overspends were met by the large saving arising as volunteers psychiatrists from UK visit Malawi to teach at COM for 3-6 weeks are allocated £500 toward their costs but many do not claim this as a **donation** to the project. Total amount of true underspend **£7339.85**. We request that this be repurposed to cover predicted shortfalls in areas that have been more costly than expected. This will allow us to maintain the successful smooth running of the project through academic year 20-21. (This plan is dependent on impact of the COVID 19 situation on whether COM opens for new academic year, and safety/feasibility of volunteers travelling. We keep this under regular review and will discuss with SG as needed.)

	Year 3 budget currently in grant	Predicted spend (based on year 2 experience)	Shortfall to be met from underspend
SMMHEP volunteers House costs	6416	12000	6084
Local volunteer travel (car repairs, servicing etc)	1167	2400	1233
			£7317

7.2 Please give details of any capital expenditure in this reporting period. (Max 350 words)

Laptop, laptop bag and software for Project Manager,

7.3 Please explain how you have worked to ensure cost effectiveness on the project in the past 12 months, whilst maintaining the quality of delivery. (Max 350 words)

SMMHEP has no employed UK staff. Volunteers psychiatrists from UK visit Malawi to teach at COM for 3-6 weeks are allocated £500 toward their costs but many do not claim this as a **donation** to the project.

8. Any other information

Use this section to tell us any other relevant information regarding your project. (Max 500 words)