

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

1. General project information		
1.1	Project reference Number	ZAM6
1.2	Name of organisation	The Big First Aid Project
1.3	Lead partner(s) organisation	First Aid Africa Zambia
1.4	Project title	First Aid & Renewable Energy (FARE)
1.5	Reporting period	From: 01/04/2019 To: 31/03/2020
1.6	Reporting year	3
1.7	Project start date	October 2017
1.8	Project end date	March 2022
1.9	Total project budget*	£780,161
1.10	Total funding from Scottish Government*	£780,161
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><input type="checkbox"/> GOAL 3: Good Health and Well-being. We will provide direct first aid training to at least 4000 people, and provide learning resources for another 20,000. We will ensure that over 30,000 people will be able to use local hospitals with reliable renewable electricity sources.</p> <p><input type="checkbox"/> GOAL 4: Quality Education. We will work with world-leaders in our sector like the WHO to ensure that quality first aid education is provided to our partner communities. Each of our trainers will having completed at least 60 hours of supported training before they interact with our partners.</p> <p><input type="checkbox"/> GOAL 5: Gender Equality. We will monitor attendance at our training courses in real-time using our MEL app to guarantee a 50:50 gender split among course participants. At least 2000 women will benefit from direct emergency healthcare training under this programme.</p> <p><input type="checkbox"/> GOAL 7: Affordable and Clean Energy. We will provide high quality solar systems to three hospitals, guaranteeing clean energy for over 10,000 people each year.</p>

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		<p>With our partners Renovagen, we will procure and operate Africa’s largest mobile solar array.</p> <p><input type="checkbox"/> GOAL 11: Sustainable Cities and Communities</p> <p>We will work with the Ministry of health to train first responders at 10 hotspots (identified by Government statistics) for road traffic safety.</p> <p><input type="checkbox"/> GOAL 13: Climate Action</p> <p>We will take action to ensure that, to the best of our ability, this project is net Carbon neutral. We will provide renewable energy solutions at hospitals, reducing the need for diesel generators.</p> <p><input type="checkbox"/> GOAL 17: Partnerships to achieve the Goal</p> <p>We will share our learning at conferences but also disseminate our work through traditional and non-traditional media.</p> <p>We will work with world-leaders and local stakeholders to ensure that over 30 partner organisations benefit from our work under this programme.</p> <p>We will collaborate with Universities, Government, NGOs, and the Private sector to achieve our targets.</p>
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2. Project progress and results

Please use this section to give an update on the progress the project has made during this reporting period.

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>Working alongside the Ministry of Health, the World Health Organisation and our partners in Zambia, we have provided high-quality community first aid training across the country, prioritising incident hotspots identified by the Disaster Management and Mitigation Unit under the Vice-President’s office.</p> <p>Starting in Zambia’s Central Province and the capital Lusaka, we have provided capacity building training for the Police, Fire and Road safety officers, with venue costs and staff time being covered by the Ministry of Health.</p> <p>This training was developed in partnership with leading international experts and, as with all First Aid Africa training, courses were certified by the Ministry of Health.</p>

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“The Ministry fully recognizes and supports First Aid Africa’s quest to professionally train our communities in First Aid. It is my considered hope that together we will improve the outlook of emergencies in Zambia.”

Hon. Dr. Chitalu, MP, Minister of Health (Government of the Republic of Zambia)

This year the partnership reached more community members than ever before, and achieved a gender balance of 51% to 49% (male to female) beneficiaries across all practical training sessions.

While significant challenges were presented during the outbreak of COVID19, the partnership has taken strong steps to mitigate these and has been an active responder to the crisis, due to strong links with the government and private sector.

Specific challenges are listed in response to other questions in this form but key issues included having to postpone our mid-year external review under our MEL plans, and not being able to implement many of the plans scheduled for March 2020, which included activities such as large-scale conferences.

Distribution mechanisms and supplier arrangements, for example, which would previously have been used only first aid equipment, can now be used to support organisations with PPE and other items.

Our new website www.firstaid.co.zm has been successful in promoting the work of the partnership but was late to launch this has impacted the number of online learners who could utilise the services within the past year. We expect this to increase significantly in the coming year.

The partnership has taken steps to ensure continued professional development of staff, providing WHO Psychological First Aid training through the instruction from the head of mental health services at Zambia National Public Health Institute.

Our mobile solar units, which previously were being used to for disaster simulation and emergency response planning, are now being utilised in the fight against COVID19. www.fastfoldenergy.com

One of the three units installed units at hospitals in Chitambo district has had problems following storm damage this year. Working with a leading Zambian solar engineer additional training will be provided for staff at the site in May, with upgrades made to the system, including protection from future damage, and installation of remote monitoring system to check performance levels.

2.2	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
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	<p>changes in focus will impact on the previously agreed outcomes (Max 500 words)</p> <p>We have had to take steps to mitigate the impact of COVID19, including ensuring that staff in our partner organisations can work from home.</p> <p>The provision of mental health first aid support by qualified members of the partnership alongside our physical first aid courses is something we are now looking at closely with the World Health Organisation and Ministry of Health in Zambia, in line with Scotland's leading role in supporting Global Wellbeing.</p> <p><i>"We must prevent and treat mental health problems with the same commitment, passion and drive as we do with physical health problems."</i></p> <p>Maureen Watt MSP</p> <p>The COVID19 outbreak had a negative impact on the first quarter of 2020, leading to challenges in completing some activities. Overall, we were ahead of schedule on many outputs based on our initial agreed outcomes and the effect of COVID19 can be mitigated based on the guidance in our risk register.</p> <p>Further, the closure of many businesses and the broader economic impact of the shutdown have both taken their toll on our social enterprise plans, with partners unable to run training for the private sector during this period. A key lesson here is that if this project had been a strictly for-profit business, in this comparatively early stage of its development, it would not have survived this sudden indefinite economic downturn.</p> <p>To prepare for true sustainability beyond the end of this grant, we will need to redouble our efforts with our partners to build healthy reserves if we are to mitigate the impact of future economic challenges.</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>We have been delighted with the on-going support from the Ministry of Health in Zambia and hope to utilise this relationship to be a useful and proactive cooperating partner in the months and years ahead.</p> <p>Online learning will likely become a higher priority for us in the coming months, with less training taking place face to face due to restrictions around COVID19</p> <p>We learned that our local partners were able to work primarily from home provided that we offered some basic technical assistance, this may offer us additional opportunities to be flexible with colleagues in the future, where working from home may be preferable.</p>

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Like many organisations, we did not anticipate the outbreak of a pandemic when drafting our initial plans, and though we've been able to utilise our partnerships to help respond to the outbreak, it would be disingenuous to suggest that this hadn't had an impact on our numbers (based on our original log-frame) this year.

Large, and important aspects of the project, such as our mid-year review, were not able to go ahead, and this will mean we have to include it in the coming year at the same time as catching up with work postponed due to the pandemic.

We are actively working with the Ministry of Health to help develop processes for safer training under the "new-normal" the country will face when it opens up in the coming months, and we are making the necessary adjustments to our training protocols.

3. Partnerships and collaboration

This section allows you to discuss how partnership working is progressing on the project, as well as wider collaboration and sharing of learning.

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)

CEO was elected as Vice-Chair of the Business Emergency Taskforce (alongside Professor Oliver Saasa as chair) set up to respond to the COVID19 response, linking the existing partnership with 300 members of the business and health community from across Zambia.

We are working with three Zambian Universities to develop First Aid Africa teams on-campus, following a partnership with University students from five Scottish Universities earlier in 2019. Communication on these plans continues despite Universities closures during the COVID19 outbreak.

We have stepped up our cooperation with the Ministry of Health, signing an updated MoU as we agreed to provide authorised First Aid training on the Ministry's behalf in partnership with the national head of emergency medicine.

As we have an active small-grant from the Scottish Government in Malawi, we bought colleagues from Zambia and Malawi together this year to undertake MEL training and to upgrade their First Aid training skills under a senior trainer from the Scottish Ambulance Service "Special Operations Response Team"

The partnership is also producing unexpected benefits in the development of specialist courses for different sectors here in Zambia.

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	<p>Case study 1: Our first aid for national park rangers and anti-poaching units has been utilised by Game Rangers International</p> <p>Case study 2: Our instructors have developed an aviation medicine first aid course under the Zambian Civil Aviation Authority, making this the first Zambian company to be able to provide services for the industry as it is currently outsourced to South Africa.</p> <p>Case study 3: The Ministry of Health supported Our community first aid responder course and our instructors were given WHO Instructor certification for this course.</p> <p>We picked up our partnership with the staff at Chitambo hospital, which had previously faced challenges around communication. We were delighted to see opportunities to install remote monitoring systems for their solar installations and agreements to participate in future upkeep training for these systems in Lusaka next year.</p>	
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.	
Date of visit	Key achievements / outputs of visit	Follow-up actions
January 2020 [REDACTED] – Special Operations Response Team (SORT) Scottish Ambulance Service	Professional capacity building for partners in Zambia and Malawi Upgraded training qualifications for instructors in Malawi & Zambia.	Working group created to support south-south learning between partners in Malawi and Zambia, as well as ongoing mentorship from senior Scottish Ambulance service staff member.
January 2020 & Ongoing Sam Abrahams	Building relationships with Zambian government and local partners. Zambian MoH now part funding First Aid Africa training through provision of venues and staff time.	Contributing to development of new WHO course Supporting the MoH and Private response to COVID19

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James Dyer – June 2019	Development of anti-poaching first aid training including ballistics injury and evacuation.	Course content is being used to create a pan-African standard for rangers and anti-poaching patrols.
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)	
	<p>We created a WhatsApp group to share information on our work with other Scottish Government IDF grant holders.</p> <p>We presented our work in the national media on television, radio and print media across Zambia.</p> <p>We shared our learning with the World Health Organisation under their Emergency Care framework.</p> <p>We met with Scottish Government Cabinet Secretary for Communities, Aileen Campbell MSP and attended the Social Enterprise World Forum in Ethiopia to share our experiences in social enterprise for international development at the United Nations Africa hall.</p> <p>We invited partners from Malawi (small-grant funded project) to Zambia to share South-South learning on their experiences delivering first aid to nursing students.</p> <p>We created a comprehensive risk register in the advent of the COVID19 outbreak and shared with the Scottish International Development Alliance.</p> <p>We shared up to date information from Zambia with civil servants in Scotland so decisions could be made on the basis of strong local evidence.</p> <p>We hosted partners from other Scottish Government funded projects, like On Call Africa, and worked with them to link them with reliable partners in Zambia.</p> <p>We hosted <i>events</i> for other Scottish Government funded projects like the Heriot Watt University MBA Scholarship.</p> <p>We provided feedback to a pan-African initiative to standardise emergency training for Anti-Poaching units</p>	
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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	<p>A mid-term external project evaluation was planned for March 2020 but has been delayed to later in the year due to the COVID19 outbreak. This has been budgeted for and is noted as delayed spend on our finance report.</p>
3.5	<p>With reference to Q39a & 39b in your original application form, 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)</p>
	<p>We worked with the World Health Organisation Africa office and communicate with colleagues in other countries regularly. We participate in international calls and present our work with others.</p> <p>We utilise our links with Heriot Watt University and their alumni team at Watt Club Zambia to enhance links between Scotland and Zambia.</p> <p>We regularly share our work with other emergency response organisations, through the emergency medicine department at the Ministry of Health, as we agreed to do under Q39a and 39b of our original application.</p> <p>We make our learning resources free to access to encourage collaboration using our open source mobile application on Google Play and The Apple App store.</p> <p>We made our resources available in three Zambian languages to ensure they could be accessed by marginalised groups and non-English speakers.</p>
<p>4. Safeguarding and fraud</p> <p><i>Please ensure you complete questions 4.1 and 4.2 even if you have no incidents to report.</i></p>	
4.1	<p>Have there been any safeguarding incidents, either relating to staff/volunteers or beneficiaries of the Grant or the Project, in the last 12 months?</p>
	<p>No</p>
4.2	<p>Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom?</p>
	<p>N/A</p>
4.3	<p>Describe what action has been taken, and highlight any lessons learned.</p>
	<p>N/A</p>

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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?		
	N/A		
4.6	Describe what action has been taken, and highlight any lessons learned.		
	N/A		
5. Risk assessment			
5.1	Have any issues materialised during this reporting period? If so, how were they addressed? <i>Please refer to risk assessment provided at application stage.</i>		
Assumption	Risk	Action taken	Was this included in the Risk Assessment Table in your application?
Please see comprehensive risk register and mitigation attached.			
6. Inclusion & accountability			
<i>With reference to question 38 in section E of your original application and 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>			

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6.1	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>The advent of COVID19 has meant that people in Zambia are much less likely to access healthcare institutions. First aid becomes even more important in these situations, where the immediate response to physical trauma may be the only treatment people are willing to access.</p> <p>We work with informal workers, community leaders, and the private sector, as well as directly with Government to ensure that our work in Zambia is responding to direct needs. Our partners meet every Monday and Friday to discuss opportunities, feedback, and actions on the project.</p> <p>Some of this feedback led to additional training on mental health first aid as our team became more aware of the mental trauma people are facing alongside the physical element.</p> <p>Members of the Red Cross emergency response team, who dealt with the aftermath of the London Bridge terror attack, and the Grenfell Tower fire, are working with us alongside local experts (pro-bono) to help us respond to the COVID19 outbreak by ensuring that our services are relevant and appropriate.</p>
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>We provide training for community groups in low-income and high-density areas.</p> <p>We disaggregate our training data to ensure that our gender balance remains as close to 50:50 as possible.</p> <p>We provide our training resources in three languages to ensure that non-English speakers have equal access to our services.</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)
	<p>We provide additional training modules to instructors to ensure protection for children and vulnerable adults as part of our work, and have trained the Victim Support Unit at the Zambia Police service.</p> <p>Where someone requires mental health support, we signpost to other organisations we are working with under the Zambia Wellbeing Alliance. Our staff are trained in Psychological First Aid under the Zambia National Public Health Institute using a</p>

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	<p>WHO Africa approved course.</p> <p>We also have an on-going dialogue with community representatives from low-income areas throughout the year to learn how we can understand the expectations and requirements of our partners and beneficiaries.</p>
6.4	<p>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)</p>
	<p>Accurate translation of meaning in medical training is important, and we learned how complicated this was when launching the Zambian versions of our mobile phone app.</p> <p>We couldn't simply translate word by word, and so instead had to spend a significant period of time working with indigenous speakers, translators, Zambian colleagues, and first aid instructors to ensure that we were able to best reach those who needed our training but weren't English speakers.</p> <p>As noted in our last narrative report (mid-year), we delayed the launch of some services in order to ensure they were inclusive. This has led to lower numbers under outcome indicator 1.1 and <i>output</i> indicator 1.1 for this particular year but provides us with a stronger and more inclusive foundation to build upon for the remainder of the project and beyond.</p>
<p>7. Financial information</p> <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	<p>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)</p>
	<p>Some activities planned for the fourth quarter of the year (under output 2 and 3) were hit hard by the outbreak of COVID19 and this led to our highest true underspend (£25,757) and delayed spend (£22,057).</p> <p>The delay caused to the implementation of a proposed Scottish Ambulance Service project also meant that the rental costs of our training and office compound were</p>

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not covered under this project.

This didn't mean that the compound was underutilised however, as it gave us capacity to provide additional value by hosting other Scottish Grant Funded projects (reducing accommodation and event hosting costs in those projects). These included supporting visitors to On Call Africa, WHO, AFEM, and the Heriot Watt MBA Scholarship programme.

We continue to struggle with high local transport costs within Zambia. While the overspend represents less than 0.3% of overall costs it is a challenge that we underestimated this cost during our original application.

Additional value in year 4 will be provided by the Scottish International Development alliance who will be providing some free capacity building training to our members, meaning that some of the training budget (£298.98) under output 4 which would have been listed as delayed spend, is now listed as true underspend.

All delayed spend is planned for the first six months of the coming year meaning we will be able to report on this as part of our mid-year report.

We have signed agreements with some of Zambia's top universities to help disseminate our work and this will result in greater value for money in terms of on-going costs for dissemination of learning.

A midway evaluation was scheduled for March 2020 but has had to be postponed due to the COVID19 outbreak and this represents a significant delayed spend (£4000) We spoke to our grant manager about this prior to reporting date and look forward to completing this later in the year.

Training (Implementation: Output 3) and solar upkeep (capital items) are both scheduled for hospital staff and engineers on the use of mobile and static solar units in May-June 2020, again due to delays around COVID19

As noted, the only other significant challenge around capital expenditure (£2,000) caused by the pandemic was the importation of larger lithium ion batteries. Due to uncertainty about trade routes through South Africa or imports from the UK, we took the decision with our partners to delay import until later in the year.

Finally, a change in plans (discussed with our grant manager) to roll-out our mobile solar generators as part of a national emergency response, rather than running the series of large-scale demonstration events for stakeholders has meant our costs were lower than expected for outputs 2 and 3, with no workshops and limited training taking place this year.

While this was unplanned, it has resulted in national exposure for our mobile solar generators, as well as some international coverage of the innovation, which may help us attract attention and future investment in the systems, especially in the coming year.

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	<p>As we're uniquely placed to support partners in responding to COVID19, we have worked with the business community, who have agreed to match-fund over £25,000 from our underspend with their own cash to provide over £50,000 in PPE and Oxygen concentrators to hospitals and clinics across the country based on needs identified by the Zambian National Public Health Institute. This has been listed under the implementation section of the budget for year 4 spend.</p>
7.2	<p>Please give details of any capital expenditure in this reporting period. (Max 350 words)</p>
	<p>N/A</p>
7.3	<p>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)</p>
	<p>We asked the Ministry of Health to cover the cost of venue hire for our national training courses (value £1,500+)</p> <p>We also asked the Zambia Police Service and Zambia Fire Service to cover the cost of their staff (including all allowances) for attending our training (value £6,000+)</p> <p>Both of these requests were agreed to.</p> <p>We also utilised commercial training to local businesses and institutions to generate revenue, which could be spent on items not covered under the terms of this grant.</p> <p>Where possible, we will ask business to match-fund elements of our work when we procure services in the coming year, for example £500 committed towards additional solar energy training for staff at Chitambo hospital (in May 2020) or the matching of contributions towards the COVID19 emergency response.</p> <p>This not only doubles the value of taxpayer funds, but also allows for cross-sector discussion on the emergency response priorities.</p>
8. Any other information	
	<p>Use this section to tell us any other relevant information regarding your project. (Max 500 words)</p>
	<p>As noted in our mid-year report (6.3) we will ask to reprofile some costs towards Scottish staff, due to the increased time spent on the project in Zambia throughout 2020.</p> <p>We have included a comprehensive business case for this request, showing how we believe it represents better value for money overall, than our original estimates.</p>

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We have included an additional report for your department on our work in Zambia following the COVID19 outbreak to give the broadest possible understanding of how Scotland can continue to be a good global citizen during this pandemic.