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| Donor name: | Fondation Eagle | | | | |
| Date of Submission: | 2 nd December 2020 | | | | |
| Name of Charity and Project: | The Virtual Doctors | | | | |
| Foundation Eagle reference number: | FF 544 | | | | |
| Date of grant accepted: | April 24 th 2020 | | | | |
| Amount: | 4,765 British pounds | | | | |
| Exact location of the project | Kapiri Mposhi, Itezhi Itezhi, Chisamba, Mumbwa, Chibombo, Ngabwe, Serenje and Luano District of Central Province Zambia | | | | |
| Conversation rate, date & amount in local currency: | Date of contract signing: April 24 th 2020 Date of exchange rate: GBP-22.079 USD- 18.451200 Amount in local currency: 105206.44Kwacha | | | | |
| Detailed Budgets and Actual Expenditure: | Eagle Foundation Contractual Agreement numbers | | Exchange rate: 22.079 | | |
| | Item | Contracted Budget (Pounds) | Kwacha Equivalent | Total Expenditure (Pounds) | Difference (Pounds) |
| | Wash Basins | 2,156.00 | 47,602.32 | 2,156.00 | 0.00 |
| | Wash cloths | 215.00 | 4,746.99 | 215.00 | 0.00 |
| | Soaps | 1,473.00 | 32,522.37 | 1,263.42 | 209.58 |
| | Antispetic Liquid | 921.00 | 20,334.76 | 919.43 | 1.57 |
| | Total | 4,765.00 | 105,206.44 | 4,553.84 | 211.16 |
| Over/underspend : | Overall Budget underspend: 4,553,84 kwacha or 211.16 pounds Overall Budget overspend: 0 We have underspent on the budget line items: <ul style="list-style-type: none"> ▪ Soaps | | | | |

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| | <ul style="list-style-type: none"> ▪ Antiseptic Liquid <p>We are expanding! We have another 16 boxes of soap left to purchase for our newly expanded sites. We will purchase these items before the end of December 2020. These items will go into the WASH kit delivery cycle for January 2020, These kits will be delivered to Mansa and Kasama in Northern and Luapula provinces respectively.</p> |
| <p>Details of progress of the project, achievements, challenges, changes, differences, etc.</p> | <p>The Virtual Doctors' COVID-19 Response Fund was launched on 22 April 2020 to support our ongoing partnership with the Zambian Government (helping them improve access to quality health care) and their effort to prevent the spread of COVID-19, with the aim to ensure that we can continue to provide vital telemedicine and educational support to the (then) 140 health centres we work with in rural Zambia. (We now support 215 health centres). Dr Matshidiso Moeti, the World Health Organization (WHO) Regional Director for Africa stated in March 2020 that COVID-19 could be one of the biggest health challenges Africa has faced in a generation. Although Covid 19 infection rates and deaths have been relatively low in Zambia with 15,301 confirmed cases and 335 deaths, the threat of further infections and mortality remains.</p> <p>After surveying 100 of sites we support in order to assess their readiness to respond to Covid-19 back in March, the Virtual Doctors (VDrs) devised a dual approach to fight the spread of the pandemic in rural communities: Water Sanitation & Hygiene (WASH) and Education, by providing our service users (frontline health workers) with Covid-19 prevention WASH kits to their health facilities and educational resources directly onto their VDrs-issued devices in addition to Covid information posters and stickers in English as well as key local languages.</p> <p>To date, we have raised an amazing over £40,000 thanks to our generous supporters and we are incredibly grateful for Fondation Eagle's support as well as to our Field Team in Zambia, who have worked wonders on the procurement of equipment to secure an average price of £190 per Covid-prevention kit.</p> <p>These consist of</p> <ul style="list-style-type: none"> • A foot pump-operated wash basin – K2,000/£80 • 3 months of consumables (antiseptic liquid, hand wash, hand sanitizers, gloves, mask, towels, bar soap) – K 2255/£90 • Covid-19 prevention through hygiene posters – K 500/£20 <p>Funding from the Fondation Eagle enabled us to purchase 24 foot operated hand wash basins, 106 cloths, 612 hand wash liquids, 1800 bars of soap and 420 antiseptic liquids.</p> <p>By July 2020 we had equipped all the 140 health facilities we supported at the time. We have since deployed our service along with the Covid prevention WASH kits to a further 75 health facilities, taking us to 215 sites across the country using</p> |

the VDr's telemedicine service while also being fully equipped to fight the spread of Covid. We were able to deliver below budget, allowing us to go further with our generous donors' contribution.

The funding also allowed us to further collaborate with the Ministry of Health on the design, production and dissemination of vital Government sanctioned Covid prevention and management information: first of all posters and stickers in English and the main local languages to deliver along with the WASH kits as well as how-to videos, but most importantly, the digitisation (video animations) of government-sanctioned paper-based curriculum and resources. These enable our service users to avoid the risk Covid from travel and physical training courses, but also means more time spent focused on their patients instead.

While ensuring our clinical users are safe so that they continue to save lives we encountered significant challenges around costs: firstly product price inflation and shortage of key supplies (in Zambia more than in Europe), which we addressed with bulk buying as much as funds allowed. We also faced transportation costs rising exponentially with the increasing distances of our sites from Lusaka and the VDr's HQ (K 41,450/£1634).

We have made our Covid Response initiative part of the New Normal and now provide WASH supplies with our telemedicine devices whenever we introduce the service to a new site in rural Zambia. This ensures that each health facility is better equipped to combat the pandemic. Covid travel restrictions have changed the way we train Clinical Officers (CO's) and set up our service in new health facilities: instead of sending our team into the field to deliver devices and training, we work with Ministry of Health colleagues to send Covid kits and telemedicine devices to the local District Health Office by bus, where they are then sent on to the designated Rural Health Centres.

We have also developed a new, virtual, training model based on a "Training the Trainers" (ToT) concept: Clinical Care Officers (CCOs) (most senior COs responsible for managing all COs in their district) are trained remotely over Zoom by the VDr's team in Lusaka, so that they are able to train COs in their Districts to use the VDr's telemedicine service. On the day of training, 6-10 CO's are trained together at the DHO by the CCO's. The training is backed up with support from the team in Lusaka via Zoom.

A comprehensive training manual and user guide are sent to the CCO's via WhatsApp with a supporting training video 'how to create a Virtual Doctors (VDr's) case' in two of the seven official vernacular languages of Zambia, Bemba and Nyanja, as well as English. This new model not only allows us to by-pass Coronavirus-related obstacles but will also enable us to redirect cost savings towards COVID-19 prevention activities and beyond – an exciting development and direction for the Virtual Doctors: turning a threat into an opportunity and going further Virtually while continuing to enrich the quality of healthcare service delivery where it's needed most.

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| | <p>The Virtual Doctors wish to continue playing a key role in helping keep Covid infection rates down through our prevention support initiative. But most importantly, we want to continue to provide our life-changing telemedicine service at a critical time: according to a new report released in June by the Global Fund, “deaths from HIV, TB and Malaria could almost double in 12 months” and go “back to levels not seen since the peak of the epidemics, wiping out nearly two decades of progress in the worst-hit regions”. In more developed regions as well as the less developed regions in sub-Saharan Africa, chronic and long-term health conditions have been neglected as a direct result of the concentrated effort to counter the Covid pandemic and patients’ fear to visit doctors or hospitals. In sub-Saharan Africa, maternal and under-5s mortality is on the rise again, because of the disruption to health systems (the Lancet).</p> |
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