Donor	Foundation Eagle										
name: Date of	7 August 2020 (Paparting parior	d January 20	020 –	April 2	020\						
Submission	7 August 2020 (Reporting period January 2020 – April 2020)										
:											
Name of	The Virtual Doctors										
Charity											
and											
Project:											
Foundation	FF 0515-36										
Eagle											
reference											
number:											
Date of	November 25 th 2019	November 25 th 2019									
grant											
accepted:											
Amount:	29,261 British pounds										
Exact	Kapiri Mposhi, Itezhi Itezhi, Chisamba, Mumbwa, Chibombo, Ngabwe, Serenje and Luano District of Central Province Zambia										
location of											
the project											
Conversati	Date of contract signing: Novem)19								
on rate,	Date of exchange rate: 6 Decem	ber 2019									
date &	GBP-17.19	00 00 1/									
amount in	Amount in local currency: 503,0	00.00 Kwac	cha								
local											
currency:											
Detailed Budgets	PROJECT COSTS										
and actual								1st			
expenditur				UNIT		BUDGET		reportng period		1st report	
e:	BUDGET LINE	(in local	# OF	TYPE e.g.	# OF UNIT	AMOUNT	BUDGET AMOUNT	figures	Over/Unders	ng	Over/Unders
	333321 2.112	currency)	UNITS	Mont	S	(local currency)	(GBP)	(ZMK) May	pend (ZMK)	period figures	pend (GBP)
				hly		carrency;		25th		(GBP)	
								2020			

Activity A: Devices and application costs										
Devices for Clinical Officers	3,250.00	40	1	1	130000	7563	57,500	72,500	2,868	
Application costs	3,000.00	40	1	1	120000	6981	120,000	0	5,986	
Broadband for devices	50.00	40	12	1	24000	1396	12,105	11,895	604	
Sub Total Activity A					274,000.00	15,939.50	189,605	84,395	9,458	
Activity B: Introduction/Training Sessions										
Logistics	1,500.00	12	1	1	18000	1047	12,132	5,868	605	
Logistics	650.00	12	1	1	7800	454	4,504	3,296	225	
Per diem	700.00	12	1	2	16800	977	8,386	8,414	418	
PHD/DHD meetings	1,000.00	3	1	1	3000	175	0	3,000	0	
Training	530.00	40	1	1	21200	1233	9,895	11,305	494	
Marketing Materials	200.00	40	1	1	8000	465	3,208	4,793	160	
Sub Total Activity B					74,800.00	4,351.37	38,125	36,675	1,902	
Activity C: E-health Workshop										
Conference package	10,000.00	1	1	1	10000	582		10,000	0	
Consultative meetings	1,000.00	2	1	1	2000	116		2,000	0	
Sub Total Activity C					12,000.00	698.08	0	12,000	0	
Activity D: Monitoring and Evaluation										
Logistics	1,000.00	12		1	12000	698		12,000	0	
Logistics	650.00	10		1	6500	378		6,500	0	
Per diem	700.00	12		2	16800	977		16,800	0	
Stationary	300.00	1		1	300	17		300	0	
Sub Total Activity D					35,600.00	2,070.97	0	35,600	0	

					396,400.00	23,059.92	227,730	168,670	12,335	
OPERATIONAL SUPPORT COSTS									-	
ACTIVITY	UNIT COST	# OF UNITS	UNIT TYPE e.g. Mont hly	# OF UNIT S	BUDGET AMOUNT (local currency)	BUDGET AMOUNT (GBP)	1st reporting period figures (ZMK) May 25th 2020	Over/Unders pend (ZMK)	1st report ng period figures (GBP)	Over/U pend (0
Office Connectivity	800.00	1	12	1	9,600.00	£ 558.46	4,800	4,800	239	
Office Space attributed to the project	3,500.00	1	12	1	42,000.00	£ 2,443.28	21,000	21,000	1,048	
Three full-time staff members	4,250.00	1	12	1	51,000.00	£ 2,966.84	25,500	25,500	1,272	
Monitoring and Evaluation	4,000.00	1	1	1	4,000.00	£ 232.69	0	0	0	
OPERATIONAL SUPPORT COSTS					106,600.00	6,201.28	51,300	55,300	2,559	
									_	

Over/unde rspend:

Overall Budget underspend: £15,342

Overall Budget overspend: 0

To date we have spent £15,342 from the £29,261 grant from the Fondation. We have underspent on several line items below and anticipate that an additional £6,411 of our budget will be spent by 31st December 2020. We request permission to repurpose £8,931 of the funds and provide details of our proposal in the conclusion.

Activity A: Devices and application costs - £6,481 underspend

The underspend from the device and application costs were made through exchange rate fluctuations and increased purchasing power from negotiations.

Activity B: Introduction/Training Sessions - £2,450 underspend

We were able to achieve savings from the induction and training sessions due to general cost savings and the budgeted Provincial Health Director meeting taking place in Lusaka instead of Kabwe, (which is the provincial capital). We were fortunate that Mr Chalwe Kennedy Kabuswe (Central Province Health Director) was in Lusaka for training which meant we were able to host the meeting at the training venue, thus cutting costs significantly.

Activity C: E-health Workshop - £698 underspend

We still plan to host an e-health workshop in collaboration with the Ministry of Health and have submitted a concept note for the e-health stakeholder collaboration meeting. The rationale is to help underpin the Ministry of Health's ability to implement its eHealth strategy (2017-2021). This requires stakeholder engagement forums that help to establish national eHealth stakeholder reference debate and working groups with cross sectorial representation.

This event will help organizations who are working in the eHealth space to openly discuss the following:

- (1) The progress of eHealth projects being implemented in Zambia
- (2) Upcoming eHealth programs in the country
- (3) Issues with implementation
- (4) Mitigating project silos
- (5) Sustainability approaches to eHealth solutions
- (6) Showcase government embedded eHealth solutions
- (7) Networking amongst fellow professionals
- (8) Showcase eHealth products/services from the Private Sector for Public Sector use.

Activity D: Monitoring and Evaluation - £2,071 underspend

Monitoring and Evaluation field activities have been postponed due to COVID-19. We have created the surveys and an implementation plan. Our Zambia Board are due to reassess our COVID-19 travel restrictions (outside Lusaka, the capital) in early September. In the absence of field visits to health facilities and District Health Offices, we will facilitate a virtual Clinical Care Officers meeting, contributing to a key component of our M&E until we are able to go back out into the Districts. The virtual meeting will require that we send connectivity support and an M&E packet to all participants remotely.

Details of progress of the project, achieveme

In November 2020 the board of the Fondation Eagle approved a grant of £29,261.20 towards the expansion of the Virtual Doctors telemedicine platform to 40 additional public healthcare facilities throughout the Central Province of Zambia. Between January 2020 and April 2020 we were able to identify the sites for our expansion in consultation with the Ministry of Health, procure and issue 40 devices to Clinical Officers who were trained and given guidance on how to use the device to send cases and access our online educational resources.

nts, challenges, changes, differences , etc.



Participants at the new spot with a better internet connection. Central Province Ngabwe District

Participants at the new spot with a better internet connection. Central Province Ngabwe District
The Fondation Eagle grant enabled us to expand to each of the 12 districts in the Central Province covering a population catchment area of approx. 1.77 million people. We began the expansion on 2nd March 2020 in Chilanga District as it was closest to our regional office in Lusaka, Zambia. It took us 3 weeks to complete the expansion to all districts with the furthest district being Luano. To date Clinical Officers have submitted 142 complex cases for consultation support from our volunteer doctors.

(Please see tables 1 & 2 in Appendix A)



Virtual Doctors team and trainees participate in an energizer during the training. Central Province, Itezhi-Itezhi District

Virtual Doctors team and trainees participate in an energizer during the training. Central Province, Itezhi-Itezhi District There were no variances from the original proposal, all districts mentioned in the original proposal were expanded into. Challenges:

- Sim Cards: Due to a new policy issued by the Zambia Information and Communication Technology Authority requiring each sim cards to be registered to an individual and not a company unless under certain circumstances. This led to a delay in uptake by the clinical staff because in rural areas sometimes finding a booth to buy and register a sim card was difficult as it meant they would need to travel to a neighbouring town.
- Connectivity: As the Virtual Doctors works in some of the most remote areas in Zambia, ensuring clinics have connectivity can be an issue. To mitigate this, we provide Clinical Officers with monthly connectivity and triangulating telecom maps to see which facilities are closest to a network tower.
- Space: On some occasions, the training group was too large to fit in the conference room of the District Health Office. Thus, some trainings were held outside.
- COVID-19 Pandemic: In recognition that COVID-19 may overwhelm the health centres we support and that Clinical

Officers could themselves become affected and put out of action we launched the Virtual Doctors' COVID-19 Response Fund in April 2020. With funding from our generous supporters, including the Fondation Eagle, we were able to continue implementing our programmes with a few delays. As a result of travel restrictions two of the project's planned activities are on-hold - monitoring and evaluation, and the E-health Workshop, until it is safe to resume travel. We anticipate this to be within the next two months.

	Impact: The overarching aim of the expansion project is to help improve the local primary healthcare in the Central Province in Zambia. As a result of the Fondation Eagle's grant we have successfully expanded into all 12 Districts in the Province, increasing the capacity of 40 Clinical Officers through our customized tele-medicine application and mentorship tools; and provided them with access to high quality, bespoke educational on-line resources. As we are yet to complete the monitoring and evaluation of our service in Central Province we are unable to fully report on the impact of our work. However, we have received some feedback from Clinical Officers on the positive impact of our service on their work. The following video link is of one of the 40 Clinical Officers funded by the Fondation Eagle, Florence Munthali from Kapiri Mposhi highlighting the value of our service.
Individual filling in form:	Shakerrie Allmond
Title:	Regional Director of Ops-Africa
Contact informatio n:	Shakerrie.allmond@virtualdoctors.org / +260964429109

Conclusion:

The Virtual Doctors are eternally grateful for the generous support of from Fondation Eagle. We are pleased that we were able to complete the expansion into the all the districts in Central Province potentially providing 1.7 Million people with increased access to quality primary health care. By the end of December 2020, we anticipate we will have an underspend of £7,956. We respectfully request to repurpose these funds towards our expansion into neighbouring Malawi (£6,481), where we have successfully completed a pilot in six health facilities and now seek to expand to other Districts; and towards the e-Health symposium (£2,450). If approved, we will:

- 1. establish our service in 4 new sites in the Central Region of Malawi, in line with our strategy to expand into every district in the country;
- 2. convene a more comprehensive e-health symposium meeting that will include live demonstrations of technology already utilised in Zambia as well as the creation of an open platform that demonstrates best practice in collaborative rather than working in silos. The Virtual Doctors concept note for this meeting has been accepted by the Ministry of Health. COVID-19 has restricted the execution of this plan and we are working with the Ministry of Health to see if we may run a virtual event depending on how the COVID-19 pandemic

evolves in Zambia. We have identified additional costs that we would like the Fondation to consider repurposing some of the underspend towards.

In consultation with the Ministry of Health, we have identified that we may have under budgeted for the breadth of the activity that needs to be carried out. It was determined that there are over 80 potential e-health partners, when we had originally budgeted for approx. 35 eHealth partners. The following items are what we need the additional budget for:

- (1) Personal Protective Equipment for participants who attend the physical part of the eHealth symposium
- (2) Live streaming of the event for those unable to attend in person
- (3) eHealth symposium conference packs.

Appendix A

Table 1

Cases per Specialty					
Specialty	Case numbers				
Gynecology	28				
General Practice (GP)	28				
Surgery General	4				
Geriatric Medicine	1				
Paediatrics	13				
Dermatology	5				
Infectious Disease	9				
Medicine General	31				
Ophthalmology	4				
Respiratory Medicine	3				
Surgery Paediatric	4				
Plastic surgery and Burns	1				

Psychiatry	1
Urology	4
Neurology	2
Anaesthetics (and pain) medicine	4
Total	142

Table 2

Clinician	District	Number of cases
Lawrence Mwiya	Itezhi tezhi	19
Agness Phiri	Itezhi tezhi	4
Maggie Bwalya	Itezhi tezhi	2
Malama Mulenga	Itezhi tezhi	3
Prisca Chisakasaka	Itezhi tezhi	0
Fumbase Ndhlovu	Mumbwa	8
Brian Kabale	Mumbwa	6

Wilson Phiri	Mumbwa	2
Abel Silungwe	Mumbwa	13
Festus Munamunungu	Mumwa	6
Florence Munthali	Kapiri Mposhi	40
Hellen Mwale	Kapiri Mposhi	10
Manga Mwambwa	Kapiri Mposhi	2
Namatama Situmbaeto	Chisamba	6
Debby Ziba	Chisamba	4
Thamson Banda	Chisamba	0
Karlyn Uwituze	Chisamba	2
Agather Mwamba	Chisamba	3
Chaudly Mwale	Chibombo	5
Castro Mulenga	Chibombo	10
Purity Wambinji	Chibombo	13
Cynthia Matimba	Chibombo	4
Lawrence Shawa	Chibombo	9
Kennedy Mwango Lazarus	Luano	2
William Zulu	Luano	10
Talent Mauluka	Luano	11

Gaven Phiri	Luano	0
Chungu Chate	Luano	1
Chishimba Chishimba	Ngabwe	5
Remmy	Ngabwe	0
Alevy Sikateyo	Ngabwe	2
Margaret Taulo	Ngabwe	0
Diego Kwerere	Ngabwe	4
Micheal Mwanakezwa	Serenje	2
Everlyn Kafula	Serenje	13
Clever Kambela	Serenje	14
Mercy Chitembo	Serenje	2
Robert Kanyanga	Serenje	5
Wilfred Silungwe	Serenje	4
Bridget Mpundu	Serenje	3