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| **PROJECT VISIT REPORT: P3851-BMZ-MYP,**  **P4218-BMZ-MYP** | | | |
| **CBM OFFICE:** | CBM | **VISIT BY:** | Lisa Wuest, Dr. Uta Froeschl |
| **COUNTRY:** | Zambia | **PROJECT NO:** | P3851-BMZ-MYP, 4218-BMZ-MYP |
| **PARTNERS:** | Beit Cure Hospital (BCH)  Cheshire Homes Society of Zambia (CHSZ) | | |
| **PROJECT:** | Strengthening the audiological and ENT services in Zambia (P3851-BMZ-MYP)  Inclusion of children with neurodevelopmental disabilities (P4218-BMZ-MYP) | | |
| **DATE OF VISIT:** | 15.11.2021 – 19.11.2021 | | |
| **REASON FOR VISIT:** | * Monitor project activities of P3851 and discuss challenges * Ensure that implementation of P3851 is according to CBM and BMZ and requirements * Discussion of potential scale up ENT project * Clarification of requirements for final BMZ report for P3851 * Clarification of roles, responsibilities and communication lines in implementation of P4218 * Finalise set up of P4218 and discuss strategic planning of project activities for 2021/2022 | | |
| **PRESENT IN DISCUSSION:** | * Dr. Rachel Hapunda, National ENT Coordinator, Technical advice * Dr. Alex Malambo, ENT surgeon, Technical advice * Frida Kabaso Phiri, Executive Director BCH, Leadership and supervision of visit * Steven Chishimba, Project Manager BCH, Guide and support the visit, information exchange/planning * Chota Musonda, M&E Expert BCH, Guide and support the visit, information exchange * Catherine Malisawa, Finance Head BCH, Leadership and supervision of visit * Isaac Simukonda, Finance Manager BCH, Guide and support the visit, information exchange * Kamima Nguni, Executive Director CHSZ, Leadership and supervision of visit * Musonda Siame, CBID Project Manager CHSZ, Guide and support the visit, information exchange/planning * Please add names of two additional participants of CHSZ * Aretha Nsefu, Country Director CBM CO Zambia, Guide and support the visit, information exchange/planning * Slinganiso Homela, Project Manager CBM CO Zambia, Guide and support the visit, information exchange/planning * Marjolein Meande-Baltussen, Regional CBID Advisor, Technical advice, planning * Dr. Uta Froeschl, Consultant ENT Surgeon, Technical advice, support the visit * Lisa Wuest, Project Manager CBM Project Delivery, Programmatic and practical advice, information exchange/planning | | |
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| 1. **Background of the visit:** |
| The BMZ project P3851 started in September 2018 and is now in the final year of implementation. Following internal restructuring, the position of project management for project P3851 was handed over to Lisa in January 2020. Due to COVID-19 restrictions the monitoring visit planned in 2020 could not take place. Thus, the main purpose for this visit was getting to know both the colleagues of the CO and the partner BCH as well as discussing the project achievements, challenges in implementation, adjustments, the preparation of project exit/potential scale up and the preparation of the final report.  Besides, the temporal bone lab at University Teaching Hospital, Livingstone Central Hospital, three audiological booths in Kalomo, Choma and Livingstone, one school screening and one outreach were visited in order to witness the use of procured equipment and to monitor project activities.  The BMZ project 4218 started officially in October 2021. The purpose of the meeting with the partner CHSZ was to ensure a good project set-up, start of project-accompanying measures and project activities, strong engagement with stakeholders and to getting to know the working methods of the partner CHSZ. |

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| 1. **Topics:** *According to order in agenda* | | | | | |
| **Discussion Points:** | | **Action Points:** | | |
| **15th November, 2021:**  **Beit Cure Hospital: Meeting with hospital staff**   * Introduction of BCH and all participants from partner and CBM side, welcoming words * Project visit to be considered as opportunity for joint learning, clarification of expectations and requirements, exchange on challenges and lessons learned, review of achievements   **Presentation of the achievements of the project P3851: current status of implementation**   * The BCH Project Manager gave a presentation on the progress achieved in activity implementation, actual indicator achievement vs. targets and plans for the remaining period   **The following highlights were presented:**   * Ear specific services are established in Southern Province and strengthened in Lusaka * Situation analysis and needs assessment of 15 selected training institutions on the practical implementation of the ENT component of the Clinical and Nursing Curriculum will be done * The audiological booths were constructed (Choma General Hospital, Request Muntanga Hospital in Kalomo, Livingstone Central Hospital) and are regularly used for hearing tests * Temporal bone lab was established at University Teaching Hospital and will shortly be used for trainings * As a consequence of the training of health personnel (ENT surgeons, public health planners, hearing aid technicians, speech therapy assistants, nurses, clinical officers, community health workers) the project contributed significantly to their specialization on ENT treatments/health planning * Continued exchange between nurses, clinical officers and ENT surgeons via tele-health consultation system supports learning process and increases referrals of severe cases * Speech therapist employed at BCH is in regular exchange with parents and offers basic assistance, trainings for caretakers and conducts home-visits as well as periodic appointments at BCH * The demand for ENT related services has increased significantly after community health workers intensified awareness-raising in Southern Province * Outreaches conducted in Southern Province contribute a lot to actual achievement of indicator: in Q3 2021, 61% of consultations were done in Southern Province (3,862); 59,540 treatments were made in total, while target was 31,800 | |  | | |
| **Discussion of outstanding activities and project finalization of P3851**   * Two to four doctors of UNZA will participate in training at temporal bone lab, though it will not be possible to train all 8 ENT students until project end due to lack of ENT surgeons in country (final report to comprehensively lay out reasons in any case where target achievement was not possible; BCH continues to raise awareness and advocate for great need of ENT surgeons * Conduction of School screenings (11,569 out of 22,1000 were conducted until Q3 2021) * Implementation of ENT topics in curriculum of nurses and clinical officers: needs assessment regarding challenges in learning and teaching ENT topics planned for Q4; improvement of practical implementation, support with basic ENT equipment, post-survey * ENT prevalence survey: protocol was approved by ethics committee, adjusted design increases significance and enables us to use results for stakeholder information and to advocate for the need of ENT services on national level * Review of ENT National Plan and development of new strategic plan * Meetings of ENT National Committee: challenges in finding appointment with Director of Clinical Health, new people after election are hard to organize, hoping for shortcut for appointment letter * Official launch and screening event in Livingstone planned for Q4, awareness-raising * Hand over event in Choma and Kalomo   **Exchange on challenges and lessons learned of P3851**   * Constitution of National ENT Committee: the absence of the committee is considered as main reason for all other challenges; approval of permanent secretary of Ministry of Health required for the distribution of appointment letters to stakeholders, delegation of task to Director of Clinical Health, difficulties in receiving appointment at the end of political cycle; Dr. Hapunda and BCH finally received an appointment on the last day of office before election and presented the background idea and purpose of the committee, which was also captured for radio and TV. Even though the same permanent secretary continues in office it is hard to predict if he is still in favor of the idea, hoping for shortcut for appointment letter. Networking and relationship building should further be strengthened. * As decreasing number of cases was detected during school screenings (thesis: parents leave children with hearing impairments out of school), BCH decided on a change of approach, which is currently applied: stronger engagement with communities during outreaches and screenings to detect out-of school children with hearing impairments, raising awareness during neonatal/maternal courses for early detection of hearing impairments, speech therapists also go to communities (part of strengthening activity of change request) * After ENT surgeon left BCH, there was no doctor who could perform Tympanoplasty (successor does not do any ear surgery). Therefore, Dr. Hapunda got involved and helps in doing ear surgeries. Besides, the ENT surgeons at Kabwe Central and Livingstone left their respective hospitals. While Dr. Malambo does surgical outreach in Livingstone, there is no permanent ENT surgeon at Kabwe Central and BCH. Recommendation: Employ another ENT who is able to perform Tympanoplasty for BCH and is also committed to do ear surgical outreaches to Kabwe and Livingstone. As transitional solution, mentorship of two clinicians who could do minor surgeries was requested. * Consultation platform of nurses/clinical officers and ENT surgeons has improved exchange on challenging cases and also increased number of referrals * Follow up of patients is sometimes difficult, community volunteers are of much help though in locating patients | | **Steven and Chota:** Provision of HIS and pictures – March 31, 2022 | | |  | |
| * MoH pushed ENT agenda back due to focus on COVID-19, general lack of ownership of government for ENT –> challenges in inviting training participants, organizing outreaches, reaction: continued awareness-raising, lobbying, champion in government required, billboards are good option to promote EHC * Many health care centers were temporarily turned into COVID-19 centres, which affected number of people who could be screened * Development of new strategic ENT plan also depends on official launch of national health strategy * Hearing aid users in remote areas experience challenges in the purchase of batteries. As there is no safe battery disposal, batteries can cause a health hazard (e.g. to children who play with them and accidentally ingest them/put them in ears/nose) and pollute the environment. Recommendation: Procure rechargeable hearing aid batteries.   **16th November, 2021:**  **Visit to the UTH to see the Temporal Bone Lab (P3851)**   * Steven and Dr. Malambo presented the temporal bone lab to the group. It is now completely set-up, and all the procured equipment items are installed and ready for use à impressive job was done, well thought through and set up * The training of two-four ENT students is already planned and will be conducted by the visiting ENT surgeon Dr. Wang. * Lisa, Aretha and Slinganiso mentioned the need for adjustment of the stickers as currently only the BMZ logo is shown. Information on BMZ and CBM visibility requirements was provided. * Aretha highlights the importance of signing MoUs with all hospitals who benefitted from the procurement of equipment. * Lisa also reminds on the binding period which defines how long goods should be used for the intended purpose depending on their acquisition value. * Drills should be lubricated after each use. Otherwise, the drill clogs up and gets broken.   **Joint review of project finance of P3851**   * Issac presented the accounting system Xledger to Lisa and showed her how project payments are affected, vouchers saved both digitally and physically. * The processes are clearly defined and there is a delegation of duties for the release of payments in place. * Project accounting documents can be clearly identified as they are marked with the short project title. * The finance manual is quite comprehensive. * In inventory list, the identity number of some items is missing as they refer to sets with a number of items each.   **Budget review of P3851**   * Lisa shortly presented the finance overview of the BMZ Monitoring Tool, which is based on the quarterly finance reports (including Q3 2021). * 100,091 EUR are still available for call-up until end of project (30.04.2022), including project reserve * Project can still spend up to 171,849 EUR (only audit can be paid after project end) * According to forecast for October-April 2022 (126,000 EUR), total amount of BMZ funds for 2021 will be called up * Approval of change request allows us to strengthen activities and to increase sustainability of measures   **Cheshire Homes Society of Zambia: Meeting with partner staff**   * Introduction of all participants from partner and CBM side, welcoming words   **Discussion of set up of P4218 and project contract**   * Lisa presented the status of the administrative project set up and recommended that clarifying open questions on the contract and signing, publication of job adverts and selection process, initiation of first RoF should be the next steps. * Joint review of project contract and annexes with BMZ specifications | | **Steven/Chota:** Preparation of MoUs and hand over lists for all hospitals that benefitted from the procurement of equipment – March 31, 2022  **Steven:** Add stickers that comply with BMZ and CBM visibility requirements and share photos – March 31, 2022  **Steven/Isaac:** provide an attachment to inventory list, which includes the items of all sets and their identity numbers – June 30, 2022  **Steven:** preparation and provision of time-sheets for staff members whose salaries where partly covered by project (ENT surgeon, speech therapists) – June 30, 2022  **Steven:** to discuss how to increase budget implementation until project end (approved activities & strengthening of activities as approved in change request) | | |  | |
| **Cheshire Homes Society of Zambia: Meeting with partner staff**   * Introduction of all participants from partner and CBM side, welcoming words * Besides, an introduction to the BMZ Reporting Template is planned * Discussion of timeline for activity implementation can be started * Kick-off workshop should take place once key staff members are on board * TORs for baseline survey should already be developed * Version 2 of Celebral Palsy Handbook is now called Ubuntu (please see: [Ubuntu, Baby Ubuntu and Juntos programmes for children with disabilities (ubuntu-hub.org)](https://www.ubuntu-hub.org/) * Musonda mentioned that the salaries of three project assistants should have been budgeted; it seems as during finalization of proposal, bengo asked CBM to shift some budget to different project years, which resulted in the overall budget including only one position; Lisa to clarify with bengo if two additional positions can be financed by savings generated in first months (about 18,000 EUR required), kindly proceed with recruitment of three project assistants. * Cheshire head office plays a role in overall M&E and requested a budget for this: it was mentioned that there is some budget included: 20% contribution to office supplies (lumpsum) can go the national office (please see result activity 8.1 in planning tool, p. 19 in narrative proposal) * Important to engage with Sarah Rule regarding the preparation of master training led by to GTKCP experts from UCT once set up is completed and participants were identified   **Clarification of roles, responsibilities and communication lines (P4218)**   * Lisa briefly presented the different roles of Cheshire, CBM CO and CBM Project Delivery   **17th November, 2021:**  **Review of audiological booth at Choma General Hospital (P3851)**   * The group visited the Choma General Hospital to review the constructed audiological booth, the procured equipment and consultation rooms. * The equipment is installed and has already been in use. * The construction of the audiological booth is completed, and the booth has been used for hearing tests. The set up and installation of equipment was well done. Though, during our test, we noticed that the booth is not soundproof, which is highly required to prevent the test results from being biased by background noise. Dr. Uta recommends putting carpets on walls and doors, a second sealed door and adding foam between the doors * Adjustment of logos on stickers and sign required   **Witness school screening event in Kalomo (P3851)**   * Visit to school screening at secondary school in Kalomo that raised much interest and showed high need of ENT treatments   **Review of audiological booth at Request Muntanga Hospital in Kalomo (P3851)**   * Review of audiological booths and procured equipment: equipment is completely procured, installed and in use, construction of audiological booth is completed and in use, similar to the booth in Choma, adjustments of the booth are also required as well as stickers with all logos | | **Slinganiso/Paul:** to develop the TORs together with Cheshire (CO in lead) – January 31, 2022  **Lisa:** to discuss with bengo how to finance the salaries of two additional positions – January 31, 2022  **Steven:** to coordinate adjustment of all three audiological booths – January 31, 2022  **Steven:** Add stickers that comply with BMZ and CBM visibility requirements to all equipment items (boxes in case of smaller items) and signs, please share some photos – March 31, 2022 | | |  | |
| **18th November, 2021:**  **Visit to Livingstone Central Hospital, witness ENT department, audiological booth and ENT operating theatre (P3851)**   * The team visited the ENT department and reviewed all the procured equipment items, which have been installed as intended and been in use. * As some instruments are already rusty, there is an urgent need to communicate proper instrument handling to all facilities: * **After the use of instruments**: soaking of the instruments in water where one (!) drop of dishwasher is dissolved. * **After the clinic** (or in between if more instruments are needed): soaking of the instruments **for 15 minutes** in Chlorine, Cidex (or whatever is used for chemical sterilization). Immediately **after 15 minutes** (if instruments are left in chlorine, cidex, etc. for a longer period, they corrode very quickly and are soon damaged and non-functional): instruments are rinsed with clear water (sterile water if used again), proper drying of the instruments, sterilization. * Headlights, Otoscopes, Tympanometer and OAE´s need always be kept charged. If the battery is drained the lifespan of the equipment is compromised. * It was shared that the power pack for the audiometer was blown. Recommendation to get UPS for the delicate equipment as power/load surger and power outages are common. * Drills should be lubricated after each use. Otherwise, the drill clogs up and gets broken. * ENT unit should have an own microscope (not only clinic), recommendation to contact “Heinemann” via CBM CO/fundraising department * The audiological booth is completed and in use. However, similar to the booths in Choma and Kalomo, it is not soundproof and Dr. Uta recommended some adjustments (please see comments above). * The ENT equipment at the operating theatre is also completely procured and ready for use.   **Witness ENT outreach at Maramba market (P3851)**   * Visit to Maramba market in Livingstone where BCH organized an ENT outreach * High involvement of community health workers and community volunteers * Awareness-raising among market stall owners raises much interest and results in a great number of patients who were screened (some minor treatments were made at designated market area, 6 referrals to Livingstone Central Hospital) | | **Steven:** to communicate proper instrument handling and cleaning to all facilities | | |  | |
| **Clarification of BMZ requirements for final project report (P3851)**   * Lisa presented the donor requirements for the final project report (presentation was shared) * Lisa will share template for final narrative report which includes guiding explanations and key questions for easier reference * Only payment of final audit can be made after project end * In case the balance of funds is > 500 EUR at project end, these funds must be reimbursed to BMZ * Timeline: final project report should be shared with CBM by June 30, 2022 * Appendices to be submitted: audit report (both in soft and hard copy) and auditor’s certifying letter, final evaluation report, inventory list, time-sheets for partially financed staff * All documents have to be kept for 10 years after submission of final report: until end of 2032   **Discussion of potential scale up ENT project (P3851)**   * For now, please focus on the strengthening of activities and increase of sustainability of measures as well as preparation of high-quality final project report * Ein Bild, das drinnen, Kleidung enthält.    Automatisch generierte BeschreibungDiscussion on new project ideas with initiative and CBM CO * CBM Regional Director and Regional Programme Manager will decide on countries which can submit project ideas for BMZ planning list   **19th November, 2021:**  **Close out meeting and wrap up (P3851)**   * THANK YOU for organizing this monitoring visit – very helpful to understand the dynamics and challenges experienced during implementation as well as all the achievements made * Dr. Uta would like to support ENT expert from Tigray, Ethiopia in coming to Lusaka to work for BCH * Even though advocacy is not part of BCH’s core business, the team has done a remarkable job * Publication of information about ENT impairments and services as well as community work is important * Continue discussion on how sustainability of services can further be increased * Issues with CBM MYP development (follow-up project of P3589) should be resolved as soon as possible * Continue improving communication between CO and BCH with preferably monthly/bi-monthly meetings of ALL involved. With regular meetings, communication gaps can be recognized earlier, and the information can be shared with everybody (which seems as it has sometimes been a challenge) * Presentation of ENT prevalence survey and publication will also raise awareness for importance of ENT services * Hand-over ceremony will be combined with dissemination launch, BCH starts involvement with MoH and discusses timeline (possibly around March 2022), participation of Dr. Uta and CBM Project Delivery would be desirable | | **Lisa:** to share template for final narrative report – January 31, 2022 | |
| 1. **Pictures:** | | | | | |

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Ein Bild, das drinnen, Toilette enthält.

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Procured equipment at temporal bone lab at UTH

Audiological booth at Choma General Hospital

Visit to the temporal bone lab at UTH

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Poster to inform about causes for hearing loss

ENT clinic at Choma General Hospital

Audiological equipment at Choma General Hospital

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Review of audiological equipment at Kalomo Hospital

ENT department at Livingstone Central Hospital

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Automatisch generierte BeschreibungEin Bild, das Text, draußen, Person, Personen enthält.

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Witnessing outreach activity at Maramba market in Livingstone

Review of audiological booth in Livingstone

ENT community outreach activity at Maramba market in Livingstone

Consumables used during outreach at Maramba market, Livingstone