**Quarterly Narrative Report (QNR)**

# **1. Project Details**

GUIDELINES: Please complete the following table with details of the project.

|  |  |
| --- | --- |
| Project Number | P 3589 |
| Project Title | BCH/CBM Ear, Nose and Throat (ENT) Project |
| City/ Country/ Region | Lusaka/Zambia/Southern Africa |
|  |  |
| Name of Contractual Partner | Beit Cure Hospital |
| Other Implementing Partners |  |
|  |  |
| Duration of Project | 3 Years |
| Project Start Date | January, 2018 |
| Project End Date | December, 2020 |
| Project Cycle | January-December |
|  |  |
| Report Submitted by; |  |
| Name | Stephen Chisamba |
| Designation | Project Manager |
| Email Address | steve.chishimba@cureinternational.org |
|  |  |
| Reporting Period (Q1, Q2…) | Q1, 2020 |
| Date of Submission | 10th April, 2020. |

# **2. Summary of Results Achievements**

GUIDELINES: Insert a qualitative ‘summary’ of the overall progress of the project towards its Result areas. Please focus on the changes (intentional or unintentional) that have come about as a result of implementation of activities. Limit your response to 1 paragraph per result area.

***Result 1****: ENT (diagnostic and surgery) and rehabilitative services (audiology and audio-verbal therapy) provided to a larger number of patients*

***Result 2****: Strengthen the Zambian Health system through support to implement the National ENT Plan and meetings amongst relevant stakeholders.*

***Result 3****: Provide operational management and financial sustainability in ENT Clinic*

Under result area 1 the project observed a decline in the total number of patients that turned out at our clinics as is expected especially in the wake of the ongoing Covid 19 global pandemic. However, we still managed to get a positive turnout when the situation within the country was normal within the early parts of the quarter after the Hospital re-opened following the festive holidays. This enabled us during that period to record a progress achievement of rate of 133% on patients assessed at our clinic.

Under result area 2 we did not undertake any bi-annual meeting with the National ENT Committee due to limited interaction with the committee members following public movement restriction guidelines made by the Government of Zambia.

# **3. Narrative Reporting on Activity Implementation**

3.1 GUIDELINES: Which activities were planned to be implemented for the quarter? Please list down the Activity Name and Number only.

3.1 Activity 01.01 Conduct ENT consultations

3.2 Activity 01.02 Conduct ENT surgeries (25% of children's surgeries subsidized by CBM)

3.4 Activity 01.04 Conduct Audiology Consultations

3.5 Activity 01.05 Provide speech therapy sessions for children

3.6 Activity 03.02 Mobile Clinics scheduled and held twice a week in local clinics and schools

3.7 Activity 03.03 Facilitate annual certified audit and respond to outstanding audit issues

3.2 GUIDELINES: Using the list above, please report on the activities implemented during the quarter. Describe if any targets were achieved, or explain any variance in achieved versus planned activities in the quarter. Explain who the main beneficiaries were.

**3.2.1 RESULT AREA 1: ENT (DIAGNOSTIC AND SURGERY) AND REHABILITATIVE SERVICES (AUDIOLOGY AND AUDIO-VERBAL THERAPY) PROVIDED TO A LARGER NUMBER OF PATIENTS**

During the period under review we made managed to make significant progress towards achieving our targets. We have made steady progress with the provision of speech therapy services as we are getting more referrals from the audiology consultations. We continue to conduct surgeries to provide hope and healing to children suffering from ENT conditions and during the month of January and February we saw an overflow of patients in our Out-patient department which is testament to the continued support we have received from CBM with regards to hospital infrastructure development. Below is a summary of our achievements during this quarter for result area 1;

*Table 1: Quarterly Performance for Result Area 1*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Result 1** | **Specific Activity** | **Q1 Target** | **Q 1 Achieved** | **Quarterly % Progress** |
| R01.01 | Conduct ENT consultations | 1175 | 2201 | 187 % |
| R01.02 | Conduct ENT surgeries (25% of children's surgeries subsidized by CBM) | 90 | 150 | 167 % |
| R01.03 | Screenings during ENT mobile outreaches and school visits within Lusaka District | 1950 | 2600 | 133 % |
| R01.04 | Conduct Audiology Consultations | 1000 | 1071 | 107 % |
| R01.05 | Provide speech therapy sessions for children | 102 | 88 | 86 % |

**3.2.2 Activity 01.01: Conduct ENT Consultations**

Despite the challenges faced regarding the ongoing Covid 19 Pandemic (officially declared a public health crisis on the 14th of March, 2020 under the Public Health Act Cap 295 of the Laws of Zambia guided under the Statutory Instrument 21 and 22) e still managed to provide consultations this quarter screening about 2201 patients equivalent to a 187% target achievement for the quarter (1175 patients). As hospital we decided to reduce the overall number of patients that we were being screening on a day to day basis as a precautionary measure to avoid overcrowding following a directive from the Ministry of Health.

**3.2.3 Activity 01: 02 Conduct ENT Surgeries**

*Chart 1: Pie Chart desegregation by surgery type.*

Under this activity we managed to successfully conduct up to 150 surgeries (106 Minor surgeries, 44 Major surgeries, no intermediate surgeries) from a target of 90 (167% achieved this quarter) mainly due to the fact that the patient turnout at our clinics and outreaches was significantly high. As part of a new strategy to enhance visibility and communication we have revised biographic information section on patient files to include a provision to probe patients on how they got know about the hospital services. This information is then gathered and collected through a mobile android phone data collection tool called “Epi-collect 5 data collection tool” and is analyzed and shared with the team. We hope that gathering this data will help us plan and strategize on how we can prudently market our services to the general wider public.

**3.2.4 Activity 01.04 Conduct Audiology Consultations**

Despite achieving the Quarterly target by 107% (1,071 achieved from a target of 1,000) this activity we saw a decrease in the patients that accessed Audiology services compared to the Quarter 1 of 2019. We have successfully been attending to patients that we have seen for the first time but we observed that there has been a low turnout of patients that require Ear Molds and Hearing Aid Follow up. We observed that some of the patients we provided with Hearing Aids to struggled to afford sufficient transport money to get to Beit Cure Hospital for a follow up which affected our follow up turnout. Audiograms and Tympanograms tests have also declined by 78% compared to 2019 Q 1 due to challenges faced with the ongoing global pandemic and the terror gassing events that accumulated within the month of February. This has greatly affected the ceiling of our patient turnout, see table 2 below which demonstrates the impact that the Covid 19 and Gassing attacks had on the outcome of our services, primarily with Audiology services.

*Table 2: Below provides a disaggregation of the main Audiology Consultations conducted at Beit Cure Hospital in 2020 Quarter 1 vs 2019 Quarter 1.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Description |  |  | 2020 Q1 Achieved | 2019 Q1 Achieved | % Change in the Patient Turnout |
| Audiograms & Tympanograms | | | 686 | 1,080 | -78% |
| Hearing Aids Dispensed | | | 55 | 73 | -14% |
| Ear Molds + Hearing Aid follow up | | | 183 | 249 | -15% |
| ABR + Other Audiology Services | | | 147 | 240 | -24% |
| Total | | | **1,071** | **1,642** | **(Av) 21%** |

**3.2.5 Activity 01.05 Provide speech therapy sessions for children**

BCH managed to conduct 88 assessments from a target of 102 for the Quarter resulting in 86% of the progress achieved for the Quarter. Due to current Global Pandemic, Beit Cure Hospital reduced on the total number of patients we were assessing as a protective measure proposed by the Government which may affected the total number of patients we saw.

**3.3 RESULT AREA 2: STRENGTHEN THE ZAMBIAN HEALTH SYSTEM THROUGH SUPPORT TO IMPLEMENT THE NATIONAL ENT PLAN AND MEETINGS AMONGST RELEVANT STAKEHOLDERS.**

**3.3.1 Activity 02.01 Biannual meetings of the National ENT Technical Committee**

We did not undertake this activity under this result area although having scheduled to facilitate a meeting during this quarter and in the second quarter as well. We have however struggled to convene members of the committee to meet during the first quarter primarily due to the Covid 19 pandemic. We did explore the possibility of conducting an online virtual meeting but failed in that regard because of busy schedules and commitments that the members have towards helping out their hospitals to fight the ongoing pandemic.

**3.4 RESULT AREA 3: PROVIDE OPERATIONAL MANAGEMENT AND FINANCIAL SUSTAINABILITY IN ENT CLINIC.**

**3.4.1 Activity 03.02 Mobile Clinics scheduled and held twice a week in local clinics and schools**

We observed a decline in the total number of patients that turned out at our clinics despite efforts made to conduct field outreaches and mobile clinics. Due to the current global pandemic and countrywide gassing and mob justice terror attacks, we experienced low turnouts of people to access our services. We still however, in the times when we did get out into the field manage to get a positive turnout when the situation within the country was normalized within some of the weeks in the quarter leading to a completion rate of 133% on patients screened through these activities for the Quarter but we fewer outreaches conducted.

*Graph 1: Patient Distribution of the School Screenings and the Outreach Clinics.*

**3.4.2 Activity 03.03 Facilitate annual certified audit and respond to outstanding audit issues**

This process is underway and commenced in the last week of March the audit firm that was contracted to undertake the audit is called Client Focus Solutions based in Lusaka, Zambia. The audit officially commenced on the 1st of April, 2020 with talks to engage them having commenced in the last week of March. They have since submitted the 1st draft audit report on the 30th of April, 2020. Despite growing anxiety caused by the global pandemic we still managed to select the approapriate auditors who had since been working from their office premises as a public health safety measure.

# **4. Challenges and Lessons Learned**

GUIDELINES: Please complete the table below with challenges that were encountered during the reporting period and the lessons learned. Include any solution that you plan to implement in the next reporting period. (If you have used the Status Column in the Indicator Tracking Sheet (Column K) to report Challenges against specific indicators, make sure you elaborate on the challenge in the table below)

|  |  |
| --- | --- |
| Challenge | Lessons learned / solutions |
| Country Wide Gassing and Mob justice terror attacks (experienced between February 10th to March 6th, 2020) | As a hospital we significantly reduced on the number of school screenings and mobile outreach activities we conducted due to the terror and mob justice attacks that the country was experiencing. These attacks were characterized by the following:   * Arsonists attacking people typically during the night time with an anaesthetic chemical to put you to sleep. * Arsonists also drew blood from an individual whilst asleep and it was speculatively observed that the blood was utilized it for rituals ceremonies. * The public began to take the law into their own hands and kill any suspected person by means of mob justice/stoning to death. * The public was also attacking innocent medical staff seen to be masquerading the streets as possible suspects of the main suppliers of the chemicals being used by the gassing arsonists. * Health care staff were also in danger of being attacked by the mob at any interval during the day in suspicion that they carried gassing chemicals.   According to Aljazeera world news on the 14th of February, 2020, the President of Zambia took up a security measure to deploy the Zambian army troops in Lusaka City streets to help maintain law and order. As a hospital we took up a measure to suspend all field related activities at an appropriate time and paid dividends because none of our medical staff were affected by them. It did however limit our ability to conduct as many outreaches as we normally do and thus may have limited the impact of our work. |
| Global Pandemic (COVID 19) virus. | This has affected the world at large although Zambia has not been significantly hit by a spike in the number of cases. In line with the Public Health Act Cap. 295 of the Laws of Zambia, and guided by the two Statutory Instruments, SI 21 of 2020 which designates COVID-19 as a notifiable disease and SI 22 of 2020 which provides additional regulations to facilitate management and control of COVID-19 both issued on March 14th of 2020 (Official Ministerial Press Briefing on COVID 19, 17th March, 2020) measures however have been implemented as a directive from the government of Zambia through the Ministry of Health to avoid crowding and practice social distancing. As a hospital we have reduced on the total number of consultations and screenings that we normally conduct but on the other hand have focused on treating only the patients that were booked for surgeries. This will positively impact the total number of surgeries that we conduct on a day to day basis as we shall be conducted more surgeries ultimately changing more lives of the people we serve. |

# **5. Changes in Implementation Plan and Personnel (if applicable)**

GUIDELINES: Please use the space below to specify any changes to (I) the implementation plan (strategies, timelines, targets or key results; also specify if any approval for changes has been sought from CBM), (II) any changes in personnel at the organization’s senior management level, (III) key positions related to the project implementation.

**Change 1:** **Request to resume all Field Related activities in June, 2020 pending a COVID 19 situational analysis**

All field related activities such as Outreaches, Caregiver/Parent group meetings and community stakeholder mapping outside of Lusaka Province have since been pushed to commence within the month of June upon which a thorough risk assessment shall be conducted to determine whether it will be suitable to commence on implementation. We do anticipate that around that period of time the situation around the COVID 19 and the Gassing incidents that brought fear and anxiety within the country will have been neutralized and the environment more suitable for implementation.

**Change 2. Beit Cure Hospital Zambia’s Executive Director is leaving in July, 2020.**

After almost 3 years of service to the Beit Cure Hospital here in Zambia, our Executive Director Steve Hitt officially announced that he shall be leaving Zambia with his last day being the 30th of June, 2020 and going back to the USA (his home country). The Hospital has since put up an advertisement on their official website (which is still running) on the recruitment of a new Executive Director who should be scheduled to start around the period after Mr. Steve Hitt’s Departure.

**6. Risk Update (If applicable)**

GUIDELINES: Have any of the risks identified during the project design materialized or changed?

**Risk 1: Global Pandemic (COVID 19 Virus)**

Currently the country still has less than 100 (as of 30th of April, 2020) people infected with the virus as progressive measures had been put in place prior to the outbreak of the virus within the country. The government has however cancelled all public gatherings, all primary, secondary and tertiary institutions have closed indefinitely and they have implemented a stay at home order for all non-essential staff and most of the public that work primarily within the informal sector as a precautionary measure. This continues to posse a great risk on the project with regards to patient turnout at the Hospital and our ability to conduct mobile clinics and school screening within Lusaka Province. However, this has created an opportunity for the hospital to undertake more surgeries per day and per week above and beyond the normal trend leading to us helping curing and healing more children that need those surgeries.

**Risk 2: Gassing Incidents and Mob Justice Terror Attacks Country Wide**

At the inception of COVID 19 Virus, we observed a sudden decline in the number of gassing incidents and mob justice terror attacks within the country. According to Aljazeera world news dated 14th of February, 2020, the government did deploy the army to patrol high density communities as a security measure that seemed to stabilize the situation temporarily before the Global Pandemic was declared. There could still be a minimal level of uncertainty with regards to those attacks and to whether they could resume amid a reduction to COVID 19 but the project team is keeping a close eye on those events hoping that nothing will spiral out of control.

**Risk 3: Devaluation of the Zambian Currency / Exchange Rate Effect**

The harsh economic challenges that the country is facing has posed a serious risk on the kwacha losing value to the US dollar which has weakened the purchasing power of the kwacha thereby enabling it lose more value. According to the risk register developed prior to the commencement of the project the exchange rate for the Zambian kwacha was pegged between ZMK10- ZMK12 to 1 USD. Currently according to the Bank of Zambia ([www.boz.zm/historical-series-of-daily-zmw-usd-exchange-rates-zmw.htm](http://www.boz.zm/historical-series-of-daily-zmw-usd-exchange-rates-zmw.htm)) the Zambian kwacha to US Dollar as of 31st of March was at a Mid-rate of ZMK 18.11 to 1 USD. The impact and likelihood on the exchange rate devaluation and inflation on the risk register is rated “4” in terms of its negative impact to the project goal. The devaluation in the Zambian kwacha directly reduces the purchasing power of the kwacha. This significantly possess a risk on the project and our ability to have sufficient resources to implement activities.

**7. Activity Forecast**

GUIDELINES: Which activities are planned to be implemented in the next quarter? Please list down the Activity Name and Number only.

3.1 Activity 01.01 Conduct ENT consultations

3.2 Activity 01.02 Conduct ENT surgeries (25% of children's surgeries subsidized by CBM)

3.3 Activity 01.03 screenings during ENT mobile outreaches and school visits within Lusaka District

3.4 Activity 01.04 Conduct Audiology Consultations

3.5 Activity 01.05 Provide speech therapy sessions for children

3.6 Activity 03.02 Mobile Clinics scheduled and held twice a week in local clinics and schools

3.7 Activity 03.03 Facilitate annual certified audit and respond to outstanding audit issues

# **8. Photos**

GUIDELINES: Please use the space below to paste any photos, with captions, news items etc. related to the project. Please ensure that written consent has been obtained from all identifiable people in the photos.

# **9. Comments from CBM Country Office[[1]](#footnote-1)**

GUIDELINES: **(Only to be filled by the Country Office)** Please use the space below to briefly comment on the quality of project implementation and reporting, and describe whether the project is on track and on schedule. If a monitoring visit was conducted during the quarter, what were the main findings and recommendations?

Like other projects affected by Covid, this project was unable to conduct outreach clinics due to movement restrictions. All outreaches were therefore rescheduled to a time the situation may normalize. The hospital based clinics were carried out though at a smaller scale, owing to reduced number of clients.

1. If there is no Country Office, then the Regional Office/IAA/TU is invited to share their comments as per the arrangement. [↑](#footnote-ref-1)