



WASH kit arriving at Luangwa District

## The Virtual Doctors in the face of a pandemic

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*The Virtual Doctors is the UK's leading primary health care international Telemedicine charity and the largest charitable telemedicine provider in Zambia with a small pilot currently running in Malawi. The organisation's principal aim is to improve primary healthcare and prevent unnecessary referrals to hospitals. Using a Smartphone App, the service connects isolated health centres in rural Zambia with volunteer doctors, based predominantly in the UK.*

## Update on our Operations

Our service is now available in 140 health facilities in 23 Districts across 5 Provinces in **Zambia**, covering a population catchment of about 2.5 million people (that's 16% of the population). Enabled by our wonderful funders and our local team's amazing efforts, we are now offering our Virtual Doctors service to 40 additional clinical users in 8 new Districts in Central Province since December 19. We plan to extend the VDrs service to all 10 Provinces of Zambia in time.

We continue to support 5 health facilities in Lilongwe District in neighbouring **Malawi**. We are developing a strategy to take us to our next level of expansion extending beyond our successful pilot. Having signed a Memorandum of Understanding with the Malawian Ministry of Health in the spring, we have entered a partnership with the main mobile provider, Telekom Networks Malawi (TNM), which will be very helpful in advancing our service country-wide.

With the continued uncertainties of the global pandemic, there may be temporary setbacks to our expansion plans. For safeguarding, and to give us time to assess the impact on our cash flow through potentially reduced public donations, we are closely monitoring the UK, Malawi and Zambia government guidelines on health & safety and travel before taking further decisions on timing.

### Clinical Officer Spotlight

Pecidah Chikonde is a Clinical Officer at Nampundwe Rural Health Centre since 2017, this being her first station since completing school in 2015. She started benefitting from the Virtual Doctors Service in 2018 and says: *"it has been a tremendous journey. The Virtual Doctors have given me more confidence because working in a rural area is not easy. They have also added to my skills and knowledge, that is why I rely on the VDrs consultations." The WASH commodities that were distributed to us have really helped the facility. We are really grateful for all the things you gave us to help fight the coronavirus. This shows us that you really care about us".*

When she is not treating patients and discussing cases with Volunteer Virtual Doctors, Pecidah loves to cook and try out new recipes!



### Case study: Poisoning

Last month we received a referral from one of our new sites, Silverland Rural Health District, in Serenje District, Central Province. They were faced with a 47-year old gentleman who was extremely unwell. His wife reported that he had taken 'an unknown poison'. On assessment they found that his heart rate was very slow, his blood pressure was dangerously low, and he was only semi-conscious. They had performed some immediate resuscitation measures but contacted the Virtual Doctors for further support and assistance.

The case came through to one of our Emergency Medicine Volunteers who works in toxicology. The mainstay of treatment in cases of poisoning is supportive; there are very few antidotes available. However, the Virtual Doctor answering this case recognised from this man's presentation that he may well have ingested a compound containing organophosphates (found in certain insecticides). In such cases there is a specific treatment, which can be lifesaving. The Virtual Doctor gave advice about general care and management of the patient and also shared how to administer the treatment drug in small repeated doses. With this vital intervention the patient made a dramatic improvement over the next few hours. We were pleased to learn that by the following day the patient was stable, though he still remained under observation.

The Virtual Doctors' input did not end there. The volunteer was able to share information about potential signs of ongoing complications post treatment and during the recovery period.

This case study demonstrates that our work is valuable and not just about the immediate case management but also about ongoing learning and sharing of best practise. Other case studies can be found [on our website](#).

[Take a Virtual Tour](#) of Silverland RHC featured in the Case Study above.

## The pandemic in Zambia

As of 26<sup>th</sup> June there have been 1531 cumulative cases of COVID 19 within Zambia. The Virtual Doctors volunteer medical advisors have encountered 51 cases with possible COVID-19 symptoms since 1 March and have continued to give advice on a wide range of medical conditions throughout this time. COVID-19 can present with many non-specific symptoms and can mimic many other medical conditions. This can be particularly challenging in areas with endemic malaria, HIV and TB where our clinical officers work. When a clinical officer encounters a suspected case, they are advised to follow local and national guidelines and escalate cases to the public health team for the area. Our volunteers complement this and can help discuss differential diagnoses, symptomatic management and supportive treatments.

We surveyed 140 clinics in rural areas throughout Central, Lusaka, and Southern Province of Zambia:

**WASH\* needs**

- 6% had more than one wash station for patients to wash hands before entering the building. (Most have taken the wash basins from the labor ward or toilets to accommodate.)
- 40% have soap that would last longer than a month.
- 47% have clean running water within the facility (the rest collect water at a central location to bring to the facility)



\*Water, Sanitation, and Hygiene

PPE/Disinfectant/Infection control needs: PPE: 26% have a box of 25 face masks, 22% have gloves, 1% have isolation gowns. 4% have disinfectant at the facilities to wipe surfaces. Infection control: 21% of the facilities have had some sort of infection disease training or training on COVID-19. Most facilities have stated that 1-2 people have been trained at district level.

When the Covid-19 pandemic struck, an unprecedented crisis began. We surveyed over 100 of the health centres using our service to assess their ability to respond to Covid-19 and devised a plan to further support the Ministry of Health's strategy to keep health workers safe so they can continue to provide an essential primary healthcare service in local communities. This involved identifying the needs of the health workers' access to simple hand washing facilities. Our Covid-19 response entails two essential initiatives: Water, Sanitation and Hygiene (WASH) and a supplementary educational initiative that increases the capacity of medical personnel to prepare and respond and ensure primary health care continues to be available in their communities. The WASH kits were funded through our appeal. They are simple foot-operated hand-wash stations and are issued with hygiene supplies along with information posters in multiple languages setting out approved Zambian government guidelines on Covid-19 prevention. We have also produced videos available to rural clinic staff on how to use the equipment and added a COVID resource bank to our forum which is available as an App on all the clinical officers' handsets.



WASH kits are well-received at Fishing Camps Health Post, Siavonga District, Southern Province, Zambia

Our educational initiative has helped to sensitise communities to the threat of Covid-19 and spotlighted how to help prevent infection and spread. Our messaging has inspired some of our Clinical Officers who have shared their own experiences of working with our service through the creation of local videos around the themes of infection control etc. This will help to raise prevention awareness in their communities as part of their frontline healthcare provision. [Watch them here](#). Beyond helping to contain the spread of the virus, our WASH initiative has helped to improve the general

sanitation capacity at the health facilities we support which translates to a positive impact on patient and health worker wellbeing.

We want to extend an enormous thank you to our team in the field who worked tirelessly to source and deliver the WASH kits, and to the donors who have made this possible by supporting the Fund which was launched in April.

## Monitoring & Evaluation

We have secured transformational funding for our Impact Assessment. By employing expertise to design a new framework we will significantly upscale our current monitoring & evaluation (M&E) methods. They will also assist with training to help improve the M&E skills of our in-country team and will be commissioned to carry out a major evaluation to measure the impact of our service since the launch of the app and cases portal in 2016. Improved impact assessment will provide valuable data and information required to help us build on and strengthen the service through our rapid expansion periods. These findings will also be useful to demonstrate to donors the impact their financial investments are having on stakeholders, beneficiaries and the wider benefits to the community and local Ministry of Health.

## Income generation

We began 2020 in a strong position for expansion. Our **BBC Radio 4 Appeal** expertly made by Simon Mayo in December, and underpinned by our **Winter Campaign**, surpassed all expectations and raised almost £35,000. Following the departure of part-time fundraiser Ros Bird, we've engaged a full time Zambian Fundraising Consultant now living in the UK. Chupa Phiri's brief was to focus exclusively on building upon our already established Trust & Foundation fundraising strategy. Since the Covid-19 crisis struck however, Chupa's efforts have been channelled towards obtaining backing for our Covid Response Fund. Chupa's initial 6-month contract was extended for an additional 3 months, thanks to some restricted donations to specifically cover her fees from two loyal supporters. Sadly, with the cancellation and postponement of events, we have not been able to promote our purchased **Royal Parks Half Marathon** places and other community activity has also been impacted. We hope our challenge event supporters will return in the future as our Royal Parks places have been rolled over to 2021. Our ongoing **Covid-19 Appeal** to date has raised approximately £38,000 and we have very nearly completed our mission to equip the sites we support.

## Technical Update

We continue to regularly update our telemedicine app and patient case portal and monitor the feedback and needs of the Clinical Officers and medical volunteers. Responding to the need to speed up consultation responses times and improve data impact reporting, there is now functionality for volunteers to answer cases from their smartphones and tablets as well as their desktop PCs. We also plan to introduce a new Monitoring and Evaluation dashboard to improve data reports.

## Governance Team

Our Annual Report and Accounts is currently with the Trustees for approval and will be published shortly and will report a number of changes. Gavin Marsh stood down at the end of 2019 after 3 years as the Virtual Doctors' Treasurer. Our new Treasurer-elect is Gary Larnder. Gary is an ACA qualified finance professional with over 6 years post qualification experience, developing in a FTSE100 business and his appointment is in the process of being formalised. Our Chairman, Ian Kerr stepped down in February 2020 after four years. Ian brought a significant amount of enthusiasm, fundraising knowledge and open networks to his role. Ian is succeeded by Graham Precey, who is already making his mark and harnessing his portfolio of organisations with high social and environmental impacts.

## Staff Team

The Lusaka Team has grown to 4 full time staff. Shakerrie Allmond, Regional Director of Operations, manages the day to day operations and is developing strategic partnerships in Zambia. Shakerrie is joined by Pralin Koongo, Clinical Liaison Specialist, Chikondi E. Banda, Clinical Care Service Associate, and Stellah Chilembo, the Clinical Liaison Manager. Mwiya Martha Namakau is the current Communications and Projects Intern. To comply with social distancing, Huw Jones and Lina Woehrling are working from home bases with the Admin Office temporarily closed.

## Medical Team & other Volunteers

Due to work pressures our Medical Team Director, Simon Gazeley sadly had to withdraw from the Medical Team and has been replaced by colleague volunteer Dr Daniel Grace. The Medical Team leadership was re-structured to include an Education Lead (Dr Jo Loveridge), a Communications Lead (Dr Luke Kane) and a Research Lead (Dr Graziella Quattrochi).

Our heightened media coverage has helped to raise the profile of the Virtual Doctors and attracted many new volunteers who have very kindly signed up to support case consultations from the field in Zambia and Malawi. Cases are now answered by more than **160 volunteer doctors**, covering 23 medical specialisms.

STOP PRESS We still urgently need support from volunteer specialists in Oncology, ENT, Gastroenterology and Vascular Surgery if you know of anyone – please spread the word!

Watch here Dr Ian Cross, Medical Professional Volunteer Virtual Doctor talks about his experience in Zambia and with the VDrs and endorses our Covid-19 response.

We continue to benefit from the input of 3 software developers to have helped with our app development since inception and also acknowledge the continued contribution of Terry Cann our IT and Webmaster. Other volunteers also provide their time on an ad hoc basis. During the BBC Appeal run up we were fortunate to benefit from pro-bono support from Digital Marketing agency MCM Net Ltd and more recently enjoy the support of Owen Marshall and Sarah Burke for video edits.

## What our Stakeholders say

Clinical Officer Godwell Siame, Luangwa District *"Virtual Dr a Friend. I have worked with Virtual Drs for over 3 years now, and one thing I have come to discover about the organisation is the friendliness of the people running it. This is a program that has come to my heart and it has been embedded in my career. Receiving COVID19 relief Aid from Virtual Dr to the facility I work from shows how much the organisation cares for me as a member of the team, it shows how the organisation cares for my safety. The things that we received cost a lot of money and I am here to say thank you for love and care. I know one day we will testify and never regret staying while others quit."*

Lewis Namuswa from Shibuyunji District *"We are so grateful virtual doctors. You are indeed an all-weather friend and partner in delivery of quality health care services."*

Graham Precey, Chair of Trustees, Virtual Doctors UK Board *"It's been an absolute pleasure to join the Virtual Doctors as a volunteer Chair. Over the past 3 months we have seen amazing efforts from our UK medical volunteers to keep up our service to Zambian and Malawi Clinical Officers despite the impact of COVID-19. By 2025 we will provide 750 rural healthcare workers in Africa with access to medical knowledge that will improve the health of 18,000 people per year. We thank our donors for helping us to get there one case at a time."*

## Finally

We could not do what we do without the support of the general public, institutions and organisations. We have managed to keep our operations going throughout the recent lockdown in the UK and restrictions in Zambia and Malawi and as ever are so grateful to those who have chosen to support us during this difficult time or who are planning to help in the future. We look forward to keeping you up to date.

We hope you find this Report inspiring and if you do, we ask you to help us raise awareness by sharing with others. A digital version is also available to download on our [website](#) news section and you can follow us on [Twitter](#), [LinkedIn](#) and [Facebook](#).

Huw Jones - Executive Director

Graham Precey Chairman of Board of Trustees

June 2020

For more information go to [www.virtualdoctors.org](http://www.virtualdoctors.org)

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## APPENDIX *Based on usage data from Zambia and Malawi*

