### **Notes for Completion:**

- Please note, with the exception of the cover page, this report will be published.
- To ensure compliance with GDPR, refrain from using any personal or identifying information unless you have obtained consent from the data subject and are content for this to be made public.
- Answer all questions in the template provided, noting the word limits.
- Include all relevant information in the reporting template hyperlinks and annexes will not be accepted as part of the report.
- Ensure answers are clear, concise and in plain English. Explain acronyms and avoid using jargon.
- Please ensure this end-year report covers the full reporting period (12 months).

Supporting Documentation  Check box to confirm key	Logical Framework, which reflects any changes in this reporting period.	
documents have been submitted with this report	Budget	
	Case study	
	Risk register	
As the project manager responsible for the completion of this report, I hereby confirm the information included is accurate and complies with the notes for completion.		
Scotland-based Project Ma	anager: S	gnature:

1. G	. General project information		
1.1	Project reference Number	RCSPG – Livingstone Fellowships	
1.2	Name of organisation	Royal College of Physicians and Surgeons of Glasgow	
1.3	Lead partner(s) organisation	Academy of Medical Royal Colleges and Faculties in Scotland	
1.4	Project title	Capacity Strengthening for Doctors: Livingstone Fellowship Scheme	
1.5	Reporting period	From: 01/04/2019 To: 31/03/2020	
1.6	Reporting year	Year 2	
1.7	,	26/03/2018	
	Project start date		
1.8	Project end date	31/12/2020	
1.9	Total project budget*	£375,001	
1.10	Total funding from Scottish Government*	£375,001	
1.11	Provide a brief description of the project's aims, highlighting which of the Sustainable Development Goals (SDGs) your project is working towards? (200 words)	The aim of the Livingstone Fellowship is to enable doctors from Zambia and Malawi to come to Scotland for specialist medical training through the Scottish NHS. The grant supports capacity strengthening of the medical profession in Zambia and Malawi.  The project contributes to the Sustainable Development Goals of quality education by providing a means to specialist medical training and to the goal of good health and wellbeing by developing, recruiting and training health workers from Zambia and Malawi.	
2 Proi	act progress and result		

#### 2. Project progress and results

Please use this section to give an update on the progress the project has made during this reporting period.

Provide an update on the progress your project has made over the past 12 months. Use this space to update us on what has gone well and any challenges you have experienced, detailing how you have overcome these. (Max 500 words)

All doctors have now taken up placement within SNHS.

**Output 2**: Successfully placed doctor in Q3 of Year 2. Doctor adapted to role and the SNHS. He gained operating skills to manage specific surgeries and operations in Malawi, as well as gaining experience in other surgeries currently not routinely available in Malawi. COVID -19 has had a significant impact on the doctor's placement. All teaching relating to specialty has ended along with outpatient clinics and teaching opportunities. The doctor did plan to attend educational courses using

study leave budget however, courses were cancelled due to COVID-19. The doctor took the decision to end his placement early, returning to his home country before travel restrictions tightened. The College has been in regular contact with the doctor since his return to Zambia and are in discussion about future learning opportunities.

**Output 3**: The doctor has adjusted to the SNHS and gained experience across two hospitals within NHS Greater Glasgow Clyde. The doctor has gained clinical experience, attended training, conferences and teaching sessions alongside specialty trainees in his specialty of Rheumatology. The doctor has learned different clinical approaches to rheumatology care, as well as continuing to develop teaching skills to cascade training to healthcare workers in Zambia. Unfortunately, the doctor has also had to end his placement 3 months early due to COVID-19.

**Output 4**: The doctor has adjusted to the SNHS. He has gained experience in learning new surgical techniques and skills, as well as learning and understanding the management of certain conditions that currently have poor outcomes in Zambia. The doctor has now undertaken laparoscopic procedures, something which is not readily available in Zambia. The doctor intends to utilise contacts made in the UK to train and support nurses in Zambia.

All elective work has now stopped due to COVID-19 however, the doctor will continue his placement, completing emergency work only. The doctor has also been able to learn from the SNHS methods of preparing and managing COVID-19. This has allowed shared practices with healthcare professionals in Zambia, which will support their work preparing for COVID-19.

The doctor is due to finish his placement in July and will continue to access his UK study leave budget, providing a report on any training opportunities undertaken at the end of his placement.

### Output 5:

**CPD in UK:** As agreed with the Scottish Government, we have carried over underspent funds to provide a UK study leave budget of £3,500 to each Fellow.

The budget was made available to all Fellows in March however, not utilised due to COVID-19. Due to unforeseen circumstances, we would like to reimburse costs for Fellows who had undertaken CPD prior to budget being approved.

The remaining Fellow will continue to seek learning and development opportunities using study leave budget and will provide a reflective learning report after each CPD undertaken.

**Educational support in home country:** A financial bursary of £15,000 will be allocated to each Fellow to support their training needs and service development in Malawi and Zambia.

We are currently in the process of establishing partnership organisations for Alumni Fellows. We intend to partner with organisations through the Scottish Government International Development community.

Fellows will also have the opportunity to undertake the College mentorship programme with an agreed educational plan set out at the start.

#### Additional notes:

- All monitoring is up to date. Progress reports have been received for all Fellows with no concerns being raised.
- A case study has been completed for each Fellow which has been included alongside report.
- Payment terms have now been agreed for the part repayment of the bursary.
- As per mid-year report, the team were due to organise a working lunch for Fellows and stakeholders of the project. This was due to take place in Q4 of Year 2 but has been cancelled due to COVID-19.

#### **Next steps:**

- Continue to monitor progress of remaining doctor and seek report on any CPD / learning opportunities undertaken through study leave budget.
- Output 5: reimburse study leave costs and finalise details of partnership organisations for educational bursary in home country.
- Has the focus or plans for delivery changed significantly during the last year? Please highlight what issues or challenges prompted this change and how you anticipate any changes in focus will impact on the previously agreed outcomes (Max 500 words)

Two doctors recently ended their placements early as a result of COVID-19. Although these changes were sudden, the team are confident that this has not severely impacted on the agreed outcomes.

All doctors have now gained experience working within the SNHS and have acquired clinical and non-clinical skills to utilise on return to their home country. Each doctor has built up a network of contacts in the UK and will continue to liase and work with these contacts in their home country seeking support and advice where necessary.

Taking into consideration what you have achieved during the last 12 months, along with any challenges you have experienced, please highlight to us what lessons you have learned, and how these will be applied in the project in the future. (Max 500 words)

The project team faced some challenges early on in the project. The challenges were mainly due to delays in receiving documentation from various different stakeholders. Due to the time sensitive nature of the process, these delays resulted in a delayed start date for the doctors. The team provided increased administration support during this time to ensure impact was kept to a minimum.

Going forward we will update the guidance documentation that is made available to Fellows and hospitals, to speed up the pre-arrival process and reduce administration

sup	support for the project in future.		
3. Partner	ships and collaboration		
	n allows you to discuss how p wider collaboration and sharin		gressing on the project,
3.1	Provide an update on how pa Let us know about any highli responsibilities. (Max 350 wo	ghts, challenges or chang	
	There are three main stakeh	nolders in the scheme: SN	IHS, GMC and AoMRC.
	<b>SNHS:</b> the project team wor process. Additionally, we rer placement to assess their po	main in regular contact thr	
	The project team experience turned on time, leading to a The team also experienced impact on our midyear budg	delay in receiving GMC redelays in receiving final sa	egistration for each doctor.
	Overall, the partnership wor ed improvements mentioned		
	<b>GMC:</b> The College is a GMC being sponsored for GMC re		
	AoMRC: The Academy of Mathematics the government exchange so allowing doctors to apply for and the College has run small	cheme and provides the ( a Tier 5 visa. The partne	Certificate of Sponsorship
3.2	Have any Scotland-based staff visited the project in the past 12 months? Give details including key activities and outputs of these visits.		•
	N/A		
Date of vis	it	Key achievements / outputs of visit	Follow-up actions
N/A			
N/A			
N/A			

3.3	Please tell us about any dissemination and learning throughout this reporting period. How have you promoted effective learning across the project? Please explain what processes you have used both internally and externally to share learning from the project so far, and how this learning is being used. (Max 500 words)	
	All three Fellows arrived at various times throughout the project. The team were able to look at issues/delays which arose from previous Fellows to improve processes for remaining candidates arriving into the UK	
	The SNHS were able to provide a smoother induction for Fellows who arrived later in the project, as they were aware of the challenges faced by previous candidates.	
	All learnings from the project will be included in the guidance documentation for future recruitment opportunities.	
3.4	Has the project completed a mid-term project evaluation in the past 12 months (or is one planned for the next 12 months)? Please provide detail of the outcome of the evaluation. (Max 500 words)	
	The project team have not completed a mid-term project evaluation in the last 12 months but plan to undertake an impact assessment at the end of the project.	
3.5	Please highlight how you are maintaining an awareness of others working in this region, giving details of collaboration, joint working or partnerships with others. (Max 500 words)	
	The project is run in a similar way to the Medical Training Initiative (a temporary worker – government exchange scheme for Tier 5 visas) which is another scheme offered by the College. The processes involved in this scheme are very similar to the Livingstone Fellowship and the stakeholders remain the same.	
	There are regular meetings between stakeholders to ensure everyone is kept up to date with any changes relating to the scheme.	
4. Safegu	uarding and fraud	
Please er	nsure you complete questions 4.1 and 4.2 even if you have no incidents to report.	
	Have there been <b>any</b> safeguarding incidents, either relating to staff/volunteers or beneficiaries of the Grant or the Project, in the last 12 months?	
	N/A	
	Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom?	

	N/A			
4.3	Describe what action has been taken, and highlight any lessons learned.			essons learned.
	N/A			
4.4	Have there been any incidents in the last 12 months of financial mismanagement, theft, fraud etc, either relating to the Grant or the Project or which affects the organisation?			
	No			
4.5	Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom?			
	N/A			
4.6	Describe what action has been taken, and highlight any lessons learned.			
	N/A			
5. Risk a	ssessment			
5.1	Have any issues materialised during this reporting period? If so, how were the addressed?		? If so, how were they	
	Please refer	to risk assessr	ment provided at application s	tage.
Assump	tion	Risk	Action taken	Was this included in the Risk Assessment Table in your application?
6. Inclus	ion & accou	untability		

Thinking specifically about the past 12 months, please use this section to tell us how you are mainstreaming through your project, ensuring that you are aware of and actively

workir	ng to reach vulnerable and marginalised groups.
6.1	Is the project still relevant for the beneficiaries you are working with? Please highlight how you ensure accountability on the project, ensuring beneficiaries have the opportunity to feedback on the project and influence its development? (max 350 words)
	The project is an invaluable opportunity for doctors from Zambia and Malawi to come to Scotland for specialist medical training through the SNHS.
	The Scotland based staff are in regular contact with the doctors throughout the duration of the project. This allows doctors to raise any concerns they may have relating to their placement.
	As set out at the initial stages of the project, the project team request 6, 12, 18 month progress reports from each doctor's supervising consultant. The team also ask doctors to provide feedback, ensuring any concerns can be resolved quickly.
	The doctors are an integral part of the project. All learning and development during placement is done on a needs led approach, seeking guidance from doctors at each step of the process.
6.2	Do you have an awareness of particularly vulnerable or marginalised groups within the community in which your project is working? Please give details on how you are disaggregating data to recognise these groups across the project. (Max 350 words) N/A
6.3	How is your project working to actively meet the needs of these vulnerable and marginalised groups, ensuring they are benefiting from the project? Please outline any mechanisms you are using. (Max 350 words)
	N/A
6.4	Taking into consideration some of the challenges of mainstreaming, please describe any challenges you have faced in reaching vulnerable and marginalised groups, how you have overcome these or plans you have developed to support inclusion on the project. (Max 350 words)
	N/A

### 7. Financial information

This section will be reviewed alongside your budget report, which should be included alongside your narrative and logframe. Please ensure this spreadsheet is completed with both a detailed breakdown of expenditure for this financial year, along with your projected spend for the next financial year.

Please note carry-over of funds to the next financial year should have been agreed with the Scottish Government by January 31<sup>st</sup> of the current financial year.

7.1	With reference to your budget spreadsheet, please give a detailed explanation of any variances between planned and actual expenditure, including reasons for the variances and whether these are as a result of timing issues, price achieved, quantity etc. If these are temporary variances, please outline plans for expenditure. (Max 500 words)  A budget spreadsheet has been submitted alongside the end of year report.  Temporary variances between planned expenditure:  1. Dissemination costs: Variance of £1,250. Unfortunately we were unable to utilise this budget due to postponement of activities. This is a temporary variance and plan to spend in year 3.  2. Marketing costs: The project team had planned to produce material relating to current Fellows in Year 2 of the project but unfortunately were unable to fulfil this within the set timescales. This is a temporary variance and plan to spend in year 3.
	True variances between actual expenditure:
	<ul> <li>Output 2:</li> <li>Variance of -£7,288.00 in period (Reduced salary costs – placement completed early due to C-19).</li> <li>Travel and subsistence variance of +£334.00 in period (travel planned for year 3 moved to Year 2).</li> </ul>
	<ul> <li>Output 3:</li> <li>Temporary variance of +£28,314 in period. (This is due to phasing of salary costs – increased in Year 2 and reduced in Year 3).</li> <li>Travel and subsistence variance of -£150.00 in period (travel costs lower than estimated).</li> </ul>
	<ul> <li>Output 4:</li> <li>Temporary variance of +£7,504 in period. (This is due to phasing of salary costs – increased in Year 2 and reduced in Year 3).</li> <li>Travel and subsistence variance of -£150.00 in period (travel costs lower than estimated).</li> </ul>
7.2	Please give details of any capital expenditure in this reporting period. (Max 350 words)
	N/A
7.3	Please explain how you have worked to ensure cost effectiveness on the project in the past 12 months, whilst maintaining the quality of delivery. (Max 350 words)
	Throughout the project, the team have sought the most cost effective methods of travel and accommodation and where possible, made bookings in advance to reduce costs. The team also sought advice from an employment advisor at the Scottish Government to verify salary costs for each doctor. Salary costs were reduced based on advice we received.

### 8. Any other information

Use this section to tell us any other relevant information regarding your project. (Max 500 words)

The project has proven to be a successful means to respond to the identified need of strengthening the capacity of the medical profession in Zambia and Malawi.

The case studies provided alongside the end of year report clearly show the impact that the project has had on the doctors learning and development. It also shows the potential future opportunities available to service development in country.

The College plans to complete an impact assessment of the overall project at the end of Year 3.