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| **The Africa Mother and Child Grants Programme 2020 - 2021****Grant Application Form** |

This document should be read in conjunction with **The Africa Mother and Child Grants Programme (AMCGP) 2020–21 Call for Applications** document and the **AMCGP 2020–21 FAQ** document. Further questions will be answered during the **AMCGP 2020-21 Launch Webinar** held on Tuesday 10th December 2019, which will be subsequently made available through the THET website.

Please be as clear and succinct as possible and ensure that any acronyms and technical terms are fully explained.

**This Grant Application Form and the Budget Template (see separate Excel document), along with letters of support from each of the lead partners and any managing partners, should be completed and submitted to** AGP@thet.org **by midnight on Sunday 23rd February 2020. If you do not receive an acknowledgment of your application from us within 48 hours, please assume we have not received your application and re-submit with evidence of your earlier submission such as a dated email.**

# **1. Summary Details**

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| Lead UK or Irish partner organisation |  |
| Lead Low and Middle-Income Country partner organisation |  |
| Project title  |  |
| Project budget total (£30,000-£75,000) |  |
| Project duration(12 - 15 months) |  |
| Project start date[[1]](#footnote-1) |  |

# **2.** **Partnership**

2.1 Please provide contact details for thekey partners involved in this application. If there are more than two partners involved (UK/Irish and LMIC), add more boxes as necessary to include all.

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| **Lead UK or Irish partner (contract holder and overall project lead if different)** |
| Lead UK or Irish Partner  |  |
| Project co-ordinator (name and position) |  |
| Organisation/ Institution  |  |
| Department |  |
| Address |  |
| Email  |  |
| Telephone number(s) |  |

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|  **Lead LMIC partner (lead LMIC partner and in-country coordinator if different)**  |
| Lead LMIC partner |  |
| Project co-ordinator (name and position) |  |
| Organisation/ Institution |  |
| Department |  |
| Address |  |
| Email  |  |
| Telephone number(s) |  |

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| **Managing/additional partner (supporting the delivery of the project)**  |
| Managing partner |  |
| Project co-ordinator(name and position) |  |
| Organisation/ Institution  |  |
| Department |  |
| Address |  |
| Email  |  |
| Telephone number(s) |  |

2.2 Tick the box that best describes each organisation. Please also add registration numbers where relevant. Please note that if you fail to complete this table, your application will be ineligible.

|  |  |  |
| --- | --- | --- |
| Lead UK or Irish Partner |  | Lead LMIC Partner |
| [ ]  | Health Delivery Institution | [ ]  | Health Delivery Institution |
| [ ]  | Health Education Institution | [ ]  | Health Education Institution |
| [ ]  | Regulatory Body (health sector) | [ ]  | Regulatory Body (health sector) |
| [ ]  | Professional Membership Association | [ ]  | Professional Membership Association |
| [ ]  | UK Registered Charity**Registration no:**  |  | [ ]  | Registered NGO**Registration no:** |
| [ ]  | Ireland Registered Charity**Registration no:** |  |

2.3 Please list any other project partners or stakeholders that will play a role in the delivery of the project. *(Maximum 200 words)*

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2.4 History of partnership and project implementation

Please describe the partnership’s experience of implementing projects together (this may include a scoping study). Please also describe any individual partner’s experience of implementing projects in low- or middle-income countries. Please note, by partners we mean the organisations rather than individuals. *(Maximum 500 words)*

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# **3. Justification**

3.1 Please describe how the partnership assessed the need for this project. This might include a formal needs assessment, desk-based research, or face to face meetings. *(Maximum 300 words)*

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3.2 Describe the need that was identified through this process and the problem that this project is trying to address. *(Maximum 500 words)*

Please include key contextual issues that are relevant to this application, including:

* The operational environment at LMIC institution(s).
* An explanation of how the needs are aligned to overseas government priorities and plans.
* Any barriers that may prevent women and girls, and people with disabilities benefitting from the project. This includes barriers to both patients accessing the services and health workers benefitting from any training activities.

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3.3Based on your answer to the above question, please explain what your project is going to do in order to address the identified need, and how your methodology is appropriate to the local context. *(Maximum 300 words)*

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# **4. Project Description**

4.1 Activity plan – List the main project activities. These must contribute to achieving the changes listed below, or to strengthening the Health Partnership during the project implementation period. Mark an X in the quarter(s) in which the activity will take place. Add more lines if necessary.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Activity** | **Quarter 1** | **Q2** | **Q3** | **Q4** | **Q5** |
|  |  |  |  |  |  |
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4.2 Clearly describe up to four changes you expect to see by (a) the middle and (b) the end of the project in relation to your project goal. Ensure the changes clearly relate to the purpose of the AGP and show the changes which you hope to see as a result of the activities which you are carrying out. See the grant FAQ document for examples and guidance. Please do not add more lines to this table. *(Maximum 300 words)*

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| --- | --- |
| **Project goal:** |  |

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| **(a) Changes by the middle of the project:** |
| 1. |
| 2.  |
| 3. |
| 4. |
| **(b) Changes by the end of the project:** |
| 1. |
| 2. |
| 3. |
| 4. |

4.3 Please describe how you will collect evidence that your project has achieved its changes and goal. Please consider:

* What data will you need?
* Who will collect it, when and how?
* How will you analyse it?
* How will you monitor any unexpected outcomes?

 *(Maximum 300 words)*

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4.4 Please fill in the table below with disaggregated data on your proposed project. If you do not know the exact figures, please estimate the number of people who you are aiming to reach.

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|  | **Number** |
| Break down total number of health worker trainees by cadre and gender.*e.g. Nurses x 5 (3F, 2M).* |  |
| Of this number, how many will be trained as trainers? (*Please break down by cadre and gender*) |  |
| Estimated number of patients who will access improved service within the project duration |  |
| Number of UK / Irish staff who will volunteer overseas. |  |
| Number of days in total UK / Irish volunteers spend overseas. |  |

4.5 Describe how you will utilise multidisciplinary teams, and in particular how you will engage with nurses, midwives, or clinical officers. *(Maximum 200 words)*

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4.6 Please indicate which level of healthcare institution(s) your project will be targeting.

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| --- | --- |
| **Healthcare level** |  |
| National hospital |  |
| Regional hospital |  |
| District hospital |  |
| Health centre |  |
| Community *(e.g. public health volunteers based in community)* |  |
| Other (please specify) |  |

4.7 We have identified several common barriers or risks that may affect a partnership’s ability to (a) realise outcomes or (b) ensure that outcome level changes continue beyond the life of the project.

*For example, high staff turnover could be a barrier to change that would affect sustainability as the proportion of trained staff would diminish over time. This could be particularly problematic if the staff members are senior management or key individuals in the partnership.*

Please complete the following table. We have included some barriers that need to be considered but we encourage you to add any more that you identify that are specific to your project.

|  |  |  |
| --- | --- | --- |
| **Barrier to change, where change relates to:****(a) realising project outcomes****(b) sustainability of outcomes**  | **Impact on project achievements and sustainability** | **Plans to address it** |
| Staff shortages in the overseas partner institution(s) |  |  |
| Turnover or transfer of trained health workers in the overseas partner institution(s) |  |  |
| Equipment and supply shortages |  |  |
| Access to services and/or training for women, children and underserved populations |  |  |
| *Please add more rows if applicable* |  |  |

4.8 Please explain how you will ensure that the project changes are sustained beyond the lifetime of the project, including other government and non-governmental bodies you intend to approach or collaborate with in the host country. *(Maximum 300 words)*

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# **5. Project Management and Support**

5.1 Describe the systems within your partnership that currently exist or will be put in place to support the implementation of this project. Add more rows as necessary.

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| **Systems** | **What, How and Who** |
| Governance Structures |  |
| Decision Making |  |
| Formal Agreements |  |
| Communication Strategies |  |
| Financial Systems |  |
| Other |  |

5.2 Complete the table below outlining the role each partner organisation will play in the delivery of this project and how they as an organisation will benefit from their involvement in the project. All partners named in Section 2 should be included here.

|  |  |  |
| --- | --- | --- |
| **Partner** | **Role** | **Benefit** |
|  |  |  |
|  |  |  |
| *Add more rows as necessary.* |  |  |

5.3 Describe the processes by which staff / volunteers will be recruited or selected and managed. If your response suggests that you have policies and procedures in place, THET may ask to see copies of these should your application proceed.

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| **General explanation of recruitment and management processes *(Maximum 200 words)*** |
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| **Specific considerations around staff and volunteer safety *(Delete Yes or No as appropriate)*** |
| Do you provide insurance for all staff and volunteers? | Yes | No |
| Are the areas in which you propose to work completely free of UK Foreign & Commonwealth Office travel warnings or, in the case of Irish partners, Department of Foreign Affairs and Travel foreign travel warnings? | Yes | No |
| Will the project be deploying staff and volunteers for short-term visits only? (i.e. less than 6 months) | Yes | No |
| Within the UK or Irish organisation(s) are there formal mechanisms in place to support staff who want to take time off to engage in voluntary work? | Yes | No |
| **If the answer to any of the above is No, please explain what will be done to support staff and volunteers *(Maximum 200 words)*** |
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# **6. Budget**

6.1 What experience of compiling and managing budgets have individuals involved in this project had in the past? What do you detail the biggest challenge in managing this budget to be? *(Maximum 300 words)*

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**6.2 Please complete the budget template (separate excel spreadsheet) and submit it along with your application form.** The final budget will be drawn up following discussions with THET should funding be awarded.

*The budget template asks grant applicants to budget costs related to general project costs and costs related to the delivery of each activity. THET will not be able to accept grant applications which have either used their own template or have not completed the excel budget template provided for this Call.*

*Please note that depending on the applications that THET receives, grant holders are not guaranteed to receive the exact amount accounted for in their budget.*

1. Grants can begin from 1st May 2020. All activity must be completed by 31st July 2021. [↑](#footnote-ref-1)