## THE HEALTH WORKER ACTION FUND

# CALL FOR APPLICATIONS 20/04/2020 – ETHIOPIA, MYANMAR, SOMALILAND, TANZANIA, UGANDA AND ZAMBIA



#### **BACKGROUND**

In recognition of the vulnerability of health workers to Covid-19, from both a physical and mental health perspective, the key objective of the Health Worker Action Fund (HWAF) will be to support established Health Partnerships to protect the physical and mental health of LMIC health workers who are engaged or preparing to be engaged in the frontline treatment of Covid-19. By doing this, health workers will also be better positioned to provide safe and effective care to patients.

Given their nature, Health Partnerships are in a unique position to offer this support, drawing on strong ties of trust, collegiality and professional respect that sit at the heart of relationships developed over many years. As such, they can harness flows of support at an institutional and individual level.

Resources for the HWAF will be pooled from various sources, and efforts are ongoing to increase the total amount of funding available. Against this backdrop, and the context of the global pandemic, the fund and associated country-eligibility, timeframes and other criteria will be adapted on an *ad-hoc* basis to account for changing circumstances. The fund will, therefore, be flexible and will seek to support as many Health Partnerships as possible. This could also mean, for example, that applications to the fund are suspended and re-opened as and when needed.

#### **APPROACH**

All proposals must aim to protect the physical and mental health of health workers who are engaged or preparing to be engaged in the frontline treatment of Covid-19. While it is not appropriate for individuals involved in Health Partnerships to support initiatives through international travel, we would expect support to be provided remotely by partners to one another in the codesign of proposals and support to their implementation.

Examples of approaches that funding can be used to support include, but are not limited to\*:

- Evidence-based, safe and effective Personal Protection Equipment (PPE) solutions approved by the WHO.
- Items that will support Infection Prevention Control initiatives (e.g. soap, ingredients for making antiviral hand-gel etc.) approved by the WHO.
- Materials that can be used to spread relevant public health information (e.g. paper, printing toner etc.) in line with WHO guidance.
- Interventions which support the psychological resilience or well-being of health workers.
- Facilitate travel, accommodation and family support for health workers.
- Remote training, mentoring and supervision on preventing and responding to Covid-19, including surveillance, using PPE effectively and/or IPC.
- Supporting appropriate surveillance and data collection related to Covid-19.

In all cases, proposals must align with international and national Covid-19 response plans and priorities, and applicants will need to demonstrate that their initiative is not duplicating ongoing activities.

THET will assess applications based on whether the proposal is deliverable within the budget and timeframe proposed, however we do understand that this work will take place in highly complex and challenging environments with changing needs, and so will encourage a flexible approach that uses learning to continually adapt, ensuring that priorities are met in the most appropriate way.

# **ELIGIBILITY**

# COUNTRIES

It is against this background that THET invites Health Partnerships to apply for funding, as part of the HWAF, for initiatives in:

- Ethiopia
- Myanmar
- Somaliland
- Tanzania
- Uganda
- Zambia

<sup>\*</sup>For further examples and guidance of what funding can be used to support, please refer to <u>Annex A</u>

These countries were chosen due to THET's current presence there and their relative number of established Health Partnerships. According to context and availability of resources, THET will review whether this list of countries can be expanded, and potential applicants interested in other countries should subscribe to THET's mailing list and appropriate social media channels for updates.

# ORGANISATIONAL ELIGIBILITY

Applicants will need to be established health partnerships that have both:

- Received funding from THET since 2011.
- A track record in completing and conducting projects to a satisfactory level, including proven ability to manage funds appropriately.

The ultimate recipient of any initiative must be a LMIC not-for-profit/public health facility or health worker/s (e.g. Community Health Workers) that will be exposed to patients with suspected or confirmed cases of Covid-19. The LMIC partner can also be a District Health Office, academic institution, or NGO if it supports several facilities or health workers. Therefore, UK and LMIC institutions leading a Health Partnership must be either a health delivery institution, health training/education institution, NGO, regulatory body, NHS arms-length body, professional membership association, or academic institution.

A Memorandum of Understanding (MoU) should be in place between lead partners at the time of application, however exceptions will be made where an additional partner is involved as the beneficiary of an intervention and is not part of an existing MoU.

Funds can be transferred to either a UK or LMIC institution depending on what is most appropriate for the use of funding, and the funding recipient will be responsible for signing the contract. Please note that the contract holder must have both a finance, and corruption and bribery policy and, when making this decision you should also consider factors such as bank charges, your capacity to submit financial reports and transaction lists, and your ability to make use of funding speedily (please note the funding timeframes below).

#### FUNDING TIMEFRAMES AND DURATION

Applicants can apply for a maximum of £5,000 and we expect funds to be utilised as soon as possible, with priority afforded to applicants able to make use of funding in an efficient and timely manner.

While we're flexible with the length of time that activities cover, we'd expect applicants to be able to use the funds to support an initiative for no longer than 6 months. Where funds are used solely for the purchase of equipment or resources, we expect applicants to pay due consideration to maximizing, safely and appropriately, the durability and lifespan of materials.

Applicants must be able to sign a contract with THET within five working days of a positive funding outcome being communicated. In instances where it takes longer than five working days, THET will consider awarding the funding elsewhere.

#### SCORING CRITERIA

If your health partnership and proposal is eligible to receive support, applications will be judged against the following criteria:

- The proposal clearly contributes to the overall aims of HWAF.
- The project has a clear and measurable objective that is achievable with the resources and time available.
- The project is aligned with the LMIC's Covid-19 response priorities and plans and does not duplicate other efforts.
- The approach clearly addresses a priority need.
- The approach to the project is feasible, appropriate and relevant to the local context.
- The approach to the project is demonstrably effective and safe.
- Benefits accrued through the project will be spread equitably, regardless of gender, disability and other characteristics.
- The project demonstrates value for money.
- The project is based on recognised good practice and informed by available literature and resources.
- Health workers have, or will receive, satisfactory training on any equipment you will purchase or create.
- The project clearly demonstrates how all partners have been, or will be, involved in decision making.
- Activities associated with the proposal can begin as soon as practicable.

#### **FUNDING RESTRICTION**

# THIS CALL FOR APPLICATIONS WILL FUND:

- Remote training, workshop, mentoring and communication costs, e.g. Zoom or e-learning subscriptions.
- Equipment and other physical resources.
- Any activity or item/s that can be proven to meet the aims of the HWAF.

- Project management costs, for the LMIC partner, up to a maximum of 10% of the total grant. This can include project or MEL staff salary contributions.
- Contingency up to 5% of the total budget to factor in exchange rate variances and/or bank charges.

#### THIS CALL FOR APPLICATIONS WILL NOT FUND

- Entertainment costs
- Costs relating to the delivery of health services (e.g. clinical staff salaries)
- International travel, and associated costs
- Professional fees/Sitting allowances. While attendees at capacity development activities may be reimbursed for their travel and expenses, they will not be paid for their time.
- Consultancy costs
- Publication costs
- UK overhead or salary costs
- Any activity, other than the purchasing of equipment, that cannot begin within two weeks of funds being received.

#### APPLICATION AND SELECTION PROCESS

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Applications will be accepted, on a rolling basis, from the **20**<sup>th</sup> **April 2020** with no deadline. THET will review applications and make funding decisions weekly. Applications must be made in English.

Only successful applicants will be informed of the outcome, and this will be by email. It is expected that you will sign your contract with THET within five working days of a positive funding decision being made, and funding will then be processed on the day of, or working day after, the signature has been received.

Unsuccessful applicants will not be informed of the outcome and those that have put forward an eligible proposal will be placed on a waiting list and assessed against applications in future weeks. There is, therefore, no need to resubmit an application but if you do not hear from us within a month, you can assume that your application has not been successful.

Applicants are required to submit an application form and budget using the provided templates, and the proposed contract holder must provide evidence of a finance policy, MoU, and a corruption and bribery policy.

Given current priorities in the UK and LMICs for health workers to prioritise responding to the Covid-19 pandemic, and the potential time needed to support this initiative, we encourage all those thinking of applying to consider their individual and institutional capacity. We also encourage health partnerships to engage members of their team not currently working full-time in the NHS to support the application process, and then provide support in delivering the intervention.

# **GRANT HOLDER REQUIREMENTS**

Each grant recipient will be assigned a member of the THET Grants Team to act as a point of contact for the purpose of answering queries and providing guidance where needed.

HWAF recipients will not be expected to report regularly to THET during the pandemic but will be asked to inform us should there be significant issues with utilising the funds for their proposed purpose. For the purpose of demonstrating impact and sustaining resources, we will also require a brief update, by email, on progress within two weeks of receiving funds including an accompanying image that can be used for communications purposes.

A transaction list - with clear details of what was purchased and at what cost - and a short narrative report 3-6 months after the receipt of funding will then be required. Given the varying capacities, and difference in circumstances across contexts, however, THET will adopt a flexible approach and accommodate the needs of each grantee.

## **FURTHER SUPPORT**

For all enquiries, please email the THET Grants Team at <a href="https://example.com/HWAF@thet.org">HWAF@thet.org</a>. Please do not attempt to call our office as there will be nobody to take your call.