



# Fleming Fund Annual Review

Published 09 August 2023

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## Abbreviation list

<b>Abbreviation</b>	<b>Term</b>
AMC	Antimicrobial Consumption
AMR	Antimicrobial Resistance
AMR CC	AMR Coordination Committee
AMS	Antimicrobial Stewardship
AMU	Antimicrobial usage
ATLASS	Assessment Tool for Laboratory and Antimicrobial resistance Surveillance Systems

<b>Abbreviation</b>	<b>Term</b>
CwPAMS	Commonwealth Partnerships for Antimicrobial Stewardship
DHSC	Department of Health and Social Care
FAO	Food and Agriculture Organization
FCDO	Foreign and Commonwealth Development Office
GHS	Global Health Security
GIZ	German Corporation for International Cooperation
GLASS	Global Antimicrobial Resistance and Use Surveillance System
GRAM	Global Research on AMR
GSMS	Global Surveillance and Monitoring System (WHO)
ICDDR, B	International Centre for Diarrhoeal Disease Research Bangladesh
LMICs	Low- and Middle-Income Countries
MA	Management Agent
MEL	Monitoring Evaluation and Learning
MA	Mott MacDonald
MPTF	Multi-Partner Trust Fund
NAPs	National Action Plans
NGO	Non-governmental organisation
NHS	National Health System (UK)
ODA	Official Development Assistance
ODI	Overseas Development Institute
OECD	Organisation for Economic Cooperation and Development
PMO	Programme Management Office
RAG rating	Red, Amber, Green rating
SF Medicines	Substandard and Falsified Medicines
TAG	Technical Advisory Group
ToC	Theory of Change
VfM	Value for Money

Abbreviation	Term
WHO	World Health Organization
WOAH	World Organisation for Animal Health (previously OIE)

# 1. Summary and overview

**Project Title: Fleming Fund**

**Project Value:** up to £265m (Phase 1: 2017–2021), £210m (Phase 2: 2022–2025)

**Review period: January 2022 to December 2022**

**Project's Start Date: 2016**

**Project's End Date: 2025**

## Summary of Project Performance

Year	2020	2021	2022
Project Score	A	A	A
Risk rating	N/A	Amber/Red	Amber

### 1.1 Outline of project

The Department of Health and Social Care (DHSC) manages the [Fleming Fund](#), a UK Official Development Assistance (ODA) programme that is dedicated to combating antimicrobial resistance (AMR) as part of the DHSC's broader Global Health Security (GHS) portfolio. The programme aims to establish the building blocks of sustainable surveillance systems for antimicrobial resistance, consumption (AMC) and usage (AMU), the Fleming Fund has provided support to 24 low- and middle-income countries (LMICs).

Most of the Fleming Fund's operations are conducted by our Management Agent, Mott MacDonald, who manage a portfolio of country grants, regional grants and fellowships. In addition to this, the fund supports several other LMICs through global projects implemented in collaboration with its delivery partners, such as the World Health Organization (WHO), the Food and Agriculture Organization (FAO), and the World Organisation for Animal Health (WOAH) (formerly known as OIE). The Tripartite, a collaborative forum consisting of these 3 organisations, coordinates these efforts. Starting

from 2022, the United Nations Environment Programme (UNEP) became the fourth organisation of this collaborative network now referred to as the Quadripartite.

The Fleming Fund supports low- and middle-income countries to generate, share and use data to improve antimicrobial use and encourage investment in AMR. The fund aims to improve laboratory capacity and diagnosis as well as data and surveillance of AMR at a country level through a One Health approach, covering human health, animal health and the environment. By supporting countries in West Africa, East and Southern Africa, South Asia and South-East Asia to develop One Health AMR National Action Plans (NAPs) and implement the surveillance aspects of these, the programme supports delivery of the 2015 World Health Assembly Global Action Plan objectives, the recommendations of the UK's 2016 O'Neill Review on AMR, the Inter-Agency Coordination Group on AMR recommendations, as well as the UK's own AMR NAP 2019 to 2024. Contributions to these key international objectives and outcomes are captured in the Theory of Change (ToC), in particular, Fleming Fund outputs are expected to contribute to the following Global Action Plan outcomes:

- improved awareness and understanding of AMR
- strengthened knowledge through surveillance and research
- ensured sustainable investment in countering AMR
- optimised use of antibiotics

The Fleming Fund is expected to contribute to broader work on health systems strengthening in LMICs by supporting improvements to diagnosis, surveillance and use of quality health data in decision making. These actions support improved health information systems and laboratory strengthening and help to ensure that essential antimicrobial medicines are safe and effective.

This report provides a summary of progress and recommendations over the course of 2022.

## **1.2 Summary of progress**

This section includes a summary of progress and a supportive narrative for the overall score.

The year 2022 was a pivotal period for grantees as they regained momentum on their projects after COVID-19 disruptions. Additionally, the beginning of Phase 2 in early 2022

marked a significant milestone for the programme. Despite some challenges, the programme contributed to significant achievements, including:

- During 2022, 239 Fleming Fund supported sites processed a total of 969,279 samples, enabling increased surveillance and identification of emerging trends and patterns.
- The WHO published the fifth [Global antimicrobial resistance and use surveillance system \(GLASS\) report](#), which included an increased number of Fleming Fund countries reporting into the system. Eighteen Fleming Fund countries are now submitting improved data into the GLASS system.
- The WOAHA ANIMUSE (monitoring antimicrobial use in animals) system received 157 country reports in its seventh round of data collection on antimicrobial use in animals.
- For the first time, the Global Research on AMR (GRAM) project disseminated comprehensive findings on the global burden of AMR, by region and country.
- The Commonwealth Partnerships for Antimicrobial Stewardship (CwPAMS) project developed and launched an antimicrobial prescribing smartphone app to support surveillance of antimicrobial use.
- The Quadripartite launched the AMR Multi- Stakeholder Partnership Platform, which received over 200 applications for membership (by Q1 2023) from organisations across government, civil society, non-governmental organisations and the private sector.

### 1.3 Progress against recommendations

This section includes a progress against recommendations from the last review.

	<b>Recommendation</b>	<b>Status</b>	<b>Narrative</b>
1	Develop and disseminate Phase 2 Theory of Change (ToC) narrative with partners to support project coherence and finalise the revised diagram. Ensure partner proposals are aligned to the ToC, such as basing their own ToC on it.	Partially Achieved	The Phase 2 ToC was finalised and disseminated to partners. Partners will align their plans based on the ToC. However, narrative is still to be finalised.
2	Support the economic and business cases for investment in Phase 2 by: a) reviewing the economic fellowship scheme in line	Achieved	Review of the Overseas Development Institute (ODI) fellowship scheme completed. Recommendation is to bring

	<b>Recommendation</b>	<b>Status</b>	<b>Narrative</b>
	with the principle of country ownership. b) supporting the rollout of the Cost Budget Framework as a core component of the country grants.		<p>economic fellows under the Management Agent fellowship scheme to support better country ownership, alignment, and sustainability in collaboration with ODI as technical partner.</p> <p>The cost benefit framework has been finalised and roll out approach integrated into the Management Agent Implementation Plan for Phase 2.</p> <p>A policy brief for the framework is also in development.</p>
3	Draw on the Phase 1 Global Research on Antimicrobial Resistance (GRAM) evaluation lessons to enhance the approach to sharing burden data with decision makers at global, regional, and country level. This work will take place during the Phase 2 implementation stage and reviewed at the end of 2022.	Achieved	Following the evaluation of the programme by Itad (the Fleming Fund's Independent Evaluator) and workshop with GRAM, a strategy has been developed to deliver country-level results in conjunction with multilateral partners. 2023 will focus on implementation of actions.
4	Work jointly with the DHSC Global AMR team to revise the Fleming Fund coordination and engagement plan and communications strategy to target stakeholders with the ability to use AMR/C/U data to influence local, regional, and global decisions on AMR in autumn 2022.	Partially Achieved	A new Fleming Fund Phase 2 communications strategy was published on 13 December 2022. This was shared with Communications Leads within our partner organisations to ensure their individual strategies are aligned. Coordination and engagement is ongoing and a priority for 2023.
5	Work with the Fleming Fund Independent Evaluator to review the impact of remote delivery across the Fleming Fund. Ensure lessons and good practice are incorporated into Phase 2 proposals.	Partially Achieved – to be completed by December 2023	The Independent Evaluator submitted a comprehensive review of impact of remote delivery on the evaluation and the fellowship scheme. Findings from the review point to benefits and drawbacks of remote delivery, lessons will be incorporated into Phase 2 implementation by December 2023.

	<b>Recommendation</b>	<b>Status</b>	<b>Narrative</b>
6	Improve financial forecasting and reporting, including a) working with the Global Health Security Programme Management Office (GHS PMO) to increase the accuracy and effectiveness of finance management tools. This work will be reviewed in December 2022; b) working with the Management Agent and other Fleming Fund partners to effectively monitor spend and improve the accuracy of forecasting.	Achieved	<p>The Fleming Fund and GHS PMO worked closely with the Management Agent and other partners to monitor spend and improve the accuracy of forecasting.</p> <p>Though we have made good progress on this recommendation, we will continue to refine this process over the next review period.</p>
7	Conduct country visits to a set of priority countries to strengthen relationships, enhance oversight of implementation, deliver on assurance requirements and support results monitoring, revising progress at the end of 2022.	Achieved	The Fleming Fund team made 2 country visits in 2022 to Malawi and Sierra Leone, however a number of other visits to support strategic planning of Phase 2 took place as well, strengthening our relationships with delivery partners. The Management Agent visited 16 countries in 2022.
8	Further embed adaptive management approaches into Phase 2 delivery by: a) supporting the inclusion of adaptive management into grant agreements and monitoring progress (for example quarterly reviews) by autumn 2022; b) implementing the lessons from the regional grants on the role of early reviews of grant performance trajectory and optimism bias. This ongoing work should be reviewed at the end of 2022.	Achieved	<p>The Fleming Fund held an adaptive management workshop in November 2022, where our approach to adaptive management in Phase 2 was defined.</p> <p>For Phase 2 the programme will use an adaptive management approach in uncertain, novel activities, where constant learning and reiteration help to achieve our outcomes.</p>
9	Review Fleming Fund's approach to asset management in the context of Foreign, Commonwealth and Development Office (FCDO) rules and new DHSC assets policy. Where there are deviations, the approach to asset management will be adjusted to ensure alignment.	Achieved	GHS PMO developed a policy that aligned with FCDO guidance. This has been implemented with the Management Agent.

	<b>Recommendation</b>	<b>Status</b>	<b>Narrative</b>
	Where this is not possible, and exceptionally, a risk-based decision not to align to these policies must be documented. Assess progress by end of 2022.		

## 1.4 Major lessons and recommendations

This section details lessons and recommendations for the year ahead.

**Recommendation 1:** Collaborate with all Fleming Fund partners to ensure coherence and alignment of the programme, with the aim of preventing duplication at the country, regional and global levels. We will do this through collaborative workshops/engagements over the course of the year and monitor through quarterly/biannual reporting.

**Recommendation 2:** Incorporate the recommendations from the Summative Evaluation on Value for Money into updated guidance and best practice for delivery partners to use by December 2023.

**Recommendation 3:** Undertake further finance learning and development within the Fleming Fund team to ensure there is strengthened financial capability and resource to manage the budget effectively and review at the end of the year. Ensure finance responsibilities are balanced across the team and GHS PMO colleagues by Autumn 2023.

**Recommendation 4:** Publish summative evaluation report; develop and implement the reports use and dissemination plan; identify and develop an action plan in response to the key evaluation recommendations for Phase 2 by Autumn 2023.

**Recommendation 5:** Develop clear guidance on adaptive management approach, mechanisms and processes for Phase 2 and disseminate across all partners by December 2023. Review guidance annually to ensure relevant and up to date.

**Recommendation 6:** That the lessons learnt from mobilisation of Phase 1 of the Fleming Fund country grants, regional grants and fellowships will be proactively applied to the mobilisation of the second phase.



## **2. Theory of Change**

### **2.1 Summary of changes**

This section includes a summary of changes to the project's Theory of Change.

The Fleming Fund refreshed the Theory of Change (ToC) in 2021 for Phase 2. We disseminated it to all partners in 2022 to ensure coherence and alignment across the programme. Partners will align all Phase 2 implementation against the refreshed ToC. The Independent Evaluator drafted a supporting narrative to accompany the ToC diagram in consultation with delivery partners and key stakeholders to describe the programme's causal pathway and assumptions. This is currently in its final stages and will be published in 2023. The ToC is an iterative working document which will be periodically reviewed through biannual Learning and Strategy Testing sessions.

To monitor progress towards the expected outputs/outcomes/impacts outlined in the ToC, the Fleming Fund, in collaboration with the Independent Evaluator and partners, created the Results Framework over the course of 2022. The Results Framework identifies a set of indicators across the ToC for partners to report on, ensuring monitoring data is relevant.

### **2.2 Project's progress**

This section details the project's progress towards contributing to the expected outcomes and impact.

The Fleming Fund made significant advancements towards achieving Phase 1 objectives, during its conclusion in late 2022, notable outcomes were achieved including the enhancement of laboratory capabilities and integration with global surveillance systems. This has resulted in a higher production and improved quality of shared data on AMR/C/U from countries supported by the Fleming Fund. Moreover, there are indications of sustained outcomes, including the healthcare systems' preparedness to deal with AMR and other health-related challenges. For example, SeqAfrica, through regional grants, successfully sequenced isolates/genomes from all 5 SeqAfrica partners throughout the year, despite encountering various challenges such as technical, procurement and staffing issues.

The Management Agent experienced some challenges including procurement delays largely impacted by external factors in-country or regionally, particularly in the Asia region. However, they were able to finalise installation of laboratory equipment and training for personnel in most countries in the region by Q4 of 2022. The fellowship scheme also made strides and by the end of 2022; 136 fellows (cumulatively) graduated despite facing some issues following the impact of COVID-19. Challenges included inability to travel to

host institutions for scheduled in-person support and managing workload. A virtual graduation ceremony attended by UK Special Envoy on Antimicrobial Resistance Dame Sally Davies in November 2022, was held to commemorate their accomplishments.

In its advocacy efforts, the South Centre collaborated on several important events on AMR in 2022. These events included the ReACT Africa annual conference, which brought together participants from 30 countries, a workshop on AMR and Climate Change with the Society for International Development (SID), and activities during World Antimicrobial Awareness Week (WAAW). These efforts contributed to outputs on raising awareness and maintaining dialogue on AMR.

Other partners, such as the Quadripartite, made good progress in 2022 and their efforts in enhancing collaboration were noticeable. Through the AMR Multi-Partner Trust Fund (MPTF), the Quadripartite organisations were actively implementing programmes in 10 LMICs, these projects are delivered with a One Health approach at country level.

### 3. Detailed output scoring

The programme achieved or surpassed milestones for over 62% of outputs. COVID-19's knock-on effect into 2022 and the Phase 1 winddown naturally caused a transition period and impacted the overall progress. Furthermore, all partners had to dedicate substantial time as planning for Phase 2 commenced early in 2022.

#### 3.1 Output 1

**Output Name: Overall Programme**

**Output score: B**

**Impact weighting (%): 15%**

**Weighting revised since last AR? No**

Indicator(s)	Milestone for the review	Progress
1.1 FF projects achieving green or amber-green RAG rating for quality, timeliness and finance on average across the year (All)	70%	<b>Not achieved</b> 31% Fleming Fund projects achieved green or amber-green rating for quality, timeliness and finance on average

Indicator(s)	Milestone for the review	Progress
1.2 Percentage of Fleming Fund supported Human Health surveillance sites showing progress through the LSHTM roadmap functions and stages (MA)	80%	<b>Not Achieved</b> 79% of surveillance sites (121/154) showed progress.
1.3 Percentage of Fleming Fund supported Animal Health surveillance sites showing progress	80%	<b>Not Achieved</b> 65% of surveillance sites (55/85)

### 3.1.1 Supporting narrative

The transitional period between Phase 1 and Phase 2 had an impact on financing and timeliness, increasing the volume of work due to close out and mobilisation/continuation of activities.

The number of Human and Animal Health sites changed in Q4 2021 and in 2022, with the removal of some sites and addition of new ones. During 2022 some new sites did not have support for 9 months or more to qualify to be assessed.

## 3.2 Output 2

**Output Name: Standardisation of data/ quality of surveillance/ quality improvement**

**Output score: A**

**Impact weighting (%): 5%**

**Weighting revised since last AR? No**

Indicator(s)	Milestone for the review	Progress
2.1 a) Number of AMS checklists completed (CwPAMS extension)	95% of new grants awarded	<b>Achieved</b> 100% (14 Health Partnerships)
2.1 b) Percentage of grants held AMS checklist meetings where AMS interventions	75%	<b>Surpassed</b> 100% (14 Health Partnerships)

Indicator(s)	Milestone for the review	Progress
have been identified and an action plan drafted (CwPAMS1, CwPAMS extension)		
2.2 Number of countries implementing Tricycle using Fleming Fund funding (WHO)	6	<b>Achieved</b> 6
2.3 Number of countries supported to implement and/or adapt regional guidelines and regulatory approaches relevant to addressing AMR (FAO)	10	<b>Not achieved</b> 6

### 3.2.1 Supporting narrative

All 14 awarded CwPAMS extension grants completed a Pre-AMS Assessment Tool for each of their implementation sites. This target was met as the assessment tool was a required activity in the application stage for the extension grants. All 14 grants also completed a Post-AMS Assessment Tool at the end of the extension phase. In some cases, health partnerships brought in additional implementation sites during the grant.

By the end of the extension phase, all 14 awarded CwPAMS extension grants held AMS meetings throughout the grant, identified AMS interventions and drafted AMS Action Plans.

Delays in software customisation and various external factors resulted in some countries not receiving support on regional guidelines and regulatory approaches to addressing AMR. However, this support is planned for in Phase 2.

### 3.3 Output 3

**Output Name: Strengthening capacity and workforce on AMR**

**Output score: A+**

**Impact weighting (%): 10%**

## Weighting revised since last AR? No

Indicator(s)	Milestone for the review	Progress
3.1a Number of fellows (cohort I, cohort II and policy) completing their fellowships cumulatively (MA)	104	<b>Surpassed</b> 138 completed
3.1b Number of Professional Cohort 1, Cohort 2 and Policy fellows selected cumulatively (MA)	80% (184/213)	<b>Surpassed</b> 178 (83%) fellows total: 128 C1 fellowships filled 32 C2 fellowships appointed 24 Policy fellowships appointed
3.2 Percentage of learners who attempt and pass a quiz at the end of a module (MA)	75%	<b>Surpassed</b> 89% (812/908)
3.3 Percentage of fellows (Cohort 1), who are completing fellowships in 2022, reporting improvement in 80% of dimension / domains in their self-assessments (MA)	80%	<b>Not Achieved</b> 73% (58/80) of fellows completed and reported improving 80% or more
3.4 Number of completed fellowship webinars by end of December 2022 (MA)	10	<b>Surpassed</b> 11 webinars completed
3.5 Number of countries where AMR and AMU data generation platforms are piloted at Subnational level (FAO).	10	<b>Surpassed</b> 11 countries

### 3.3.1 Supporting narrative

The scheme was impacted by several factors including ongoing effects of COVID-19, in addition to some natural disasters. As a result, some fellows were unable to make improvements in specific dimensions/domains.

## 3.4 Output 4

**Output Name: Laboratory Equipment and Assessment**

**Output score: B**

**Impact weighting (%): 15%**

**Weighting revised since last AR? No**

<b>Indicator(s)</b>	<b>Milestone for the review</b>	<b>Progress</b>
4.1 Fleming Fund Procurement Performance as measured against centrally procured equipment/Number of countries where centrally procured equipment is delivered, installed and supplier training of users completed (MA)	91% (19/21)	<b>Surpassed</b> 95% (20/21)
4.2 Number of countries where follow-up ATLASS assessments have been undertaken (FAO)	10	<b>Not achieved</b> 5

### **3.4.1 Supporting narrative**

Completing Antimicrobial Testing Leadership and Surveillance (ATLASS) assessments in the 10 targeted countries was difficult primarily due to the availability of essential stakeholders, including national counterparts. We have rescheduled the assessments for Phase 2 implementation.

## **3.5 Output 5**

**Output Name: Governance**

**Output score: A**

**Impact weighting (%): 5%**

**Weighting revised since last AR? No**

<b>Indicator(s)</b>	<b>Milestone for the review</b>	<b>Progress</b>
5.1 Number of countries trained + Training of Trainers (ToT) provided on the WHO	12	<b>Surpassed</b> 16 countries

Indicator(s)	Milestone for the review	Progress
NAP costing and budgeting tool and NAP governance multisectoral coordination (WHO)		
5.2 Number of countries where relevant national bodies are receiving AMR data annually from human and animal surveillance (MA)	18 (Human health 15 (Animal health))	<b>Not achieved/Achieved</b> 17 (Human health) 15 (Animal health)

### 3.5.1 Supporting narrative

The countries that reported generating data reports in 2021 are mostly the same as those that reported in 2022, demonstrating that Fleming Fund support is helping sustain the systems of the countries in which we operate.

## 3.6 Output 6

**Output Name: Antimicrobial Consumption (AMC) Data**

**Output score: B**

**Impact weighting (%): 15%**

**Weighting revised since last AR? No**

Indicator(s)	Milestone for the review	Progress
6.1 Percentage of WOAHA members continuing to engage with the WOAHA AMU global database (WOAHA)	80% per round	<b>Surpassed</b> 85% (155/182)
6.2 Percentage of members supplying quantitative data to AMU global database under reporting option 3 (WOAHA)	70%	<b>Not achieved</b> 61% (76/124)
6.3 Number of Fleming Fund countries piloting the WOAHA information and alert systems	5	<b>Achieved</b> 5

Indicator(s)	Milestone for the review	Progress
(WOAH)		
6.4 Number of countries in Fleming Fund regions enrolled in the GLASS-AMC module and submitting consumption data (WHO)	16	<b>Not Achieved</b> 9 countries submitting data

### 3.6.1 Supporting narrative

In 2022, the pilot phase of the WOAHA information and alert system was completed, and feedback was incorporated into the second phase, up to 40 countries will be recruited for this phase.

The WHO published the fifth [GLASS](#) report in 2022. By December, 55 countries submitted data on AMC, 28 being LMICs. In Phase 2 the WHO will be working with regions to encourage countries to submit AMC as well as strengthen and expand the GLASS AMC module. Submission of AMC data is low primarily due to countries still developing their AMC surveillance capacities and capabilities.

## 3.7 Output 7

**Output Name: Substandard and Falsified (SF) Medicines Data**

**Output score: B**

**Impact weighting (%): 5%**

**Weighting revised since last AR? No**

Indicator(s)	Milestone for the review	Progress
7.1 Number of countries using tailored IT model to conduct market surveys - WHO Substandard & Falsified (WHO SF)	3	<b>Not achieved</b> 1
7.2 Number of countries reporting on targeted testing of antibiotics during	3	<b>Surpassed</b> 18



Indicator(s)	Milestone for the review	Progress
market surveillance		

### 3.7.1 Supporting narrative

WHO SF have developed a tailored IT model called the Epione tool – a mobile and desktop application to design, plan, conduct, analyse, evaluate and monitor data for post market surveillance activities. This has been rolled out in Tanzania, but sample testing for suspected substandard or falsified medical products in this country and a final assessment of the model has taken longer than expected, leading to delays in expanding to other countries.

Eighteen countries have contributed to WHO SF's targeted post market quality surveillance program, far surpassing the target of 3. This is due to requests, particularly from the African region, for support in conducting market surveillance – significantly increasing reporting on targeted testing.

## 3.8 Output 8

**Output Name: AMR Data**

**Output score: A**

**Impact weighting (%): 15%**

**Weighting revised since last AR? No**

Indicator(s)	Milestone for the review	Progress
8.1 Number of Fleming Fund countries submitting data into GLASS (MA/WHO)	17	<b>Surpassed</b> 19 5 submitted implementation data only
8.2 Percentage of Fleming Fund supported countries producing improved data for GLASS (MA)	100% (18/18 countries)	<b>Achieved</b> 100%

### 3.8.1 Supporting narrative

The number of Fleming Fund countries enrolled in GLASS has stayed the same as in 2021; however, the countries submitting AMR data decreased to 14 and those submitting implementation data only increased to 5 (implementation data refers to data submitted which refers to the status of national surveillance systems).

## 3.9 Output 9

**Output Name: Global Research on Antimicrobial Resistance (GRAM)**

**Output score: A+**

**Impact weighting (%): 10%**

**Weighting revised since last AR? No**

Indicator(s)	Milestone for the review	Progress
9.1 Number of articles on historical AMR burden submitted to a peer review journal cumulatively (GRAM)	12	<b>Surpassed</b> 13 papers submitted (cumulative)

### 3.9.1 Supporting Narrative

The Global Research on AMR (GRAM) project has produced 13 papers to date. This included the landmark Lancet paper: '[Global burden of bacterial antimicrobial resistance in 204 countries and territories in 2019](#)' providing the most comprehensive estimates of the global impact of antibiotic resistance to date. This paper revealed that AMR has now become a leading cause of death globally. For further reading [a selection of GRAM's papers](#) are available. and was strategically disseminated by Oxford, IHME, Gates, Wellcome and DHSC. [A selection of GRAM's papers](#) are now available on the University of Oxford website.

## 3.10 Output 10

**Output Name: Awareness and Advocacy**

**Output score: B**

**Impact weighting (%): 5%**

**Weighting revised since last AR? No**

Indicator(s)	Milestone for the review	Progress
10.1 Average number of page views per news article per month uploaded to the Fleming Fund website in 2022	100	<b>Surpassed</b> 133
10.2 a) Number of regional grants completing dissemination activities according to plan for 2022 (RG)	75%	<b>Not Achieved</b> 44% (4/9)
10.2 b) Number of regional grants reaching 60% or more of the target audience for their dissemination activities (RG)	70%	<b>Not achieved</b> 67% (6/9)

### 3.10.1 Supporting Narrative

Five regional grants did not meet the target for completing dissemination activities according to plan for 2022 and were subsequently pushed into Q1-Q2 of 2023. This was largely due to delays such as some outputs not being available in time. Substantial dissemination activities are now planned for 2023.

Three grants did not meet the target for reaching 60% or more of the target audience for their dissemination activities; however, they did record high attendance to these events.

## 4. Project performance not captured by outputs

In 2022, the Fleming Fund made good progress. The programme maintained the momentum of grant delivery while also successfully designing its second phase of activity.

We achieved key successes by successfully negotiating and signing all Phase 2 grant agreements. We also achieved success in negotiations with the Management Agent, resulting in a new contract for Phase 2 - this has the potential to expand the number of countries to up to 25.

The GRAM project published a [landmark study on AMR burden](#), setting out for the first time the human cost of AMR. The Fleming Fund's strategic dissemination of this product supported policy discussion at the Global Health Security Agenda, G7 and G20. At the global level, the Fleming Fund supported the government of Indonesia as President of the G20 by providing case studies, evidence and logistical support. This support strengthened the profile of AMR and facilitated constructive dialogue on the importance of integrated AMR surveillance.

Various new platforms were launched in 2022, including the Food and Agriculture Organization's Antimicrobial Resistance Legal Repository ([FAO AMR-Lex](#)). This platform disseminates laws, regulations and policies concerning AMR and AMU in the agri-food systems context. It became available for global public use in June 2022, and its official launch occurred in October 2022. The Quadripartite launched the [AMR multi-stakeholder platform](#), which provides a collaboration platform for stakeholders in the AMR field across sectors in Human Health, Animal Health and the Environment. Stakeholders can join and engage in dialogue to address AMR; and coordination of the platform is by the Quadripartite.

WOAH has launched its customised and interactive online Global Database for animal antimicrobial use ([ANIMUSE](#)). The system aims to facilitate 157 participating countries' instant access to their data, contributing evidenced based guidance for decisions making at the national level.

Building on technical expertise from CwPAMS, the Surveillance and Prescribing Support for Antimicrobial Stewardship Resource Capacity Building (SPARC) grant launched a mobile [Prescribing Companion App](#) to support prudent antimicrobial prescribing in human and animal health. The app is an offline tool to support appropriate prescribing practices in clinical settings based on local guidelines.

[The Open University \(OU\) global learning platform](#) (regional grant) recorded 19,532 visits across all the OU/Fleming modules from January 2021 to December 31, 2022. The project exceeded its targets for enrolment, completion and satisfaction. Visits continue to grow

quarter after quarter, contributing to the programme's objective of enhancing knowledge among professionals working in AMR.

Regional grants continued to perform well in 2022, a constructive and strategic Phase 2 planning meeting was held with partners at the Technical University of Denmark (DTU) at the beginning of October to streamline plans.

The regional grants encountered some challenges in 2022, as several grantees experienced staff retention and turnover issues, leading to delays. To support the affected teams, grantees hired short-term consultants. However, for Phase 2, more sustainable solutions will be pursued, and grantees will be encouraged to address this issue in their plans.

At the start of 2022, COVID-19 restrictions hindered travel-related activities, including the fellowship scheme, preventing the Mott MacDonald global and regional teams from traveling. However, travel resumed in the latter part of the year, enabling travel to 16 countries.

## 5. Risk

### 5.1 Overall risk rating

Amber

### 5.2 Overview of project risk

In 2022, the programme experienced a notable decrease in the impact of COVID-19. However, we are still witnessing the lingering effects of delayed activity, as well as broader social, economic, and political consequences.

#### Risk 1

##### **Risk description: Transition between Phase 1 and Phase 2 delays activity**

Transitioning between Phase 1 and Phase 2 posed a risk and the potential to delaying activity, including disruptions to ongoing activity and mobilisation of Phase 2.

**Mitigation strategy:** The team mitigated this by continuing Phase 1 delivery while finalising Phase 2. However, there is a concern that the available timeframe (March 2026) may not be sufficient to complete all planned activities for Phase 2. The Fleming Fund team will focus on learning lessons from the mobilisation of Phase 1, closely monitor grant progress and make necessary revisions to plans.

**Residual risk rating:** Amber

## **Risk 2**

**Risk description: Reduced support from FCDO's Global Network towards the project**

The Fleming Fund team recognised the risk of reduced support from FCDO's Global Network due to conflicting priorities at post and the limited capacity leading to the de-prioritisation of country engagement.

**Mitigation strategy:** To mitigate this, the Fleming Fund team engaged in frequent communications with FCDO at post to assess opportunities for strengthening coordination. We held regional teleconferences in early 2023, involving post and the Mott MacDonald Regional Coordinators, to enhance this further. Additionally, in 2023, the scope of country visits conducted by several members of the Fleming Fund team will be extended to include strategic diplomatic engagement.

**Residual risk rating:** Amber

## **Risk 3**

**Risk description: Fleming Fund approach to diplomatic and political engagement does not receive sufficient level of government awareness or buy-in within target countries.**

This risk potentially impacts the effectiveness of the programme's efforts to address AMR at the policy and strategic levels if decision makers do not buy-in and sustain initiatives.

**Mitigation strategy:** The planned in-person visits for 2023 will help mitigate this risk, and the newly appointed Mott MacDonald Asia and Africa Directors will contribute to developing the coordination role of regional hubs.

**Residual risk rating:** Amber- Red

# **6. Project management**

This section reviews delivery and commercial considerations

## **6.1 Delivery against planned timeframe**

Despite the overlap between Phase 1 closeout and Phase 2 mobilisation in 2022, we actively monitored grants and collaborated with partners to ensure a seamless transition

process. Partners provided regular updates on grant activities, enabling the team to promptly address any issues as they emerged.

Due to the close management of the transition process, the programme was able to offset any major disruptions particularly in relation to continuity for downstream delivery partners. Most Phase 2 grant agreements were agreed and signed before the end of 2022 except for the Independent Evaluator (signed in Q1 2023) enabling most grants to proceed with implementation of activities in Q4 of 2022.

## **6.2 Performance of partnerships**

The transitional phase aimed to optimise our impact by introducing changes, based on systematic learning from the first phase, to our approach and delivery methods. The programme's transition strategically reposition our efforts for Phase 2 through a thorough examination of the programme's goals and priorities. This resulted in the identification of specific areas that required focused strategic shifts. These included: Economics of AMR, Gender and Equity, AMR in the Environment and Data use. These strategic shifts were then embedded into the design of all Phase 2 grants and intended to sit alongside the Fleming Fund's existing suite of "principles".

To ensure a well-defined and collaborative approach to Phase 2, we organised a series of workshops in early 2022. These workshops brought together partners on the programme, fostering a platform for discussions and collaborative decision-making. We shared clear objectives and, with partners, collectively shaped the direction and ambition of Phase 2. This collaborative approach aimed to enhance the overall impact of the programme and encourage partners to work together.

The Management Agent successfully facilitated stakeholder engagement and collaboration throughout the programme. They organised regular country coordination meetings, which provided a platform for effective communication and decision-making with in-country stakeholders. Collaborations with key partners, such as FAO, occurred on the AMR Multi-Stakeholder Partnership Platform and the International FAO Antimicrobial Resistance Monitoring ([InFARM](#)) System and IT platform. A significant milestone was reached with the official establishment of the Quadripartite agreement, which incorporated the United Nations Environment Programme (UNEP). This agreement means all sectors will work together in the fight against AMR on initiatives such as integrated surveillance. The Quadripartite agreement demonstrated a strong commitment to addressing this global challenge through a unified and coordinated approach.

Partners, particularly the Management Agent, faced challenges in engaging and coordinating activities with in-country UK government partners. This was partly due to a lack of capacity brought on by the diverse nature of programmes managed by UK government colleagues. Recognising the importance of coordination and collaboration, we

formulated plans to address the challenges and improve engagement with in-country partners by increasing opportunities for collaboration, such as regional coordination meetings in Q1 2023.

**Recommendation 1:** Collaborate with all Fleming Fund partners to ensure coherence and alignment of the programme, with the aim of preventing duplication at the country, regional, and global levels. We will do this through collaborative workshops/engagements over the course of the year and monitor through quarterly/biannual reporting.

### 6.3 Asset monitoring and control

The Management Agent received an increased number of requests for asset transfers to recipient bodies as several country grants concluded in 2022. These requests underwent assessments against existing FCDO rules and the new DHSC assets policy. Following the evaluation, we granted asset transfer approvals.

The policy underwent adjustments during the year, specifically regarding fellowship assets, particularly in the case of fellowship laptops. As part of this amendment, the transfer approval for fellows' laptops was delegated to the Management Agent. The rationale behind this decision was to enable fellows to continue their AMR surveillance activities after completing the Fleming Fund's fellowship scheme, leveraging the training they had received.

Additionally, the policy underwent an amendment concerning regional grant assets. This amendment aimed to address the exchange of key assets for newer models that would likely be owned by the grantee. The approval of such requests would be contingent upon the grantee providing justification for the enhanced capability, throughput, and sustainability of the newer model's use, while ensuring value for money.

The Management Agent ensured a high level of adherence to the policy by seeking approval for asset transfers for country grants that concluded during the year, as well as for fellowship and regional grants.

The Management Agent primarily conducted asset checks, and no external asset checks were performed. We intend to conduct a country visit with a specific focus on asset management to provide assurance regarding the project's asset management.



# 7. Financial performance

## 7.1 Value for Money (VfM)

### Economy

The GHS PMO team delivered training sessions on VfM to the Global Health Security teams during 2022, aiming to support DHSC's monitoring and control of costs. Following the training, the team closely monitored the potential impact of inflation on Fleming Fund costs and were better equipped to understand the impact of inflation on the programme.

At the project level, the Management Agent conducted an initial study of the system's costs and expected benefits in Uganda's surveillance network comprised of 11 human health and 6 animal health surveillance sites. This study provides valuable cost approximations that will support AMR planning in Uganda and more broadly. This approach will be integrated into the rollout of Phase 2 country grants alongside global economic estimates of the cost of AMR.

### Efficiency

Despite pressure from global inflation, grantee management and overhead (M&OH)/indirect costs were maintained at acceptable levels in line with previous years. The Management Agent will aim to further contain M&OH costs during the second phase by accounting for high M&OH costs as part of the scoring during the grant review stage.

The Fleming Fund team approved the Management Agent to maintain continuity with some existing country grantees due to their acceptable performance. This decision aimed to reduce new set-up/mobilisation costs for Phase 2 and increase efficiency.

### Effectiveness

The Independent Evaluator's interim report found evidence of effectiveness in terms of strengthened laboratory functions and workforce capacity development. Generation of high-quality data and analysis are key Fleming Fund intermediate outcomes against which we expect to see progress in Phase 1 and Phase 2. The table below provides a strong indication of the scale of data production, directly enabled by Fleming Fund investments by December 2022:

Region	Data Produced
Southeast Asia	463,000 blood cultures
South Asia	182,000 blood cultures
West Africa	17,000 blood cultures

Region	Data Produced
East and Southern Africa	68,000 blood cultures

## Equity

During 2022 gender and equity was fully embedded into the design of Phase 2 as a strategic shift. This will be reflected at operational level (gender split in grantee's teams); outputs (achieving gender split in fellowships; and outcome level (including gender/equity markers in the Results Framework).

Key achievements included:

- A gender and equity literature review conducted by Itad.
- Publishing regional AMR burden data disaggregated by age for the first time by the GRAM project, demonstrating 1 out of 5 AMR deaths are children under the age of 5.

**Recommendation 2:** Incorporate the recommendations from the Summative Evaluation on Value for Money into updated guidance and best practice for delivery partners to use and implement by December 2023.

## 7.2 Quality of financial management

The [2021 annual review](#) included a recommendation to improve financial forecasting and reporting. The team implemented a number of changes to address this during 2022.

We improved internal financial management by working with the GHS PMO to more effectively use financial management tools. We developed a comprehensive finance tracker for FY22/23 which enables us to have strategic oversight of the anticipated outturn position for the financial year. Members of the team are engaged and there is more ownership of financial management. We worked with the GHS PMO to ensure forecasts are accurate and realistic and receive challenge through our Project Board. The team continues to refine the finance tracker and are revising our approach to the risk adjustment of forecasts so that it is a more useful tool for contingency planning.

We worked with finance teams across the department to understand financial requirements. For example, ensuring Value Added Tax (VAT) is applied correctly and consistently across the portfolio, assessing VfM and generally streamlining our processes. We also undertook pre-emptive work to improve the accruals process for FY21/22 year-end, and finalised accruals payments in line with estimates within the first half of FY22/23.

The team also worked with the Management Agent and other Fleming Fund partners to effectively monitor their spend and improve the accuracy of their forecasting. We prioritised financial discussions with our partners, making sure finance is routinely at the forefront of meetings. We set clear expectations for financial management and ensure delivery partners have avenues to raise questions or concerns. There have been notable improvements in the Management Agent financial handling over the last year: more accurate forecasting, lower variance, and no unexpected reductions in expenditure. The Management Agent have proactively highlighted any larger variances, which has aided in more effective management of finances across the Fleming Fund and GHS. Where we did experience challenge with downstream partners' financial reporting, we worked with the partner to support them, sharing guidance and encouraging them to cascade this to their downstream partners. Some challenges do remain with partner financial management capability, so further improvements could be made.

More broadly, due to the nature of the Fleming Fund and working internationally, we continue to factor in possible underspends due to currency fluctuations in the regions we work. The programme has many variables, which creates uncertainty with forecasting. We are better prepared to respond if underspends do emerge and plan for opportunities to re-disburse funding for value-added initiatives in line with original objectives. We expect a challenging year as we transition into Phase 2, setting up activities and putting new processes in place, which could impact on expected expenditure; however, we will plan for contingency options where possible.

In the coming year, assurance visits will be important and we will work with the GHS PMO to take this forward. We will continue to prioritise financial management and undertake spot checks on a more routine basis.

**Recommendation 3:** Undertake further finance learning and development within the Fleming Fund team to ensure there is appropriate financial capability and resource to manage the budget effectively and review at the end of the year. Ensure finance responsibilities are balanced across the team and GHS PMO colleagues by Autumn 2023.

## 8. Monitoring Evaluation and Learning

The programme has undergone a refresh of its Monitoring, Evaluation, and Learning system to ensure its suitability for Phase 2. This process involved addressing the lessons learned from the independent evaluation, developing an evaluation and Results Framework for Phase 2 across the portfolio, and refreshing reporting mechanisms.

## 8.1 Evaluation

In 2022, the Independent Evaluator completed data collection and analysis for the summative evaluation and identified key learnings for Phase 2. The summative evaluation, scheduled for publication in late 2023, assesses the extent to which the Fleming Fund outputs have contributed to the outcomes and impact outlined in the ToC. High-level findings and recommendations from the summative evaluation were shared with DHSC and the Management Agent in November 2022 to support Phase 2 planning and maximise the evaluation's utilisation.

The evaluation found that the Fleming Fund:

- made significant progress in supporting countries to establish the foundations for national AMR and AMU surveillance. It strengthened laboratory functions compared to international norms, enhanced capacities of key laboratory workforce members, and established surveillance functions in some countries
- can reasonably expect further progress in achieving its higher-level goals in Phase 2
- can enhance its sustainability approach at the organisational level to maintain capacity building results and expand focus to other data types in addition to AMR
- deserves recognition for prioritising One Health and facilitating cross-sectoral dialogues, which have been limited in other models
- is a complex programme that presents challenges in delivering coherence across all investments
- has robust and effective procedures in place for managing economy and efficiency, but it should strengthen its approach to managing for effectiveness

Following feedback from the Fleming Fund team and the Management Agent, the Independent Evaluator made some revisions to the summative report. The final draft was submitted in December 2022 and is currently under review before publication and implementation of recommendations.

In collaboration with the Independent Evaluator, the team have co-designed a portfolio-wide evaluation of the Fleming Fund for Phase 2 to assess coherence across the programme and track progress towards our high-level outcomes.

**Recommendation 4:** Publish summative evaluation report; develop and implement the reports use and dissemination plan; identify and take forward key evaluation recommendations for Phase 2 by Autumn 2023.

## 8.2 Monitoring

In response to the key learnings from the evaluation, we developed a portfolio-wide Results Framework and an accompanying indicator dictionary to replace the monitoring matrix. This framework aims to monitor progress against the expected outputs, outcomes and impact level changes in the ToC. The development of the Results Framework involved consultation with the Independent Evaluator, the Management Agent, technical advisers, WHO, FAO, WOA and all delivery partners.

Starting from 2023, all partners will be reporting against the Results Framework. This streamlined reporting approach will reduce administrative burdens for both the Fleming Fund team and delivery partners.

We also worked with delivery partners to ensure that Phase 2 grant/contract level log frames are aligned to the refreshed ToC to enable progress to be tracked.

Following a workshop with the Independent Evaluator and Management Agent, we have adopted a new conceptual understanding of adaptive management based on best practice which is distinct from good programme management. Adaptive management is a structured, iterative process of robust decision-making in the face of uncertainty, with an aim to reduce uncertainty over time via system monitoring.

We are working with the Independent Evaluator and Management Agent to revise the adaptive management approach for Phase 2 and identify appropriate workstreams for an adaptive management approach. This will be communicated across the programme in 2023.

The [2021 annual review](#) recommended the Fleming Fund team conduct country visits to monitor progress first hand where travel restrictions allow. In 2022, the team visited Fleming investments in Malawi and Sierra Leone. Additional trips to Nepal, India, Bangladesh, Sri Lanka and Zambia are scheduled for 2023 including a delivery partners event in Ghana.

**Recommendation 5:** Develop clear guidance on adaptive management approach, mechanisms and processes for Phase 2 and disseminate across all partners by December 2023. Review guidance annually to ensure relevant and up to date.

## 8.3 Learning

Over 2022, the Fleming Fund team have worked with delivery partners to identify Phase 1 learning from:

- the Independent Evaluator's evaluation reports and learning products
- internal reviews on the fellowships and secondments
- partners' regular project reporting

We have worked with all delivery partners to ensure these learnings have been incorporated into Phase 2 design and key lessons identified over the past year include the need to:

- strengthen our approach to managing for effectiveness at country and portfolio levels
- establish clear, ambitious yet realistic goals with targets to track progress at both country and portfolio levels considering the status of surveillance systems
- develop systems and processes that establish expectations and track progress in a proportionate, timely, and flexible manner to address uncertainties and the need for strategic adaptation
- focus on understanding the priorities and needs of key decision-makers on AMR when establishing goals at the country level to promote country ownership, leverage existing efforts, and ensure sustainability

We have worked with delivery partners to incorporate these learnings by:

- refreshing the MEL system by developing a portfolio-level ToC and Results Framework to clarify objectives, expected results, and track progress in a proportionate and timely manner, supporting adaptive management.
- negotiating a realistic implementation plan to ensure the programme can deliver its objectives.
- establishing country investment strategies to support coherence, and better understand and respond to country level priorities, opportunities, incentives, decision-making processes and drivers of change

## Annex A: FCDO Project Performance Scale

This report assesses the project and output scores against the following FCDO scale:

Score	Output Description	Outcome Description
A++	Outputs substantially exceeded expectation	Outcome substantially exceeded expectation
A+	Outputs moderately exceeded expectation	Outcome moderately exceeded expectation
A	Outputs met expectation	Outcome met expectation
B	Outputs moderately did not meet expectation	Outcome moderately did not meet expectation
C	Outputs substantially did not meet expectation	Outcome substantially did not meet expectation

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