



HUMANITARIAN INNOVATION FUND

Small Grant Application

Final Project Report **MEDBOX – THE AID LIBRARY**

Organisation Name	Medical Mission Institute Würzburg, Germany - The Advisory Group for International Health
Type of Organisation	Non-governmental Organisation
Address/ Main contact person / Position / Contact details (email, Tel)	Hermann Schell-Str. 7, 97074, Würzburg, Germany; Dr. Joost Butenop, MedBox Project Coordinator joost.butenop@medmissio.de ; 0049 932 804 8513

Project Title	MEDBOX – THE AID LIBRARY
Location	Würzburg, Germany
Project Date	15/02/2014 - 15/08/2014
Duration	Six months
Total Funding Received	HIF: £20.000,00
Partners	German Red Cross, Médecins du Monde, Caritas Germany, Pharmaciens sans Frontières, The Johanniter, Médecins Sans Frontières, Workers Samaritans Federation, German Leprosy and Tuberculosis Relief Association DAHW, Malteser international, German Institute of Medical Mission (DIFAEM), AGEG Consultants, ICON-Institute, Misereor, Sternsinger (PMK), German Doctors, medico international
Innovation Stage	Invention Phase

1. Introduction / Background

The core challenge addressed by the project was the observation that humanitarian health workers around the world can act effectively if they have access to the necessary tools.¹ The lack of access to such tools costs lives, as was proven in various scientific investigations, cumulating in the following observation: *“It is a shameful fact that [...] people are still dying because their healthcare workers don’t have access to the information they need”*.² This is even more valid in situations of crisis or catastrophe, when chaos prevails and real-time access to technical information is vital. This has been observed during various humanitarian emergencies in the past years, especially in situations where the Cluster system was not fully functioning. But even more so the availability and dissemination of health information was not even part and parcel of well-functioning health clusters. The focus was generally more on policy level documents rather than hands on guidelines and the likes.

MEDBOX aimed at closing this gap by collating quality, open-access, practical documents such as clinical guidelines, assessment checklists or textbooks on **one** homepage. The MEDBOX team started to better apply what we know already by allowing easy access to what is available. In addition, MEDBOX started developing innovative generic checklists and survey tools for humanitarian practitioners for all aspects of work. These tools can be adjusted to any given setting and tailored for specific needs.

With the provision of specialized toolboxes such as the Cholera Toolbox, the Typhoon Haiyan Toolbox or most recently the Ebola Toolbox, MEDBOX allows real-time access for humanitarian practitioners to operationally relevant practical tools also in particular scenarios. With most disasters happening without international attention, the direct access through MEDBOX will improve the quality of health action especially at local/national levels. The vision is to contribute to quality patient care, increased efficiency, standardisation and accountability of health action in humanitarian work, and enhance quality assurance, capacity building and learning especially on local or national level.

¹ The PLoS Medicine Editors (2013) Focusing the Spotlight on Lack of Access to Health Information. PLoS Med 10(4): e1001438. doi:10.1371/journal.pmed.1001438

² Quotation from a blog from Dr. Virginia Barbour, Editor-in-Chief, PLoS Medicine, HIFA2015 Conference: lack of access to healthcare information is lethal, May 2011. URL: <http://blogs.plos.org/speakingofmedicine/2011/05/12/hifa2015-conference-lack-of-access-to-healthcare-information-is-lethal/>

2. Achievements

In the reporting period MEDBOX concluded the innovation phase and phased into the development stage. According to the original action plan, the following results were achieved.

Result 1: MEDBOX website created and operational

After identifying the designing and programming companies Newton21 and u|screen in late 2013, the project invention and development took on speed, largely thanks to the small grant approved by HIF.

The development of the homepage was a process over a period of twelve months, reflecting an innovation process that requires regular consultations with many stakeholders. The development of the sitemap took more than eight months and consultations of over 30 international experts

In the run of this process we came to understand that the invention can best take shape if we had a functioning internet platform to work with rather than theory alone. The design of the webpage was a challenge as it had to follow the claim that a library homepage can be colorful and pleasant for the user to be browsing through and at the same time be practical and easy to navigate. After satisfactory accomplishment we decided to launch MEDBOX in October 2013 to then start working on the backend and editorial side. It took well over six months to eradicate bugs and finalise the backend allowing documents to be uploaded smoothly. In the course of this process we were faced with challenges with one of the companies we hired that were beyond our control, and which caused a delay in further developing the website for almost four months. As a consequence, the webpage was not widely promoted until all bugs were eliminated. Since March 2014 the website is functional and had at that time 800 key humanitarian documents uploaded. The archive system underwent several tests before more documents were uploaded. This included the editorial side (backend), the search engine and the capacity of users to find MEDBOX documents through commercial search engines (such as google). By the end of the reporting period, the archive holds 1.800 documents.

Result 2: MEDBOX online archive system equipped and checklists and tool-kits created

In order to stock the online archive with relevant documents we initially started with a collection of fairly undisputed key guidelines such as the Sphere Handbook, many WHO guidelines and those from international NGOs such as MSF, Oxfam, Save the Children, Action against Hunger, and the Red Cross and Red Crescent Movements (IFRC and ICRC). We reached out to all major organisations also because we needed to receive legal permission from the authors to re-publish PDF documents according to international

copyright laws. These were all successfully obtained with only one exception.³ Until the end of the reporting period, we were able to upload over 1.800 documents to the library. This was only possible with the support of two assistants (graduate students) who joined the MEDBOX team from February til August.

After the skeleton of the aid library was developed we invented and developed additional tools:

- **Responsive design**

Allowing the use on mobile devices such as tablets and smart phones required a special design of the original PC format for smaller hand-carried mobile computers and smartphones. The design was then linked to the interface of MEDBOX and went online in August 2014.

- **Favourites (My own MEDBOX)**

Registered users have the option to set up their “own MEDBOX”, saving documents of interest in a closed area of the webpage. The registration is a three-step free of charge process that allows users to administer documents of their interest in a way well known from the windows explorer. A total of 371 users have signed up to date and can make use of the additional features of MEDBOX.

- **Checklists / Survey tools.**

The biggest innovation of MEDBOX is the vision of producing an easy to use survey tool that can be applied for assessments, monitoring and evaluation purposes. The invention stage was characterized by a lively cooperation with Doctors without Borders /Médecins Sans Frontières Germany, who were keen on piloting a checklist for hospital evaluation through MEDBOX. The development of the checklists is complete by 85% at the end of the reporting period with a few tangible features already.

- **Toolboxes**

Toolboxes are a specialized feature of MEDBOX allowing rapid access to one particular context or topic. With the Ebola Toolbox we have the first serious test case. Established as early as April 2014, the Toolbox by now receives the greatest attention of all MEDBOX subheadings, followed in number of visitors by clinical guidelines and Public Health issues. We were able to react to some acute crises during the reporting period, which is the Polio outbreak in Syria and Iraq (leading to the Syria Toolbox) and the cholera toolbox. Older Toolboxes will be archived and remain available for all.

³ Hesperian Health Guides

Result 3: MEDBOX operational

Within the reporting period, MEDBOX became fully operational and functional, starting from the invention and early development phase in early 2014.

The support and co-funding from the German Foreign Ministry and 18 internationally active organisations and institutions and further support of some academic institutions allowed to create a solid, innovative and internationally relevant tool. With the Ebola outbreak starting in March 2014 the MEDBOX reached out to a total of 134 countries, with regular visitors from 40 countries. MEDBOX has 25.014 visitors since the promotion started in March 2014, who in total performed 139.992 actions. The just over 1.800 documents on MEDBOX have been viewed over 340.000 times and downloaded more than 78.000 times. The graph shows the development of the visitor numbers within the reporting period, culminating at 3.633 visitors just last week.

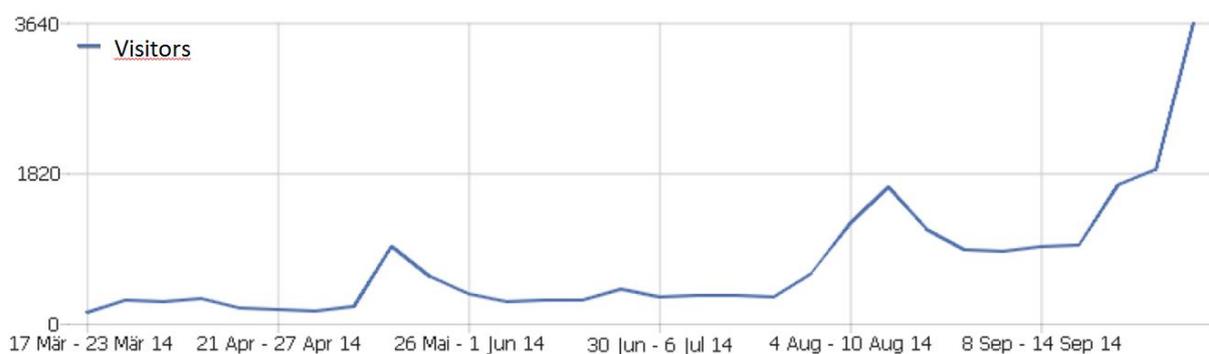


Figure 1: Visitors to MEDBOX

All three peaks are related to the Ebola outbreak and the Ebola Toolbox of MEDBOX. In August and September the Ebola Toolbox was promoted through social media, primarily LinkedIn and facebook. The last peak was a result of posting a chapter from a famous textbook (Manson’s tropical Diseases) on viral haemorrhagic fevers on MEDBOX – to date the only place to access this, apart from the Wellcome Trust’s homepage, where it is difficult to find. This particular chapter has been downloaded over 1.200 times in less than two weeks. By now MEDBOX has over 500 visitors per day.

We have received a lot of feedback from users around the world, commenting and applauding the efforts behind the MEDBOX.

3. Risks and assumptions

Within the reporting timeframe we were not able to complete all of the planned tasks of innovation. Inventing a homepage of this complexity was new to our team and placed some unextected challenges for the team. For one the programming of tools such as the favourites and the responsive design took longer than anticipated. Also, we had to

First International Humanitarian Innovation Conference in Oxford

In June 2014, the MEDBOX team went to Oxford to participate in the first ever humanitarian Innovation Conference. MEDBOX handed in an abstract and was accepted for an oral presentation.

Annual Meeting of the German Association of Medical Librarians

On 24 September 2014, MEDBOX received the second price as a beacon project of the Association of German Academic Medical Libraries and was honoured during their bi-annual conference in Mannheim, Germany. The MEDBOX team was asked to give a talk on MEDBOX, which was highly appreciated by the audience.

XVI. Humanitarian Congress Berlin

In October 2014, MEDBOX was present at the Humanitarian Congress in Berlin with a visible information booth in a central location. The Ebola Toolbox raised a lot of attention.



Apart from presentations and booth, the MEDBOX team was using every occasion to extend networks and increase its repository. Many of MEDBOX's partners have posted links and information on MEDBOX on their respective homepages.

Annex I: Feedback MEDBOX May 2014 (LinkedIn / Facebook)



Chilunga

Chilunga Puta

Senior Technical Advisor/Deputy Director at MACEPA/PATH

This looks like an excellent innovation and certainly worthy of support. There are many documents out there and perhaps more succinct guidelines on the kinds of documents might help - otherwise all and sundry will come in and this might be overwhelming for the reviewers. just a thought!



...

Chilunga Puta

Senior Technical Advisor/Deputy Director at MACEPA/PATH

Thanks Joost. This will definitely be an important resource.



Hans

Hans Scherpenhuijzen

Project Manager bij CIMIC Centre of Excellence

Structure, search function, document preview and download, indeed make it an innovative online library. Compliments with this outstanding product ...



Deborah

Deborah Van Dyke

Director at Global Health Media Project

This is a great resource Joost! I see you have The Story of Cholera -- an animation we produced. That's great. It's now in 26 languages with more to come.

We also have a newborn care series and next week will start rolling out our first childbirth videos. They are for frontline health workers in low resource settings so may be helpful for aid workers who are training local health workers. We have them narrated in French, Spanish, Swahili, Nepali, Khmer with Urdu coming. They are under a Creative Commons license so you can feel free to post them on your site. Our website link: <http://globalhealthmedia.org/>



Ramiro

Ramiro Gonzalez

Experienced International Medical Graduate & Bilingual Teacher.

Great toolkit, congrats Dr Van Der Meer

Like • Reply privately • Flag as inappropriate • 1 hour ago

(er bezieht ich auf Joost van der Meer, ein HIV u. TB Spezialist, den ich aus gemeinsamen MSF Zeiten gut kenne – kann man also so stehen lassen – ich hab's ihm privat geschrieben)



Dr
Kalpana

Dr Kalpana Chandra

Senior Physician and Medical Officer Incharge at Delhi Jal Board

Thank you for the fantastic resource.

Like • Reply privately • Flag as inappropriate • 2 days ago



Mina

Mina Taheri

Lecturer at College of Nursing and Midwifery, Shiraz, Iran

Thanks alot for sharing this so applicable database!

Like • Reply privately • Flag as inappropriate • 1 day ago



omprakash

omprakash vishwakarma

District Program Officer at PSI Nepal

Thank you for fantastic resource

Like • Reply privately • Flag as inappropriate • 14 hours ago

Annette S Greer

abeck134@gmail.com

Feedback:

I just read about MEDBOX today on reliefweb. Its a wonderful resource for those out in the field. My husband and I are Humanitarian Missionaries for our church (LDS) in Ecuador, and we are truely loving this experience with this very special people. I have downloaded the NRT booklet, for extra reading material as we are doing an NRT project here in July.



SHAHID YUSUF MD MPH DTCD

Public Health Consultant at PIONEER PUBLIC HEALTH CONSULTANTS, USA

Thank You !!!

SHAHID

Like • Reply privately • Flag as inappropriate • 2 days ago



Sali Mohsen M. Hafez

Global health professional and researcher

Thanks alot Joost! this is such a great resource!

Sali
Mohsen
M.

Like • Reply privately • Flag as inappropriate • 1 day ago



Neil Pakenham-Walsh

Chair at Dgroups Foundation

Great innovation!

Neil

Like • Reply privately • Flag as inappropriate • 1 day ago



Mercedes Suarez

Global Health & Public Health

Thanks so much, it's very interesting!!

Mercedes

Like • Reply privately • Flag as inappropriate • 1 day ago



Rob Camp

Writing, Editing, Education

Outstanding! I'll be tweeting and face booking it all week! Good luck and hopefully at Eupati we'll be able to contribute soon. Is your material Creative Commons?

Rob

Like • Reply privately • Flag as inappropriate • 20 hours ago



Lal Mani Adhikari

TB Reach Project Assistant at International Organization for Migration

Outstandingly worthful platform to get innovative ideas and linkages.

Lal Mani

Like • Reply privately • Flag as inappropriate • 2 hours ago

**Vadivel Vasantha**

Infection Control Coordinator/Trainer at Directorate General of Health Services, Sleymania, Iraq

Vadivel

Excellant tool, Thanks a lot to the contributors!

Like • Reply privately • Flag as inappropriate • 3 days ago

**Dr. Hala Al Ashi "Seeking Medical Admin Work"**

Doctor at Dubai health Authority

Dr. Hala
Al Ashi

Great online library resource.. Thanks Joost ..

Like (1) • Reply privately • Flag as inappropriate • 3 days ago

👍 Vadivel Vasantha likes this

**Nina Naidu**

owner at Nina S. Naidu, MD, PC

Nina

A wonderful resource, thank you for posting!

Like • Reply privately • Flag as inappropriate • 4 hours ago

Otter Wolfgang

otterfamilie@hotmail.com

Feedback:

Dear Sirs,

thank you very much for this great "tool box", the library of Medbox!

I learned about Medbox from the last copy of "Heilung und Heil", the journal of the "Missionsärztliches Institut Würzburg".

I am retired and worked before in Anaesthesiology.

For several years now, I am member of the German Doctors, Bonn.

Our most exciting project at the moment is in the Community Hospital Serabu in Sierra Leone.

There, beside the every day medical work in the hospital, we teach and train the local personal as intense as possible. It is a really great challenge to all of us (Paediatrics, Gyn/Obstetrics, Surgery, General and InternalMedicine, Anaesthesiology) to work under these extraordinary circumstances in a

black african country.

Thank you for your support!

Dr. Wolfgang Otter



Priyantha Liyanage
Medical Officer at Ministry of Health Sri Lanka

I think it is a great effort..

Priyantha

Like • Reply privately • Flag as inappropriate • 8 days ago



Musonda Kapili
HIV/AIDS PROGRAMMS OFFICER(M and E) at ZAMBIA NATIONAL SERVICE

I have visited the medbox site, it's such a good idea

Musonda

Like • Reply privately • Flag as inappropriate • 5 days ago



Dr Shanta Ghatak
Director at Public Welfare Trust Organisation and bhoruka research centre for haematology and blood transfusion

It is definitely an infinite window of opportunity for some of us.....thanks for the GIANT LEAP forward

Dr Shanta

Like • Reply privately • Flag as inappropriate • 1 day ago



Rishav Sigdel
President at HDFN and Hard-Nepal

Dear Butenop! I am happy use this library in future. Thanks.

Rishav

Like • Reply privately • Delete • 2 days ago



Margaretta Gloria Chandi
Experienced Public Health Nurse, Tutor and Midwife

good job. It is helpful

Margaretta
Gloria

Like • Reply privately • Flag as inappropriate • 8 days ago



Ria Boot
Health & WASH Cluster Coordinator at Dorcas Aid International

Wow - this is great!
Good job.

Ria

Like • Reply privately • Flag as inappropriate • 8 days ago



Suzanne Wingate
Educator, Artist, Humanitarian

At last this has arrived!

Suzanne

Like • Reply privately • Flag as inappropriate • 7 days ago



Neelam Sekhri Feachem
Chief Executive Officer at The Healthcare Redesign Group Inc.

Very interesting and useful! Great work!

Neelam

Like • Reply privately • Flag as inappropriate • 6 hours ago

Annex II: Original application document

HUMANITARIAN INNOVATION FUND

Small Grant Application

Organisation Name	Medical Mission Institute Würzburg, Germany - The Advisory Group for International Health
Type of Organisation	Non-governmental Organisation
Address/ Main contact person / Position / Contact details (email, Tel)	Hermann Schell-Str. 7, 97074, Würzburg, Germany; Dr. Joost Butenop, MedBox Project Coordinator joost.butenop@medmissio.de ; 0049 932 804 8513

Project Title	MEDBOX – THE AID LIBRARY
Location	Würzburg, Germany
Start Date	01/04/2013
Duration	Six months (pilot phase)
Total Funding Requested	HIF: £20.000,00 (primarily for budget line “Group 2”)

Partner(s) <i>(to date)</i>	German Red Cross, Médecins du Monde, Caritas Germany, Pharmaciens sans Frontières, The Johanniter, Médecins Sans Frontiers, Workers Samaritans Federation, DAHW German Leprosy and Tuberculosis Relief Association, Malteser international, German Institute of Medical Mission, AGEG Consultants, ICON-Institute, Misereor, Sternsinger (PMK), German Doctors, medico international
Total Funding	Total Funding: € 93.867,00 HIF: £ 20.000,00 (equals €23.204,00) Partners: € 61.277,00

	Own Resources: € 9.386,00
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One sentence description of the innovation	MEDBOX is an innovative online library providing relevant, open source documents and innovative checklists, for practical use, during medical humanitarian interventions, thereby contributing to quality assurance and accountability in humanitarian assistance.
Innovation Stage	Invention Phase
Type of Innovation	Product – Service (Online Library)
What type of humanitarian intervention are you targeting?	All health-related humanitarian interventions, acute and chronic
What is the core challenge that you feel needs to be addressed?	Humanitarian health workers around the world can act effectively if they have access to the necessary tools. ⁴ The lack of access to such tools costs lives, as was proven in various scientific investigations, cumulating in the following observation: <i>“It is a shameful fact that [...] people are still dying because their healthcare workers don’t have access to the information they need”</i> . ⁵ This is even more valid in situations of crisis or catastrophe, when chaos prevails and real-time access to technical information is vital.
What will your innovation achieve?	MEDBOX aims at closing this gap by collating quality, open-access, practical documents such as clinical guidelines, assessment checklists or textbooks on one homepage, thereby allowing real-time access for humanitarian practitioners. The challenge is to better apply what we know already by allowing easy access to what is available. In addition, MEDBOX will generate innovative generic checklists for humanitarian practitioners for all aspects of work. These tools can be

⁴ The PLoS Medicine Editors (2013) Focusing the Spotlight on Lack of Access to Health Information. PLoS Med 10(4): e1001438. doi:10.1371/journal.pmed.1001438

⁵ Quotation from a blog from Dr. Virginia Barbour, Editor-in-Chief, PLoS Medicine, HIFA2015 Conference: lack of access to healthcare information is lethal, May 2011. URL: <http://blogs.plos.org/speakingofmedicine/2011/05/12/hifa2015-conference-lack-of-access-to-healthcare-information-is-lethal/>

adjusted to any given setting and can be tailored for a variety of needs.

The direct access of operationally relevant documents and innovative checklists through **MEDBOX** will improve the quality of health-related humanitarian action, especially at local/national levels, and will ultimately contribute to quality patient care, increased efficiency and standardisation of health action and accountability.

- End of Cover Page (2 pages max) -

SECTION 1: CONTEXT ANALYSIS AND RATIONALE FOR INNOVATION

Existing Practices and Innovation

Confronted with disasters or crises, local or national organisations, or authorities in charge, do not often have necessary information or tools readily available to facilitate rapid, quality actions. Currently, many practitioners rely on piecemeal information and guidelines that are available to them through their own searching, recommendations or hearsay. Although most of the standardised tools and guidelines in humanitarian practise are available online it is not always easy to locate them. Finding relevant documents for medical humanitarian work on the WHO online library, for example, is often challenging. During some of the more recent, large-scale emergencies in Pakistan or Haiti, UN OCHA offered only selected documents on their country-specific internet sites⁶. Yet, both websites did not contain any medical documents! Commonly, not even the Health Cluster leads are aware of the existence or quality of hands-on guidelines available online. The consequence can be a variable quality of medical responses. Importantly, this situation is not necessarily the fault of healthcare providers or managers in humanitarian assistance. Healthcare providers can function effectively if their basic professional needs are met. It has been proven that lack of access to information for health professionals is a major contributing factor for child and maternal mortality.⁷ Some networks such as the Health Information For All by 2015⁸, have been supporting healthcare information dissemination for several years. However, all libraries that have been set up so far have a scientific, rather than an operational focus. The online library **MEDBOX** will close this gap and add special value by providing comprehensive generic ready-to-use innovative checklists that can be tailored for everyone's use and individual needs.

Evidence and Rationale for the Innovation

For anyone working in humanitarian settings, the necessity of immediate, up-to-date information is paramount, especially with regards to operationally relevant information such as guidelines and checklists for various health related issues. At the same time, a major limitation in providing quality humanitarian assistance is the knowledge gaps at field level. This was observed during various acute interventions in the past few years in Myanmar, India, Pakistan, Haiti and Turkey, to name but a few, recent examples. The challenge is to ensure that everyone working in humanitarian assistance “[...] can have access to health knowledge – this is a basic human right, and a public health need as important as access to clean, clear water, and much more easily achievable.”⁹

⁶ See www.pakresponse.info and www.haiti.humanitarianresponse.info

⁷ <http://www.hifa2015.org/about/why-hifa2015-is-needed/>

⁸ Health Information for All by 2015, URL: <http://www.hifa2015.org/>

⁹ Pang T, Gray M, Evans T (2006). A 15th grand challenge for global public health. *The Lancet*, 367(9507), 284-286

Quality assurance and accountability are important values in humanitarian action and receive growing attention by actors, donors and the public alike.¹⁰ Real-time access to operationally relevant documents and innovative checklists online will facilitate application of medical standards and hence raise the quality of interventions and, consecutively, improved humanitarian outcomes and impact. Despite many calls for developments in this direction in recent years (see various footnotes), so far nothing has been developed for practical use in the field of humanitarian action. This project will be the first of its kind. Innovative, user-friendly, generic checklists will be generated to allow humanitarian actors to quickly get an overview over a given situation and tailor interventions according to the needs. One could pick from a wide range of questions and specifications and select relevant aspects for one's own purpose.

MEDBOX will develop a programme that allows individual selection of criteria and hence be applicable to any setting.

Potential Impact:

MEDBOX will improve the quality of health-related humanitarian action, especially at local/national levels and ultimately contribute to improving the quality of patient care and standardisation of health action by providing access to relevant tools, anytime, anywhere, in a handy, easy to use format! Furthermore, innovative user friendly checklists will be made available for individual use, adding value to timely humanitarian quality interventions. With increasing internet access largely utilised through mobile phones (as was seen in Haiti), the internet will be the major source of health care information in humanitarian aid, in the future.

Users of MEDBOX include those in charge of the medical relief efforts of the Provincial Disaster Committee in Baluchistan tasked with managing flood relief; the MoH staff in Myanmar facing challenges after yet another cyclone; or the medical team of a CBO in Zimbabwe dealing with cholera or typhoid outbreaks.

We envision for the future that MEDBOX and its innovative tools will be *the* instrument to use in acute humanitarian emergencies.

SECTION 2: DESCRIPTION OF THE METHODOLOGY AND PLANNED ACTIVITIES

Conception of the Innovation

Describe how the innovation has been developed to date:

MEDBOX has been developed to the point where a preliminary website and sample 'toolkit' have been created at www.medbox.org, including a distinctive logo for the project.

¹⁰ Kersten, Roland, et al. "Too complicated for the field? Measuring quality of care in humanitarian aid settings." *Global health action* 6 (2013).

Furthermore, a small team has been established and information materials created. We have opened the tender for design and programming of the homepage and innovative generic checklists and managed to establish a broad partnership with relevant donors and stakeholders. Seed funding of partners has also been raised.

Indicate the level of engagement and involvement of stakeholders:

The idea of the project originated from communication and observations at field level in acute emergencies, over a few years. It was field workers (national and international) who voiced frustration at the challenge of accessing and sharing information, as well as a lack of hands-on tools within the field workers' set. National and international humanitarian workers from our professional networks have been involved in the development of the concept and sitemap. They have made significant contributions to **MEDBOX** since its founding. **MEDBOX** was created to meet gaps identified by these stakeholders themselves to allow its users to gain maximum benefit from this innovative project. Our partners do not only engage financially, but also contribute to the development of the project with expertise (see appendix C).

Indicate how the beneficiaries / target groups were involved and consulted in the conception of the innovation:

As the innovation is still in the 'invention and development phase' consultation and partnership building is still actively occurring. Currently, consultations are being held with humanitarian professionals and organisations around the globe to allow maximum input on structure of the site map and content.

Methodology

In order to develop this innovative online-library project, the team will develop a sophisticated archive and document management system (CMS and DMS) and search engine. We aim at using free-ware for the development. Legal requests, regarding the waiver of copyright from the owners for using their PDF documents, are already under way; so far with exclusively positive replies.

The **MEDBOX** team will revise available tools and checklists together with an expert panel, which will lead to the development of innovative generic checklists. Operationally relevant documents will be revised by the same panel for each of the sub-sections. Users will then rank the usefulness with stars and comments. Furthermore, statistics on use (views and downloads) will be transparent for each document. The order of appearance of documents on the respective sub-sites will be defined by the users through the ranking option in combination with the above mentioned statistics.

The project is open to advice from all humanitarian professionals with the aim of updating and improving the project constantly without compromising user-friendliness. Quality assurance is an important aim of the project and will be guaranteed by the users themselves through the ranking option.

Planned activities

The planned activities for the development phase can be divided into the following:

- a) MEDBOX website created
- b) MEDBOX online archive system equipped, checklists and tool-kits created
- c) MEDBOX operational through sufficient funding

Please see also Appendix D, Work Plan.

SECTION 3: MONITORING, LEARNING AND EVALUATION

Outline the monitoring, evaluation and learning (MEL) system put in place:

- Stakeholders engagement

Stakeholders are, and will be, engaged in the MEL process through constant (already occurring) face-to-face forum, written and verbal input and feedback on the project. The whole idea of **MEDBOX** is to enable field workers and organisations to provide quality health work in humanitarian contexts, hence their involvement is crucial for the success of this innovation. Partnerships and feedback, critique and innovation from our partners is essential. As a result, one of our main roles is to establish open communication channels and share knowledge and information with our partners to ensure that the highest quality of medical information is being made available. Users of the MEDBOX will also be able to provide feedback directly through the website, which is essential for MEL processes.

- Dissemination of findings and lessons

MEDBOX is a flexible project made to serve health workers with quality, open-source material at their fingertips, with the aim to improve the quality of interventions. All relevant feedback received will directly influence the project and be incorporated. We actively seek and encourage critical and constructive feedback from our users so that the format, content and availability of **MEDBOX** may be modified to meet the needs of our stakeholders. A regular E-newsletter will supply subscribed users with feedback and information of each phase.

SECTION 4: ASSUMPTIONS, PROJECT RISK AND MITIGATION

Risk	Likelihood	Monitoring	Mitigation
Lack of financial	Low	Budget planning, financial	Multiple funding sources over the

resources		management.	long-term.
Duplication with other services	Low-Medium	Consultation with stakeholders, discussions, research.	Meeting and coordination with all (or as many) stakeholders as possible.
Lack of access to necessary medical resources	Medium	Consultation with stakeholders, discussions, research.	Meeting and coordination with all (or as many) stakeholders as possible.

This project poses little or no risk to other stakeholders and can instead be viewed as an *asset* to both organisations and individuals. This is due to **MEDBOX** being created to fill a gap which stakeholders, themselves, have identified.

SECTION 5: TEAM CAPACITY, PARTNERSHIP AND COOPERATION

Who is implementing the project? Is there any partnership planned?

- *Human resources needs*

MEDBOX is coordinated by a project team at the Medical Mission Institute (MMI) Würzburg, Germany, the Advisory Group for International Health. The **MEDBOX** team consists of two professionals with extensive experience in humanitarian settings, library set up and networking.

The current partner organisations of MEDBOX are: Médecins sans Frontières, Médecins du Monde, Caritas international, German Red Cross, The Johanniter, Malteser international, Workers Samaritans Federation (ASB), Pharmaciens Sans Frontières, German Institute für Medical Mission (DIFAEM), AGEG Consultants, ICON-Institute, DAHW German Leprosy and Tuberculosis Relief Association, Misereor, Sternsinger (PMK), German Doctors, and medico international (also see Appendix C). More organisations are expected to join the project.

The project so far receives scientific support from:

University Berlin, Charité, Institute for Social Medicine, Epidemiology and Health Economy, University Bochum, Institute for International Law of Peace and Armed Conflict (IFHV) (NOHA Master Course), University of Applied Sciences Fulda, Institute for Public Health

MMI is providing office space and infrastructure to **MEDBOX**. Furthermore, MMI contributes 10% of the overall costs, which translates into mainly funding human resources. The funding sought from HIF will not be used on office or other operational costs but instead on innovation and implementation of the MEDBOX project and its tools. Current human resource needs are being met. It is hoped, however, that the project receives broad international attention and in the future it is envisaged that both the partners and the team will expand.

- *Engagement/collaboration with stakeholder groups/networks*

MEDBOX aims at endorsements from the Global Health Cluster, WHO, the SPHERE project and other multilateral organisations such as ECHO, UNICEF, UNHCR and UNOCHA. The project aims at a broad partnership of multi- and bilateral agencies, international and national NGOs, consulting, scientific and research institutions dealing with medial humanitarian assistance and capacity building therein.

SECTION 6: VISUAL

A preliminary website is online at www.medbox.org to (a) illustrate the innovative idea to partners, donors and users and (b) display the sitemap for comments and input from the humanitarian community and other relevant stakeholders.

- Example: Cholera Toolkit: The most complete collection available in the internet of relevant open-source documents on cholera and diarrheal disease outbreaks has been compiled in the Cholera Toolkit and is currently available at: <http://medmissio.de/bibliothek-001/cholera-toolkit-2>. This gives a first impression of what **MEDBOX** will be offering.

Furthermore, a logo and an information card have been designed, see appendix C.

Appendix A: Summary CV of key members of the team

Name: Dr. Joost Butenop, MD, MPH	Date of Birth: 20.01.1968
Position/ title: Technical for Advisor Humanitarian Collaboration & Public Health	Nationality: German

Relevant professional experience (post held, organisation, main function(s), year)
<p>Technical Advisor, Humanitarian Collaboration & Public Health (2008 – date) Medical Mission Institute, Germany. Technical advisor to various international NGOs and bilateral agencies; Postgraduate teaching assignments; Assignments in Myanmar, India, Zimbabwe, Haiti, Pakistan, Turkey; Project Coordination Haiti (2010 – 2013).</p> <p>Operations Advisor / Deputy Head of Projects Department (2005 – 2007) Médecins Sans Frontières O.C. Amsterdam, “Berlin desk”. Support to Indonesia (Aceh), Bangladesh, Uzbekistan, Turkmenistan, Nigeria, Zimbabwe, Chad, Central African Republic; medical strategic advice, context analysis, security analysis, communications (PR), lobbying and advocacy, HR management, financial management.</p> <p>Project Coordinator (2003-04) MSF-H, Pakistan (Quetta). New project set up in Afghan refugee camp (50.000), primary health care</p> <p>Freelance consultant in between missions (2003 – 2005) for different NGOs</p> <p>Projects Manager (2002 – 2003) Concern Universal The Gambia. Set up of emergency preparedness system in collaboration the government’s National Disaster and Relief Department, capacity building of local NGOs</p> <p>Project Coordinator (2001) MSF-B, Angola. IDP camps, nutrition centres, assessments</p> <p>Medical Doctor (2000) MSF-B, Afghanistan, Primary Health Care, malnutrition, cholera</p>

Relevant degree(s) (subject, school/university, year)
<p>Medical Doctor – University Göttingen, Germany – 1997</p> <p>Doctorate thesis (equivalent to PhD) – University Göttingen, Germany – 2003</p>

Master of Public Health – Universiti Malaya, Kuala Lumpur, Malaysia – 2005

List of relevant research activity / projects (include full reference)

Project coordination (PHC) in Haiti, 2010 – date

Tutor of master thesis for NOHA students on humanitarian issues in Myanmar and Haiti

Other relevant information

- Extensive project management experience in Africa and Asia
- Work at UN Health Cluster level in Pakistan for GIZ, supporting the set-up of a regional operational health cluster in Peshawar

Name: Sieglinde Mauder	Date of Birth: 25.08.1960
Position/ title: Head, Documentation and Information Centre	Nationality: German

Relevant professional experience (post held, organisation, main function(s), year)
<p>Head, Information and Documentation Centre, Medical Mission Institute, 1991 – date</p> <ul style="list-style-type: none"> • Support of partners in the development and installation of documentation and resource centres; online libraries • Scientific literature research and documentation • Compilation of thematic literature readers • E-Learning, blended learning

Relevant degree(s) (subject, school/university, year)
Scientific Antiquarian, 1979

List of relevant publications / research activity / projects (include full reference)
<ul style="list-style-type: none"> • Development and Installation of physical and online library at African Jesuit AIDS Network (AJAN) Nairobi (2006-date) and Centre d’Esperance, Lome/Togo (2012-date) • Development of e-learning capacities for African Jesuit AIDS Network (AJAN) (2013) • Assistance analysis of real ODA flows for health and HIV/AIDS (2009-date)

Other relevant information

Appendix B: Brief budget information, including applicant's/consortium's financial and/or in kind contribution if any

Budget overview

Description		Costs	Comments
Group 1: Human Resources			
1.1.	Technical personnel	25.620,00 €	Development and implementation of project
1.2.	Administrative support	9.400,00 €	Data entry and general administration
	<i>Subtotal Group 1</i>	<i>35.020,00 €</i>	
Group 2: Project Costs			
2.1.	Design of homepage and other products	8.900,00 €	Outsourcing design of homepage (logo and information flyer already designed), incl. taxes
2.2.	Programming of Content Management System (CMS)	38.319,00 €	Outsourcing development of archive / library system (CMS and DMS) using freeware, incl. taxes
2.3.	Purchase of domain www.medbox.org	1.018,00 €	Done
2.4.	Printing of information material	2.500,00 €	Printing of information cards and other relevant items for promotion and further fundraising
2.5.	Legal support	2.000,00 €	10 hours of legal advice and support
2.6.	Travel	2.500,00 €	For coordination of partners, presentation of the project to donors, raising support from other organisations and agencies
	<i>Subtotal Group 2</i>	<i>55.237,00 €</i>	
Administrative overheads		3.610 €	4% of project costs

Total project costs	90.257 €
Grand total	93.867 €

incl. 4% administrative overheads

The Medical Mission Institute will cover 10% of the overall costs.

Support generated so far from partners (alphabetical, last update: 20. June 2013)

Name of Organisation	Acronym	Sum
AGEG Consultants	AGEG	500 €
Caritas international	Ci	3.000 €
DAHW German Leprosy and Tuberculosis Relief Association	DAHW	2.000 €
German Doctors e.V.	GD	2.000 €
German Institute for Medical Mission (DIFAEM)	DIFÄM	500 €
German Red Cross	DRK	2.000 €
ICON-Institute	ICON	500 €
Malteser international	Mi	2.000 €
Médecins Sans Frontieres	MSF	2.000 €
Médecins Du Monde	MDM	2.000 €
Medico international	mi	1.000 €
Misereor	-	5.000 €
Pharmaciens sans Frontières	PSF	2.000 €
PMK Sternsinger	PMK	3.000 €
The Johanniter	JUH	2.500 €
Workers Samaritans Federation / Arbeiter Samariter Bund	ASB	500 €
SUM		30.500 €

More organisations are expected to join the project and cover the current remaining deficit of the budget.

The project receives scientific support from:

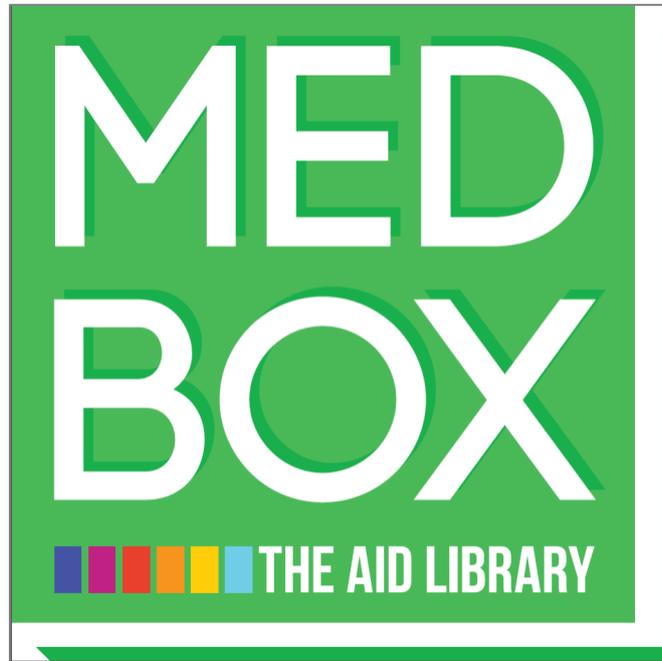
- University Berlin, Charité, Institute for Social Medicine, Epidemiology and Health Economics
- University Bochum, Institute for International Law of Peace and Armed Conflict (member of the Network of Humanitarian Assistance - NOHA)

- University of Applied Sciences Fulda (Institute for Public Health)

The project aims at receiving endorsement from the following agencies: (which will be sought during the current development phase)

- SPHERE Project
- Global Health Cluster
- WHO
- UN OCHA
- UNHCR
- UNICEF
- VOICE

Appendix C: Logo and information card (Aug. 2012)



IMPROVING THE QUALITY OF MEDICAL INTERVENTIONS

Real-time availability of relevant medical literature is often imperative and at the same time challenging for health organisations in the context of emergency relief and international development cooperation. The internet offers an increasing number of professional guidelines, textbooks and practical documents on clinical work and public health.

- Quality documents covering all aspects of clinical and public health work
- Practical resources for humanitarian relief and development workers
- Specialized toolboxes (e.g. cholera toolkit)
- Constantly updated and revised archives
- News on latest publications
- Easily accessible online, via Facebook & as a download on your mobile phone

MEDBOX is a 'one click', constantly updated & quality assured
AID LIBRARY with UP-TO-DATE practical MEDICAL RESOURCES.

MEDBOX. THE AID LIBRARY. TOOLS TO SIMPLIFY YOUR LIFE. 



Appendix D: Work plan

Name of project: MEDBOX – The Aid Library												Total funds: £ 20.000,00					
Organisation: Medical Mission Institute – The Advisory Group for International Health												Duration: 6 months					
Expected Results	Main Planned activities	Implementation period												Responsible party	Amount		
		Months													2013		
		1	2	3	4	5	6	7	8	9	10		HIF	Others	
MEDBOX website created and operational	Recruitment of team / agency programming the website	X													MI	20.000,00€	61.277,00€
	Website and document management system created / innovative tools and checklists programmed		X	X	X										outsourced	3.204,00€	7.386,00€
	MEDBOX website launched / publicised					X	X								MI	-	2.500,00€
	Monitoring and Evaluation			X			X								MI, partners		
MEDBOX online archive system equipped and tool-kits created	Collation of relevant documents	X	X	X	X	X	X								MI and partners		
	Quality assurance of documents	X	X	X	X	X	X										
	Feedback / MEL from stakeholders	X	X	X	X	X	X										
	Archive system operational and tested				X												
MEDBOX operational	Partnerships established	X	X	X	X	X	X										
	Attendance of sector relevant events	X	X	X	X	X	X								-		