



LEADERSHIP DEVELOPMENT PROGRAM PLUS



A Country-Led Process for Focusing Health Teams on Priority Health Results

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ACKNOWLEDGMENT

This updated version of the LDP is based on ten years of implementation and testing by hundreds of facilitators and thousands of health workers in more than 40 countries. There are too many individuals to name as this has truly been a global effort, initiated by MSH, but owned by the LDP teams themselves. We thank them for the thoughtful feedback they have provided over the years that, along with two years of program research and pilot testing, has helped us develop the LDP+.

Our hope is that this new program, the LDP+, takes the best of the LDP — empowered teams able to focus on results they care about — and adds improved country ownership and public health impact. Throughout the program, there are important additions, such as a local Governing Body that chooses a focused public health area, and a local Technical Coaching Team that supports the Improvement Teams in using the indicators and identify public health practices that are most effective in achieving results.

Teams are still the heart of the program. Their leadership and vision create the commitment to change. We have designed this update with you in our thoughts. We give special thanks to Gwagwalada Health Council in the Federal Capital Territory in Nigeria who were the pioneers piloting the LDP+ the facilitators of the Nigeria Plan Health program, who, supported by Lourdes de la Peza, fearlessly implemented the pilot and have volunteered to train other countries in the process.

We also wish to acknowledge the hard work and dedication of the LDP+ Design Team: Lourdes de la Peza, Joan Bragar, Liz Mclean, Ann Buxbaum, and Mariah Boyd-Boffa.

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ORIGINS OF THE LDP+

The Leadership Development Program Plus (LDP+) is the enhanced version of the Leadership Development Program (LDP) first delivered by Management Sciences for Health (MSH) in 2002. The LDP+ builds on the unique features of the LDP: an experiential learning and performance improvement process that empowers people at all levels of an organization to learn leadership, management, and governing practices; face challenges; and achieve measurable results.

Since MSH introduced the LDP, participating organizations in more than 40 countries have used this proven process to transform how teams deliver health services. Working on real workplace challenges over time, teams receive feedback and support from coaches and facilitators to:

- Create an inspiring shared vision for addressing a priority health area.
- Apply leading and managing practices to improve teamwork and effectiveness.
- Use the Challenge Model process to identify and achieve desired measurable results.
- Align stakeholders around a common challenge.

FFATURES OF THE LDP+

Along with the basic LDP activities, LDP+ offers several new features that incorporate lessons learned from more than ten years of successful LDP implementation. Under LDP+, you will find that:

- A Governing Body comprised of senior managers from the country's health system uses good governing practices to oversee and support LDP+ implementation and scale up.
- Technical experts from the country highlight national health priorities and propose a menu of proven public health interventions that meet quality standards.
- Local Improvement Teams focus on achieving results in line with the national health priority highlighted by the technical experts.
- Improvement Teams engage in shared learning, based on their experience, about the most effective actions and the leading, managing, and governing practices that bring about measurable health results.
- The LDP+ process promotes gender equity by strengthening access to health services, increasing women and men's involvement in decision-making related to their health, and promoting opportunities for their equal participation in leadership, management and governance positions.

ACRONYMS

CSO Civil society organization

HIS Health information system

LDP+ Leadership Development Program Plus

LDP Leadership Development Program

M&E Monitoring and evaluation

MOH Ministry of Health

MSH Management Sciences for Health

NGO Nongovernmental organization

PMTCT Prevention of mother-to-child transmission

SMART Specific, measurable, appropriate, realistic, time-bound

VLDP Virtual Leadership Development Program



is a process that develops people at all levels of organizations. Working in their real work teams, participants learn leading, managing, and governing practices that enable them to face challenges and achieve measurable results.

They bring what they learn back to their workplaces, where they teach and inspire their coworkers to apply these practices to real workplace challenges in priority public health areas. LDP+ coaches provide feedback and support throughout the six to eight months of the process.

This approach to leadership development differs from traditional leadership training programs that introduce leadership theories and behaviors in a course setting. The LDP+ improvement process links learning to the implementation of actions that achieve measurable public health results. Teams not only initiate changes but they carefully monitor the results of those changes over time.

LDP+ FACILITATOR'S GUIDE

This guide is for facilitators to use and learn from as they implement the LDP+. It presents the foundations of the program and explains how to conduct all the necessary activities. It is designed to be easy-to-use and adaptable to the specific needs of an organization or LDP+ Improvement Team.

The guide includes:

- Background information for the LDP+ Champion and facilitators to use in preparing for LDP+ meetings and workshops
- Detailed instructions for facilitating each meeting and workshop
- Handouts for participants:
 - Facilitators may decide either to distribute the handouts one by one when they are used in a session, or to place them in a binder that participants receive at the start of the LDP+ process.
- Information for the Technical Coaching Team on how to guide and support LDP+
 Improvement Teams in monitoring progress and evaluating results

Additional resources for planning and leading the LDP+ process

Other support materials may be downloaded from the Leadership Facilitators section of the LeaderNet website: http://www.leadernet.org.

NOTE: LeaderNet is a global community of practice for managers who lead and LDP+ and Virtual Leadership Development Program (VLDP) facilitators. To use LeaderNet, first go to http://www.leadernet.org/ and register (there is no cost).

LDP+ OUTCOMES

LDP+ offers measurable benefits to those who participate in the process.

Health system leaders and decision makers apply leading, managing, and governing practices to:

- Oversee performance improvement processes and the use of proven public health interventions to address specific priority health areas.
- Ensure strong technical leadership of their health programs for which they are responsible.
- Sustain and scale up performance improvements and the LDP+ process.

Local Improvement Teams apply leading, managing, and governing practices to:

- Carry out proven interventions to achieve measurable results in the priority health areas.
- Build a productive workgroup climate.
- Measurably improve performance in priority health areas.
- Incorporate ongoing performance improvement processes into their work.

A TRANSFORMATIONAL APPROACH

LDP+ is designed to foster a series of "leader shifts" — changes in how participants think about leading, managing, and governing. The following table illustrates the leader shifts that most commonly occur as participants work together toward a shared vision and measurable results in a priority health area.

LEADER SHIFTS				
Shift perspective from	То			
Individual heroics	Collaborative actions			
Despair and cynicism	Hope and possibility			
Blaming others for problems	Taking responsibility for challenges			
Scattered, disconnected activities	Purposeful, interconnected actions			
Focus on individual needs	Concern for the common good			

LDP+ also fosters shifts in thinking about governance: setting strategic direction; establishing policy; raising and allocating resources; and overseeing achievement of results in a way that is responsive to the people an organization serves.

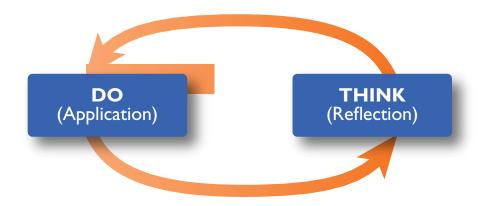
GOVERNANCE SHIFTS				
Shift perspective from	То			
Unclear roles and management systems	Transparency in all structures and systems			
Decisions made by a few at the top	Engagement with the full spectrum of stakeholders			
Resources allocated without strategy for addressing strategic priorities	Use of resources to serve beneficiaries in priority areas			
Not feeling responsible for achieving results	Being accountable for delivering results and reporting them in a transparent manner			
Friendship-based appointments	Competency-based appointments			
Male-dominated decision making	Cultivating male and female engagement in decision making			

These shifts are not easy to make or sustain. However, through the practices of challenge, feedback, and support, LDP+ encourages individuals to think and work differently with others in demanding conditions.

LDP+ LEARNING METHODOLOGY

LDP+ is grounded in three methodologies: experiential learning; the challenge/feedback/support triangle; and the Challenge Model.

Experiential learning. During the workshops and meetings, participants learn through a cycle of doing and then thinking or reflecting on what they have done. In the workshops, the teams learn leading, managing, and governing practices that validate their own, individual experiences. They apply these practices to real workplace challenges and engage in continuous reflection and improvement in their teams. This cycle of application and reflection moves teams through the experiential learning cycle.

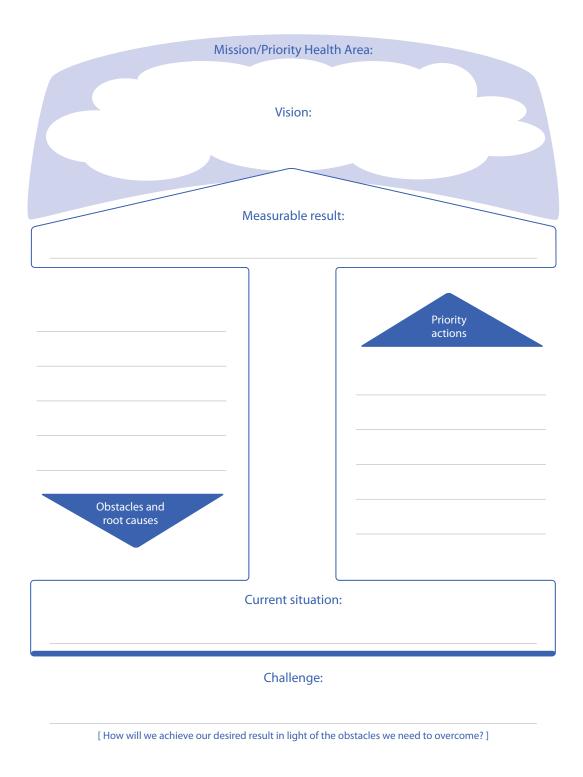


Challenge, feedback, and support. The LDP+ process provides challenge, feedback, and support to enable participants to develop their leadership, management, and governance skills. The Improvement Teams choose the challenges they want to address, and receive feedback and support from facilitators, coaches, and colleagues as they work toward their measurable results. The Governing Body also provides teams with support throughout implementation, as they are able.



Leadership Development Triangle

The Challenge Model. Each team completes this model for a priority health area that its organization is addressing. The process of completing the model guides the team to a fuller understanding of the priority health area and the creation of a shared vision. The team then identifies a measurable result that will move it closer to its vision of success in the priority health area. With an agreed upon result as a goal, the team then makes a plan to achieve that result. Participants often post their completed Challenge Model at their work sites to publicize their goals and plans.



The Action Plan. The activities teams will implement to achieve their measurable results are documented in their Action Plan. The plan describes each activity in detail, who is responsible for each activity, when each activity will take place, and what resources will be required for completing each activity. The indicators that will be used to track progress toward the measurable result are also listed.

The Monitoring and Evaluation Plan. Information about the indicators listed in the Action Plan that will be used to track progress toward the measurable result is contained in the Monitoring and Evaluation Plan. Since the LDP+ is focused on achieving service delivery results related to a priority health area, it is assumed that all teams will choose quantitative indicators that can be tracked monthly (as opposed to a qualitative indicator, such as client satisfaction, which would not necessarily be measured routinely and regularly). Information contained in the Monitoring and Evaluation Plan includes indicator definitions, baseline and goal/desired measurable result, data sources, and responsibility for data collection.

LDP+ FACILITATOR BELIEFS AND PRACTICES ENCOURAGE ACTIVE LEARNING

A skillful and perceptive LDP+ facilitator helps motivate participants to learn to lead, manage, and govern effectively. People who have successfully developed, led, and championed the LDP and LDP+ are committed to a few critical beliefs and the practices that support these beliefs.

- We believe in the value of all participants, regardless of their gender, organizational level or status. We respect and value the intelligence, styles, experience, skills, and wisdom of our participants. We care about our participants and their development. This is the primary assumption for LDP+ facilitation.
- We believe that promoting gender equity at all levels of the health systems will produce positive outcomes in health. We provide all participants, male and female with an opportunity to voice their ideas and share their experiences.
- We believe that people will learn what they need to. When participants are clear about their intentions and have access to the knowledge and skills they need to achieve their desired results, they willingly learn. Having clarity of purpose helps people put knowledge to use and helps groups to be aligned. We support the participants as they clarify their purposes. We give them feedback about their progress so they can learn and develop.
- We believe that knowledge must be linked to action. Knowledge is demonstrated by results, and action is guided by knowledge. When we apply knowledge and reflect on our results, we increase our knowledge. LDP+ draws on the real challenges that Improvement Teams are facing and provides knowledge that helps them move towards their desired measurable results.
- We believe in the power of shared learning and discovery. By sharing our perceptions with others, we test our assumptions and arrive at a deeper level of understanding. We believe it is important that Improvement Team members reflect on and deepen their understanding of their own experiences. LDP+ creates many opportunities for participants to reflect on and share their knowledge.
- We believe in the creative spirit of every human being. Each of us has the capacity to be creative. We encourage participants to imagine, dream, and create the future.

CRITICAL SUCCESS FACTORS

A few factors must be in place for the LDP+ to succeed.

- Keep it simple. You want participants to experience the LDP+ as a process that they could scale up and sustain themselves, without professional facilitation. This is most important. It means not using PowerPoint, overhead projectors, and other technologies during the workshops that might make the facilitator appear to be an "expert" with capabilities beyond what local teams could do on their own.
- Key stakeholders are committed. The Governing Body commits to making it possible for the Improvement Teams to participate fully. Members of this group also make a commitment to provide good governance throughout the LDP+ experience and to scale up successful improvement projects.
- A local champion leads the effort. The Champion must believe in the importance of LDP+ and be willing to lead its implementation. The Champion identifies and helps overcome any obstacles to the implementation of the full LDP+ process. Often additional champions emerge in the course of the program and become committed to carrying it forward.
- Everything gets done in sequence. All of the main activities in the process must be completed. The four workshops that form the core of LDP+ have specific outcomes that must be achieved. The same team members need to participate fully and consistently in the process, including attending all of the workshops and team meetings, and implementing the team's improvement project.
- Monitoring and evaluation are continuous. Monitoring and evaluation must be included in LDP+ from the very beginning. Each team learns how to define indicators to measure progress and report results. A monitoring and evaluation (M&E) specialist, when available, should be a member of the Technical Coaching Team and can review the teams' results statements, indicators, and Action Plans, as well as activities proposed for collecting data to monitoring progress. The M&E specialist might be from the local organization or an external resource.
- Coaches visit and support teams between workshops. Improvement Teams are more confident and productive when they receive feedback and support between workshops from coaches.

LDP+ ROLES AND RESPONSIBILITIES

The Master Facilitator is the overall manager of the LDP+. S/he works with the LDP+ Champion and Technical Coaching Team to train and orient participants in the LDP+ process, focusing on their specific roles in implementing it and integrating it with other health initiatives.

The Master Facilitator conducts the Stakeholder Alignment Meeting and trains the Technical Coaching Team. S/he works with the Technical Coaching Team to ensure that program data are correctly collected, recorded, collated, analyzed, and reported. At first, this person is likely to come from outside the health system; later, competent facilitators from within the system may be identified and trained for this position.

Key Responsibilities of the Master Facilitator

- Work with the LDP+ Champion to:
 - Identify and invite members of the Governing Body and Technical Coaching Team to the Stakeholder Alignment Meeting
 - Propose the priority health area selected for the focus of the LDP+ process
 - Obtain official documents with national and/or regional data on the priority health area
 - Prepare a presentation of the data on the priority health area addressing:
 - The national and/or regional prevalence of specific health conditions or diseases
 - Government policies
 - 2–3 proven health interventions
 - **-** 2–3 national/regional indicators
 - A summary of the local situation
 - Propose a geographic location for LDP+ Improvement Teams.
- Work with the Governing Body to choose the Local Coordinator.
- Support the Local Coordinator to launch and manage the LDP+ process.
- Train the Technical Coaching Team.

The LDP+ Champion is a senior manager with expertise in the relevant health area, a strong commitment to the LDP+ process, and the influence and credibility to advocate for LDP+ at the highest levels of the health system. S/he assures that LDP+ goals are consistent with the policies and goals of the health system.

In small organizations, one person may serve as both the LDP+ Champion and Local Coordinator.

Key Responsibilities of the LDP+ Champion

- Work with the LDP+ Master Facilitator to:
 - Identify and invite members of the Governing Body and Technical Coaching Team to the Stakeholder Alignment Meeting
 - Propose the priority health area selected for the focus of the LDP+ process
 - Prepare a presentation of data about the priority health area, addressing:
 - The national and/or regional prevalence of specific health conditions or diseases
 - Government policies
 - **-** 2–3 proven health interventions
 - 2-3 national/regional indicators
 - propose a geographic location for the LDP+ Improvement Teams.
- Ensure that LDP+ activities are well coordinated with other initiatives in the priority health area.
- Review periodic reports on LDP+ achievements and obstacles.
- Arrange needed resources.

The Governing Body is composed of the LDP+ Champion and senior managers from the country's health system. These senior leaders may come from:

- Local, regional, or national government
- A national nongovernmental organization (NGO) or network of small, compatible civil society organizations (CSOs)
- A combination of the above

To coordinate effectively and work within a limited budget, the Governing Body cannot be too large; ideally, the group should include between five and eight members. This group agrees on the priority health area and indicators, based on recommendations from the LDP+ Champion. It selects the geographic locations for implementation, appoints a Local Coordinator, provides oversight and sponsorship of the process, and leads the scale up of the LDP+ process.

Key Responsibilities of the Governing Body

- Choose a priority health area and geographic location (based on the recommendation of the LDP+ Champion).
- Choose a Local Coordinator to manage LDP+ operations and logistics.
- Oversee the progress of LDP+ activities in accordance with an agreed-on timetable.
- Introduce LDP+ to other regions and lead the launch and scale up of the LDP+ process.

The Technical Coaching Team has between three and five members. The team includes expertise in relevant components of the health system, as well as in monitoring and evaluation. In addition to their areas of expertise, team members should be receptive to innovation and open to ideas from the Improvement Teams. They need to be willing and able to devote the necessary time to facilitating workshops and coaching Improvement Teams between workshops.

Members are drawn from the country's health system, preferably from the geographic location chosen for the implementation of the LDP+. They may be content experts and officers from relevant Ministry of Health (MOH) departments or M&E specialists from the Ministry's Management Information System unit. In some instances, a member may be a regional expert from a relevant national program (e.g., HIV/AIDS Commission, National Malaria and Tuberculosis Control Programs).

Training of the Technical Coaching Team covers the LDP+ process, with an emphasis on the M&E elements. It also includes the principles and practices of coaching so that the Technical Coaching Team can effectively support Improvement Teams to implement their LDP+ Action Plans and monitor and evaluate their results. Members of the Team also co-lead Shared Learning Sessions with the Master Facilitator.

Key Responsibilities of the Technical Coaching Team

Technical Support:

- Agree on the priority health area, proven interventions, and indicators presented at the Stakeholder Alignment Meeting.
- Review national and regional standards and guidelines for proposed interventions.
- Provide technical materials and training in the priority health area, including standards and guidelines.

Coaching and Facilitation:

- Participate in each of the LDP+ workshops, the Results Presentation, and the Technical Coaching Team Meetings.
- Provide coaching to the Improvement Teams between each workshop to help monitor progress; and assist Improvement Teams to refine their Challenge Model and Action Plan.
- Support Improvement Teams and help to monitor progress throughout the implementation of the improvement project.
- Co-lead Shared Learning Sessions with the Master Facilitator.

Monitoring and Evaluation:

- Oversee M&E and help teams to accurately evaluate and report their results.
- Assure that data are correctly collected, recorded, collated, analyzed, and reported.
- Collect and review reporting formats and share reports with the LDP+ Local Coordinator and Governing Body.
- Build on the findings to help the Governing Body plan for scale up.

The **Local Coordinator** may come from the country's health system, the project sponsoring the LDP+, or MSH. S/he oversees the day-to-day operations of the LDP+ process.

As noted above, in small organizations one person may serve as both Local Coordinator and LDP+ Champion.

Key Responsibilities of the Local Coordinator

- Provide a communication link between the Improvement Teams and the Technical Coaching Team.
- Manage the operational and logistical aspects of the LDP+ process.
- Provide organizational and logistical support for Improvement Team workshops and on-site meetings, as needed.

Improvement Teams implement the LDP+ process at their work sites. They participate in workshops and on-site meetings. They evaluate and report on their experience and results during Shared Learning Sessions and during the Final Results Workshop.

NOTE: For a successful LDP+, qualified individuals must play each of the roles and take responsibility for each activity listed in the boxes above. In some situations, it may be appropriate for one person to play more than one role, as long as s/he can comfortably handle all of the required activities.

THE LEADERSHIP ROLE OF LDP+ FACILITATORS

Facilitators as Continuous Learners

As an LDP+ facilitator, you will have a great influence on the success of the program. Like the Improvement Teams, facilitators use applied knowledge and reflection to learn how to best conduct the LDP+. They listen to the comments during the closing of every session to learn about and respond to the participants' needs and challenges.

Facilitators lead in a way that encourages LDP+ participants to sustain and replicate their experience. Through their openness to learning and improvement, they demonstrate that LDP+ facilitation does not require a certain kind of expertise, rather, all who are committed can lead the program.

Facilitators identify participants with a passionate interest in the program who might become facilitators someday. Facilitators should be attentive to give women equal opportunity as men to become facilitators. They create opportunities for these people to facilitate segments of workshops, give them feedback, and support as they practice and learn.

To create a spirit of inquiry and dialogue, facilitators ask questions that spark these interactions. LDP+ questions are generally open-ended—there is no possibility of a quick "yes" or "no" response, and there is no one right answer. These open-ended questions seek to expand perceptions and encourage curiosity.

Coaching LDP+ Participants

Coaching is a key component of the LDP+. As a facilitator, you will be working with members of the Technical Coaching Team, composed of people with expertise in the priority health area and in monitoring and evaluation. Technical Coaching Team members participate in intensive training sessions led by the facilitators to build their coaching skills.

Coaching by the Technical Coaching Team takes place between workshops, typically at the Improvement Teams' work sites. Coaching gives teams the feedback and support necessary to apply the leading, managing, and governing practices. Coaching enables team members to work together to achieve results and present these results effectively. It greatly enhances participants' ability to apply what they have learned during the workshops and to make their new understanding part of the way they work every day.

Facilitators train LDP+ coaches to:

- Give Improvement Teams feedback about their Challenge Models, Action Plans, reporting formats, and evaluation forms.
- Encourage participants to reflect on their progress towards their measurable results.
- Create opportunities for Improvement Teams to share their learning throughout the LDP+ process.

This Facilitator's Guide includes coaching notes to help assure effective coaching visits between workshops.

Tips for Facilitators

Whether you are a seasoned or first-time facilitator, these tips will help you with the LDP+ facilitation process. The many lessons learned MSH has accumulated over years of conducting the LDP and LDP+ have shaped this list. While some tips may seem obvious, all are practical and effective.

- Read. Read all the facilitation notes in the LDP+ Guide for Facilitators prior to the start of the program to become familiar with the exercises and the way each session builds on the one before it.
- Read again. Read each session again before delivering the session. Write your own notes to refer to when facilitating.
- Practice. Practice delivering a few sessions with a small group to become comfortable with the materials and to prepare for questions that might surprise you.
- Stick to the facilitation notes. While skilled facilitators may see opportunities to improvise or expand an exercise with additional materials, we ask that you not change the wording of the questions or statements written within each exercise. They have been carefully tested and are essential to the design of the experiential learning process. When questions or statements are ignored or changed, you might miss making critical points and connections.
- Ask, don't tell. Some facilitators might want to give detailed and complete explanations because they worry that the participants need a complete grasp of concepts right away. However, the LDP+ exercises are designed to enable participants to discover the meaning behind the concepts for themselves, rather than to have it told to them. This is a more powerful and long lasting way to learn. We encourage facilitators to follow the design and see for themselves how participants learn through this process.
- Be attentive to observe gender dynamics in the group and invite quiet participants to express their opinions being sure that women and men have equal opportunities to express their point of view and facilitate the teamwork.

Remember, the key to leadership development is to provide people with challenges and then give them feedback and support. Caring about their development and listening to them are fundamental.

Preparing for LDP+ Meetings and Workshops

- Read each session completely and write out your own notes to guide you while delivering—do not read from the facilitator notes during the session.
- Practice each exercise beforehand—this is essential!
- Know the timing of each exercise—some may go more quickly than the suggested time, while some may take longer.
- Prepare any necessary flipcharts or other materials in advance.
- Have necessary handouts organized and ready.
- Insert breaks into the daily schedule—be sure to include them in the overall timing of each day.

PHASE I: GETTING STARTED

Laying the Groundwork

The Master Facilitator works with the LDP+ Champion to:

- Propose a priority health area, indicators, and proven health interventions
- Identify members of the Governing Body and Technical Coaching Team

Stakeholder Alignment Meeting

This is the first meeting of the Governing Body. Technical Coaching Team members are also invited to participate. The Master Facilitator conducts the meeting with the assistance of the LDP+ Champion. In this meeting, the Governing Body:

- Is oriented to LDP+ and learns leading, managing, and governing practices for overseeing LDP+ implementation.
- Confirms the priority health area, proposed key indicators, and proposed proven interventions.
- Chooses a geographic location and proposes facilities or other workplaces for Improvement Teams.
- Selects a Local Coordinator to oversee LDP+ operations and logistics.
- Commits to the LDP+ process and produces a plan to support the LDP+ Improvement Teams.

Technical Coaching Team Meeting #1

During this meeting, which takes place directly after the Stakeholder Alignment Meeting, members of the Technical Coaching Team:

Are oriented to the Challenge Model and the M&E process, their role as coaches, and their deliverables in that role.

Training of Coaches

The Master Facilitator trains coaches to support the Improvement Teams in implementing the LDP+ and monitoring and reporting results.

PHASE 2: IMPLEMENTATION OF IMPROVEMENT TEAM ACTIVITIES

Improvement Team Workshops and Meetings

The Master Facilitator leads the workshops; the Coaches work with teams between workshops; and the Local Coordinator oversees the LDP+ process. Improvement Teams routinely work together and attend regular meetings.

- Workshops: Over the course of four workshops, members of Improvement Teams learn and apply leading, managing, and governing practices, tools, and approaches. They plan, carry out, and monitor actions that will enable them to achieve their measurable results.
- Shared Learning Sessions: The Technical Coaching Team leads two learning sessions, one during Workshop #3 and another as part of Workshop #4. In these sessions, Improvement Teams share with each other and with the Governing Body their results to date and what they have learned in implementing their action plans.
- Improvement Team meetings: At the worksite, Improvement Teams apply what they have learned in the workshops, and in analyzing and addressing their challenges. Coaches support the Teams in using the Challenge Model, monitoring the implementation of their action plans, and evaluating and reporting their results.

PHASE 3: EVALUATING AND SCALING UP

Preparing for the Final Results Presentation

During Workshop #3 and #4, each Improvement Team works with its Coach to evaluate the results of the LDP+ experience, to prepare a report on those results, and to write a compelling story of their LDP+ experience. In their reports, they describe the actions that have enabled them to improve their indicators, and they identify leading, managing, and governing practices that have contributed to their teamwork and their successes.

Final Results Presentation

On Day 3 of Workshop #4, Improvement Teams present their reports and stories to their LDP+ colleagues, the Technical Coaching Team, and the Governing Body.

Stakeholder Evaluation and Scale up Planning Meeting

After Workshop #4, the Master Facilitator and the LDP+ Champion facilitate a day long meeting of members of the Governing Body, the Technical Coaching Team, and six to eight senior managers from the new geographic location that will engage in the next set of LDP+ improvement projects.

Participants learn how the Improvement Teams worked on the priority health area, which proven practices were applied, what kind of support they received from the Technical Coaching Team, and how the lessons learned can be applied to extend the program to the new geographic location.

LDP+ TIMELINE OF ACTIVITIES

The LDP+ Timeline appears on the next page. **Preparation prior to Month 1:** The Master Facilitator meets with the LDP+ Champion and Technical Coaching Team to prepare for the launch of the program.

LDP+ Timeline & Deliverables

NOTE: Between each workshop, Coaches meet with their Improvement Teams to review progress and provide support.

LDP Champion & facilitator

Stakeholder Alignment Meeting

Technical Coaching Team Meeting I

Workshop I

MONTH I

- Select priority health area, proven interventions, indicators, and geographic location to be proposed by Governing Body
- Design Stakeholder Alignment Meeting and invite health systems leaders to participate
- Gain commitment of key stakeholders
- As Governing Body, provide resources to support the LDP+ process
- Confirm priority health area, proven interventions, indicators, and geographic location
- Develop Governing Body's action plan

MONTH 2

- Coaches are oriented to their roles in LDP+, the M&E process, and to the steps of the Challenge Model
- Improvement Teams draft first 4 steps of Challenge Models, with an emphasis on measurable results
- Leadership Practice: Scanning

Coaching Team Meeting 2

Workshop 2

Technical Coaching Team Meeting 3

Workshop 3

MONTH 3

- Coaches learn and practice skills to coach Improvement Teams around their challenge models
- Improvement Teams draft root cause analyses and action
- L&M Practices: Focusing, Planning and Organizing

MONTH 4

- Coaches learn and practice skills in M&E: collecting data and monitoring indicators
- They are oriented to reporting requirements and formats for the overall LDP+ process
- Improvement Teams draft reporting and evaluation forms
- L&M Practices: Monitoring & Evaluation, Implementing, Aligning and Mobilizing, and Inspiring

Results Presentation Stakeholders' Scale up Meeting

MONTHS 5-8

- Improvement Teams share success stories and prepare results presentations
- L&M Practices: Monitoring and Evaluation, Inspiring
- Improvement Teams present results to Governing Body, Technical Coaching Team, and other stakeholders
- Governing Body develops a strategy and plan for scaling up LDP+ and commits to provide resources for scale up



STAKEHOLDER ALIGNMENT **MEETING**

FACILITATORS

Master Facilitator, LDP+ Champion

PARTICIPANTS

- Members of the Governing Body. This group consists of five to eight senior managers from the country's health system, which may include leaders from:
 - Local, regional, or national government
 - Civil society
 - Academia (instructors from schools of medicine, nursing, public health)
 - Professional associations (medical, nursing, midwifery associations)
 - The private for-profit sector
- Members of the Technical Coaching Team:
 - Three to five individuals with expertise in the priority health area and in monitoring and evaluation.

NOTE: When selecting members of the Governing Body and Technical Coaching Team, gender balance should be taken into account, trying to have similar number of male and female members in both groups.

MEETING DESIGN

The Stakeholder Alignment Meeting is designed to give members of the Governing Body and Technical Coaching Team hands-on experience with the content and process of the Leadership Development Program Plus (LDP+), as well as time to explore the benefits of this program for public health agendas.

Participants learn the leading, managing, and governing practices needed to face organizational challenges and achieve desired results. They focus on a national priority health area and the local situation within that area. They then apply the Challenge Model to a challenge within that priority health area.

The Stakeholder Alignment Meeting lasts for two days. This has proven to be the right amount of time to generate ownership of and commitment to the LDP+. Participants gain a solid grasp of leadership, management, and governing practices, and a shared experience with the use of the Challenge Model to achieve desired public health results.

TIP: The word "practice" has many meanings—practice the guitar, a medical practice, and so on. "Practice" in organizations generally refers to a set of behaviors, techniques, procedures, and processes. "Leadership practices" refers to all these things in relation to how people lead.

> The complete meeting must include the critical LDP+ elements that will lead to alignment around the results of the program. These are:

- Leading, managing, and governing practices
- Data about the priority health area, national/regional indicators and proven health interventions
- Plan to oversee and support the implementation of the LDP+
- Next steps

PREPARATION OF CONTENT

- Read the facilitator notes for this session.
- Work with the LDP+ Champion to:
 - Identify and invite members of the Governing Body and Technical Coaching Team to the Stakeholder Alignment Meeting.
 - Propose the priority health area selected for the focus of this LDP+ experience.
 - Obtain official documents with national and/or regional data on the priority health area.
 - Prepare a presentation of data about the priority health area, addressing:
 - The national and/or regional prevalence of specific health conditions or diseases
 - Government policies
 - ➤ 2–3 proven health interventions
 - ➤ 2-3 national/regional indicators

PREPARATION OF **MATERIALS**

- Make copies of all meeting handouts, available in the handout section at the end of this chapter.
- Prepare materials required for each session.
- Watch the video "Seeds of Success."
- Prepare and test laptop projector to show the video.

MATERIALS

- □ Video: "Seeds of Success" (http://www.msh.org/projects/lms/NewsRoom/Aswan/)
- Laptop projector to view video
- □ Flipchart(s), easel, and paper
- Tape
- Colored markers
- Self-stick notes or note cards
- Half sheets of paper

PREPARED FLIPCHARTS

- ☐ Flipchart with the meeting purpose, objectives, agenda, and schedule
- Expert Model (from handout Two Models of Development)
- □ Empowerment Model (from handout Two Models of Development)
- Flipchart with the statement: Leading means mobilizing others to envision and realize a better future.
- One flipchart for each of the leading and managing practices: Scanning, Focusing, Aligning and Mobilizing, Inspiring, Planning, Organizing, Implementing, Monitoring and Evaluating, and Other
- Several flipcharts with national data and, as much as possible, regional and local data on the selected priority health area
- Drawing of the Challenge Model
- □ 2-3 national/regional indicators from the presentation on the priority health area
- 2-3 proven health interventions
- Flipchart with the following statement: Governance is setting strategic direction, establishing policy, raising and allocating resources, and overseeing achievement of results in a way that is responsive to the people an organization services.
- □ Flipchart with two columns, the heading Commitment on the left, and the heading Compliance on the right

HANDOUTS

- Agenda and Objectives
- LDP+ Overview
- ☐ Two Models of Development
- Conceptual Model: Leading, Managing, and Governing for Results
- □ Integrated Practices for High Performing Health Systems
- □ The Challenge Model
- Using the Challenge Model
- Developing SMART Results
- □ The Five Whys Technique
- □ Governing Practices at the Health Facility Level
- □ Commitment versus Compliance

AGENDA AND OBJECTIVES: Stakeholder Alignment Meeting

PURPOSE

Build commitment of key stakeholders to developing leaders at all levels of health care organizations who can face challenges and achieve results in a priority health area.

OBJECTIVES

- To become familiar with the LDP+ process and content
- To learn leading, managing, and governing practices for overseeing LDP+ implementation
- To become informed about government policies, proven health interventions, and national/regional indicators in the priority health area
- To learn and apply the Challenge Model that is at the core of the LDP+
- To produce a plan to support the LDP+ Improvement Teams.
- To commit to addressing the challenges of improving health outcomes and implementing the LDP+ process over time
- To commit to ensuring gender equity in leadership development throughout the LDP+
- To select the Improvement Teams and a Local Coordinator

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	DAY ONE	DAY TWO			
	Setting the Stage (AE goin)	Settling in and Morning Reflection (30 min.)			
AM	Setting the Stage (45 min.)	Introducing the Challenge Model (30 min.)			
	Getting to Know LDP+ (30 min.)	Analyzing the Current Situation (45 min.)			
	Empowerment and Expert Models of Development (45 min.)	Developing a Measurable Result (45 min.)			
	What Do Leaders Do? (45 min.)	Identifying Obstacles to Achieving the Result (45 min.)			
	Understanding Leading and Managing Practices (30 min.)	Diagnosing Root Causes: The Five Whys Technique (45 min.)			
Lunch Break					
PM	Exploring the Priority Health Area (1 hr. 30 min.)	Applying Governing Practices (1 hr. 45 min.)			
	Creating a Shared Vision of Success (1 hr. 30 min.)	Gaining Commitment, Not Just Compliance (45 min.)			
	Closing (30 min.)	Next Steps for the Governing Body and Closing (60 min.)			



STAKEHOLDER ALIGNMENT MEETING DAY ONE

- A. Setting the Stage
- B. Getting to Know LDP+
- C. Empowerment and Expert Models of Development
- D. What do Leaders Do?
- E. Understanding Leading and Managing

— LUNCH BREAK —

- F. Exploring the Priority Health Area
- G. Creating a Shared Vision of Success

Closing





A. Setting The Stage: Welcome, Meeting Overview, Introductions, and Expectations

Through this discussion, participants begin to understand the purpose, agenda, and expectations of the LDP+.

DURATION

45 minutes

MATERIALS

- Flipchart with the meeting purpose, objectives, agenda, and schedule
- Handout: Agenda and Objectives: Stakeholder Alignment Meeting

PROCESS:

STEP I. Register participants (complete before the formal opening, if possible)

STEP 2. Welcome and introduce participants (30 minutes)

WELCOME everyone and use the prepared flipchart to explain the purpose, objectives, and agenda of the meeting.

Have participants and facilitators introduce themselves.

SHOW the schedule for Day I of the meeting.

STEP 3. Identify expectations and concerns (10 minutes)

ASK: What do you know about LDP+?

What are your expectations for this meeting?

What concerns do you have about the meeting?

CAPTURE RESPONSES on a flipchart and address concerns as you are able. For concerns that you cannot immediately address, **WRITE** them on a "parking lot" poster to come back to later in the program.



STEP 4. Distribute handout with meeting purpose, objectives, agenda, and schedule (5 minutes)

SAY: Let's review the meeting purpose, objectives, agenda and schedule. This information may address some of your concerns.

Getting to Know the LDP+ B.

Through this activity, participants understand the structure, components, and critical success factors of the LDP+.

- **DURATION** 30 minutes
- **MATERIALS** ■ Handout: LDP+ Overview
- **PROCESS:**

Present the overview of the LDP+ (15 min.) STEP I.

USE THE HANDOUT LDP+ Overview to explain the structure, components, and critical success factors of the LDP+.

STEP 2. Explore the value of the LDP+ (15 min.)

ASK: How do you think the LDP+ could help improve health results in this locality? CAPTURE RESPONSES on a flipchart.

Empowerment and Expert Models of Development

Through this exercise, participants will distinguish the LDP+ approach from other approaches to leadership development.

- **DURATION**
- 45 minutes
- **MATERIALS**
- Prepared flipchart with Expert Model written on it
- Prepared flipchart with Empowerment Model written on it
- Handout: Two Models of Development
- Blank flipchart
- **PROCESS:**

STEP I. Presentation of two models (15 minutes)

SAY: This exercise helps people who want to achieve sustainable development to distinguish between two views on human development: the Expert Model and the Empowerment Model.

SHOW the two flipcharts and say the following about problems in development:

SAY: The Expert Model assumes that someone, either outside or inside a difficult situation, already knows the solution to the problem. That person can fix the problem by transferring his or her knowledge to others involved in the situation and having them use it.

> The Empowerment Model assumes that the solution to the problem is complex. A solution can only be achieved by enabling those involved to understand the problem and participate in developing the solution.

Small group discussion (15 minutes) STEP 2.

HAND OUT copies of the Two Models of Development.

Ask the participants to form small teams of three to five at a table. The teams should be a mix of individuals from different levels.



Ask teams to answer the following questions for each model by indicating the organizational level responsible for activities that support service delivery.

SAY: Consider staff at the central, provincial, district, or facility level:

- Who analyzes the current situation and sets the priorities?
- Who does the planning and sets the goals?
- Who supervises the activities?
- Who monitors and evaluates the results?
- Who is responsible and takes credit for the results?

STEP 3. Large group discussion (15 minutes)

In the large group, ask for two or more examples of challenges in service delivery to present to the group.

WRITE the examples on the flipchart.

ASK: Which model would we choose for your situation?

What are the benefits of that model?

Which model is sustainable?

SAY: The LDP+ follows an Empowerment Model of development. It draws on the

understanding and participation of those in the situation to come up with

solutions to the challenges they face.

What Do Leaders Do?

Through this discussion, participants use their own experiences to understand the Integrated Practices for High Performing Health Systems.

- **DURATION**
 - 45 minutes
- **MATERIALS**
- Handout: Conceptual Model: Leading, Managing, and Governing for Results
- Prepared flipchart (covered) with the definition: Leading means mobilizing others to envision and realize a better future.
- Half sheets of paper
- Self-stick note cards
- **PROCESS:**

STEP I Introduce leading as a practice (15 minutes)

SAY: This morning we are going to explore what it means to lead and manage. We

will talk more about what it means to govern later in the program.

ASK: When you hear the word "leader," whom do you think of?

Take responses from some participants.

NOTE: Ask "Whom" do you think of?" Do not ask "What do you think of?" Repeat the instructions if participants start to give you definitions of leadership. You want the participants to name people.

ASK: When we hear the word "leader", do we think of great people in positions of great authority who influence many people?

> Do we think of people who have special charismatic qualities and who are able to persuade and influence people through their personalities?

SAY: Leading solely through a powerful position or appealing personality is not the type of leading that we will explore in this program.

> We are going to talk about leading as an activity or practice that people at every level of an organization can engage in.



SHOW the flipchart you prepared with this definition: Leading means mobilizing others to envision and realize a better future.

ASK: Is this something that managers and staff at every level of an organization or department need to be able to do?

Answers will probably confirm the need for this activity at every level of an organization. Be sure it is clear that everyone, not just managers, needs to lead.

Start a discussion.

SAY: Now we are going to do some practical research about what people need to do to be effective at leading.

To do this research, we will look at people who are excellent leaders.

This time we are going to take examples only of people you know personally and learn about their practices.

STEP 2. Individually reflect on what it means to lead (15 minutes)

Direct the whole group.

SAY: Think of someone you know (or knew in the past) who is good at mobilizing others to envision and realize a better future.

This has to be someone you know personally, not a famous person.

Consider what exactly this person does that makes him or her effective in leading others.

SAY: Write what this person does (or did), using the paper on your table.

Be as concrete as you can. For example, write, "asks what is important to me," rather than "communicates well."

NOTE: Remind participants to think about what the person is or was doing, rather than the result achieved. For example, statements such as "Although she was poor, she was able to educate all of us" or "He raised enough money from donors to support our project" require further probing to uncover exactly what the leader did that enabled him or her to achieve the result.

Have participants form pairs and share their reflections with one another.

In the large group, ask participants to share good stories with the whole group about their experiences with effective leaders.



STEP 3. Discuss leading practices (15 minutes)

In small groups, each person should share what he or she wrote with the other group members.

- Have each group place the pieces of paper with similar actions or themes together. They should then rewrite each action or theme as a practice.
- Everyone in the group should agree that all these practices are characteristic of people who lead well.
- Have the groups write each of the practices on a self-stick note card.

OUTCOME:

Each table will write a set of note cards with one leadership practice on each card.

MOVE DIRECTLY TO THE NEXT EXERCISE, "Understanding Leading and Managing Practices," in which teams will have a chance to match the cards to specific leading and managing practices.

NOTE: It is important to visit each group to make sure people are not writing characteristics such as "integrity" or "motivation." Coach them to write specific practices with verbs in them, such as "listens to people at all levels," or "gives feedback when needed."





E. Understanding Leading and Managing Practices

Through this discussion, participants will gain a shared understanding that leading and managing practices are carried out at all levels in an organization.

DURATION

30 minutes

MATERIALS

- Nine prepared flipcharts posted around the room, but covered (folded over). Each should have a heading, as follows: Scanning, Focusing, Aligning and Mobilizing, Inspiring, Planning, Organizing, Implementing, Monitoring and Evaluating, and Other.
- Handouts: Conceptual Model: Leading, Managing, and Governing for Results; Integrated Practices for High Performing Health Systems

PROCESS:

STEP I. Put leading, managing, and governance in context (5 minutes)

USE THE HANDOUT, Conceptual Model: Leading, Managing, and Governing for Results to show the relationship among these three elements of leadership.

SAY: Leading, managing, and governing are interdependent and closely linked. They reinforce each other and interact to achieve a desired result.

Today we are addressing the first two elements: leading and managing.

Tomorrow we will focus on governance—the element that has special meaning for the Governing Body.

STEP 2. Explain the leading and managing practices (10 minutes)

UNCOVER the headings on the flipchart pages with the four leading practices that are posted around the room.

SAY: There are four leading practices. They are scanning, focusing, aligning and mobilizing, and inspiring.

Let's look at each one.



Define each leading practice. Ask for examples and, if necessary, provide examples yourself.

- Scanning. Identifying internal and external conditions that influence desired
- Focusing. Directing attention and efforts to priority challenges and actions.
- Aligning and mobilizing. Uniting and motivating internal and external stakeholders to commit resources to support desired results.
- Inspiring. Creating a climate of commitment and continuous improvement.

After reviewing the leading practices, UNCOVER the remaining five flipchart headings.

SAY: In addition to the leading practices, there are four managing practices. They are planning, organizing, implementing, and monitoring and evaluating.

Now let's look at each of the managing practices.

Define each managing practice. Ask for examples and, if necessary, provide examples yourself.

SAY:

- Planning. Preparing a set of activities, timeline, and accountabilities to meet goals.
- Organizing. Developing structures, systems, and processes to support the plan of action.
- Implementing. Carrying out and adapting the plan of action while coordinating related activities.
- Monitoring and evaluating. Observing, examining, and assessing progress.

STEP 3. Validate the practices (10 minutes)

SAY: Everyone please stand up with your note cards from the previous exercise. Stick each one on the flipchart page that best describes the practice you identified.

> Use the flipchart marked "Other" for practices that do not seem to fit under any of the eight headings.

After all the note cards are posted, **READ ALOUD** the practices on each flipchart.

Then check those on the "Other" flipchart and see if they fit on one of the other flipcharts.

Discuss how some items can fit under more than one practice.



NOTE: Ideally, the "Other" flipchart will be empty after this step is completed.

Invite people to WALK around the room with you as you read the notes on each flipchart.

STEP 4. Review the Integrated Practices (5 minutes)

HAND OUT copies of the Integrated Practices for High Performing Health Systems.

- SAY: The model and its set of practices are the result of research conducted with managers who lead and govern well and achieve desired results. The research included discussions similar to the one you have just finished.
- SAY: The Improvement Teams will also work on how gender influences the way men and women exercise the leading and managing practices and how their teams can support gender equity in leadership development.

POINT OUT to participants that this morning they have addressed two of the three categories of practices of managers who lead. Remind them again that they will explore the third category – governing practices – and the governing body's role of ensuring gender equity in leadership development in tomorrow's session.

NOTE: By presenting the Integrated Practices after the groups create their key practices, you affirm the group members' experiences with good leading and managing practices.

F. Exploring the Priority Health Area

Through this exercise, the Governing Body agrees to a shared health focus for all the participating LDP+ Improvement Teams. It ensures that a successful LDP+ will contribute to a health area that is of great importance to the government and the public health community.



I hour 30 minutes



- Prepared flipcharts with national data and, as much as possible, regional and local data on the priority health area selected for the LDP+. Include:
 - Prevalence of the health conditions or diseases in this health area
 - > Government policies in this health area
 - ➤ 2–3 proven interventions that the government is promoting
 - > 2-3 national/regional indicators

PROCESS:

STEP I. Present data on the priority health area (30 minutes)

Inform participants of the priority health area that has been proposed as the focus for LDP+ and the reasons for its selection. Ask the members to confirm the priority health area focus.

Have the LDP+ Champion use the prepared flipcharts to present national and regional data on prevalence, policies, proven interventions, and indicators regarding the health area.

STEP 2. Discuss the local situation (45 minutes)

ASK: In what ways do you think the situation in your [district/region] is similar to the national data you have just seen?

In what ways do you think it is different?

Draw on the knowledge of the Champion, members of the Technical Coaching Team, and other informed participants to guide the discussion.

If available, **USE PREPARED FLIPCHARTS WITH LOCAL DATA** to add to the discussion.



STEP 3. Consider the role of leading and managing practices (15 minutes)

ASK: How do you think the leading and managing practices we talked about this morning could help local Improvement Teams to contribute to the national goals?

> Which leading and managing practices could be used more effectively to achieve results in this health area?

CAPTURE responses on a flipchart.

SAY: As we work through the Challenge Model, you will begin to see how these leading and managing practices will be applied by teams throughout the LDP+ process.

G. Creating a Shared Vision of Success

This exercise helps participants imagine a future they want to create in the priority health area.

DURATION

I hour 30 minutes

MATERIALS

- "Seeds of Success" video about Aswan (make sure to test the projector, sound, and video beforehand). To access the video, go to the URL http://www.msh.org/projects/lms/ NewsRoom/Aswan/.
- Paper for participants to write on
- □ Several blank flipcharts in the front of the room
- Colored markers

PROCESS:

STEP I. Watch and discuss the video "Seeds of Success" (30 minutes)

Introduce and **SHOW** the video. In the large group:

SAY: Turn to one of your neighbors and talk for a few minutes about what stands out in this video as being relevant to your country or institution.

Take some ideas from the whole group.

STEP 2. Imagine the future (10 minutes)

SAY: Now we will create a shared vision of success for our priority health area in our district/region.

If the story of the Aswan health workers inspires you, think for a minute about what you would like to see in your own health system.

Suppose there is a video made after the completion of the LDP+.All of your dreams have come true.

You have been very successful at developing leaders at all levels in the Improvement Teams.

ASK: What will you want to see shown in that video?

What will change for beneficiaries? For health providers? For health services?

Tell participants to imagine an ideal future and WRITE it down.



SAY: Free your mind from distractions. Give your mind the freedom to dream of the future and to create a picture of your dream.

Take a few minutes to think about this on your own and write down your ideas.

STEP 3. Integrate your vision with another one (15 minutes)

Ask the participants to form pairs and then share their visions with each other.

SAY: Now combine your visions to arrive at one shared vision, using the best parts of each.

Ask the participants to form groups of four (composed of two pairs) and share their combined visions with each other.

SAY: Now combine these visions further to arrive at one shared vision for each group of four people.

STEP 4. Record the key elements of all the vision statements (15 minutes)

With the whole group:

ASK: Would each group of four please present its combined vision?

RECORD the key elements or phrases of each vision statement on a flipchart.

Review the elements and **CONSOLIDATE** them to eliminate overlaps.

STEP 5. Prioritize the elements (15 minutes)

- If the list is long, ask each participant to choose the three elements that s/he considers most critical.
- **RECORD** them on a flipchart.
- If an element is repeated in identical form, PUT A CHECK MARK next to it each time it is repeated.
- Identify the three elements of the vision that were chosen most often.
- Check with the entire group to see if these three elements or phrases correspond to their visions.



STEP 6. Present the shared vision statement (5 minutes)

COMBINE the elements and phrases into one vision statement.

WRITE it on a clean flipchart.

POST the flipchart in the front of the room to guide further discussions.

CLOSING: 30 minutes

To the entire group:

ASK: What did you learn today? What stands out for you?

Take about five minutes to write down your answers.

When you are done, discuss your answers with a person next to you.

After about 10 minutes, address the entire group:

SAY: Would each pair please share one of your answers with the group? We will go around the room.

Listen carefully and thank participants for their thoughtful answers.

SAY: Tomorrow we will focus on what needs to be done to launch the LDP+ successfully in your organization.

> We will work through a step-by-step model for meeting challenges and achieving public health results.

We will explore the governing practices that work together with leading and managing practices to achieve public health results.

And we will discuss the first steps that the Governing Body will take to lead this LDP+ effort.

SAY: It is critical to create a shared understanding and a firm commitment in this group in order to launch an effective LDP+.



STAKEHOLDER ALIGNMENT MEETING DAYTWO

- A. Settling In and Morning Reflection
- B. Introducing the Challenge Model
- C. Analyzing the Current Situation
- D. Developing a Measurable Result
- E. Identifying Obstacles to Achieving the Result
- Diagnosing Root Causes: The Five Whys Technique F.

— LUNCH BREAK —

- G Applying Governing Practices
- H. Gaining Commitment, Not Just Compliance
- Next steps and Closing

A. Settling In and Morning Reflection

In this session, participants build continuity between yesterday's and today's activities.

DURATION 30 minutes

MATERIALS • Prepared flipchart with Day 2 agenda

PROCESS:

Going around the room

ASK: How are you?

Give everyone a chance to answer in two words.

ASK: What stands out for you from yesterday? What did you think about when you went home?

Take a few responses.

ASK: Are there questions or other reflections about yesterday that anyone would like to share?

Take a few responses.

PRESENT the agenda for Day 2.

В. Introducing the Challenge Model

This exercise provides participants with a brief overview of the Challenge Model.

- **DURATION** 30 minutes
- **MATERIALS** Prepared flipchart with the Challenge Model drawn on it
 - Handouts: The Challenge Model; Using the Challenge Model
- **PROCESS:**

STEP I Explain the difference between challenges and problems (5 minutes)

SAY: A problem is "out there" and is often blamed on external forces.

> A challenge is something you own and take on. It involves a result that you are committed to achieving.

You can state a challenge as a question: "How can we achieve the result we want to achieve in the face of obstacles we have to overcome?"

Check for understanding by asking if the difference is clear.

Encourage participants to think about whether problems they identify can be seen as challenges that they are willing to own and that they can use their leading, managing, and governing skills to address.

STEP 2. Introduce the steps of the Challenge Model (20 minutes)

SAY: The Challenge Model will help Improvement Teams to meet a challenge by moving from vision to action. It will enable them to know where they currently are and determine where they want to go before deciding on a plan of action.

TIP: To guide the participants through the steps of using the model, point out its parts, one by one, on the flipchart.



POINT to the priority health area at the top of the Challenge Model.

SAY: Yesterday you completed Step 1, acquiring information about the selected priority health area.

> You looked at disease prevalence, national (and regional) priorities, indicators, and a few proven health interventions.

> Each Improvement Team will carry out Step 1 and review the data about the priority health area in the same way that you did.

POINT to the vision "cloud."

SAY: You also completed Step 2, creating a shared vision of the future.

> Each Improvement Team will create a shared vision in an exercise like the one you experienced. This vision will inspire the teams to face new challenges.

POINT to the current situation.

SAY: In Step 3, Improvement Teams will assess their current situation in relation to the priority health area by scanning their internal and external environments.

> They will consider positive and negative factors in the environment that can affect their ability to move towards their vision and to contribute to the priority health area goals.

POINT to the measurable result.

SAY: In Step 4, the Improvement Teams will use the priority health area indicators and their understanding of the current situation to agree on one measurable result that will move them closer to the vision.

> Each team will be committed to achieving its measurable result in the next six to eight months. The result should be a "stretch" for the team.

> Teams will choose one or more key indicators and track those indicators. This is how they will monitor progress toward their measurable result and evaluate their achievements at the end of their LDP+ experience.

POINT to the obstacles and root causes.

SAY: In Step 5, the teams will identify the obstacles that they have to overcome to reach their result.

> They will use a tool to analyze the root, or underlying, causes of these obstacles so that they can address these causes in their Action Plans.



POINT to the challenge and priority actions.

SAY: In Step 6, the teams will produce a written statement of their challenge, citing the result they plan to achieve in light of the obstacles they will face.

They will then select priority actions to address the root causes.

POINT to the Action Plan.

SAY: In Step 7, the teams will develop Action Plans.

> These plans will include the human, material, and financial resources needed and timelines for implementing their priority actions.

The plans will include activities to monitor progress toward their results.

SAY: In Step 8, the teams will implement their Action Plans. They will monitor their progress and evaluate their results according to indicators that they have identified.

> Monitoring their progress will help them adjust their plans, if needed, to keep moving toward their intended results.

Evaluating their results will help them look back at positive and negative factors in meeting their challenge. And it will help them use their learning to meet future challenges in this and other priority health areas.

STEP 3. Introduce the handout (5 minutes)

DISTRIBUTE copies of the handout Using the Challenge Model.

SAY: This handout explains the steps we just reviewed.

> The Improvement Teams will also receive copies of this handout to guide them in filling out their Challenge Models.

They will begin to fill out the Challenge Models in the workshops and complete them at their work sites.

SAY: Now you will have the opportunity to complete more of these steps in your own Challenge Model, to get a sense of what the Improvement Teams will be experiencing.



Analyzing the Current Situation

In this exercise, participants develop an initial, detailed description of the conditions that can affect progress towards improved indicators in the priority health area.

- **DURATION**
- 45 minutes
- **MATERIALS**
- Prepared flipchart with the Challenge Model drawn on it
- Flipchart with priority health area indicators
- Flipchart paper for small groups
- **PROCESS:**

STEP 1. Describe internal and external environments (30 minutes)

POINT at "Current Situation" on the Challenge Model flipchart.

Have participants look at the flipchart with the priority health area indicators and agree on one indicator to use as an example for this exercise.

Have participants divide into two small groups, one to discuss the internal environment and the other the external environment regarding that indicator.

SAY: In your small group, consider the indicator that you have agreed on for the priority health area.

> As a group, consider the positive and negative factors that could make it easier or harder for the LDP+ Improvement Teams to contribute to improving that indicator.

Write your ideas on flipcharts, separating them into positive and negative factors.

Offer suggestions to each group.

- The internal environment group, for example, might look at such factors as organizational and personal needs, concerns, time available, and strengths and weaknesses that will affect your new role as Governing Body supporting the LDP+.
- The external environment group might look at such factors as access to and quality of services, community priorities, human and financial resources, and government policies and laws.



SAY: You may not know all the details without doing more scanning to collect missing data or checking the truth of your assumptions. But you can use your combined experience and knowledge to give a reasonably accurate picture of the current situation.

NOTE: You can remind the participants that these are only examples. Encourage them to come up with other factors that could have an effect on the implementation of the LDP+.

STEP 2. Share and learn (15 minutes)

Invite each small group to come to the front and PRESENT the results of their group work.

NOTE: Be sure to ask questions about and clarify the results that are presented so that everyone learns from each example.



DAY 2 ACTIVITY D

D. Developing a Measurable Result

Participants use what they have learned about their current situation to select a result for this LDP+ that is SMART: Specific, Measurable, Appropriate, Realistic, and Time-bound.

- **DURATION**
 - 45 minutes
- **MATERIALS**
- □ Handout: Developing SMART Results
- Prepared flipchart with the Challenge Model drawn on it
- □ Prepared flipchart with 2–3 indicators from the presentation on the priority health area
- Blank flipchart
- **PROCESS:**

STEP I. Propose measurable results for the LDP+ (10 minutes)

POINT at "Current Situation" and "Measurable Result" on the Challenge Model flipchart.

Then **POINT** at the indicators from the presentation on the priority health area.

ASK:

Given the current situation you just described, what might be a result that would indicate movement toward one of these indicators? It's very important that the result can be measured. You need to be able to know for sure that you are making progress.

Have participants brainstorm possible results. WRITE four or five of their responses on a blank flipchart.

NOTE: People will often answer using action verbs (for example, to train, to improve, to collect). Emphasize that a result is not an action or activity, but refers to the outcome of the activity, such as the number of patients served.



STEP 2. Revise the results to meet the SMART criteria (20 minutes)

SAY: There are five criteria essential to an LDP+ result that a team can achieve and measure. The result must be SMART: Specific, Measurable, Appropriate, Realistic, and Time-bound.

DISTRIBUTE the handout *Developing SMART Results*. Review the S, M, A, R, and T of SMART criteria and present examples of SMART results. Form 4–5 small groups, assigning one group to cover each result on the flipchart.

SAY: Look closely at the result your group is considering. Go through the SMART criteria one by one and decide whether your result meets each criterion.

If it does not, revise it to make it SMARTer.

Coach groups individually if they need help.

In plenary, invite each group to present its result. Determine together whether each result meets the SMART criteria.

STEP 3. Establish a baseline (15 minutes)

SAY: In order to be measurable, the result must contain an indicator, a marker of change over time. The result states the goal, that is, the value of the indicator that the team is aiming for at the end of the LDP+.

The result also includes a baseline value for the indicator at the beginning of the LDP+, before activities begin.

Gathering baseline data provides the starting point for tracking changes in the indicator over the life of an Action Plan.

Improvement Teams can obtain baseline data for their indicators from such documents as the Demographic and Health Survey, service statistics, the national or regional Health Information System, or Health Management Information System.

They will then track the indicator month by month (if possible or regularly) to show progress towards their desired results.

Have participants return to their small groups to work on establishing a baseline for an indicator of their SMART result.



SAY: You may not have access to data sources today, but you do have general knowledge of the priority health area and the current situation in your [district/region].

> Use what you know to come up with a possible baseline value for your indicator. Be ready to explain why you chose that figure.

In plenary, have each group **PRESENT** their baseline and explain their choice.

E. Identifying Obstacles to Achieving The Result

This exercise helps participants identify the work needed to be done to achieve the desired measurable result.

- **DURATION** 45 minutes
- **MATERIALS** ☐ Tape to stick papers to the wall Half sheets of paper, enough to give each team three pieces

Markers for each group

PROCESS:

Identify the obstacles to reaching the result (30 minutes) STEP 1.

Have participants work in their small groups.

SAY: Think about the SMART result your group has defined.

ASK: Since you have all agreed that this result is important for the success of LDP+, why aren't you already there?

What is blocking the way to this result? What are the obstacles?

Consider the four categories into which most public health obstacles fall:

- Policies and procedures
- **Providers**
- Equipment, infrastructure, and supplies
- Clients and communities.

Select obstacles that are within your control, not beyond it. For example, lack of resources from others or widespread poverty is probably outside your control.

SAY: Talk in your small groups and agree on the three most important obstacles to your desired measurable result.

WRITE each obstacle on a separate piece of paper.

NOTE: Circulate and check to make sure you do not get a list of vague descriptions, such as "lack of human resources." If you see these kinds of obstacles, help the teams analyze more deeply by asking, "Why is that?"



STEP 2. Select one critical obstacle for root cause analysis (15 minutes)

Synthesize small-group lists.

- Each group reads aloud its three most critical obstacles and **POSTS** the sheets of paper on the wall.
- The large group **CLUSTERS** similar obstacles together and agrees on one obstacle to use as an example for root cause analysis.

SAY: Through our next activity, we can make sure that LDP+ Action Plans will address the root causes of our obstacle and not simply the symptoms of the root causes.

F. Diagnosing Root Causes: The Five Whys Technique

This exercise helps participants to tell the difference between presenting symptoms and root causes and then to diagnose the root causes of an obstacle.

- **DURATION** 45 minutes
- **MATERIALS** □ Handout The Five Whys Technique
 - Blank flipcharts, one for each small group
- **PROCESS:**

STEP 1. Introduce the concept of root cause analysis (10 minutes)

In the large group:

SAY: You have identified the main obstacles to achieving a desired measurable result that is tied to public health priorities, to your vision, and to your current situation.

> Prior to developing an Action Plan, it is time to take a close look at the root causes for these obstacles.

The better the analysis, the better the Action Plan.

On a flipchart, **DRAW** a tree with its roots showing.

ASK: What does this picture have to do with the leading practice of focusing?

Take responses until someone mentions root cause analysis.

ASK: Does anyone know what root cause analysis is?

Take responses and encourage ("very good," "that makes sense," and so on) explanations of root cause that are correct or nearly so.

SAY: Root cause analysis allows us to look at the reasons that obstacles exist.

> Root cause analysis allows us to find and correct the underlying causes of obstacles, as opposed to merely dealing with obvious symptoms.

SAY: One method is to keep asking "Why?" in order to get beneath the symptoms and learn what causes them.



WRITE, on a separate flipchart—one under the other— Why? Why? Why? Why?

Give an example of how these "Whys" are applied to the causes listed under the four categories of obstacles. Select a cause and

ASK: Why is this happening?

Repeat the question after each response to illustrate the technique.

SAY: It is important to stop at a "Why?" that is within your sphere of control or influence, not one that is outside of your influence.

STEP 2. Practice the Five Whys Technique (20 minutes)

HAND OUT copies of The Five Whys Technique.

SAY: For each of the root causes you listed, ask five "Why?" questions.

Mark those causes that you feel you can do something about.

For example, "poverty" often appears as a root cause. If the answer to "Why are people not coming to the clinic?" is "Because they are poor and uneducated," rather than asking "Why are they poor and uneducated?" it is better to stop. Continuing to ask "Why?" would not yield actionable information.

Facilitators should **CIRCULATE** among the teams and listen closely to the teams' deliberations to make sure they understand the task.

NOTE: People might want to know if they should always ask "Why?" five times. It is true that sometimes only three "Whys" are enough. When to stop asking "Why?" depends on the answers. If a root cause cannot be acted on, it is better to move up to "Why?" answers that people can do something about.



STEP 3. Report out on progress (15 minutes)

In the large group, invite teams to share the list of the root causes they discovered from their analysis.

SAY: Include only the ones you marked – those you feel you can do something about. These are the root causes to focus on in your Action Plans.

Discuss any concerns or questions.

Emphasize that teams must address a root cause over which they have control.

SAY: At this point, the teams would develop their challenge statement which will ask the question of how they can achieve their measurable result, given the obstacles in their way. They would then brainstorm priority actions based on the root cause analysis and develop an Action Plan.

G. Applying Governing Practices

Through this activity, participants will understand the governing practices and apply them to the responsibilities of the LDP+ Governing Body.

DURATION

I hour 45 minutes

MATERIALS

- Prepared flipchart: Governance is setting strategic direction, establishing policy, raising and allocating resources, and overseeing achievement of results in a way that is responsive to the people an organization serves.
- Handouts: Conceptual Framework: Leading, Managing, and Governing for Results; Integrated Practices for High Performing Health Systems; Governing Practices at the Health Facility Level

PROCESS:

STEP I. Put governing into context (15 minutes)

SAY: Yesterday we explored the leading and managing practices. Today we will explore the third element – governing practices.

Emphasize these points:

- Leading, managing, and governing are interdependent and reinforce each other.
- There is some overlap among leading, managing, and governing.
 Nevertheless, all three elements are essential to achieving a measurable result.
- Effective leadership is a prerequisite for effective governance and effective management.

Remind participants of the relationship among these three elements of leadership. **REFER** back to the handout *Conceptual Model: Leading, Managing, and Governing for Results.*



STEP 2. Introduce governing (15 minutes)

ASK: What does it mean to govern?

Have participants discuss in pairs the meaning of governing and share their definitions in plenary.

SHOW the prepared flipchart labeled "Governance is..." and relate it to the definitions that came out of the paired discussions.

Facilitate a conversation about governing bodies.

ASK: What are some examples of governing bodies in our locality?

ASK: When they are working well, what do governing bodies do?

WRITE responses on a flipchart

STEP 3. Apply practices of good governance to the LDP+ (45 minutes)

REFER back to the handout, Integrated Practices for High Performing Health Systems, and briefly go over each of the four governing practices.

DIVIDE participants into four small groups and assign one practice to each group.

SAY: Read the description of your small group's governing practice.

Discuss how this Governing Body can use this practice to support the LDP+.

On a piece of flipchart paper, list specific activities related to this practice that the Governing Body will do to support the LDP+.

In plenary, ask each small group to briefly describe what their practice is and the ways in which the Governing Body will apply it to support the LDP+.



STEP 4. Consider how the governing body can contribute to gender equity in leadership development (15 min)

SAY: Women (as a group, not all) have historically been excluded from most formal positions of leadership, authority, and power. They have usually been held responsible for building and maintaining relationships..

> Men (as a group, not all) have historically held leadership positions with greater authority and formal power. This has enabled men to have more control over the resources needed for important activities.

SAY: Research has shown that women involvement in leadership is beneficial for health outcomes. We want to empower both women and men to be effective leaders.

ASK: How can you as governing body empower men and women to become effective leaders and contribute to gender equity in leadership development?

WRITE recommendations on a flipchart and remind participants that these suggestions should be part of the governing body Action Plan.

NOTE: To address the cultural contexts in which men and women are not permitted to interact, the process of aligning stakeholders should allow for a separate forum in which women and men can discuss independently. But with each group's feedback given equal value in the final decision making process.



STEP 5. How the teams can apply governance practices at the facility level (15 min)

SAY: We have seen how you, the Governing Body, can apply the practices of good governance as you oversee LDP+ implementation and plan for scale up.

> These practices are equally important for the Improvement Teams and will form an important part of their workshops.

> The teams will consider ways in which they can apply governing practices at their level of the system, and they will receive this handout with some examples at the facility level.

DISTRIBUTE the handout, Governing Practices at the Health Facility Level.

POINT OUT the broad definitions and goals in the left-hand column, which apply to working groups at all levels.

Bring participants' attention to the second and third columns — actions and tools where governing practices are applied specifically to the facility level.

NOTE: Use an inquiry mode (not prescriptive) when discussing governance with the Governing Body. Emphasize their role in the LDP+ and avoid getting diverted to other roles they play as individuals or as a group. Be careful with time. If the general discussion of governing practices takes too long, you will not be able to devote enough time to concrete actions the Governing Body will carry out.

H. Gaining Commitment, Not Just Compliance

This exercise increases understanding of the difference between compliance and commitment. It can help a workgroup or group of managers generate commitment to a set of tasks or work plan.



45 minutes



- □ Paper for participants to write on.
- Prepared (covered) flipchart with two columns and the headings: Commitment for the left column and Compliance for the right. Leave two rows of space above the headings.
- ☐ Handout: Commitment versus Compliance

PROCESS:

STEP I. Reflect on motivating factors (20 minutes)

Instruct people to get a piece of paper and **DRAW A LINE** in the middle from top to bottom to make two columns.

In the large group:

SAY: Think of a time when you were really committed to doing something.

In the left column, write the factors that motivated you.

(Pause)

Now think about another situation where you were forced or obliged to do something.

Write the factors that motivated you in that situation in the right column.

(Pause)

At your table, share what you wrote in each column.

In the large group:

ASK: What is the difference between the answers in the two columns?

COLLECT a few responses.



REVEAL the prepared flipchart with two columns.

ASK: What did you write in the left column?

RECORD each new idea. Repeat for the right column.

ASK: What is the difference between the two lists?

NOTE: You will probably find that commitment has internal motivators while compliance has external motivators.

STEP 2. Discuss the meaning of commitment and compliance (15 minutes)

WRITE "internal motivators" and "external motivators" above the two lists.

ASK: What is commitment?

Take some responses and WRITE them on a flipchart.

ASK: What is compliance?

Take some responses and WRITE them on a flipchart.

ASK: What is the difference in the types of performance they produce?

Why is this distinction important for the improvement project you selected?

ASK: Are there times when compliance is okay? For what reasons?

Take some responses.

HAND OUT and read aloud, or ask a participant to read, *Commitment versus* Compliance.

NOTE: Be sure participants understand that in many situations there are good reasons for compliance, especially compliance with medical protocols or government regulations.

SAY: Compliance is not always a problem; it just does not inspire innovation and creativity. You need to judge the situation and know what is needed.

The real problem is malicious compliance—foot dragging and sabotage.

Ask for questions or comments. Be sure malicious compliance is part of a group discussion.



STEP 3. Wrap up and suggestions for practice (10 minutes)

Think about the implementation of the LDP+ and how to inspire commitment SAY: of the LDP+ Improvement teams and stakeholders.

COLLECT a few responses and encourage people to look for more opportunities like them.

I. Next Steps for the Governing Body and Closing

This gives members of the Governing Body a clear view of their role in launching LDP+.

DURATION 60 minutes

MATERIALS • Handout: LDP+ Overview

Blank flipchart

PROCESS:

STEP I. Review responsibilities of the Governing Body (10 minutes)

In plenary, review the handout, *LDP+ Overview*, focusing on the key responsibilities of the Governing Body.

STEP 2. Confirm decisions already made for LDP+ implementation (20 minutes)

SAY: You can see from the list of responsibilities that this Governing Body plays a very important role in making LDP+ successful.

You can begin by making sure that you are all aware of the key decisions that have already been made:

- The priority health area and the 2–3 national/regional indicators
- The choice of the geographic area for the LDP+
- The Local Coordinator to manage LDP+ operations and logistics

SAY: Two important decisions that you still have to make are about the location and membership of the Improvement Teams and selection of the Local Coordinator.

Experience has shown that LDP+ works best when there are between five and eight Improvement Teams all working on the same priority health area.

SAY: Each team should be made up of between three and six people from the same facility or department. They should be people who usually work together and whose schedules will allow them to attend the four workshops and team meetings together over the next few months.

If only two or three members of a larger team can attend the workshops, these participants should plan with their coach to systematically engage the rest of the team in the process.



SAY: The Local Coordinator is the individual who will provide a communication link between the Improvement Teams and the Technical Coaching Team; manage the operational and logistical aspects of the LDP+ process; and provide organizational and logistical support for Improvement Team workshops and onsite meetings, as needed.

ASK: Who are your nominations for the Improvement Teams and the Local Coordinator?

WRITE recommendations on a flipchart and ask the participants to vote on the Improvement Teams and the Local Coordinator. Remind participants when selecting the local coordinator and members of the Improvement Teams that gender balance should be taken into account.

STEP 3. Plan Governing Body activities (15 minutes)

SAY: Now let's talk about how you can best carry out the other Governing Body responsibilities. Here are some questions that may help you plan.

Lead a discussion of each of the following questions. If you have any information that will help participants answer the questions, share it with them.

When participants have reached agreement, WRITE their responses on a flipchart.

ASK: How often and when will the Governing Body meet throughout the LDP+ cycle?

> They will need to meet at least one more time (probably halfway through the program) to review the Improvement Teams' progress, after Workshop 3. They will attend the Final Results Presentation in Workshop #4.

ASK: How will we, the Governing Body, be informed of progress and provide feedback on the process?

- The Champion will update them verbally and/or in writing at agreed-on intervals, including the monthly entries on Improvement Teams' monitoring and evaluation graphs.
- At the next Governing Body meeting, they will get a full report from the Champion and representatives of the Technical Coaching Team.
- They will also hear about progress and issues at the Shared Learning Sessions. They will provide feedback to the Champion and the Technical Coaching Team.

ASK: How will the Governing Body use the results of the Improvement Teams' work to guide decisions about scaling up the LDP+ process?

> We will learn about the different ways Improvement Teams can implement the LDP+. We can share that learning with new teams in other parts of the region or country.

We will also learn about actions to improve health services that have succeeded at the local level and can be shared with other localities.



ASK: What do we need to do now to start the LDP+ process?

- Appoint a leader of the Governing Body.
- Distribute responsibilities among Governing Body members.

ASK: What are we, the Governing Body, committed to?

- Acting as public supporters/sponsors of the LDP+.
- Overseeing the progress of the LDP+.
- Leading the scale up of the LDP+ process after this initiative ends.

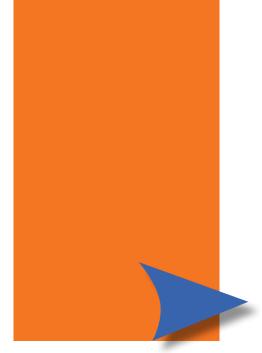
Guide participants in developing a set of required activities for the Governing Body over the LDP+ time period. Be sure that one member of the Governing Body agrees to assume responsibility for each activity.

STEP 4. Close the Stakeholder Alignment Meeting (15 minutes)

Review the responses to questions on the flipchart to be sure that everyone agrees. Tell participants that you will **TYPE** up the responses and **SEND** a copy to each of them.

Solicit participants' reactions to the meeting and additional comments.

End by reminding them of their special obligation and privilege to follow and model the four governing practices: cultivating accountability, engaging stakeholders, setting a shared direction, and stewarding resources.



SECTION I HANDOUTS

agenda and objectives: stakeholder meeting

PURPOSE

Build commitment of key stakeholders to developing leaders at all levels of health care organizations who can face challenges and achieve results in a priority health area.

OBJECTIVES

- To become familiar with the LDP+ process and content
- To learn leading, managing, and governing practices for overseeing LDP+ implementation
- To become informed about government policies, proven health interventions, and national/regional indicators in the priority health area
- To learn and apply the Challenge Model that is at the core of the LDP+
- To produce a plan to support the LDP+ Improvement Teams
- To commit to addressing the challenges of improving health outcomes and implementing the LDP+ process over time
- To commit to ensuring gender equity in leadership development throughout the LDP+
- To select the Improvement Teams and a Local Coordinator

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	DAY ONE	DAY TWO
	Setting the Stage (45 min.)	Settling in and Morning Reflection (30 min.)
	Setting the Stage (+5 min.)	Introducing the Challenge Model (30 min.)
	Getting to Know LDP+ (30 min.)	Analyzing the Current Situation (45 min.)
AM	Empowerment and Expert Models of Development (45 min.)	Developing a Measurable Result (45 min.)
	What Do Leaders Do? (45 min.)	Identifying Obstacles to Achieving the Result (45 min.)
	Understanding Leading and Managing Practices (30 min.)	Diagnosing Root Causes: The Five Whys Technique (45 min.)
Lunch	n Break	
	Exploring the Priority Health Area (1 hr. 30 min.)	Applying Governing Practices (1 hr. 45 min.)
PM	Creating a Shared Vision of Success (1 hr. 30 min.)	Gaining Commitment, Not Just Compliance (45 min.)
	Closing (30 min.)	Next Steps for the Governing Body and Closing (60 min.)

LDP+ OVERVIEW

The Leadership Development Program Plus: A Country-Led Process for Focusing Health Teams on Priority Health Results

LDP+ is a process that develops people at all levels of organizations. Working in their real work teams, participants learn leading, managing, and governing practices that enable them to face challenges and achieve measurable results in priority health areas chosen by local leaders in the health system.

They bring what they learn back to their workplaces where they teach and inspire their coworkers to apply these practices to real workplace challenges in priority public health areas. LDP+ coaches and facilitators provide feedback and support throughout the six to eight months of the process.

LDP+ builds on lessons learned by Management Sciences for Health from the implementation of leadership development programs in more than 40 countries.

At the heart of the program are the Improvement Teams from local health facilities who learn a proven method of leading, managing, and governing to address challenges and produce measurable results.

Participants in the LDP+ learn how to:

- Lead, manage, and govern to achieve results in a priority health area.
- Apply reliable tools and processes for defining and addressing challenges.
- Incorporate ongoing performance improvement processes into their work teams;
- Build a workgroup climate that supports commitment to continuous improvement.

LDP+ Roles

THE GOVERNING BODY, made up of local leaders in the health system, uses effective governing practices to oversee, sustain, and scale up the LDP+ process to address priority health areas.

THE TECHNICAL COACHING TEAM, made up of experts in the priority health area and monitoring and evaluation, uses national and regional public health data to understand and agree on the priority health area, proven interventions, and indicators. These coaches provide ongoing support to the Improvement teams.

THE IMPROVEMENT TEAMS, made up of members of local health units, implement the LDP+ process at their work sites. They analyze their local conditions to propose a measurable result in the priority health area and choose appropriate actions to achieve the result. They develop Action Plans and participate in workshops, onsite meetings, and Shared Learning sessions.

The Improvement Teams:

- 1. Understand the priority health area on which the LDP+ is focusing.
- 2. Create a vision of success for the priority health area.
- Assess their current situation.
- 4. Identify measurable results they can achieve within six to eight months to improve an indicator in the priority health area.
- 5. Analyze the root causes of obstacles in the way of achieving the results.
- 6. Determine what actions they will take to address the root causes (with support from the Technical Coaching Team).
- 7. Develop and implement Action Plans.
- 8. Monitor their progress, evaluate their achievements, and report on their results.

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LDP+TIMELINE & DELIVERABLES

NOTE: Between each workshop, Coaches meet with their Improvement Teams to review progress and provide support.

LDP Champion & facilitator

Stakeholder Alignment Meeting

Technical Coaching Team Meeting I

Workshop I

MONTH I

- Select priority health area, proven interventions, indicators, and geographic location to be proposed by Governing Body
- Design Stakeholder Alignment Meeting and invite health systems leaders to participate
- Gain commitment of key stakeholders
- As Governing Body, provide resources to support the LDP+ process
- Confirm priority health area, proven interventions, indicators, and geographic location
- Develop Governing Body's action plan

MONTH 2

- Coaches are oriented to their roles in LDP+. the M&E process, and to the steps of the Challenge Model
- Improvement Teams draft first 4 steps of Challenge Models, with an emphasis on measurable results
- Leadership Practice: Scanning

Technical Coaching Team Meeting 2

Workshop 2

Technical Coaching Team Meeting 3

Workshop 3

MONTH 3

- Coaches learn and practice skills to coach Improvement Teams around their challenge models
- Improvement Teams draft root cause analyses and action plans
- L&M Practices: Focusing, Planning and Organizing

MONTH 4

- Coaches learn and practice skills in M&E: collecting data and monitoring indicators
- They are oriented to reporting requirements and formats for the overall LDP+ process
- Improvement Teams draft reporting and evaluation forms
- L&M Practices: Monitoring & Evaluation, Implementing, Aligning and Mobilizing, and Inspiring

Results Presentation Stakeholders' Scale up Meeting

MONTHS 5-8

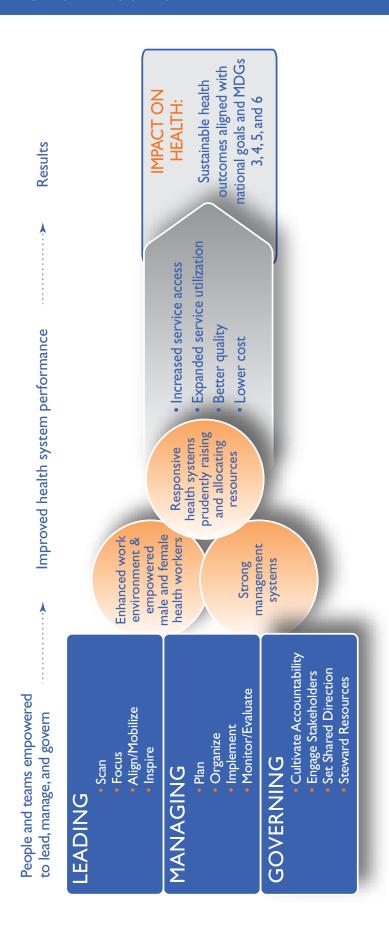
- Improvement Teams share success stories and prepare results presentations
- L&M Practices: Monitoring and Evaluation, Inspiring
- Improvement Teams present results to Governing Body, Technical Coaching Team, and other stakeholders
- Governing Body develops a strategy and plan for scaling up LDP+ and commits to provide resources for scale up

TWO MODELS OF DEVELOPMENT

Indicate the level of staff who take responsibility for the following activities that support service delivery (i.e., the central, provincial, district, or facility level).

	EXPERT MODEL Model assumes that someone already knows the solution to the problem and can solve it by transferring his or her knowledge to others to implement.	EMPOWERMENT MODEL Model assumes that the challenge is complex and requires the ideas, understanding, and participation of those in the situation.
I. Who analyzes the current situation and sets the priorities?		
2. Who does the planning and sets the indicators?		
3. Who supervises the activities?		
4. Who monitors and evaluates the results?		
5. Who is responsible and takes credit for the results?		

CONCEPTUAL MODEL: LEADING, MANAGING AND **GOVERNING FOR RESULTS**



INTEGRATED PRACTICES FOR HIGH PERFORMING HEALTH SYSTEMS

IFADING

SCAN

- Identify client and stakeholder needs and priorities
- Recognize trends, opportunities, and risks that affect the organization
- Look for best practices
- Identify staff capacities and constraints
- Know yourself, your staff, and your organization-values, strengths, and weaknesses

ORGANIZATIONAL OUTCOME

Managers have up-to-date, valid knowledge of their clients, and the organization and its context; they know how their behavior affects others.

FOCUS

- Articulate the organization's mission and strategy
- Identify critical challenges
- Link goals with the overall organizational strategy
- Determine key priorities for action
- Create a common picture of desired results

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and

ALIGN & MOBILIZE

- Ensure congruence of values, mission, strategy, structure, systems, and daily actions
- Facilitate teamwork
- Unite key stakeholders around an inspiring vision
- Link goals with rewards and recognition
- Enlist stakeholders to commit resources

ORGANIZATIONAL OUTCOME

Internal and external stakeholders understand and support the organization's goals and have mobilized resources to reach these goals.

INSPIRE

- Match deeds to words
- Demonstrate honesty in interactions
- Show trust and confidence in staff, acknowledge the contributions of others
- Provide staff with challenges, feedback, and support
- Be a model of creativity, innovation, and learning

ORGANIZATIONAL OUTCOME

The organization's climate is one of continuous learning, and staff show commitment, even when setbacks occur.

MANAGING

PLAN

- Set short-term organizational goals and performance objectives
- Develop multi-year and annual plans
- Allocate adequate resources (money, people, and materials)
- Anticipate and reduce risks

ORGANIZATIONAL OUTCOME

The organization has defined results, assigned resources, and developed an oberational blan.

ORGANIZE

- Develop a structure that provides accountability and delineates authority
- Ensure that systems for human resource management, finance, logistics, quality assurance, operations, information, and marketing effectively support the plan
- Strengthen work processes to implement the plan
- Align staff capacities with planned activities

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and briorities are clear.

IMPLEMENT

- Integrate systems and coordinate work flow
- Balance competing demands
- Routinely use data for decision-making
- Co-ordinate activities with other programs and
- Adjust plans and resources as circumstances

ORGANIZATIONAL OUTCOME

Activities are carried out efficiently, effectively, and responsively.

MONITOR & EVALUATE

- Monitor and reflect on progress against plans
- Provide feedback
- Identify needed changes
- Improve work processes, procedures, and tools

ORGANIZATIONAL OUTCOME

The organization continuously updates information about the status of achievements and results, and applies ongoing learning and knowledge

GOVERNING

CULTIVATE ACCOUNTABILITY

- Sustain a culture of integrity and openness that serves the public interest
- Establish, practice and enforce codes of conduct upholding ethical and moral integrity
- Embed accountability into the institution
- Make all reports on finances activities, plans, and outcomes available to the public and the stakeholders
- Establish a formal consultation mechanism through which people may voice concerns and provide feedback

ORGANIZATIONAL OUTCOME

Those who govern are accountable to those who are governed. The decision making is open and transparent. The decisions serve bublic interest.

ENGAGE STAKEHOLDERS

- Identify and invite participation from all parties affected by the governing process
- Empower marginalized voices, including women, by giving them a voice in formal decision-making structures and processes
- Create and maintain a safe space for the sharing of ideas
- Provide an independent conflict resolution mechanism
- Elicit and respond to all forms of feedback in a timely manner
- Establish alliances for joint action at whole-ofgovernment and whole-of-society levels

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has an inclusive and collaborative process for making decisions to achieve the . shared goals

SET SHARED DIRECTION

- Prepare, document and implement a shared action plan to achieve the mission and vision of the organization
- Set up accountability mechanisms for achieving the mission and vision using measurable indicators
- Advocate on behalf of stakeholders' needs and
- Oversee the realization of the shared goals and the desired outcomes

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has a shared action plan capable of achieving objectives and outcomes jointly defined by those who govern and those who are governed.

STEWARD RESOURCES

- Ethically and efficiently raise and deploy the resources to accomplish the mission and the vision and to serve stakeholders and beneficiaries
- Collect, analyze, and use information and evidence for making decisions
- Align resources in the health system and it design with the shared goals
- Build capacity to use resources in a way that maximizes the health and well-being of the public
- Inform and allow the public opportunities to monitor the raising, allocation and use of resources, and realization of the outcomes

ORGANIZATIONAL OUTCOME

The institution has adequate resources for achieving the shared goals, and the resources are raised and used ethically and efficiently to achieve the desired objectives and outcomes.

THE CHALLENGE MODEL

	Mission/Priority Health Area:	
	Vision:	
	Measurable result:	
Obstacles and root causes		Priority actions
	Current situation:	
	Challenge:	
How will we achieve or	ur desired result in light of the obstacles we need t	to overcome? 1

USING THE CHALLENGE MODEL

STEP I	Review your organizational mission and strategic priorities With your team, agree on a common understanding of your organization's mission and strategic priorities. This understanding will help shape your vision within the context of your organization's priorities.
STEP 2	Create a shared vision of the future With your team, imagine what you and others will see when your team has made its contribution to improvements in your organization's strategic priorities. This shared vision will inspire the team to face each new challenge.
STEP 3	Assess the current situation With your team, scan your internal and external environments within the context of your organization's priorities. Consider such factors as the prevalence of the health problem, government policies, and current interventions. This will help you form an accurate picture of the conditions that can affect your team's progress toward your shared vision.
STEP 4	Agree on one measurable result Based on your organization priorities and your current situation, define a measurable result that can be achieved within the time frame of this ICRC- LDP. This desired measurable result is what will drive your work together and allow you to monitor and evaluate your progress toward achieving it. Your team will most likely need to adjust the result as you gain more information about the current situation and the obstacles you need to overcome.
STEP 5	Identify the obstacles and their root causes Make a list of obstacles that you and your team will have to overcome to reach your stated result. Consider gender equity issues and four broad categories into which most obstacles fall: policies and procedures; providers; equipment, infrastructure, and supplies; clients and communities. Use a root cause analysis tool to make sure you are addressing the causes and not just the symptoms.
STEP 6	Define your key challenge State what your team plans to achieve (your measurable result) in light of the root causes of the obstacles you have identified. (It helps to begin your challenge statement with: "How will we?")
STEP 7	Develop an Action Plan Develop an Action Plan that lists the priority actions needed to meet your challenge. Include estimates of the human, material, and financial resources needed and the time line for implementing your actions.
STEP 8	Implement your plan, monitor progress, and evaluate results Work together as a team to implement the plan. Regularly monitor your progress toward your measurable result and, at the end, evaluate your result.

DEVELOPING **SMART** RESULTS

To meet the SMART criteria, results must be:

S SPECIFIC	The result is clear enough so that others can understand what it will look like when it is accomplished.	 Does your result have an indicator of what will change over time? Is your result limited to 1 to 2 indicators?
M MEASURABLE	Progress towards the result can be measured using numbers, rates, proportions or percentages.	 Does the result state a baseling value for the indicator? Does it state a target value for the indicator? Is the indicator expressed in numbers as well as in percentages?
APPROPRIATE	Is the result aligned with the strategic priority of your organization and your team?	
REALISTIC	 Can your team achieve this result with your current activities and resources? 	
TIME-BOUND	Does your result have a start date and an end date?	

Example of a SMART result for an improvement project whose priority health area is preventing the spread of HIV & AIDS:

Between January and July 2012, the number of fully functioning voluntary counseling and testing sites in the district will increase by 50%, from 6 to 9.

By looking at the measurable result, you will see that it is Specific, Measurable, and Timebound.

Start and end dates: Between January and July 2012 (Time-bound)

Indicator: the number of fully functioning voluntary counseling and testing sites in the district (Specific)

Percent, baseline, target: will increase by 50%, from 6 to 9. (Measurable)

By looking at data sources and discussing their situation, team members would be able to confirm that it was Appropriate and Realistic.

THE FIVE WHYS TECHNIQUE

Purpose

The Five Whys exercise is a questioning technique, developed by Imai Masaaki, for getting beyond obvious symptoms and identifying the primary, or root, causes of a problem. Asking "why" five times prevents mistaking symptoms for causes, so that you can work on addressing the underlying factors that are causing the problem rather than working on the wrong causal factor.

Process

When you are working with a cause-and-effect diagram and have identified a probable cause, ask, "Why is that true?" or "Why is that happening?" To each answer, ask "why" again. Continue asking "why" at least five times, until the answer is "That is just the way it is," or "That is just what happened." The questioning will help you to arrive at a deeper understanding of the causes keeping the current situation

Be sure that you are asking about things that are in your sphere of influence to affect. If you find yourself talking about conditions such as "the economy" or the "level of literacy," begin again and go down the chain of "whys" so that you are sure that you are discussing something you can affect.

To practice this method, take a current situation that you would like to change.

For example, the cold chain frequently breaks down, interrupting vaccination campaigns:

- Why is the current situation like this? Response: Because there is no backup during power outages.
- Why is this so? Response: Because there was no money in the budget for a backup arrangement.
- Why is this so? Response: Because no one thought about it when the budget was made.
- Why is this so? Response: Because the budget was made by an accountant who does not know the importance of an uninterrupted cold chain.
- Why is this so? Response: Because technical experts do not get involved in budgeting.

At this point you might see that what is missing is more involvement of technical experts in setting budgets.

Note:

It is possible that asking "why" three times is sufficient. You may stop when you reach a point when you respond, "That is how things are, that is life..." or when you are no longer able to find a useful response.

GOVERNING PRACTICES AT THE HEALTH FACILITY LEVEL

How Health Facility-Level Managers Who Lead can Practice Good Governance (within the context of LDP+)

Governing Practices

Actions at the Service-**Delivery Level**

Selected Tools

CULTIVATE ACCOUNTABILITY

Foster a decision-making environment based on systems and structures that support integrity, transparency, participation, and inclusion.

Goal: Create and sustain a culture of accountability by establishing and practicing conduct that upholds transparency, integrity, participation, and inclusion.

- I. Create mechanisms to share information and reward behaviors that reinforce transparency, integrity, participation, and inclusion.
- 2. Share reports on finances, activities, and plans with managers, service delivery providers, clients, community members, and other stakeholders.
- 3. Establish processes to continuously assess the appropriateness and effect of decisions.
- 4. Establish a formal consultation mechanism through which staff, clients, and other stakeholders may voice concerns.
- Participatory budgeting process
- Citizen report cards and community scorecards

ENGAGE STAKEHOLDERS

Identify, engage, and collaborate with diverse stakeholders representing the full spectrum of interested parties.

Goal: Establish procedures and an environment that encourages staff, clients, community members, and representatives of other sectors to participate in public health decisions that affect their lives and work.

- I. Systematically elicit and respond to feedback on services from all stakeholders.
- 2. Hear and respond to marginalized voices, particularly female staff and clients, by giving them a place in formal decision-making and oversight structures.
- 3. Participate in relevant coalitions, networks, and alliances in support of priority health areas.
- Stakeholder analysis tool
- Gender assessment instrument
- Mechanisms for conflict resolution

SET SHARED DIRECTION

Develop a collective vision of the "ideal state" of a priority health area and a process for reaching it.

Goal: Oversee the involvement of stakeholders in articulating a vision for a priority health area, determining the desired result, and overseeing the implementation of an Action Plan.

- I. Be sure the shared vision and desired measurable result reflect stakeholders' needs and priorities.
- 2. Oversee the development and implementation of a shared Action Plan to achieve the desired result.
- 3. Disseminate the vision, result, and main activities in the Action Plan to all stakeholders.
- 4. Establish accountability mechanisms for achieving the result, using well-defined indicators to gauge progress.
- The Challenge Model
- Project management dashboards

STEWARD RESOURCES

Build capacity of staff at all levels to manage human, financial, and technical resources responsibly.

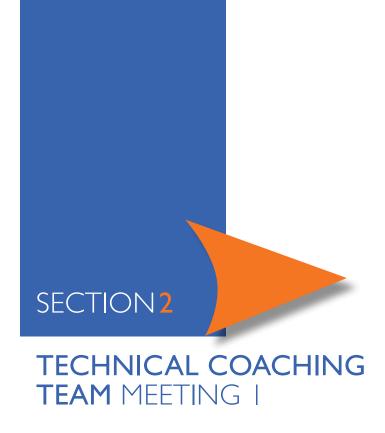
Goal: Strengthen the capacity to absorb resources and deliver high-quality, affordable, and cost-effective services appropriate to the needs of the population.

- I. Mobilize resources to carry out the facility's Action Plan, and use these resources wisely to serve beneficiaries and other stakeholders.
- 2. Collect, analyze, and use information to make sound decisions on the use of human, financial, and technical resources for implementation of the Action Plan and achievement of the desired
- 3. Place the priority health area on the local policymaking agenda.
- 4. Provide the public with information and opportunities to monitor the acquisition and deployment of resources.

- Public expenditure tracking process
- Stock record card for ordering and managing medicines and supplies

COMMITMENT VERSUS COMPLIANCE

Commitment — Internally driven			
Source of motivation	Feelings	Outcomes	
 You want to do something extraordinary. You believe in it. 	You WANT to do something. Care about the work Determined to persevere in the face of obstacles Empowered to overcome obstacles. Energetic, bring new possibilities and options to the work.	■ Good results that you are proud of.	
Compliance — Externally drive	en		
Source of motivation	Feelings	Outcome	
Formal compliance You do just what is required and no more.	 You HAVE to do something. Compliant but not enthusiastic; act to satisfy an external standard or requirement Motivated only enough to achieve organizational objectives 	 Do what is expected Follow orders and work according to a plan Do what one has to, but in a routine way 	
Noncompliance You don't do what is required.	 Annoyed, frustrated, critical of others, or similar Uncooperative, negative; refuse to participate in work activities 	InsubordinationNo results	
Malicious compliance You purposely do the wrong thing, although you may not object openly.	 Resentful and critical, but unwilling to discuss complaints Follow the "letter of the law" but undermine desired results 	SabotageNegative results	



FACILITATORS

Master Facilitator, LDP+ Champion

PARTICIPANTS

■ Members of the Technical Coaching Team: three to five individuals with expertise in the priority health area and in monitoring and evaluation

MEETING DESIGN

This is the first of three Technical Coaching Team meetings. It takes place after the Stakeholder Alignment Meeting, which members of the Technical Coaching Team attended.

This meeting is designed to prepare members of the Technical Coaching Team for their first coaching assignment with the Improvement Teams. They review the Challenge Model and practice developing a SMART result, with an emphasis on selecting and measuring indicators.

The meeting lasts for one-half day.

- MEETING OBJECTIVES Confirm the LDP+ sequence and the responsibilities of the Technical Coaching Team.
 - Give the Technical Coaching Team more familiarity with the Challenge Model.

MEETING DELIVERABLES

■ Completed SMART Result Exercise

PREPARATION OF CONTENT

Read the facilitator notes for this session.

PREPARATION OF MATERIALS

- Make copies of all meeting handouts, available in the handout section at the end of this section.
- Prepare materials required for each session.

MATERIALS

- □ Flipchart(s), easel, and paper
- Tape
- Colored markers
- Self-stick notes or note cards
- Half sheets of paper

PREPARED FLIPCHARTS

From the Stakeholder Alignment Meeting:

- Drawing of the Challenge Model
- Data on the selected priority health area:
 - The national and/or regional prevalence of specific health conditions or diseases
 - Government policies
 - ➤ 2-3 proven health interventions
 - > 2-3 national/regional indicators

HANDOUTS

- Responsibilities of the Technical Coaching Team
- LDP+ Timeline and Deliverables
- Team Meeting Form
- Using the Challenge Model
- Developing SMART Results
- Results Levels and Sample Indicators
- □ Elements of a Monitoring and Evaluation Plan
- Numerators and Denominators for Indicators
- Common Data Sources
- □ SMART Result Exercise: The Monapo Improvement Team
- Evaluation Form for Technical Coaching Meeting #1

TCI SCHEDULE **TECHNICAL COACHING** TEAM MEETING I

- A. Welcome and Overview
- B. Reviewing the Challenge Model and Priority Health Area
- C. Coaching Improvement Teams on SMART Results Closing



A. Welcome and Overview

Through this discussion, participants understand the importance of coaching for a successful LDP+ process and the responsibilities of the Technical Coaching Team.

- **DURATION** 30 minutes
- MATERIALS Flipchart with the meeting objectives and agenda
 - Handouts: Responsibilities of the Technical Coaching Team;
 LDP+ Timeline and Deliverables; Team Meeting Form
- **PROCESS:**

STEP I. Explain the context, objectives, and agenda of this meeting (10 minutes)

Emphasize that this meeting builds on the Stakeholder Alignment Meeting and help participants prepare to coach the Improvement Teams.

STEP 2. Clarify the responsibilities of the Technical Coaching Team (20 minutes)

DISTRIBUTE the handout, *Responsibilities of the Technical Coaching Team.* Read the handout together and discuss any questions or concerns that arise.

DISTRIBUTE and review the handout, *LDP+ Timeline and Deliverables*. Point out that the first coaching assignments will take place in on-site Improvement Team meetings between Workshops # I and #2.

DISTRIBUTE the handout, *Team Meeting Form.* Discuss how the coaches might assist Improvement Teams in filling out the forms and how the information on the forms might help to identify areas of concern.

SAY: You can see how many important activities you will be responsible for and how critical your coaching role is to the success of this LDP+ initiative.

The three Technical Coaching Team meetings will help you to be effective coaches and to address any challenges that arise as you work with your Improvement Teams.

B. Reviewing the Challenge Model and Priority Health Area

This activity helps to Identify actions needed to implement the list of proven health interventions agreed to at the Stakeholder Meeting.

- **DURATION** 30 minutes
- **MATERIALS** □ Prepared flipcharts (from the Stakeholder Alignment Meeting): Drawing of the Challenge Model and national/regional data on the selected priority health area
 - □ Handouts: Using the Challenge Model
- **PROCESS:**

STEP I. Review the steps of the Challenge Model (5 minutes)

POINT out the steps on the Challenge Model flipchart from the Stakeholder Alignment Meeting.

Have participants review the handout, Using the Challenge Model, from the Stakeholder Alignment Meeting.

SAY: In Workshop #1, the participants will be introduced to all of the steps of the Challenge Model.

They will then work in their Improvement Teams to carry out the first four steps:

- reviewing the priority health area
- creating a shared vision
- assessing the current situation
- agreeing on a measurable result.

When you meet with them after Workshop #1, your task will be to help them review their work on these four steps.

You may find that you need to go over the Challenge Model again to be sure that they understand the steps.

STEP 2. Review information about the priority health area (25 minutes)

Briefly go over the flipcharts from the Stakeholder Alignment Meeting about the priority health area.

SAY: In Workshop #1, the Improvement Teams will apply this information to their own current situations.

> The priority health area indicators will help them develop indicators for their measurable result, and the proven interventions may generate ideas for the priority actions in their Action Plans.

In your meetings with them after Workshop #1, you may find it helpful to review some of these priority health area indicators and interventions that were discussed during the Stakeholder Alignment Meeting.

ASK: Does anyone have a question about the information on these flipcharts?

Does anyone want to add to or modify the proven interventions?

Answer questions and make any suggested additions to the interventions.

C. Coaching Improvement Teams on SMART Results

This exercise helps build skills in analyzing a given result, explaining why it is or is not SMART, and giving suggestions to make it SMARTer.

- **DURATION** 2 hours, 25 minutes
- **MATERIALS** ☐ Handouts: Developing SMART Results; Results Levels and Sample Indicators; Elements of a Monitoring and Evaluation Plan; Numerators and Denominators for Indicators; Common Data Sources; SMART Result Exercise: The Monapo Improvement Team
- **PROCESS:**

STEP I. Focusing on the measurable result (10 minutes)

POINT out that LDP+ facilitators and coaches have found that some Improvement Teams have difficulty making their results SMART (Step 4 in the Challenge Model).

Ask participants to refer to the handout, Developing SMART Results, from the Stakeholder Alignment Meeting. (Have extra copies on hand in case some participants do not have theirs.)

SAY: When you review the Challenge Model with your Improvement Teams after Workshop #1, you can help them make sure that their desired measurable result statement meets all of the SMART criteria.

> They may need to modify the result statement several times to make it really SMART.

STEP 2. Selecting an indicator for the measurable result (20 minutes)

SAY: Improvement Teams often need help getting started with the S for "specific" stating their result in clear terms that are easy to understand.

> To be specific, their result needs to contain an indicator, something that can be measured over time. An indicator is like a road sign — a milestone along a road.

When they measure the indicator, it shows whether they are on the right road, how far they have gone, and how far they still have to go to reach their destination — their measurable result.

The indicator should answer the question, "What will we see or hear that tells us whether or not we achieved our measurable result?"

SAY: The measurable result should have no more than one or two indicators. More indicators would make monitoring progress and evaluating results complicated, difficult, and perhaps costly.

> You now have a chance to look at some handouts that the Improvement Teams will use to develop their indicators during Workshop #1. These handouts will also be useful references for you as coaches helping the teams modify the indicators after Workshop #1.

STEP 3. Choosing an indicator at the output or outcome level (30 minutes)

SAY: You are now familiar with some of the indicators for the priority health area in the country. These are the indicators related to a national program.

> When your Improvement Teams develop indicators for their measurable results, they will select an indicator that applies to their facility or community. It may be an indicator that is used at the regional/national level (such as the viral load testing rate among babies born to HIV-positive pregnant women), or it may be an indicator at the facility level that will contribute to a higher-level priority health area indicator (such as the number of HIV-positive pregnant women receiving ART at a particular facility).

DISTRIBUTE the handout, Results Levels and Sample Indicators. Review the handout with participants and lead a discussion of the indicator levels and examples on the handout. Ask participants for other examples based on their own experience.

DRAW ATTENTION to the reasons for choosing output and/or outcome indicators stated at the top of the handout:

- An impact indicator requires more time and more interventions than a six to eight-month project can achieve.
- Input and process indicators are too limited and activity-related to show a real public health result.

STEP 4. A monitoring and evaluation plan (45 minutes)

Remind participants that if the result is to be measurable (the M in SMART), the Improvement Teams will need to track progress for their indicator month by month, if possible, from the start to the end of their LDP+ improvement project.

POINT OUT the need for a plan to enable them to monitor their progress and evaluate their results. DISTRIBUTE the handout, Elements of a Monitoring and Evaluation Plan, and review the elements together.



Explain that many Improvement Teams have needed coaching to fully understand the baseline and the goal.

SAY: The measurable result must state a baseline value for the indicator at the beginning of the LDP+ improvement project, before activities begin. The result must also state the goal, the value of the indicator that the team is aiming for at the end of the LDP+ improvement project.

> Gathering baseline data provides the starting point for tracking changes in an indicator over the life of an improvement project.

Draw participants' attention to the second element on the handout, the indicator definition. Explain that the Improvement Teams will have to set a numerator and denominator if they are to measure the amount of change in their indicator from baseline to goal.

DISTRIBUTE and review the handout, *Numerators and Denominators for Indicators*, and the handout, Common Data Sources.

Remind participants that the Improvement Teams may not have immediate access to the relevant data sources during Workshop #1, but they can obtain accurate data when they return to their facilities.

STEP 5. Complete the SMART Result Exercise (30 minutes)

DISTRIBUTE the handout, SMART Result Exercise, and read the instructions together.

SAY: Here's your chance to practice coaching an Improvement Team to make their result statement SMARTer.

ASK: What feedback would you give your Improvement Team if they came back from Workshop #1 with a result like this one?

Ask participants to work on their own to suggest revisions to the result in the exercise. They should use the handout, Developing SMART Results, to guide them.

After they complete their individual work, have them discuss their responses, either in plenary or in small groups, depending on the number of participants.

Encourage participants to recognize that they can assist Improvement Teams to use the Developing SMART Results handout just as they did during this exercise.

Closing

This discussion will reinforce participants' learning and hear their reactions to this first meeting.

DURATION 30 minutes

MATERIALS □ Handout: Evaluation Form for Technical Coaching Team Meeting 1

PROCESS:

STEP I. Summarize learning and reactions to this meeting (15 minutes)

ASK: What have you learned today about the LDP+?

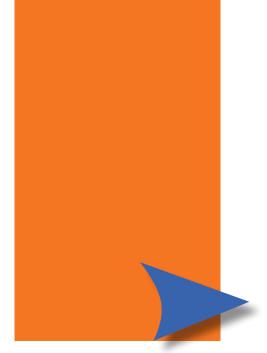
> What have you learned about your responsibilities as coaches of the Improvement Teams? How are you feeling about taking on those responsibilities?

Encourage open discussion of any concerns about coaching content or skills.

Reassure participants that they will work on both content and skills in Technical Coaching Team Meeting #2. SET the date, time, and location of that meeting.

STEP 2. Evaluate the meeting (15 minutes)

HAND OUT a copy of the Evaluation Form and give participants 15 minutes to complete it.



SECTION 2 HANDOUTS

Responsibilities of the Technical Coaching Team	01
LDP+ Timeline & Deliverables	02
Team Meeting Form	03
Using the Challenge Model	04
Developing SMART Results	05
Results Levels and Sample Indicators	06
Elements of a Monitoring and Evaluation Plan	07
Numerators and Denominators for Indicators	08
Common Data Sources	09
SMART Result Exercise:The Monapo Improvement Team	10
Evaluation Form: Technical Coaching Team Meeting #1	11

RESPONSIBILITIES OF THE TECHNICAL COACHING TEAM

The Technical Coaching Team has between three and five members. The team includes expertise in relevant components of the health system, as well as in monitoring and evaluation.

In addition to their areas of expertise, team members should be receptive to innovation and open to ideas from the Improvement Teams. They need to be willing and able to devote the necessary time to facilitating workshops and coaching Improvement Teams between workshops.

Members are drawn from the country's health system, preferably from within the geographic location chosen for LDP+ implementation. They may be content experts and officers from relevant MOH departments or M&E specialists from the Ministry's Management Information Systems unit. In some instances, a member may be a regional expert from a relevant national program (e.g., HIV/AIDS Commission, National Malaria and TB Control Programs).

Training of the Technical Coaching Team covers the LDP+ process, with an emphasis on M&E elements. It also includes the principles and practices of coaching so that the Technical Coaching Team can effectively support the Improvement Teams to implement their LDP+ Action Plans and monitor and evaluate their results. Members of this the Team also co-lead Shared Learning Sessions with the Master Facilitator.

Key Responsibilities of the Technical Coaching Team:

Technical Support:

- Agree on the priority health area, proven interventions, and indicators presented at the Stakeholder Alignment Meeting.
- Review national and regional standards and guidelines for proposed interventions.
- Provide technical materials and training in the priority health area, including standards and guidelines.

Coaching and Facilitation:

- Participate in each of the LDP+ workshops, the Results Presentation, and the Technical Coaching Team Meetings.
- Provide coaching to the Improvement Teams between each workshop to help monitor progress; and assist Improvement Teams to refine their Challenge Model and Action Plan.
- Support Improvement Teams and help to monitor progress throughout the implementation of the improvement project.
- Co-lead Shared Learning Sessions with the Master Facilitator.

Monitoring and Evaluation:

- Oversee M&E and help teams to accurately evaluate and report their results.
- Assure that data are correctly collected, recorded, collated, analyzed, and reported.
- Collect and review reporting formats and share reports with the LDP+ Local Coordinator and Governing Body.
- Build on the findings to help the Governing Body plan for scale up.

LDP+TIMELINE & DELIVERABLES

NOTE: Between each workshop, Coaches meet with their Improvement Teams to review progress and provide support.

LDP Champion

Stakeholder Alignment Meeting

Technical Coaching Team Meeting I

Workshop I

MONTH I

- Select priority health area, proven interventions, indicators, and geographic location to be proposed by Governing Body
- Design Stakeholder Alignment Meeting and invite health systems leaders to participate
- Gain commitment of key stakeholders
- As Governing Body, provide resources to support the LDP+ process
- Confirm priority health area, proven interventions, indicators, and geographic location
- Develop Governing Body's action plan

MONTH 2

- Coaches are oriented to their roles in LDP+. the M&E process, and to the steps of the Challenge Model
- Improvement Teams draft first 4 steps of Challenge Models, with an emphasis on measurable results
- Leadership Practice: Scanning

Technical Coaching Team Meeting 2

Workshop 2

Technical Coaching Team Meeting 3

Workshop 3

MONTH 3

- Coaches learn and practice skills to coach Improvement Teams around their challenge models
- Improvement Teams draft root cause analyses and action plans
- L&M Practices: Focusing, Planning and Organizing

MONTH 4

- Coaches learn and practice skills in M&E: collecting data and monitoring indicators
- They are oriented to reporting requirements and formats for the overall LDP+ process
- Improvement Teams draft reporting and evaluation forms
- L&M Practices: Monitoring & Evaluation, Implementing, Aligning and Mobilizing, and Inspiring

Results Presentation Stakeholders' Scale up Meeting

MONTHS 5-8

- Improvement Teams share success stories and prepare results presentations
- L&M Practices: Monitoring and Evaluation, Inspiring
- Improvement Teams present results to Governing Body, Technical Coaching Team, and other stakeholders
- Governing Body develops a strategy and plan for scaling up LDP+ and commits to provide resources for scale up

TEAM MEETING FORM

Meet between workshops, maybe more than once.

I.AGREE ON THE OBJECTIV	ES FOR THE MEETING
	LONG THE FIELD IN CO.
What do we want to accomplish during this meeting? (Set the time you will work on defining the objectives.)	
2. REPORT ON RESULTS	
What was our goal for the two weeks that have passed since the previous workshop?	
What did we accomplish? (Acknowledge our team for our work.)	
What obstacles are we facing and how will we overcome them?	
3. NEXT ACTIONS	
What is our goal for the next two weeks (before the next workshop)?	
List the activities we will do. List who will be responsible for each activity.	
4.TEAMWORK	
What is working well in our team?	
What do we need to do to improve?	

USING THE CHALLENGE MODEL

STEP I	Review your organizational mission and strategic priorities With your team, agree on a common understanding of your organization's mission and strategic priorities. This understanding will help shape your vision within the context of your organization's priorities.
STEP 2	Create a shared vision of the future With your team, imagine what you and others will see when your team has made its contribution to improvements in your organization's strategic priorities. This shared vision will inspire the team to face each new challenge.
STEP 3	Assess the current situation With your team, scan your internal and external environments within the context of your organization's priorities. Consider such factors as the prevalence of the health problem, government policies, and current interventions. This will help you form an accurate picture of the conditions that can affect your team's progress toward your shared vision.
STEP 4	Agree on one measurable result Based on your organization priorities and your current situation, define a measurable result that can be achieved within the time frame of this ICRC-LDP. This desired measurable result is what will drive your work together and allow you to monitor and evaluate your progress toward achieving it. Your team will most likely need to adjust the result as you gain more information about the current situation and the obstacles you need to overcome.
STEP 5	Identify the obstacles and their root causes Make a list of obstacles that you and your team will have to overcome to reach your stated result. Consider gender equity issues and four broad categories into which most obstacles fall: policies and procedures; providers; equipment, infrastructure, and supplies; clients and communities. Use a root cause analysis tool to make sure you are addressing the causes and not just the symptoms.
STEP 6	Define your key challenge State what your team plans to achieve (your measurable result) in light of the root causes of the obstacles you have identified. (It helps to begin your challenge statement with: "How will we?")
STEP 7	Develop an Action Plan Develop an Action Plan that lists the priority actions needed to meet your challenge. Include estimates of the human, material, and financial resources needed and the time line for implementing your actions.
STEP 8	Implement your plan, monitor progress, and evaluate results Work together as a team to implement the plan. Regularly monitor your progress toward your measurable result and, at the end, evaluate your result.

DEVELOPING **SMART** RESULTS

To meet the SMART criteria, results must be:

S SPECIFIC	The result is clear enough so that others can understand what it will look like when it is accomplished.	 Does your result have an indicator of what will change over time? Is your result limited to 1 to 2 indicators?
MEASURABLE	Progress towards the result can be measured using numbers, rates, proportions or percentages.	 Does the result state a baseline value for the indicator? Does it state a target value for the indicator? Is the indicator expressed in numbers as well as in percentages?
APPROPRIATE	ls the result aligned with the strategic priority of your organization and your team?	
REALISTIC	 Can your team achieve this result with your current activities and resources? 	
TIME-BOUND	Does your result have a start date and an end date?	

Example of a SMART result for an improvement project whose priority health area is preventing the spread of HIV & AIDS:

Between January and July 2012, the number of fully functioning voluntary counseling and testing sites in the district will increase by 50%, from 6 to 9.

By looking at the measurable result, you will see that it is Specific, Measurable, and Time-bound.

Start and end dates: Between January and July 2012 (Time-bound)

Indicator: the number of fully functioning voluntary counseling and testing sites in the district (Specific)

Percent, baseline, target: will increase by 50%, from 6 to 9. (Measurable)

By looking at data sources and discussing their situation, team members would be able to confirm that it was Appropriate and Realistic.

RESULTS LEVELS AND SAMPLE INDICATORS

Improvement Teams should define measurable results at the output or outcome level.

- An impact indicator requires more time and more interventions than a six- to eight-month project can achieve.
- Input and process indicators are too limited and activity-related to show a real public health result.

What is the difference between an output and an outcome indicator?

- An output indicator shows short-term results of activities—usually within one to six months. It can include changes in knowledge, short-term behaviors, goods or products created, amount of services provided, or the volume of work completed.
- An outcome indicator shows the medium-term result of activities—usually between six months and three years. Outcomes are changes in behaviors, practices, and benefits to the wellbeing of people as a result of inputs, processes (activities), and outputs.

RESULT LEVEL	INPUT	PROCESS (activities)	ОИТРИТ	OUTCOME	IMPACT (population)
WHAT TO MEASURE	Human and financial resources Supplies and equipment	 Meetings Developing curriculum Trainings Developing new systems Providing services 	# of people trained # of clients using services New management systems in use	Changes in knowledge and practices Improved services Reduced stock outs	Changes in disease rates, mortality rates, birth rates, fertility rates
EXAMPLE	Funding and staff for curriculum development and training	Training curriculum for health providers on HIV counseling & testing developed HIV counseling & testing training provided	# of health providers trained	# of antenatal clients receiving counseling and testing services who receive their HIV test results # of HIV positive antenatal clients receiving ART	% of infants born to HIV-positive mothers who are HIV-negative at birth

ELEMENTS OF A MONITORING AND EVALUATION PLAN

I.INDICATOR	Each indicator should be stated using clear terms that are easy to understand, and should measure only one thing. If there is more than one thing to measure in the indicator, it should be restated as separate indicators.
2. INDICATOR DEFINITION	Provide a detailed definition of the indicator and the terms used, to ensure that different people at different times would collect identical types of data for that indicator, and measure it the same way. For a quantitative indicator, include a numerator and denominator with the description of how the indicator measurement will be calculated.
3. BASELINE AND GOAL	Measure the value of each indicator before project activities begin and set an achievable goal for the indicator to reach by the end of the project. The baseline measurement is the starting point for tracking changes in the indicator(s) over the period of an Action Plan.
4. DATA SOURCE	Specify the data source for each indicator. Consider the pros and cons of each source (accuracy, availability, cost, etc.) to ensure access to the data. Examples of data sources include facility records, surveys, websites, published research, and health information systems (HIS).
5. DATA COLLECTION METHOD	Specify the method or approach for collecting data for each indicator. For primary data (data that teams collect themselves), note the type of instrument needed to gather the data (e.g., structured questionnaire, direct observation form, scale to weigh infants). For indicators based on secondary data (data from existing sources), give the method of calculating the indicator.
6. FREQUENCY OF DATA COLLECTION	Note the timing of data collection for each indicator. Depending on the indicator, this may be monthly, quarterly, annually, or less frequently. Baseline data are collected for each indicator before activities begin.
7. RESPONSIBILITY FOR COLLECTING DATA	Identify who is responsible for data collection. Responsibility should be assigned to a specific office, team, or individual.

NUMERATORS AND DENOMINATORS FOR INDICATORS

What are Numerators and Denominators?

The numerator and the denominator represent two groups of people, events, or documents that you

The numerator is a subgroup of the denominator. (An example is provided below.)

When you put the numerator over the denominator, you create a fraction (X/Y) that you can use to calculate percentages, proportions, and other rates to show how things are changing.

- The numerator is the actual number of people or events that exhibit a particular trait. Example: The number of women attending antenatal clinics in Makumba District who receive counseling and testing services.
- The denominator is the total number of possible people or events that exhibit that trait Example: The total number of women attending antenatal clinics in Makumba District.

The denominator you choose should:

- be relevant to the intervention you are implementing.
- include only units (e.g., people, clinics, households) that could be affected by your intervention.

How do you use numerators and denominators?

If you simply count the number of women who received HIV counseling and testing in the past 6 months, and find that the number is 280, it is difficult to know if that is a significant achievement.

But you can know if this is a significant achievement if you know that 300 women attended antenatal clinics in Makumba District in the 6 months. If you know that, then you know that 80% percent of those women received counseling and testing services.

(280 out of 300 women, or 280/300 = .80 = 80%).

If the total number of women attending antenatal clinics in Makumba District was 600, then only 40% of those women received counseling and testing services

(280 out of 600 women, or 280/600 = .40 = 40%).

The numerator remains the same (280), but the denominator (either 300 or 600 in these cases) provides information on the scope of the result.

As you can see, different denominators can have dramatic effects on the results!

	COMMON DATA SOURCES	
1	POLICY OR GOVERNMENTAL PROGRAM LEVEL	 Official documents and records (legislative and administrative documents) National budgets or other accounts Policy inquiries Websites
2	SERVICES LEVEL	 Facility records (service statistics, HMIS data, financial data) Inventories or facility assessment surveys Provider performance or competency assessments, training records, quality-of-care data Client visit registers
3	POPULATION LEVEL	 Government census Vital registration systems (birth and death certificates) Sentinel surveillance systems Household or individual surveys
4	INDIVIDUAL LEVEL	 Case surveillance for specific diseases Medical records Interview data (e.g., client exit interviews) Observation of provider-client interactions

SMART RESULT EXERCISE: THE MONAPO IMPROVEMENT TEAM

The Monapo Health Center Team has been chosen to take part in LDP+ for eight months, beginning in June 2013. During the first workshop, the team began to fill out its Challenge Model. Here is what the team wrote:

Priority Health Area: Family Planning

- Monapo Health Center Vision Statement: All women within a four-mile walk of Monapo Health Center will have access to convenient and comprehensive family planning services that offer all family planning methods.
- Current Situation: During the same eight-month period last year, an average of 50 new clients came for family planning services each month, a lower number than health centers in similar communities serve. Even when they live within four miles of Monapo Health Center, many women who walk there find that family planning services are not offered that day or that there is a stock out of commodities. Community health workers in the villages offer basic family planning supplies, but not long-term and permanent methods.
- Proposed Measurable Result: An increased number of new family planning users at Monapo Health Center—from 50 to 75—at the end of this project.

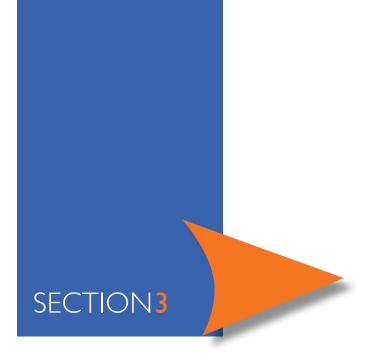
You have come to the health center to coach them during their first meeting after the workshop. You realize that their result does not meet all the SMART criteria, and you want to help them to make it SMARTer.

Go through the SMART Results handout, asking the questions under each criterion. Use what you know about Monapo and your relevant professional experience to suggest a SMART result for the Monapo Improvement Team.

Revised Measurable Result:	

EVALUATION FORM: TECHNICAL COACHING TEAM MEETING # I

Date: _	
Please materia	complete this evaluation form.We appreciate your assistance in helping us to improve the LDP+ als and other aspects of this program.Thank you.
1.	What did you learn in this Technical Coaching Team Meeting?
2.	How will what you learned help you fulfill your role as a member of the Technical Coaching Team?
3.	What feedback do you want to give to the LDP+ facilitators?



WORKSHOP I: SCANNING

AGENDA AND OBJECTIVES: WORKSHOP #1

PURPOSE

Introduce the LDP+ frameworks, concepts, and tools.

OBJECTIVES

- To introduce the program's timeline, objectives, and process
- To align participants' expectations with the LDP+ objectives
- To introduce the leading, managing, and governing practices and conceptual models
- To introduce the concept of work climate
- To draft a Challenge Model that will enable teams to launch their improvement project

SESSIONS

- Session I: Program Orientation and Overview
- Session 2: Overview of Leadership and Management Development
- Session 3: Work Climate
- Session 4: Personal Purpose and Vision
- Session 5: Creating a Vision of the Priority Health Area
- Session 6: The Challenge Model
- Session 7: Monitoring and Evaluation
- Session 8: The Leadership Practice of Scanning

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	day one	DAY TWO	DAY THREE
	Opening (15 min.)	Review (20 min.)	Review (30 min.)
AM	Session I: Program Overview and Orientation (I hr. I5 min.)	Session 5: Creating a Vision of the Priority Health Area (2 hr.)	Session 6 conclusion: The Challenge Model (1 hr. 45 min.)
	Session 2: Overview of Leadership, Management, and Governance Development (1 hr. 30 min.)	Session 6: The Challenge Model (45 min.)	
Lunci	h Break		
	Session 2 continued: Overview of Leadership, Management, and Governance Development (1 hr. 30 min.)	Session 6 continued: The Challenge Model (2 hr. 30 min.)	Session 7: Monitoring and Evaluation (1 hr. 30 min.)
PM	Session 3: Work Climate (30 min.)	Closing Reflection (30 min.)	Session 8: The Leadership Practice of Scanning (2 hr.)
	Session 4: Personal Purpose and Vision (1 hr.)		Workshop Evaluation (10 min.)
	Closing Reflection (10 min.)		

PREPARATIONS: MATERIALS

You will need to give each participant something to use to store workshop handouts, such as a plastic case, folder, or three-ring binder.

Copy the handouts before each session. The plan for each activity shows what you need to use for that activity. You can find all of the handouts in the Handout sections of this Guide or on LeaderNet in the Leadership Facilitators section, in Resources. Start at http://www.leadernet.org.

NOTE: LeaderNet is a global community of practice for managers who lead and LDP+ and Virtual Leadership Development Program (VLDP) facilitators. To use LeaderNet, first go to http://www.leadernet.org/ and register (there is no cost).

You will also need a variety of supplies for each session, for example, flipcharts, paper, and pencils. The required supplies are also listed with each session and each activity. Sometimes you will need to prepare flipcharts ahead of time.

Read all of the materials in advance of the meeting. Use the information provided on timing in the facilitators' notes to determine how much time to give participants to complete forms, work individually, in pairs, groups, etc.

REFLECTION AND REVIEW

Reflection. There is time for reflection at the end of each day so that participants can talk about what they learned and what seemed most important to them.

Review. Days 2 and 3 start with a review of the content from the day before. It has worked well to have a participant make a short, informal presentation summarizing what the group learned the previous day.

NOTE: Regular reflection is an important leadership practice. It enables people to have time to think about what they have learned and how to apply it.

EVALUATIONS

Workshop evaluation. To evaluate the workshop, copy and give out the workshop evaluation form and the Feedback for LDP+ Facilitator handouts. They are the last two pages of Workshop #1 handouts section of this Guide.

Progress evaluation. The success of the program is measured by evaluating the progress that the teams make toward their measurable results. To support this, the Technical Coaching Team should ensure that the teams continuously monitor their progress against their baseline using clear indicators.

BETWEEN WORKSHOPS #1 AND #2

Full team meetings. Participants hold meetings with the rest of their teams back at their work sites to report on what they learned in the workshop and to review the results of their scanning.

Coaching sessions. Members of the LDP+ Technical Coaching Team work with the teams between each workshop. In these meetings, they review progress and topics covered in the workshop as well as provide feedback and support to the teams as the teams formulate their challenges.

SUSTAINING THE LDP+

LDP+ is designed so that organizations can sustain it on their own, using their own resources. The Governing Body of LDP+ — people at other levels in the health system —support the teams to sustain the program. To sustain the LDP+, it needs to be scaled up to reach additional, broader audiences. This requires a plan for developing new facilitators and finding new resources. The Governing Body leads this process.



WORKSHOP I: DAY ONE

SESSION I: PROGRAM ORIENTATION AND OVERVIEW

Opening

- I.A Welcome, Expectations, and Ground Rules
- I.B Overview of LDP+ Program

SESSION 2: OVERVIEW OF LEADERSHIP, MANAGEMENT, AND **GOVERNANCE DEVELOPMENT**

- 2.A What do Leaders Do?
- 2.B Understanding Leading and Managing Practices
- 2.C Linking Improved Leading, Managing, and Governing to Improved Health Outcomes

— LUNCH BREAK —

2.D Applying Governing Practices

SESSION 3: WORK CLIMATE

3.A What is Workgroup Climate?

SESSION 4: PERSONAL PURPOSE AND VISION

- 4.A Personal Purpose—Why are We Here?
- 4.B Personal Vision

Closing

SESSION I. PROGRAM ORIENTATION & OVERVIEW

PURPOSE	Introduce the LDP+ frameworks, concepts, and tools.
OBJECTIVES	 To welcome participants, understand their expectations, and set ground rules
	To orient participants to the LDP+ agenda and timeline
	 To explain how leaders develop through challenge, feedback, and support
PREPARATIONS	 Read the facilitator notes for this session and practice leading each session.
	 Write your own notes to guide you as you are in front of the room.
	 Prepare copies of all handouts.
	 Prepare the required flipcharts.
	 Customize the LDP+ Overview, Timeline, and Agenda, as needed.
MATERIALS	□ Flipchart—easel and paper
	Таре
	Markers
	 Self-stick notes or note cards
	 Half sheets of paper
HANDOUTS	□ LDP+Workshop #1 Agenda and Objectives
	□ LDP+ Overview
	□ LDP+ Timeline
	☐ Leadership Development Triangle

Opening



15 minutes

Ask participants to sit together, as a team, with the other people from their work sites.

This is a time for administrative and logistical announcements.

TIP: A team is defined as a group of people who regularly work together to achieve a common goal.

I.A Welcome, Expectations, and Ground Rules

This exercise sets the tone for the LDP+ by welcoming the participants, laying out the program objectives, soliciting what participants hope to gain, and setting ground rules.

- **DURATION**
- 45 minutes
- **MATERIALS**
- □ Flipchart with LDP+ agenda and objectives
- □ Handout: LDP+ Agenda and Objectives
- Prepared flipchart with the question: If this program were extremely successful, what would you get from it?
- **PROCESS:**

STEP I. Welcome (15 minutes)

WELCOME everyone.

Introduce the facilitators and local authority and/or organizational sponsor(s).

To participants:

SAY: Please introduce yourself by saying your name and where you are from. We will go around the room.



DISTRIBUTE the handout LDP+ Agenda and Objectives. **REVIEW** the LDP+ objectives:

SAY: Participants in this program will learn how to:

- Lead and manage to enable others to face challenges and achieve results.
- Apply tools and processes for defining and addressing challenges.
- Produce measurable results that support the priority health area.
- Build a team climate that supports commitment to continuous improvement.

STEP 2. Expectation exercise (15 minutes)

SAY: If this workshop were extremely successful, what would you get from it?

> Take about five minutes to think about this and then write down your answers. When you are done, share your answers with the person next to you.

Speaking to the entire group (pairs stay together), ask each pair to give one idea. Ask someone to **RECORD** the ideas on a flipchart.

STEP 3. Establish ground rules (15 minutes)

To the entire group:

SAY: The word "dialogue" comes from the Greek words, "dia logos," which translates as "meaning flowing through the words."

> A dialogue is not a debate or a conversation in which we try to force our point of view on others.

It is a process to get to a higher level of shared understanding.

This program is a dialogue about the challenges your organization or facility is facing and the leading, managing, and governing practices that will be needed to meet those challenges.

SAY: Think of a time when you were in a group where conversation was difficult and it was hard to express your point of view freely.

ASK: What happened?

What stopped you from expressing yourself freely?

Write this down and share it with one person next to you.



Ask for some examples from the larger group of what stopped people from speaking.

SAY: Discuss this question at your table: "What can we ask of each other to make this an effective workshop?"

Take responses from the group—one idea only from each table—then go to the next table.

Continue until there are no more new ideas.

Ask someone to **WRITE** the responses on a flipchart.

Add your own requests to the participants' list.

Confirm agreement on the ground rules and POST the list on the wall. Be sure that the ground rules are posted throughout all workshops.

ASK: What will we do when ground rules are broken?

NOTE: Make sure the facilitators do not take on the responsibility of enforcing the ground rules. Remind the group that adherence to the ground rules is everyone's responsibility, because everyone agreed to them.



I.B Overview of LDP+ Program

This exercise shows participants how they will develop their leading, managing, and governing practices and achieve an important measurable result through the LDP+.

- **DURATION**
- 30 minutes
- **MATERIALS**
- Handouts: LDP+ Overview; LDP+ Timeline; Leadership Development Triangle
- Flipchart with blank pages
- **PROCESS:**

STEP I. Present the overview and timeline for the LDP+ (I5 minutes)

Use the **HANDOUTS**, *LDP+ Overview* and *LDP+ Timeline* to explain the structure, components, critical success factors, and timing of the LDP+.

Have participants discuss these handouts in their Improvement Teams.

- **ASK:** Does anyone have a question?
- STEP 2. Developing managers who lead through challenge, feedback, and support (15 minutes)
 - **SAY:** In the LDP+, you and your team will carry out an improvement project back at your work site.

This project will enable you and your team to produce a result over the next several months that is important to you.

This project will require new managing, leading, and governing practices.

Your team will use a tool called the Challenge Model to help you choose a challenge and develop a plan that leads to measurable results.

Discuss how the LDP+ uses the natural process of leadership development, which is facing challenges while receiving feedback and support.





DRAW the Leadership Development Triangle on a flipchart.

ASK: What happens if a person faces a challenge without receiving appropriate

feedback and support from others? (Could be overwhelmed.)

What is the result of giving people a challenge with too much feedback? (Might use the feedback and not their own ideas and initiative.)

What is the result of giving them too much support? (Might not feel the need to stretch themselves.)

Explain that leadership capacity develops by giving people challenges and then providing them with appropriate support and feedback as they address each challenge.

NOTE: LDP+ defines leading as:

"Mobilizing others to envision and realize a better future."

SAY: Facing one challenge after another is the way that human beings develop their strengths. However:

If we give them too much feedback, we frustrate them.

If we give them too much support, we spoil them and make them dependent.

When challenge, feedback, and support are in balance, they ensure a positive leadership development process.

SAY: In the LDP+:

- The challenge is your team's improvement project.
- Feedback is provided by the facilitators, your managers, and your coaches.
- Support is provided by your team members, your managers, and the facilitators.

HAND OUT the Leadership Development Triangle.

Close after asking if there are any questions.



SESSION 2. OVERVIEW OF LEADERSHIP AND MANAGEMENT DEVELOPMENT

PURPOSE	Introduce the Integrated Practices for High Performing Health Systems, and the Conceptual Model: Leading, Managing and Governing for Results
OBJECTIVES	To identify the eight leading and managing practices and how they link to achieving results. (The governing practices are covered in a later session.)
PREPARATIONS	Read the facilitator notes for this session.
	 Prepare copies of all handouts.
	Prepare the required flipcharts.
	Prepare nine flipchart pages, eight with one leading or managing practice written at the top of each page (e.g., scanning, focusing, etc.), and one with the heading, "other."
	 Post the flipchart pages around the room and cover the headings.
MATERIALS	□ Flipchart—easel and paper
	Таре
	Markers
	Self-stick notes or note cards
	Half sheets of paper
HANDOUTS	☐ Integrated Practices for High Performing Health Systems
	 Conceptual Model: Leading, Managing and Governing for Results
	 Governing Practices at the Health Facility Level
	□ Tool: Community Scorecards
	□ Tool: Dashboard

SESSION

2.A What Do Leaders Do?

This exercise enables participants to use their own experience of leading and managing to understand the leading and managing practices. (The governing practices are covered in a later session.)



30 minutes



- Set up the room with a separate table for each team.
- Flipchart with blank pages
- □ Prepared flipchart (covered) with the definition: Managers who lead enable others to face challenges and achieve results.
- Nine prepared flipcharts posted around the room, but covered (folded over). Each should have a heading, as follows: Scanning, Focusing, Aligning and Mobilizing, Inspiring, Planning, Organizing, Implementing, Monitoring and Evaluating, and Other
- Half sheets of paper
- Self-stick note cards

PROCESS:

STEP I. Settling in (5 minutes)

Ask participants to sit with their work teams.

STEP 2. Introduce leading and managing (10 minutes)

SAY: We are going to explore what it means to lead and manage.

When you hear the word "leader," whom do you think of?

Take responses from some participants.

TIP: Ask "Whom do you think of?" Do not ask, "What do you think of?" Repeat the instructions if participants start to give you definitions of leadership. You want the participants to name people.



To explore leadership:

SAY:

When we hear the word "leader," do we think of "great men" or individuals in positions of great authority who influence many people?

Do we think of people who have special "charismatic" qualities and who are able to persuade and influence people through their personalities?

Leading through a powerful position or appealing personality is not the type of leadership that we will explore in this program.

We are going to talk about leading as an activity or practice in which people at every level of an organization can engage.

TIP: The word "practice" has many meanings—practice the guitar, a medical practice, and so on. "Practice" in organizations generally refers to a set of behaviors, techniques, procedures, and processes. "Leadership practices" refers to all these things in relation to how people lead.

SHOW the flipchart you prepared with this definition: Managers who lead enable others to face challenges and achieve results.

ASK: Is this something that managers and staff at every level of your organization/ facility need to be able to do?

Answers will probably confirm the need for the ability to face challenges and achieve results at every level of an organization. Be sure it is clear that everyone, not just managers, needs to lead.

Start a discussion.

SAY: Now we are going to do some practical research about what people need to do to be effective at leading.

To do this research, we will look at people who are excellent leaders.

This time we are going to take examples only of people you know personally so we can learn from what they do.

STEP 3. Individual reflection on leading (5 minutes)

SAY: Think of someone you know who leads well and is good at mobilizing others to envision and realize a better future.

> This has to be someone you know personally, not a famous person. It may be someone from your past, with whom you do not have regular contact any more.

Consider what exactly this person does or did to be effective in leading others.

SAY: Write what this person does on one of the sheets of paper at your table. If you have more than one item, write it on a separate piece of paper.

> Be as specific as you can. For example, write "asks what is important to me," rather than "communicates well."

NOTE: Remind participants to think about what the person was doing, rather than the result achieved. Examples of results are: "Although she was poor, she was able to educate all of us," or "He raised enough money from donors to support our project." Such examples would require further probing to uncover exactly what the leader did that enabled him or her to achieve the result.

Ask participants to pair up and share their reflections with one another.

In plenary, ask one or two participants to SHARE their stories with the whole group about their experiences with effective leaders.



STEP 4. Improvement Teams' discussion of leadership practices (10 minutes)

In their Improvement Teams, each person should share what he or she wrote with the other group members.

- Have each group **PLACE** the pieces of paper with similar actions or themes together. They should then **REWRITE** each action or theme as a practice.
- Everyone in the group should agree that all these practices are characteristic of people who lead well.
- Have the groups **WRITE** each of the practices on a self-stick note card.

OUTCOME:

Each table will write a set of note cards with one leadership practice on each card.

MOVE DIRECTLY TO THE NEXT EXERCISE, "D. Understanding Leading and Managing Practices," in which teams will have a chance to match the cards to specific leading and managing practices.

NOTE: It is important to visit each team to make sure people are not writing characteristics such as "integrity" or "motivation." Coach them to write specific practices with verbs in them, such as "listens to people at all levels," or "gives feedback when needed."

2.B Understanding Leading and Managing Practices

Through this activity, participants will gain a shared understanding that leading and managing practices are carried out at all levels in an organization.

- **DURATION**
 - 30 minutes
- **MATERIALS**
- □ Nine flipcharts, as noted in the previous activity
- Handouts: Integrated Practices for High Performing Health Systems; Conceptual Model: Leading, Managing and Governing for Results
- **PROCESS:**

STEP I. Explain the practices (10 minutes)

In the large group, **UNCOVER** the headings on the flipchart pages with the four leading practices that are posted around the room.

SAY: There are four leading practices. They are scanning, focusing, aligning and mobilizing, and inspiring.

Let's look at each one.

Define each leading practice. Ask for examples and, if necessary, provide examples yourself.

- Scanning. Identifying internal and external conditions that influence desired results.
- Focusing. Directing attention and efforts to priority challenges and actions.
- Aligning and mobilizing. Uniting and motivating internal and external stakeholders to commit resources to support desired results.
- Inspiring. Creating a climate of commitment and continuous improvement.

After reviewing the leading practices, **UNCOVER** the remaining flipcharts.

SAY: In addition to the leading practices, there are four managing practices. They are planning, organizing, implementing, and monitoring and evaluating.

Now let's look at each of the managing practices.



Define each managing practice. Ask for examples and, if necessary, provide examples yourself.

- Planning. Preparing a set of activities, timeline, and accountabilities to meet goals.
- Organizing. Developing structures, systems, and processes to support the plan of action.
- Implementing. Carrying out and adapting the plan of action while coordinating related activities.
- Monitoring and evaluating. Observing, examining, and assessing progress.

STEP 2. Validate the practices (15 minutes)

SAY: Everyone please stand up with your note cards from the previous exercise. Stick or tape each note card on the flipchart page that best describes the practice you identified.

> Use the flipchart marked "Other" for practices that do not appear to fit under any of the other eight headings.

After all the note cards are posted, **READ ALOUD** the practices on each flipchart. Invite people to WALK around the room with you as you discuss each flipchart.

Then check those on the "Other" flipchart and see if they fit on one of the other flipcharts.

Discuss how some items can fit under more than one practice.

NOTE: Ideally, the "other" flipchart will be empty after this step is completed.

STEP 3. Review the models (5 minutes)

HAND OUT copies of the Conceptual Model: Leading, Managing and Governing for Results, and the Integrated Practices for High Performing Health Systems.

SAY: These models and their set of practices are the result of research conducted with managers who lead well—similar to the discussion you have just had.

> Review the eight leading and managing practices in the Integrated Practices handout. Pick one that is an area of strength for you. Also, pick an area in which you need to improve.



After you make your choices, share them with another person for a few minutes.

NOTE: By presenting the Integrated Practices and Conceptual Model after the teams create their key practices, you affirm the team members' experiences of good leading and managing practices.





2.C Linking Improved Leading, Managing, and Governing to Improved Health Outcomes

This exercise introduces participants to the Conceptual Model: Leading, Managing and Governing for Results, which demonstrates the link between managers' practices and their results in health care.



30 minutes



□ Handout: Conceptual Model: Leading, Managing and Governing for Results (distributed in previous activity)

PROCESS:

STEP I. Introduce the Conceptual Model: Leading, Managing and Governing for Results (10 minutes)

In the large group:

SAY:

At the core of developing health care managers' capacity is this belief: The proof of good leadership lies in achieving measurable improvements in health outcomes.

The LDP+ focuses on improving health outcomes through better delivery of health services.

REFER TO the handout, Conceptual Model: Leading, Managing and Governing for Results.

SAY: Earlier today we went deep into the leading and managing practices. In the next workshop session, we will dive deeply into the governing practices.

Applying the leading, managing, and governing practices listed on the left of the model can bring about changes in organizational effectiveness.

STEP 2. Reflections on the model (20 minutes)

SAY: At your table, use the Conceptual Model to talk about your work.

Discuss how the model shows the relationships among the practices, the three circles in the middle, and the effectiveness of services and health outcomes on the right.

Be prepared to give a brief summary of your team's discussion when asked.



NOTE: By asking people in the Improvement Teams to reflect on the model, you help them relate it to their own experiences and make it their own.

CIRCULATE while the teams are discussing, listen so that you will know whether everyone understands the model. Then ask everyone to come back to the large group.

Who would like to share what they discussed? **ASK:**





2.D Applying Governing Practices

Through this activity, participants will understand the governing practices and how they apply to the responsibilities of the Improvement Teams.



I hour 30 minutes



- Prepared flipchart with the statement: Governance is setting strategic direction, establishing policy, raising and allocating resources, and overseeing the achievement of results in a way that is responsive to the people an organization serves.
- Handouts: Conceptual Model: Leading, Managing and Governing for Results; Integrated Practices for High Performing Health Systems; Governing Practices at the Health Facility Level; Tool: Community Scorecards; Tool: Dashboard

PROCESS:

STEP I. Put governing in context (15 minutes)

SAY: Earlier we explored the leading and managing practices. Now we will explore the third element—governing practices.

Emphasize these points:

- There is some overlap among leading, managing, and governing practices. Nevertheless, all three elements are essential to achieving a measurable result.
- Effective leadership is a prerequisite for effective governance and effective management.

STEP 2. Apply practices of good governance (60 minutes)

REFER back to the handout, Integrated Practices for High Performing Health Systems, and briefly go over each of the four governing practices.

ASK: How do these practices apply in your own workplaces?

DIVIDE participants into their Improvement Teams and assign one practice on the handout to each team.



SAY: Read the description of the governing practice assigned to your team.

> On a piece of flipchart paper, list specific activities related to this practice that your team can carry out to support your LDP+ improvement project.

In plenary, ask each team to briefly state their assigned governing practice and describe their ideas for ways in which they can apply that practice to support their improvement project in the LDP+.

SAY: You have come up with some excellent examples of how your teams can apply the four governing practices at your work sites.

> Here is a handout about how governing practices apply at the health facility level. It includes some of your ideas and others that health facility staff in many countries have found useful.

It can be a good reference for your teams as you move forward on your improvement projects.

DISTRIBUTE the handout, Governing Practices at the Health Facility Level.

POINT OUT the broad definitions and goals in the left-hand column, which apply to working groups at all levels.

Bring participants' ATTENTION to the second and third columns – actions and tools specific to facility-based teams like theirs.

Also **REFER** participants to two handouts that can be used at the Service Delivery Level to improve governing practices: Community Scorecard and Dashboard.

STEP 3. Focus on governance (15 minutes)

SHOW the prepared flipchart with the statement: "Governance is..."

ASK: What does good governance look like at the Health Facility Level?

Have participants discuss in pairs and share their ideas in plenary.

SESSION 3. WORK CLIMATE

PURPOSE	Introduce the concept of workgroup climate.
OBJECTIVES	Participants will reflect on their own experience of of what makes an effective work climate and apply this learning to their current work team.
PREPARATIONS	 Read the facilitator notes for this session.
	 Prepare copies of all handouts.
	Prepare the required flipcharts.
MATERIALS	□ Flipchart—easel and paper
	Таре
	Colored markers
HANDOUTS	None

3.A What is Workgroup Climate?

This exercise introduces the concept of workgroup climate.



30 minutes



- Prepared flipchart with these two questions:
 - Why do you think the workgroup was unproductive or unsuccessful?
 - ➤ What were your feelings about the environment of that workgroup?
- Prepared flipchart with these two questions:
 - Why do you think the workgroup was productive or successful?
 - ➤ What were your feelings about the environment of that workgroup?
- Prepared (covered) flipchart with these statements:
 - Workgroup climate is what it feels like to work in an organization.
 - Climate affects people's motivation and behavior.
 - Many factors (for example, communication, structure, policies) combine to create workgroup climate.
 - The most important factor is a manager's actions.

PROCESS:

STEP I. Settling in after the break (5 minutes)

Ask participants to sit in their work teams.

STEP 2. Define workgroup climate (10 minutes)

In the large group:

SAY: Think of a time when you were part of a workgroup that was not productive or was not successful. What was it like to be a member of that workgroup?

Guide a discussion using the prepared flipchart with the questions about an unproductive workgroup climate.



ASK: Why do you think the workgroup was unproductive or unsuccessful?

What were your feelings about the environment of that workgroup?

WRITE the words people use on the flipchart.

SAY: Now think of a time when you were a member of a workgroup that was productive and successful in achieving results. What was it like to be a member of that workgroup?

PUT the second flipchart with the questions in front of the room.

ASK: Why do you think that workgroup was able to be productive or successful? What were your feelings about the environment of that workgroup?

Discuss one question at a time and **WRITE** the words people use on this flipchart. Now both the negative and positive responses are in view.

ASK: What do we need to do to create a positive work climate?

After discussing this question, **UNCOVER** the prepared flipchart with the definition of work climate.

STEP 3. In teams: Explore behaviors that contribute to a positive or a negative workgroup climate (15 minutes)

ASK: How do leading, managing and governing well contribute to better climate?

What do you personally do to contribute to a positive climate in your team?

SAY: In your team, talk about your team's workgroup climate and actions you can take to improve it.

In plenary: Discuss the actions the teams could take to improve work climate.

NOTE: This question allows you to check whether participants see how the leading, managing, and governing practices contribute both directly and indirectly to better services. Participants will now understand they have some control over these practices as they apply them in their daily work.

SESSION 4. PERSONAL PURPOSE AND VISION

PURPOSE	Introduce participants to the concepts of purpose and vision as preparation for using the Challenge Model.
OBJECTIVES	To articulate a personal purposeTo create a personal vision
PREPARATIONS	Read and practice the facilitator notes for this session.Prepare the required flipcharts.
MATERIALS	 Flipchart—easel and paper Tape Colored markers Crayons, bright colored pencils, or felt pens
HANDOUTS	None





4.A Personal Purpose—Why Are We Here?

This brief exercise presents the concept of purpose so that participants may explore and apply it to their lives and their organization/facility.

DURATION 20 minutes

MATERIALS None

PROCESS:

STEP 1. Personal purpose (20 minutes)

SAY: Each of us brings a contribution.

> We know that when we are present, something unique is brought to the situation.

For example, some people bring humor, others bring order, and some bring clarity.

Think for a minute about a time when you felt you were really contributing. What did you bring to the situation?

Take a minute and write that down. Next, use what you wrote to draft a purpose statement for yourself.

SAY: Form pairs and share what you wrote with one another.

ASK: Who would like to share their purpose?

NOTE: Be aware that personal purpose statements are sometimes expressed in very general terms. Inquire to see if people can be more specific. For example, if a participant says, "I am here to serve humanity," probe by asking, "In what way? Do you bring patience and understanding? Do you bring your organizing skills?"

ASK: Why is it important to have a purpose?

Does it give you clarity about what to do and where to spend your energy?

Being clear about your purpose helps you to focus.

4.B Personal Vision

This exercise helps participants imagine the future and refine their personal purpose.

- **DURATION**
- 40 minutes
- **MATERIALS**
- □ Prepared flipchart with the statements:
 - ➤ A vision is a picture we create in our minds of a desirable future toward which we can begin to act.
 - Visioning enables us to play an active role in creating the future
- Writing paper or notecards

PROCESS:

Introduction (10 minutes)

SAY: Humans have a wonderful ability to create things in our minds, to dream, and to imagine the future.

Trees and dogs can't do this.

Unfortunately, people can misuse this capacity by imagining the worst possible outcomes.

Let us instead use our minds to imagine a better, more pleasing future.

Most good outcomes in the world were first imagined by someone.

In order to play a role in creating the future, you must first imagine what you want to happen.

READ from the flipchart:

SAY: A vision is a picture we create in our mind of a desirable future toward which we can begin to act.

Visioning enables us to play an active role in creating the future.



STEP 2. Visualization exercise (20 minutes)

SAY: Relax and think about yourself two years from now.

> Imagine what you most want. Nothing will get in your way or stop you. If anything were possible, what would you really want to see?

You can close your eyes if it helps you to visualize.

NOTE: Speak slowly and carefully—allow time for participants to silently reflect on each of these questions.

SAY: Think about your health and fitness.

Visualize yourself as you most want to see yourself.

What do you see yourself doing or feeling?

[Pause]

SAY: Think about one particular relationship.

What would you most like it to be?

Imagine a picture of yourself in this relationship the way you ideally want it to be.

[Pause]

SAY: Now think about your work and what you most want to contribute in your work.

Imagine yourself doing work that you love.

Whom are you serving?

What are you doing?

Create this picture in your mind.

Pause for a while to give people a chance to develop this vision.

SAY: Now slowly come back to the present.

Open your eyes.



Take a piece of paper and write one sentence about each of the three areas you imagined: health, relationship, and work.

Write each vision in the present tense—see yourself actually doing something, for example, "I am playing with my son, and we are laughing together."

Ask participants to **PICK** a partner for paired sharing of their visions.

They should speak in the present tense. WRITE on a flipchart "I am ...," "I have ...," and so on to give examples.

The listener should listen only—no comments!

After two minutes, the pair of partners should switch roles.

Large group discussion to debrief (10 minutes) STEP 3.

ASK: What was it like to listen to another person telling you what he or she would like to create?

> What was it like to tell another person what you would like to create? Was it inspiring? Was it embarrassing?

Was it hard or easy to share your vision?

Did you enjoy hearing others' visions?

How can we take time to hear each other's visions more often?

NOTE: Usually people find it inspiring to both speak and listen, but occasionally people have other responses.



Closing



10 minutes

ASK: What did you learn today? What stands out for you?

SAY: Each of you should take a few minutes to write down your answers.

When you are done, discuss your answers with a person next to you.

After about 5 minutes, addressing the entire group:

SAY: Would each pair please share one of your answers with the group? We will go around the room.

Continue to hear pairs' answers until there are no more.

Ask a participant to be prepared to review what he or she learned in the Day One sessions at the start of Day Two.



WORKSHOP I: DAY T

SESSION 5: CREATING A VISION OF THE PRIORITY HEALTH AREA

Review

- 5.A Exploring the Priority Health Area
- 5.B Shared Vision of the Priority Health Area—in a Picture

SESSION 6: THE CHALLENGE MODEL

6.A Distinguishing Challenges from Problems

— LUNCH BREAK —

- 6.B Introduction to the Challenge Model
- 6.C From Personal Vision to Action—Using the Challenge Model
- 6.D Analyzing the Current Situation
- 6.E Developing a Measurable Result

Closing





SESSION 5. CREATING A VISION OF THE PRIORITY HEALTH AREA

PURPOSE	To inspire teams and gain their commitment to a vision for the priority health area
OBJECTIVE	■ To create a shared vision for the priority health area
PREPARATIONS	Read through the facilitator notes for this session.Prepare the required flipcharts.
MATERIALS	Flipchart—easel and paperTapeColored markers
HANDOUTS	None



DURATION

20 minutes

Ask participants to sit in their work teams and discuss what they learned yesterday.

SAY: Now we will hear from a participant about what we learned yesterday.

NOTE: When participants speak to the entire group, it provides an opportunity for them to begin seeing themselves in the facilitator role.

5.A Exploring the Priority Health Area

Focus the Improvement Teams on a common priority health area for the LDP+.



60 minutes



- Prepared flipchart with national data and, as much as possible, regional and local data on the priority health area selected for the LDP+. Include:
 - prevalence of the health conditions or diseases in this health area
 - > government policies in this health area
 - ➤ 2–3 proven health interventions that the government is promoting
 - ➤ 2-3 national/regional indicators

PROCESS:

STEP I. Present data on the priority health area (30 minutes)

SHOW the flipchart with the priority health area that has been selected as the focus for the LDP+ and explain the reasons for the selection.

OR: Ask the LDP+ Champion or a member of the Technical Coaching Team to share the flipcharts with the national and/or regional data on prevalence, policies, interventions, and indicators regarding the health area.



STEP 2. Discuss the local situation (30 minutes)

ASK:

In what ways do you think the situation in your [district/region] is similar to the national data you have just seen?

In what ways do you think it is different?

Draw on the knowledge of the Champion, members of the Technical Coaching Team, and other informed participants to guide the discussion.

If available, use prepared flipcharts with local data to add to the discussion.

5.B Shared Vision of the Priority Health Area—In a Picture

This exercise guides teams through the process of creating a shared vision using images and pictures rather than words. The drawing helps people connect with what is personally meaningful to them about the priority health area.

- DURATION
- 60 minutes
- **MATERIALS**
- □ Flipchart for each team
- Assortment of colored markers or crayons for each table
- Flipchart for the facilitator
- **PROCESS:**
 - STEP I. Individually create a picture of a desired future state for the priority health area (10 minutes)
 - **SAY:** This is a vision created by a team from a rural health unit in Afghanistan that was working to improve child health:

"We see healthy children walking to school on safe roads..."

SAY: Now you are going to dream about the future of your organization or facility. Think about your organization two years from now. Imagine that you have overcome all problems and are achieving what you want in the priority health area.

Individually, make a sketch of the image that comes to mind and that represents achievements in your priority health area.

NOTE: Assure people that this is not a drawing contest and that stick figures are fine. Explain that the reason you ask them to draw a picture, rather than use words, is to make sure the vision starts as something they can see.

STEP 2. Share drawings with other team members (5 minutes)

Ask the participants to show and explain their images with other members of their team.



STEP 3. Prepare one drawing per team (20 minutes)

Ask each team to PREPARE one large drawing (flipchart size) that captures the collective dream of the team members.

This process encourages participants to contribute elements that are important to them and leave out elements they do not consider as important.

STEP 4. Present team drawings (15 minutes)

Ask each team to **PRESENT** its large drawing to the whole group.

If necessary, have the team clarify parts of the drawing that are not clear. The drawings can be added to and altered at any time.

While the teams present their drawings, ask a participant to WRITE a summary of the elements and concepts shown in the drawings on a flipchart.

STEP 5. Review the elements and concepts represented in the drawings (10 minutes)

In the large group, review the elements and concepts that were recorded.

ASK: Is this what we most hope to accomplish in the priority health area?

After the discussion, have each team **DRAFT** an inspiring vision statement based on its drawing.

SESSION 6.THE CHALLENGE MODEL

PURPOSE	Introduce and apply the Challenge Model.
OBJECTIVE	 To differentiate between a challenge and a problem To understand what is within one's control and influence and what is not To formulate a SMART result
	To formulate a SMART result
PREPARATIONS	 Read and practice the facilitator notes for this session. Prepare copies of all handouts. Prepare the required flipcharts.
	 Work through the Challenge Model on a personal example with one of your co-facilitators to make sure you master the process.
	 Prepare a flipchart with a large Challenge Model drawn on it.
MATERIALS	□ Flipchart—easel and paper
	□ Таре
	Colored markers
HANDOUTS	□ Using the Challenge Model
	☐ The Challenge Model
	 Developing SMART Results
	 Elements of a Monitoring and Evaluation Plan
	□ Common Data Sources
	 Numerators and Denominators for Indicators





6.A Distinguishing Challenges from Problems

This exercise explores participants' positive experiences facing challenges.



45 minutes

- **MATERIALS**
- Prepared (covered) flipchart with the statement:
 - ➤ A problem is "out there" and is often blamed on external forces. A challenge includes a result that you care about and are committed to owning and taking on.

PROCESS:

STEP I. What is a challenge? (15 minutes)

In the large group:

SAY:

Think of something that you have accomplished that required you to overcome big obstacles and that you are proud of.

Turn to your neighbor. Tell him or her your story.

Partners, listen without asking questions.

After you are done, switch roles.

In the large group, ask for some examples.

COLLECT a few comments.

STEP 2. What does it take to face a challenge? (20 minutes)

SAY:

With your team, discuss what you learned from listening to these stories—including your own—about what it takes to face a challenge and overcome obstacles.

Write a list.

Going around the room, ask each team to give you one item from their list. (An example might be "persistence and hard work.")

RECORD the items on a flipchart.

Continue going around the room until all items have been collected.



STEP 3. What is the difference between a problem and a challenge? (10 minutes)

ASK: With your team, discuss what you think is the difference between a problem and a challenge.

After you listen to some ideas from each team, REVEAL the flipchart.

SAY: A problem is "out there" and is often blamed on external forces. A challenge includes a result that you care about and are committed to owning and taking on.

Check for understanding by asking whether the difference is clear.

Encourage participants to think about whether problems they identify can be challenges they are willing to own and use to practice their leading, managing, and governing skills.





6.B Introduction to the Challenge Model

This exercise presents participants with a brief overview of the Challenge Model.

- **DURATION** 15 minutes
- **MATERIALS** Prepared flipchart with the Challenge Model drawn on it
 - Handout: Using the Challenge Model
- **PROCESS:**

STEP 1. Introduce the handout (5 minutes)

HAND OUT copies of Using the Challenge Model.

SAY: This handout explains the steps in the Challenge Model.

> You will begin to fill out the model in this workshop, then work on it with your full work team after the workshop, work on it some more during Workshop #2, and complete it at your work site with your whole team after Workshop #2.

- Introduce the steps to filling out the Challenge Model STEP 2. (10 minutes)
 - SAY: The Challenge Model helps you to move from vision to action. It helps you make a careful diagnosis of where you want to go and where you currently are before you decide on a plan of action. In order to successfully complete a Challenge Model, you will need to use all of the leading and managing practices.

NOTE: To walk the participants through the steps of using the Challenge Model, point out its parts, one by one, on the flipchart.

POINT to the priority health area at the top of the Challenge Model.

SAY: In Step 1, you will work in your team to review the priority health area and indicators that we have already discussed.



POINT to the vision "cloud."

SAY: In Step 2, your team will write a statement that represents your shared vision of the future in your priority health area.

POINT to the current situation.

SAY: In Step 3, your team will assess the current situation in relationship to the priority health area and indicators by scanning your internal and external environments.

You will consider positive and negative factors in the environment that can affect your ability to move towards your vision and to contribute to the priority health area indicators.

POINT to the measurable result.

SAY: In Step 4, your team will agree on one result that will move you closer to your shared vision and to improved indicators for the priority health area.

This result will be what your team commits to achieving in the next six to eight months. It should be a "stretch" for your team.

You will choose one or two key indicators and track those indicators. This is how you will monitor progress toward your measurable result and evaluate your achievements at the end of your LDP+ improvement project.

POINT to the obstacles and root causes.

SAY: In Step 5, your team will identify the obstacles that you have to overcome to reach your result.

Your team will use tools to analyze the root, or underlying, causes of these obstacles so that you can address them.

POINT to the challenge and priority actions.

SAY: In Step 6, your team will frame your challenge and select priority actions.

You will develop a written statement about your challenge, indicating the result you plan to achieve in light of the obstacles you will face.

Your team will then select priority actions or interventions to address the root causes.

POINT to the Action Plan.

SAY: In Step 7, your team will develop an Action Plan.

This plan will include the human, material, and financial resources needed to implement your priority actions. It will also include a timeline for implementing the team's actions.



Finally, the plan will include a description of how the team will monitor progress toward your result.

All the actions in your plan need to be ones you can implement at your level of authority.

SAY: In Step 8, your team will implement the Action Plan, monitor your progress, and evaluate your results.

> Monitoring your progress will help you adjust your plan as needed to keep moving toward your intended result.

Evaluating your results will help you look back at positive and negative factors in meeting your challenge. And it will help you use your learning to meet future challenges in this and other priority health areas.

6.C From Personal Vision to Action — Using the Challenge Model

This exercises helps participants learn to use the Challenge Model by applying it to a personal vision.

- **DURATION** 30 minutes
- MATERIALS

 Handout: Challenge Model

 Prepared flipchart with seven points, see Step I below
- **PROCESS:**

STEP I. Demonstrate how to fill out the Challenge Model (10 minutes)

HAND OUT copies of the *Challenge Model*. (Participants will have the handout, *Using the Challenge Model*, from the previous exercise.)

Follow these steps, using your own personal vision or an example.

SAY:

- 1. Review your personal purpose and write it at the top of the Challenge Model.
- 2. Next, look at your personal vision. Select one area to focus on.
- 3. Write your current situation in relationship to that vision.
- 4. Pick one measurable result that would help move you from your current situation to your vision. The result you pick should be possible to reach in the next three to six months.
- 5. What is an obstacle to achieving this result? What is the root cause of this obstacle?
- 6. State the challenge in a question at the bottom of the model.
- 7. What one action can you take to move past this obstacle?

STEP 2. Complete the Challenge Model based on personal visions (20 minutes)

Ask participants to **FILL IN** and explain their Challenge Models to someone else.

In the large group, ask for a few volunteers to SHARE their Challenge Models.





6.D Analyzing the Current Situation

In this exercise, teams develop an initial, detailed description of the current situation in relationship to the key indicators for the priority health area. This will help them choose the right measurable result.



30 minutes



- Prepared flipchart with the Challenge Model drawn on it
- Flipchart with the priority health area indicators.
- Flipchart paper for the Improvement Teams.



STEP I. Describe the current situation (20 minutes)

POINT OUT the "Current Situation" on the Challenge Model flipchart.

Ask participants to look at the flipchart with the priority health area indicators and agree on one indicator that they think will be important for their team to focus on.

Have participants work in their Improvement Teams.

SAY:

With your team, consider the indicator that you have agreed on for the priority health area.

Together, consider the positive and negative factors that could make it easier or harder for your Improvement Team to contribute to that indicator.

Write your ideas on flipcharts, separating them into positive and negative factors.

NOTE: Suggest that the teams look at factors such as organizational and personal needs, concerns, time available, and strengths and weaknesses of the team. They might also look at external factors such as community priorities, human and financial resources, and government policies and laws.



SAY: You may not know all the details without doing more scanning to collect missing data or to check the truth of your assumptions. But you can use your combined experience and knowledge to give a reasonably accurate picture of the current situation. Part of your homework between workshops #1 and #2 is to collect accurate data related to your baseline.

NOTE: You can remind the participants that these are only examples. Encourage them to come up with other factors that could have an effect on achieving the measurable result.

STEP 2. Share and learn (10 minutes)

Invite each team to come to the front and PRESENT their work.





6.E Developing a Measurable Result

Participants use what they have learned about their current situation to select a result for the LDP+ that is SMART: Specific, Measurable, Appropriate, Realistic, and Time-bound.



I hour 30 minutes



- Handouts: Developing SMART Results; Elements of a Monitoring and Evaluation Plan; Common Data Sources
- Prepared flipcharts:
 - > Challenge Model
 - Priority health area and 2–3 indicators
 - Statement: An indicator is a marker of change over time that can be measured.
- Blank flipchart

PROCESS:

STEP I. Propose measurable results for this LDP+ (10 minutes)

POINT OUT the "Current Situation" and "Measurable Result" areas on the Challenge Model flipchart.

Then **POINT OUT** the indicators from the presentation on the priority health area.

ASK:

Given the current situation you just described, what might be a result that would demonstrate progress toward one of these indicators?

It's very important that the result can be measured. You need to be able to know for sure that you are making progress.

Have teams brainstorm possible results they would like to see in their work.

NOTE: People will often answer by describing an activity (for example, to train, to improve, to collect). Emphasize that a result is not an action or activity, but refers to the outcome of the activity. See the example on page 2 of the handout, Developing SMART Results.

STEP 2. Introduce SMART criteria (20 minutes)

SAY: There are five criteria that are essential to an LDP+ result that a team can achieve and measure. The result must be SMART: Specific, Measurable, Appropriate, Realistic, and Time-bound.

DISTRIBUTE the handout, Developing SMART Results.

Review the S, M, A, R, and T of SMART criteria and POINT OUT the example of a SMART result on page 2 of the handout.

Ask participants to work in their Improvement Teams to select a result that they would like to achieve.

SAY: Now that you have selected a result, we will go through the SMART criteria on the handout one by one.

As you do this, revise the result as much as is necessary to meet each criterion.

Be ready to explain your revisions at the end of this activity.

Introduce each criterion as described below. The teams then work on one criterion at a time and revise their results as they go along.

STEP 3. Make your result specific (S) with an indicator (60 minutes)

SAY: In order to be specific, the result must contain an indicator.

ASK: What is an indicator?

Take some responses and acknowledge participants' definitions.

READ the definition of an indicator from the flipchart: An indicator is....

SAY: An indicator is like a road sign – a milestone along a road.

> When we measure the indicator, it shows whether we are on the right road, how far we have gone, and how far we still have to go to reach our destination (our measurable result).

SAY: You can measure most indicators directly through sight, verbal communication, and/or writing.

> You need to ask yourself: "What can I see, hear, or read that would indicate that the desired result has been achieved?"

Further explain indicators with a common example.

ASK: Can you think of an indicator that nurses and doctors commonly use?



Acknowledge participants' suggestions. If no one has mentioned body temperature, **PROPOSE** it as another example.

SAY: If someone has a high temperature or fever, his or her temperature is an indicator that the person is sick.

If the fever goes up, we know the patient is getting even sicker.

If it goes down, we know the patient is getting better.

Temperature is an indicator of someone's state of health.

ASK: How do we measure this indicator?

Take some responses. "Thermometer" should be one of the responses.

SAY: The thermometer is the instrument or tool we use to measure temperature.

REFER to the prepared flipchart with the priority health area indicators.

SAY: For your SMART result, you will select an indicator that applies to your facility or community. It may be the same as one of the higher-level priority health area indicators, or it may be a lower-level indicator that will contribute to one of the higher-level indicators on the flipchart.

DISTRIBUTE the handouts, Elements of a Monitoring and Evaluation Plan and Common Data Sources.

Have participants return to their teams.

SAY: Look at the requirements for an indicator on the handout, Elements of a Monitoring and Evaluation Plan.

> Then look at the description of a data source on the Common Data Sources handout.

> Use this information to agree on one indicator of success in achieving your SMART result. Be sure that the indicator you choose is a priority health area indicator, or will contribute to a priority health area indicator.

Write down your data sources: From where you could get the data to measure your indicator? Would it be from health facility service statistics, the districtlevel health information system, the Demographic and Health Survey? Use the handout to help you.



Ask yourself these three questions:

- Can the indicator be measured?
- Would an Improvement Team have easy access to the data source?
- Would the team be able to collect the data without added costs?

NOTE: Indicators should be expressed in neutral terms without words like "improved" or "decreased" (e.g., the indicator is "temperature" not "higher or lower temperature."). The words "increase" or "improve" can be put in the measurable result statement.

Closing



30 minutes

ASK: What did you learn today? What stands out for you?

Each of you should take about five minutes to write down your answers.

When you are done, discuss your answers with a person next to you.

After about 10 minutes, addressing the entire group:

SAY: Would each pair please share one of your answers with the group? We will go around the room.

Continue to hear pairs' answers until there are no more.

Ask a participant to be prepared to review what he or she learned in the Day Two sessions at the start of Day Three.



WORKSHOP I: DAY THREE

SESSION 6:THE CHALLENGE MODEL (CONCLUSION)

Review

- 6.F Developing a Measurable Result (continued)
- 6.G First Draft of the Challenge Model

— LUNCH BREAK —

SESSION 7: MONITORING AND EVALUATION

- 7.A Why Monitor and Evaluate?
- 7.B Preparing a Monitoring and Evaluation Plan

SESSION 8: THE LEADERSHIP PRACTICE OF SCANNING

- 8.A Scanning
- 8.B Improving Listening Skills—A Scanning Skill
- 8.C Next Steps—Reflecting on WSI and Preparing for WS2

Workshop Evaluation

Review



30 minutes

Ask participants to sit in their work teams.

SAY: Now we will hear from a participant about what we learned yesterday.

6.F Developing a Measurable Result (continued)

Participants use what they have learned about their current situation to select a result for this LDP+ that is SMART: Specific, Measurable, Appropriate, Realistic, and Time-bound.

DURATION

Lhour 30 minutes

- **MATERIALS**
- Handouts: Developing SMART Results; Numerators and Denominators for Indicators
- Prepared flipcharts:
 - Challenge Model
 - > Priority health area and 2-3 indicators
 - > Statement: An indicator is a marker of change over time that can be measured.
- Blank flipchart

PROCESS:

SAY: Bring out the SMART result you were beginning to draft yesterday. At the end of the day, we had started to think about the "Specific" part of the SMART criteria. Let's now turn to the next criterion, "Measurable."

STEP I. Make your result measurable (M) with a baseline and goal (30 minutes)

SAY: The measurable result always states a baseline value for a quantitative indicator at the beginning of the LDP+, before activities begin. The result also states the goal: the value of the indicator that the team is aiming for at the end of LDP+ activities.

Gathering baseline data provides the starting point for tracking changes in a quantitative indicator over the life of an improvement project.

Improvement Teams track the value of their indicators month by month in their Monitoring and Evaluation Planning Worksheet to show how they have progressed towards the desired result.



SAY: The baseline and desired result/goal always have a numerator and a denominator.

Let's take a look at how you can select a numerator and denominator for the indicator your team has chosen.

Review the handout, Common Data Sources.

SAY: You can obtain baseline data from such documents as the Demographic and Health Survey, health facility service statistics, or the national or regional health information system.

You may not have access to all the data sources today, but you do have general knowledge of the priority health area and the current situation in your locality. When you return to your work environment, you can revise the measurable result and indicator based on accurate data.

Use what you know to come up with possible baseline and goal values for your indicator.

Ask participants to work in their teams to establish a baseline and goal value for the indicator of their SMART result.

STEP 2. Make your result appropriate (A) and Realistic (R) (15 minutes)

Participants remain with their teams and discuss the next two SMART criteria.

They draw on their previous analysis of the current situation in their locality and their knowledge of their own Improvement Teams' resources.

STEP 3. Make your result Time-bound (T) (15 minutes)

The teams define the time period within which they would implement the LDP+ improvement project to achieve their desired result. For the purposes of this LDP+, the results should be achievable within six to eight months.

STEP 4. Share SMART results (30 minutes)

Invite each team to **PRESENT** its proposed result. Determine together whether each result meets the SMART criteria.

Encourage discussion and debate.

6.G First Draft of the Challenge Model

In this activity, participants begin using the Challenge Model to frame the improvement project.

- **DURATION** 15 minutes
- MATERIALS _ Large flipchart paper and markers for each team
- **PROCESS:**

STEP I. Teams start filling in their Challenge Models (15 minutes)

HAND OUT flipchart paper for each team to draw its own Challenge Model.

SAY: In your team, fill in the parts of the Challenge Model that we have covered: priority health area, vision, current situation, and measurable result.

In plenary, each team **PRESENTS** its draft Challenge Model.

Emphasize that this is just a draft and that each team will continue to work on its Challenge Model with the rest of their Improvement Team colleagues at home.

Remind them that as the teams learn more about the current situation, they are likely to want to adjust their measurable results so that they are SMARTer.

SESSION 7. MONITORING AND EVALUATION

PURPOSE	Introduce participants to monitoring and evaluation (M&E) concepts as they relate to the LDP+, and identify activities for monitoring and evaluating their improvement projects.
OBJECTIVE	To prepare an M&E plan for their improvement project
PREPARATIONS	 Read the facilitator notes for this session. Prepare copies of all handouts. Prepare the required flipcharts.
MATERIALS	Flipchart—easel and paperTapeColored markers
HANDOUTS	 Monitoring and Evaluation Planning Worksheet Exercise: Creating an M&E Plan

NOTE: Additional information on M&E is available on LeaderNet at

http://www.leadernet.org/.

WORKSHOP I: SCANNING ■ 169





7.A Why Monitor and Evaluate?

This exercise instills an M&E way of thinking and makes sure that all improvement projects have an M&E plan.



15 minutes



- Prepared (covered) flipchart with the statement:
 - To monitor is.../ To evaluate is...

Monitor: To regularly track changes in indicators over time in order to manage the implementation of an Action Plan.

Evaluate: To understand and explain whether and why results were or were not achieved.

- □ Prepared (covered) flipchart with the statement:
 - Why monitor and evaluate?

The purpose of good M&E practice is to properly monitor, measure, and demonstrate results.

If you do not measure, you cannot know and show how much you have improved.

PROCESS:

STEP I. Why are monitoring and evaluation important? (15 minutes)

SAY: Monitoring and evaluating is one of the eight practices of managers who lead. We have already touched on it in our planning process.

There are many definitions for those two terms. Here are the definitions we use in the LDP+.

REVEAL the definitions on the flipchart "To monitor is ... /To evaluate is"

ASK: Why do we want to monitor?

RECORD answers on a flipchart.



ADD, if the following are not mentioned:

- To provide feedback
- To promote support
- To develop and adjust program activities and budgets
- To show and celebrate progress

After responses are obtained, **REVEAL** the prepared flipchart, "Why monitor and evaluate?" and read the purpose of good M&E practice.

SAY: In your LDP+ improvement project, you will use a monitoring and evaluation plan to monitor progress toward your measurable result.

7.B Preparing a Monitoring and Evaluation Plan

This exercise will help participants think through the steps of preparing an M&E plan so that they can monitor their progress towards their measurable result.

- **DURATION** I hour 15 minutes
- MATERIALS

 Handouts: Monitoring and Evaluation Planning Worksheet;

 Exercise: Creating a Monitoring and Evaluation Plan
- **PROCESS:**

STEP I. Going from a Measurable Result to an M&E Plan (30 minutes)

DISTRIBUTE the handout, *Monitoring and Evaluation Planning Worksheet*. Go over the titles and explanations of each column of the worksheet.

DISTRIBUTE the handout, *Exercise: Creating a Monitoring and Evaluation Plan.* Read together the details of the Monapo plan.

Ask participants to work with their Improvement Teams to answer the questions on the Monapo handout.

In plenary, ask how the teams answered the questions on the handout. **ACKNOWLEDGE** the correct answers:

- 1. What indicator could the team use to monitor its progress towards the measurable result?

 The number of new family planning clients per month.
- 2. What is the definition of the numerator and denominator for the indicator?
 - Numerator: The number of new family planning clients each month at Monapo Health Center.
 - Denominator: The number of women of reproductive age living within four miles of Monapo Health Center.
- 3. From where will the team get the numerator and denominator data to measure the indicator? Good places to consider would be the monthly health facility service statistics for the numerator and local census data for the denominator. (Teams may propose other data sources that would also be correct.)
- 4. Who will collect the data? The health facility manager or whoever collects the facility statistics.



- 5. What is the baseline numerator? When will baseline data be collected? 150 new family planning clients; data collected in June 2013.
- 6. What is the desired result? When will data be collected to see if the team has met the goal? 225 new family planning clients; data to be collected in December 2013.

If no team has a correct answer to a question, **REFER** to the handout, *Elements of a Monitoring and Evaluation Plan*, to help them correct their answers.

STEP 2. Creating Your M&E Plan (30 minutes)

SAY: We now know what indicator we will use to monitor our measurable result.

We also know which data sources will provide us with the necessary information.

HAND OUT copies of the Monitoring and Evaluation Planning Worksheet to the teams.

- Review the questions on the worksheet.
- Check for understanding.

SAY: Write your measurable result and indicator(s) on the worksheet.

Then answer the questions in each of the columns and complete the worksheet.

CIRCULATE and help teams, as needed.

STEP 3. Sharing and learning (15 minutes)

Invite teams to share by **POSTING** their M&E planning worksheets on the wall and have others get up and look.

If there are only a few teams, they can **PRESENT** their work, one at a time, to the large group.

NOTE: If teams do not finish, completing this worksheet becomes part of their assignment.



SESSION 8. THE LEADERSHIP PRACTICE OF SCANNING

PURPOSE	Improve participants' scanning ability.
OBJECTIVE	■ To define scanning
	To identify methods of scanning
	To identify stakeholders
	To practice using listening as a form of scanning
PREPARATIONS	Read the facilitator notes for this session.
	Prepare copies of all handouts.
	Prepare the required flipcharts.
	 Review assignment.
MATERIALS	□ Flipchart—easel and paper
	Таре
	Colored markers
HANDOUTS	☐ Client Exit Interview
	Focus Group Guiding Questions
	Common Data Sources
	□ LDP+ Timeline
	LDP+ Assignment After Workshop #1
	□ Team Meeting Form
	Evaluation Form for Workshop #1

3 SESSION

8.A Scanning

This exercise introduces participants to the concept of scanning and scanning methods. This will help them as they select a challenge and an improvement project.

- **DURATION** 15 minutes
- MATERIALS Blank flipchart
 - ☐ Handouts: Client Exit Interview; Focus Group Guiding Questions; Common Data Sources
- **PROCESS:**

STEP I. Introduce the concept of scanning (5 minutes)

ASK: What do you have to learn in order to better understand the current situation as it relates to the result you want to achieve?

WRITE people's responses on a flipchart. Add any of the following if they are not mentioned:

- People's health care needs
- Service statistics
- Resource usage and needs
- Your team members' strengths, needs, and concerns

STEP 2. Identify scanning methods (10 minutes)

ASK: At your table, discuss the scanning methods available to you.

GO AROUND the room and WRITE responses on a flipchart.

HAND OUT and review the handouts: Client Exit Interview, Focus Group Guiding Questions, and Common Data Sources.

SAY: A client exit interview helps us to understand our clients' needs and hear directly from them. That way we don't have to rely only on our own perceptions or opinions.

The Focus Group Guiding Questions help us to identify the needs of a particular segment of the population.

Existing management information systems provide routine data on clients' use of services and the financial picture.

ASK: How can we use these methods to scan in order to better understand our baseline and better pick our measurable result?

Discuss and choose some scanning methods to use.



8.B Improving Listening Skills—A Scanning Skill

Listening is an important scanning skill. This exercise helps participants reflect on their listening habits and how they affect the work climate.

NOTE: This can be a very funny exercise when people use their acting skills.

- **DURATION** 45 minutes
- MATERIALS None
- **PROCESS:**

STEP I. Practice "bad" listening and share what it feels like (15 minutes)

In the large group:

SAY: Select a partner.

Decide who the "talker" is and who the "listener" is.

The talker talks for about two minutes about something that he or she thinks is important.

The listener shows signs of not listening.

Switch roles:The second person talks while the first person shows signs of not listening.

ASK: How did that feel?

Has this happened to you?

Have you been a bad listener to others?

What happens when people have bad listening habits?

TAKE a few responses after each question.

Practice "good" listening and share what it feels like (15 minutes) STEP 2.

Repeat Step 1, but this time the listener demonstrates that he or she is listening carefully to what the other person is saying.

ASK: How did that feel?

Has this happened to you?

Have you been a good listener to others?

What are the consequences of people practicing good listening habits?

TAKE a few responses after each question.

STEP 3. Reflect on the effects of listening well or poorly (15 minutes)

Summarize the impact of bad and good listening on motivation and organizational effectiveness.

Make links between listening and scanning for information.

ASK: What lessons do you take from this exercise?

COLLECT a few responses.





8.C Next Steps—Reflecting on Workshop #1 and Preparing for Workshop #2

This activity reviews Workshop #1 and presents the assignment and expectations for Workshop #2.

- **DURATION**
- 60 minutes
- **MATERIALS**
- Three flipcharts
- □ Handouts: LDP+ Timeline; LDP + Assignment After Workshop #1; Team Meeting Form to be used with the team in the workplace
- **PROCESS:**

STEP I. Settling in (5 minutes)

Ask participants to sit with their work teams.

STEP 2. Overall review of the LDP+ and previous sessions (15 minutes)

ASK: What have we done since our first day?

On three blank flipcharts, one for each day, **WRITE** the activities that people remember. **FILL IN** the missing activities.

ASK: What do you think are the most important ideas you learned at this first workshop?

Collect responses.

ASK: What are things that you can immediately apply when you get back to work?

Collect responses.

REVIEW the handout, *LDP+Timeline*, from the first day. **POINT OUT** where we are in the process and what will happen next.



STEP 3. Review the assignment (15 minutes)

HAND OUT the LDP + Assignment After Workshop #1 and Team Meeting Form.

READ each assignment aloud (or have someone read it) and summarize:

SAY: The assignment after Workshop #1 and before Workshop #2 is to hold two meetings with the rest of your team in the workplace:

The first meeting is to share what you have learned and to gather your team's feedback. Review the following:

- Priority health area
- Shared vision
- Challenge Model, as currently filled out
- M&E Plan

The second meeting is to review the results of team members' scanning. The scanning should include gathering accurate data for the indicator and the M&E plan.

Use the Team Meeting Form to design the scanning meeting as well as any other meetings between workshops.

Ask if there are questions.

STEP 4. Explain the coaching visits (10 minutes)

Explain that each team has a coach from the Technical Coaching Team, and tell each team who their coach is. If possible, **SET A DATE** for the coaching visits. The visits last for a few hours.

SAY: Your coach will sit down with your team and review your assignment progress, clarify whatever is a not clear, revisit element of Workshop #1 that need a refresher, and encourage the team.

Encourage all the members of the Improvement Team to be present at the coaching visit. Members of the larger team are also, of course, welcome.



Next steps (10 minutes) STEP 5.

ANNOUNCE dates for the Workshop #2, which is on Focusing, Planning, Aligning, and Mobilizing.

EMPHASIZE that the same people are expected to come to the next workshop because each workshop builds on the one before it.

- If one team member is not able to come, the team needs to find a replacement.
- Make sure the replacement team member becomes familiar with the Workshop #1 content and the outcomes of activities.

Make sure everyone knows:

- The second workshop will last three full days.
- Each Improvement Team will **PRESENT** the results of its assignment at the start of the workshop. Teams should arrive fully prepared.

Ask one participant to be prepared to **REVIEW** on the first day of the next workshop what he or she learned in this workshop.

Workshop Evaluation

Evaluation gives participants a chance to share what they learned and their opinions, and facilitators to gain information about what was most successful and what can be improved.

DURATION

10 minutes

MATERIALS

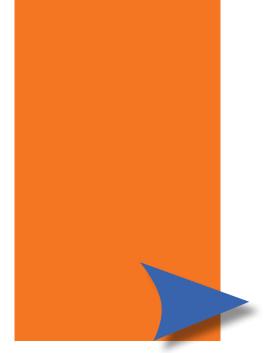
- ☐ Handout: Evaluation Form for Workshop #1
- ☐ Handout: Feedback for LDP+ Facilitator (distribute one copy of this handout for each facilitator to provide individual feedback)

PROCESS:

HAND OUT a copy of the Evaluation Form and the Feedback for LDP+ Facilitator sheet and give people 10 minutes to complete them.

Ask participants for truthful feedback about what they have learned in the workshop. Let them know they are not expected to put their names on the forms.

While the participants are completing the Evaluation Form and Feedback, COLLECT and **PHOTOCOPY** the Challenge Models the groups developed during this Workshop so that you may have them ready for participants to use to practice providing feedback during Workshop #2. They will also be used by coaches during Technical Coaching Team Meeting #2.



SECTION 3 HANDOUTS

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Exercise: Creating an M&E Plan
session 8. The leadership practice of scanning
Client Exit Interview
Focus Group Guiding Questions
LDP+ Assignment for Workshop #2
Team Meeting Form
Evaluation Form: Workshop #1
Feedback for LDP+ Facilitator

AGENDA AND OBJECTIVES: WORKSHOP # I

PURPOSE

Introduce the LDP+ frameworks, concepts, and tools.

OBJECTIVES

- To introduce the program's timeline, objectives, and process
- To align participants' expectations with the LDP+ objectives
- To introduce the leading, managing, and governing practices and conceptual models
- To introduce the concept of work climate
- To draft a Challenge Model that will enable teams to launch their improvement project

SESSIONS

- Session I: Program Orientation and Overview
- Session 2: Overview of Leadership and Management Development
- Session 3: Work Climate
- Session 4: Personal Purpose and Vision
- Session 5: Creating a Vision of the Priority Health Area
- Session 6: The Challenge Model
- Session 7: Monitoring and Evaluation
- Session 8: The Leadership Practice of Scanning

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	DAY ONE	DAY TWO	DAY THREE
	Opening (15 min.)	Review (20 min.)	Review (30 min.)
AM	Session I: Program Overview and Orientation (1 hr. 15 min.)	Session 5: Creating a Vision of the Priority Health Area (2 hr.)	Session 6 conclusion: The Challenge Model (1 hr. 45 min.)
	Session 2: Overview of Leadership, Management, and Governance Development (1 hr. 30 min.)	Session 6: The Challenge Model (45 min.)	
Lunci	h Break		
	Session 2 continued: Overview of Leadership, Management, and Governance Development (1 hr. 30 min.)	Session 6 continued: The Challenge Model (2 hr. 30 min.)	Session 7: Monitoring and Evaluation (1 hr. 30 min.)
PM	Session 3: Work Climate (30 min.)	Closing Reflection (30 min.)	Session 8: The Leadership Practice of Scanning (2 hr.)
	Session 4: Personal Purpose and Vision (I hr.)		Workshop Evaluation (10 min.)
	Closing Reflection (10 min.)		

LDP+ OVERVIEW

The Leadership Development Program Plus: A Country-Led Process for Focusing Health Teams on Priority Health Results

LDP+ is a process that develops people at all levels of organizations. Working in their real work teams, participants learn leading, managing, and governing practices that enable them to face challenges and achieve measurable results in priority health areas chosen by local leaders in the health system.

They bring what they learn back to their workplaces where they teach and inspire their coworkers to apply these practices to real workplace challenges in priority public health areas. LDP+ coaches and facilitators provide feedback and support throughout the six to eight months of the process.

LDP+ builds on lessons learned by Management Sciences for Health from the implementation of leadership development programs in more than 40 countries.

At the heart of the program are the Improvement Teams from local health facilities who learn a proven method of leading, managing, and governing to address challenges and produce measurable results.

Participants in the LDP+ learn how to:

- Lead, manage, and govern to achieve results in a priority health area.
- Apply reliable tools and processes for defining and addressing challenges.
- Incorporate ongoing performance improvement processes into their work teams.
- Build a workgroup climate that supports commitment to continuous improvement.

LDP+ Roles

THE GOVERNING BODY, made up of local leaders in the health system, uses effective governing practices to oversee, sustain, and scale up the LDP+ process to address priority health areas.

THE TECHNICAL COACHING TEAM, made up of experts in the priority health area and monitoring and evaluation, uses national and regional public health data to understand and agree on the priority health area, proven interventions, and indicators. These coaches provide ongoing support to the Improvement teams.

THE IMPROVEMENT TEAMS, made up of members of local health units, implement the LDP+ process at their work sites. They analyze their local conditions to propose a measurable result in the priority health area and choose appropriate actions to achieve the result. They develop Action Plans and participate in workshops, onsite meetings, and Shared Learning sessions.

The Improvement Teams:

- 1. Understand the priority health area on which the LDP+ is focusing.
- 2. Create a vision of success for the priority health area.
- 3. Assess their current situation.
- 4. Identify measurable results they can achieve within six to eight months to improve an indicator in the priority health area.
- 5. Analyze the root causes of obstacles in the way of achieving the results.
- 6. Determine what actions they will take to address the root causes (with support from the Technical Coaching Team).
- 7. Develop and implement Action Plans.
- 8. Monitor their progress, evaluate their achievements, and report on their results.

LDP+ TIMELINE & DELIVERABLES

NOTE: Between each workshop, Coaches meet with their Improvement Teams to review progress and provide support.

LDP Champion & facilitator prep work

Stakeholder Alignment Meeting

Technical Coaching Team Meeting I

Workshop I

MONTH I

- Select priority
 health area, proven
 interventions, indicators,
 and geographic location
 to be proposed by
 Governing Body
- Design Stakeholder
 Alignment Meeting and invite health systems
 leaders to participate
- Gain commitment of key stakeholders
- As Governing Body, provide resources to support the LDP+ process
- Confirm priority health area, proven interventions, indicators, and geographic location
- Develop Governing Body's action plan

MONTH 2

- Coaches are oriented to their roles in LDP+, the M&E process, and to the steps of the Challenge Model
- Improvement Teams draft first 4 steps of Challenge Models, with an emphasis on measurable results
- Leadership Practice: Scanning

Technical Coaching Team Meeting 2

Workshop 2

Technical Coaching Team Meeting 3

Workshop 3

MONTH 3

- Coaches learn and practice skills to coach Improvement Teams around their challenge models
- Improvement Teams draft root cause analyses and action plans
- L&M Practices: Focusing, Planning and Organizing

MONTH 4

- Coaches learn and practice skills in M&E: collecting data and monitoring indicators
- They are oriented to reporting requirements and formats for the overall LDP+ process
- Improvement Teams draft reporting and evaluation forms
- L&M Practices:
 Monitoring
 & Evaluation,
 Implementing, Aligning
 and Mobilizing, and
 Inspiring

Workshop 4

Results Presentation Stakeholders' Scale up Meeting

MONTHS 5-8

- Improvement Teams share success stories and prepare results presentations
- L&M Practices: Monitoring and Evaluation, Inspiring
- Improvement Teams present results to Governing Body, Technical Coaching Team, and other stakeholders
- Governing Body develops a strategy and plan for scaling up LDP+ and commits to provide resources for Scale up

LEADERSHIP DEVELOPMENT TRIANGLE



INTEGRATED PRACTICES FOR HIGH PERFORMING HEALTH SYSTEMS

IFADING

SCAN

- Identify client and stakeholder needs and priorities
- Recognize trends, opportunities, and risks that affect the organization
- Look for best practices
- Identify staff capacities and constraints
- Know yourself, your staff, and your organization—values, strengths, and weaknesses

ORGANIZATIONAL OUTCOME

Managers have up-to-date, valid knowledge of their clients, and the organization and its context; they know how their behavior affects others.

FOCUS

- Articulate the organization's mission and strategy
- Identify critical challenges
- Link goals with the overall organizational strategy
- Determine key priorities for action
- Create a common picture of desired results

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and priorities are clear.

ALIGN & MOBILIZE

- Ensure congruence of values, mission, strategy, structure, systems, and daily actions
- Facilitate teamwork
- Unite key stakeholders around an inspiring vision
- Link goals with rewards and recognition
- Enlist stakeholders to commit resources

ORGANIZATIONAL OUTCOME

Internal and external stakeholders understand and support the organization's goals and have mobilized resources to reach these goals.

INSPIRE

- Match deeds to words
- Demonstrate honesty in interactions
- Show trust and confidence in staff, acknowledge the contributions of others
- Provide staff with challenges, feedback, and support
- Be a model of creativity, innovation, and learning

ORGANIZATIONAL OUTCOME

The organization's climate is one of continuous learning, and staff show commitment, even when setbacks occur.

MANAGING

PLAN

- Set short-term organizational goals and performance objectives
- Develop multi-year and annual plans
- Allocate adequate resources (money, people, and materials)
- Anticipate and reduce risks

ORGANIZATIONAL OUTCOME

The organization has defined results, assigned resources, and developed an operational plan.

ORGANIZE

- Develop a structure that provides accountability and delineates authority
- Ensure that systems for human resource management, finance, logistics, quality assurance, operations, information, and marketing effectively support the plan
- Strengthen work processes to implement the plan
- Align staff capacities with planned activities

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and priorities are clear.

IMPLEMENT

- Integrate systems and coordinate work flow
- Balance competing demands
- Routinely use data for decision-making
- Co-ordinate activities with other programs and sectors
- Adjust plans and resources as circumstances change

ORGANIZATIONAL OUTCOME

Activities are carried out efficiently, effectively, and responsively.

MONITOR & EVALUATE

- Monitor and reflect on progress against plans
- Provide feedback
- Identify needed changes
- Improve work processes, procedures, and tools

ORGANIZATIONAL OUTCOME

The organization continuously updates information about the status of achievements and results, and applies ongoing learning and knowledge.

GOVFRNING

CULTIVATE ACCOUNTABILITY

- Sustain a culture of integrity and openness that serves the public interest
- Establish, practice and enforce codes of conduct upholding ethical and moral integrity
- Embed accountability into the institution
- Make all reports on finances activities, plans, and outcomes available to the public and the stakeholders
- Establish a formal consultation mechanism through which people may voice concerns and provide feedback

ORGANIZATIONAL OUTCOME

Those who govern are accountable to those who are governed. The decision making is open and transparent. The decisions serve bublic interest.

ENGAGE STAKEHOLDERS

- Identify and invite participation from all parties affected by the governing process
- Empower marginalized voices, including women, by giving them a voice in formal decision-making structures and processes
- Create and maintain a safe space for the sharing of ideas
- Provide an independent conflict resolution mechanism
- Elicit and respond to all forms of feedback in a timely manner
- Establish alliances for joint action at whole-ofgovernment and whole-of-society levels

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has an inclusive and collaborative process for making decisions to achieve the shared goals.

SET SHARED DIRECTION

- Prepare, document and implement a shared action plan to achieve the mission and vision of the organization
- Set up accountability mechanisms for achieving the mission and vision using measurable indicators
- Advocate on behalf of stakeholders' needs and
- Oversee the realization of the shared goals and the desired outcomes

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has a shared action plan capable of achieving objectives and outcomes jointly defined by those who govern and those who are governed.

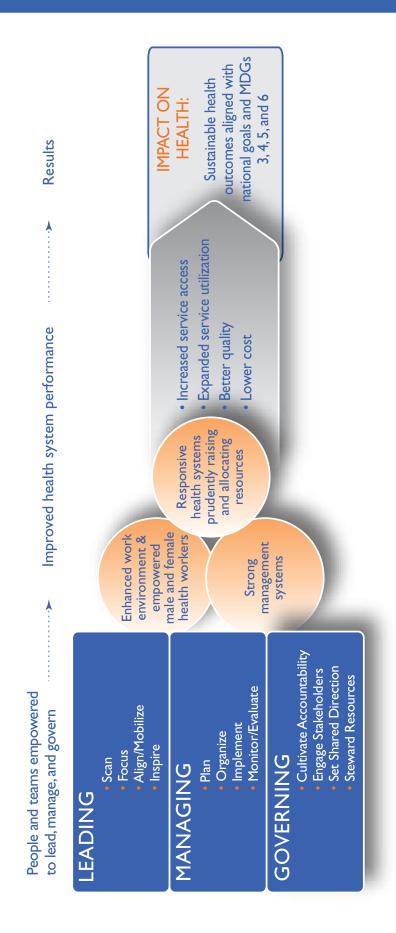
STEWARD RESOURCES

- Ethically and efficiently raise and deploy the resources to accomplish the mission and the vision and to serve stakeholders and beneficiaries
- Collect, analyze, and use information and evidence for making decisions
- Align resources in the health system and it design with the shared goals
- Build capacity to use resources in a way that maximizes the health and well-being of the public
- Inform and allow the public opportunities to monitor the raising, allocation and use of resources, and realization of the outcomes

ORGANIZATIONAL OUTCOME

The institution has adequate resources for achieving the shared goals, and the resources are raised and used ethically and efficiently to achieve the desired objectives and outcomes.

CONCEPTUAL MODEL: LEADING, MANAGING AND **GOVERNING FOR RESULTS**



GOVERNING PRACTICES AT THE HEALTH FACILITY LEVEL

How Health Facility-Level Managers Who Lead can Practice Good Governance (within the context of LDP+)

Governing Practices

Actions at the Service-Delivery Level

Selected Tools

CULTIVATE ACCOUNTABILITY

Foster a decision-making environment based on systems and structures that support integrity, transparency, participation, and inclusion.

Goal: Create and sustain a culture of accountability by establishing and practicing conduct that upholds transparency, integrity, participation, and inclusion.

- I. Create mechanisms to share information and reward behaviors that reinforce transparency, integrity, participation, and inclusion.
- 2. Share reports on finances, activities, and plans with managers, service delivery providers, clients, community members, and other stakeholders.
- 3. Establish processes to continuously assess the appropriateness and effect of decisions.
- **4.** Establish a formal consultation mechanism through which staff, clients, and other stakeholders may voice concerns.
- Participatory budgeting process
- Citizen report cards and community scorecards

ENGAGE STAKEHOLDERS

Identify, engage, and collaborate with diverse stakeholders representing the full spectrum of interested parties.

Goal: Establish procedures and an environment that encourages staff, clients, community members, and representatives of other sectors to participate in public health decisions that affect their lives and work.

- I. Systematically elicit and respond to feedback on services from all stakeholders.
- Hear and respond to marginalized voices, particularly female staff and clients, by giving them a place in formal decision-making and oversight structures.
- 3. Participate in relevant coalitions, networks, and alliances in support of priority health areas.
- Stakeholder analysis tool
- Gender assessment instrument
- Mechanisms for conflict resolution

SET SHARED DIRECTION

Develop a collective vision of the "ideal state" of a priority health area and a process for reaching it.

Goal: Oversee the involvement of stakeholders in articulating a vision for a priority health area, determining the desired result, and overseeing the implementation of an Action Plan.

- I. Be sure the shared vision and desired measurable result reflect stakeholders' needs and priorities.
- 2. Oversee the development and implementation of a shared Action Plan to achieve the desired result.
- 3. Disseminate the vision, result, and main activities in the Action Plan to all stakeholders.
- Establish accountability mechanisms for achieving the result, using well-defined indicators to gauge progress.
- The Challenge Model
- Project management dashboards

STEWARD RESOURCES

Build capacity of staff at all levels to manage human, financial, and technical resources responsibly.

Goal: Strengthen the capacity to absorb resources and deliver high-quality, affordable, and cost-effective services appropriate to the needs of the population.

- I. Mobilize resources to carry out the facility's Action Plan, and use these resources wisely to serve beneficiaries and other stakeholders.
- Collect, analyze, and use information to make sound decisions on the use of human, financial, and technical resources for implementation of the Action Plan and achievement of the desired result.
- 3. Place the priority health area on the local policy-making agenda.
- Provide the public with information and opportunities to monitor the acquisition and deployment of resources.

- Public expenditure tracking process
- Stock record card for ordering and managing medicines and supplies

TOOL COMMUNITY SCORECARDS

Purpose

Enables the community to assess the services provided by the health facility.

Preparation

- Invite at least 7 but not more than 15 community members to participate.
- Those invited to participate must be users of the health services related to the priority health area.
- Prior to the meeting choose three national evaluation criteria related to the priority health area.

STEP ONE: Community identifies their criteria - The community members brainstorm a set of criteria to evaluate the services.

Ask:

- How will someone know that this facility is providing good services related to the priority health area?
- How do you judge the performance of the facility with regard to its services (what specifically do you look for)?

Examples of criteria might be: waiting time, availability of nurses, availability of contraceptives, cleanliness of the facility, staff punctuality, hours of service availability, etc.

- Help them to choose the 5-8 most important criteria to evaluate the service.
- After they have chosen their own criteria, introduce the three national evaluation criteria you have chosen related to the priority health area.

STEPTWO: Evaluating the services - Use the Scoring Chart on the next page — written on a flipchart.

Support the participants to evaluate the health facility's services, related to the priority health area, utilizing the 5-8 community criteria they have and the 3 national criteria.

STEPTHREE: Summarizing the scores - Use the summary of scoring sheets on the next page.

STEP FOUR: Discussing the results.

- Look at the results and ask:
 - —Why did you give this rating?
 - —Who is responsible/what is the challenge?
 - —What can be done to improve the situation?

STEP FIVE: Suggestions for Improvement - Encourage a community member to lead the discussion.

Ask:

- —What can be done now to improve the service?
- —What support is needed to improve the service?
- —What can community members do themselves to improve the service?

Record the suggestions or actions required.

Ask:

- —What are next steps?
- —Who will be responsible for carrying out the activities?
- —By when will this be done?

TOOL COMMUNITY SCORECARDS (PT 2)

Write the scoring system on a flipchart.

PERFORMANCE	DRAWN FACIAL EXPRESSION	SCORE
Very bad	very unhappy face	1
Bad	unhappy face	2
Just OK	indifferent face	3
Good	happy face	4
Very good	very happy face	5

Write a scoring sheet on a flipchart.

	PERFORMANCE					
CRITERIA	I	2	3	4	5	
	Very Bad (very unhappy face)	Bad (unhappy face)	Just OK (indifferent face)	Good (happy face)	Very Good (very happy face)	Total
Criteria One (write here)						
Criteria Two (write here)						
Criteria Three (write here)						
Etc.						

Write a summary score on a flipchart.

CRITERIA	AVERAGE SCORE	% RATED GOOD OR VERY GOOD
1		
2.		
3.		
4. (etc.)		

Write suggestions for improvement on a flipchart.

CRITERIA	SUGGESTIONS FOR IMPROVEMENT
I	
2.	
3.	
4. (etc.)	

TOOL DASHBOARD

Purpose

The dashboard is a tool that provides decision makers with a graphic presentation of key indicators for a specific program, project, or initiative. Like the dashboard on a car, it is designed to send signals regarding performance of a program or project compared to desired results or goals.

When a warning signal appears—red numbers, a red light, or a low bar indicating that the actual situation is below the goal you have chosen—the team will need to investigate to determine whether a problem exists. Then the team will need to decide what to do to solve the problem.

Dashboards can be simple—made by hand using paper and colored marking pens. They can also be developed using computer software.

Process for making a dashboard (see examples next page)

STEP ONE: Choose a small number of key programmatic, financial, or managerial indicators. For example, a project that has as its objective improvement in the quality of prenatal care, indicators for the dashboard might be:

- No. or % of women who delivered that had at least one prenatal visit
- No. or % of women who delivered that were tested for HIV during their pregnancy
- No. or % of facilities that have a nurse with the skills to provide prenatal care

STEPTWO: Prepare the dashboard tables.

- Use bar charts (as in the examples) or line graphs to track your key indicators.
- Use green, yellow, and red colors to highlight performance above the goal (green), slightly below the goal (yellow) and significantly below the goal (red)

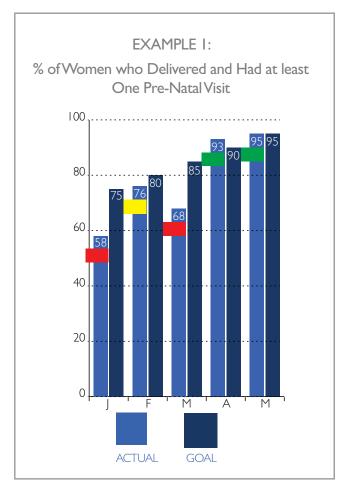
STEPTHREE: Hold your team meeting to present the dashboard tables.

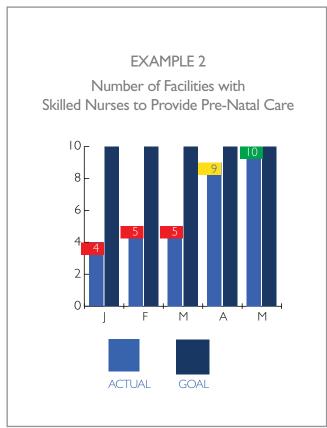
- During the presentation, discussion should focus on the reasons for reaching or not reaching each desired result.
- The team should propose recommendations for improvement.

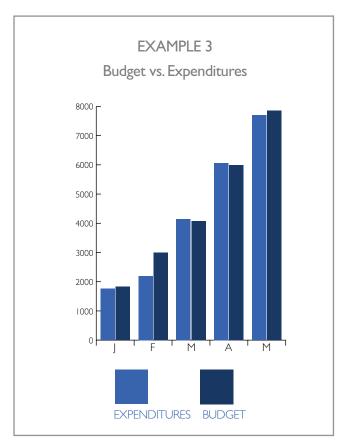
STEP FOUR: Follow up.

- At your next meeting, follow up on the actions that were recommended.
- Check on current performance, and adjust your actions as necessary.

TOOL DASHBOARD EXAMPLES



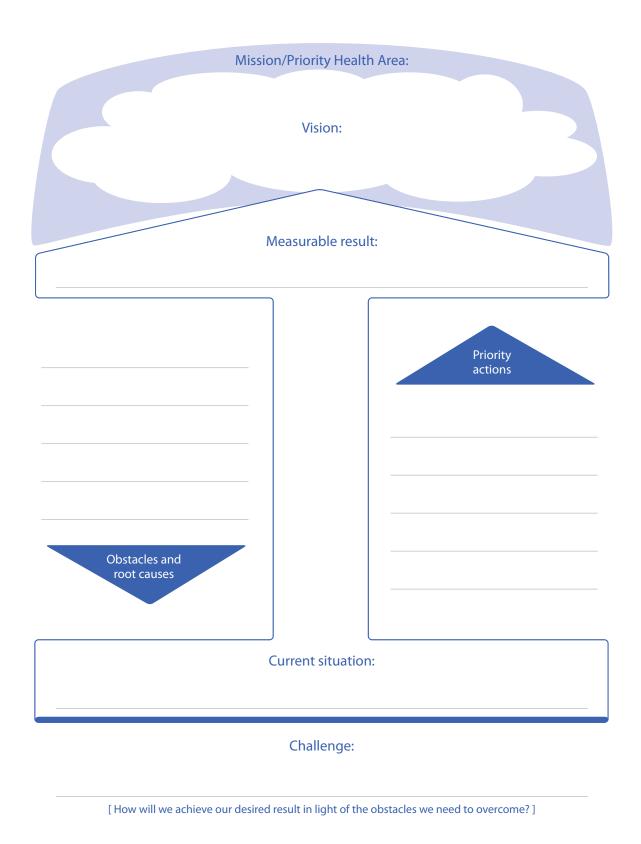




USING THE CHALLENGE MODEL

STEP I	Review your organizational mission and strategic priorities With your team, agree on a common understanding of your organization's mission and strategic priorities. This understanding will help shape your vision within the context of your organization's priorities.
STEP 2	Create a shared vision of the future With your team, imagine what you and others will see when your team has made its contribution to improvements in your organization's strategic priorities. This shared vision will inspire the team to face each new challenge.
STEP 3	Assess the current situation With your team, scan your internal and external environments within the context of your organization's priorities. Consider such factors as the prevalence of the health problem, government policies, and current interventions. This will help you form an accurate picture of the conditions that can affect your team's progress toward your shared vision.
STEP 4	Agree on one measurable result Based on your organization priorities and your current situation, define a measurable result that can be achieved within the time frame of this ICRC-LDP. This desired measurable result is what will drive your work together and allow you to monitor and evaluate your progress toward achieving it. Your team will most likely need to adjust the result as you gain more information about the current situation and the obstacles you need to overcome.
STEP 5	Identify the obstacles and their root causes Make a list of obstacles that you and your team will have to overcome to reach your stated result. Consider gender equity issues and four broad categories into which most obstacles fall: policies and procedures; providers; equipment, infrastructure, and supplies; clients and communities. Use a root cause analysis tool to make sure you are addressing the causes and not just the symptoms.
STEP 6	Define your key challenge State what your team plans to achieve (your measurable result) in light of the root causes of the obstacles you have identified. (It helps to begin your challenge statement with: "How will we?")
STEP 7	Develop an Action Plan Develop an Action Plan that lists the priority actions needed to meet your challenge. Include estimates of the human, material, and financial resources needed and the time line for implementing your actions.
STEP 8	Implement your plan, monitor progress, and evaluate results Work together as a team to implement the plan. Regularly monitor your progress toward your measurable result and, at the end, evaluate your result.

THE CHALLENGE MODEL



WORKSHOP I: SCANNING

DEVELOPING **SMART** RESULTS

To meet the SMART criteria, results must be:

S SPECIFIC	The result is clear enough so that others can understand what it will look like when it is accomplished.	 Does your result have an indicator of what will change over time? Is your result limited to 1 to 2 indicators?
M MEASURABLE	Progress towards the result can be measured using numbers, rates, proportions or percentages.	 Does the result state a baseline value for the indicator? Does it state a target value for the indicator? Is the indicator expressed in numbers as well as in percentages?
APPROPRIATE	Is the result aligned with the strategic priority of your organization and your team?	
R REALISTIC	 Can your team achieve this result with your current activities and resources? 	
TIME-BOUND	Does your result have a start date and an end date?	

Example of a SMART result for an improvement project whose priority health area is preventing the spread of HIV & AIDS:

Between January and July 2012, the number of fully functioning voluntary counseling and testing sites in the district will increase by 50%, from 6 to 9.

By looking at the measurable result, you will see that it is Specific, Measurable, and Timebound.

Start and end dates: Between January and July 2012 (Time-bound)

Indicator: the number of fully functioning voluntary counseling and testing sites in the district (Specific)

Percent, baseline, target: will increase by 50%, from 6 to 9. (Measurable)

By looking at data sources and discussing their situation, team members would be able to confirm that it was Appropriate and Realistic.

ELEMENTS OF A MONITORING AND EVALUATION PLAN

I.INDICATOR	Each indicator should be stated using clear terms that are easy to understand, and should measure only one thing. If there is more than one thing to measure in the indicator, it should be restated as separate indicators.
2. INDICATOR DEFINITION	Provide a detailed definition of the indicator and the terms used, to ensure that different people at different times would collect identical types of data for that indicator, and measure it the same way. For a quantitative indicator, include a numerator and denominator with the description of how the indicator measurement will be calculated.
3. BASELINE AND GOAL	Measure the value of each indicator before project activities begin and set an achievable goal for the indicator to reach by the end of the project. The baseline measurement is the starting point for tracking changes in the indicator(s) over the period of an Action Plan.
4. DATA SOURCE	Specify the data source for each indicator. Consider the pros and cons of each source (accuracy, availability, cost, etc.) to ensure access to the data. Examples of data sources include facility records, surveys, websites, published research, and health information systems (HIS).
5.DATA COLLECTION METHOD	Specify the method or approach for collecting data for each indicator. For primary data (data that teams collect themselves), note the type of instrument needed to gather the data (e.g., structured questionnaire, direct observation form, scale to weigh infants). For indicators based on secondary data (data from existing sources), give the method of calculating the indicator.
6. FREQUENCY OF DATA COLLECTION	Note the timing of data collection for each indicator. Depending on the indicator, this may be monthly, quarterly, annually, or less frequently. Baseline data are collected for each indicator before activities begin.
7. RESPONSIBILITY FOR COLLECTING DATA	Identify who is responsible for data collection. Responsibility should be assigned to a specific office, team, or individual.

(COMMON DATA SOURCES	
1	POLICY OR GOVERNMENTAL PROGRAM LEVEL	 Official documents and records (legislative and administrative documents) National budgets or other accounts Policy inquiries Websites
2	SERVICES LEVEL	 Facility records (service statistics, HMIS data, financial data) Inventories or facility assessment surveys Provider performance or competency assessments, training records, quality-of-care data Client visit registers
3	POPULATION LEVEL	 Government census Vital registration systems (birth and death certificates) Sentinel surveillance systems Household or individual surveys
4	INDIVIDUAL LEVEL	 Case surveillance for specific diseases Medical records Interview data (e.g., client exit interviews) Observation of provider-client interactions

NUMERATORS AND DENOMINATORS FOR INDICATORS

What are Numerators and Denominators?

The numerator and the denominator represent two groups of people, events, or documents that you compare.

The numerator is a subgroup of the denominator. (An example is provided below.)

When you put the numerator over the denominator, you create a fraction (X/Y) that you can use to calculate percentages, proportions, and other rates to show how things are changing.

- The numerator is the actual number of people or events that exhibit a particular trait.
 Example: The number of women attending antenatal clinics in Makumba District who receive counseling and testing services.
- The denominator is the total number of possible people or events that exhibit that trait Example: The total number of women attending antenatal clinics in Makumba District.

The denominator you choose should:

- be relevant to the intervention you are implementing.
- include only units (e.g., people, clinics, households) that could be affected by your intervention.

How do you use numerators and denominators?

If you simply count the number of women who received HIV counseling and testing in the past 6 months, and find that the number is 280, it is difficult to know if that is a significant achievement.

But you can know if this is a significant achievement if you know that 300 women attended antenatal clinics in Makumba District in the 6 months. If you know that, then you know that 80% percent of those women received counseling and testing services.

(280 out of 300 women, or 280/300 = .80 = 80%).

If the total number of women attending antenatal clinics in Makumba District was 600, then only 40% of those women received counseling and testing services

(280 out of 600 women, or 280/600 = .40 = 40%).

The numerator remains the same (280), but the denominator (either 300 or 600 in these cases) provides information on the scope of the result.

As you can see, different denominators can have dramatic effects on the results!

MONITORING AND EVALUATION PLANNING WORKSHEET

DATA COLLECTION RESPONSIBILITY FREQUENCY	How often will we collect the data? collect the data? collection?
DATA CC SOURCE CC	Where will we get he data to neasure this ndicator?
TARGET	What goal have you set for the value of the indicator r by the end of ICRC-LDP activities?
MO MO 5	
5 3	
Σ 4	
Q ε	
Δ 2	
δ –	
BASELINE	What is the value of the indicator the month before beginning ICRC-LDP activities?
INDICATOR DEFINITION	What is the definition of the numerator? What is the definition of the denominator?
INDICATOR	

EXERCISE: CREATING AN M&E PLAN

The Monapo Health Center Team intends to support the health center's mission and vision. The vision is as follows:

Priority Health Area: Family Planning

- Monapo Health Center Vision Statement: All women within a four-mile walk of Monapo Health Center will have access to convenient and comprehensive family planning services that offer all family planning methods.
- Current Situation: Even when they live within four miles of Monapo Health Center, many women who walk there find that family planning services are not offered that day or that there is a stock out of commodities.

Building on that, the team devised the following measurable result.

Measurable Result: Between June and December 2013, the health center will see a 50% increase in the number of new family planning clients per month, from 150 new family planning clients per month in June 2013, to 225 new family planning clients per month in December 2013.

Keeping this desired measurable result in mind, answer the following questions about how the team could best monitor progress.

- 1. What indicator could the team use to monitor its progress toward the measurable result?
- 2. What is the definition of the numerator and denominator for the indicator?
- 3. From where will the team get the data to measure the indicator?
- 4. Who will collect the data?
- 5. What is the baseline numerator? When will baseline data be collected?
- 6. What is the measurable result?
- 7. When will data be collected to see if the team has met the measurable result?

•

CLIENT EXIT INTERVIEW

Introduction to Clients:

We want to learn how to make this health facility serve its clients in the best way it can. Can you please answer a few questions so that we can learn from your experience about what is needed at this facility?

a lew questions so that we carried in from your experience about what is needed at this facility:
Questions:
I. How often do you come here?
2. Why do you use the services at this facility?
3. What do you like/dislike about the services at this facility?
4. What is the most important reason you use this facility? Why is that important to you?
5. How do you feel when you visit this facility?
6. What do you think a health provider should do for his/her clients?

FOCUS GROUP GUIDING QUESTIONS

Group:

From five to ten participants from the community who use health services. The process can take from one-half hour to one hour. Have someone in the room with you who can take notes as participants respond to the questions.

Begin: Introduce yourself and say:

- I am here to learn about the health needs in your community and your expectations of your health service facility.
- I am going to ask several questions.
- We want to hear both what is working well and what needs to be improved, so please speak freely.

Ouestions:

- I. What are the most important health needs in this community? How are those needs being met?
- 2. What are your reasons for coming to the health facility?
- 3. What is your experience when you are at the facility?
- What is good?
- What needs improvement?
- 4. If you gave advice to the health care providers, what would you tell them??
- 5. What do you tell others about the health facility?
- Do you recommend that they use the facility?
- Why do you recommend it? OR Why do you not recommend it?
- 6. What health services would you like to see here that you have seen or heard about somewhere else?
- Why would you like the health service(s) to be available?
- 7. If you described the best health facility, what would it be like?
- 8. What have you seen yourself, or heard about, that happened in the health facility that you would not like to see happen to you or to anybody else?
- 9. What would you describe as the worst thing in the health service? Why?
- 10. If you have the chance to change something in the health service, what would you like to change or see done differently?
- What would be the first thing to change? Why?
- What would come after that? Why?
- What else? Why?

LDP+ ASSIGNMENT FOR WORKSHOP #2

Team Meeting between \	Norkshop #1 and #2
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Plan and design a meeting with your team to report on Workshop I. Use the Team Meeting Form, next page.

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- 1. Share the leadership practices you learned and the shared vision you created for your team. Make sure it represents your larger team's vision as well.
- 2. Share the improvement project that you have identified, using the Challenge Model.

- 3. Share what you have filled in so far on the Challenge Model and work with your team to refine your measurable result and current reality.
- 4. Begin collecting accurate data to develop your monitoring and evaluation plan

After this meeting:

Hold an additional meeting using the Team Meeting Form. This will help you to make progress towards your desired measurable result.

TEAM MEETING FORM

Meet between workshops, maybe more than once.

1. Agree on the objectives for the meeting

What do we want to accomplish during this meeting? (Set the time you will work on defining the objectives.)

2. Report on results

What was our goal for the two weeks that have passed since the previous workshop?

What did we accomplish? (Acknowledge our team for our work.)

What obstacles are we facing and how will we overcome them?

3. Next actions

What is our goal for the next two weeks (before the next workshop)?

List the activities we will do. List who will be responsible for each activity.

4. Teamwork

What is working well in our team?

What do we need to do to improve?

EVALUATION FORM: WORKSHOP #1

Date: _	
	complete this evaluation as fully and honestly as you can. Your feedback will help us to improve the hop's content and activities, as well as other aspects of the LDP+. Thank you.
1.	What did you learn in this workshop?
2.	How can you apply what you learned in your work?
3.	What feedback do you want to give to the LDP+ facilitators?

FEEDBACK FOR LDP+ FACILITATOR

How much do you agree or disagree with the following statements? Please mark one box for each item as appropriate. Thank you!

	Disagree Strongly	Disagree	Agree	Agree Strongly
The facilitator began and ended sessions on time.				
The facilitator helped the group set the ground rules for the discussion and stick to them.				
The facilitator set a friendly and relaxed tone for the conversation.				
The facilitator listened well.				
The facilitator remained neutral.				
The facilitator helped the group productively discuss different points of view.				
The facilitator seemed to be familiar with the discussion materials.				
The facilitator encouraged everybody in the group to participate in conversations.				
The facilitator did a good job of not letting any one person dominate the discussions.				
The facilitator encouraged quiet members of the group to share their ideas.				
The facilitator worked effectively to keep discussions on track.				
The facilitator offered periodic summaries of the discussions and/or encouraged group members to do so.				
The facilitator handled intense situations well.				

group to share their ideas.				
The facilitator worked effectively to keep discussions on track.				
The facilitator offered periodic summaries of the discussions and/or encouraged group members to do so.				
The facilitator handled intense situations well.				
Please write any other feedback you may have	in the space b	pelow.		
			_	
			Date:	
			_	



FACILITATORS

Master Facilitator, LDP+ Champion

PARTICIPANTS

Members of the Technical Coaching Team who have participated in the Stakeholders Alignment Meeting, Technical Coaching Team Meeting # I, and Workshop #I

MEETING DESIGN

This meeting takes place after Workshop, # I. During that workshop, the Improvement Teams will have covered: the leading, managing, and governing practices; work group climate; the Challenge Model; the priority health area; priority interventions; M&E; planning and scanning. By participating in Workshop #1, the members of the Technical Coaching Team will have been able to review these topics, to observe an expert facilitator handling the topics, and to see how the Improvement Teams work together.

This meeting is designed to hone the participants' coaching skills and reinforce their grasp of the first four steps in the Challenge Model so that they may start coaching the Improvement Teams.

The meeting lasts one day.

- **MEETING OBJECTIVES** Introduce the Technical Coaching Team to coaching principles.
 - Assess the coaching skills of the members of the Technical Coaching Team.
 - Practice coaching Improvement Teams around the first part of the Challenge Model: priority health area, vision, current situation, and measurable result.

MEETING DELIVERABLES

- Individual assessments of coaching skills
- Improved skills in coaching Improvement Teams around their Challenge Models

PREPARATION OF CONTENT

Read the facilitator notes for this session.

PREPARATION OF MATERIALS

- Make copies of all meeting handouts, available in the handout section at the end of this section.
- Collect the Challenge Models the groups developed during Workshop #I and have them ready for participants to use to practice providing feedback.

MATERIALS

- □ Flipchart(s), easel, and paper
- Таре
- Colored markers

PREPARED FLIPCHARTS

- Meeting objectives and agenda
- OALFA skills

HANDOUTS

- Responsibilities of the Technical Coaching Team
- Coaching Principles
- □ Three-Person Coaching Exercise
- OALFA Coaching Skills Self-Assessment
- □ Tips for Improving OALFA Coaching Skills
- Improvement Teams' Challenge Models from Workshop #1 (collected at the end of Workshop #1)
- Reviewing the First Steps in Improvement Teams' Challenge Models
- Feedback on Coaching Practice for the First Steps in the Challenge Model
- Evaluation Form for Technical Coaching Team Meeting #2

TC2 **SCHEDULE TECHNICAL COACHING TEAM MEETING 2**

- A. Welcome, Objectives, and Expectations
- B. Learning and Practicing Coaching Skills
- C. Assessing and Strengthening Coaching Skills
- D. Applying Coaching Skills to the Challenge Model Closing

A. Welcome, Objectives, and Expectations

The meeting objectives are explained and related to participants' expectations.

- **DURATION** 30 minutes
- MATERIALS Prepared flipchart: Meeting Objectives and Agenda
- **PROCESS:**

STEP I. Set the stage for the meeting (15 minutes)

GREET participants.

Explain the context of this meeting as a follow-up to Technical Coaching Team Meeting #1 and Workshop #1, with further preparation for their first coaching sessions.

USE the prepared flipchart, "Meeting Objectives and Agenda," to present the objectives and agenda of the meeting.

POINT OUT that the participants will begin by building coaching skills and then practice using those skills to coach Improvement Teams in the first four steps of the Challenge Model.

STEP 2. Match expectations to the objectives (15 minutes)

ASK: What do you expect to get out of this meeting?

After attending the first Technical Coaching Team Meeting and the first workshop, do you have any concerns about your coaching role?

WRITE participants' responses on a flipchart.

Summarize the responses and relate them to the meeting objectives and agenda. **POINT OUT** the ways in which this meeting can meet their expectations and help to address their concerns.

3. Learning and Practicing Coaching Skills

This activity emphasizes the importance of coaching for the LDP+ and introduces coaching principles and practices.

- **DURATION**
 - I hour 45 minutes
- **MATERIALS**
- □ Handouts: Responsibilities of the Technical Coaching Team; Coaching Principles; Three-Person Coaching Exercise
- **PROCESS:**

STEP I. Discuss the role and importance of coaching in the LDP+ (15 minutes)

If participants have folders of handouts from Technical Coaching Team Meeting #1, ask them to refer to the handout, Responsibilities of the Technical Coaching Team. (Have copies ready to distribute to anyone who doesn't have a copy.)

Have participants scan the list of responsibilities and read aloud all those that involve coaching.

SAY: We have just seen how important coaching skills are for your work with the Improvement Teams and for the success of the LDP+.

Now you will have the chance to explore the principles of effective coaching, to put the principles into practice in a real-life exercise, and to get feedback from your colleagues on your coaching skills.

STEP 2. Explore coaching principles (30 minutes)

DISTRIBUTE the handout, Coaching Principles.

READ ALOUD the definition at the top of the handout: Coaching is enabling others to reflect on their commitments and find new ways to achieve their intended results.

Check to see if this definition matches participants' views of what coaching is. Acknowledge appropriate additions to the definition.

ASK: Have you ever experienced this kind of coaching — in school, on a sports team, in your profession?

How did it make you feel? In what ways did it help you make changes in your actions?

Encourage participants to share stories of successful coaching experiences, emphasizing behavioral changes as well as good feelings.

Have participants read the principles of coaching from the handout. Have them relate some of the principles to the stories they have just heard, or to other personal coaching experiences.

STEP 3. Carry out and process a coaching conversation (60 minutes)

DISTRIBUTE the handout, *Three-Person Coaching Exercise*. Explain that all participants will now have the opportunity to play three roles: to coach, to be coached, and to observe and give feedback on the coaching experience.

Read the handout together and clarify any areas of confusion.

Ask participants to think about a challenging situation that they are facing at work.

DIVIDE the participants into groups of three and assign each person in the group a letter:

- Person A for the coach
- Person B for the person being coached
- Person C for the observer.

(If the group does not divide evenly into groups of three, two people can be observers.)

Give instructions for the exercise.

SAY: Each round of this exercise will take no more than 15 minutes.

> For 10 minutes, Person B will describe the difficult situation s/he is facing at work and Person A will act as a coach, asking questions, not providing solutions. See the handout for suggestions on the types of questions coaches may ask.

Person C will have 5 minutes to give Person A feedback.

Limit each round to 15 minutes. Inform participants when the time is up and have them switch roles, so that every participant gets to play all three roles.

After the three rounds, reconvene the participants. Lead a discussion on how the process went and what they experienced in each of the roles.

C. Assessing and Strengthening Coaching Skills

Through this exercise, participants recognize strengths and weaknesses in coaching skills and begin to work on improving skills.

- **DURATION** 2 hours
- MATERIALS Prepared flipchart: OALFA skills:
 - Observe
 - > Ask good questions
 - ➤ Listen attentively
 - > Provide Feedback
 - ➤ Come to Agreement
 - Handouts: OALFA Coaching Skills Self-Assessment; Tips for Improving OALFA Coaching Skills

PROCESS:

STEP I. Assess basic coaching skills (60 minutes)

SHOW the prepared flipchart with the OALFA skills.

SAY: Five skills are essential to put coaching principles into action. We use the acronym "OALFA" to remember these skills:

- Observe
- Ask good questions
- Listen attentively
- Provide Feedback
- Come to Agreement

POINT OUT that even the most experienced coaches have strengths and areas that can be improved. Explain that the LDP+ offers a tool to help coaches learn more about their coaching skills—those that are strongest and those that they would like to strengthen.

DISTRIBUTE the handout, *OALFA Coaching Skills Self-Assessment*. Read the instructions aloud and answer any questions about the scoring.

Have participants read aloud the components of the five skills.

Encourage participants to ask questions, and answer the questions to clarify any areas of confusion.

Give participants 30 minutes to complete and score their self-assessments. Ask for any reactions to the exercise (e.g., new perceptions, positive or negative surprises, effects on confidence).

STEP 2. Choose and share ways to improve coaching skills (60 minutes)

SAY: The OALFA assessment has given you a chance to score yourself in the five essential coaching skills.

Now you can begin to improve your skills with tips from successful coaches.

DISTRIBUTE the handout, *Tips for Improving OALFA Coaching Skills.* Have participants read the tips aloud.

Encourage participants to find links between these tips and the principles in the handout, *Coaching Principles*.

Ask participants to work individually to choose three tips that they feel would improve the coaching skills on which they scored lowest.

Have them share their responses with one other person and explain how they think those tips will help them coach their Improvement Teams.

D. Applying Coaching Skills to the Challenge Model

This activity allows coaches to prepare for their first coaching sessions by practicing on real Challenge Models.

- **DURATION** 2 hours
- MATERIALS

 Handouts: Improvement Teams' Challenge Models (collected at the end of Workshop #1, with the first four steps completed); Reviewing the First Steps in Improvement Teams' Challenge Models; Feedback on Coaching Practice for the First Steps in the Challenge Model
- **PROCESS:**

STEP I. Review Challenge Model from Workshop #1 (15 minutes)

CHOOSE one Challenge Model developed during Workshop #1 (handout, *Improvement Teams' Challenge Models.*) **DISTRIBUTE** copies of that Challenge Model along with the handout, *Reviewing the First Steps in Improvement Teams' Challenge Models.*

Ask participants to individually consider the Challenge Model in light of the questions in the *Reviewing the First Steps* handout. Have them share their views and any suggestions they would give an Improvement Team.

Remind the person assigned to this Improvement Team to pay close attention to these comments, which will be very useful in her/his work with the team.

STEP 2. Practice coaching an Improvement Team on their Challenge Model (15 minutes)

SAY: Each of you will now have the chance to practice coaching your real Improvement Teams and to get valuable feedback on your coaching skills from your colleagues.

DISTRIBUTE the handout, Feedback on Coaching Practice for the First Steps in the Challenge Model. Have participants read the handout aloud. Answer any questions they may have.

ASSIGN ROLES for the coaching practice.

- The participant who is working with this Improvement Team is the **COACH**.
- One other participant is the team member being coached the "COACHEE."
- The rest of the group is **OBSERVERS**.

Ask the coach to demonstrate how s/he might use coaching skills to help the team strengthen its Challenge Model, based on the comments from the previous exercise.

After 10 minutes, ask the observers to give the coach feedback, based on the handout, Feedback on Coaching Practice for the First Steps in the Challenge Model.

STEP 3. Repeat Steps I and 2 (30 minutes for each exercise)

REPEAT the reviewing/coaching/feedback sequence until every participant has had the chance to practice coaching.

In plenary, ask participants to share their reactions to and learnings from the coaching practice, as both coaches and people being coached.

Closing Technical Coaching Team Meeting #2

This session wraps up the meeting and determines next steps.

- **DURATION** 45 minutes
- MATERIALS Handouts: Evaluation Form for Technical Coaching Team Meeting 2
- **PROCESS:**

STEP I. Summarize learnings and reactions to this meeting (15 minutes)

ASK: What have you learned today about coaching? How are you feeling about taking on your responsibilities as a coach?

Encourage open discussion of any concerns about the Challenge Model content or coaching skills. Invite questions and respond to them.

STEP 2. Plan next steps (15 minutes)

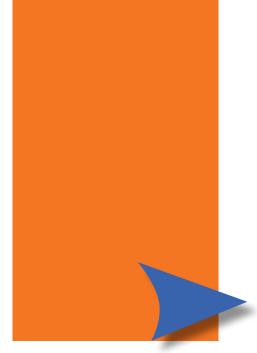
Discuss how coaching visits will be scheduled and organized.

Remind participants that they will work on the next part of the Challenge Model in Technical Coaching Team Meeting #3, after Workshop #2.

SET the date, time, and location of that meeting.

STEP 3. Evaluate the meeting (15 minutes)

Hand out a copy of the Evaluation Form for Technical Coaching Team Meeting 2. Give participants 15 minutes to complete it.



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RESPONSIBILITIES OF THE TECHNICAL COACHING TEAM

The Technical Coaching Team has between three and five members. The team includes expertise in relevant components of the health system, as well as in monitoring and evaluation.

In addition to their areas of expertise, team members should be receptive to innovation and open to ideas from the Improvement Teams. They need to be willing and able to devote the necessary time to facilitating workshops and coaching Improvement Teams between workshops.

Members are drawn from the country's health system, preferably from within the geographic location chosen for LDP+ implementation. They may be content experts and officers from relevant MOH departments or M&E specialists from the Ministry's Management Information Systems unit. In some instances, a member may be a regional expert from a relevant national program (e.g., HIV/AIDS Commission, National Malaria and TB Control Programs).

Training of the Technical Coaching Team covers the LDP+ process, with an emphasis on M&E elements. It also includes the principles and practices of coaching so that the Technical Coaching Team can effectively support the Improvement Teams to implement their LDP+ Action Plans and monitor and evaluate their results. Members of this the Team also co-lead Shared Learning Sessions with the Master Facilitator.

Key Responsibilities of the Technical Coaching Team:

Technical Support:

- Agree on the priority health area, proven interventions, and indicators presented at the Stakeholder Alignment Meeting.
- Review national and regional standards and guidelines for proposed interventions.
- Provide technical materials and training in the priority health area, including standards and guidelines.

Coaching and Facilitation:

- Participate in each of the LDP+ workshops, the Results Presentation, and the Technical Coaching Team Meetings.
- Provide coaching to the Improvement Teams between each workshop to help monitor progress; and assist Improvement Teams to refine their Challenge Model and Action Plan.
- Support Improvement Teams and help to monitor progress throughout the implementation of the improvement project.
- Co-lead Shared Learning Sessions with the Master Facilitator.

Monitoring and Evaluation:

- Oversee M&E and help teams to accurately evaluate and report their results.
- Assure that data are correctly collected, recorded, collated, analyzed, and reported.
- Collect and review reporting formats and share reports with the LDP+ Local Coordinator and Governing Body.
- Build on the findings to help the Governing Body plan for scale-up.

COACHING PRINCIPLES

Coaching is enabling others to reflect on their commitments and find new ways to achieve their intended results.

A coach helps the other person:

- Clarify her/his commitments and intended results.
- See new possibilities and actions, and expand her/his range of behavior choices.
- Understand her/his own contribution to recurrent problems and see the consequences of choices made.
- Think more clearly and see new ways of achieving intended results.

A coach does not:

- Evaluate and judge
- Blame, criticize, and scold
- Give solutions

An effective coach:

- Builds a relationship of trust and support.
- Cares about the person being coached/has the other's growth in mind.
- Listens well.
- Asks questions to clarify and illuminate a goal or challenge

To be coached, you have to:

- Want to learn and change.
- Be open to feedback from others.
- Take responsibility for your own actions.

For a more thorough review of coaching, you can download (for free) The eManager titled "Coaching for Professional Development and Organizational Results" from

http://www.msh.org/resource-center/emanager-I-2008.cfm

THREE-PERSON COACHING EXERCISE

FOR PERSON B, (the person being coached, or 'COACHEE")

- 1. Think of a challenging situation you are facing at work a real situation.
- 2. For no more than 10 minutes, tell the story of your situation to your coach, Person A.

FOR PERSON A (the COACH)

- 1. Listen to Person B's entire story carefully and without interrupting.
- 2. When Person B has finished telling it, ask 2 or 3 questions that can clarify the situation and that might stimulate Person B to gain a fresh perspective.
- 3. Only ask questions; don't try to offer solutions.

Person A has 5 minutes to coach. Here are some of the kinds of questions you could ask. You may think of others that could be asked:

- What are you committed to achieving?
- What have you achieved so far?
- What obstacles are you facing?
- Why do you think you are stuck?
- If it could turn out exactly as you dreamed, how would it turn out?
- What actions could you take to overcome your obstacles?
- What support do you need from others?
- How can I support you?
- 4. When Person C, the observer, gives you feedback at the end of this exercise, listen carefully. Feel free to ask any questions that will help you to better understand the feedback, but remember that this is a time to learn, not to explain or argue.

FOR PERSON C (the OBSERVER)

- 1. Watch how Person A, the coach, performs throughout the 10-minute coaching session. At the end of that time, you have 5 minutes to give feedback to the coach.
- 2. Start by describing what the coach did well: good listening, good questions, genuine interest, avoiding giving solutions, etc. Give specific examples.
- 3. Then describe actions that can be improved. Again, be specific about which action, comment, or question you think could be more useful or effective.
- 4. Offer specific suggestions for improving those actions.

Be careful to give feedback to the coach, not recommendations to the "coachee."

OALFA COACHING SKILLS SELF-ASSESSMENT

This self-assessment will help you evaluate your proficiency in five skills: observing, asking questions, listening, giving feedback, and coming to agreement.

Score each of the following statements by assigning a number from 1 to 5, using the scale at the top. Add up the scores for each skill and then add the five totals for your global score in the five OALCA skills.

I	2	3	. 4	5
l seldom behave like this	Sometimes I behave like this	I frequently behave like this	Very frequently I behave like this	l almost always behave like this

When Providing coaching...

Observe

■ I pay attention to the other per	son's facial expressions and body language.	
 I look for opportunities to have communication breakdowns. 	a conversation and work things out when there are misunderstandings or	
I am aware of other people's m	oods.	
■ I am observant; I notice when so	omeone else wants to talk to me.	
■ I am able to distinguish a coachi	ng opportunity from other interactions.	
	Observe Total:	

Ask

My questions are motivated by a desire to understand the person or situation better.	
When I ask a question, I probe further and inquire in more depth rather than accepting the first answer I receive.	
I ask questions to broaden my perceptions about the issue rather than to confirm my point of view.	
When the other person expresses his/her opinions, I inquire about the facts on which these opinions are based.	
I ask questions to challenge the other person's interpretation of a situation or experience.	
Ask Total:	

Listen

I listen attentively to the other person without thinking how I am going to respond.	
I try to imagine being in the other person's shoes when I am listening.	
I do not judge the other person's behavior.	
I summarize the messages I hear using my own words to ensure that I understood them.	
I listen for what is not said.	
Listen Total:	

continued next page

OALFA COACHING SKILLS SELF-ASSESSMENT (PG 2)

Continued from other side

Give Feedback

I describe to the other person what I observe about his/her behavior in very specific terms.	
I describe to the other person the likely consequences of his/her behavior.	
I offer feedback in private.	
I always start with strengths when offering feedback.	
I give feedback in such a way that the other person can hear what I have to say.	
Feedback Total:	
Come to Agreement	
■ I help the other person identify concrete and realistic actions s/he can take.	
■ I help the other person identify obstacles and discover practical ways to overcome them.	
I establish clear agreements that underscore the responsibility of the other person for carrying them out.	
■ I request a decision and commitment from the other person to change his/her behavior.	
I follow up on these agreements periodically.	
Agreement Total:	
OALFA Total:	

If you score 100 points or more, you are very practiced in these coaching skills.

If you score less than 75, there is room for improvement; you could request some coaching yourself. The next handout provides some suggestions for improving your coaching skills.

TIPS FOR IMPROVING **OALFA** COACHING SKILLS

OALFA SKILLS	A SKILLS WAYS TO STRENGTHEN THESE SKILLS			
Observe	■ Try to observe without judgment. Stick to the facts (what do you see?) rather than what you think you see. Write down these facts and check how many of them are objectively observable and how many are subjective impressions.			
	When you interpret what you observe, check whether your interpretation is correct by asking: "You seem tense. Is something the matter?"			
Ask	If you plan to have a conversation, prepare good questions in advance. Review each question to make sure it is an authentic inquiry that will help learning, rather than one that blocks learning.			
	Before the conversation, tell yourself: "I know very little about this person's experience." Or, "I would like to get his perspective, especially if it is different from mine."			
	After the conversation, review the questions you actually asked and the answers you received. What have you learned about the other person? About yourself?			
Listen	Hold back when you find yourself wanting to give advice. Instead listen for hints that the other person already knows the content of your advice.			
	Practice writing a summary of what a person being coached said in a conversation.			
	Practice identifying the feeling underneath the words. Verify if you were correct.			
	Increase your tolerance for silence. If you wait patiently, you allow the other person to respond thoughtfully.			
Feedback	■ Think about how you would like to receive feedback from another person.			
	 Practice being specific when giving feedback, referring to specific behaviors without labeling them. 			
	Before giving negative feedback, look for behaviors that merit applause and encouragement, and then phrase the negative feedback as a request for improvement.			
Agreement	Each time you make an agreement, ask yourself whether it is actionable and has a time limit.			
	Write down reminders for follow-up in your diary or on your calendar.			
	Before closing a conversation, make sure there is an agreement.			

REVIEWING THE FIRST STEPS IN IMPROVEMENT TEAMS' CHALLENGE MODELS

The Vision

- Is the team's vision consistent with the priority health area and their organizational mission?
- Does the vision seem likely to inspire the team as something to work towards?
- Are there any changes in ideas or wording that would make the vision stronger?

The Current Situation

- Has the team scanned their internal and external environments in the context of the priority health area and national/regional indicators?
- Is the description an accurate statement of all the relevant facts to which the team has access?
- Are there any changes in wording that would describe the current situation more accurately and comprehensively?

The Measurable Result

Does the result meet all five SMART criteria?

- **Specific:** Is the result clear enough so that others can understand what it will look like when it is accomplished?
 - Does the result have an indicator of what will change over time?
 - ➤ Is the result limited to I—2 indicators?
- **Measurable:** Can progress towards the result be measured using numbers, rates, proportions, or percentages?
 - Does the result state a baseline value for the indicator?
 - Does it state a target value or goal for the indicator?
 - Is it expressed in numbers as well as in percentages?
- **Appropriate:** Is the result aligned with the priority health area and the goals of the organization and the team?
- Realistic: Can the team achieve this result with their current activities and resources?
- Time-bound: Does the result have a start date and an end date?

Are there any changes in wording that would make the measurable result stronger?

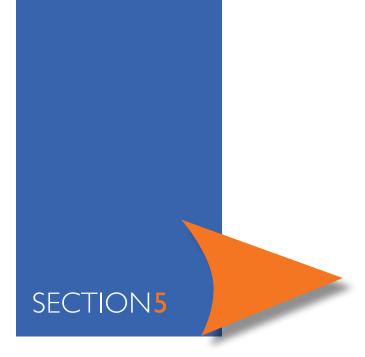
FEEDBACK ON COACHING PRACTICE FOR THE FIRST STEPS IN THE CHALLENGE MODEL

Questions for the Observer:

General coaching skills: creating	What did the coach say and do to foster a positive physical and emotional environment for this exercise?
	What else could s/he have said or done to foster that environment?
a positive environment	Can you give any examples of things s/he said or did in any part of this activity that was not appropriate or helpful? If so, what might the coach have said or done differently?
The team's vision	What did the coach say and do to confirm or help the team improve the vision?What useful questions did s/he ask?
	What else might s/he have said or done to help make the vision stronger?
The current situation	What did the coach say and do to help the team analyze the current situation and link it to their measurable result?
	What useful questions did s/he ask?
	What else might s/he have said or done to help them analyze and describe their current situation more accurately?
The measurable	■ What did the coach say and do to help the team make their result SMART?
result	■ What useful questions did s/he ask?
	What else might s/he have said or done to help create a SMART result?

EVALUATION FORM: TECHNICAL COACHING TEAM MEETING #2

Date: _	
	complete this evaluation form.We appreciate your assistance in helping us to improve the LDP+als and other aspects of this program.Thank you.
I.	What did you learn in this Technical Coaching Team Meeting?
2.	How will what you learned help you fulfill your role as a member of the Technical Coaching Team?
3.	What feedback do you want to give to the LDP+ facilitators?



WORKSHOP 2: FOCUSING, PLANNING, ALIGNING, AND MOBILIZING

AGENDA AND OBJECTIVES: WORKSHOP #2

PURPOSE

Apply the leading, managing, and governing practices to move from vision to action.

OBJECTIVES

- To introduce tools and techniques to understanding focusing as a leadership practice
- To understand the effect of gender on leadership approaches
- To identify obstacles and their root causes
- To propose priority actions with a gender perspective
- To learn how to focus on priorities to achieve important results
- To create action plans that will guide teams toward their measurable results

SESSIONS

- Welcome back and assignment review: Review what participants learned during Workshop #1
- Session 9: Mobilizing for Results: Learn how to mobilize stakeholders
- Session 10: Focusing: Understand focusing as a leadership practice
- Session 11: Focusing the Plan: Identify priority actions and learn how to focus personally and as a team to achieve important results
- Session 12: From Vision to Action: Create Action Plans that will guide the teams toward their measurable result

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	DAY ONE	DAY TWO	DAY THREE			
	Opening (15 min.)	Review (20 min.)	Review (20 min.)			
AM	Welcome Back and Assignment Review (3 hr.)	Session 9: Mobilizing for Results (conclusion) (1 hr.) Session 10: Focusing (1 hr. 30 min.)	Session II: Focusing the Plan (3 hr.)			
Lunci	Lunch Break					
	Assignment Review (conclusion): (1 hr., or as needed, depending on number of teams)	Session 10: Focusing (conclusion) (3 hr. 30 min.)	Session 11: Focusing the Plan (1 hr.)			
PM	Session 9: Mobilizing for Results (3 hr.) Closing Reflection (30 min.)	Closing Reflection (30 min.)	Session 12: From Vision to Action (2 hr.) Workshop Evaluation (10 min.)			

PREPARATIONS

You will need to give each participant something to use to store workshop handouts, such as a plastic case, folder, or three-ring binder.

Copy the handouts before each session. The plan for each activity shows what you need to use for that activity. You can find all of the handouts in the Handout sections of this Guide or on LeaderNet in the Leadership Facilitators section, in Resources. Start at http://www.leadernet.org/.

NOTE: LeaderNet is a global community of practice for managers who lead and LDP+ and Virtual Leadership Development Program (VLDP) facilitators. To use LeaderNet, first go to http://www.leadernet.org/ and register (there is no cost).

> You will also need a variety of supplies for each session, for example, flipcharts, paper, and pencils. The required supplies are also listed with each session and each activity. Sometimes you will need to prepare flipcharts ahead of time.

Read all of the materials in advance of the meeting. Use the information provided on timing in the facilitators' notes to determine how much time to give participants to complete forms, work individually, in pairs, groups, etc.

REFLECTION AND REVIEW

Reflection. There is time for reflection at the end of each day so that participants can talk about what they learned and what seemed most important to them.

Review. Days 2 and 3 start with a review of the content from the day before. It has worked well to have a participant make a short, informal presentation summarizing what the group learned the previous day.

NOTE: Regular reflection is an important leadership practice. It enables people to have time to think about what they have learned and how to apply it.

EVALUATIONS

Workshop evaluation. To evaluate the workshop, copy and give out the workshop evaluation form and the Feedback for LDP+ Facilitator handouts. They are the last two pages of Workshop #2 handouts section of this Guide.

Progress evaluation. The success of the program is measured by evaluating the progress that the teams make toward their measurable results. To support this, the Technical Coaching Team should ensure that the teams continuously monitor their progress against their baseline using clear indicators.

BETWEEN WORKSHOPS 2 AND 3

Full team meetings. Participants hold meetings with the rest of their teams back at their work sites to report on what they learned in the workshop and to review the results of their scanning.

Coaching sessions. Members of the LDP+ Technical Coaching Team work with the teams between each workshop. In these meetings, they review progress and topics covered in the workshop as well as provide feedback and support to the teams as the teams work on their Challenge Models and prepare their Action Plans.



WORKSHOP 2: DAY ONE

WELCOME BACK AND REVIEW

Opening

Review the Learning from Workshop I and the Objectives for Workshop 2

— LUNCH BREAK —

Review the Learning from Workshop I and the Objectives for Workshop 2 (continued)

SESSION 9: MOBILIZING FOR RESULTS

- 9.A Balancing Two Approaches to Leadership
- 9.B Understanding the Effect of Gender on Leadership Approaches
- 9.C Analyzing Stakeholder Needs and Interests—A Scanning and **Mobilizing Exercise**

Closing



WELCOME BACK AND ASSIGNMENT REVIEW

Opening



15 minutes

Ask participants to sit in their teams from their work sites.

This is a time for administrative and logistical announcements.

Review the Learning from Workshop #1 and the Objectives for Workshop #2

This exercise reviews what participants learned during the last workshop.

- **DURATION** 2.5-3.5 hours
- **MATERIALS** Prepared flipchart with Workshop #2 objectives □ Flipchart with Assignment for Workshop #2
 - Handouts: LDP+ Workshop #2 Agenda; Assignment for Workshop #2
- **PROCESS:**

Review of Workshop #1 content (20 minutes) STEP I.

In the large group:

SAY: Now we will hear from a participant about what we learned during the previous workshop.

You will have asked the participant at the end of Workshop #1 to speak to the group. After that person finishes,

ASK: What questions does anyone have at this point in the process?

STEP 2. Overview and agenda for Workshop #2 (10 minutes)

HAND OUT the LDP+ Workshop #2 Agenda.

Review the workshop's objectives and schedule.

STEP 3. Report back on assignments (2–3 hrs.)

HAND OUT AND REVIEW the Assignment for Workshop #2. Invite each team to the front of the room to PRESENT. Depending on the number of teams, allow about 20–30 minutes per team for the presentation, feedback, and questions.

■ Have teams **SHOW** their revised Challenge Models. They should explain how they moved forward and refined the work they did in Workshop #1.



NOTE: Allow questions and clarifications but keep the focus on contributing to the teams rather than on criticizing them.

BREAK FOR LUNCH at an appropriate time so that each team has time to present without feeling rushed, and participants have plenty of time to ask questions.

Resume and **COMPLETE** the team presentations.

STEP 4. Wrap up (10 minutes)

ASK: Where did you see signs of scanning activities?

HIGHLIGHT the data-gathering methods that the teams used and their effectiveness in gathering key information.

ASK: What would have happened if teams had not scanned in this way?

What have we learned about scanning?

SESSION 9. MOBILIZING FOR RESULTS

PURPOSE	Learn how to mobilize stakeholders.
OBJECTIVE	 To mobilize resources to achieve your desired measurable results
PREPARATIONS	Read the facilitator notes for this session.
	 Prepare the required flipcharts.
	 Prepare copies of all handouts.
MATERIALS	□ Flipchart—easel and paper
	Таре
	Colored markers
HANDOUTS	□ Self-Assessment on Leadership Approaches
	 Two Approaches to Leadership
	 Basic Gender Concepts
	 Stakeholder Analysis Worksheet
	 Resource Mobilization Request Form

9.A Balancing Two Approaches to Leadership

This exercise demonstrates that both relational and positional leadership approaches contribute to positive results.

- **DURATION** 60 minutes
- **MATERIALS** ☐ Handouts: Self-Assessment on Leadership Approaches; Two Approaches to Leadership
- **PROCESS:**

STEP I. Review activity objectives (5 minutes)

It is important to understand different leadership approaches in your team and SAY: how best to work together to use all of your strengths.

When we finish this activity, you will

- Understand relational and positional leadership approaches.
- Be aware of how both relational and positional leadership contributes to results.
- Recognize the importance of balancing both approaches in a work group or team.

STEP 2. Self-assessment of leadership approaches (15 minutes)

HAND OUT the Self-Assessment on Leadership Approaches.

SAY: This will help you to assess the approach that you use most often in work situations.

> Please read the statements and circle 1, 2, 3, or 4 to indicate how often you use this approach when you work in a group.

For example, if you take responsibility for leading the group to results most of the time, you would circle 4 in the first table.

Only choose one number for each set of I-4.

After they have filled out the Assessment:

SAY: Once you have circled one number for each set of statements, look and see whether you have circles on more 1s and 2s, or more 3s and 4s.

SAY: If you find that you have more Is and 2s, then you tend to use the relational approach more often.

If you have more 3s and 4s, then you tend to use the positional approach

Discuss this in pairs for five minutes.

STEP 3. Balancing leadership approaches in a team (30 minutes)

HAND OUT the Two Approaches to Leadership.

SAY: Look at the descriptions of the two different types of leadership.

Relational leadership depends more on the strength of one's relationships.

Positional leadership depends more on one's position of authority.

Note the important statement at the top of the handout: "Effective leaders balance relational and positional approaches."

Compare your self-assessment with the descriptions of these two approaches to leadership. Consider how closely these descriptions fit your usual behavior.

SAY: Form pairs and spend five minutes each discussing how you might balance the two approaches.

Lead a large-group discussion on the effects of these two approaches to leadership.

ASK: What effects can each of the two approaches have on how members of a team work together?

> In our teams, how can we honor and appreciate others who use more relational or positional approaches to leadership than we do?

What commitments can your team make to appreciate others approaches to leadership?

In plenary, have groups **REPORT** out the results of their discussions.



Understanding the Effect of Gender on Leadership Approaches

In this exercise, participants begin to understand how gender roles affect leadership approaches and to support women and men to lead together with dignity and respect.

- **DURATION** I hour 30 minutes
- **MATERIALS** □ Handout: Basic Gender Concepts
- **PROCESS:**

Clarify the definitions and implications of "sex" and "gender" STEP I. (30 minutes)

DISTRIBUTE the handout, Basic Gender Concepts.

SAY: We are discussing gender. We need to be sure we are using the same definitions for key gender concepts.

On the handout you see the definitions of gender and sex.

Gender is a culturally-defined set of economic, social, and political roles, responsibilities, rights, entitlements obligations, associated with being female and male, as well as the power relations between and among women and men, boys and girls.

Sex is the biological differences between females and males.

Now, let's review the definitions of sex, gender, gender equity and gender equality, gender- based violence, empowerment and male involvement, in the handout.

Allow participants time to review the handout and take any clarifying questions in plenary.

STEP 2. Consider historic leadership roles of women and men (30 minutes)

SAY: If we want our teams to work well, we need to foster gender equity in leadership.

ASK: Do you think women and men have the same opportunities to be in positions of leadership and decision-making? Why or why not?

SAY: Women (as a group, not all) have historically been excluded from most formal positions of leadership, authority, and power. They have usually been held responsible for building and maintaining relationships.

> Although women may have had some influence over the resources needed to carry out important activities, they have rarely had control over these resources.

> Men (as a group, not all) have historically held leadership positions with greater authority and formal power.

This has enabled men to have more control over the resources needed for important activities.

STEP 3. Consider how we can meet our commitment to gender equity in leadership (30 minutes)

SAY: Research has shown that effective female and male leaders use both relational and positional leadership approaches.

> We want to empower both women and men to be effective leaders who use both approaches.

Ask the teams to discuss the following question for 10 minutes:

How can our team encourage and support women and men to use both positional and relational leadership approaches?

In plenary, have groups **REPORT** out the results of their discussions.

Tips for Facilitator:

- I—Maintain the inquiry mode during the facilitation. Recognize that gender issues can touch our own deeper feelings and may tempt us to advocate for our point of view.
- 2—Emphasize gender equity and access to leadership roles for both females and males.
- 3—Avoid transforming the session into a forum for complaints, and try to focus the attention on the future: Ask "What can we do to improve both women's and men's leadership?"



9.C Analyzing Stakeholder Needs and Interests—A Scanning and **Mobilizing Exercise**

This exercise helps participants to identify their stakeholders and understand their needs and interests using the practices of focusing, planning, scanning and mobilizing.

DURATION

45 minutes

MATERIALS

- Prepared flipchart with the definition of stakeholders: Stakeholders are those individuals or groups who have a stake in your achievement of the result you have selected. This includes those who can affect, and are affected, by the result—in positive or negative ways.
- Handout: Stakeholder Analysis Worksheet

PROCESS:

STEP 1. Identify stakeholders (20 minutes)

ASK: What do we mean by the word "stakeholder?"

Take a few answers.

SAY: Stakeholders are those individuals or groups who have an interest in the result you have selected.

> Stakeholders include anyone who can help you succeed—or make it hard for you. A stakeholder is also anyone who will be affected when you achieve your result. Will they be happy? Unhappy?

HAND OUT and review the Stakeholder Analysis Worksheet.

STEP 2. Identify stakeholder interests and concerns (25 minutes)

REFER to the flipchart with the definition of stakeholders.

SAY: In your team, brainstorm a list of all stakeholders and circle the five most critical ones.

Put these in the left column of the worksheet.

For each stakeholder, discuss the questions in the next three columns:

- What is the stakeholder interested in?
- What is the stakeholder's biggest concern?
- What do you need to do to get the stakeholder's support?

Complete the worksheet and discuss next steps with your team.

We will use this information in a session tomorrow in order to think through how these stakeholders can be mobilized to support the implementation of your Action Plans and your achievement of results.

Closing



30 minutes

ASK: What did you learn today? What stands out for you?

Each of you should take about five minutes to write down your answers.

When you are done, discuss your answers with a person next to you.

After about 10 minutes, addressing the entire group:

SAY: Would each pair please share one of your answers with the group? We will go around the room.

Continue to hear pairs' answers until there are no more.

Ask a participant to be prepared to review what he or she learned in the Day One sessions at the start of Day Two.



WORKSHOP 2: DAY T

SESSION 9: MOBILIZING FOR RESULTS (CONCLUSION)

Review

9.D Mobilizing Stakeholders to Commit Resources

SESSION 10: FOCUSING

10.A What is Focusing?

10.B Recognizing your Sphere of Influence

— LUNCH BREAK —

10.C Identify Obstacles to Reaching the Result

10.D Diagnosing Root Causes—The Five Whys Technique

Closing



Review



DURATION

20 minutes

Ask participants to sit in their work teams.

Now we will hear from a participant about what we learned yesterday. SAY:

NOTE: When participants speak to the entire group, it provides an opportunity for them to begin seeing themselves in the facilitator role.

Remind participants that you are picking up where you left off on Day One with the exploration of mobilizing stakeholders.

9D. Mobilizing Stakeholders to Commit Resources

This exercise demonstrates how mobilizing resources requires analysis and planning.



60 minutes



- ☐ Handouts: Resource Mobilization Request; Stakeholder **Analysis Worksheet**
- Blank flipchart

NOTE: Activities for mobilizing resources need to be inserted into the Action Plan that will be developed in the next session. This is "aligning and mobilizing" at work!

PROCESS:

STEP I Mobilizing support from stakeholders (5 minutes)

HAND OUT copies of the Resource Mobilization Request Form.

SAY: We will use the Stakeholder Analysis that you completed yesterday as a basis for this exercise.

SAY: As we discussed, key stakeholders are people or groups who have a stake in the result you have selected.

> This includes those who can affect your progress as well as those who are affected by your result.

Whether the impact by them or on them is positive or negative—they are your stakeholders and you need to enlist their support.

Without stakeholders' support, we would probably not make much progress toward our desired results.

STEP 2. Planning for mobilization (30 minutes)

SAY: Review the Stakeholder Analysis Worksheet: who the stakeholders are, their interests and concerns, and what you need to do to get their support.

> In the left column of the Resource Mobilization Request Form, write in the name of each stakeholder from whom you need a particular resource.



SAY: Examples of resources are money, volunteer labor, access to people of influence, or materials.

> For each resource needed, fill in the columns across the sheet: what exactly do you want from that stakeholder, who will make the request, and by when?

STEP 3. Sharing and learning together (25 minutes)

Invite each team to READ one row (i.e., about one stakeholder and one set of resources) from their worksheets.

Repeat the process until all the teams have shared everything on their worksheets.

ASK: What are some of the activities that you need to include in your Action Plan to make sure you actually get the resources you need?

Take responses and **RECORD** them on a flipchart.

- Examples might be visits, meetings, telephone conversations, sending materials, and inviting or accompanying others on a field trip to see something in action.
- This is a chance for teams to gain new ideas from the exchange.
- SAY: As you begin to work on your Action Plans, add any activities you need to act upon to mobilize resources.
- SAY: Use your Resource Mobilization Request Form as a monitoring tool in your upcoming meetings with your teams.

Now that you have the names of people responsible for making each request for resources, you can support and hold each other accountable to follow through.

NOTE: When indicating who will make each request, exclude the names of people who are not part of the team or are not present in the room. Accountability has to lie with the team!

SESSION 10. FOCUSING

PURPOSE	Understand focusing as a leadership practice.
OBJECTIVES	■ To explain focusing
Objectives	 To explain focusing tools and techniques
	·
	 To identify obstacles that block getting to a desired result
	■ To apply a root cause analysis
PREPARATIONS	Read the facilitator notes for this session.
	Prepare the required flipcharts.
	 Prepare copies of all handouts.
	Select one measurable result to use for the activity, "Obstacles to Reaching the Result," and write it on a flipchart. Practice your use of the Five Whys Technique with one of your co-facilitators. Select an example to use with which you are comfortable.
MATERIALS	☐ Flipchart—easel and paper
	Таре
	Colored markers
HANDOUTS	☐ Integrated Practices for High Performing Health Systems
	 Categories of Obstacles
	 Basic Gender Concepts
	□ Gender Equity Analysis Tool
	 The Five Whys Technique

10.A What is Focusing?

This exercise explores the importance of focusing within an organization.

- **DURATION** 30 minutes
- **MATERIALS** ☐ Handout: Integrated Practices for High Performing Health Systems
 - Blank flipchart
- **PROCESS:**

The leadership practice of focusing (10 minutes) STEP 1.

In the large group:

ASK: What does focusing mean?

Why is it important for leaders to focus?

What happens when a group or organization does not have a clear focus?

RECORD answers on a flipchart.

Review the definition of focusing from the Integrated Practices handout.

SAY: Focusing means:

- To determine key priorities for action, and
- To create a common picture of desired results.

SAY: The organizational outcome of good focusing is:

> The organization's work is directed by a well-defined mission and strategy, and priorities are clear.

STEP 2. Priorities (10 minutes)

To the large group:

SAY: For teams to focus, you need to know the focus of your larger institution.

> In the last workshop, we discussed the priority health area and indicators that would focus our teams' work.

WRITE priority health area and indicators on a flipchart.

STEP 3. Organizational focus (10 minutes)

In the large group:

ASK: Other than the priority health area and indicators, what else does your organization have that you can use as a focusing tool? (mission, strategy, annual goals, etc.)

WRITE responses on a flipchart.

10.B Recognizing Your Sphere of Influence

This exercise helps people think about what is under their control to change and what is not, given their role or position in their organization. This discussion will help to focus their Action Plans.



60 minutes



- □ Large flipchart (2 sheets together) with three concentric circles of increasing diameter drawn around each other
- Prepared (covered) flipchart with the serenity prayer written on it: Give me the serenity to accept the things I cannot change, courage to change the things I can; and the wisdom to know the difference.

PROCESS:

STEP I. Define circles of control and influence (10 minutes)

In the large group, **SHOW** the three circles and **WRITE**:

- "'control' inside the innermost circle:
- "influence" in the middle circle;
- "no control and little/no influence" in the outer circle.

Discuss the distinctions among the three circles. Ask for examples for each circle, such as:

- Inner circle: our words and our actions.
- Middle circle: our neighborhood, our work environment, friends, colleagues, family (we can influence them but we cannot control them!).
- Outer circle: natural phenomena such as earthquakes or weather, politics and policies that fall far outside our own reach, and behavior of people with whom we have no contact.

ASK: Which of these circles do you worry about the most?

NOTE: This is usually the outer circle, where we cannot do much.

ASK: In which circle are you most likely to have an impact?

What happens when you have an impact there?

How does that affect the other circles?

STEP 2. Discuss practices that help to influence (15 minutes)

In their teams, ask the participants to reflect on and discuss what leading, managing, and governing practices they need to use to effectively influence others.

What activities do they have the most influence over as a team?

Ask them to **MAKE A LIST** to present to the larger group.

STEP 3. Present practices that support influencing (15 minutes)

With the whole group, ask that the teams **PRESENT** their reflections on influencing practices.

Wrap up (5 minutes) STEP 4.

REVEAL AND READ (or have someone read) the serenity prayer from the flipchart.

Emphasize that leadership is about focusing on things we can influence rather than complaining about things we can do little about.

10.C Identify Obstacles to Reaching the Result

This exercise helps participants identify the work needed to achieve the desired measurable result.



MATERIALS

- Prepared flipchart with the measurable result you selected
- Blank flipchart sheets
- Tape to stick papers to the wall
- Half sheets of paper, enough to give each team from three to five of them
- Markers for each group to write their ideas on the paper
- Handouts: Categories of Obstacles; Gender Equity Analysis Tool

PROCESS:

STEP I Settling in after lunch (15 minutes)

Ask participants to sit with their work teams.

STEP 2. Identify obstacles to reaching the result (60 minutes)

REFER TO the prepared flipchart with the desired measurable result you selected for demonstration. Explain to the group how you selected and found it.

ASK: Why aren't you already there?

What is blocking the way to this result—what are the obstacles?

DISTRIBUTE the handout, Categories of Obstacles.

SAY: There are several broad categories into which your team's obstacles may fall. Some of the most common are:

- Policies and procedures
- **Providers**
- Equipment, infrastructure, and supplies
- Patients, clients, individuals, or communities

ASK: What are examples in these categories that apply to the delivery and use of health services?

POST four blank flipchart sheets with the categories as headings. WRITE examples on appropriate flipcharts as participants suggest them.

SAY: Please note that gender is a cross-cutting issue that needs to be taken into account in conducting this analysis. There are many examples of gender issues that could affect the provision and use of health services in all categories. For example, policies can restrict women's access to health services, (e.g., women often need "permission" to use family planning services or methods) or provider attitudes can be biased and therefore limit women's use of services in general.

DISTRIBUTE the handout, Gender Equity Analysis Tool.

SAY: When making the root cause analysis we can think about gender equity in terms of three different topics:

- Opportunity: How does the health system promote gender equity in management and leadership roles?
- Access: How are health services organized so that it is easy for both women and men to receive quality services?
- Involvement: How do women and men in the community participate in decisions about health services?

SAY: Now in your groups, begin filling in this worksheet to identify some genderrelated obstacles that may block women or men from accessing or using services.

STEP 3. Brainstorm the main obstacles to achieving the desired measurable results (30 minutes)

ASK: What are the main obstacles your team faces in achieving your desired measurable result?

SAY: With your Improvement Team, write down all the obstacles you can think of.

> Consider obstacles in each of the categories we just discussed: policies and procedures; providers; equipment, infrastructure, and supplies; patients, clients, individuals, or communities; and the cross-cutting issue of gender. Add any other obstacles that don't fit into these categories.

In plenary, ask teams to share the obstacles they identified. GO AROUND the room, asking for one item at a time from each team, and then repeat the process until the teams have added all their obstacles to the list.

WRITE all their obstacles on a flipchart.



STEP 4. Identify the most critical obstacles (30 minutes)

SAY: You have identified many obstacles, but it is more useful to concentrate on the few that cause most of the difficulties in achieving your desired result.

> For example, there can be many reasons why women don't access prevention of mother-to-child transmission (PMTCT) services, but you may have observed that most pregnant women don't even come to the health center for prenatal services. In this instance, it would be good to analyze the causes of that obstacle – not coming in for prenatal services – rather than of any obstacles related to PMTCT services themselves.

SAY: With your Improvement Team, look over the obstacles you identified and mark them according to how critical they are. Write "A" next to those you consider the most critical, "C" next to the least critical, and "B" next to those in the middle.

> Think of the spheres of influence from the previous session. Select obstacles that are in your control, not outside it. For example, resources from others are outside your control, although possibly within your sphere of influence.

Then select the three to five most critical obstacles to achieving your team's desired measurable result. Check to be sure you all agree on your choice.

Write each obstacle on a separate piece of flipchart paper.

Have teams **REPORT** their selected obstacles in plenary and briefly explain their reasons.

10.D Diagnosing Root Causes—The Five Whys Techniques

This exercise helps participants to tell the difference between presenting symptoms and root causes and then to diagnose root causes.



I hour 10 minutes



- Prepared flipchart: A tree with its roots showing.
- Prepared flipchart with the definition of root cause analysis: Root cause analysis involves problem-solving methods that go beneath symptoms to find the basic causes of problems. We use root cause analysis because problems are best solved by trying to correct or remove underlying causes, as opposed to merely dealing with obvious symptoms.
- Prepared flipchart with example table including obstacle, root cause, and priority actions.
- Handout: The Five Whys Technique
- Blank flipcharts: One for each team

PROCESS:

STEP I. Introduce the Five Whys Technique for root cause analysis (20 minutes)

SHOW the flipchart with the picture of a tree with its roots showing.

ASK: What does this have to do with focusing and planning?

Take responses until someone mentions root cause analysis.

ASK: Does anyone know what root cause analysis is?

Take responses and encourage ("very good," "that makes sense," and so on) explanations of root cause that are correct or nearly so.

SAY: Root cause analysis involves problem-solving methods that go beneath symptoms to find the basic causes of problems.

> We use root cause analysis because problems are best solved by trying to correct or remove underlying causes, as opposed to merely dealing with obvious symptoms.

SAY: You will learn some structured ways to diagnose organizational problems, similar to the ways we learn to diagnose medical problems.

> One way is to keep asking "Why?" in order to get beneath the symptoms and learn what causes them.



WRITE, on a separate flipchart—one under the other—Why? Why? Why? Why? Why?

Give an example of how these "Whys" are applied to the causes listed under the four categories described in the previous activity. Select one cause and start asking "why?"

ASK: Why is this happening?

Repeat the question after each response to illustrate the technique.

SAY: Although we call this technique "The Five Whys," you may not always ask "Why?" exactly five times. Sometimes only three "Whys" are enough, and sometimes you need to ask "Why" more than five times to get to the real

root cause.

When to stop asking "Why?" depends on the answers. It is important to stop at a "Why?" that is within your sphere of influence, not one that is outside of your influence.

Practice the Five Whys technique (40 minutes) STEP 2.

In the large group:

SAY: You have identified the main obstacles to achieving a desired measurable result that is tied to your organization's institutional priorities and your team's vision.

> To develop your Action Plan, you have to take a closer look at the root causes of these obstacles.

The better your analysis, the better your Action Plan.

HAND OUT copies of The Five Whys Technique.

SAY: For each of the root causes you listed, ask about five "Why?" questions. (Remember that you may need more or less than five.) Stop when you come to the last cause that is actionable – that your team feels you can do something about. These are the root causes that you will focus on in your Action Plans.

> If the question is, "Why are women not coming to the clinic?", poverty or lack of education might be at the root.

But it would be better to stop at a more actionable root cause, such as "Because they don't know how they will benefit from the services we offer." It is better to stop there. Continuing to ask "Why?" would not yield information you can act on.

When you come to the end of your "Why" questions for each obstacle, fill out the flipchart paper for that obstacle with a table that includes the last root cause and leaves space for priority actions to address it.

SHOW an example on a flipchart:

Obstacle	Root Cause	Priority Actions
Women don't come to the health center for PMTCT services.	Nobody has sensitized pregnant women in this community to the fact that PMTCT can save babies' lives.	

CIRCULATE among the teams, listen closely to the teams' deliberations, and check their flipchart sheets to make sure they understand the task and are going to root causes over which they have control.

NOTE: As you circulate, make sure the teams do not produce a long list of vague descriptions, such as "a lack of human resources." If you see this tendency, help the teams analyze more deeply by asking, "Why is that?"

STEP 3. Report out on progress (20 minutes)

Invite each team to **SHARE** their flipchart sheets in plenary.

Discuss any concerns or questions.

Closing



30 minutes

ASK: What did you learn today? What stands out for you?

Each of you should take about five minutes to write down your answers.

When you are done, discuss your answers with a person next to you.

After about 10 minutes, addressing the entire group:

SAY: Would each pair please share one of your answers with the group? We will go around the room.

Continue to hear pairs' answers until there are no more.

Ask a participant to be prepared to review what he or she learned in the Day Two sessions at the start of Day Three.



WORKSHOP 2: DAY THREE

SESSION 11: FOCUSING THE PLAN

Review

- II.A Brainstorming Priority Actions to Address Root Causes
- 11.B Analyzing Priority Actions with Gender Perspective
- II.C Setting Priorities Using the Priority Matrix

— LUNCH BREAK —

II.D Putting First Things First—The Important and Urgent Matrix

SESSION 12: FROM VISION TO ACTION

- 12.A Developing an Action Plan that Leads to Results
- 12.B Reflecting on Workshop 2 and Preparing for Workshop 3 Workshop Evaluation



SESSION 11. FOCUSING THE PLAN

PURPOSE	Identify priority actions and learn how to focus personally and as a team to achieve important results.
OBJECTIVES	■ To identify priorities
	To analyze priority actions with a gender perspective
	To distinguish between "Important" and "Urgent"
PREPARATIONS	Read the facilitator notes for this session.
	Prepare the required flipcharts.
	Prepare copies of all handouts.
	 Try the tools out with a co-facilitator or friend to familiarize yourself with them.
MATERIALS	□ Flipchart—easel and paper
	Таре
	Colored markers
HANDOUTS	 Setting Priorities Using the Priority Matrix (sample)
	 Setting Priorities Using the Priority Matrix (blank worksheet)
	□ Challenge Model
	 Gender Continuum Framework
	Gender Continuum Scenarios
	The Important and Urgent Matrix

Review



20 minutes

Ask participants to sit in their work teams.

SAY: Now we will hear from a participant about what we learned yesterday.

NOTE: When participants speak to the entire group, it provides an opportunity for them to begin seeing themselves in the facilitator role.

Remind participants that you are picking up where you left off on Day Two and will now use the aligning, mobilizing, focusing, and planning tools discussed earlier in this workshop to focus the plan.

11.A Brainstorming Priority Actions to Address Root Causes

This exercise helps participants identify specific priority actions that teams can use to overcome the root causes of their obstacles and achieve their measurable result.

- **DURATION**
- 30 minutes
- **MATERIALS**
- □ Flipchart with Brainstorming Guidelines:
 - > Do not criticize any of the ideas.
 - ➤ Do not discuss ideas during the brainstorming session.
 - Think creatively.
- **PROCESS:**

Brainstorm Priority Actions (15 minutes) STEP I

SAY:

Now that you have identified the root causes blocking you from achieving your measurable result, it is time to brainstorm some high level activities that will be key to moving you forward in achieving your measurable result. Consider your root causes as well as the proven interventions suggested by the coaches as you think of high level activities to achieve your measurable result.



SAY: The purpose of brainstorming is to generate many creative ideas to help your teams make improvements.

> Through this process, all team members should actively participate. There are a few general rules of brainstorming.

SHOW the flipchart with Brainstorming Guidelines.

ASK: Are there any other guidelines we need to consider so that we generate a good amount of creative ideas for achieving our measurable result?

ADD any suggestions to the flipchart.

SAY: Individually reflect on your team's desired measurable result and the root causes.

> Take five minutes to individually write down priority actions that you can take to overcome these obstacles and achieve your result.

SAY: In your teams, record all of the brainstormed ideas on a piece of flipchart paper. As a group, combine ideas that are similar.

STEP 2. Report on progress (15 minutes)

Invite each team to **SHARE** their flipchart sheets in plenary.

11.B Analyzing Priority Actions with Gender Perspective

This exercise creates awareness on how priority actions have a positive or negative impact on gender equity and uses this knowledge to select interventions that promote gender equity.



I hour 10 minutes



- ☐ Handouts: Gender Integration Continuum Framework; Gender **Integration Continuum Scenarios**
- Prepared flipchart with the Gender Integration Continuum Framework

PROCESS:

STEP I. Explain the gender integration continuum framework (30 minutes)

SHOW the flipchart with the Gender Integration Continuum Framework.

SAY:

The first day of this workshop, we discussed the issue of gender. When we did the root cause analysis, we also explored how gender issues are cross-cutting and are important to taken into account when analyzing obstacles related to policies, procedures, providers, and clients. And we began to analyze how cultural values and beliefs affect the way we think and act. The problem is when we are not aware of this influence and make gender blind decisions, or worse when we consciously use gender imbalances to obtain our objectives.

In the process of selecting our interventions we want to be gender aware and select interventions that promote gender equity or— at the very least— don't reinforce or contribute to gender inequity.

SAY: Let's analyze this gender integration continuum framework.

> At the top of this framework, you can see the overarching objective, which is to be "gender aware" when we program activities. We do this by understanding how gender affects service use and health behaviors and how our interventions can contribute to gender equity and health.

At the bottom of this framework, you see the attitude we are trying to avoid which is to be "gender blind". Being "gender blind" causes us to propose activities without being conscious of how they affect gender equity and health.

In the arrow three kinds of interventions/activities are demonstrated, classified depending on how they affect gender equity. Interventions/activities can be "Exploitative", "Accommodating" or "Transformative".



DISTRIBUTE the handout, Gender Integration Continuum Framework and invite some participants to read aloud the definitions. Then reinforce by explaining.

SAY: This framework demonstrates a continuum of types of interventions categorized by how they treat gender norms and inequities in their design, implementation, and evaluation.

- Gender blind interventions/actions give no prior consideration to address gender norms and unequal power relations or how interventions impact gender.
- Gender aware interventions/actions examine and address the anticipated gender-related outcomes during both design and implementation.
- Gender exploitative takes advantage of rigid gender norms and existing imbalances in power to achieve the health interventions objectives.
- Gender accommodating interventions acknowledge the role of gender norms and inequities and seek to develop actions that adjust to, and often compensate for, existing imbalances in power.
- Gender transformative interventions strive to examine, question, and change rigid gender norms and imbalance of power as a means of reaching health and gender equity objectives.

SAY: Gender aware interventions are expected to be designed to be gender accommodating or transformative, with the ultimate goal to achieve health outcomes while transforming gender norms toward greater equality. Gender exploitative is an unacceptable approach, particularly for public health programs that must "first do no harm."

ASK: What in your own words is an intervention that is a gender blind intervention? Can you give us an example?

Allow one or two participants to explain the definition, with their own words, and provide an example of being gender blind. BE READY to propose an EXAMPLE in case they don't find any. Repeat the same procedure to explain the "exploitive" "accommodating" and "transformative" interventions.

STEP 2. Classify some scenarios based on the gender integration continuum framework (20 minutes)

DISTRIBUTE the handout, Gender Integration Continuum Scenarios and invite participants to work in their teams to classify them according to the "Gender Continuum Framework"

After 10 minutes, ask the teams to share:

ASK: Where in the continuum of gender integration does each of the scenarios fall

Give opportunities to all the teams to SHARE their analysis, case by case, and provide feedback if necessary.

STEP 3. Analyze teams interventions based on the gender integration continuum framework (20 minutes)

Ask the teams to analyze the list of the interventions that they completed in the rootcause analysis, and classify them as "exploitative", "accommodating" or "transformative".

After 10 minutes, ask the teams to **SHARE** in plenary:

ASK: Did you find, in the list of interventions from your brainstorm, any interventions that were gender blind? Can you explain which intervention and why?

Listen to the gender blind interventions proposed and correct if necessary. Have participants identify why and how they would have to change it to make it gender accommodating (if gender blind) or gender transformative (if accommodating). Continue with the same process asking for interventions that are exploitive, accommodative or transformative.

Close the session reinforcing the importance of analyzing the interventions with gender perspective by saying:

SAY: In the following session you will select the priority interventions to address the root-causes of your challenge. Analyze where in the continuum of gender integration they are.

> Be careful not to select activities that can be gender exploitative, since one of the fundamental principles of health work and development is to "do no harm."

If possible, select activities that move toward gender transformative programming, so to gradually challenge existing gender inequities and promote positive changes in gender roles, norms, and power dynamics.

11.C Setting Priorities Using the Priority Matrix

The Priority Matrix helps participants rank actions based on criteria that are important to them. They can use this tool to prioritize actions as part of developing their Action Plans.

NOTE: Use of the Priority Matrix assumes that participants have already completed a root cause analysis and, therefore, that their selected actions address root causes of their obstacles, not just symptoms.

- **DURATION**
- I hour 10 minutes
- **MATERIALS**
- □ Handouts: Setting Priorities Using the Priority Matrix (sample); Setting Priorities Using the Priority Matrix (blank worksheet; Challenge Model
- Prepared flipchart with a blank Priority Matrix
- **PROCESS:**

STEP I Present and demonstrate the tool (10 minutes)

Use the fun exercise, "Choosing a Husband," to show how the Priority Matrix works.

SAY: We are going to learn how to make choices, how to make a decision when looking at several options, and how to understand which choice will do the most good.

> To do this we use something called "criteria." Examples of criteria are the time it takes to complete a task, costs, impact on quality, and availability of resources.

We are always using criteria when we make judgments.

To understand how to use criteria, we will start with an example of an important personal choice.

ASK: What are some of the most important choices we make in our lives?

(Usually "choosing a spouse" will come up, but if not, say it.)

SAY: Let's take the example of choosing a husband and see what criteria we could use to make this decision. The men will be observers for this exercise.

POINT to the blank matrix on the flipchart.

- Ask the women for three common names of men from their country.
- WRITE the name of each man on top of each column under "priority actions."

SAY: When women choose a husband—what might be most important?

Repeat the question after each answer is given by the women in the group. Answers might be "good morals," "kind to me," "listens to me," "well educated," and so on.

■ After listening to several responses, **SELECT AND WRITE** one criterion on the left of the matrix—one for each row.

STEP 2. Rank each imaginary man for each criterion on a scale from I to 3 (10 minutes)

RATE the imaginary men. For example:

SAY: He is a scientist and gets a "3" for education, but he is mean and gets only a "I" for kindness.

The group will be able to relate to these dilemmas.

■ WRITE in numbers to rate each imaginary man on each of the criteria (1 = low, 2 = average, 3 = high). Make sure the totals for the men will not be the same.

STEP 3. Calculate the total points for each man (5 minutes)

- When you have filled in 12 boxes on the matrix, ADD each column and put the sum at the bottom.
- **POINT OUT** the best choice according to how the Priority Matrix works.

STEP 4. Prioritizing actions from your Action Plans (10 minutes)

ASK: What criteria would you use to prioritize your priority actions?

Take some responses and **RECORD** them on the flipchart

SAY: In your Action Plan, you will, on a scale of 1 to 3 — with 1 providing the least benefit and 3 providing the most benefit — rank each priority action according to your criteria.



SAY: For each action in your work plan, you will add the numbers in each column to see the total score for each action.

> The higher the score, the higher the priority of the action based on the criteria listed. (You may choose to add or change criteria to suit your specific needs.)

STEP 5. Introduce the Priority Matrix (5 minutes)

- HAND OUT the two Priority Matrix handouts (sample and blank) for teams to use at their next team meeting. Review the sample matrix with the group.
- Check that the participants understand how the Priority Matrix works and that the sample priorities make sense to the participants.
- Explain that after they use the matrix with their full teams they need to be certain they can implement the chosen actions without having to wait for someone else's approval or for resources.

STEP 6. Establish criteria for decision-making (5 minutes)

ASK: What criteria might you use to prioritize the actions you brainstormed in the previous session?

- **RECORD** some responses on a flipchart.
- Suggest, if not mentioned: time, cost, impact on results, gender transformative and availability of resources.
- Rate the criteria so that the higher the score, the higher the priority of (the more important) the action.

NOTE: Some teams might want to alter the criteria to suit their specific needs.

STEP 7. Completing the Challenge Model (25 minutes)

SAY: Now use the Priority Matrix to evaluate your list of actions generated in your brainstorming. Use the criteria you have chosen to evaluate them.

Select the actions that best satisfy the criteria you have chosen.

Choose no more than three priority actions since you are working toward a short-term result.

When there are five minutes left before the end of this activity, HAND OUT the Challenge Model.

SAY: You can now complete your Challenge Model.

> Fill in the three (or fewer) priority actions you have selected on the right side of your Challenge Model.

SAY: Check to be sure that implementing those actions will bring you closer to your measurable result and, therefore, to your organization's mission and your team's vision.

If the answer is "yes," you are ready to develop your Action Plan.

If the answer is "no," go back and review the process for choosing actions again and then make changes to your Challenge Model.

SAY: Also, check if you will be able to start implementing the actions you selected, given your level of authority and resources available.

If you are not sure, check the Circles of Control and Influence diagram.

Did you choose actions within your control—changing your own thoughts or behaviors?

Choose actions that will require you to influence those within your circle of influence—community members, colleagues, others in your organization, friends, or family.

Remind participants to think about this as they continue to work on refining their Challenge Models and developing their Action Plans.

11.D Putting First Things First—The Important and Urgent Matrix

This tool will help individuals and groups to learn that the most important thing is not to manage time, it is to manage priorities.



60 minutes



- □ Flipchart with a large version of the Important and Urgent Matrix, with each quadrant labeled as on the handout
- Prepared flipchart with Prepared flipchart with the definitions:
 - Urgent—activities requiring immediate attention—NOW;
 - Important—activities that contribute to your mission, values, and priorities
- Handout: The Important and Urgent Matrix
- Blank flipchart

PROCESS:

STEP I. How do we spend our time? (20 minutes)

PRESENT the empty matrix and explain the four (labeled) quadrants.

SAY: We spend our time in one of four ways, working on activities that are:

- Urgent and important
- Urgent, but not important
- Important, but not urgent
- Not important and not urgent

Explain: "Urgent" — activities requiring immediate attention — NOW.

Explain: "Important" — activities that contribute to your mission, values, and priorities.

ASK: If an activity is urgent, does it also mean that it is important?

Discuss with the large group how urgent activities can take us away from spending time on activities that will enable us to carry out our mission or vision.

ASK: What activities do you do in each of these quadrants in a typical work week?

RECORD responses in the appropriate quadrants.

NOTE: No one likes to admit that he or she spends time on non-urgent and non-important activities, but with help from the whole group, you can uncover some of these activities.

STEP 2. How do you spend your time? (25 minutes)

HAND OUT copies of the Important and Urgent Matrix.

SAY: Do this exercise for yourself.

> First, think about your typical work week. Perhaps you work a total of 40 hours a week, and you decide you spend 20 hours doing urgent and important work.

That means you typically spend 50 percent of your work week in Quadrant I.

Complete this for each quadrant, and then turn to the person next to you and share your results.

SAY: List the tasks that are most important in your work.

Share this with another person.

Discuss together what each of you could do differently in order to do more of the important activities.

SAY: To lead effectively you need to spend more time in Quadrant II, "important but not urgent."

> If you do not spend time in this quadrant planning, developing capacity, and so on, many items will move over into Quadrant I, "urgent," and you will be constantly handling crises.

This is not effective leadership, but many of us find ourselves doing this because we do not pay enough attention to activities in Quadrant II.

SAY: In your small group, discuss how you can shift the percentages so that there is more time for the important stuff of Quadrant II. In other words, put first things first.

STEP 3. How to put first things first (15 minutes)

In the large group, take ideas (strategies) for how to put first things first and RECORD them on a flipchart.

Remind participants to think about this as they continue to work on refining their Challenge Models and developing their Action Plans.

SESSION 12. FROM VISION TO ACTION

PURPOSE	Create Action Plans that will guide the teams toward their measurable results.	
OBJECTIVES	■ To create an Action Plan	
	 To integrate M&E activities and activities for mobilizing resources into the Action Plan 	
PREPARATIONS	Read the facilitator notes for this session.	
	 Prepare the required flipcharts. 	
	Prepare copies of all handouts.	
MATERIALS	□ Flipchart—easel and paper	
	Таре	
	Colored markers	
	Self-stick notes or note cards	
HANDOUTS	□ Action Plan for Teams (blank)	
	 Quick Check on the Quality of an Action Plan 	
	 Monitoring and Evaluation Planning Worksheet from Workshop #1 Handouts section 	
	Assignment for Workshop #3	
	□ Team Meeting Form	
	Evaluation Form for Workshop #2	
	□ Feedback for LDP+ Facilitator	



12.A Developing an Action Plan that Leads to Results

This exercise helps each team to develop an Action Plan that shows the specific activities, timelines, and accountabilities for each of the priority actions.



I hour 30 minutes



- □ Handouts: Action Plan for Team (blank); Quick Check on the Quality of an Action Plan; Monitoring and Evaluation Planning Worksheet from Workshop #1 Handouts section
- Prepared flipcharts for each team with a blank Action Plan
- Prepared flipchart with tasks:
 - I—Write a list of all activities needed to complete each priority action.
 - > 2—Assign a person to be responsible for each activity.
 - > 3—Estimate resources needed to complete the activity.
 - ➤ 4—Indicate start and completion dates for each activity.
 - ➤ 5—Do a quick check of your draft Action Plan.
- Supply of self-stick notes

PROCESS:

Settling in after lunch (15 minutes) STEP I.

Ask participants to sit in their work teams.

STEP 2. Review the Action Plan format (5 minutes)

HAND OUT the Action Plan for Team (blank) and Quick Check on the Quality of an Action Plan.

DEMONSTRATE how to complete the Action Plan on the flipchart.

■ SHOW the teams how to fill in the top part of the Action Plan on their flipcharts by using information from their Challenge Models.



STEP 3. Filling in the rest of the Action Plan (45 minutes)

SHOW and explain the prepared flipchart with the five tasks to be completed to fill in the Action Plan.

SAY: First, write a list of all activities needed to complete each priority action in the left column under "Activities."

Second, assign a person to be responsible for each activity.

Estimate resources you will need to complete each activity.

Fourth, indicate start and end dates for each activity.

And finally, check your draft Action Plan using the questions in the handout, Quick Check on the Quality of an Action Plan.

NOTE: Teams should not assign an activity to a person who is not in the room. On their return home, teams can add other people to take assignments.

Invite the teams to fill in the rest of their Action Plans on their flipcharts.

- Tell them to use self-stick notes for the activities under each action as well as for the person responsible and resources needed. (This will make it easy to make changes without messing up the entire flipchart sheet.)
- Check that each team successfully completes at least one or two of their priority actions.

NOTE: If teams complete at least one or two of their priority actions well, they can finish the rest of the activity as part of their assignment for Workshop #3.

STEP 4. Review progress (20 minutes)

STOP the teams' work when there are about 25 minutes left in the exercise.

■ In the large group, check which steps teams have finished.

Invite each team to POST its (in)complete Action Plan on the wall and have one or two members stand beside them.

- Team members **CIRCULATE** to exchange ideas.
- Facilitators and team members actively ask questions and make suggestions for improvement.
- Ask one person from each team to **COPY** their team's Action Plan on a handout and give it to you to review.

NOTE: If there are five or fewer teams in the room, each team can present its Action Plan.

STEP 5. Wrap up and next steps (5 minutes)

SAY: You will be reviewing the work you have done so far and completing the Action Plan in one or more meetings with your teams back home.

> Because all team members will implement the plan, make sure everyone is in agreement with it.

ASK: Are there any questions about how to complete the Action Planning process?

NOTE: If you are not sure how to answer a question, say that you will get back to the person about it, and make sure you do so during a coaching visit or through another means.

12.B Reflecting On Workshop #2 and Preparing for Workshop #3

This session reviews Workshop #2 and presents the assignment and expectations for the next workshop so that everyone is aligned as the teams return to their workplaces.

DURATION

30 minutes

MATERIALS

- Two blank flipcharts
- □ Handouts: LDP+ Timeline (in Workshop #1 Handouts section already distributed); Quick Check on the Quality of an Action Plan; Assignment for Workshop #3; Team Meeting Form

PROCESS:

STEP I. Overall review of LDP+ and previous sessions (10 minutes)

ASK: What have we done over the past three days?

On three blank flipchart sheets, one for each day, WRITE in the activities that people remember. FILL IN the missing activities.

ASK: What are the most important learnings that you take away from this second workshop?

COLLECT responses.

ASK: What can you apply right away when you get back to work?

COLLECT responses.

Review the handout, LDP+ Timeline, from the first workshop; POINT OUT where we are in the process and what will happen next.

Explain that between this workshop and the next, teams should meet with their managers and review their work.

■ During that meeting, teams will have a chance to review the assignment, ask questions about whatever was not clear, and seek support for their activities.

STEP 2. Review the assignment (10 minutes)

HAND OUT the Quick Check on the Quality of an Action Plan, Assignment for Workshop #3, and Team Meeting Form.

READ each assignment out loud (or have someone read it) and summarize it.

Explain that the assignment for Workshop #3 is to plan and design two meetings:

- SAY: The first meeting is to share what you have learned with the rest of the team in the workplace and to gather their feedback on the:
 - **Priority Matrix**
 - Urgent and Important Matrix
 - Gender Equity Analysis Tool
 - Challenge Model
 - **Draft Action Plan**
 - Resource Mobilization Request Form
- SAY: In a separate (or the same) meeting, your team will:
 - Complete your Action Plan
 - Check your Action Plan using the Quick Check on the Quality of an Action Plan handout
 - Include your M&E plan
 - Include activities to mobilize stakeholder resources
 - Review results of additional scanning, if appropriate
 - Prepare for your team's presentation for Workshop #3
- SAY: Use the Team Meeting Form to design this meeting and all of the meetings between workshops.
- **ASK:** Are there any questions?



STEP 3. Next steps (10 minutes)

SET THE DATE for Workshop #3, which is on aligning, mobilizing, and inspiring.

Emphasize that the same people are expected to come to the next workshop because each workshop builds on the previous ones.

SAY: If one team member is not able to come, the team needs to find a replacement.

> Make sure the replacement becomes familiar with everything that was covered in Workshop #1 and Workshop #2.

Make sure everyone knows:

- Each team will be required to **PRESENT** the results of its assignment on the first morning of the next workshop. Teams should arrive ready to do so.
- The next workshop will last two full days.

Ask a participant to be prepared to review what he or she learned in this workshop on the first day of the next workshop.

Workshop Evaluation

Evaluation gives participants a chance to share what they learned and their opinions, and facilitators to gain information about what was most successful and what can be improved.

DURATION

10 minutes

MATERIALS

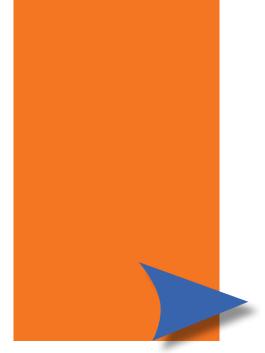
- ☐ Handout: Evaluation Form for Workshop #2
- ☐ Handout: Feedback for LDP+ Facilitator (distribute one copy of this handout for each facilitator to provide individual feedback)

PROCESS:

HAND OUT a copy of the Evaluation Form and the Feedback for LDP+ Facilitator sheet and give people 10 minutes to complete them.

Ask participants for truthful feedback about what they have learned in the workshop. Let them know they are not expected to put their names on the forms.

While the participants are completing the Evaluation Form and Feedback, COLLECT and PHOTOCOPY the Challenge Models and Action Plans the groups developed during this Workshop. These materials will be used in Workshop #3 as well as during Technical Coaching Team Meeting #3.



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AGENDA AND OBJECTIVES: WORKSHOP #2

PURPOSE

Apply the leading, managing, and governing practices to move from vision to action.

OBJECTIVES

- To introduce tools and techniques to understanding focusing as a leadership practice
- To understand the effect of gender on leadership approaches
- To identify obstacles and their root causes
- To propose priority actions with a gender perspective
- To learn how to focus on priorities to achieve important results
- To create action plans that will guide teams toward their measurable result

SESSIONS

- Welcome back and assignment review: Review what participants learned during Workshop #I
- Session 9: Mobilizing for Results: Learn how to mobilize stakeholders
- Session 10: Focusing: Understand focusing as a leadership practice
- Session 11: Focusing the Plan: Identify priority actions and learn how to focus personally and as a team to achieve important results
- Session 12: From Vision to Action: Create Action Plans that will guide the teams toward their measurable result

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	DAY ONE	DAY TWO	DAY THREE
	Opening (15 min.)	Review (20 min.)	Review (20 min.)
AM	Welcome Back and Assignment Review (3 hr.)	Session 9: Mobilizing for Results (conclusion) (1 hr.) Session 10: Focusing (1 hr. 30 min.)	Session II: Focusing the Plan (3 hr.)
Lunc	h Break		
	Assignment Review (conclusion): (1 hr., or as needed, depending on number of teams)	Session 10: Focusing (conclusion) (3 hr. 30 min.)	Session II: Focusing the Plan (I hr.)
PM	Session 9: Mobilizing for Results (3 hr.)	Closing Reflection (30 min.)	Session 12: From Vision to Action (2 hr.)
	Closing Reflection (30 min.)		Workshop Evaluation (10 min.)

ASSIGNMENT FOR WORKSHOP #2—TEAM MEETING BETWEEN WORKSHOPS #1 AND #2

Plan and design a meeting with your team to report on Workshop #1. In this meeting:

- Share the leading, managing, and governing practices.
- Review the priority health area.
- Review and revise the:
 - ➤ Shared vision Make sure to reflect the vision from your larger team.
 - ➤ Challenge Model Share what you have filled in so far, up to "obstacles and root causes." Work with your team to refine your measurable result and current situation.
 - Monitoring and evaluation plan

SELF-ASSESSMENT ON LEADERSHIP APPROACHES

Instructions: Please read the statements below and circle 1, 2, 3, or 4 to indicate how often you use this approach when you work in a group. Only choose one number for each set of 1-4. For example: If you take responsibility for leading the group to results most of the time, you would circle 4 in the first row.

In the groups I work with...

I share responsibility for group n	r leading for results with	l take responsibi	lity for leading the
Nost of the time	2 Sometimes	group to results 3 4 Sometimes Most of the times	
l focus on inv	I focus on involving people		omplishing goals
in the	in the work		e work
l	2	3	4
Most of the time	Sometimes	Sometimes	Most of the time
	ce others esources		decisions esources
Most of the time	2	3	4
	Sometimes	Sometimes	Most of the time
I involve the team to create a shared vision		I set and communicate a clear vision to the team	
Most of the time	2	3	4
	Sometimes	Sometimes	Most of the time
I involve the group in identifying and analyzing problems		I analyze and solve problems for the group	
l	2	3	4
Most of the time	Sometimes	Sometimes	Most of the time
	ntain relations group		e rules and standards bllowed
	2	3	4
Most of the time	Sometimes	Sometimes	Most of the time
I resolve conflicts by dis integrate differ	cussing how we can best		entifying the best point of iew
	2	3	4
Most of the time	Sometimes	Sometimes	Most of the time

Scoring:

Once you have circled one number for each row, look at your results and see whether you have more circles on the shaded side of the worksheet (more 1s and 2s) or on the unshaded side (more 3s and 4s).

If you have more circles on the shaded side of the worksheet, you tend to use the relational leadership style. If you have more circles on the right side, you tend to use more the positional style. To learn more about the two styles, refer to your handout Two Approaches to Leadership.

TWO APPROACHES TO LEADERSHIP

—Relational leadership depends on the strength of one's relationships —Positional leadership depends on one's position of authority

RELATIONAL LEADERSHIP	POSITIONAL LEADERSHIP
Relation to the group A leader is seen as a member of the group Leading is an activity that can shift among group members Involvement and development of people Maintenance of relationships Shares responsibility	Relation to the group A leader is seen as separate from the group Leading is dependent on a position of authority Concern for goal/task accomplishment Commitment to duties, organized, efficient Delegates responsibility
Resources A leader may influence, but does not control the use of resources	Resources A leader controls access to resources and maintains and authority over their use
Setting Direction A leader facilitates the joint creation of vision and direction Acts to integrate and incorporate all views Listens well	Setting Direction A leader sets and communicates vision and direction Acts as trusted representative Communicates vision well
Problem Solving A leader shares relevant knowledge so that the group can generate and test ideas and hypotheses Uses intuition and relationships to understand situations Connected learner: steps into situations to understand them	Problem Solving A leader acts as the problem identifier and solver Uses data to identify solutions to complex problems Uses good analysis to offer solutions Objective learner: steps back to understand
Ethics A leader's main emphasis is on care and responsiveness Concern for maintenance of relationships Takes account of the particular context	Ethics A leader's main emphasis is on fairness, rules, and contracts Concern for standards, external principles Justification by external standards
Conflict resolution A leader helps resolve conflict by integrating different points of view Emphasizes dialogue Works together to resolve differences Seeks to find a different solution, rather than one proposed by either side Outcomes Outcomes Outcomes may be more sustainable, but encouraging participation and shared accountability may require more time.	Conflict resolution A leader helps resolve conflict by compromising on different points of view Emphasizes logic/argument/proof Seeks compromise among individual perspectives Promotes his/her own point of view Outcomes Desired outcomes may be achieved more rapidly and efficiently, but there may be less shared accountability and participation in problem solving.

Adapted from: Bragar, Joan, "Effective Leadership Practices for Managers, Balancing Interdependence and Autonomy," Harvard University, 1990.

BASIC GENDER CONCEPTS

Gender: the socially constructed roles, behaviors, activities, and attributes that a given society considers appropriate for men and women.

Sex: the biological differences between females and males.

What is gender?	For example:
Social construction and behaviorsChanges over time	Women are traditionally in charge of raising children.Men are traditionally viewed as decision makers in
■ Differs between and within cultures	families and at work.
What is sex?	For example:
■ Biological	■ Women give birth to babies, men do not.
Does not change over time	■ Women can breastfeed babies; men cannot.
■ Does not differ across cultures	

Statements clarifying concept of		gory	Justification	
gender and sex	Gender	Sex	jusuncation	
Women are the weaker sex.				
Most men are taller than women.				
Women give birth, men do not.				
Girls are gentle, boys are tough.				
Women are the primary caregivers for the sick and the old.				
Only men can produce sperm for reproduction.				
Men do not cry.				
Women are more loving and caring than men.				
The role for a man is to be the breadwinner and head of the family.				
Men think and act more rationally than women.				
Women can breastfeed; men can only bottle feed.				
Women can menstruate; men cannot.				
Many women do not make decisions freely, especially regarding sexuality and relationships.				
Men's voices change with puberty.				
Men do not need tenderness and are less sensitive than women.				
Women get paid less than men doing the same work.				

BASIC GENDER CONCEPTS—DEFINITIONS

Gender Equity

The process of being fair to women and men, boys and girls To ensure fairness, measures must be taken to compensate for cumulative economic, social, and political disadvantages that prevent women and men, boys and girls from operating on a level playing field, (IGWG training resources).

Gender Equality

The state or condition that affords women and men equal enjoyment of human rights, socially valued goods, opportunities, and resources. Genuine equality means more than parity in numbers or laws on the books; it means expanded freedoms and improved overall quality of life for all people, (IGWG training resources; USAID Gender Equality and Female Empowerment Policy).

Gender-Based Violence

In the broadest terms, "gender-based violence" is violence that is directed at individuals based on their biological sex, gender identity, or perceived adherence to culturally-defined expectations of what it means to be a woman and man, boy and girl. It includes physical, sexual, and psychological abuse; threats; coercion; arbitrary deprivation of liberty; and economic deprivation, whether occurring in public or private.

Specific types of GBV include (but are not limited to) female infanticide; early and forced marriage, "honor" killings, and female genital cutting/mutilation; child sexual abuse and exploitation; trafficking in persons; sexual coercion, harassment and abuse; neglect; domestic violence; economic deprivation, and elder abuse.

Empowerment

Expansion of people's capacity to make and act upon decisions affecting all aspects of their lives - including decisions related to health - by proactively addressing socioeconomic, and other power inequalities in a context where this ability was previously denied. Programmatic interventions often focus specifically on empowering women, because of the inequalities in their socioeconomic status, (Adapted from Naila Kabeer's definition of empowerment).

Men's Engagement

Men's engagement is a programmatic approach that involves men and boys a) as clients and beneficiaries, b) as partners, and c) as agents of change, in actively promoting gender equality, women's empowerment, and the transformation of inequitable definitions of masculinity. In the health context, this comprises engaging men and boys in addressing their own, and supporting their partners' reproductive, sexual and other health needs. Men's engagement also includes broader efforts to promote equality with respect to caregiving, fatherhood, and division of labor, and ending gender-based violence.

STAKEHOLDER ANALYSIS WORKSHEET

Use this worksheet to consider stakeholders' interests and concerns.

Stakeholder group or individual	What are their interests and concerns?	What specific request will we make of this stakeholder?	What do we need to do to get their support?

RESOURCE MOBILIZATION REQUEST FORM

Name of stakeholder and resources needed	What specific request will we make of this stakeholder?	Who will make this request?	When will the request be made?

INTEGRATED PRACTICES FOR HIGH PERFORMING HEALTH SYSTEMS

IFADING

SCAN

- Identify client and stakeholder needs and priorities
- Recognize trends, opportunities, and risks that affect the organization
- Look for best practices
- Identify staff capacities and constraints
- Know yourself, your staff, and your organization—values, strengths, and weaknesses

ORGANIZATIONAL OUTCOME

Managers have up-to-date, valid knowledge of their clients, and the organization and its context; they know how their behavior affects others.

FOCUS

- Articulate the organization's mission and strategy
- Identify critical challenges
- Link goals with the overall organizational strategy
- Determine key priorities for action
- Create a common picture of desired results

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and priorities are clear.

ALIGN & MOBILIZE

- Ensure congruence of values, mission, strategy, structure, systems, and daily actions
- Facilitate teamwork
- Unite key stakeholders around an inspiring vision
- Link goals with rewards and recognition
- Enlist stakeholders to commit resources

ORGANIZATIONAL OUTCOME

Internal and external stakeholders understand and support the organization's goals and have mobilized resources to reach these goals.

INSPIRE

- Match deeds to words
- Demonstrate honesty in interactions
- Show trust and confidence in staff, acknowledge the contributions of others
- Provide staff with challenges, feedback, and support
- Be a model of creativity, innovation, and learning

ORGANIZATIONAL OUTCOME

The organization's climate is one of continuous learning, and staff show commitment, even when setbacks occur.

MANAGING

PLAN

- Set short-term organizational goals and performance objectives
- Develop multi-year and annual plans
- Allocate adequate resources (money, people, and materials)
- Anticipate and reduce risks

ORGANIZATIONAL OUTCOME

The organization has defined results, assigned resources, and developed an operational plan.

ORGANIZE

- Develop a structure that provides accountability and delineates authority
- Ensure that systems for human resource management, finance, logistics, quality assurance, operations, information, and marketing effectively support the plan
- Strengthen work processes to implement the plan
- Align staff capacities with planned activities

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and priorities are clear.

IMPLEMENT

- Integrate systems and coordinate work flow
- Balance competing demands
- Routinely use data for decision-making
- Co-ordinate activities with other programs and sectors
- Adjust plans and resources as circumstances change

ORGANIZATIONAL OUTCOME

Activities are carried out efficiently, effectively, and responsively.

MONITOR & EVALUATE

- Monitor and reflect on progress against plans
- Provide feedback
- Identify needed changes
- Improve work processes, procedures, and tools

ORGANIZATIONAL OUTCOME

The organization continuously updates information about the status of achievements and results, and applies ongoing learning and knowledge.

GOVERNING

CULTIVATE ACCOUNTABILITY

- Sustain a culture of integrity and openness that serves the public interest
- Establish, practice and enforce codes of conduct upholding ethical and moral integrity
- Embed accountability into the institution
- Make all reports on finances activities, plans, and outcomes available to the public and the stakeholders
- Establish a formal consultation mechanism through which people may voice concerns and provide feedback

ORGANIZATIONAL OUTCOME

Those who govern are accountable to those who are governed. The decision making is open and transparent. The decisions serve public interest.

ENGAGE STAKEHOLDERS

- Identify and invite participation from all parties affected by the governing process
- Empower marginalized voices, including women, by giving them a voice in formal decision-making structures and processes
- Create and maintain a safe space for the sharing of ideas
- Provide an independent conflict resolution mechanism
- Elicit and respond to all forms of feedback in a timely manner
- Establish alliances for joint action at whole-ofgovernment and whole-of-society levels

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has an inclusive and collaborative process for making decisions to achieve the shared goals.

SET SHARED DIRECTION

- Prepare, document and implement a shared action plan to achieve the mission and vision of the organization
- Set up accountability mechanisms for achieving the mission and vision using measurable indicators
- Advocate on behalf of stakeholders' needs and concerns
- Oversee the realization of the shared goals and the desired outcomes

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has a shared action plan capable of achieving objectives and outcomes jointly defined by those who govern and those who are governed.

STEWARD RESOURCES

- Ethically and efficiently raise and deploy the resources to accomplish the mission and the vision and to serve stakeholders and beneficiaries
- Collect, analyze, and use information and evidence for making decisions
- Align resources in the health system and it design with the shared goals
- Build capacity to use resources in a way that maximizes the health and well-being of the public
- Inform and allow the public opportunities to monitor the raising, allocation and use of resources, and realization of the outcomes

ORGANIZATIONAL OUTCOME

The institution has adequate resources for achieving the shared goals, and the resources are raised and used ethically and efficiently to achieve the desired objectives and outcomes.

CATEGORIES OF OBSTACLES

As you consider the obstacles that are in the way of achieving your result, consider these common categories of obstacles. Please note that gender is also a cross-cutting issue that needs to be taken into account in conducting this analysis. There are many examples of gender issues that could affect the provision and use of health services in all categories. For example, policies can restrict women's access to health services (e.g., women often need "permission" to use family planning services or methods) or provider attitudes can be biased and therefore limit women's use of services in general.

Policies and procedures

They can be norms, standards, guidelines, etc

Providers

The obstacle can be related to the number of service providers, their knowledge, their attitudes, their skills,

Equipment, infrastructure, and supplies

The obstacle can be related to the quality and quantity of equipment, if it is usable and available, the layout of the clinic, the stocks of basic medicines and supplies, etc.

Patients, clients, individuals, or communities

The obstacle can be related to client knowledge, skills, and attitudes; community awareness about the services, etc..

5 Gender

The obstacle can be related to equal access to services, equal inclusion in decision-making regarding health, and equal opportunities for leadership roles.

GENDER EQUITY ANALYSIS TOOL

Sex: the biological differences between females and males

Gender: the socially constructed roles, behaviors, activities, and attributes that a given society considers appropriate for men and women.

Gender equity: fairness in opportunities, access, and involvement in decision-making.

OPPORTUNITY: How does the health system promote or inhibit gender equity in management, leadership, and decision-making roles?
ACCESS: How are health services delivered (e.g., attitudes, communication patterns, etc.) so that it is easy or difficult for both women and men to receive services?
INVOLVEMENT: How do women and men participate in decisions about their own
health, the health of their families, and the health of their communities?

THE FIVE WHYS TECHNIQUE

Purpose

The Five Whys exercise, developed by Imai Masaaki, is a questioning technique for getting beyond obvious symptoms and identifying the primary, or root, causes of a problem. Asking "why" five times prevents mistaking symptoms for causes, so that you can work on addressing the underlying factors that are causing the problem rather than working on the wrong causal factor.

Process

When you are working with a cause-and-effect diagram and have identified a probable cause, ask, "Why is that true?" or "Why is that happening?" To each answer, ask "why" again. Continue asking "why" at least five times, until the answer is "That is just the way it is," or "That is just what happened." The questioning will help you to arrive at a deeper understanding of the causes keeping the current situation as it is.

Be sure that you are asking about things that are in your sphere of influence to affect. If you find yourself talking about conditions such as "the economy" or the "level of literacy," begin again and go down the chain of "whys" so that you are sure that you are discussing something you can affect.

To practice this method, take a current situation that you would like to change.

For example, the cold chain frequently breaks down, interrupting vaccination campaigns:

- Why is the current situation like this? Response: Because there is no backup during power outages.
- Why is this so? Response: Because there was no money in the budget for a backup arrangement.
- Why is this so? Response: Because no one thought about it when the budget was made.
- Why is this so? Response: Because the budget was made by an accountant who does not know the importance of an uninterrupted cold chain.
- Why is this so? Response: Because technical experts do not get involved in budgeting.

At this point you might see that what is missing is more involvement of technical experts in setting budgets.

It is possible that asking "why" three times is sufficient. You may stop when you reach a point when you respond, "That is how things are, that is life..." or when you are no longer able to find a useful response.

SETTING PRIORITIES USING THE PRIORITY MATRIX

Sample Priority Matrix

CRITERIA (Rate from 1 to 3)	PRIORITY ACTIONS			
	Train counselors	Conduct community education seminars	Renovate clinics	
Time to Implement				
(I=the most time) (3=the least time)	2	2	1	
Cost to implement				
(1=the most cost) (3=the least cost)	2	3	1	
Potential for improving quality in the long term (I=the least potential) (3=the most potential)	3	2	2	
Capacity to implement				
(1=the least available) (3=the most available)	I	3	I	
TOTALS	8	10	5	

This example shows that conducting community education seminars should be a priority.

It doesn't mean that you don't carry out the other actions, but you should focus on those that will have the most impact on achieving your result, taking into account time and money.

SETTING PRIORITIES USING THE PRIORITY MATRIX

Priority Matrix Worksheet

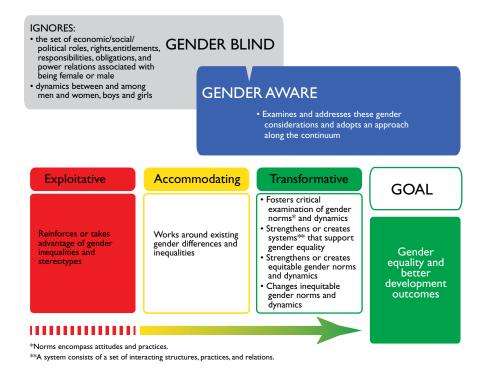
CRITERIA (Rate from 1 to 3)	PRIORITY ACTIONS			
TOTALS				

Note: "I" is for the more unfavorable situation, such as the most time to implement or the least potential impact. "3" is for the most favorable situation.

THE CHALLENGE MODEL

Mission/Priority Health Area:
Vision:
Measurable result:
Obstacles and root causes
Current situation:
Challenge:
[How will we achieve our desired result in light of the obstacles we need to overcome?]

GENDER INTEGRATION CONTINUUM FRAMEWORK



There is a continuum on the type of interventions categorized by how they treat gender norms and inequities in the design, implementation, and evaluation of interventions

Gender blind interventions/actions give no prior consideration for how gender norms and unequal power relations affect the achievement of the interventions, or how the interventions impact on gender.

Gender aware interventions/actions examine and address the anticipated gender-related outcomes during both design and implementation

Gender exploitative interventions/actions intentionally or unintentionally reinforce or take advantage of rigid gender norms, stereotypes, and existing imbalances in power to achieve the health interventions objectives. The approach exacerbates inequalities.

Gender accommodating interventions/actions acknowledge, but work around gender differences and inequalities to achieve program objectives. Although this approach may result in short term benefits, it does not attempt to reduce gender inequality or address the gender systems that contribute to the differences.

Gender transformative interventions/actions seek to transform gender relations to promote equality and achieve program objectives. This approach attempts to promote gender equality by:

- fostering critical examination of inequalities and gender roles, norms, and dynamics;
- recognizing and strengthening positive norms that support equality and an enabling environment;
- promoting the relative position of women, girls, and marginalized groups, and transforming the underlying social structures, policies, and broadly held social norms that perpetuate gender inequalities.

Framework taken from WHO/ICRW, "Guidelines for Integrating Gender into HIV/AIDS Programmes," 2002. http://www.igwg.org/igwg_media/Training/FG_GendrIntegrContinuum.pdf

GENDER INTEGRATION CONTINUUM FRAMEWORK (PT 2)

Take away messages:

- This continuum can be used as a diagnostic tool or a planning framework. In either case, it reflects a two-tiered process of analysis that begins with determining whether interventions are "gender blind" or "gender aware," and then considers whether they are exploitative, accommodating, or transformative.
- As a planning framework, it can help determine how to move along the continuum toward more transformative gender programming. In this context, it is important to emphasize that programmatic interventions should always aim to be "gender aware," and to move towards "transformative gender programming."
- The most important consideration is to ensure that the program does not adopt an exploitative approach in keeping with the fundamental principle in development of DOING NO HARM. The tool attempts to reflect this visually, using the color red and the dotted line to highlight that while some interventions may be, or contain elements that are (intentionally or unintentionally) exploitative, the aim should always be to move them towards transformative approaches.
- Gender blind interventions may be unintentionally exploitative or accommodating. They are much less likely to be transformative, as this approach presumes a proactive and intentional effort to promote gender equality.
- The continuum reflects a spectrum a particular project may not fall neatly under one type of approach, and may include, for example, both accommodating and transformative elements.
- Transformative elements can be integrated into ongoing projects, without having to start the project over.

GENDER INTEGRATION CONTINUUM SCENARIOS

Scenario I:

A PMTCT (prevention of mother-to -child transmission of HIV) program faces the challenge of low male support to women in accessing the service. One of PMTCT strategies is to test women for HIV during their antenatal care (ANC) visits. In cases where women are HIV positive, they are encouraged to bring their partners to be tested. Women are afraid to disclose their HIV status to their husbands, so they don't invite them to come to be tested. The community health workers started an intervention to involve community and religious leaders in sensitizing men about their role in the pregnancy, their shared responsibility of taking good care of the health and safety of their wives, and to their unborn children. They encourage male partners to join their wives at the ANC visits. With this intervention, male involvement in ANC and VTC (HIV voluntary counseling and testing) is increasing. Now, men and women are counseled and tested together, giving the opportunity to disclose their status with appropriated post-test counseling.

Scenario 2:

In an effort to increase contraceptive use and male involvement in it, a family planning project started a campaign encouraging men to participate in family planning decision-making. The campaign reinforced messages such as: "It is your choice;" "It is easy to be a winner;" "Play the game right;" "You are in control." As a result of the campaign, the use of contraceptive methods increased. However, when they were evaluating impact, they found out men interpreted the campaign messages to mean that family planning decisions should be made by men alone.

Scenario 3:

In a rural and very traditional community, the use of contraceptive methods was very low. Males believed that they should have all the children God sends them—and that if their wives wanted to use a family planning method, she was unfaithful and having other partners. Women, on the other hand, were aware of the importance of spacing their pregnancies to take care of their own health and limit their children so they could take good care of them. The family planning program started promoting the injection. They explained to women that their husbands didn't need to know they were using a family planning method; they just need to come to the clinic every two or three months to get the injection. The number of women using contraceptives increased and the injection became the most popular family planning method among women.

THE IMPORTANT AND URGENT MATRIX

	URGENT	NOT URGENT
IMPORTANT	ACTIVITIES Crises Pressing problems Deadline-driven projects that are critical to your strategic priorities	 ACTIVITIES Preventing problems and anticipating future activities Creating strategy, planning Relationship building Recognizing new opportunities Recreation
NOT IMPORTANT	ACTIVITIES Interruptions, some calls Some mail, some reports Some meetings Pressing matters	ACTIVITIES Trivia, busy work Interruptions Some mail Some phone calls Time wasters

Quadrant I represents things that are "urgent and important." Quadrant I activities are usually "crises" or "problems." They are very important, but look out! Quadrant I can consume you. As long as you focus on it, it keeps getting bigger and bigger until it dominates your work. There will always be crises that require immediate attention, but how many things are really urgent?

Quadrant II includes activities that are "important but not urgent" It is the quality quadrant, where we plan and anticipate, and prevent things that otherwise might become urgent. Quadrant II is the heart of effective personal management.

Quadrant III includes things that are "urgent, but not important," Plenty of us spend too much time in this quadrant. The urgency sometimes is based on someone else's priorities. It is easy to believe that something that is urgent is also important. Look at what you classified as "urgent and important" in Quadrant I. Ask yourself if the urgent activity contributed to an important strategic objective. If not, it probably belongs in Quadrant III.

Quadrant IV includes activities that are "not urgent and not important," It is the "waste of time" quadrant. Chatting, reading jokes, and gossiping are examples of these activities.

Impact of each quadrant on your energy & effectiveness:

Results of living in Quadrant I—

Stress, burnout, crisis management, always putting out fires

Results of living in Quadrant II —

Vision, perspective, balance, control, few crises

Results of living in Quadrant III —

Short-term focus, crisis management, feeling victimized and out of control

Results of living in Quadrant IV—

Irresponsibility, work not completed on time, loss of your job

Seven Key Practices of Quadrant II

- Improving communication with others
- Better preparation
- Better planning and organization
- Caring for yourself
- Taking advantage of new opportunities
- Personal development
- Knowing what is important

ACTION PLAN FOR THE IMPROVEMENT TEAM

CHALLENGE:		INDICA	ATOR(S)	:
DESIRED MEASURABLE RESUI	LT:			
PRIORITY ACTIONS:				
Activities	Person Responsible	Start Date	End Date	Resources

QUICK CHECK ON THE QUALITY OF AN ACTION PLAN

To check the quality and logic of your Action Plan, answer the following questions:

- Are there activities for each of the priority actions?
- Have you included activities for aligning, mobilizing, and inspiring?
- Is the desired result SMART?
- Have measurable indicators been defined that will tell you whether or not your team has achieved the desired result?
- Do the activities listed in the plan contribute to the achievement of your desired result?
- Are specific people identified to be responsible for the completion of each activity?
- Have all the resources been identified?
- Does each activity have a time frame?
- Is there anything else that you should add to your Action Plan?

LDP+ ASSIGNMENT FOR WORKSHOP #3

Team Meeting between Workshop #2 and #3

In a first meeting with your larger team:

Plan and design a meeting with your team to report on Workshop I. Use the Team Meeting Form, next page..

- I. Teach your team about the Priority Matrix, the Urgent/Important Matrix, gender concepts, and what you learned about M&E and planning.
- 2. Share the completed Challenge Model and draft Action Plan.
 - a. Review and complete the Action Plan so that the team may start to implement it. Use the Quick Check on the Quality of an Action Plan handout to confirm that your Action Plan is complete.
 - b. Review your M&E plan and the activities you need to mobilize stakeholder resources.
- 3. Work together on implementing the Resource Mobilization Request Form.

In a second meeting to be held just before Workshop #3:

- I. Share and update the LDP+ Reporting and Evaluation Forms and complete:
 - a. Results and the indicators used to track progress.
 - b. Changes introduced
 - c. Obstacles faced in implementing changes
 - d. Recommendations
- 2. Work together on implementing the Resource Mobilization Request Form.
- 3. Update the LDP+ Reporting Form.
- 4. Update the Evaluation Form.
- 5. Prepare your team's presentation for Workshop #3 where you will present the Challenge Model and information from the Reporting and Evaluation forms.

TEAM MEETING FORM

Meet between workshops, maybe more than once.

I. Agree on the objectives for the meeting

What do we want to accomplish during this meeting? (Set the time you will work on defining the objectives.)

2. Report on results

What was our goal for the two weeks that have passed since the previous workshop?

What did we accomplish? (Acknowledge our team for our work.)

What obstacles are we facing and how will we overcome them?

3. Next actions

What is our goal for the next two weeks (before the next workshop)?

List the activities we will do. List who will be responsible for each activity.

4. Teamwork

What is working well in our team?

What do we need to do to improve?

EVALUATION FORM: WORKSHOP #2

Date: _	
	complete this evaluation as fully and honestly as you can. Your feedback will help us to improve the nop's content and activities, as well as other aspects of the LDP+. Thank you.
1.	What did you learn in this workshop?
2.	How can you apply what you learned in your work?
3.	What feedback do you want to give to the LDP+ facilitators?

FEEDBACK FOR LDP+ FACILITATOR

How much do you agree or disagree with the following statements? Please mark one box for each item as appropriate. Thank you!

	Disagree Strongly	Disagree	Agree	Agree Strongly
The facilitator began and ended sessions on time.				
The facilitator helped the group set the ground rules for the discussion and stick to them.				
The facilitator set a friendly and relaxed tone for the conversation.				
The facilitator listened well.				
The facilitator remained neutral.				
The facilitator helped the group productively discuss different points of view.				
The facilitator seemed to be familiar with the discussion materials.				
The facilitator encouraged everybody in the group to participate in conversations.				
The facilitator did a good job of not letting any one person dominate the discussions.				
The facilitator encouraged quiet members of the group to share their ideas.				
The facilitator worked effectively to keep discussions on track.				
The facilitator offered periodic summaries of the discussions and/or encouraged group members to do so.				
The facilitator handled intense situations well.				

group to share their ideas.				
The facilitator worked effectively to keep discussions on track.				
The facilitator offered periodic summaries of the discussions and/or encouraged group members to do so.				
The facilitator handled intense situations well.				
Please write any other feedback you may have	in the space l	below.		
			Date:	

LDP+ REPORTING FORM

Name and Location of Improvement Team:_

Report Prepared By:			
Dates of Activity (months):			
Date of Submission:			
Improvement Team Members:			
Name	Title	M/F	Email address
	L		

- I. Priority health area for this LDP+ initiative:
- 2. Measurable result your team defined in your Challenge Model:
- 3. Monitoring and Evaluation Planning Worksheet(s): Please include a completed Monitoring and Evaluation Planning Worksheet for each indicator for which you collected data during the implementation of the LDP+ improvement project.
- 4. Summary of results: Based on the values of your indicators, please briefly describe what your Improvement Team has accomplished.

MONITORING AND EVALUATION PLANNING WORKSHEET

ICATOR	INDICATOR DEFINITION	BASELINE	Θ –	γ 3 9	3 Q	Ω 4	γ 2	Ο 9	TARGET	DATA SOURCE	DATA COLLECTION FREQUENCY	Data Collection Responsibility Frequency
	What is the definition of the numerator? What is the definition of the denominator?	What is the value of the indicator the month before beginning ICRC-LDP activities?							What goal have you set for the value of the indicator by the end of ICRC-LDP activities?	Where will we get the data to measure this indicator?	How often will we collect the data?	Who is the person responsible for data collection?
		Numerator										
		Denominator										
		Percent										

EVALUATION FORM

I. Use the matrix below to summarize any difficulties your team encountered while working towards your measurable result, and how you addressed those difficulties.

your measurable result, and now y	ou addressed those difficulties.					
What difficulties did your team encounter in implementing your Action Plan?	What actions did your team take to overcome these difficulties?	Did these actions succeed? Why or why not?				
2.Beyond the changes in your indicators, what other effects of your intervention did you observe?						
3. How did your team apply leadin intervention?	g, managing, and governing practic	es to carry out your				

The following questions are to only be answered at the end of Workshop #4:

- 4. What might your team do differently if you use the LDP+ process on a new challenge in the future?
- Yes ___ No ___ 5. Has your team chosen a new challenge to take on?
- 6. If yes, what is the new challenge?
- 7. If no, please describe the reason for not choosing another challenge.



MEETING 3

FACILITATORS

Master Facilitator, LDP+ Champion

PARTICIPANTS

Members of the Technical Coaching Team who have participated in the Stakeholder Alignment Meeting, Technical Coaching Team Meetings #1 and #2, and Workshops #1 and #2

MEETING DESIGN

This meeting takes place after Workshop #2. During that workshop, the Technical Coaching Team will have joined their Improvement Teams in working on the Challenge Model: identifying obstacles and root causes, and developing an Action Plan.

In this third and final meeting, the Technical Coaching Team will cover these steps and focus on Step 8: monitoring and evaluating the implementation of the Action Plan. They will review the monitoring and evaluation (M&E) components and practice coaching their Improvement Teams in monitoring, evaluating, and reporting. This will help the teams prepare for the Shared Learning Session at the start of Workshop #3.

The meeting lasts one day.

- **MEETING OBJECTIVES** Review experiences coaching the Improvement Teams.
 - Practice coaching Improvement Teams in completing the second part of the Challenge Model, with an emphasis on monitoring, evaluating, and reporting.

MEETING DELIVERABLES

- Improved skills in coaching the last steps of the Challenge Model
- Demonstrated grasp of the components of the LDP+ M&E process: indicators, data sources, data collection process, reporting requirements, and forms

PREPARATION OF CONTENT

Read the facilitator notes for this meeting.

PREPARATION OF MATERIALS

- Collect and photocopy the Challenge Models and Action Plans the Improvement Teams developed during Workshop #2, if you have not already done so.
- Make copies of all of the Challenge Models and Action Plans from Workshop #2 for each participant.

MATERIALS

- □ Flipchart(s), easel, and paper
- Tape
- Colored markers

PREPARED FLIPCHARTS

Meeting objectives and agenda

HANDOUTS

- □ Tips for Improving OALFA Coaching Skills
- Challenge Model Example
- Action Plan Example
- □ Challenge Models from Workshop #2
- □ Action Plans from Workshop #2
- Reviewing the Last Steps of Improvement Teams' Challenge Models
- □ Feedback on Coaching Practice
- Elements of a Monitoring and Evaluation Plan
- LDP+ Reporting Form
- Monitoring and Evaluation Planning Worksheet
- Monitoring and Evaluation Planning Example
- Evaluation Form
- Evaluation Form for Technical Coaching Team Meeting #3

TC3 **SCHEDULE TECHNICAL COACHING TEAM MEETING 3**

- A. Welcome, Objectives, and Expectations
- B. Reviewing the Coaching Experience
- C. Coaching on Three More Steps of the Challenge Model
- D. Coaching on the Last Step of the Challenge Model: M&E Closing

Welcome, Objectives, and Expectations

The meeting objectives are explained and related to participants' expectations.

- **DURATION** 30 minutes
- **MATERIALS** Prepared flipchart: Meeting Objectives and Agenda
- **PROCESS:**

STEP 1. Set the stage for the meeting (15 minutes)

GREET participants.

Explain the context of this meeting as a follow-up to Technical Coaching Team Meeting #2 and Workshop #2.

USE the prepared flipchart, "Meeting Objectives and Agenda," to present the objectives and agenda of the meeting.

POINT OUT that the participants will practice using their coaching skills to coach Improvement Teams in completing the last steps of the Challenge Model, including finalizing a monitoring and evaluating plan for their LDP+ improvement project.

STEP 2. Match expectations to the objectives (15 minutes)

ASK: What do you expect to get out of this meeting?

> After meeting with your Improvement Teams and attending Workshop #2, what concerns do you have about your coaching role?

JOT DOWN participants' responses on a flipchart.

Summarize the responses and relate them to the meeting objectives and agenda.

POINT OUT the ways in which this meeting can meet their expectations and help to address their concerns.

B. Reviewing the Coaching Experience

This activity encourages participants to acknowledge their strengths and weaknesses as coaches.

- **DURATION** I hour 30 minutes
- MATERIALS

 Handouts: Tips for Improving OALFA Coaching Skills;

 Challenge Model Example; Action Plan Example
- **PROCESS:**

STEP I. Review coaching principles and skills (10 minutes)

Remind participants of the basic coaching principles and the skills needed to conduct a productive coaching conversation.

Emphasize the importance of their coaching role for the success of the Improvement Teams.

STEP 2. Share coaching experiences (20 minutes)

Invite participants to **FORM PAIRS** and **SHARE** their experiences coaching their Improvement Teams.

Have them **JOT DOWN** notes on: I) coaching achievements; and 2) difficulties they have encountered in their coaching role.

STEP 3. Discuss the coaching experiences (30 minutes)

In plenary, ask participants to describe the coaching achievements they shared in pairs. Acknowledge the good work they have done so far.

Ask them to **SHARE** their coaching difficulties.

Encourage them to serve as resources to each other, suggesting ways of overcoming these difficulties.

Make additional suggestions from your own knowledge and experience and from the handout, *Tips for Improving OALFA Coaching Skills*.

STEP 4. Prepare for coaching on the rest of the Challenge Model (30 minutes)

Remind participants that their next coaching task will focus on the rest of the Challenge Model, the Action Plan, and the M&E plan.

Ask for any questions on the last steps of the Challenge Model or the Action Plans that arose in Workshop #2.

Together, **REVIEW** handouts: Challenge Model Example and Action Plan Example. **REFER** to these examples to answer participants' questions.

C. Coaching on Three More Steps of the Challenge Model

This activity helps participants prepare to coach Improvement Teams on Steps 5, 6, and 7 of the Challenge Model: obstacles and root causes, finalizing the challenge statement, priority actions, and Action Plans.

- **DURATION**
- 2 hours 15 minutes (for three rounds of practice)
- **MATERIALS**
- Handouts: Challenge Models and Action Plans (from Workshop #2);
 Reviewing the Last Steps of the Improvement Teams' Challenge Model; Feedback on Coaching Practice for the Last Steps of the Challenge Model
- **PROCESS:**

STEP I. Prepare to coach an Improvement Team on their Challenge Model (30 minutes)

This activity may be carried out in one group or two, depending on the number of participants.

DISTRIBUTE the handouts — one *Challenge Model* and one *Action Plan from Workshop* #2 — to each group.

Also **DISTRIBUTE** the handout, Reviewing the Last Steps of Improvement Teams' Challenge Models.

READ through the first three items together: The Obstacles and Root Causes, The Key Challenge, and The Action Plan.

Explain that we will look at the last item—the Monitoring and Evaluation Plan—separately as the next activity.

Ask participants to individually consider their group's Challenge Model and Action Plan in light of the questions on the handout, Reviewing the Last Steps of the Improvement Teams' Challenge Models.

Have them share their views and any suggestions they would give an Improvement Team.

STEP 2. Practice coaching on the next steps in the Challenge Model (30 minutes)

As in Technical Coaching Team Meeting #2, assign roles for the coaching practice.

- The participant who is working with this Improvement Team is the **COACH**.
- One other participant is the team member being coached—the "COACHEE."
- The rest of the group is **OBSERVERS**.

DISTRIBUTE the handout, Feedback on Coaching Practice for the Last Steps of the Challenge Model.

- Have participants read the handout aloud, again leaving the last item, monitoring and evaluation, for the next activity.
- Point out that the observers can use this handout when giving feedback to the coach. Answer any questions they may have.
- Ask the coach to demonstrate how s/he might use coaching skills to help the team strengthen the obstacles/root causes, challenge statement, and priority actions in the Challenge Model, (based on the comments from the previous exercise).

After 20 minutes, ask the **observers** to refer to the handout, Feedback on Coaching Practice for the Last Steps of the Challenge Model, in giving the coach feedback.

Repeat Steps I and 2 (30 minutes for each exercise) STEP 3.

Repeat the reviewing/coaching/feedback sequence until every participant has had the chance to practice coaching, being coached, and observing.

STEP 4. Share reactions (15 minutes)

In plenary, ask participants to describe their reactions to and learnings from the coaching practice, as both coaches and people being coached.

Coaching on the Last Step of the Challenge Model: Monitoring Progress and Evaluating Results

This exercise enables participants to coach Improvement Teams on the LDP+ monitoring and evaluation process, including completing the LDP+ Reporting Form and Evaluation Form.



2 hours 30 minutes



□ Handouts: Reviewing the Last Steps of the Improvement Teams' Challenge Model; Feedback on Coaching Practice for the Last Steps of the Challenge Model; Elements of a Monitoring and Evaluation Plan; LDP Reporting Form, with the attachments: Monitoring and Evaluation Planning Worksheet, and Monitoring and Evaluation Planning Example; Evaluation Form

PROCESS:

STEP I. Discuss the essential elements of monitoring and evaluating the LDP+ improvement project (30 minutes)

POINT OUT that it is time to practice coaching the last step in the Challenge Model: implementing, monitoring, and evaluating.

Read together the last item on the handouts, Reviewing the Last Steps of the Improvement Teams' Challenge Model and Feedback on Coaching Practice for the Last Steps of the Challenge Model.

DISTRIBUTE the handout, *Elements of a Monitoring and Evaluation Plan.*

Read the handout together and use it as the tool for discussing the LDP+ monitoring process and clarifying the elements.

SAY: After the Improvement Teams have implemented their Action Plans and monitored their progress:

They will summarize the experience on two important forms: the LDP+ Reporting Form and the Evaluation Form.

The teams will use these two forms as the basis for sharing their results and their learning:

- with colleagues in their workplaces,
- with other Improvement Teams,
- with the coaches of all the Improvement Teams,
- with the members of the Governing Body.

You, as coaches, have a major responsibility for helping your teams to fill out the forms accurately and completely.

Let's practice using the Challenge Models you have already worked on today.

STEP 2. Practice filling out the LDP+ Reporting Form (30 minutes)

DISTRIBUTE the handout, LDP+ Reporting Form with the two attachments: Monitoring and Evaluation (M&E) Planning Worksheet and Monitoring and Evaluation (M&E) Planning Example.

Review the handouts thoroughly together. POINT OUT that the attachment, the M&E Planning Worksheet, covers all the elements of an M&E plan.

Discuss the questions at the top of this attachment and go over the example on the other attachment, the M&E Planning Example. NOTE that the sample indicator is just that, an example showing a numerator, denominator, and rate for the number of pregnant women receiving HIV counseling and testing at antenatal clinics. It is recognized that the denominator of 300 pregnant women attending antenatal clinics is unlikely to remain constant over the six-month implementation period.

ASSIGN participants to one or more of the Challenge Models they practiced on in the previous activity. They may work in pairs or small groups, depending on the number of participants.

Ask them to **COMPLETE** the handout, the LDP+ Reporting Form, devoting most of their time to filling out the attachment, the M&E Planning Worksheet.

They should be able to find the indicator, numerator and denominator, baseline, and target/goal stated in the measurable result.

They can use their knowledge and experience to suggest likely data sources, data collection frequency, and responsible parties.

STEP 3. Repeat Step 2 (30 minutes)

If there is time and you think the participants would benefit from additional practice, assign a different Challenge Model and have participants repeat the process.

STEP 4. Become familiar with the Evaluation Form (15 minutes)

Together, read the items in the handout, Evaluation Form.

ASK: Your teams will be asked to fill in this form after they have finished their improvement projects.

> Based on what you have already observed, are there any questions that you think are relevant to the way they are working together?

GATHER RESPONSES and ask for anecdotal evidence.

STEP 5.

Share reactions (15 minutes)

In plenary, ask participants to describe their reactions to and learnings from this activity.

Closing Technical Coaching Team Meeting #3

This session wraps up the meeting and determines next steps.

DURATION 45 minutes

MATERIALS — Handouts: Evaluation Form for Technical Coaching Team Meeting 3

PROCESS:

STEP I. Summarize learnings and reactions to this meeting (15 minutes)

DIVIDE the group into pairs to talk about the day's activities.

ASK: What have you learned today about coaching in general?

What have you learned specifically about coaching your Improvement Team on completing the Challenge Model and monitoring and evaluation plan?

How are you feeling about your coaching responsibilities?

Encourage open discussion of any concerns about the Challenge Model and M&E Plan content or coaching skills. Invite questions and respond to them.

STEP 2. Plan next steps (15 minutes)

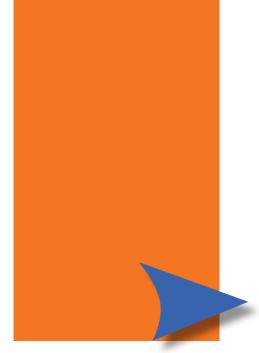
Discuss how coaching visits will be scheduled and organized.

Remind participants that before Workshop #3, they will be coaching their teams to:

- **COMPLETE** their Challenge Models, including their Action Plan and M&E plan.
- PREPARE for their presentations in Workshop #3.
- **PREPARE** the LDP+ Reporting Form and the Evaluation Form.

STEP 3. Evaluate the meeting (15 minutes)

DISTRIBUTE the handout *Evaluation Form for Technical Coaching Team Meeting 3.* Allow 15 minutes for participants to complete it.



SECTION 6 HANDOUTS

Tips for Improving OALFA Coaching Skills
Challenge Model Example
Action Plan Example
Reviewing the Last Steps of Improvement Teams' Challenge Models
Feedback on Coaching Practice for the First Steps in the Challenge Model
Elements of a Monitoring and Evaluation Plan
LDP+ Reporting Form
Monitoring and Evaluation Planning Worksheet
Monitoring and Evaluation Planning Worksheet Example
Evaluation Form
Evaluation Form: Technical Coaching Team Meeting #3342

TIPS FOR IMPROVING **OALFA** COACHING SKILLS

OALFA SKILLS	WAYS TO STRENGTHEN THESE SKILLS
Observe	 Try to observe without judgment. Stick to the facts (what do you see?) rather than what you think you see. Write down these facts and check how many of them are objectively observable and how many are subjective impressions. When you interpret what you observe, check whether your interpretation is correct
	by asking: "You seem tense. Is something the matter?"
Ask	If you plan to have a conversation, prepare good questions in advance. Review each question to make sure it is an authentic inquiry that will help learning, rather than one that blocks learning.
	Before the conversation, tell yourself: "I know very little about this person's experience." Or, "I would like to get his perspective, especially if it is different from mine."
	After the conversation, review the questions you actually asked and the answers you received. What have you learned about the other person? About yourself?
Listen	Hold back when you find yourself wanting to give advice. Instead listen for hints that the other person already knows the content of your advice.
	Practice writing a summary of what a person being coached said in a conversation.
	Practice identifying the feeling underneath the words. Verify if you were correct.
	Increase your tolerance for silence. If you wait patiently, you allow the other person to respond thoughtfully.
Feedback	■ Think about how you would like to receive feedback from another person.
recuback	 Practice being specific when giving feedback, referring to specific behaviors without labeling them.
	■ Before giving negative feedback, look for behaviors that merit applause and encouragement, and then phrase the negative feedback as a request for improvement.
Agreement	Each time you make an agreement, ask yourself whether it is actionable and has a time limit.
	Write down reminders for follow-up in your diary or on your calendar.
	Before closing a conversation, make sure there is an agreement.

CHALLENGE MODEL EXAMPLE

Priority Health Area

Health Area: HIV/AIDS/PMTCT: Prevention of Mother-to-Child Transmission

Vision

All men and women from the communities surrounding our clinics will know their HIV status and will receive accessible and convenient integrated reproductive health and HIV services to prevent unplanned pregnancies and safeguard the health of their families.

Measurable Result

Between June and December 2012, the number of pregnant women attending antenatal clinics in Makumba District who receive HIV counseling and testing services will increase from 150/300 (50%) to 280/300 (93%).

Obstacles and Root Causes

- Many pregnant women resist coming to our antenatal clinics, or come once and don't return to know their HIV status.
 - > They don't feel welcome at the clinic.
 - They don't have money for transportation.
- They don't want to know and disclose their HIV/status.
 - They fear they might be abandoned by their partners.
 - They don't know they can prevent their child from being infected.

Priority Actions

- Provide community outreach to pregnant women to explain and promote antenatal care and HIV counseling and testing services.
- Integrate HIV counseling and testing and PMTCT into antenatal care package.
- Sensitize care providers to the importance of helping women feel welcome and secure at antenatal clinics.
- Provide results of HIV tests to women in their homes, without requiring a return clinic visit.

Current Situation (a few examples)

- Only half of women attending antenatal clinics in Makumba District currently receive counseling and testing services. Government policy provides funding to support community outreach for PMTCT.
- # of women testing HIV positive is increasing in Makumba district.
- Some service providers discriminate against HIV+ clients.

Challenge

How can we increase the number of pregnant women who receive HIV counseling and testing despite their resistance to attending antenatal clinics and being tested?

ACTION PLAN EXAMPLE

CHALLENGE: How can we increase the number				
of pregnant women who receive HIV counseling				
and testing despite their resistance to attending				
antenatal clinics and being tested?				

OUTCOME INDICATOR(S):

■ #of women attending antenatal clinics who receive HIV counseling and testing services

MEASURABLE RESULT: Between June and December 2012, the number of women attending antenatal clinics in Makumba District who receive HIV counseling and testing services will increase from 150 (50%) to 280 (93%).

OUTPUT INDICATOR(S):

- #of pregnant women attending community information sessions on counseling/testing and PMTCT
- #of health providers participating in antenatal care sensitization training

			0
Activities	Person Responsible	Date(s) completed	Resources
Review and adapt community outreach BCC materials	District Health Officer	15 June	InternetMOH BCC materials
Provide community outreach to pregnant women to explain and promote antenatal care and HIV counseling and testing services	District Health Officer	31 July 31 August 15 December	■ Funds to print BCC materials
Review protocols and standards of practice for counseling and testing and PMTCT	District Health Officer	15 June	InternetLocal adaptation of Standards of Practice
Integrate HIV counseling and testing and PMTCT into antenatal care package	Team of head nurses from antenatal clinics	15 July	Time for meetingsFunds to print protocols
Hold focus group discussions with clients on quality of care, attitudes of providers, and accessibility to antenatal clinics	District BCC specialist	30 June	■ Tape or digital recorder
Sensitize care providers to the importance of helping women feel welcome and secure at antenatal clinics	District Health Officer	31 July	■ Training materials and supplies
Create a system for providing results of HIV tests to women in their homes, without requiring a return clinic visit	District Health Officer	15 July	Meeting timeExamples from other geographic locations
Implement system for getting HIV test results to clients without a clinic visit	District Health Officer and team of community health worker supervisors	I August	■ Travel time and expenses
Provide results of HIV tests to women in their homes, without requiring a return clinic visit	Community health workers and supervisors	31 August, Sept, Oct, Nov, Dec	Printed test resultsTravel time and expenses

REVIEWING THE LAST STEPS OF IMPROVEMENT TEAMS' CHALLENGE MODELS

The Obstacles and Root Causes:

- Are the obstacles related to the measurable result?
- Has the team considered all categories of obstacles: policies and procedures; providers; equipment, infrastructure, and supplies; clients and communities; gender?
- Have they used a root cause analysis tool to be sure they are addressing causes and not just symptoms?
- Are there any changes in wording that would make the root causes clearer?

The Key Challenge:

- Does the team's challenge statement include reference to both their measurable result and their obstacles?
- Are there any changes in wording that would describe the challenge more accurately?

The Action Plan:

- Do the priority actions address the root causes of obstacles and help to address the challenge?
- Are there enough activities to achieve the measurable result?
- Does the Action Plan include estimates of the human, material, and financial resources needed to carry out the activities?
- Does it include a timeline for activities?
- Are there any changes in wording that would make the Action Plan stronger?

The Monitoring and Evaluation Plan:

- Has the team included all the elements of an M&E plan?
 - > A clearly stated indicator?
 - > An indicator definition with a numerator and denominator?
 - A baseline and goal value for the indicator?
 - ➤ A data source and collection method? Frequency of data collection? Person responsible for collecting the data?
- Are the indicators adequate to measure the expected result?

FEEDBACK ON COACHING PRACTICE FOR THE FIRST STEPS IN THE CHALLENGE MODEL

Questions for the Observer:

General coaching	What did the coach say and do to foster a positive physical and emotional environment for this exercise?
skills: creating	What else could s/he have said or done to foster that environment?
a positive environment	Can you give any examples of things s/he said or did in any part of this activity that was not appropriate or helpful? If so, what might the coach have said or done differently?
The team's vision	What did the coach say and do to confirm or help the team improve the vision?What useful questions did s/he ask?
	What else might s/he have said or done to help make the vision stronger?
The current situation	What did the coach say and do to help the team analyze the current situation and link it to their measurable result?
	■ What useful questions did s/he ask?
	What else might s/he have said or done to help them analyze and describe their current situation more accurately?
The measurable	■ What did the coach say and do to help the team make their result SMART?
result	■ What useful questions did s/he ask?
. 004.0	What else might s/he have said or done to help create a SMART result?

ELEMENTS OF A MONITORING AND EVALUATION PLAN

I.INDICATOR	Each indicator should be stated using clear terms that are easy to understand, and should measure only one thing. If there is more than one thing to measure in the indicator, it should be restated as separate indicators.
2. INDICATOR DEFINITION	Provide a detailed definition of the indicator and the terms used, to ensure that different people at different times would collect identical types of data for that indicator, and measure it the same way. For a quantitative indicator, include a numerator and denominator with the description of how the indicator measurement will be calculated.
3. BASELINE AND GOAL	Measure the value of each indicator before project activities begin and set an achievable goal for the indicator to reach by the end of the project. The baseline measurement is the starting point for tracking changes in the indicator(s) over the period of an Action Plan.
4. DATA SOURCE	Specify the data source for each indicator. Consider the pros and cons of each source (accuracy, availability, cost, etc.) to ensure access to the data. Examples of data sources include facility records, surveys, websites, published research, and health information systems (HIS).
5.DATA COLLECTION METHOD	Specify the method or approach for collecting data for each indicator. For primary data (data that teams collect themselves), note the type of instrument needed to gather the data (e.g., structured questionnaire, direct observation form, scale to weigh infants). For indicators based on secondary data (data from existing sources), give the method of calculating the indicator.
6. FREQUENCY OF DATA COLLECTION	Note the timing of data collection for each indicator. Depending on the indicator, this may be monthly, quarterly, annually, or less frequently. Baseline data are collected for each indicator before activities begin.
7. RESPONSIBILITY FOR COLLECTING DATA	Identify who is responsible for data collection. Responsibility should be assigned to a specific office, team, or individual.

LDP+ REPORTING FORM

Name and Location of Improvement Team:			
Report Prepared By:			
Dates of Activity (months):			
Date of Submission:			
Improvement Team Members:			
Name	Title	M/F	Email address

- I. Priority health area for this LDP+ initiative:
- 2. Measurable result your team defined in your Challenge Model:
- 3. Monitoring and Evaluation Planning Worksheet(s): Please include a completed Monitoring and Evaluation Planning Worksheet for each indicator for which you collected data during the implementation of the LDP+ improvement project.
- 4. Summary of results: Based on the values of your indicators, please briefly describe what your Improvement Team has accomplished.

MONITORING AND EVALUATION PLANNING WORKSHEET

BASELINE MO MO
What is the value of the indicator the month before beginning ICRC-LDP activities?
Numerator
Denominator
Percent

MONITORING AND EVALUATION PLANNING WORKSHEET EXAMPLE

DATA COLLECTION RESPONSIBILITY FREQUENCY	Chief Nurse in antenatal clinic		
DATA COLLECTION FREQUENCY			
DATA SOURCE	Health facility records		
GOAL	280/300 (93%)		
Ο 9			
δ 5			
Σ 4			
3 Q			
2 A			
δ –			
BASELINE	150/300 (50%)		Percent
INDICATOR DEFINITION	Numerator: Number of pregnant women who attend antenatal clinics in Makumba District who receive HIV counseling and testing services	Denominator: Number of pregnant women who attend antenatal clinics in Makumba District	
INDICATOR	Number of pregnant women attending antenatal clinics who receive HIV counseling and testing services		

EVALUATION FORM

I. Use the matrix below to summarize any difficulties your team encountered while working towards your measurable result, and how you addressed those difficulties.

What difficulties did your team encounter in implementing your Action Plan?	What actions did your team take to overcome these difficulties?	Did these actions succeed? Why or why not?
2.Beyond the changes in your indicates	cators, what other effects of your	intervention did you observe?

3.	How	did	your	team	apply	leading,	managing	and	governing	practices t	o carry	out y	our/
in	tervei	ntio	n?										

The following questions are to only be answered at the end of Workshop #4:

- 4. What might your team do differently if you use the LDP+ process on a new challenge in the future?
- 5. Has your team chosen a new challenge to take on?

 Yes ____ No ___
- 6. If yes, what is the new challenge?
- 7. If no, please describe the reason for not choosing another challenge.

EVALUATION FORM: TECHNICAL COACHING TEAM MEETING #3

Date: _	
	complete this evaluation form.We appreciate your assistance in helping us to improve the LDP+ als and other aspects of this program.Thank you.
1.	What did you learn in this Technical Coaching Team Meeting?
2.	How will what you learned help you fulfill your role as a member of the Technical Coaching Team?
3.	What feedback do you want to give to the LDP+ facilitators?



WORKSHOP 3: ALIGNING, MOBILIZING, AND INSPIRING

AGENDA AND OBJECTIVES: WORKSHOP #3

PURPOSE

Increase and sustain the capacity to work in teams, face challenges, and achieve measurable results.

OBJECTIVES

Introduce tools and techniques for aligning, mobilizing, and inspiring, including:

- Analyze and interpret results on progress
- Support others with coaching
- Identify team roles
- Distinguish commitment from compliance
- Make requests instead of complaining
- Lead and coach a team through breakdowns
- Gain and maintain trust
- Acknowledge others
- Teams share learning on successes, obstacles, and lessons that can be identified and scaled up to other sites.

SESSIONS

- Welcome back and assignment review: Review what participants learned during Workshop #2
- Session 13: Shared Learning Sessions
- Session 14: Aligning and Mobilizing
- Session 15: Working Effectively in Teams
- Session 16: Inspiring
- Preparation for Workshop #4

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	day one	DAY TWO
	Opening (15 min.)	Review (15 min.)
AM	Welcome Back (30 min.)	Session 14: Aligning and Mobilizing (2 hr. 30 min.)
	Session 13: Shared Learning Sessions (2 hr. 30 min.)	Session 15: Working Effectively in Teams (45 min.)
Lunci	h Break	
	Session 13: Shared Learning Sessions (conclusion) (2 hr.)	Session 15: Working Effectively in Teams (conclusion) (1 hr. 30 min.)
PM		Session 16: Inspiring (2 hr.)
		Preparation for Workshop #4 (30 min.)
	Closing Reflection (30 min.)	Workshop Evaluation (10 min.)

PREPARATIONS

Plan enough time for the Welcome Back and Assignment Review on Day One. The Settling In, Welcome Back, and Overview will take about 45 minutes. For each team's report in the Shared Learning Sessions, reserve about 15 minutes per team—10 minutes to present and 5 minutes for questions.

Copy the handouts before each session. The plan for each activity shows what you need to use for that activity. You can find all of the handouts in the Handout sections of this Guide or on LeaderNet in the Leadership Facilitators section, in Resources. Start at http://www.leadernet.org/.

NOTE: LeaderNet is a global community of practice for managers who lead and LDP+ and Virtual Leadership Development Program (VLDP) facilitators. To use LeaderNet, first go to http://www.leadernet.org/ and register (there is no cost).

The required supplies are listed with each session and each activity. Sometimes you will need to prepare flipcharts ahead of time. Read all of the materials in advance. Plan how long you will give for individual, group, and plenary work.

REFLECTION AND REVIEW

Reflection. There is time for reflection at the end of each day so that participants can talk about what they learned and what seemed most important to them.

Review. The morning of Day One starts with a presentation of the content from Workshop #2, and the morning of Day Two starts with a review of the content from the previous day. Before the start of this workshop, ask a participant to make a presentation about what was covered in the previous workshop. Also, arrange for a presenter at the end of Day One to start Day Two with a review.

NOTE: Regular reflection is an important leadership practice. It enables people to have time to think about what they have learned and how to apply it.

EVALUATIONS

Workshop evaluation. To evaluate the workshop, copy and give out the workshop evaluation form and the Feedback for LDP+ Facilitator handouts. They are the last two pages of the handouts section of this section.

Progress evaluation. The Monitoring and Evaluation will help the teams evaluate the progress of their improvement projects.

BETWEEN WORKSHOPS 3 AND 4

Full team meetings. Participants hold meetings with the rest of their teams back at their work sites to report on what they learned in the workshop and to review their results. Teams have a lot to do back at their work sites before Workshop #4. Teams should hold meetings to:

- Review what was learned in Workshop #3
- Refine their Action Plans and implement activities
- Analyze results data collected to date
- Begin work on their final presentations

Coaching sessions. Members of the LDP+ Technical Coaching Team work with the teams between each workshop. In these meetings, they review progress and topics covered in the workshop as well as provide feedback and support to the teams as the teams prepare and implement their Action Plans.



WORKSHOP 3: DAY ONE

WELCOME BACK AND REVIEW

Opening

Welcome Participants Back to the LDP+

SESSION 13: SHARED LEARNING SESSION

13.A Using the LDP+ Reporting Form

— LUNCH BREAK —

13.B Telling Your Story

13.C Technical Interventions to Address the Priority Health Area Closing



WELCOME BACK AND ASSIGNMENT REVIEW

Opening



15 minutes

Ask participants to sit in their teams from their work sites.

This is a time for administrative and logistical announcements.

Welcome Participants Back to the LDP+

This exercise reviews and reinforces content from the previous workshop and presents what is planned for Workshop #3.

- **DURATION** 30 minutes
- **MATERIALS** □ Handout: Agenda and Objectives: Workshop #3
- **PROCESS:**

Settling in (15 minutes) STEP 1.

Welcome everyone.

Now we will hear from a participant about what we learned in the previous SAY: workshop.

(You will have asked the participant at the end of Workshop #2 to speak to the group.)

SAY: Next, we will look at the agenda for this workshop, review the assignment that you and your team have been working on at your work site, and hear presentations. After that, you will have a chance to ask questions.

STEP 2. Overview and agenda for Workshop #3 (15 minutes)

HAND OUT the LDP+ Workshop #3 Agenda and Objectives.

Review the workshop's objectives and schedule. Allow time for questions.



SESSION 13. SHARED LEARNING SESSION

PURPOSE

Teams share learning on:

- What the teams learned when working towards a common result in different work sites.
- The results achieved to date and the changes introduced to achieve them.
- The obstacles teams have faced to date when implementing the changes and how they were addressed.

PARTICIPANTS

- Improvement Team members
- Coaches (from the Technical Coaching Team)

PREPARATIONS FORTECHNICAL COACHING TEAM

Prior to the Shared Learning Sessions, the coaches should:

- Visit the teams to monitor their progress in using the LDP+ Reporting Form
- □ Encourage teams to complete their Action Plans and to prepare the LDP+ Reporting and Evaluation **Forms**
- Identify the knowledge (proven practices, guidelines, etc.) that will benefit teams in addressing their challenges and come to the Shared Learning Sessions at the start of Workshop #3 prepared to share these lessons

PREPARATIONS FOR TEAMS

Prior to their attendance, teams work together to complete three handouts:

- Action Plan
- LDP+ Reporting Form
- Evaluation Form

TEAM PRESENTATIONS

Teams are expected to present their progress using the LDP+ Reporting Form and Evaluation Form:

- Results to date and the indicators used to track progress
- Changes introduced
- Obstacles faced in implementing changes
- Monitoring and Evaluation Planning Worksheet
- Recommendations

OUTCOMES

- Sharing lessons learned
- Identification of effective interventions
- Revised Action Plans to include effective actions





13.A Using the LDP+ Reporting Form

This exercise helps participants to report and analyze their data using the LDP+ Reporting Form and the Evaluation Form.

- **DURATION** 2 hours 30 minutes
- MATERIALS

 Handouts: LDP+ Reporting Form; Evaluation Form
 - Blank flipchart
- **PROCESS:**

STEP I. Review the LDP+ Reporting Form (15 minutes)

Ask participants to sit with their teams and with their coaches. If coaches are assigned to more than one team, they should circulate to their various teams to provide them with support throughout the exercise.

In the large group:

SAY: The LDP+ Reporting Form will help you to track progress towards your results.

The M&E Planning Worksheet is a tool on which you record your indicator, the numerator and denominator, baseline, and goal or desired measurable result. Each month, you will record your progress in achieving your desired result (the numerator/denominator value for that month). This table also serves as a record of the data source, method for collecting data, how frequently you will collect that data, and the person responsible.

WRITE down the following four terms on a flipchart:

- **Baseline**: value of the selected indicator at the start of implementation of the Action Plan.
- **Numerator**: actual number of people or events that exhibit a particular trait; this value is recorded for each month.
- **Denominator**: total possible population or number of events over a specific period of time.
- Monthly Indicator Value: numerator/denominator for that month.

Remind participants that they have worked in their teams (with a coach) to track their progress to date using the LDP+ Reporting Form.

STEP 2. Define terms used in Monitoring and Evaluation (15 minutes)

In the large group:

SAY: Effectively using results requires an ability to analyze and interpret data.

> Analyze means to examine something in detail to understand its nature better, especially to study its parts or structure to understand how they form the whole.

Interpret means to explain the meaning of something, especially to draw significance or cause and effect out of data.

SAY: You need to be able to show through analysis and interpretation the progress you have made toward achieving your result(s).

The LDP+ Reporting Form allows you to track your data and report changes.

STEP 3. Understanding effective actions (60 minutes)

SAY: In your groups, discuss the following questions using the data you have recorded in your LDP+ Reporting Form:

> Did the indicator values increase and/or decrease over time? If so, what caused this?

Note: Variations in data could be caused by how your priority actions are scheduled as well as weather conditions, community activities, political changes, or other reasons.

- Did the data values increase/decrease slowly or quickly? Note: Some indicators show change more slowly than others.
- What other observations can you make?

Use the Evaluation Form handout to review and revise your learning during this workshop.

On this form, your team will record the obstacles faced, steps you took to overcome the obstacles, and what leading, managing, and governing practices you applied.



STEP 4. Summarize your understanding of your data and report out to large group (60 minutes)

ASK: Now that you have analyzed and interpreted your data, do you think your team is on track to achieve its intended result?

SAY: After completing the LDP+ Reporting Form and the Evaluation Form, each team should summarize its results, what actions your team took (including the application of leading, managing, and governing practices) that contributed to the results you achieved, and discuss what other factors also contributed to the results.

Each team should take five minutes to report in plenary.

After all the teams have presented:

ASK: What are the key interventions that were presented here that led to results?

SAY: Teams should make notes on the proven interventions implemented by other teams that may support the achievement of your desired measurable result.

13.B Telling Your Story

This exercise helps teams to tell the story of their achievements.

- **DURATION** 60 minutes
- **MATERIALS** Handout: Telling Your Story
- **PROCESS:**

Settling in (5 minutes)

Ask participants to sit with their work teams.

Drafting your story (40 minutes)

In the large group:

SAY: We are going to learn how to tell a good story about the results we have achieved to date and the actions we used to achieve them.

Ask a participant to read out loud the Telling Your Story handout.

SAY: Refer to the handout "Telling Your Story." Answering the questions on this handout will help prepare your team to tell your story. Teams should answer these questions about their own experience.

- What was the setting of the story?
- What was the challenge the team was facing?
- What were the main activities they undertake to address the challenge?
- What were the results they achieved?

SAY: Working in your teams, draft a story that describes the challenges you were facing, the interventions you used, and the results you achieved.



STEP 2. Sharing your story with others (15 minutes)

Each team presents its story to another team (2–5 minutes).

The other team gives feedback based on the handout, Telling Your Story.

SAY: You have now have written a first draft of a story, and you have had some experience in presenting it. At the Final Results Presentation during Workshop #4, you will have another opportunity to tell your story.

> Part of your homework after this workshop is to refine your story and practice telling it to others.

13.C Technical Interventions to Address the Priority Health Area

This exercise helps teams learn new interventions to address their challenges.

- FACILITATED by a member of the Technical Coaching Team
- **DURATION** 60 minutes
- MATERIALS Blank flipchart
 - Technical presentation on Proven Interventions in the Priority Health Area prepared ahead of time by the Technical Coaching Team.
- **PROCESS:**
 - STEP I. Discuss interventions that may support the achievement of teams' measurable results (10 minutes)

In the large group:

- **SAY:** In the Shared Learning Sessions we learned from other teams about promising interventions.
- **SAY:** We are now going to present some interventions that will help you better address the priority health area.

(Members of the Technical Coaching Team make a presentation about interventions that are proven to produce results in the Priority Health Area.)

STEP 2. Revising the Action Plan (30 minutes)

SAY: Work in your teams and discuss how you can include some of these interventions in your Action Plan.

Also include interventions you have learned about from hearing other teams when they reported on their effective actions.

STEP 3. Teams present updated Action Plans (20 minutes)

Closing



DURATION

30 minutes

In the large group:

ASK: What did you learn today? What stands out for you?

Listen to a few answers.

SAY: Each of you should take a few minutes to write down your answers.

When you are done, discuss your answers with a person next to you.

After about 10 minutes, addressing the entire group:

SAY: Would each pair please share one of your answers with the group? We will go around the room.

Continue to listen to pairs' answers until there are no more. If anything important has been overlooked, MENTION IT.

Ask a participant to be prepared to present what he or she has learned in this day's sessions at the start of Day Two.



WORKSHOP 3: DAY T

SESSION 14: ALIGNING AND MOBILIZING

Review

- 14.A What Does Aligning and Mobilizing Mean?
- 14.B Coaching to Support Others
- 14.C Gaining Commitment, Not Just Compliance

SESSION 15: WORKING EFFECTIVELY IN TEAMS

15.A Understanding Roles in Teamwork

— LUNCH BREAK —

- 15.B Making Effective Requests and Reducing Complaints
- 15.C Leading Through Breakdowns

SESSION 16: INSPIRING

- 16.A What is Inspiring?
- 16.B Inspire through Building Trust
- 16.C Inspire Through Acknowledgment
- 16.D Next Steps—Reflecting on Workshop #3 and Preparing for Workshop #4

Workshop Evaluation





SESSION 14. ALIGNING AND MOBILIZING

PURPOSE	Introduce the leadership practices of aligning and mobilizing.
OBJECTIVE	■ To describe ways to align and mobilize others
	 To create conditions for people to engage and commit to implementing Action Plans
	To coach others to achieve results
PREPARATIONS	 Read through the facilitator notes for this session.
	 Prepare the required flipcharts.
	 Prepare copies of all handouts.
	 Practice role-plays for the coaching session with a co-facilitator or participant.
MATERIALS	□ Flipchart—easel and paper
	Таре
	Colored markers
HANDOUTS	 Integrated Practices for High Performing Health Systems
	Coaching Principles
	□ Three-Person Coaching Exercise
	□ Commitment vs. Compliance







Opening



15 minutes

Ask participants to sit as a team with others from their work sites.

This is a time for administrative and logistical announcements.

Ask a participant to report learnings from Day I.

14.A What Does Aligning and Mobilizing Mean?

This exercise gives participants the chance to explore how aligning and mobilizing are important for leading, managing, and governing.

DURATION

40 minutes

MATERIALS

- Blank flipchart
- ☐ Handout: Integrated Practices for High Performing Health Systems
- **PROCESS:**

STEP I. Define aligning and mobilizing (20 minutes)

In the large group:

SAY:

We have started to face our challenges and to scan and focus. You have already been implementing your plans, but you may have come up against some obstacles from individuals within or outside your team. So we are going to discuss aligning and mobilizing.

This will help you to turn your visions into action so that you can achieve your intended results.

ASK: What do the words "aligning" and "mobilizing" mean?

RECORD answers on a flipchart.

HAND OUT the Integrated Practices for High Performing Health Systems.



Review the definition of "aligning and mobilizing."

SAY: There are five main outcomes of successful aligning and mobilizing, which makes it possible for you to:

- Ensure that values, mission, strategy, structure, systems, and daily actions are all linked and support one another.
- Facilitate—or smooth the progress of—teamwork.
- Unite key stakeholders around an inspiring vision.
- Link goals with rewards and recognition.
- Enlist stakeholders to commit resources.

Ask someone to read from the Integrated Practices the organizational outcome of good aligning and mobilizing:

SAY: The organizational outcome of good aligning and mobilizing is:

> "Internal and external stakeholders understand and support the organization's goals and have mobilized resources to reach these goals."

STEP 2. Wrap up (20 minutes)

ASK: Why is it important for managers who lead to mobilize and align?

SAY: Work in your teams to see if you could include additional aligning and mobilizing activities to help you carry out your Action Plan.

Collect some responses.







14.B Coaching to Support Others

This activity gives participants a chance to practice a short coaching conversation and explore its use in helping others to become more effective.



I hour 10 minutes



 Prepared (covered) flipchart with the definition of coaching:

Coaching is enabling others to reflect on their commitments and find new ways to achieve their intended results.

Cover until instructed to reveal.

Handouts: Coaching Principles; Three-Person Coaching Exercise

PROCESS:

STEP 1. Introduce the concept of coaching (5 minutes)

In the large group:

ASK: What is a coach and what does a coach do?

NOTE: People will probably talk about coaching in football or another sport, where the coach helps an individual or team win.

REVEAL and **READ ALOUD** the definition of coaching from the prepared flipchart.

SAY: Coaching is enabling others to reflect on their commitments and find new ways to achieve their intended results. As you work to implement your Action Plan, you may have times where you need to coach fellow team members in order to re-enlist their commitment and to find new ways of achieving the result.



STEP 2. Coaching role play—a bad example (5 minutes)

Two facilitators (or you and a participant you prepare in advance) conduct a role play. Present the following situation:

- A supervisor visits a staff member to criticize his or her performance.
- Rather than listening, s/he immediately starts to look at papers and criticizes the staff member for poor performance.
- Rather than discuss the causes of problems, the supervisor immediately begins to give solutions.

At the conclusion of this role play, to the person being coached,

ASK: How did you feel?

Is your performance going to improve from this interaction?

To the large group:

ASK: Is this situation familiar to any of you?

STEP 3. Coaching role play—a good example (5 minutes)

Repeat the role play, but with a different approach.

- The supervisor visits a staff member to coach him or her toward better performance.
- S/he first greets the staff member and asks how s/he thinks things are going.
- The coach then asks questions to try to understand what the staff member is trying to achieve, what actions s/he has taken, and what s/he thinks needs to be done.
- The coach stays in the "inquiry" mode and only asks questions, without giving
- The coach gives the staff person an opportunity to think through his or her problems, and offers support—trying to understand how the other sees these problems—rather than giving solutions.

To the person being coached:

ASK: How do you feel now?

In the large group:

ASK: Was the employee able to come up with some solutions?

Do you think he or she would be more motivated to perform now?

Hand out copies of Coaching Principles.

Review the principles using the role plays to illustrate each one.

STEP 4. Practice effective coaching (30 minutes)

HAND OUT copies of the Three-Person Coaching Exercise.

- **DIVIDE** the participants into groups of three by counting off"1-2-3."
- Add a facilitator to a team if it is one member short.

Read aloud the instructions and role for each person to practice coaching before each group of three starts their role plays.

STEP 5. Report on experiences (15 minutes)

Ask participants to discuss their experiences practicing coaching.

SAY: In your small groups, discuss the following questions:

What was it like to be coached?

What was good and what could have been better?

What was easy and what was difficult about being the coach?

As observers, what did you notice?

STEP 6. Wrap up and suggestions for practice (10 minutes)

In the large group, repeat each of the questions in Step 5.

- COLLECT a few responses.
- Review the main challenges of being an effective coach, based on the responses.

ASK: What do you need to work on to become a (better) coach?

WRITE the responses on a flipchart.

Invite the participants to pick a situation at work where they could either coach or be coached. Encourage them to practice what they have just learned.

NOTE: Participants who work in the same organization or on the same team might consider forming a coaching support group to meet from time to time to discuss progress and common challenges.



14.C Gaining Commitment, Not Just Compliance

This exercise introduces the concepts of compliance and commitment and how they differ. Understanding these concepts helps a workgroup or group of managers build commitment to the implementation of a set of tasks or a work plan.



30 minutes



- Paper for participants to write on
- Prepared flipchart with two columns and the headings Commitment for the left column and Compliance for the right. Leave two rows of space above the headings.
- □ Handout: Commitment versus Compliance

PROCESS:

STEP 1. Reflect on motivating factors (10 minutes)

Instruct participants to get paper and DRAW a line in the middle from top to bottom to make two columns.

In the large group:

SAY:

Think of a time when you were really committed to doing something.

In the left column write the factors that motivated you.

(Pause)

For contrast, now think about a situation when you were forced or obliged to do something.

Write the factors that motivated you in that situation in the right column.

(Pause)

SAY: At your table, share what you wrote in each column.

In the large group:

ASK: What is the difference between the answers in the two columns?

COLLECT a few responses and **WRITE** them on the flipchart under either "Commitment" or "Compliance."

NOTE: You will probably find that commitment has internal motivators while compliance has external motivators.

STEP 2. Discuss the effect of commitment and compliance on performance (10 minutes)

WRITE "Internal Motivators" above "Commitment" and "External Motivators" above "Compliance."

ASK: What is the difference in the types of performance they produce?

Why is this distinction important for the improvement project you selected?

ASK: Are there any times when compliance is okay? For what reasons?

COLLECT some responses.

HAND OUT and READ ALOUD, or ask a participant to read, the handout Commitment versus Compliance.

TIP: Be sure participants understand that in many situations there are good reasons for compliance, especially compliance with medical protocols or government regulations.

SAY: Compliance is not always a problem; it just does not inspire innovation and creativity. You need to judge the situation and know what is needed.

The real problem is malicious compliance—foot dragging and sabotage.

Ask for questions or comments. Be sure malicious compliance is part of a group discussion.

STEP 3. Wrap up and suggestions for practice (10 minutes)

SAY: Think about your workplace and where you can inspire commitment.

COLLECT a few responses and encourage people to look for these opportunities where they work.





SESSION 15. WORKING EFFECTIVELY IN TEAMS

PURPOSE	Demonstrate the different roles within a team so that participants may become more effective team members.
OBJECTIVES	 To recognize the different roles members take on in a team To turn complaints into requests To coach a team through a pretend breakdown
PREPARATIONS	 Read through the facilitator notes for this session. Prepare the required flipcharts. Prepare copies of all handouts.
MATERIALS	Flipchart—easel and paperTapeColored markers
HANDOUTS	 Understanding Roles in Teamwork Requests Instead of Complaints Leading through Breakdowns Breakdown Conversation Worksheet Coaching through Breakdowns

15.A Understanding Roles in Teamwork

This exercise helps teams reflect on the various actions of its members. Use this exercise to discover ways to improve team members' actions and interactions.

- **DURATION**
- 45 minutes
- **MATERIALS**
- Prepared flipchart with the four actions of team members listed: Initiate, Follow, Oppose, Observe
- Handout: Understanding Roles in Teamwork
- Paper for the observers to write on and for everyone for closing reflections
- **PROCESS:**

Present four roles of team members (10 minutes)

In the large group:

SAY: There are four equally important roles that people can play in a team: initiate, follow, oppose, or observe.

A healthy team has people playing all four roles in order to get results.

WRITE "productive" and "non-productive" after each word on the flipchart.

ASK: What are the productive and non-productive aspects of each of these roles?

POINT OUT that how a person acts in these roles can also be productive or nonproductive.

SAY: Initiating can mean setting a direction, or it can be dominating.

Following can mean move things forward, or be passively accepting.

Opposing can mean questioning and thinking constructively or obstructing action.

Observing can mean reflecting and giving feedback or withdrawing.

SAY: For a team to function well, it needs all four roles played out in a productive way.

> For a team member to be effective, he or she must be able to be productive in each of the four roles.



STEP 2. Practice team roles (15 minutes)

DIVIDE participants into groups of six.

■ Select two people from each group to act as observers.

NOTE: It is good to choose people who you think are natural "initiators" for this role because it gives them a challenge to stay quiet and observe.

Instruct the observers:

SAY: List the four team roles on a piece of paper.

> Mark on the paper when you see members of the team you are observing playing one of these roles.

Instruct the teams:

SAY:

Pick a topic or challenge to discuss that will generate a spirited conversation. For example, what do we need to do for our improvement project to get the results we want?

This topic should be part of the work you are doing now so your discussion will be real and engaging.

Give teams about 10 minutes for their conversations, or more if not all roles have surfaced.

TEP 3. Share experiences (15 minutes)

Instruct observers to give feedback from their notes to their teams.

In the large group:

ASK: What was it like to be only an observer?

Was it difficult?

Did you see each of the four roles being played out?

In the large group, ask each team to share:

ASK: Did you see the four roles in a balanced way, or did one role dominate?

STEP 4. Wrap up and suggestions for practice (5 minutes)

SAY: We all have preferences for one role over another.

> To become effective team members, however, we need to learn how to play the roles that do not come most easily to us.

DISTRIBUTE Understanding Roles in Teamwork.

Invite the teams to think about ways to correct imbalances that they observed.

- Take a few responses.
- Emphasize that while there are no wrong roles, sometimes there is a lack of balance among the roles.

15.B Making Effective Requests and Reducing Complaints

This exercise helps participants to be more skillful when they communicate with others to align and mobilize them around desired results.

>	DURATION	30 minutes	
>	MATERIALS	 Prepared flipchart with three ser Will you 	
		Do this	_ (specific action)
		Ву	_ (specific time)
		□ Handout: Requests Instead of Com	plaints
		Blank flipchart	
×			

PROCESS:

STEP I. Settle in after lunch (5 minutes)

STEP 2. Change complaints into requests (5 minutes)

With the whole group, explain that people in organizations usually have a lot of complaints. By making a request, we are better able to align and mobilize people to take action than when we complain.

Ask them to give you some examples of complaints they have or have heard in their organizations/facilities.

■ **RECORD** the examples on a flipchart.

CHANGE a few of the complaints into requests. To do this, use the prepared flipchart and **FILL IN** the requests in the blanks.

Will you	(specific person)
Do this	(specific action)
Ву	(specific time)?

WRITE on the flipchart three ways to respond to a request:

- Yes
- No
- Counteroffer: "No, I can't do that, but I can do this," or "I can do it by some other time."

Practice turning complaints into requests (10 minutes) STEP 3.

HAND OUT copies of Requests Instead of Complaints.

- Ask each participant to **WRITE** down examples of three complaints.
- Ask them to **REWRITE** these complaints as requests.

STEP 4. Share your requests (5 minutes)

Ask participants to work in pairs.

■ The pairs should CHECK each other's requests to see if they have the three specific elements of a good request.

STEP 5. Report on the experience and wrap up (5 minutes)

In the whole group, invite the participants to SHARE examples of good requests.

Encourage the participants to use these practices.

SAY: Try making requests—ones that could just as easily be complaints—of people soon after this workshop. Note how people handle the requests. Decide if you think they would have handled complaints differently.



15.C Leading Through Breakdowns

This exercise helps participants see breakdowns as a source of positive change and to learn how to lead themselves and others from a breakdown to a breakthrough in effective action.



45 minutes



 Prepared (covered) flipchart with the definition of a breakdown:

A breakdown is any situation that...

- Threatens progress toward a commitment
- > Presents uncertainty or difficulty
- Stops effective action
- Presents obstacles to our commitments
- ☐ Handouts: Leading Through Breakdowns; Breakdown Conversation Worksheet; Coaching Through Breakdowns
- □ Paper for participants to write on

PROCESS:

What is a breakdown? (5 minutes) STEP I.

In the large group:

ASK: What is a breakdown?

COLLECT some responses and then REVEAL the prepared flipchart and HAND OUT the Leading Through Breakdowns handout:

SAY: A breakdown is any situation that...

- Threatens progress toward a commitment.
- Presents uncertainty or difficulty.
- Stops effective action.
- Presents obstacles to our commitments.

STEP 2. Reflect on personal responses to breakdowns (10 minutes)

HAND OUT Coaching through Breakdowns.

In the large group, ask participants to think of a time when they had commitments and obstacles that confronted them.

ASK: What did you do?

Have participants WRITE their responses.

Talk about lessons learned from breakdowns (10 minutes) STEP 3.

Ask participants to work in small groups.

- HAND OUT copies of the Breakdown Conversation Worksheet to each group.
- Ask participants to respond to the questions on the worksheet:

ASK: What was the breakdown?

What were you committed to?

What was missing, or what happened, that caused the breakdown to occur?

What did you learn?

What actions could you take now?

STEP 4. Draw out practices to handle breakdowns (20 minutes)

After sharing in pairs, ask for some examples.

To summarize the learning:

ASK: What else did you learn from this exercise?



SESSION 16. INSPIRING

PURPOSE	Help participants understand the need for inspiring their workgroups and introduce ways to inspire.
OBJECTIVES	To define the leadership practice of inspiring
	■ To show how to gain and maintain trust
PREPARATIONS	 Read through the facilitator notes for this session.
	 Prepare copies of the handout Inspire Through Building Trust.
	Cut copies of the handout with "I acknowledge you for" into six slips of paper each, so that each slip has the text. Make enough slips so that every participant can write an acknowledgment for every person on his or her team.
	 Let the team of facilitators know they will be modeling how to acknowledge others by doing it with one another in front of the teams.
MATERIALS	□ Flipchart—easel and paper
	□ Tape
	Colored markers
HANDOUTS	 Integrated Practices for High Performing Health Systems (previously distributed this workshop)
	 Inspire Through Building Trust
	□ I acknowledge you for
	□ LDPTimeline
	 Assignment for Final Workshop
	Evaluation Form
	□ Team Meeting Form
	□ Telling Your Story
	☐ Tips for Effective Presentation of a Story
	Evaluation Form for Workshop #3
	•

This exercise gives participants the chance to explore the leadership practice of inspiring. It helps them learn how they can inspire others to follow as well as to be leaders themselves.

- **DURATION** 30
 - 30 minutes
- **MATERIALS**
- Handout: Integrated Practices of a High Performing Health System:
- Flipchart paper
- **PROCESS:**

STEP I. Discuss the meaning of inspiring (15 minutes)

Ask teams to sit in their teams. In the large group:

SAY: We have reviewed all but one of the practices of leading, managing, and

governing.

Now we are going to take a closer look at how to inspire.

ASK: What does inspire mean?

SAY: Try to come up with a definition in your team.

COLLECT a few answers and **WRITE** them on a flipchart.

SAY: To inspire is to breathe life (spirit) into someone through what we do or say.

Inspiring is an important leadership practice.

When we are inspired, we have the commitment and motivation to keep going even when it is really hard.

REFER to the handout, Integrated Practices for High Performing Health Systems.

Ask someone to read the five practices under inspire as well as the organizational outcome: "The organization's climate is one of continuous learning, and staff show commitment, even when setbacks occur."



Brainstorm ways to inspire (15 minutes) STEP 2.

SAY: Discuss what your team needs to do to inspire each other and others so that you can achieve your desired result.

COLLECT responses by asking for one action from each group. Then, continue until all the groups have no more examples to offer.

RECORD on a flipchart.



16.B Inspire Through Building Trust

This exercise explores the links between trust and inspiring.



45 minutes



- □ Prepared (and covered) flipchart with two definitions of "trust": as a noun and as a verb.
 - Noun: Trust is a firm reliance on the integrity, ability, or character of a person
 - > Verb: To trust is to increase one's vulnerability to another whose behavior is not under one's control in a situation where there may be risk.
- ☐ Handout: Inspire Through Building Trust
- Paper for participants to write on
- Blank flipchart

PROCESS:

STEP I. Explore the importance of trust (10 minutes)

In the large group:

ASK: What is trust?

RECORD responses on a flipchart.

HAND OUT copies of Inspire Through Building Trust and SHOW the flipchart with the two definitions of trust.

SAY: Trust can be a feeling we have when we believe that we can rely on someone. It can also be something we do.

Read the definitions aloud.

ASK: Why is trust important for managers who lead?

COLLECT a few responses and **WRITE** them on a flipchart.



STEP 2. Conduct an inquiry on trust (15 minutes)

ASK: Think of someone who you trust.

What has he or she done to earn your trust? Note actions on your paper.

(Pause while people write down their thoughts.)

Now think of someone you do not trust.

What has he or she done to lose your trust? Write these down too.

(Pause.)

Share your responses with a neighbor.

COLLECT responses and **WRITE** them on a flipchart with two columns labeled: "Trust gained" and "Trust lost".

STEP 3 Identify practices to improve trust (15 minutes)

SAY: In your teams, discuss how you can use the practices of leading, managing, and governing to improve trust in your workplace.

COLLECT group results and **RECORD** them on a flipchart.

Refer to the handout, Inspire Through Building Trust.

- Note any ideas that the groups did not mention.
- Participants can write additional suggestions on their handouts.

STEP 4. Wrap up and suggestions for practice (5 minutes)

In the large group:

ASK: Which of the practices you listed can you start implementing right away?

Which ones are more difficult?

COLLECT a few responses. Suggest that after the workshop, teams should discuss how they can support each other to increase trust.

16.C Inspire Through Acknowledgment

This exercise helps participants recognize the importance of acknowledging the accomplishments or contributions of others as well as gracefully receiving acknowledgment directed to them.

- **DURATION** 45 minutes
- **MATERIALS** ☐ Handout: Slips of paper with "I acknowledge you for...", enough for each member of a team to write an acknowledgment for every other member of his or her team
- **PROCESS:**

STEP I. Individual work (15 minutes)

Ask participants to **COMPLETE** a sentence beginning with "I acknowledge you for..." for every member of their team.

- They should use the slips of paper you handed out.
- These acknowledgments can include what the other member has contributed to the team, to clients, or to the community.
- Participants should put the name of the person they are acknowledging on the slip. It is up to them whether they put their own names.

STEP 2. Read and receive acknowledgments (20 minutes)

In the large group, have each person READ ALOUD the acknowledgments he or she wrote to each of their team members so that everyone can hear them.

■ Make sure everyone receives the slips of paper with acknowledgments from their teammates to save.



STEP 3. Wrap up and suggestions for further practice (10 minutes)

COLLECT responses from the following sets of questions.

ASK: What was it like to receive these acknowledgments?

Why is it so powerful?

ASK: What keeps us from acknowledging and recognizing our colleagues

more often?

How can we increase acknowledgment in our work?

NOTE: Stress that an acknowledgment must be genuine to have power. If you acknowledge someone for something but do not actually mean it, you are at risk of being seen as insincere or fake.

16.D Next Steps—Reflecting on Workshop #3 and Preparing for Workshop #4

In this activity, facilitators review Workshop #3 and present the assignment and expectations for Workshop #4.

- **DURATION**
- 30 minutes
- **MATERIALS**
- Two blank flipcharts
- ☐ Handouts: LDP+ Timeline; Assignment for Final Workshop; Evaluation Form; Team Meeting Form; Telling your Story; Tips for an Effective Presentation of a Story
- □ Flipchart with key points from the assignment
- **PROCESS:**

STEP I. Overall review of LDP+ and previous sessions (10 minutes)

ASK: What have we done in this workshop?

On two blank flipcharts, one for each day, WRITE the activities that people remember.

FILL IN any activities not mentioned.

ASK: What do you think are the most important ideas that you learned during this

third workshop?

COLLECT responses.

ASK: What can you immediately apply when you get back to work?

COLLECT responses.

Review the handout, LDP+ Timeline. POINT OUT where the teams are in the process and what will happen next.



STEP 2. Review the assignment (10 minutes)

HAND OUT copies of the Assignment for the Final Workshop, and the Team Meeting Form.

■ READ the assignment aloud (or have someone read it) and summarize the key points on a flipchart:

SAY: The assignment for Workshop #4 includes planning and designing a meeting with the rest of your team at your workplace to share what you have learned in this workshop, including:

- Proven interventions
- Shared learning
- **Revised Action Plans**
- Coaching
- Commitment versus compliance
- Team roles
- Requests versus complaints
- Leading through breakdowns
- How to gain and maintain trust
- The importance of acknowledgment

SAY: Review your actions plans in light of what you learned about new interventions and how to align and mobilize and inspire each other and others.

SAY: The second task of the assignment is important because it is about actually starting to prepare your presentations.

> Be sure to update your LDP+ Reporting Form, Evaluation Form, and to rereview the Telling Your Story handout.

HAND OUT copies of Telling Your Story and Tips for an Effective Presentation of a Story.

SAY: Think carefully about the questions on the handout, Tips for an Effective Presentation of a Story.

> Answering these questions as your first step will tell you a lot about why you are sharing your results, why they matter, to whom you are presenting, and how you will organize and present your information.

When you know all this, the work of creating your presentation will be much easier.

SAY: Finally, make a habit of acknowledging or thanking one person every day, at home and at work, for work well done.

Ask if there are any questions.

STEP 3. Next steps (10 minutes)

SET THE DATE for the next Workshop (#4), Preparing and Presenting Results.

- **SET THE DATE** for a coaching visit.
- The coaches will use the two handouts to help teams get ready for their final presentations.

Make it clear that the same people are expected to come to the next workshop because each workshop builds on the previous one.

SAY: If one team member is not able to come, the team needs to find a replacement who is well-informed about the LDP+ and your improvement project.

In the next, final workshop, the teams will spend much of the first and second day refining and getting feedback on their presentations.

■ On the third day, teams will have the honor of presenting their results to an invited audience that will include stakeholders of this LDP+.

Ask a participant to be prepared to review what was learned in this workshop at the beginning of the next workshop.

Workshop Evaluation

Evaluation gives participants a chance to share what they learned and their opinions, and facilitators to gain information about what was most successful and what can be improved.



10 minutes



- □ Handout: Evaluation Form for Workshop #3
- □ Handout: Feedback for LDP+ Facilitator (distribute one copy of this handout for each facilitator to provide individual feedback)

PROCESS:

HAND OUT a copy of the Evaluation Form and the Feedback for LDP+ Facilitator sheet and give people 10 minutes to complete them.

Ask participants for truthful feedback about what they have learned in the workshop. Let them know they are not expected to put their names on the forms.

COACHING NOTES BETWEEN WORKSHOP #3 & #4

Meet with teams in their workplaces between workshops to review progress on their workshop assignments.

PURPOSE

Help teams transmit their learning during Workshop #3 to their full teams, and help them plan for a compelling results presentation at Workshop #4.

- **DURATION**
- 2 hours
- **COACHING PREPARATIONS**
 - Arrange a meeting with team members at their workplace.
 - Review the team's assignments.
 - Review their LDP+ Reporting Form.
 - Review their Evaluation Form.
 - Review the team results presentation.
- **PROCESS:**

STEP 1. Assess the team's progress and needs

Pose some initial questions.

ASK: What have you been doing since the last workshop?

Were you able to hold your team meeting? How did it go?

What have you learned that you have tried to apply? What is turning out to be particularly useful?

What is turning out to be difficult? Where have you struggled?

STEP 2. Review the team's progress and help them prepare for the Final Results Presentation

REVIEW the LDP+ Reporting Form. Remind participants of the handout, Assignment for Final Workshop — Team Meetings Between Workshop #3 and #4.

Review the baseline for the team's measurable result and the monthly results data. (If data are missing, make sure the team can locate them before you leave.)

ASK: Were you able to pull together all of your data so that they can be put into

charts and graphs?

Can we take a look at the data you will be bringing to Workshop #4?

ASK: How would you like to present your results?

Would you like to put them on a flip chart or in a PowerPoint presentation?

Let's take a look again at your baseline and your monthly results data.

What do we see?

(Probe for patterns and brainstorm ways to present the information.)

TIP: Help the team to see the advantages and disadvantages of the different ways of presenting results. PowerPoint presentations can be impressive to senior leaders, but they don't encourage as much discussion, they can put people to sleep because the room has to be dark, and if there is no electricity, the projector won't work. Sometimes it is more effective for the team to tell its story and put up the important points like a graph on a flip chart.

Concluding questions

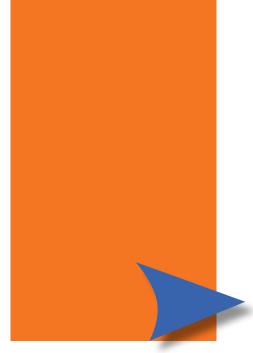
ASK: What are your next steps?

Who will do what by when to prepare for Workshop #4?

What support do you need from others?

How can I support you?

TIP: The team will have help preparing its presentation during Workshop #4, but team members should start thinking about how they will tell their story now because they will need to bring all the necessary data with them to Workshop #4.



SECTION 7 HANDOUTS

WELCOME BACK AND ASSIGNMENT REVIEW	
Agenda and Objectives:Workshop #3	
Assignment for Workshop #3—Team Meetings between Workshops #2 and #3	
session 13: Shared learning sessions	
LDP+ Reporting Form	
Monitoring and Evaluation Planning Worksheet	
Evaluation Form	
Telling Your Story	
SESSION 14: ALIGNING AND MOBILIZING	
Integrated Practices for High Performing Health Systems	
Coaching Principles	
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Commitment versus Compliance	
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SESSION 16: INSPIRING

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AGENDA AND OBJECTIVES: WORKSHOP #3

PURPOSE

Increase and sustain the capacity to work in teams, face challenges, and achieve measurable results.

OBJECTIVES

Introduce tools and techniques for aligning, mobilizing, and inspiring, including:

- Analyze and interpret results on progress
- Support others with coaching
- Identify team roles
- Distinguish commitment from compliance
- Make requests instead of complaining
- Lead and coach a team through breakdowns
- Gain and maintain trust
- Acknowledge others
- Teams share learning on successes, obstacles, and lessons that can be identified and scaled up to other sites

SESSIONS

- Welcome back and assignment review: Review what participants learned during Workshop #2
- Session 13: Shared Learning Sessions
- Session 14: Aligning and Mobilizing
- Session 15: Working Effectively in Teams
- Session 16: Inspiring
- Preparation for Workshop #4

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	DAY ONE	DAY TWO
	Opening (15 min.)	Review (15 min.)
AM	Welcome Back (30 min.)	Session 14: Aligning and Mobilizing (2 hr. 30 min.)
	Session 13: Shared Learning Sessions (2 hr. 30 min.)	Session 15: Working Effectively in Teams (45 min.)
Lunc	h Break	
	Session 13: Shared Learning Sessions (conclusion) (2 hr.)	Session 15: Working Effectively in Teams (conclusion) (1 hr. 30 min.)
DNA		Session 16: Inspiring (2 hr.)
PM		Preparation for Workshop #4 (30 min.)
	Closing Reflection (30 min.)	Workshop Evaluation (10 min.)

ASSIGNMENT FOR WORKSHOP #3—TEAM MEETINGS BETWEEN WORKSHOPS #2 AND #3

Plan and design a meeting with your team. Use the Team Meeting Form. In this meeting:

Teach your team about the Priority Matrix, the Urgent/Important Matrix, gender concepts, and what you learned about M&E and planning.

- Share your completed Challenge Model and draft Action Plan.
 - Review and complete your Action Plan so you can start to implement it.
 - Review your M&E plan and the activities you need to mobilize stakeholder resources.
- Work together on implementing the Resource Mobilization Request Form.
- Update the LDP+ Reporting Form.
- Update the Evaluation Form.
- Prepare your team's presentation for Workshop #3 where you will present the Challenge Model and information from the Reporting and Evaluation Forms.

LDP+ REPORTING FORM

Name and Location of Improvement Team:_

Report Prepared By:			
Dates of Activity (months):			
Date of Submission:			
Improvement Team Members:			
Name	Title	M/F	Email address

- I. Priority health area for this LDP+ initiative:
- 2. Measurable result your team defined in your Challenge Model:
- **3. Monitoring and Evaluation Planning Worksheet(s):** Please include a completed Monitoring and Evaluation Planning Worksheet for each indicator for which you collected data during the implementation of the LDP+ improvement project.
- **4. Summary of results:** Based on the values of your indicators, please briefly describe what your Improvement Team has accomplished.

MONITORING AND EVALUATION PLANNING WORKSHEET

	INDICATOR INDICATOR	BASELINE	Θ -	OΣ	Θ ~	<u>Σ</u> 4	Θ	Q _ν	TARGET	DATA	DATA COLLECTION	DATA COLLECTION RESPONSIBILITY
Wha defir num		What is the value of the indicator the month before beginning ICRC-LDP activities?		1	,		,			Where will we get the data to measure this indicator?	How often will we collect the data?	Who is the person responsible for data collection?
den	یے the	Numerator							of ICRC-LDP activities?			
		Denominator										
		Percent										

EVALUATION FORM

I. Use the matrix below to summarize any difficulties your team encountered while working towards your measurable result, and how you addressed those difficulties.

What difficulties did your team encounter in implementing your Action Plan?	What actions did your team take to overcome these difficulties?	Did these actions succeed? Why or why not?		
2.Beyond the changes in your indi-	cators, what other effects of your	intervention did you observe?		
3. How did your team apply leadin intervention?	ng, managing, and governing practic	es to carry out your		
The following questions are to only be answered at the end of Workshop #4: 4. What might your team do differently if you use the LDP+ process on a new challenge in the future?				
5. Has your team chosen a new ch	nallenge to take on? Yes	No		

7. If no, please describe the reason for not choosing another challenge.

6. If yes, what is the new challenge?

TELLING YOUR STORY

Your team has accomplished something important, and the time has come to let other people know about it—to tell your story.

Everyone likes a good story!

Your story should have four parts: the setting, the challenge, the activity, and the results.

Here are some suggested questions you could consider as you write the story. The way you answer them will help bring your story to life.

The setting

- Who are we? What kind of organization or agency are we, and what is our purpose?
- What kind of people do we serve? How do they live? What do they believe? What are their concerns?

The challenge

- What was the priority health area and indicator our team was addressing?
- What was our baseline data? Where were we before we started this LDP+ process?
- What was our measurable result? What were the main obstacles to achieving our result?

The results

- What result was achieved?
- What was the value of the indicator at the end of the implementation period?
- What were the most significant changes we brought about for the people we serve?
- What changes did we bring about in the way our team works?

The activity

- What intervention did we choose to address these obstacles?
- What did we need to change?
- How did we work together as a team to make those changes? What were the different roles
- What leading, managing and governing practices were applied?

A quote

Can you enrich your story by including one or more direct quotes from people whose lives were affected by this intervention? A real-life quote will give your story a strong emotional impact.

INTEGRATED PRACTICES FOR HIGH PERFORMING HEALTH SYSTEMS

IFADING

SCAN

- Identify client and stakeholder needs and priorities
- Recognize trends, opportunities, and risks that affect the organization
- Look for best practices
- Identify staff capacities and constraints
- Know yourself, your staff, and your organization—values, strengths, and weaknesses

ORGANIZATIONAL OUTCOME

Managers have up-to-date, valid knowledge of their clients, and the organization and its context; they know how their behavior affects others.

FOCUS

- Articulate the organization's mission and strategy
- Identify critical challenges
- Link goals with the overall organizational strategy
- Determine key priorities for action
- Create a common picture of desired results

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and priorities are clear.

ALIGN & MOBILIZE

- Ensure congruence of values, mission, strategy, structure, systems, and daily actions
- Facilitate teamwork
- Unite key stakeholders around an inspiring vision
- Link goals with rewards and recognition
- Enlist stakeholders to commit resources

ORGANIZATIONAL OUTCOME

Internal and external stakeholders understand and support the organization's goals and have mobilized resources to reach these goals.

INSPIRE

- Match deeds to words
- Demonstrate honesty in interactions
- Show trust and confidence in staff, acknowledge the contributions of others
- Provide staff with challenges, feedback, and support
- Be a model of creativity, innovation, and learning

ORGANIZATIONAL OUTCOME

The organization's climate is one of continuous learning, and staff show commitment, even when setbacks occur.

MANAGING

PLAN

- Set short-term organizational goals and performance objectives
- Develop multi-year and annual plans
- Allocate adequate resources (money, people, and materials)
- Anticipate and reduce risks

ORGANIZATIONAL OUTCOME

The organization has defined results, assigned resources, and developed an operational plan.

ORGANIZE

- Develop a structure that provides accountability and delineates authority
- Ensure that systems for human resource management, finance, logistics, quality assurance, operations, information, and marketing effectively support the plan
- Strengthen work processes to implement the plan
- Align staff capacities with planned activities

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and priorities are clear.

IMPLEMENT

- Integrate systems and coordinate work flow
- Balance competing demands
- Routinely use data for decision-making
- Co-ordinate activities with other programs and sectors
- Adjust plans and resources as circumstances change

ORGANIZATIONAL OUTCOME

Activities are carried out efficiently, effectively, and responsively.

MONITOR & EVALUATE

- Monitor and reflect on progress against plans
- Provide feedback
- Identify needed changes
- Improve work processes, procedures, and tools

ORGANIZATIONAL OUTCOME

The organization continuously updates information about the status of achievements and results, and applies ongoing learning and knowledge.

GOVERNING

CULTIVATE ACCOUNTABILITY

- Sustain a culture of integrity and openness that serves the public interest
- Establish, practice and enforce codes of conduct upholding ethical and moral integrity
- Embed accountability into the institution
- Make all reports on finances activities, plans, and outcomes available to the public and the stakeholders
- Establish a formal consultation mechanism through which people may voice concerns and provide feedback

ORGANIZATIONAL OUTCOME

Those who govern are accountable to those who are governed. The decision making is open and transparent. The decisions serve bublic interest.

ENGAGE STAKEHOLDERS

- Identify and invite participation from all parties affected by the governing process
- Empower marginalized voices, including women, by giving them a voice in formal decision-making structures and processes
- Create and maintain a safe space for the sharing of ideas
- Provide an independent conflict resolution mechanism
- Elicit and respond to all forms of feedback in a timely manner
- Establish alliances for joint action at whole-ofgovernment and whole-of-society levels

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has an inclusive and collaborative process for making decisions to achieve the shared goals.

SET SHARED DIRECTION

- Prepare, document and implement a shared action plan to achieve the mission and vision of the organization
- Set up accountability mechanisms for achieving the mission and vision using measurable indicators
- Advocate on behalf of stakeholders' needs and concerns
- Oversee the realization of the shared goals and the desired outcomes

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has a shared action plan capable of achieving objectives and outcomes jointly defined by those who govern and those who are soverned.

STEWARD RESOURCES

- Ethically and efficiently raise and deploy the resources to accomplish the mission and the vision and to serve stakeholders and beneficiaries
- Collect, analyze, and use information and evidence for making decisions
- Align resources in the health system and it design with the shared goals
- Build capacity to use resources in a way that maximizes the health and well-being of the public
- Inform and allow the public opportunities to monitor the raising, allocation and use of resources, and realization of the outcomes

ORGANIZATIONAL OUTCOME

The institution has adequate resources for achieving the shared goals, and the resources are raised and used ethically and efficiently to achieve the desired objectives and outcomes.

COACHING PRINCIPLES

Coaching is enabling others to reflect on their commitments and find new ways to achieve their intended results.

A coach helps the other person:

- Clarify her/his commitments and intended results.
- See new possibilities and actions, and expand her/his range of behavior choices.
- Understand her/his own contribution to recurrent problems and see the consequences of choices made.
- Think more clearly and see new ways of achieving intended results.

A coach does not:

- Evaluate and judge
- Blame, criticize, and scold
- Give solutions

An effective coach:

- Builds a relationship of trust and support.
- Cares about the person being coached/has the other's growth in mind.
- Listens well.
- Asks questions to clarify and illuminate a goal or challenge

To be coached, you have to:

- Want to learn and change.
- Be open to feedback from others.
- Take responsibility for your own actions.

For a more thorough review of coaching, you can download (for free) The eManager titled "Coaching for Professional Development and Organizational Results" from

http://www.msh.org/resource-center/emanager-I-2008.cfm

THREE-PERSON COACHING EXERCISE

FOR PERSON B, (the person being coached, or 'COACHEE")

- 1. Think of a challenging situation you are facing at work a real situation.
- 2. For no more than 10 minutes, tell the story of your situation to your coach, Person A.

FOR PERSON A (the COACH)

- 1. Listen to Person B's entire story carefully and without interrupting.
- 2. When Person B has finished telling it, ask 2 or 3 questions that can clarify the situation and that might stimulate Person B to gain a fresh perspective.
- 3. Only ask questions; don't try to offer solutions.

Person A has 5 minutes to coach. Here are some of the kinds of questions you could ask. You may think of others that could be asked:

- What are you committed to achieving?
- What have you achieved so far?
- What obstacles are you facing?
- Why do you think you are stuck?
- If it could turn out exactly as you dreamed, how would it turn out?
- What actions could you take to overcome your obstacles?
- What support do you need from others?
- How can I support you?
- 4. When Person C, the observer, gives you feedback at the end of this exercise, listen carefully. Feel free to ask any questions that will help you to better understand the feedback, but remember that this is a time to learn, not to explain or argue.

FOR PERSON C (the OBSERVER)

- 1. Watch how Person A, the coach, performs throughout the 10-minute coaching session. At the end of that time, you have 5 minutes to give feedback to the coach.
- 2. Start by describing what the coach did well: good listening, good questions, genuine interest, avoiding giving solutions, etc. Give specific examples.
- 3. Then describe actions that can be improved. Again, be specific about which action, comment, or question you think could be more useful or effective.
- 4. Offer specific suggestions for improving those actions.

Be careful to give feedback to the coach, not recommendations to the "coachee."

COMMITMENT VERSUS COMPLIANCE

Commitment — Internally driv	Commitment — Internally driven			
Source of motivation	Feelings	Outcomes		
 You want to do something extraordinary. You believe in it. 	 You WANT to do something. Care about the work Determined to persevere in the face of obstacles Empowered to overcome obstacles. Energetic, bring new possibilities and options to the work. 	Good results that you are proud of.		
Compliance — Externally drive	en			
Source of motivation	Feelings	Outcome		
Formal compliance You do just what is required and no more.	 You HAVE to do something. Compliant but not enthusiastic; act to satisfy an external standard or requirement Motivated only enough to achieve organizational objectives 	 Do what is expected Follow orders and work according to a plan Do what one has to, but in a routine way 		
Noncompliance You don't do what is required.	 Annoyed, frustrated, critical of others, or similar Uncooperative, negative; refuse to participate in work activities 	InsubordinationNo results		
Malicious compliance You purposely do the wrong thing, although you may not object openly.	 Resentful and critical, but unwilling to discuss complaints Follow the "letter of the law" but undermine desired results 	SabotageNegative results		

UNDERSTANDING ROLES IN TEAMWORK

There are four roles in teamwork. These roles can be played at different times by different people.

INITIATE: start action, propose new ideas

FOLLOW: accept the idea or proposal for action and support it actively

OPPOSE: question the direction

OBSERVE: watch what is going on

Role	Productive	Non-Productive
Initiate	■ Gets action started	Dominates
Follow	Supports implementation of action	Mindlessly agrees
Oppose	■ Thinks critically	Obstructs
Observe	Reflects and gives feedback	Acts passively

REQUESTS INSTEAD OF COMPLAINTS

Take one complaint and transform it into a request using the following format.

Request form

I.Will you		(specific person)
2. Please do this		(specific action)
3. By this time	?	(specific time)

Three ways to respond to a request

- Yes
- No
- Make a counteroffer: "No, I can't do that, but I can do something else," or "I can do it, but by some other time."

Complaints and requests: Principles in effective teams

- People make requests only to someone who can do something about the situation.
- People state their complaint in the form of a request.
- If you receive a complaint you cannot do anything about, you suggest they turn it into a request and refer it to someone who can do something about it (avoid gossip).
- If you receive a request, you are free to respond in the three ways (yes, no, or counteroffer).

LEADING THROUGH BREAKDOWNS

Success is moving from failure to failure without losing enthusiasm.

—Winston Churchill

A breakdown is any situation that...

- threatens progress towards a commitment
- presents uncertainty or difficulty
- stops effective action
- presents obstacles to our commitments

Breakdowns normally lead to...

- minimizing or ignoring the problem
- blaming each other
- eroding teamwork, trust, and effectiveness

Change how you approach breakdowns by recognizing that...

- all large commitments have breakdowns
- the greater our commitment, the more and greater the breakdowns ("No commitment, no breakdown")
- breakdowns, when well handled, are a major source of breakthroughs and "finding a new way" to meet your commitments

High-performance teams handle breakdowns differently from typical groups:

TYPICAL HIGH-PERFORMANCE GROUPS TEAMS expect breakdowns are stopped by breakdowns welcome breakdowns members blame one another use breakdowns to create breakdowns are seen as obstacles and breakthroughs problems to avoid see breakdowns as helpful to breakdowns are seen as an indicator understanding what is missing to fulfill that something is wrong with the a commitment person, team, or project

BREAKDOWN CONVERSATION WORKSHEET

Think of a breakdown your team has recently experienced and answer the following questions related to that breakdown.

I. What was the breakdown? Briefly describe what happened.	
2. What were you committed to? Describe the commitment of you or your team.	
3. What was missing that caused the breakdown to occur?	
4 What did you loom?	
4. What did you learn?	
5. What actions could you take now?	

COACHING THROUGH BREAKDOWNS

I. Declare the breakdown.

- What was the breakdown?
- What happened? (Give facts, not interpretations.)

2. Identify your commitment.

- What is the commitment behind this?
- Take responsibility (not blame) for the breakdown.

3. Notice what is missing.

- What was missing that caused the breakdown to occur? (e.g., integrity, process, etc.)
- To what are you now committed?

4. Capture learning.

- What did you learn?
- What is possible now?

5. Plan actions.

- What actions will you take?
- What requests and promises do you or others need to make?

INSPIRE THROUGH BUILDING TRUST

Trust (noun):

Having a firm reliance on the integrity, ability, or character of a person.

To trust (verb):

To increase one's vulnerability to another whose behavior is not under one's control in a situation where there may be risk.

Practices that lead to trust

Scanning: show interest in coworkers, inquire after their families and well-being; look for causes of problems in work processes rather than blaming people

Focusing: show that you pay attention to what people do and notice the contributions they make

Aligning and mobilizing: consult with coworkers, appreciate their expertise and experience; cooperate rather than compete; use knowledge and competence rather than official status to influence others

Inspiring: treat coworkers with respect; support and help coworkers; seek out new information and be creative and innovative, including when acknowledging one's own mistakes or uncertainties

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LDP+TIMELINE & DELIVERABLES

NOTE: Between each workshop, Coaches meet with their Improvement Teams to review progress and provide support.

LDP Champion & facilitator

Stakeholder Alignment Meeting

Technical Coaching Team Meeting I

Workshop I

MONTH I

- Select priority health area, proven interventions, indicators, and geographic location to be proposed by Governing Body
- Design Stakeholder Alignment Meeting and invite health systems leaders to participate
- Gain commitment of key stakeholders
- As Governing Body, provide resources to support the LDP+ process
- Confirm priority health area, proven interventions, indicators, and geographic location
- Develop Governing Body's action plan

MONTH 2

- Coaches are oriented to their roles in LDP+. the M&E process, and to the steps of the Challenge Model
- Improvement Teams draft first 4 steps of Challenge Models, with an emphasis on measurable results
- Leadership Practice: Scanning

Technical Coaching Team Meeting 2

Workshop 2

Technical Coaching Team Meeting 3

Workshop 3

MONTH 3

- Coaches learn and practice skills to coach Improvement Teams around their challenge models
- Improvement Teams draft root cause analyses and action plans
- L&M Practices: Focusing, Planning and Organizing

MONTH 4

- Coaches learn and practice skills in M&E: collecting data and monitoring indicators
- They are oriented to reporting requirements and formats for the overall LDP+ process
- Improvement Teams draft reporting and evaluation forms
- L&M Practices: Monitoring & Evaluation, Implementing, Aligning and Mobilizing, and Inspiring

Results Presentation Stakeholders' Scale up Meeting

MONTHS 5-8

- Improvement Teams share success stories and prepare results presentations
- L&M Practices: Monitoring and Evaluation, Inspiring
- Improvement Teams present results to Governing Body, Technical Coaching Team, and other stakeholders
- Governing Body develops a strategy and plan for scaling up LDP+ and commits to provide resources for scale up

LDP+ ASSIGNMENT FOR FINAL WORKSHOP—TEAM MEETINGS BETWEEN WORKSHOPS #3 AND #4

- I. Plan and design a meeting with your team. Use the Team Meeting Form.
- 2. Share with your team what you have learned in Workshop #3, including
 - Proven interventions
 - Shared learning
 - Revised Action Plans
 - Coaching
 - Commitment versus compliance
 - Team roles
 - Requests versus complaints
 - Coaching through breakdowns
 - How to gain and maintain trust
 - The importance of acknowledgment
- 3. In a separate meeting of your team, review your Action Plan in light of what you learned about new interventions and how to align and mobilize and inspire each other and others. Use the handout, Telling Your Story, and the handout, Tips for an Effective Presentation of a Story, to start thinking about your final presentations for Workshop #4.

Review the following questions:

- What is your baseline in raw numbers?
- From where are you getting the data (e.g., forms, reports, patient registers)?
- What are your desired results in raw numbers?
- What calculations will you use to describe the difference between your baseline and desired results (e.g., an average, percentage, or rate)?
- What is the difference between your baseline and desired results using these statistics? Is it achievable in the time allotted?
- Are you going to compare your results with other sites? If you are, what is the comparison site you are considering? What are the characteristics that make it a suitable comparison site?
- Think about other factors that may affect your intervention and results (e.g., error in selecting your site or in data collection, other factors). What can you do to minimize these factors?
- 4. Make a habit of acknowledging one person each day, at home and at work, for work well done. In the next workshop, you will be asked to report on this.

TEAM MEETING FORM

Meet between workshops, maybe more than once.

1. Agree on the objectives for the meeting

What do we want to accomplish during this meeting? (Set the time you will work on defining the objectives.)

2. Report on results

What was our goal for the two weeks that have passed since the previous workshop?

What did we accomplish? (Acknowledge our team for our work.)

What obstacles are we facing and how will we overcome them?

3. Next actions

What is our goal for the next two weeks (before the next workshop)?

List the activities we will do. List who will be responsible for each activity.

4. Teamwork

What is working well in our team?

What do we need to do to improve?

TIPS FOR AN EFFECTIVE PRESENTATION

Prepare well

- Start organizing and working on your story well ahead of time.
- Begin with a well-prepared introduction.

Clarify your message

- What challenge did you face?
- What actions did you take together as a team?
- What measurable results did you achieve?

Visuals

If you use flipcharts, make sure your words and pictures are clear and easy to see.

Use notes, but DON'T read from them

- Use notes so that you will know what you want to say next.
- Look up and speak as if you are talking to someone about something that is important to you.
- Don't read the presentation like you are reading a book aloud.

Practice and get feedback

- Practice telling your story enough times so that you are comfortable.
- Time your presentation. If it is too long, cut some material. Don't try talking faster.
- Rehearse your presentation in front of others. Ask them for their feedback. Are you making your message clear? Are you standing straight and tall? Are you confident?

Take questions

- Have your listeners ask you questions so you can practice answering unexpected ones.
- Take questions, and answer them slowly and carefully.
- It's okay to say so when you don't know an answer. Say you will find out and tell them the answer as soon as you have it.

Be confident!

- Most speakers who describe themselves as nervous appear confident and calm to the audience.
- Be yourself; let the real you come through. Relax, take some deep breaths.
- Enjoy yourself! The audience will be on your side and will want to hear what you have to say.

EVALUATION FORM: WORKSHOP #3

Date: _					
Please worksl	Please complete this evaluation as fully and honestly as you can. Your feedback will help us to improve the workshop's content and activities, as well as other aspects of the LDP+. Thank you.				
1.	What did you learn in this workshop?				
2.	How can you apply what you learned in your work?				
3.	What feedback do you want to give to the LDP+ facilitators?				

FEEDBACK FOR LDP+ FACILITATOR

How much do you agree or disagree with the following statements? Please mark one box for each item as appropriate. Thank you!

	Disagree Strongly	Disagree	Agree	Agree Strongly
The facilitator began and ended sessions on time.				
The facilitator helped the group set the ground rules for the discussion and stick to them.				
The facilitator set a friendly and relaxed tone for the conversation.				
The facilitator listened well.				
The facilitator remained neutral.				
The facilitator helped the group productively discuss different points of view.				
The facilitator seemed to be familiar with the discussion materials.				
The facilitator encouraged everybody in the group to participate in conversations.				
The facilitator did a good job of not letting any one person dominate the discussions.				
The facilitator encouraged quiet members of the group to share their ideas.				
The facilitator worked effectively to keep discussions on track.				
The facilitator offered periodic summaries of the discussions and/or encouraged group members to do so.				
The facilitator handled intense situations well.				

group to share their ideas.				
The facilitator worked effectively to keep discussions on track.				
The facilitator offered periodic summaries of the discussions and/or encouraged group members to do so.				
The facilitator handled intense situations well.				
Please write any other feedback you may have	in the space b	pelow.		
			Date:	



WORKSHOP 4: PREPARING AND PRESENTING THE RESULTS

AGENDA AND OBJECTIVES: WORKSHOP #4

PURPOSE

Complete preparations for the presentation of results and present final results to key stakeholders.

OBJECTIVES

- To prepare and deliver an effective presentation
- To present results in compelling ways
- To make plans to sustain the LDP+ process in the teams' workplaces

SESSIONS

- Welcome back and assignment review: Review what participants learned during Workshop #3
- Session 17: Shared Learning Sessions
- Session 18: Communicating Results
- Session 19: Coming to a Close and Sustaining the Process
- Deliver Final Results to Stakeholders

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	day one	DAY TWO	DAY THREE			
AM	Opening and Review (1 hr.)	Prepare and Practice Presenting (full morning)	Deliver Final Results Presentation to Stakeholders (full morning)			
	Session 17: Shared Learning (2 hr.)					
Lunci	Lunch Break					
PM	Session 18: Communicating Results (3 hr.)	Session 19: Coming to a Close and Sustaining the Process (3 hr. 15 min.)	Recognition and Final Evaluation:			
	Closing Reflection (30 min.)					

PREPARATIONS

Plan for an official closing ceremony (invitations, seating, equipment, etc.). A formal event shows the participating teams that this program and their journey has the full support of critical stakeholders, including organizational sponsor(s), champion(s), the LDP+ Governing Body, central and regional or provincial authorities, and representatives from donor agencies.

Copy the handouts before each session. The plan for each activity shows what you need to use for that activity. You can find all of the handouts in the Handout sections of this Guide or on LeaderNet in the Leadership Facilitators section, in Resources. Start at http://www.leadernet.org/.

NOTE: LeaderNet is a global community of practice for managers who lead and LDP+ and Virtual Leadership Development Program (VLDP) facilitators. To use LeaderNet, first go to http://www.leadernet.org/ and register (there is no cost).

> Prepare a certificate acknowledging participation and successful completion of the LDP+ for each participant or team.

REFLECTION AND REVIEW

Reflection. There is time for reflection at the end of Day One so that participants can talk about what they learned and what seemed most important to them.

Review. The morning of Day One starts with a presentation of the content from Workshop #3. Before the start of this workshop, ask a participant to present a summary of the content of Workshop #3.

EVALUATIONS

To evaluate what participants learned during the entire LDP+, use the Final Evaluation Form and the Feedback for LDP+ Facilitator found in the Workshop #4 Handouts section. You might want to adapt the form further to obtain more detailed feedback on the whole program.

SUSTAINING THE LDP+

In this workshop, teams will explore possible challenges they will take on next and discuss the challenge of sustaining the LDP+ with their own resources.

The LDP+ Governing Body will play a key role in this process. They will meet after Workshop #4 to discuss how to best support the LDP+ approach and also how to sustain and scale up the program to new areas.

WELCOME BACK AND ASSIGNMENT REVIEW



WORKSHOP 4: DAY ONE

WELCOME BACK AND ASSIGNMENT REVIEW

Opening

Look Back at Workshop #3 and the Assignment

SESSION 17: SHARED LEARNING SESSION

17.A Reviewing the LDP+ Reporting Form

— LUNCH BREAK —

SESSION 18: COMMUNICATING RESULTS

18.A Telling Your Story

18.B Presentations and Feedback

Closing

Opening



15 minutes

Ask participants to sit in their teams from their work sites.

This is a time for administrative and logistical announcements.

Look Back at Workshop #3 and the Assignment

This exercise reviews and reinforces content from the previous workshop and presents what is planned for Workshop #4.

- **DURATION**
- 60 minutes
- **MATERIALS**
- □ Handouts: LDP+ Workshop #4 Agenda; Assignment for Final Workshop—Team Meetings between Workshop #3 and #4
- Paper for participants to write on
- **PROCESS:**

STEP I. Review of Workshop #3 content (20 minutes)

Welcome everyone.

SAY: Now we will hear from a participant about what we learned at the previous workshop.

(You will have asked the participant at the end of Workshop #3 to speak to the group.)

After s/he speaks,

ASK: What questions do you have at this point in the process?

STEP 2. Overview and agenda of Workshop #4 (10 minutes)

HAND OUT the Workshop #4 Agenda.

Review the workshop's objectives and schedule.

STEP 3. Review of assignment from Workshop #3 (25 minutes)

HAND OUT the Assignment for Final Workshop handout and review the most important content from the assignment.

SAY: Let us review the key points of the assignment you have been working on, saving the preparation of your presentations for last.

> The first task was to plan and design a meeting with your larger teams at your workplace. You were to orient your colleagues on what you learned in Workshop #3.

The topics in Workshop #3 were: shared learning, commitment versus compliance, team roles, requests versus complaints, how to gain and maintain trust, the importance of acknowledgment, and coaching through breakdowns.

ASK: Did you do this? Are people using these tools at work now?

SAY: You were asked to make a habit of acknowledging one person every day, at home and at work, for work well done.

ASK: When you did this, what happened?

SAY: The heart of the assignment was to:

- Revise your Action Plans with your larger team in light of what you learned, as needed.
- Calculate averages, percentages, and rates, as needed.
- Review your LDP+ Reporting Form and Evaluation Form to prepare your presentations.

ASK: Today in our Shared Learning Session we will get a sense of how this went. For now, though, does anyone have a question?

STEP 4. Wrap up (5 minutes)

Close by reflecting on the progress and the changes you have noticed since the beginning of the LDP+.

SESSION 17. SHARED LEARNING SESSION

PURPOSE

Teams share what they learned when working toward a common result in different sites.

PARTICIPANTS

- Improvement Team members
- Coaches (from the Technical Coaching Team)

PREPARATIONS FOR TECHNICAL COACHING TEAM

This is a reminder of the Coaching Notes at the close of Workshop #3.

Prior to the Shared Learning Sessions, the coaches should:

- Visit the teams to monitor their progress in using the LDP+ Reporting Form.
- Encourage teams to complete their Action Plans and to prepare the LDP+ Reporting and Evaluation Forms.
- Identify the knowledge (proven practices, guidelines, etc.) that will benefit teams in addressing their challenges and come to the Shared Learning Sessions at the start of Workshop #4 prepared to share these lessons.

PREPARATIONS FOR TEAMS

Prior to their attendance, teams work together to complete three handouts:

- Action Plan
- □ LDP+ Reporting Form
- Evaluation Form

TEAM PRESENTATIONS

Teams are expected to present their progress using the LDP+ Reporting Form and Evaluation Form:

- Results and the indicators used to track progress
- Changes introduced
- Obstacles faced in implementing changes
- Recommendations

OUTCOMES

- Sharing lessons learned
- Identification of effective interventions

session 17

This exercise helps participants to report and analyze their data using the LDP+ Reporting Form and the Evaluation Form.

- **DURATION** I hour 45 minutes
- **MATERIALS** ☐ Handouts: LDP+ Reporting Form; Evaluation Form
 - Blank flipcharts
- **PROCESS:**

STEP 1. Distribute and Review the LDP+ Reporting Form (15 minutes)

In the large group:

SAY: The LDP+ Reporting Form helped you to track progress towards your results.

> The M&E Planning Worksheet is a tool on which you record your indicator, the numerator and denominator, baseline, and goal. Each month, you will record your progress in achieving your desired result (the numerator/denominator value for that month). This table also serves as a record of the data source, method for collecting data, how frequently you will collect that data, and the person responsible.

STEP 2. Understanding effective actions (I hour)

SAY: In your groups, discuss the following questions using the data you have recorded in your Report:

- Did you achieve your desired measurable result?
- Did the indicator values increase and/or decrease over time?
- If so, what caused this? Note: Variations in data could be caused by how your priority actions are scheduled as well as weather conditions, community activities, political changes, or other reasons.
- Did the data values increase/decrease slowly or quickly?
- Some indicators show change more slowly than others.
- What other observations can you make?

Use the Evaluation Form handout to record your learning.

On this form, your team has recorded the obstacles faced, steps you took to overcome those obstacles, and what leading, managing, and governing practices you applied.



STEP 3. Summarize your understanding of your data and report out to large group (30 minutes)

SAY: After completing the Reporting Form and the Evaluation Form each team should write the following on a flip chart:

- I bullet with results achieved
- *I*−3 bullets with the priority actions your team took (including the application of leading, managing, and governing practices) that contributed to your results
- I bullet with other factors that contributed to the results

Each team should take five minutes to report in plenary.

After all the teams have presented:

ASK: What are the key interventions that were presented here that led to the results?

TAKE NOTES on the flipchart and save them to be used in the meeting with the Governing Body.

SAY: It is important that we share these proven interventions so that other groups can benefit. We can work with the Governing Body to scale up these practices to other areas that would benefit.

ASK: How can we best share this learning with others? How can the Governing Body help to spread these improvements?

SESSION 18. COMMUNICATING RESULTS

PURPOSE	Learn how to make an effective presentation.
DURATION	3 hours
PREPARATIONS	 Read the facilitator notes for this session. Prepare copies of all handouts. Check that any electronic equipment, flipcharts, paper, etc. that teams might use are available.
MATERIALS	 Prepared and blank flipcharts—easel and paper Electronic equipment, as necessary Tape Colored markers
HANDOUTS	Telling Your StoryTips for an Effective Presentation of a Story

18.A **Telling Your Story**

This exercise helps teams to tell the story of their achievements.

- **DURATION** 60 minutes
- **MATERIALS** ■ Handout: Telling Your Story
- **PROCESS:**

Settling in (5 minutes)

Ask participants to sit with their work teams.

Drafting your story (40 minutes) STEP 1.

In the large group:

- SAY: During the last workshop, we started to learn how to tell our story to others and you worked with your larger team on crafting that story. Today, we are learning how to tell a good story about the results we achieved and the actions we used to achieve them.
- **ASK:** Ask a participant to read out loud the "Telling Your Story" handout. Answering the questions on this handout will help prepare your team to tell your story. Teams should answer these questions based on their own experiences.
- SAY: Refer to the handout "Telling Your Story."
 - What was the setting of the story?
 - What was the challenge the team was facing?
 - What were the main activities they used to address the challenge?
 - What were the results they achieved?
- SAY: Work in your teams, write a story that describes the challenges you faced, the interventions you used, and the results you achieved.

STEP 2. Sharing your story with others (15 minutes)

Each team presents its story to another team (2–5 minutes).

The other team gives feedback based on the handout, Telling Your Story.

SAY: You will have a chance to present this story at the Final Results Presentation.

Teams practice telling their stories.

SAY: To shorten it to 2-3 minutes takes repeated practice, but in the end you will have an effective story that will impress your stakeholders!

18.B Presentations and Feedback

This exercise helps teams to get experience giving a presentation that tells a story of results.

- **DURATION** 2 hours
- **MATERIALS** □ Flipchart that says: keep on doing / do better / stop doing
 - □ Handouts: Telling Your Story; Tips for an Effective Presentation of a Story
- **PROCESS:**

STEP 1. Review the handouts (15 minutes)

HAND OUT Tips for an Effective Presentation of a Story.

Remind participants of the handouts: LDP+ Reporting Form; Telling Your Story; Tips for an Effective Presentation of a Story.

ASK: What do you need to remember for your presentation that's on these handouts?

STEP 2. Report on results and actions taken (telling your story) (I hour for all groups)

To the large group, explain what each team is to do.

SAY: It will be helpful to practice telling your story in front of a group and to get some feedback.

> Each team should take no more than five minutes to tell its results story. This presentation can include reviewing the team's Challenge Model.

After each team presents, we will briefly give feedback.

Explain how to make feedback helpful.

SAY: As you listen, pay attention to what presenters do well, what they need to do better, and what they should stop doing.

(Refer to the prepared flipchart.)

What is the team's strongest evidence that improved leading, managing, and governing practices are producing changes?

Do you think the team presented its data and results effectively?

Remind people that everyone is learning how to make an effective presentation.

Invite each team to COME to the front of the room and DELIVER its presentation to the entire group. After each presentation, ask for feedback from the entire group.

NOTE: The length of this step will depend on how many teams there are. If possible, allow about 10 minutes for each team for its brief presentation, followed by five minutes of feedback. It is more important, however, that teams have plenty of time in the afternoon to work on their presentations.

Give feedback and learn from each other STEP 3. (30 minutes for all groups)

After each team presents, ask the larger group for feedback.

SAY: When you listened to the team's presentation, you thought about what it should: "keep on doing"/"do better"/"stop doing".

POINT TO flipchart that says: keep on doing / do better / stop doing.

Keep the focus on helping the team understand how clearly it presented its challenge statement, Challenge Model, and results.

SAY: This is not a time to problem-solve overcoming obstacles or similar concerns.

Ask first for positive results.

ASK: What did the team do well? Try to be specific.

COLLECT responses and **MAKE NOTES** on a flipchart.

TIP: Offering feedback now is a chance for participants to use what they learned about acknowledging others. Remind teams of the importance of starting with the good elements of each presentation.

ASK: What was good but made you want to know more? Perhaps you saw or heard something that you think the team can easily improve.

COLLECT responses and **MAKE NOTES** on a flipchart.

ASK: What did you see or hear that you think needs to be changed a lot or not done at all?

COLLECT responses and **MAKE NOTES** on a flipchart.



If it does not come up, consider whether the team was able to show that changed leading, managing, or governing practices made a difference. Did the team show data to support its claim? Comment, if appropriate.

STEP 4. Review the feedback (15 minutes)

After all teams have presented and received feedback, summarize what you heard and noted on the flipchart. Stress what people found most effective.

Closing



30 minutes

In the large group:

ASK: What did you learn today? What stands out for you?

SAY: Each of you should take a few minutes to write down your answers.

When you are done, discuss your answers with a person next to you.

After about 10 minutes, addressing the entire group:

SAY: Would each pair please share one of your answers with the group? We will go

around the room.

Continue to listen to pairs' answers until there are no more.

Ask a participant to be prepared to present what he or she has learned in this day's sessions at the start of Day Two.



WORKSHOP 4: DAY T

PREPARE AND PRACTICE PRESENTATIONS

Review

Presentations and Feedback

— LUNCH BREAK —

SESSION 19: COMING TO A CLOSE AND SUSTAINING THE PROCESS

- 19.A Review of the Entire LDP+—Highlights and Lessons Learned
- 19.B Leadership Commitments
- 19.C Identify New Leadership Challenges
- 19.D Additional Online Resources

Review



20 minutes

Ask participants to sit as a team with others from their work sites.

SAY: Now we will hear from a participant about what we learned yesterday.

SAY: We will be spending this morning continuing our preparation and practice of presentations. We will follow the same format as we used yesterday.

Presentations and Feedback

This exercise gives participants the opportunity to present their story again, after refining it during the first day.

- **DURATION** 2 hours
- MATERIALS Flipchart that says: keep on doing / do better / stop doing
 - Handouts: Telling Your Story; Tips for an Effective Presentation of a Story
- **PROCESS:**

STEP I. Review the handouts (15 minutes)

HAND OUT Tips for an Effective Presentation of a Story.

Remind participants of the handouts: LDP+ Reporting Form; Telling Your Story; Tips for an Effective Presentation of a Story.

ASK: What do you need to remember for your presentation that's on these handouts?

Report on results and actions taken (telling your story) STEP 2. (I hour for all groups)

To the large group, explain what each team is to do.

SAY: It will be helpful to practice telling your story in front of a group and to get some feedback.

> Each team should take no more than five minutes to tell its results story. This presentation can include review of the team's Challenge Model.

After each team presents, we will briefly give feedback.

Explain how to make feedback helpful.

SAY: As you listen, pay attention to what presenters do well, what they need to do better, and what they should stop doing.

(Refer to prepared flipchart.)

What is the team's strongest evidence that improved leading, managing, and governing practices are contributing to the results?

Do you think the team presented its data and results effectively?

Remind people that everyone is learning how to make an effective presentation.

Invite each team to COME to the front of the room and present of its presentation to the entire group.

STEP 3. Give feedback and learn from each other (30 minutes for all groups)

After each team presents, ask the larger group for feedback.

SAY: When you listened to the team's presentation, you thought about what it should: "keep on doing" / "do better" / "stop doing".

POINT to the flipchart that says: keep on doing / do better / stop doing.

Keep the focus on helping the team understand how clearly it presented its challenge statement, Challenge Model, and results.

SAY: This is not a time to problem-solve overcoming obstacles or similar concerns.

Ask first for positive results.

ASK: What did the team do well? Try to be specific.

COLLECT responses and **MAKE NOTES** on a flipchart.

TIP: Offering feedback now is a chance for participants to use what they learned about acknowledging others. Remind teams of the importance of starting with the good elements of each presentation.

ASK: What was good but made you want to know more? Perhaps you saw or heard something that you think the team can easily improve.

COLLECT responses and **MAKE NOTES** on a flipchart.

ASK: What did you see or hear that you think needs to be changed a lot or not done at all?

COLLECT responses and **MAKE NOTES** on flipchart.

If it does not come up, consider if the team was able to show that changed leading, managing or governing practices made a difference. Did it show data to support its claim? Comment if appropriate.

STEP 4. Review the feedback (15 minutes)

After all teams have presented and received feedback, summarize what you heard and noted on the flipchart. Emphasize what people found most effective. Acknowledge what was changed in the presentation based on earlier feedback.

SESSION 19. COMING TO A CLOSE AND SUSTAINING THE PROCESS

PURPOSE	Practice the presentation and complete the LDP+. Make plans to continue using the LDP+ process and tools.
OBJECTIVES	 To discuss and plan how teams will continue to use the LDP+ and teach it to other teams
	■ To identify new challenges
	■ To create leadership commitments
PREPARATIONS	Read through the facilitator notes for this session.
	 Be familiar with LeaderNet and additional resources on the Internet (see handouts).
	Prepare copies of all handouts.
	 Prepare certificates of achievement (unless they will be handed out on Day Three)
MATERIALS	 Prepared and blank flipchart—easel and paper
	Таре
	Colored markers
	 Certificates of achievement (unless they will be handed out on Day Three)
	Paper
HANDOUTS	□ Challenge Model
	LeaderNet flier
	 Internet Sources for Proven/Effective Public Health Practices
	☐ Final Evaluation Form

Review of the Entire LDP+ — Highlights and Lessons Learned 19.A

This closing exercise helps participants see the flow of the entire LDP+ as they consider highlights, reflect on learning, and recognize their own growth.

NOTE: Depending on the time available, you can ask all of the questions with the participants organized into pairs, teams, the large group, or some combination of these.

DURATION

I hour

MATERIALS

- □ Four prepared flipcharts, one for each workshop, with a list of the titles of Sessions I through 19
- Prepared flipchart with the definition: Managers who lead enable others to face challenges and achieve results.
- Four prepared flipcharts with the titles: Enabling Others, Facing Challenges, Producing Results, and LDP+ Overview

PROCESS:

Settling in after lunch (15 minutes) STEP 1.

Ask participants to sit in their work teams.

Congratulate them on their presentations and commitment to their improvement projects.

STEP 2. Review the program from beginning to end (10 minutes)

SHOW the flipcharts with the titles of the 19 sessions and read through them.

Check to verify that people remember the sessions.

STEP 3. Identify highlights (10 minutes)

ASK: What sessions really stand out in your memory?

Collect responses (recording is optional).

STEP 4. Explore what participants learned (15 minutes)

In the large group, read the definition from the flipchart:

SAY: Managers who lead enable others to face challenges and achieve results.

Ask the following questions and record the responses on the prepared flipchart with the appropriate title:

ASK: What have you learned about enabling others?

What have you learned about facing challenges?

What have you learned about achieving results?

STEP 5. Revisit the objectives of the LDP+ (10 minutes)

SAY: At the beginning of Workshop #1, we said you would learn how to do several things during the LDP+.

Read the objectives from Workshop #1:

- Lead, manage, and govern to enable others to face challenges and achieve results.
- Apply tools and processes for defining and addressing challenges.
- Produce measurable results that support the priority health area and your vision of success in that area.
- Build a team climate that supports commitment to continuous improvement.

Discuss:

ASK: Have we achieved these objectives?

What do we need to do to continue to address them?

19.B Leadership Commitments

This exercise helps participants to be clear about their commitments.

- **DURATION** 45 minutes
- **MATERIALS** □ Paper for participants to write on
- **PROCESS:**

STEP I Explore personal commitments (10 minutes)

ASK: You have learned a lot about leading, managing, and governing in the

workplace. What do you personally commit to bring to leading the process of

achieving results in the field of health?

Write down your answers.

Share commitments with team (15 minutes) STEP 2.

In the large group, after people have had a chance to write their answers.

SAY: Share your answers with the other people on your team.

TIP:To illustrate what you are asking the participants to do, share examples of what you are committed to in your own leadership.

STEP 3. Voice commitments to whole group (20 minutes)

In the large group, ask each participant to share his or her commitments.

SAY: It adds power to your commitments to speak them aloud.

Try to be specific, not vague, about your commitments.

This will help you to contribute more effectively to your teams and your clients.

19.C Identify New Leadership Challenges

This important exercise gives teams a chance to identify the next challenge they will work on together.

NOTE: Teams should leave this final workshop with clarity about how they will take on their next challenges using LDP+ tools and how they will sustain and expand the LDP+ process.

- **DURATION** 60 minutes
- **MATERIALS** □ Handout: Challenge Model
- **PROCESS:**

Explore possible challenges (20 minutes) STEP 1.

SAY: Use the next 15 minutes or so to explore with your team what challenge you would like to take on next.

> Follow the same process you first used with the Challenge Model. Use your organization's mission and strategic priorities to guide you toward a shared vision and then agree on a measurable result that is within your sphere of control.

Invite each team to briefly present the challenge they have selected.

STEP 2. The challenge of sustaining the LDP+ (30 minutes)

Ask participants to discuss the following questions among themselves.

ASK: How can you keep the LDP+ active by using your local resources?

> Who is interested in becoming a facilitator and bringing this program to new teams?

What new teams will be enrolled in the LDP+?

What recommendations do you want to give to the LDP+ Governing Body as they make plans to sustain and scale up the program?



After the teams have had about 10 minutes for discussion, HAND OUT fresh copies of the Challenge Model.

SAY: Use the Challenge Model to create a vision of how to sustain the LDP+, to choose a measurable result, and to develop an Action Plan for next steps and accountabilities.

Give the teams about 15 minutes to do this.

STEP 3. Taking responsibility for next steps (10 minutes)

To the large group:

ASK: Who will take responsibility for leading the next steps to sustain this process?

Who will volunteer to be on the team to do that?

What are the first steps you will take?

Which LDP+ tools will you continue to use?

This closing activity ensures that participants join the wider community of LDP, VLDP, and LDP+ alumni and take advantage of resources available for further support and learning.

- **DURATION**
- 15 minutes
- **MATERIALS**
- ☐ Handout: LeaderNet flier; Internet Sources for Proven/Effective Public Health Practices
- Prepared flipchart with the website address: LeaderNet: http://www.leadernet.org/
- **PROCESS:**

STEP I. Describe the online MSH resources (5 minutes)

In the large group:

SAY:

You have learned to use leading, managing, and governing practices, the Challenge Model, and other tools over the last several months. Using them all can become the way you approach your work and daily challenges.

There are resources available to you online that you can regularly consult to help you to continue to face challenges and achieve results.

POINT to the website address on the prepared flipchart:

LeaderNet: http://www.leadernet.org/

If you have Internet access in the room, SHOW LeaderNet on a computer.

TIP: Visit the websites beforehand so you can speak from firsthand knowledge.

Explain that LeaderNet is a network of people from around the world who are just like the participants and have gone through leadership development programs. They face similar challenges in low-resource settings.

■ Anyone can register to become a LeaderNet member—at no cost!

Highlight additional electronic resources (10 minutes) STEP 2.

Check the sites on the handout, Internet Resources for Proven/Effective Public Health Practices, to make sure they are relevant to the participants in your LDP+.

- HAND OUT and review this list of resources.
- HIGHLIGHT some of the websites providing access to best practices in reproductive health, HIV and AIDS, etc.



WORKSHOP 4: DAY THREE

DELIVER FINAL RESULTS: PRESENTATIONS

A. Final Presentations

— LUNCH BREAK —

B. Recognition, Certificates/Awards, and Final Evaluation

DELIVER FINAL RESULTS: PRESENTATIONS

PURPOSE	Demonstrate that participants have acquired skills in leading, managing, and governing practices and are producing results.
OBJECTIVES	To speak in a confident and convincing way about the team's leading, managing, and governing practices and results produced
	To deliver an effective presentation to key stakeholders
PREPARATIONS	☐ Final test of equipment
	Have posters or presentations ready.
	 Prepare handouts, as needed.
	 Prepare a written program for guests.
	 Prepare closing remarks for stakeholders.
	 Certificates of achievement (if not handed out on Day Two)
MATERIALS	 Prepared and blank flipchart—easel and paper
	Таре
	Colored markers
	 Computer/laptop, overhead projector
HANDOUTS	 Confirm that teams have the handouts for their presentations

A. Final Presentations

This presents results of the improvement projects to key stakeholders and shows that learning about how to lead, manage, and govern has produced results.

- **DURATION** 3–4 hours
- MATERIALS Written program
 - Certificates of achievement
- **PROCESS:**

STEP I. Settling in, seating guests, and welcome (15 minutes)

Introduce the guests, as needed.

Introduce the teams and facilitators, as needed.

STEP 2. Teams present results of their improvement projects (timing will vary)

The time for questions and answers can follow each presentation or you can allow questions during the presentation.

Start with the teams that can show a clear link among their Challenge Models, Action Plans, and outputs achieved.

Allow about 20 minutes for each presentation, depending on the number of teams, including questions and answers.

WATCH the clock. Pay careful attention to how much time each presentation takes to be sure that all teams will have a chance to present and answer questions.

If you know time will be short, some teams can present their results on a poster or flipchart that they display on the wall. Stakeholders can look at these during the break or during a special "poster session."



STEP 3. Words of thanks and closing speeches. (30 minutes)

Close the morning.

- Give local authorities a chance to give brief speeches thanking the participants for focusing on their challenges and working toward results.
- The certificates of achievement can be **HANDED OUT** by the visiting guests at this time.

B. Recognition, Certificates/Awards, and Final Evaluation

Give participants recognition for their achievements and contributions, while also demonstrating ways to acknowledge others.

- **DURATION**
- 60 minutes
- **MATERIALS**
- Certificates & Awards
- Handout: Final Evaluation Form; Feedback for LDP+ Facilitator (Distribute one copy of the feedback for each facilitator to provide individual feedback)
- **PROCESS:**

STEP I. Recognition and closing remarks (20 minutes)

Thank sponsors, champions, stakeholders (if they are there), and each other.

Facilitators and participants speak about what the program has meant to them. Ask people to volunteer to offer final remarks.

STEP 2. Provide certificates and awards (20 minutes)

Make sure each participant or team receives a certificate acknowledging participation and completion of the LDP+.

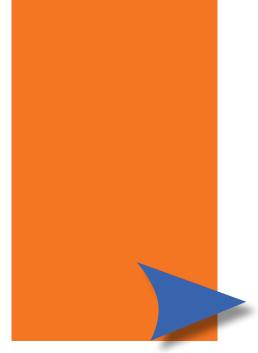
STEP 3. Final feedback and evaluation (10 minutes)

Ask participants for honest feedback about what they have learned in the workshop. Let them know they are not expected to put their names on the forms.

HAND OUT a copy of the Evaluation Form and Feedback for LDP+ Facilitator

- Ask participants for feedback about what they have learned in the LDP+. Give them 10 minutes to complete and return the form before leaving.
- Remind participants that they do not have to put their names on their evaluations.

STEP 4. Celebrate!!!



SECTION 8 HANDOUTS

SESSION 17: SHARED LEARNING SESSIONS	
Agenda and Objectives:Workshop #4	
Assignment for Final Workshop—Team Meetings between Workshops #3 and #4453	1
LDP+ Reporting Form	
Monitoring and Evaluation Planning Worksheet	
Evaluation Form	1
SESSION 18: COMMUNICATING RESULTS	
Telling Your Story	r
Tips for an Effective Presentation458	1
SESSION 19: COMING TO A CLOSE AND SUSTAINING THE PROCESS	
The Challenge Model459)
LeaderNet)
Internet Sources for Proven/Effective Public Health Practices461	
Final Evaluation Form: Workshop #4462	
Feedback for LDP+ Facilitator	1

AGENDA AND OBJECTIVES: WORKSHOP #4

PURPOSE

Complete preparations for the presentation of results and present final results to key stakeholders.

OBJECTIVES

- To prepare and deliver an effective presentation
- To present results in compelling ways
- To make plans to sustain the LDP+ process in the teams' workplaces

SESSIONS

- Welcome back and assignment review: Review what participants learned during Workshop #3
- Session 17: Shared Learning Sessions
- Session 18: Communicating Results
- Session 19: Coming to a Close and Sustaining the Process
- Deliver Final Results to Stakeholders

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	day one	DAY TWO	DAY THREE
AM	Opening and Review (1 hr.) Session 17: Shared Learning (2 hr)	Prepare and Practice Presenting (full morning)	Deliver Final Results Presentation to Stakeholders (full morning)
Lun	ch Break		
PM	Session 18: Communicating Results (3 hr.)	Session 19: Coming to a Close and Sustaining the Process (3 hr. 15 min.)	Recognition and Final Evaluation: (1 hr.)
	Closing Reflection (30 min.)		

ASSIGNMENT FOR FINAL WORKSHOP—TEAM MEETINGS BETWEEN WORKSHOPS #3 AND #4

- I. Plan and design a meeting with your team. Use the Team Meeting Form.
- 2. Share with your team what you have learned in Workshop #3, including:
 - Proven interventions
 - Shared learning
 - Revised Action Plans
 - Coaching
 - Commitment versus compliance
 - Team roles
 - Requests versus complaints
 - Coaching through breakdowns
 - How to gain and maintain trust
 - The importance of acknowledgment
- 3. In a separate meeting of your team, review your Action Plan in light of what you learned about new interventions and how to align and mobilize and inspire each other and others.

Use the handout, Telling Your Story, and the handout, Tips for an Effective Presentation of a Story, to start thinking about your final presentations for Workshop #4.

Review the following questions:

- What is your baseline in raw numbers?
- From where are you getting the data (e.g., forms, reports, patient registers)?
- What are your desired results in raw numbers?
- What calculations will you use to describe the difference between your baseline and desired results (e.g., an average, percentage, or rate)?
- What is the difference between your baseline and desired results using these statistics? Is it achievable in the time allotted?
- Are you going to compare your results with other sites? If you are, what is the comparison site you are considering? What are the characteristics that make it a suitable comparison site?
- Think about other factors that may affect your intervention and results (e.g., error in selecting your site or in data collection, other factors). What can you do to minimize these factors?
- 4. Make a habit of acknowledging one person each day, at home and at work, for work well done. In the next workshop, you will be asked to report on this.

LDP+ REPORTING FORM

Name and Location of Improvement Team:_

Report Prepared By:			
Dates of Activity (months):			
Date of Submission:			
Improvement Team Members:			
Name	Title	M/F	Email address
		I.	I

- I. Priority health area for this LDP+ initiative:
- 2. Measurable result your team defined in your Challenge Model:
- 3. Monitoring and Evaluation Planning Worksheet(s): Please include a completed Monitoring and Evaluation Planning Worksheet for each indicator for which you collected data during the implementation of the LDP+ improvement project.
- 4. Summary of results: Based on the values of your indicators, please briefly describe what your Improvement Team has accomplished.

MONITORING AND EVALUATION PLANNING WORKSHEET

INDICATOR	INDICATOR DEFINITION	BASELINE	Θ –	δ 2	3 Q	Σ 4	MO MO MO 3 4 5 6	TARGET	DATA SOURCE	DATA COLLECTION FREQUENCY	DATA COLLECTION RESPONSIBILITY FREQUENCY
	What is the definition of the numerator? What is the definition of the denominator?	What is the value of the indicator the month before beginning ICRCLDP activities?						 What goal have you set for the value of the indicator r by the end of ICRC-LDP activities?	Where will we get the data to measure this indicator?	How often will we collect the data?	Who is the person responsible for data collection?
		Numerator									
		Denominator									
		Percent									

EVALUATION FORM

I. Use the matrix below to summarize any difficulties your team encountered while working towards your measurable result, and how you addressed those difficulties.

What difficulties did your team encounter in implementing your Action Plan?	What actions did your team take to overcome these difficulties?	Did these actions succeed? Why or why not?			
2.Beyond the changes in your indicators, what other effects of your intervention did you observe?					
3. How did your team apply leading, managing, and governing practices to carry out your intervention?					
The following questions are to only be answered at the end of Workshop #4: 4. What might your team do differently if you use the LDP+ process on a new challenge in the future?					
5. Has your team chosen a new ch	nallenge to take on? Yes	No			

- 6. If yes, what is the new challenge?
- 7. If no, please describe the reason for not choosing another challenge.

TELLING YOUR STORY

Your team has accomplished something important, and the time has come to let other people know about it—to tell your story.

Everyone likes a good story!

Your story should have four parts: the setting, the challenge, the activity, and the results.

Here are some suggested questions you could consider as you write the story. The way you answer them will help bring your story to life.

The setting

- Who are we? What kind of organization or agency are we, and what is our purpose?
- What kind of people do we serve? How do they live? What do they believe? What are their concerns?

The challenge

- What was the priority health area and indicator our team was addressing?
- What was our baseline data? Where were we before we started this LDP+ process?
- What was our measurable result? What were the main obstacles to achieving our result?

The results

- What result was achieved?
- What was the value of the indicator at the end of the implementation period?
- What were the most significant changes we brought about for the people we serve?
- What changes did we bring about in the way our team works?

The activity

- What intervention did we choose to address these obstacles?
- What did we need to change?
- How did we work together as a team to make those changes? What were the different roles we played?
- What leading, managing and governing practices were applied?

A quote

Can you enrich your story by including one or more direct quotes from people whose lives were affected by this intervention? A real-life quote will give your story a strong emotional impact.

TIPS FOR AN EFFECTIVE PRESENTATION

Prepare well

- Start organizing and working on your story well ahead of time.
- Begin with a well-prepared introduction.

Clarify your message

- What challenge did you face?
- What actions did you take together as a team?
- What measurable results did you achieve?

Visuals

If you use flipcharts, make sure your words and pictures are clear and easy to see.

Use notes, but DON'T read from them

- Use notes so that you will know what you want to say next.
- Look up and speak as if you are talking to someone about something that is important to you.
- Don't read the presentation like you are reading a book aloud.

Practice and get feedback

- Practice telling your story enough times so that you are comfortable.
- Time your presentation. If it is too long, cut some material. Don't try talking faster.
- Rehearse your presentation in front of others. Ask them for their feedback. Are you making your message clear? Are you standing straight and tall? Are you confident?

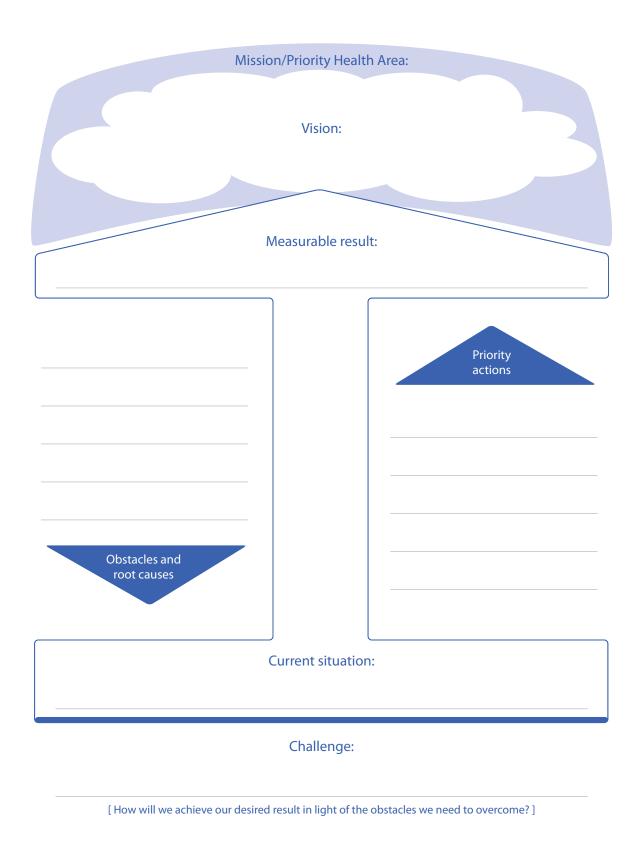
Take questions

- Have your listeners ask you questions so you can practice answering unexpected ones.
- Take questions, and answer them slowly and carefully.
- It's okay to say so when you don't know an answer. Say you will find out and tell them the answer as soon as you have it.

Be confident!

- Most speakers who describe themselves as nervous appear confident and calm to the audience.
- Be yourself; let the real you come through. Relax, take some deep breaths.
- Enjoy yourself! The audience will be on your side and will want to hear what you have to say.

THE CHALLENGE MODEL



LEADERNET

Do you have the desire and knowledge to effect change, but lack the necessary support of peers, resource, or a coach to stay inspired? LeaderNet provides the framework for a community of managers, leaders, and facilitators in leadership and management, to share their knowledge.

WHY IS LEADERNET NEEDED?

The Leadership, Management and Sustainability (LMS) program of Management Sciences for Health has provided leadership and management training to thousands of professionals from developing countries all over the world. These managers finish their training ready to take their new learning and selfawareness back to the workplace to effect change. Many of them run into a wall of obstacles, with no peer network, no resources to consult, and no coach to keep them inspired.

In light of decentralizing health care systems and the urgent need to scale up services to combat HIV/ AIDS, tuberculosis, and malaria, many graduates of LMS/MSH programs are also becoming facilitators of leadership development programs in their own countries and need resources and support to build their skills. From this strongly-voiced need, LeaderNet was born.

WHO CAN BECOME A MEMBER?

LeaderNet is open to managers, health care providers, teachers, facilitators, administrators, and technical experts with an interest in improving the leadership and management of health and other social service programs. It provides a platform for continuous learning, ongoing support, and peer exchange long after formal learning programs end.

HOW DO I JOIN?

Joining is easy. Go to the LeaderNet login page at http://www.leadernet.org and click on your preferred language. Then click on "New User? Register Here – It's Free" and provide the information requested in the registration form.

WHAT DOES LEADERNET OFFER?

- A network of nearly 9,000 members worldwide from over 172 countries
- A Web site in Spanish, French, English, and Portuguese
- Archives from workshops on topics such as: Professionalizing Leadership and Management; Executive Coaching; Improving Employee Satisfaction through Human Resource Management; and Performance-Based Financing
- Capacity to hold moderated online discussions on any topic of interest to the membership across four languages
- Web-based resources on the latest thinking in Leadership and Management
- A facilitator section where members can download guides for facilitating and providing M&E support to Leadership Development Programs
- A place to have your own Blog in our Member Stories section
- An alumni section for graduates of the Boston University School of Public Health summer leadership course

"This activity has been truly interesting and enriching. It's so important to be able to share ideas on such key topics with people from other countries, so that we have a broader vision of the world that surrounds us."

—A LeaderNet member from Nicaragua commenting on the Executive Coaching Workshop

INTERNET SOURCES FOR PROVEN/EFFECTIVE PUBLIC HEALTH PRACTICES

WORLD HEALTH ORGANIZATION (WHO)

 WHO has a number of materials available on promising practices in sexual and reproductive health. Go to

http://www.who.int/reproductive-health.

IMPLEMENTING BEST PRACTICES (IBP) INITIATIVE

This international forum helps policy makers, program managers, implementing organizations, and providers identify and apply evidence-based clinical practices to improve reproductive health outcomes in their countries.

Go to http://www.ibpinitiative.org/.

USAID MAXIMIZING ACCESS AND QUALITY (MAQ) INITIATIVE

This US government initiative includes researching good practices for improving family planning/reproductive health services as well as an exchange for USAID missions, country counterparts, USAID/Washington, and collaborating agencies. Go to http://www.maqweb.org.

KNOWLEDGE FOR HEALTH TOOLKITS

Online libraries of health and technical resources. The Toolkits provide easy access to reliable health information in one convenient location, intended for health program managers, policy makers, and service providers. Go to http://www.k4health.org/product/toolkits.

THE HEALTH MANAGER'S TOOLKIT

MSH's electronic compendium of management tools and information about other good practices for health professionals. Go to http://erc.msh.org/toolkit/.

FHI/UNAIDS BEST PRACTICES IN HIV/AIDS PREVENTION COLLECTION

FHI360 produced this book about HIV & AIDS prevention in the developing world. Go to http://www.fhi.org/en/Publications/index.htm.

THE COCHRANE COLLABORATION

An international nonprofit organization that produces systematic reviews of health care interventions. Go to http://www.cochrane.org/reviews/index. htm. Summaries of these reviews can be read at Informed Health Online:

THE LANCET SERIES HIV/AIDS THEMED ISSUE

http://www.informedhealthonline.org.

Published July 15, 2011. Go to http://www.thelancet.com/themed-hivaids-2011.

THE LANCET SERIES ON FAMILY PLANNING

Published July 2012, volume 380, number 9837. Go to http://www.thelancet.com/series/family-planning.

THE LANCET SERIES ON NEONATAL SURVIVAL

 Published March 5, 2005. Go to http://www.thelancet.com/series/neonatalsurvival.

THE LANCET OTHER SPECIAL ISSUES ON GLOBAL HEALTH TOPICS

Go to http://www.thelancet.com/global-healthseries.

FINAL EVALUATION FORM: WORKSHOP #4

complete this evaluation as fully and honestly as you can. Your feedback will help us to improve the nop's content and activities, as well as other aspects of the LDP+. Thank you.
What did you learn from the program?
How will you apply what you learned in your work?
What feedback do you want to give to the LDP+ facilitators?

FEEDBACK FOR LDP+ FACILITATOR

How much do you agree or disagree with the following statements? Please mark one box for each item as appropriate. Thank you!

	Disagree Strongly	Disagree	Agree	Agree Strongly
The facilitator began and ended sessions on time.				
The facilitator helped the group set the ground rules for the discussion and stick to them.				
The facilitator set a friendly and relaxed tone for the conversation.				
The facilitator listened well.				
The facilitator remained neutral.				
The facilitator helped the group productively discuss different points of view.				
The facilitator seemed to be familiar with the discussion materials.				
The facilitator encouraged everybody in the group to participate in conversations.				
The facilitator did a good job of not letting any one person dominate the discussions.				
The facilitator encouraged quiet members of the group to share their ideas.				
The facilitator worked effectively to keep discussions on track.				
The facilitator offered periodic summaries of the discussions and/or encouraged group members to do so.				
The facilitator handled intense situations well.				

group to share their ideas.				
The facilitator worked effectively to keep discussions on track.				
The facilitator offered periodic summaries of the discussions and/or encouraged group members to do so.				
The facilitator handled intense situations well.				
Please write any other feedback you may have	in the space b	pelow.		
			Date:	



FACILITATORS

Master Facilitator, LDP+ Champion

PARTICIPANTS

- Members of the Governing Body
- Members of the Technical Coaching Team:

In some instances, the Governing Body will have already selected a new geographic area and identified senior health system managers from that area to lead the implementation of the next LDP+. The Governing Body may choose to invite these people to participate in this meeting.

NOTE: When selecting members of the Governing Body and Technical Coaching Team, gender balance should be taken into account, trying to have similar number of male and female members in both groups.

- **MEETING OUTCOMES** A commitment from the Governing Body to oversee and support the scale up of the LDP+
 - A complete new Challenge Model with vision and priority actions for scaling up the LDP+ to new geographic areas and/or to address a new health priority, to guide the scale up process
 - Defined roles and responsibilities for the scale up of the LDP+
 - Selected proven interventions for scale up
 - Documented lessons learned from program implementation, from both the Improvement Teams and from the Governing Body

MEETING DESIGN

The Governing Body, with support from the Master Facilitator and the LDP+ Champion, will design this one-day meeting. During the meeting the Governing Body will:

- Review the results and lessons of the first LDP+ experience, with a discussion of ways to build on successes and avoid what was not successful.
- Use the governing practices to analyze how the Governing Body has worked and to propose actions that could strengthen their performance in the future.
- Decide to continue with the same health area and indicators or make any changes.
- Select new geographical areas to scale up the LDP+.
- Identify potential key stakeholders: LDP+ Champion, LDP+ Facilitator, Technical Coaching Team members, Local Coordinator, and potential new members of the Governing Body.
- Create a new Challenge Model to guide the scale up process.

The current guide can be adapted to the local needs for this evaluation and scale up meeting. We are proposing to use the Challenge Model to identify effective interventions to scale up the LDP+.

If there are new members, the LDP+ overview and the video "Seeds of Success" that are part of the materials for the Stakeholders Alignment Meeting, are effective tools to use to help orient and align new stakeholders to the LDP+. If you want to change the health priority area or indicators you can also identify appropriated sessions to do that in the Stakeholders Alignment Meeting.

PREPARATION

- Read the facilitator notes for this session.
- Work with the Governing Body to prepare the agenda for the meeting and decide:
 - Continue with the same priority area and indicators. If not, use the Stakeholder Alignment Meeting to incorporate activities to select the priority health area and indicators.
 - Choose which geographical areas will continue to be scaled up in the LDP+.
 - Decide if new people should be invited to be members of the Governing Body and the Technical Coaching Team.
- Invite people to the meeting

PREPARATION OF **MATERIALS**

- Make copies of all meeting handouts, available in the handout section at the end of this chapter.
- Prepare materials required for each session.
- Collect flipcharts from Workshop #4 and team's reporting form to make a summary of results on flipcharts.

MATERIALS

- ☐ Flipchart(s), easel, and paper
- Tape
- Colored markers

PREPARED FLIPCHARTS

- ☐ Flipchart with the meeting purpose, objectives, agenda, and schedule
- ☐ Flipcharts which contain the team's results and capture:
 - Summary of team results, in relation to the health priority area indicators
 - Proven health interventions that supported the teams in achieving their results
 - The application of leading, managing, and governing practices during the implementation of the improvement projects.
 - Recommendations developed by the Improvement Teams during Workshop #4 for the Governing Body on how to sustain and scale up the LDP+.
- Flipchart with the following definition:
 - Governance is setting strategic direction, establishing policy, raising and allocating resources, and overseeing achievement of results in a way that is responsive to the people an organization services. Good governing involves openness, transparency, accountability, and participation of the governed in the decisionmaking process.
- □ Flipchart with the Challenge Model drawn on it, with the priority health area and vision developed in the Stakeholders Alignment Meeting
- ☐ Flipcharts with a blank Action Plan (Workshop #2)
- Flipchart with tasks:
 - Write a list of all activities needed to complete each priority action.
 - Assign a person to be responsible for each activity.
 - Estimate resources needed to complete the activity.
 - Indicate start and completion dates for each activity.
 - Look back at the Action Plan and make revisions as necessary.

- □ Flipchart with "Questions to check the quality and logic of your Action Plan"
 - Are there enough activities for each of the priority action?
 - Did you include activities related to your role as Governing Body?
 - Are the activities listed enough to contribute to the achievement of your desired result?
 - Are specific people identified to be responsible for the completion of each activity?
 - Have all the needed resources been identified?
 - Does each activity have a time frame?

HANDOUTS

- □ Integrated Practices for High Performing Health Systems
- The Challenge Model
- Using the Challenge Model
- LDP+ Overview

AGENDA AND OBJECTIVES: LDP+ Stakeholder Scale Up Planning Meeting

PURPOSE

Build commitment of key stakeholders to scale up the LDP+ for developing leaders at all levels of health care organizations that can face challenges and achieve results in a priority health area.

OBJECTIVES

- To review the results and learning of the first LDP+ experience, with a discussion of ways to build on successes and avoid what was not successful
- To use the governing practices to: I) Analyze how the Governing Body has supported the LDP+ and 2) Propose actions that can strengthen team performance, with an emphasis on good governance and gender equity
- To create a new Challenge Model to guide the scale up process
- To make a commitment to address the challenges of improving health outcomes and implementing the LDP+ process over time
- To select the Improvement Teams and a Local Coordinator

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

	DAY
	Setting the Stage (45 min.)
AM	Team's Results Analysis (1 hr. 15 min.)
	Applying Governance Practices (45 min.)
Lunc	h Break
	Using the Challenge Model to Define the Scale Up Strategy (60 min.)
PM	Developing an Action Plan to Implement the Strategy (45 min.)
	Next Steps for the Governing Body and Closing (60 min.)



LDP+ STAKEHOLDER SCALE UP PLANNING MEETING

- A. Setting the Stage
- B. Team Results Analysis
- C. Applying Governing Practices

— LUNCH BREAK —

- D. Using the Challenge Model to Define the Scale Up Strategy
- E. Developing an Action Plan that Leads to Results
- Next Steps for the Governing Body and Closing





A. Setting The Stage: Welcome, Meeting Overview, Introductions, and Expectations

Through this discussion, participants understand the purpose, agenda, and expectations of the LDP+.

- **DURATION**
- 45 minutes
- MATERIALS
- ☐ Flipchart with the meeting purpose, objectives, agenda, and schedule
- □ Handout: LDP+ Overview
- **PROCESS:**

STEP I. Welcome and introduce participants (15 minutes)

Welcome everyone and **USE** the prepared flipchart to explain the purpose, objectives, and agenda of the meeting.

Have participants and facilitators introduce themselves.

SHOW the schedule for Day I of the meeting.

STEP 2. Identify expectations and concerns (15 minutes)

ASK: What are your expectations for this meeting?

What concerns do you have about the meeting?

CAPTURE responses on a flipchart and address concerns, as best as you can. For concerns that you cannot immediately address, **WRITE** them on a "parking lot" poster to come back to later during the day.

STEP 3. Remind the LDP+ structure and components (20 minutes)

HAND OUT *LDP+ Overview* to remind participants of the LDP+ structure and components.

Allow team members to describe their experience participating as a Governing Body in the LDP+.

B. Team Results Analysis

In this activity, teams' results are presented to the Governing Body and analyzed to make scale up decisions.



Lhour 15 minutes



- ☐ Flipchart, Summary of team results on the health priority area indicators
- □ Flipchart, Proven health interventions that supported the teams in achieving their results
- □ Flipchart, The application of leading, managing, and governing practices during the implementation of the improvement projects
- Flipchart, Recommendations developed by the Improvement Teams during Workshop #4 for the Governing Body on how to sustain and scale up the LDP+

PROCESS:

Team results in relation to the health priority area (30 minutes) STEP I

USE THE FIRST FLIPCHART to present the team results related to the health priority area indicators.

SAY: Here we have the results obtained by the teams related to the health priority area indicators. Let's analyze the results.

ASK: Did the teams achieve their desired measurable result?

How many of them achieved their results?

How much did they improve?

If not, what caused this?

What other observations can you make?

Are these indicators still a priority? Should we continue with the same indicators?

TAKE NOTES on the flipchart to record the conclusions of the analysis. Keep the flipchart for the last session on next steps.



STEP 2. Proven health interventions that supports the team in achieving their results (30 minutes)

USETHE SECOND FLIPCHART to explain the health interventions implemented by the teams. Give concrete examples that can illustrate the interventions.

SAY: Here we have the list of the health interventions the teams used to obtain their results. Let's explain one by one.

DIVIDE the group in sub-groups, one sub-group for each intervention. DISTRIBUTE the interventions to the sub-groups. On the flipchart, WRITE questions that will facilitate an analysis on how useful the interventions are and if it is worth to disseminate them

SAY: In each group, analyze the intervention I gave you using the following questions:

- Do we have evidence of the efficacy of this intervention?
- Is this intervention appropriated to scale up to other areas?
- Do we recommend scaling up this intervention?
- What actions do we recommend to scale up this intervention?

Give teams 10 minutes to discuss its intervention and reconvene to share their recommendations in plenary. TAKE NOTES on the flipchart of the recommendations.

STEP 3. Application of leading, managing, and governing practices by improvement teams (15 minutes)

USE THE THIRD FLIPCHART to present the team's application of leading, managing, and governing practices during the implementation of their improvement projects. Share some of the stories told by teams to exemplify how they used leading, managing and governance practices.

SAY: Here we have what the teams shared in Workshop #4 on how they applied leading, managing and governance practices.

ASK: Did the teams improve in terms of utilizing leading, managing and governance bractices?

What indicators do we have of these results?

If not, what caused this?

PRESENT THE FOURTH FLIPCHART and read the recommendations developed by the Improvement Teams during Workshop #4 for the Governing Body on how to sustain and scale up the LDP+.

ASK: What can we do to continue supporting the teams that participated in the LDP+ to continue learning and improving?

TAKE NOTES on the flipchart to record the suggestions on how to continue to support the LDP+ teams. Keep the flipchart for the last session on next steps.

Applying Governing Practices

In this activity, participants will review how governance practices were applied by the Governing Body during the LDP+ implementation.



45 minutes



- Flipchart that defines governance: Governing is setting strategic direction, establishing policy, raising and allocating resources, and overseeing achievement of results in a way that is responsive to the people an organization serves. Good governing involves openness, transparency, accountability, and participation of the governed in the decision-making process.
- Handout: Integrated Practices for High Performing Health Systems

PROCESS:

Refresh the concept of governing (10 minutes) STEP I

SAY: In our Stakeholders Alignment Meeting, when we started the LDP+ we explored the leading, managing and governance practices and how all three elements are essential to achieving a measurable result. In this session, we will review how you played your governing role and how you applied the governing practices.

ASK: Do you remember how we defined governing?

Listen to the answers shared, **SHOW** the flipchart labeled "Governing is...", and relate the answers shared to these concepts.

SAY: "Governance is setting strategic direction, establishing policy, raising and allocating resources, and overseeing achievement of results in a way that is responsive to the people an organization serves". Good governing involves openness, transparency, accountability, and participation of the governed in the decision-making process.



STEP 2. How we applied the practices of good governance to LDP+ (35 Minutes)

DISTRIBUTE the handout Integrated Practices for High Performing Health Systems and briefly go over each of the four governing practices.

DIVIDE participants into pairs or small groups and assign one practice to each group.

SAY: Discuss with your partner how this practice was applied to support the ldp+ initiative.

In plenary, ask each small group to briefly describe how the practices were applied to support LDP+ and what other activities can be done to support it in the future.

TAKE NOTES on the flipchart about specific activities that the governing body did and what can be done to support the scale up of the LDP+.

SAY: We have seen how you and the governing body applied the practices of good governance when overseeing the LDP+ implementation and how you will continue supporting the LDP+. Now we will use the challenge model to define the interventions the governing body will implement to scale up the LDP+.

Note: Use an inquiry mode (not prescriptive) when discussing governance within the governing body. Emphasize the role of the governing body members in scaling up the LDP+ and avoid getting diverted to the other roles they play as individuals or as a group.

In this exercise, participants agree on a challenge to scale up the LDP+ to new areas.

- **DURATION**
- 60 minutes
- **MATERIALS**
- Flipchart easel and blank flipchart
- Prepared flipchart with the Challenge Model, filled with the health priority area and vision developed during the Stakeholders Alignment Meeting
- Handouts: The Challenge Model; Using the Challenge Model
- Tape to stick flipcharts to the wall
- Markers
- **PROCESS:**

Take the first steps of using the Challenge Model (20 minutes) STEP I

Walk through the steps of filling out the Challenge Model to define the LDP+ scale up strategy.

DISTRIBUTE the handouts The Challenge Model and Using the Challenge Model.

SAY: During the LDP+ Stakeholders Alignment Meeting, we used the Challenge Model to define what interventions we will undertake to support the launch of the LDP+. Now that the first roll-out has finalized we will use it again to define the strategy to scale it up.

REFER TO the mission and vision on the filled in Challenge Model flipchart.

SAY: As you can see, the first two steps in the Challenge Model are already filled with your organization's mission, the health priority area you selected, and the LDP+ vision you developed.

> The next step is to analyze the current situation in order to pick a result that can contribute to the vision.

ASK: What is the current situation in relation to the LDP+? Take into account what we just analyzed in the previous sessions on team results and Governing Body performance.

MAKE A SUMMARY of the group comments on the current situation and WRITE it on the Challenge Model flipchart.



ASK: Taking into account this current situation:

What can be one measurable result for the Governing Body as a next step to scale up the LDP+?

One example of a Governing Body measurable result could be: By the end of Year XX, one team from each health center in Districts X,Y and Z will have finalized their training on the LDP+ and have implemented their first improvement project.

TAKE NOTES on a blank flipchart about the different measurable results, and help the group to select one. When the group reaches a consensus help them refine the result to make it SMART.

SAY: Let's review this result and try to make it is SMART.

ASK: Specific

Is the result clear enough so that others can understand what it will look like when it is accomplished?

- Measurable
 Progress towards the result can be measured using numbers, rates, proportions, or percentages.
- Appropriate Is the result aligned with the priority health area and the goals of your organization and your team?
- Realistic Can your team achieve this result with your current activities and resources?
- Time-bound Does your result have a start date and an end date?

When the result is refined, WRITE it on the Challenge Model flipchart.

STEP 2. Identify obstacles to reaching the result (20 minutes)

ASK: Why aren't we already there?

What is blocking the way to this result?

What obstacles on the way can be removed by the Governing Body?

TAKE NOTES on a blank flipchart about the different obstacles, and help the group to select the three most important ones. Obstacles can be related to trainers, resources, peoples' time, etc. Make sure they are obstacles that are under the Governing Body's control.



SAY: What are the three most important obstacles that the Governing Body can help remove?

Continue talking and agree on the three most important obstacles facing the desired result that can be removed by the Governing Body. When you are done, WRITE them on the Challenge Model flipchart.

STEP 3. Define a challenge and select the strategy (20 minutes)

Help the Governing Body write a challenge statement on the flipchart.

SAY: The next step in filling in the Challenge Model is to write the challenge statement, beginning the statement with "How will we achieve X (your result)... in the face of Y (the main obstacles you identified)?"

> For instance: How can we scale up the LDP+ to X,Y, and Z districts, in light of the scarce number of facilitators and resources?

WRITE the challenge statement at the bottom of the Challenge Model flipchart.

SAY: Now that we have our challenge and obstacles, we need to identify the strategy or priority actions that need to be implemented by the Governing Body to overcome the obstacles.

ASK: What are the strategy/ priority actions the Governing Body has to make to overcome the obstacles to scale up the LDP+?

TAKE NOTES on a blank flipchart about the strategy/priority actions, and help the group to select the three most important ones.

Continue talking and agree on the three most important strategies/priority actions that will be implemented by the Governing Body. When you are done, WRITE them on the Challenge Model flipchart.

Summarize by **READING** the entire Challenge Model in order: Mission, Priority Health Area, Vision, Current Situation, Measurable Result, Obstacles, Challenge, and Priority Actions.

SAY: Now that we filled in the entire Challenge Model, you know the strategy/priority actions you, as a Governing Body, will implement to support the LDP+ scale up. Let's work on a specific Action Plan to implement them.

E. Developing an Action Plan that Leads to Results

This exercise helps to develop an Action Plan that shows the specific activities, timelines, and accountabilities for each of the priority actions.



60 minutes



- Prepared flipcharts with blank Action Plan
- Prepared flipchart with tasks:
 - Write a list of all activities needed to complete each priority action.
 - Assign a person to be responsible for each activity.
 - Estimate resources needed to complete the activity.
 - Indicate start and completion dates for each activity.
 - Look back at the Action Plan and make revisions as necessary.
- Prepared flipchart with "Questions to check the quality and logic of your Action Plan"
 - Are there enough activities for each of the priority actions?
 - Did you include activities related to your role as Governing Body?
 - Are the listed activities enough to contribute to the achievement of your desired result?
 - Are specific people identified to be responsible for the completion of each activity?
 - Have all the needed resources been identified?
 - Does each activity have a time frame?

PROCESS:

STEP I. Review the Action Plan format (10 minutes)

SHOW and explain the prepared flipchart with the five tasks to be completed to fill in the Action Plan.

DEMONSTRATE how to complete the Action Plan on the flipchart by giving an example.

Filling in the Action Plan (50 minutes) STEP 2.

NOTE: Some activities, especially those related to aligning and mobilizing, may not fit under any of the priority actions, but they are still important.

SAY: First, let's write a list of all activities needed to complete each priority action in the left column, under "Activities."

Invite participants to give their ideas and FILL IN the Action Plan flipchart with suggestions of activities needed to complete each priority action. Recommend about 3-5 activities for each priority action to increase likelihood of follow through.

ASK: In addition to the activities related to the priority actions identified, are there other activities you as a Governing Body have to implement? For instance, activities suggested by the teams or by you when reviewing the role of the Governing Body.

SAY: Now that we have described all activities needed, let's assign a person to be responsible for each activity.

WRITE on the flipchart the names of the people responsible for each activity.

SAY: Now that we have assigned responsibilities, let's define when each activity should start and when each should be completed.

WRITE on the flipchart the estimated dates to start and finalize each activity.

SAY: Now we need to estimate what resources we will need to complete each activity.

WRITE on the flipchart the estimated resources needed to complete each activity. **SHOW** the prepared flipchart with the Action Plan.

SAY: Let's now check our draft Action Plan answering the following questions:

SHOW the prepared flipchart "Questions to check the quality and logic of your Action Plan". Review one by one each question and MAKE CHANGES to the Action Plan if needed.

NOTE: Teams should not assign an activity to a person who is not in the room.

F. Next Steps for the Governing Body and Closing

This activity will give members of the Governing Body a clear view of the next steps to fill in their role in scaling up the LDP+.

DURATION 60 minutes

PROCESS:

- MATERIALS Handout: LDP+ Overview
 - Blank flipchart

STEP I. Review responsibilities of the Governing Body (10 minutes)

In plenary, review the handout, LDP+ Overview, focusing on the key responsibilities of the Governing Body.

STEP 2. Confirm decisions already made for LDP+ scaling up (20 minutes)

SAY: You can see from the list of responsibilities that this Governing Body plays a very important role in making LDP+ successful.

You can begin by making sure that you are all aware of the key decisions that have already been made:

- The priority health area and the 2—3 national/regional indicators
- The choice of the geographic area for the next step of scaling up the LDP+
- The Local Coordinator to manage LDP+ operations and logistics

SAY: Two important decisions that you still have to make are about the location and membership of the Improvement Teams and selection of the Local Coordinator.

Experience has shown that the LDP+ works best when there are between five and ten Improvement Teams on each roll out, all working on the same priority health area.

SAY: Each team should be made up of between three and six people from the same facility or department. They should be people who usually work together and whose schedules will allow them to attend the four workshops and team meetings together over the next few months.

If only two or three members of a larger team can attend the workshops, these participants should plan with their coach to systematically engage the rest of the team in the process.

SAY: The Local Coordinator is the individual who will provide a communication link between the Improvement Teams and the Technical Coaching Team; manage the operational and logistical aspects of the LDP+ process; and provide organizational and logistical support for Improvement Team workshops and onsite meetings, as needed.

ASK: Who are your nominations for the Improvement Teams in each district and who will be the Local Coordinator?

WRITE recommendations on a flip chart and ask the participants to vote on the Improvement Teams and the Local Coordinator. Remind participants when selecting the local coordinator and members of the Improvement Teams that gender balance should be taken into account.

STEP 3. Plan Governing Body structure and activities (20 minutes)

SAY: Now let's talk about how you can best carry out the other Governing Body responsibilities. Here are some questions that may help you plan.

Lead a discussion of each of the following questions. If you have any information that will help participants answer the questions, share it with them.

When participants have reached an agreement, WRITE their responses on a flipchart.

ASK: Is the current Governing Body structure adequate for meeting the scale up of the LDP+? Is there a need to change or add members? Who should be part of the Governing Body in these new circumstances?

ASK: How often and when will the Governing Body meet throughout the LDP+ cycle?

> They will need to meet to follow up on the implementation plan and to review the Improvement Teams' progress, after Workshop #3. They will attend the Final Results Presentation in Workshop #4.

ASK: How will we, the Governing Body, be informed of progress and provide feedback on the process?

- The Champion will update them verbally and/or in writing at agreed-on intervals, including the monthly entries on Improvement Teams' monitoring and evaluation graphs.
- At the next Governing Body meeting, they will get a full report from the Champion and representatives of the Technical Coaching Team.
- They will also hear about progress and issues at the Shared Learning Sessions. They will provide feedback to the Champion and the Technical Coaching Team.



ASK: How will the Governing Body use the results of the Improvement Teams' work to guide decisions about continue the LDP+ scale up process?

- We will learn about the different ways Improvement Teams can implement the LDP+. We can share that learning with new teams in other parts of the region or country.
- We will also learn about actions to improve health services that have succeeded at the local level and can be shared with other localities.

ASK: What do we need to do now to start the second phase of the LDP+ scaling up process?

- Appoint a leader of the Governing Body.
- Distribute responsibilities among Governing Body members.

ASK: What are we, the Governing Body, committed to?

- Acting as public supporters/sponsors of the LDP+.
- Overseeing the progress of the LDP+.
- Leading the scale up of the LDP+ process after this initiative ends.

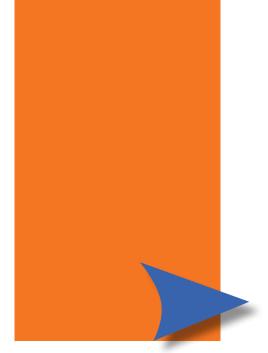
Guide participants in developing a set of required activities for the Governing Body over the LDP+ time period. Be sure that one member of the Governing Body agrees to assume responsibility for each activity. Add these activities to the developed Action Plan.

STEP 4. Close the Stakeholder Scale up Meeting (10 minutes)

Review the responses to questions on the flipchart to be sure that everyone agrees. Tell participants that you will **TYPE UP** the responses and **SEND A COPY** to each of them.

Solicit participants' reactions to the meeting and additional comments.

End by reminding them of their special obligation and privilege to follow and model the four governing practices: cultivating accountability, engaging stakeholders, setting a shared direction, and stewarding resources.



SECTION 9 HANDOUTS

STAKEHOLDER SCALE UP PLANNING MEETING

Integrated Practices for High Performing Health Systems	488
The Challenge Model	489
Using the Challenge Model	490
LDP+ Overview	491

AGENDA AND OBJECTIVES: LDP+ Stakeholder Scale Up Planning Meeting

PURPOSE

Build commitment of key stakeholders to scale up the LDP+ for developing leaders at all levels of health care organizations that can face challenges and achieve results in a priority health area.

OBJECTIVES

- To review the results and learning of the first LDP+ experience, with a discussion of ways to build on successes and avoid what was not successful
- To use the governing practices to: I) Analyze how the Governing Body has supported the LDP+ and 2) Propose actions that can strengthen team performance, with an emphasis on good governance and gender equity
- To create a new Challenge Model to guide the scale up process
- To make a commitment to address the challenges of improving health outcomes and implementing the LDP+ process over time
- To select the Improvement Teams and a Local Coordinator

SCHEDULE

Facilitators should schedule a morning and afternoon break each day.

Setting the Stage (45 min.) Team's Results Analysis (1 hr. 15 min.) Applying Governance Practices (45 min.) Lunch Break Using the Challenge Model to Define the Scale Up Strategy (60 min.) PM Developing an Action Plan to Implement the Strategy (45 min.) Next Steps for the Governing Body and Closing (60 min.)

INTEGRATED PRACTICES FOR HIGH PERFORMING HEALTH SYSTEMS

IFADING

SCAN

- Identify client and stakeholder needs and priorities
- Recognize trends, opportunities, and risks that affect the organization
- Look for best practices
- Identify staff capacities and constraints
- Know yourself, your staff, and your organization-values, strengths, and weaknesses

ORGANIZATIONAL OUTCOME

Managers have up-to-date, valid knowledge of their clients, and the organization and its context; they know how their behavior affects others

FOCUS

- Articulate the organization's mission and strategy
- Identify critical challenges
- Link goals with the overall organizational strategy
- Determine key priorities for action
- Create a common picture of desired results

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and briorities are clear.

ALIGN & MOBILIZE

- Ensure congruence of values, mission, strategy, structure, systems, and daily actions
- Facilitate teamwork
- Unite key stakeholders around an inspiring vision
- Link goals with rewards and recognition
- Enlist stakeholders to commit resources

ORGANIZATIONAL OUTCOME

Internal and external stakeholders understand and support the organization's goals and have mobilized resources to reach these goals.

INSPIRE

- Match deeds to words
- Demonstrate honesty in interactions
- Show trust and confidence in staff, acknowledge the contributions of others
- Provide staff with challenges, feedback, and support
- Be a model of creativity, innovation, and learning

ORGANIZATIONAL OUTCOME

The organization's climate is one of continuous learning, and staff show commitment, even when setbacks occur.

MANAGING

PLAN

- Set short-term organizational goals and performance objectives
- Develop multi-year and annual plans
- Allocate adequate resources (money, people, and materials)
- Anticipate and reduce risks

ORGANIZATIONAL OUTCOME

The organization has defined results, assigned resources, and developed an oberational blan.

ORGANIZE

- Develop a structure that provides accountability and delineates authority
- Ensure that systems for human resource management, finance, logistics, quality assurance, operations, information, and marketing effectively support the plan
- Strengthen work processes to implement the plan
- Align staff capacities with planned activities

ORGANIZATIONAL OUTCOME

The organization's work is directed by a well-defined mission and strategy, and priorities are clear.

IMPLEMENT

- Integrate systems and coordinate work flow
- Balance competing demands
- Routinely use data for decision-making
- Co-ordinate activities with other programs and
- Adjust plans and resources as circumstances

ORGANIZATIONAL OUTCOME

Activities are carried out efficiently, effectively, and responsively.

MONITOR & EVALUATE

- Monitor and reflect on progress against plans
- Provide feedback
- Identify needed changes
- Improve work processes, procedures, and tools

ORGANIZATIONAL OUTCOME

The organization continuously ubdates information about the status of achievements and results, and applies ongoing learning and knowledge

GOVERNING

CULTIVATE ACCOUNTABILITY

- Sustain a culture of integrity and openness that serves the public interest
- Establish, practice and enforce codes of conduct upholding ethical and moral integrity
- Embed accountability into the institution
- Make all reports on finances activities, plans, and outcomes available to the public and the stakeholders
- Establish a formal consultation mechanism through which people may voice concerns and provide feedback

ORGANIZATIONAL OUTCOME

Those who govern are accountable to those who are governed. The decision making is open and transparent. The decisions serve public interest.

ENGAGE STAKEHOLDERS

- Identify and invite participation from all parties affected by the governing process
- Empower marginalized voices, including women, by giving them a voice in formal decision-making structures and processes
- Create and maintain a safe space for the sharing of ideas
- Provide an independent conflict resolution mechanism
- Elicit and respond to all forms of feedback in a timely manner
- Establish alliances for joint action at whole-ofgovernment and whole-of-society levels

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has an inclusive and collaborative process for making decisions to achieve the shared goals.

SET SHARED DIRECTION

- Prepare, document and implement a shared action plan to achieve the mission and vision of the organization
- Set up accountability mechanisms for achieving the mission and vision using measurable indicators
- Advocate on behalf of stakeholders' needs and
- Oversee the realization of the shared goals and the desired outcomes

ORGANIZATIONAL OUTCOME

The jurisdiction/sector/organization has a shared action plan capable of achieving objectives and outcomes jointly defined by those who govern and those who are governed.

STEWARD RESOURCES

- Ethically and efficiently raise and deploy the resources to accomplish the mission and the vision and to serve stakeholders and beneficiaries
- Collect, analyze, and use information and evidence for making decisions
- Align resources in the health system and it design with the shared goals
- Build capacity to use resources in a way that maximizes the health and well-being of the public
- Inform and allow the public opportunities to monitor the raising, allocation and use of resources, and realization of the outcomes

ORGANIZATIONAL OUTCOME

The institution has adequate resources for achieving the shared goals, and the resources are raised and used ethically and efficiently to achieve the desired objectives and outcomes.

THE CHALLENGE MODEL

Mis	ssion/Priority Health Area:
	Vision:
	Measurable result:
Obstacles and root causes	Priority actions
	Current situation:
	Challenge:
[How will we achieve our desir	ired result in light of the obstacles we need to overcome?]

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USING THE CHALLENGE MODEL

STEP I	Review your organizational mission and strategic priorities With your team, agree on a common understanding of your organization's mission and strategic priorities. This understanding will help shape your vision within the context of your organization's priorities.
STEP 2	Create a shared vision of the future With your team, imagine what you and others will see when your team has made its contribution to improvements in your organization's strategic priorities. This shared vision will inspire the team to face each new challenge.
STEP 3	Assess the current situation With your team, scan your internal and external environments within the context of your organization's priorities. Consider such factors as the prevalence of the health problem, government policies, and current interventions. This will help you form an accurate picture of the conditions that can affect your team's progress toward your shared vision.
STEP 4	Agree on one measurable result Based on your organization priorities and your current situation, define a measurable result that can be achieved within the time frame of this ICRC- LDP. This desired measurable result is what will drive your work together and allow you to monitor and evaluate your progress toward achieving it. Your team will most likely need to adjust the result as you gain more information about the current situation and the obstacles you need to overcome.
STEP 5	Identify the obstacles and their root causes Make a list of obstacles that you and your team will have to overcome to reach your stated result. Consider gender equity issues and four broad categories into which most obstacles fall: policies and procedures; providers; equipment, infrastructure, and supplies; clients and communities. Use a root cause analysis tool to make sure you are addressing the causes and not just the symptoms.
STEP 6	Define your key challenge State what your team plans to achieve (your measurable result) in light of the root causes of the obstacles you have identified. (It helps to begin your challenge statement with: "How will we?")
STEP 7	Develop an Action Plan Develop an Action Plan that lists the priority actions needed to meet your challenge. Include estimates of the human, material, and financial resources needed and the time line for implementing your actions.
STEP 8	Implement your plan, monitor progress, and evaluate results Work together as a team to implement the plan. Regularly monitor your progress toward your measurable result and, at the end, evaluate your result.

LDP+ OVERVIEW

The Leadership Development Program Plus: A Country-Led Process for Focusing Health Teams on Priority Health Results

LDP+ is a process that develops people at all levels of organizations. Working in their real work teams, participants learn leading, managing, and governing practices that enable them to face challenges and achieve measurable results in priority health areas chosen by local leaders in the health system.

They bring what they learn back to their workplaces where they teach and inspire their coworkers to apply these practices to real workplace challenges in priority public health areas. LDP+ coaches and facilitators provide feedback and support throughout the six to eight months of the process.

LDP+ builds on lessons learned by Management Sciences for Health from the implementation of leadership development programs in more than 40 countries.

At the heart of the program are the Improvement Teams from local health facilities who learn a proven method of leading, managing, and governing to address challenges and produce measurable results.

Participants in the LDP+ learn how to:

- Lead, manage, and govern to achieve results in a priority health area.
- Apply reliable tools and processes for defining and addressing challenges.
- Incorporate ongoing performance improvement processes into their work teams;
- Build a workgroup climate that supports commitment to continuous improvement.

LDP+ Roles

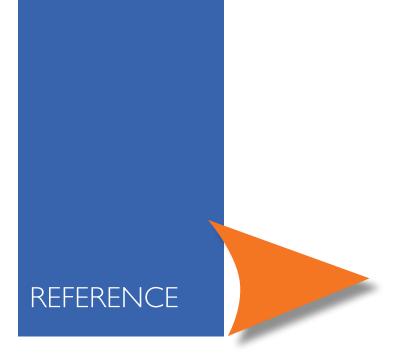
THE GOVERNING BODY, made up of local leaders in the health system, uses effective governing practices to oversee, sustain, and scale up the LDP+ process to address priority health areas.

THE TECHNICAL COACHING TEAM, made up of experts in the priority health area and monitoring and evaluation, uses national and regional public health data to understand and agree on the priority health area, proven interventions, and indicators. These coaches provide ongoing support to the Improvement teams.

THE IMPROVEMENT TEAMS, made up of members of local health units, implement the LDP+ process at their work sites. They analyze their local conditions to propose a measurable result in the priority health area and choose appropriate actions to achieve the result. They develop Action Plans and participate in workshops, onsite meetings, and Shared Learning sessions.

The Improvement Teams:

- 1. Understand the priority health area on which the LDP+ is focusing.
- 2. Create a vision of success for the priority health area.
- 3. Assess their current situation.
- 4. Identify measurable results they can achieve within six to eight months to improve an indicator in the priority health area.
- 5. Analyze the root causes of obstacles in the way of achieving the results.
- 6. Determine what actions they will take to address the root causes (with support from the Technical Coaching Team).
- 7. Develop and implement Action Plans.
- 8. Monitor their progress, evaluate their achievements, and report on their results.



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Management Sciences for Health (MSH) is an international nonprofit organization dedicated to closing the gap between what is known about the overwhelming public health challenges facing many nations and what is done to address those challenges.

Since 1971, MSH has worked in more than 100 countries with policymakers, health professionals, and health care consumers to improve the quality, availability, and affordability of health services. We work with governments, donors, nongovernmental organizations, and health agencies to respond to priority health problems, such as HIV and AIDS, tuberculosis, malaria, child health, and reproductive health. Our publications and electronic products augment our assistance in these technical areas.

MSH's staff of more than 2,000 people from almost 70 nations work in: its Cambridge, Massachusetts headquarters; offices in the Washington, DC, area; and 40 country offices. Through technical assistance, research, training, and systems development, MSH is committed to making a lasting difference in global health.

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