

LMG/West Africa Trip Report : Emmanuel Le Perru September 11-29, 2014

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1. Scope of Work:	
Destination and Client(s)/ Partner(s)	Leadership, Management and Governance Project, West Africa (LMG/WA) West African Health Organization (WAHO)
Traveler(s) Name, Role	Emmanuel Le Perru, Principal Technical Advisor, Center for Leadership and Management
Date of travel on Trip	September 11-29, 2014
Purpose of trip	Provide general supervision and project management oversight.
Objectives/Activities/Deliverables	<ul style="list-style-type: none"> - Provide technical oversight in the development of the PY2 workplan. - Meet and engage with project stakeholders such as the West African Health Organization (WAHO) staff to assess the progress of the project and plan for PY2 activities.
Background/Context, if appropriate.	<p>Through the Leadership, Management and Sustainability Program (LMS) and the West Africa Leadership and Management Strengthening Project Associate Award (WA-LEAD), USAID and Management Sciences for Health (MSH) worked closely from 2010-2013 with the West African Health Organization (WAHO) to strengthen its leadership and management capacities to be a more visible leader for health matters in West Africa.</p> <p>The Leadership, Management and Government (LMG) project supports the USAID/West Africa/Regional Health Office strategy, building on WA-LEAD achievements. Under the WA-LEAD Project, USAID supported the adoption of a regional Health Information System (HIS) policy and strategy document that was approved by the Assembly of ECOWAS Health Ministers during their 13th annual meeting. The project assisted WAHO to develop and adopt a communications strategy for the period 2013-2017 and worked with WAHO to design and implement an online survey for WAHO staff and external partners to help identify the organization’s key communications needs in June-July 2012. In collaboration with WAHO, WA-LEAD also helped develop and adopt an advocacy strategy for the period 2013-2015. Members of three WAHO workplace teams completed the Leadership Development Program (LDP). Now, LMG is focusing its interventions on supporting governance and leadership practices within the organization, reinforcing the management of the HIS as well as the M&E system, and supporting the strategic vision and planning.</p> <p>The two-year goal of the LMG/West Africa Project is to strengthen WAHO organizational capacity as a regional leader and health systems strengthening resource for member countries. We are achieving this goal through workplace action-oriented training for health leaders and managers in key system building blocks, and by developing the stewardship capacity of senior leaders through specialized training and mentoring, supported over the long term.</p> <p>LMG/West Africa has three main objectives towards this overall goal:</p> <ul style="list-style-type: none"> • Objective 1: Improved leadership, management, and governance practices



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	<ul style="list-style-type: none"> • Objective 2: Strengthened organizational M&E capacity and regional HIS management and implementation oversight • Objective 3: Strengthened capacity in internal and external communication and advocacy <p>The LMG Project in West Africa is building institutional capacity needed at WAHO to carry out regional health program stewardship effectively in close collaboration with USAID/West Africa implementing partners and direct investments to WAHO.</p>
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2. Major Trip Accomplishments:

1) Meetings with the Directeur Général (DG) of WAHO:

On September 15, 2014, I met with the DG and 6 of WAHO’s directors to introduce myself, explain the purpose of my visit, and get overall feedback on the activities conducted by LMG/WA. Mr. Crespin proposed that I schedule a meeting with each of the directors present at the meeting to go into further details about their expectations and suggestions.

Mr. Crespin listed his priorities and asked LMG/WA to help him address them:

- Institutional Reform (this is a long-term objective to which LMG/WA will contribute by providing a Human Resources consultant to assess WAHO’s HR needs and propose actions and processes that will lead the path to such reform)
- WAHO’s positioning and visibility (versus WHO for instance)
- Internal communication for collegial decision making based on consensus
- Knowledge exchange within WAHO staff
- Strengthening of team work and work climate
- Advocacy and communication
- Resource mobilization (additional and diversification of WAHO’s funding)
- Monitoring of WAHO member countries (data management).

Directors also asked for more practical learning such as case studies on similar organizations or companies/institutions with similar challenges.

When I met the DG a second time with the DGA, they both suggested that the LMG/WA Senior Technical Advisor (STA), Abdoulaye Diagne, to be more directive, even more “assertive” with them. I then mentioned that the exclusion of the LMG/West Africa Senior Technical Advisor from WAHO management meetings continues to hinder the project’s ability to make decisions based on current information. The DG and DGA acknowledged this fact and will invite the STA to management meetings more often. They also clarified that the STA could not always be invited as some matters require exclusive internal discussions, but they suggested that the STA ask to be present when specific topics need to be discussed with him. I also reminded the DG of the importance of informing the project of all relevant meetings.

I also explained that it would be useful for the STA to be included in WAHO’s various interactions with USAID, in order to avoid miscommunication and provide greater background and context to planned project



interventions.

2) Status of the Leadership and Development Program (LDP+):

The third LDP+ workshop, initially scheduled for September 2014, was postponed to PY2 by the DG and his deputy due to the urgent need to mobilize WAHO staff in Côte d'Ivoire, Guinea, Liberia, and Sierra Leone to respond to the Ebola outbreak. The third and fourth LDP+ workshops are now scheduled to occur in November 2014 and January 2015.

Similarly, the first LDP+ workshop for WAHO State Focal Points, which was scheduled for late August, was postponed to PY2, due to the need to mobilize WAHO State Focal Points during the Ebola outbreak. Due to their respective country and ministry priorities, I proposed to assess each State Focal Point's individual challenges and needs through one-on-one coaching sessions. Through this strategy, five to seven out of these 15 focal points will be selected to participate in the first LDP+ workshop scheduled to take place in December 2014 (*Update, this workshop has been postponed to the first quarter of 2015). The newly- appointed focal points could be the first to be targeted for this type of support. To determine the need profiles of focal points, and to recruit additional focal points to participate in the program, I proposed to ask all focal points to apply to the program online using the LeaderNet online platform. The online application should be disseminated to focal points by January 2015 at the latest.

3) Governance Academy:

Following WAHO's decision to postpone the Governance Academy until March 2015, I asked the STA to focus on adapting and refining LMG project governance tools that will be shared and utilized at the Governance Academy. The English version of the LMG Governance guide was distributed to all WAHO directors, and a WAHO-specific summary will be developed and distributed in order to better contextualize the guide's contents to WAHO's governance environment.

The LMG/WA team had employed several strategies prior to my trip to complete the governance profiles for WAHO and selected member states, including: drafting a tool for collecting the necessary information, disseminating the tool to WAHO focal points requesting their help in completing it, sending hard copies of the tool with WAHO staff traveling to targeted countries, and communicating the request directly to Ministers of Health, via the Directeur Général (DG). I suggested the STA to request the help of other MSH staff working with the ministries of health in these countries to help complete these profiles.

4) Youth Reproductive Health (YRH) Strategy

I discussed WAHO's Youth Reproductive Health (YRH) Strategy with the STA, Department of Primary Health Care (DSSP), and the Child and Youth Health Project Officer, along with other stakeholders, including the Department of Maternal Health and the KfW Regional Programme. WAHO, along with these partners, has proposed a roadmap for developing guidelines for member states to write their own YRH strategies. The roadmap outlines the next steps towards developing the guidelines:

- Conduct a literature review of YRH in member countries
- Carry out a situational analysis survey that will be sent to countries, to be conducted using local consultants
- Compile YRH data
- Develop a guide for ECOWAS countries based on the current state of YRH guidelines in the region and



YRH needs.

I expressed my concerns about the duration and cost of conducting situational analysis in each country using local consultants. The direct link between these analyses and the guidelines is also not clear, and I asked the STA and the project officers to better anticipate whether this work on the ground (in countries) will really bring some added value and data and how it will be integrated in the guidelines. Linkages need to be more explicitly explained.

5) Regional contraceptive commodities security/procurement strategy

I discussed updating WAHO's 2006 regional contraceptive procurement strategy with the STA and the KfW Regional Reproductive Health Programme's Technical Expert. WAHO needs to determine the financial resources that are available from stakeholders to complete this activity, as there is confusion over who will finance it; however, there is a possibility that World Bank funds intended for harmonizing sub-regional legislation on drugs and vaccines, including contraception, may be used. The KfW Regional Reproductive Health Programme has resources to carry out an assessment, based on the USAID|DELIVER model, but not enough to cover all 15 ECOWAS countries. The next step is to determine which countries will be included in the assessment, and to establish more effective cooperation between WAHO departments in order to develop a common strategy. LMG/West Africa and WAHO leadership are continuing to discuss the possibility of establishing an interdepartmental working group between the DSSP and the Planning and Technical Assistance Department (DPAT), which currently houses the reproductive health activities.

6) HIS Strategy and plan

Completion of the regional HIS implementation plan and operational HIS warehouse are dependent upon the recruitment of an HIS consultant. I reviewed the applicants' resumes, but none met the priority qualifications. In response, I asked for revised the scope of work to more clearly indicate the desired consultant profile and expertise. The new scope of work will be posted and the consultant will be recruited in the next quarter.

7) Implementation of advocacy plan and communication strategy

I met with Kayode Egbeleye, WAHO PO for Advocacy, to discuss the status of the WAHO advocacy and communication plan. During the July Interim Strategic Plan planning process, new 2015 advocacy and communications plans were developed, but so far these plans are neither finalized nor implemented. I asked the LMG/WA STA to work with each Project Officer (Kayode and Moktat) to identify updated targets to be included in these new plans, finalize them, and assist in drafting five-year communication plan.

8) Human Resources: Consultant scope of work

I met with the HR manager, Ms. Savage, and I provided feedback on the draft scope of work for an HR consultant. Currently at WAHO there is neither a framework to determine the human resource requirements and policies nor to frame the performance review process of WAHO staff and support short-, medium- and long-term staff development. This critical organizational challenge needs to be addressed for WAHO to perform effectively and obtain demonstrable results. The organization also lacks a functional organogram backed by a staffing plan as well as job descriptions to respond to each position. An LMG/WA consultant will need to do a review, based on the previous jobs descriptions, of existing WAHO positions and lead the elaboration of a plan for HR



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development, built on the vision of the new leadership. The consultant should also propose a functional organogram that is responsive to the ambitions and scope of WAHO.

9) Work plan

Based on the numerous meetings held with the WAHO staff listed in the contact table (4), I worked with the STA on finalizing a Program Year 2 (PY2) workplan integrating the feedback and suggestions received from the various people interviewed at WAHO. I also wrote the workplan narrative and reviewed the proposed budget. The PY2 workplan package will be submitted to USAID by October 3, 2104.

10) Draft quarterly report and supervision meetings

During my stay at WAHO I reviewed and revised the first draft of the LMG/WA July-September 2014 Quarterly Report to be submitted to USAID/RHO by October 15, 2014.

Using the suggestions, comments, and recommendations I got from WAHO staff, I also held several supervision meetings with the STA Adboulaye Diagne, providing feedback on his work and behaviours, as well as on the LMG/WA proposed activities, current initiatives, and opportunities for improvement.

3. Next steps: Key actions to continue and/or complete work from trip.

Description of task	Responsible staff	Due date
1. Submit PY2 work plan package to USAID/RHO	Emmanuel Le Perru	October 3, 2014
2. Finalize governance profiles for WAHO member states	Diagne	Ongoing, depending on responses collected
3. Finalize LMG/WA July-September 2014 Quarterly Report	Diagne, LMG/WA home office team	October 15, 2014
4. Trip Report	Emmanuel Le Perru	October 15, 2014 Completed on January 20, 2015

4. Contacts:

Name	Contact info	Home organization	Notes
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5. Description of Relevant Documents / Addendums: Give the document's file name, a brief description of the relevant document's value to other CLM staff, as well as the document's location in eRooms or the MSH network. Examples could include finalized products and/or formal presentations, TraiNet Participant List, Participant Contact sheet, and Meeting/Workshop Participant Evaluation form are examples of relevant documents.

File name	Description of file	Location of file
LMG West Africa Workplan and PMP_PY2_Submitted 10 03 14	PY2 workplan and PMP	LMG/WA files – e-room
LMG West Africa_Workplan Narrative_PY2_Oct 2014-Sept 2015_3 October 2014	PY2 workplan narrative to USAID/RHO	LMG/WA files – e-room
HR organizational development consultant SoW - Eng – Draft Sept252014	HR consultant SoW	LMG/WA files
HIS consultant SoW - Fr – Draft Sept232014	HIS consultant SoW	LMG/WA files