

Organizational Capacity Assessments as an Organizational Development Tool for Capacity Building in Malaria

Introduction

Since 2016, the Human Resources for Health in 2030 — Capacity Building for Malaria (CBM) project has supported the development of high-functioning health systems that are equipped to lead nationwide malaria activities in 10 countries across West and Central Africa. Through the long-term, embedded advisors’ model, the project provided strategic support to National Malaria Control Programs (NMCPs), strengthening their institutional capacity, leadership, health workforce, procurement, and supply management skills to help them make the best use of their Global Fund grants and President’s Malaria Initiative (PMI) resources; as well as technical expertise to ensure effective implementation of high-quality malaria control services at all levels.

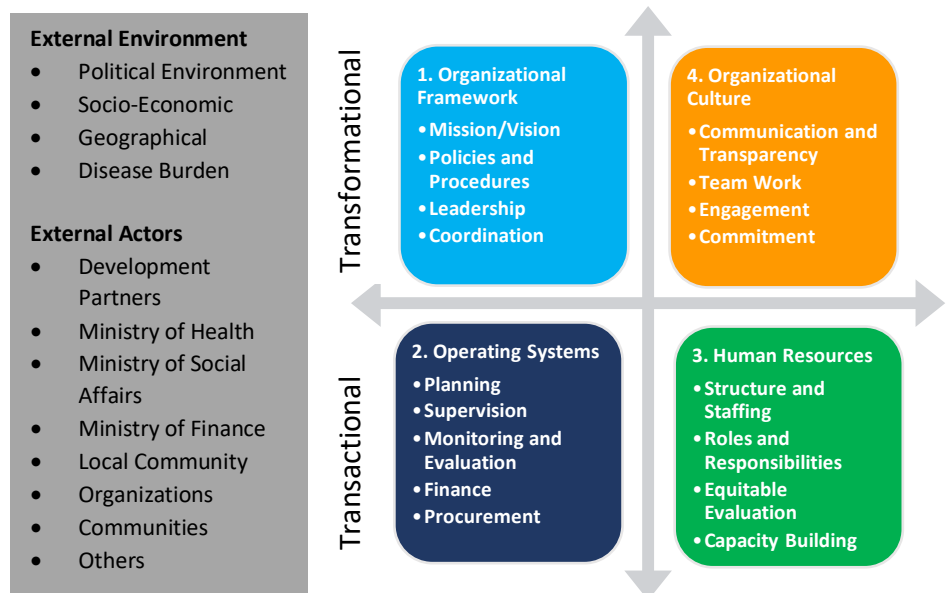
Assessment of organizational capacity

CBM uses an organizational development (OD) model adapted from Burke and Lewin (W Burke, G Lewin, 1992) and in part from McKinsey's 7S framework, and organized in four quadrants focusing on the human element of organizational development was used during the assessments (Exhibit 1).

The first and fourth quadrants of the model represent transformational elements that can catalyze

or influence change, while the second and third quadrants are the transactional elements necessary to implement and sustain change.

Exhibit 1: Organizational Development Model



The purpose of the assessments using this model are to:

- 1) assess the organizational capacity of National Malaria Control Programs (NMCP) to fulfil their management role in coordinating the implementation and monitoring of their National Strategic Plans; and
- 2) to guide the technical assistance provided to the NMCP by CBM.

The organizational capacity assessments of the NMCPs have been conducted in five countries (Exhibit 2). During the assessments, the objectives were to:

- a) Identify gaps and priorities for improvement that are within the control/mandate of the NMCP, while acknowledging broader organizational development challenges, and
- b) Establish concrete actions and interventions that can help the NMCP to address its institutional weaknesses and capitalize on its strengths

The action plan and resulting recommendations provide the NMCP with a roadmap to strengthen its mandate of coordinating malaria strategies at the national level.

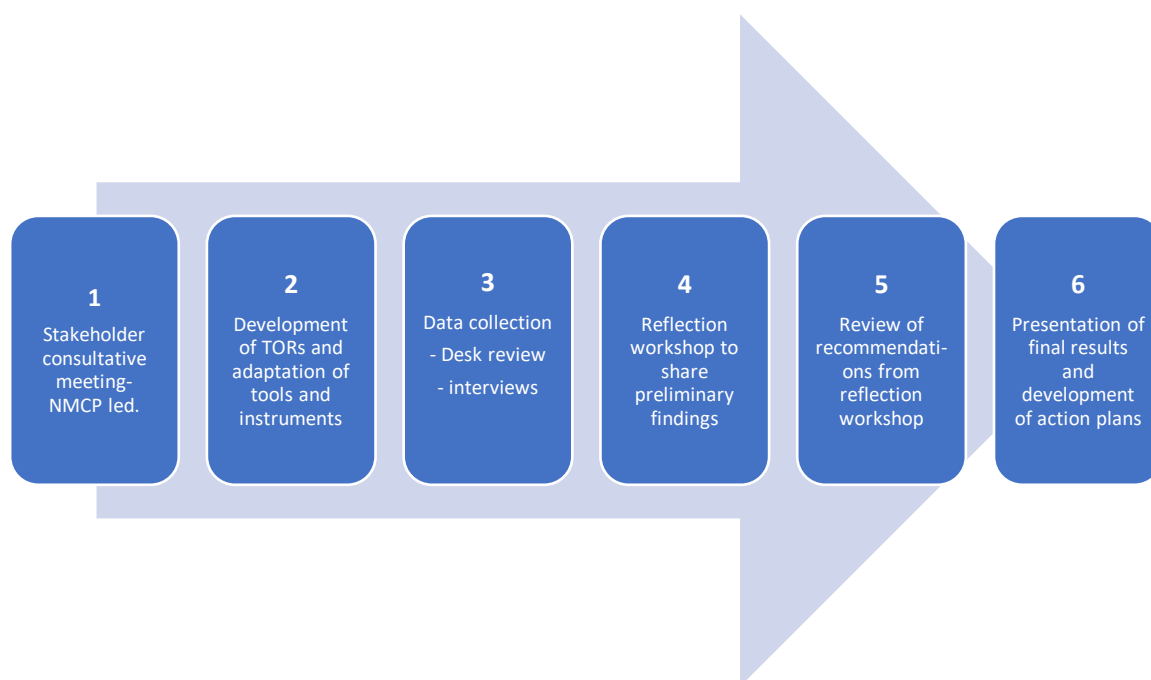
Exhibit 2: OD Assessment Countries and Year

Country	Year
Niger	2019
Cote d'Ivoire	2019
Chad	2020
Chad progress report	2021
Togo	2021
CAR	2021

Methodology

Preparation for the assessment

The assessment is collaborative from the beginning and led by the NMCP to ensure ownership and institutionalization of the findings (Figure 1). The data collection should take between 4-6 weeks, and the assessments conducted at baseline (at the start of the life of a National Strategic Plan (NSP)); at mid-term and after five years.



Assessment team

The assessments are conducted by a minimum team of three people which includes: A team leader with expertise in public health evaluations; and two consultants, one with a public health and program management expertise and another with experience in malaria control in the country where the assessment is conducted. Additionally, having an initial OD expert is important to develop the tools and adapt the approach.

Data collection

Using the OD Model as a guide, the country teams design and implement the assessments using a mixed-method approach which include: 1) desk review of key documentation; (2) semi-structured interviews with key informants, and surveys to gauge the internal engagement and communication of NMCP staff; and 3) a two-day organizational reflection workshop attended by NMCP coordinators and section heads, other representatives of the Ministry of Health, and technical/financial partner staff based at the sub-national level. During this workshop, preliminary results of the interviews and staff engagement/ internal communication surveys are discussed, and later; and (4) the final assessment results are shared with the coordination team, section heads, and development partners (both technical and financial).

During the data collection, the following are the key guiding areas/questions to be answered for each of the four domains:

Domains	Guiding assessment questions
Domain 1: Organizational Framework: <i>the elements that shape an organization's overall vision and mission, as well as define the day-to-day norms and expectations for how the organization operates internally and externally, as defined by its leadership, strategies, policies, and procedures</i>	
<ul style="list-style-type: none"> Vision and Mission 	Is the vision and mission clearly defined in the NSP? Is the vision and mission achievable? Is the vision and mission clearly understood by NMCP staff and stakeholders? Are they available and displayed in offices?
<ul style="list-style-type: none"> Structure 	Is an org chart available and up to date? Is the current structure adequate?
<ul style="list-style-type: none"> Policies and Procedures 	Does the NMCP have standard documents (policies and procedures) to guide the implementation of interventions and instill in staff a common set of values and standards for conducting their work?
<ul style="list-style-type: none"> Leadership 	Is the NMCP leadership open and appreciated? Does the NMCP leadership advocate and mobilize sufficient resources?
<ul style="list-style-type: none"> Coordination 	Is there a coordination framework involving all partners involved in the malaria control activities? What platforms or coordination meetings are in place (quarterly meetings, biannual task force meetings bringing together all regions and partners, the annual review meeting)? What internal communication mechanisms are present within the NMCP?
Domain 2: Organization's Operating Systems: <i>This quadrant examines the transactional systems that are needed to implement and sustain organizational change. To fulfill its mission, an organization's operating systems must ensure that the right resources are in the right place at the right time. Operating systems help the organization deploy human and financial resources, make data-driven decisions, deliver services and assets, maintain infrastructure and logistics, and implement and oversee programs in all these systems. Management plays a key role in ensuring that these operating systems function as intended. Management practices are what managers do daily to make human, material, and systems resources available to the organization to conduct its strategy. Managers oversee the consistent implementation of activities: they plan and resolve issues with staff, and they supervise staff to ensure that they have the financial, logistical, and technical support they need to perform their tasks. Given the critical importance of human capital, human resource systems have been highlighted in their own quadrant below.</i>	
<ul style="list-style-type: none"> Planning and Problem-solving 	How and who contributed to the development of the NSP? What additional plans have been developed? Is there a defined process for problem-solving? Is there a mechanism for monitoring program performance?

<ul style="list-style-type: none"> • Supervision and Tracking progress 	<p>What supervision tools are in place for the NMCP? What other government divisions and CSOs provide supervision of different cadres delivering malaria services? What challenges are experienced in providing supporting supervision? What processes are in place to assess, review and measure progress in program implementation?</p>
<ul style="list-style-type: none"> • Monitoring and evaluation 	<p>Is there a M&E plan to monitor the NSP? Are indicators adequate to monitor implementation of the NSP? What is the quality of malaria data? (Timeliness, completeness, accuracy and reliability) What HMIS are in place? For electronic HMIS, what is the coverage? Is data used for malaria decision making?</p>
<ul style="list-style-type: none"> • Finance 	<p>What resources have been mobilized to cover the NSP? What is the source of malaria financial resources? i.e., are they diversified (international donors, private sector, national, etc.)</p>
<ul style="list-style-type: none"> • Procurement / Supply chain management 	<p>Are anti-malarial commodities available to the public when needed and at what price point? What systems are in place to monitor stock levels of malaria commodities?</p>
<p>Domain 3: Organization's People (Human Resources): <i>is transactional and essential to the implementation of sustainable change. Human resources include: (a) recruitment and staffing, (b) roles and responsibilities, (c) fair assessment, (d) reward and consequences, (e) feedback, and (f) capacity building. In addition to relying on the interviews, this section is based on the results of the staff engagement survey and internal communication surveys.</i></p>	
<ul style="list-style-type: none"> • Recruitment and Staffing 	<p>What proportion of staff are contract staff? Do staff providing malaria services have the right qualifications and skills?</p>
<ul style="list-style-type: none"> • Retention 	<p>What proportion of NMCP staff are happy with their work? Leadership and management? What incentives are there for NMCP staff?</p>
<ul style="list-style-type: none"> • Roles and responsibilities 	<p>Are there approved job descriptions for all staff positions? Do staff fully understand the tasks described in their job descriptions?</p>
<ul style="list-style-type: none"> • Fair assessment, rewards, and consequences 	<p>What annual review processes are in place? Is the review process consistent with national and/or donor processes? Is there a formal NMCP compensation mechanism for civil servant performance?</p>
<ul style="list-style-type: none"> • Feedback 	<p>What processes are in place to provide feedback to staff? Are there platforms for staff to share best practices and experiences?</p>
<ul style="list-style-type: none"> • Capacity building 	<p>Is there a capacity building plan for staff? What are the priority capacity building areas for NMCP staff?</p>
<p>Domain 4: Organization's Culture: <i>Organizational Culture reflects all parts of the organization. The culture of an organization can be transformational and can create and sustain positive change. However, it can also significantly hinder change, regardless of the number of written strategies or the number of meetings held. Elements that affect an organization's culture include internal communication, transparency and teamwork, motivational factors such as feedback and recognition, and the physical environment where people work.</i></p>	
<ul style="list-style-type: none"> • Internal communication and transparency 	<p>What internal communication mechanisms are in place? Who is included in each communication mechanism?</p>
<ul style="list-style-type: none"> • Teamwork 	<p>What mechanisms are in place to improve teamwork within the NMCP? How can teamwork within the NMCP be improved?</p>
<ul style="list-style-type: none"> • Commitment/motivating factors 	<p>What has been put in place to motivate and improve NMCP staff morale? Is there an attractive performance-based review system for civil servants? Does leadership delegate tasks appropriately? Do all staff members feel valued and like they can contribute?</p>

<ul style="list-style-type: none"> • Working environment 	What efforts have been made by the NMCP to improve working conditions of staff?
<ul style="list-style-type: none"> • Staff engagement 	What is the level of engagement for NMCP staff? Is staff input being considered by the NMCP?

Outputs

The main outputs from the assessments include:

- a) Assessment reports with key findings across the different domains.
- b) Action plans with a full list of actionable recommendations to provide the NMCPs with a roadmap to improve their organizational mandate and strengthen the implementation, monitoring, and coordination of malaria control strategies in accordance with the NSP.

Lessons learned from the implementation of the assessments in the five countries

1. Engage technical and financial partners through technical working groups on malaria (e.g., prevention work technical group, patient care, etc.) and by leveraging the collective inputs of these experts to develop well costed National Strategic Plans (NSP) can be used to mobilize resources to fully cover NSP activities and priorities.
2. Implement a coordinating framework that includes hosting an annual review meeting and monthly/quarterly partner coordination meetings and use of real-time dashboards to review progress on performance indicators, the NMCP and its partners informed.
3. Implement regular meetings, equitable distribution of roles and responsibilities and appointing focal persons by activity strengthened staff engagement.
4. Adapt or custom design tools (semi-structured interview guides, internal communication tool) to align with the language and style of the NMCP organizational culture and to reflect current circumstances (e.g., strategy changes, organizations merging). These adaptation helps to ensure that people completing tools understand the questions and that the questions fit well with the NMCP’s purpose for assessing their organizational capacity.

Next steps

Once the assessment has been completed and recommendations agreed upon, the NMCP collaborating closely with its stakeholders will implement the recommendations in order to strengthen their capacity. NMCP partners provide technical support and track the implementation of the recommendations. While only implemented in Francophone West Africa and focused on malaria programs, the assessment approach and tools can easily be adapted to other parts of sub-Saharan Africa and regions and have applications beyond malaria programming.

Resources

1. Generic Assessment Term of Reference
 - a. English – Annex A
 - b. Français – Annex B
2. Assessment of the Organizational Capacity of the National Malaria Control Program Country Final Reports:
 - a. **English | Français**
[Côte d’Ivoire](#), [Chad](#), [Central African Republic](#), [Niger](#) and [Togo](#)
3. [Organizational Development Assessment \(ODA\) Tool Description](#)

ANNEX A: Terms of Reference (TOR) for an Organizational Capacity Assessment of the National Malaria Control Program

Purpose: The purpose of this technical assistance is to assess the organizational capacity of the National Malaria Control Program (NMCP) in (insert country) to coordinate the implementation, oversight, and monitoring of their strategic plan to achieve set objectives and goals for Malaria Control. The action plan generated based on findings from the assessment will establish clear institutional strengthening milestones aimed at making the NMCP a stronger candidate to be Principal Recipient when applying for Global Fund grants.

Background and context: Insert country specific background and context relating to malaria, funding specific to malaria and or from the Global Fund to fight malaria, national strategic plans and objectives. The NMCPs' roles and objectives, etc.

Scope of Work: The assessment will consist of evaluating the capacity of the National Malaria Control Program (NMCP) to conduct its management and coordination role, with regards to the objectives and results set forth in the national malaria strategic plan. The following tasks will be formed:

1. Conduct a systematic review of existing assessment reports on the NMCP institutional performance supported by the Government of X country and its malaria control partners
2. Review the NMCP's processes and functions, including its organizational structure staffing patterns, roles and responsibilities of each division, heads of division and staff members
3. Assess the organizational structure of the NMCP against standards set forth by the World Health Organization and RMB Partnership to End Malaria
4. Assess the adequacy of roles and responsibilities with regards the objectives and results pursued in the National Malaria Strategic Plan, as well as synergistic approaches to operate as a team
5. Identify challenges the program is facing in conducting its day-to-day operations as well as conducting strategic thinking to achieve the objectives and results of the national malaria strategic plan
6. Interview NMCP key staff both technical and administrative to assess their view of the organizational structure and the performance (strengths, weaknesses, challenges and opportunities) of the program coordination
7. Interview NMCP's technical and financial partners to understand their views and request their recommendations on approaches and strategies to strengthen the management and coordination capacity of the program
8. Interview the Ministry of Health and/or other relevant government stakeholders/officials to discuss their views and recommendations in the context of growth of malaria portfolio and opportunities for strengthening the management of the program
9. Assess opportunities of decentralizing NMCP operations and ways to promote bottom-up planning and accountability of key players with regards to the performance of the supply chain;
10. Review lines of communication with the Ministry of Health to ensure the NMCP receives oversight and supports needed to conduct coordination activities in a smooth manner
11. Assess existing coordination mechanisms at the central, regional and operational levels, in line with the RBM Partnership guidance for coordination
12. Assess collaboration of NMCP with its financial and technical partners to ensure effective coordination of efforts geared towards achieving objectives and results expected in the National Malaria Strategic Plan

Expertise required: It is expected that this assessment shall be conducted by a local or African Regional Evaluation Firm or a consulting team with an extensive experience in conducting similar

activities (organizational assessment and capacity building). The Evaluation Team leader must have extensive evaluation/ qualitative research background and be comfortable with a variety of methodologies including complexity-aware approaches and tools. S/he must provide evidence of having conducted similar assessment in the past years in Francophone West Africa. Also, the assessment Team must include a Public Health Specialist with a strong knowledge of challenges of malaria programming and management. A NMCP staff member should be proposed to participate in the full assessment. The Team Leader may be an expert in organizational development/management specialist or one of the Team members should have such expertise.

Other expertise desired amongst the consultant team: French-speaking, previous experience working with Ministry of Health/government personnel, previous experience conducting similar evaluations, good interview/interpersonal skills.

Assessment Timeline: This assessment will require approximately eight weeks total. One month will be spent reviewing documents, conducting interviews, collecting data and writing a draft assessment report that will be presented at the end of the sixth week to receive observations, inputs and comments from the NMCP and its partners. An additional two weeks will be necessary to review the report and include observations, inputs and comments provided at the presentation and submit a final report in French language, which will be translated into English.

Deliverables:

- Draft report outline, data collection tools, analysis plan, schedule, and list of key informants. (Note that these documents will be submitted to PMI for review before in-country data collection)
- Initial in-brief meeting with NMCP and PMI to present proposed methodology and schedule.
- Mid-term briefing with PMI/Cote d'Ivoire on the status of the assessment to discuss and address potential challenges and emerging opportunities related to data collection efforts for the assessment.
- Action planning session with NMCP to jointly brainstorm short-, medium- and long-term actions to address weaknesses identified as part of the assessment designates next steps, lead and other staff responsible for overseeing each priority item, a timeline for capacity development activities, and resource requirements.
- A presentation of findings to provide feedback meeting to NMCP and PMI
- Draft assessment report to be reviewed by the NMCP and PMI (feedback will be provided within 10 days of receiving the draft report)
- A final assessment report due at the end of the twelve weeks.
 - Two copies of the report: one in English and one in French

The final report (not to exceed 30 pages) should include:

- An executive summary presenting the highlights of the findings and recommendations
- Recommendations to the Ministry of Health and the NMCP to improve current organizational structure and strengthen its management and coordination operations.
- The recommendations should be concrete, practical, clearly linked to assessment findings, and designed to be actionable.
- If appropriate, a proposition of an organizational chart and any suggestions regarding the staffing patterns, resulting from the observations and information collected from the assessment shall be included in the report

ANNEX B: Termes de référence (TOR) pour une évaluation de la capacité de gestion et d'organisation

Objectif : L'objectif de cette assistance technique est d'évaluer la capacité de gestion et d'organisation du Programme national de lutte contre le paludisme (PNLP) en (indiquer le pays) à coordonner la mise en œuvre, la supervision et le suivi de son plan stratégique afin d'atteindre les objectifs et les buts fixés pour la lutte contre le paludisme. Le plan d'action généré sur la base des résultats de l'évaluation établira des étapes claires de renforcement institutionnel visant à faire du PNLN un candidat plus fort pour être le bénéficiaire principal lors de la demande de subventions du Fonds mondial.

Historique et contexte : Inclure les informations générales et le contexte spécifiques au pays concernant le paludisme, le financement spécifique au paludisme et/ou du Fonds mondial de lutte contre le paludisme, les plans stratégiques et les objectifs nationaux. Rôles et objectifs du PNLN, etc.

Étendue des travaux : L'évaluation consistera à évaluer la capacité du Programme national de lutte contre le paludisme (PNLP) d'assumer son rôle de gestion et de coordination en ce qui concerne les objectifs et les résultats énoncés dans le plan stratégique national contre le paludisme. Les tâches suivantes seront effectuées :

1. Procéder à un examen systématique des rapports d'évaluation existants sur la performance institutionnelle du PNLN appuyée par le Gouvernement du pays et ses partenaires de lutte contre le paludisme, y compris les deux rapports d'évaluation des capacités institutionnel.
2. Passer en revue les processus et fonctions du PNLN, y compris sa structure organisationnelle et les tendances de dotation en personnel ainsi que les rôles et les responsabilités de chaque division, responsables de division et membres du personnel.
3. Évaluer la structure organisationnelle du PNLN par rapport aux normes établies par l'Organisation Mondiale de la Santé et le Partenariat visant à faire reculer le paludisme
4. Évaluer l'adéquation des rôles et des responsabilités par rapport aux objectifs et résultats poursuivis dans le Plan stratégique national de lutte contre le paludisme, ainsi que des approches synergiques pour fonctionner en équipe.
5. Identifier les défis auxquels le programme est confronté dans la conduite de ses opérations quotidiennes ainsi que dans la réflexion stratégique pour atteindre les objectifs et les résultats du plan stratégique national de lutte contre le paludisme.
6. Conduire des entretiens avec le personnel clé du PNLN, tant sur le plan technique qu'administratif, pour évaluer sa vision de la structure organisationnelle et du rendement (forces, faiblesses, défis et opportunités) de la coordination du programme.
7. Conduire des entretiens avec les partenaires techniques et financiers du PNLN pour comprendre leur point de vue et demander leurs recommandations sur les approches et stratégies visant à renforcer la capacité de gestion et de coordination du programme.
8. Conduire des entretiens avec les responsables du Gouvernement et du Ministère de la Santé pour discuter de leurs points de vue et recommandations dans le contexte d'un portefeuille de paludisme en croissance et des opportunités de renforcement de la gestion du programme.
9. Évaluer les possibilités de décentralisation des opérations du PNLN et les moyens de promouvoir la planification ascendante et la responsabilisation des acteurs clés, principalement en ce qui concerne la performance de la chaîne d'approvisionnement.

10. Examiner les voies de communication avec le Ministère de la Santé pour veiller à ce que le PNLN reçoive la surveillance et le soutien nécessaires pour mener les activités de coordination de manière harmonieuse.
11. Évaluer les mécanismes de coordination existants aux niveaux central, régional et opérationnel, conformément aux directives de l'initiative « Faire reculer le paludisme » pour la coordination.
12. Évaluer la collaboration du PNLN avec ses partenaires financiers et techniques pour assurer une coordination efficace des efforts visant à atteindre les objectifs et les résultats attendus dans le Plan stratégique national de lutte contre le paludisme

Expertise requise : Cette évaluation doit être réalisée par un cabinet d'évaluation régional ou ouest africain ou une équipe de consultants possédant une vaste expérience dans la conduite d'activités similaires (évaluation organisationnelle et renforcement des capacités). Le chef de l'équipe d'évaluation doit avoir une connaissance approfondie de l'évaluation et de la recherche qualitative et maîtriser diverses méthodologies, notamment des approches et des outils sensibles à la complexité. Il doit prouver qu'il a mené une évaluation similaire au cours des dernières années en Afrique de l'Ouest francophone. En outre, l'équipe d'évaluation doit comprendre un spécialiste de la santé publique ayant une solide connaissance des problèmes liés à la programmation et à la gestion du paludisme. Un membre du personnel du PNLN devrait être proposé pour participer à l'évaluation complète. Le chef d'équipe peut être un expert en développement/gestion organisationnelle ou l'un des membres de l'équipe doit avoir cette expertise.

Autre expertise souhaitée dans l'équipe de consultants : Francophone, expérience de travail avec le Ministère de la Santé/les fonctionnaires gouvernementaux, expérience de réalisation d'évaluations similaires, bonnes aptitudes pour les entretiens/rerelations interpersonnelles.

Calendrier d'évaluation : Cette évaluation prendra environ huit semaines au total. Un mois sera consacré à l'examen des documents, aux entretiens, à la collecte des données et à la rédaction d'un rapport d'évaluation préliminaire qui sera présenté à la fin de la sixième semaine pour recevoir les observations, contributions et commentaires du PNLN et de ses partenaires. Deux semaines supplémentaires seront nécessaires pour examiner le rapport et inclure les observations, contributions et commentaires fournis lors de la présentation et présenter un rapport final en langue française, qui sera traduit en anglais.

Livrables :

- Brouillon du rapport, outils de collecte de données, plan d'analyse, calendrier et liste des informateurs clés. (Notez que ces documents seront soumis à PMI pour examen avant la collecte de données dans le pays)
- Première réunion préliminaire avec le PNLN et PMI pour présenter la méthodologie et le calendrier proposés.
- Briefing à mi-parcours avec PMI/Côte d'Ivoire sur l'état d'avancement de l'évaluation afin de discuter et traiter des défis potentiels et des opportunités émergentes liés aux efforts de collecte de données.
- Séance de planification des actions avec le PNLN pour réfléchir ensemble aux mesures à prendre à court, moyen et long terme pour évaluer les faiblesses identifiées dans le cadre de l'évaluation, désignation des prochaines étapes, responsable et autres membres du

personnel chargés de superviser chaque élément prioritaire, calendrier des activités de renforcement des capacités et ressources nécessaires.

- Une présentation des résultats pour fournir une réunion de retour d'information au PNLP et au PMI.
- Le projet de rapport d'évaluation doit être examiné par le PNLP et le PMI (un retour d'informations sera fourni dans les 10 jours suivant la réception du rapport).
- Un rapport d'évaluation final à remettre à la fin des douze semaines.
 - 2 exemplaires du rapport : un en anglais et un en français.

Le rapport final (ne dépassant pas 30 pages) devrait inclure :

- Un résumé analytique présentant les points saillants des constatations et des recommandations.
- Recommandations au Ministère de la Santé et au PNLP afin d'améliorer la structure organisationnelle actuelle et de renforcer ses opérations de gestion et de coordination.
- Les recommandations doivent être concrètes, pratiques, clairement liées aux conclusions des évaluations et conçues pour pouvoir donner suite.
- Une proposition d'organigramme et toute suggestion concernant les profils de personnel, résultant des observations et des informations recueillies lors de l'évaluation, doivent être incluses dans le rapport.