# Report of the mid-term evaluation of the Transformation Agenda of the WHO Secretariat in the African Region

May 2017



## **Table of Contents**

Acknowledgements	3
Acronyms	3
Executive Summary	4
1. Introduction	9
2. Background to the Evaluation	10
3. Methodology	11
4. Findings	11
4.1 Pro-results Values	13
4.2 Smart Technical Focus	16
4.3 Responsive Strategic Operations	19
4.4 Effective Communications and Partnerships	22
5. Specific issues for consideration	25
Communication	25
Inter-Country Support Teams	26
Restructuring exercise	26
Functional reviews in COs	27
Programmatic issues/Technical KPIs	27
Change management/project management	27
Partnerships – Member States/Partners	27
6. Conclusions	28
7. Recommendations	29
Annex 1: Methodology	31
Annex 2: Survey questionnaire	33
Annex 3: Results from the online survey	39
Annex 4: Documents reviewed	49

## **Acknowledgements**

The evaluation team would like to thank the colleagues in the African Region, in particular the Regional Director, the Director of Programme Management, cluster directors, WHO Representatives in the countries visited, staff committee representatives and other technical and administrative staff, for their frank and open participation, and for providing unrestricted access to information and documents during this mid-term evaluation.

## **Acronyms**

WR

WHO Representative

CAN	Child and Adolescent Health and Nutrition
CDS	Communicable Diseases Cluster
EVD	Ebola Virus Disease
FRH	Family and Reproductive Health Cluster
GMC	General Management and Coordination Cluster
GSM	Global Management System
HSS	Health Systems and Services Cluster
IST	Inter-country Support Team
IVD	Immunization and Vaccine Development
JPO	Junior Professional Officer
KPI	key performance indicators
MDG	Millennium Development Goal
NCD	Noncommunicable Diseases Cluster
NPO	national professional officer
PMDS	Performance Management and Development System
SDG	Sustainable Development Goal
WHE	WHO Health Emergencies Programme

### **Executive Summary**

#### Introduction

The Transformation Agenda<sup>1</sup> of the World Health Organization Secretariat in the African Region 2015-2020 was launched by the Regional Director for Africa in February 2015. Its objective is to ensure that the WHO Secretariat in the African Region evolves into the primary leader in health development in Africa and is a reliable and effective protector of Africa's health stock.

The Transformation Agenda has four focus areas: pro-results values, smart technical focus, responsive strategic operations and effective communications and partnerships. The managerial, programmatic and governance themes of the ongoing WHO global reform were factored into its development. It is not only a commitment to positive change in the Regional Office but also a programme for accelerating the implementation of WHO global reform within the Region, with each focus area closely aligned with specific outcomes of the WHO global reform programme.

The Transformation Agenda aims to be bold, ambitious and seeks to engender a regional health organization that is foresighted, proactive, responsive, results-driven, transparent, accountable, appropriately resourced and equipped to deliver on its mandate. The Transformation Agenda also responds to increased expectations of Member States and regional and global stakeholders for a change in the way WHO does business in the African Region. There is anticipation of accelerated implementation and institutionalization of the WHO reform agenda as well as improvement in the effectiveness and efficiency of actions in line with the Organization's mandate. Stakeholders want to see an appropriately resourced and equipped WHO that is responsive and effective in strengthening national health systems; coordinating disease prevention and control, including outbreak preparedness and response; and launching supranational actions in support of global health security. Whilst it is a vision and a strategy for change aimed at facilitating the emergence of "the WHO that the staff and stakeholders want", its success will depend on the commitment and cooperation of staff, Member States and partners.

#### **Background to the evaluation**

The Transformation Agenda envisages both a mid-term and a final evaluation of its implementation. It also sets forth activities to be carried out in the first two years, of which some were to be completed within the Regional Director's first 100 days in office from February to April 2015 and the remaining activities were to be completed within the first two years ending in January 2017.

The end of the first two-year period in January 2017 provided an opportune time to undertake the mid-term evaluation, which was carried out as an independent evaluation by the WHO Evaluation Office at the request of the Regional Director.

The evaluation objectives were to review the progress in the implementation of the Transformation Agenda, to document achievements and best practices, to identify challenges and areas for improvement and to provide recommendations on the way forward. It may also serve as a source of baseline material for the final evaluation.

<sup>1</sup> The Transformation Agenda is one of five interrelated and overarching priorities identified by the Regional Director: (i) improving health security; (ii) strengthening national health systems; (iii) sustaining focus on the health-related MDGs/SDGs; (iv) addressing the social determinants of health; and (v) transforming the African Region into a responsive and results-driven Organization.

### **Methodology**

The evaluation was conducted as a mixed-method approach using a combination of document review, key informant interviews, site visits and an all-staff online survey. The key informant interviews were mainly conducted face-to-face during on-site visits across the different levels of the Region (at the Regional Office in Brazzaville and with the inter-country support teams (ISTs) and WHO country offices in Brazzaville, Harare, Libreville and Ouagadougou). During on-site visits and follow-up video or teleconferences, individual or group interviews were held with senior staff, professional staff, general service staff and the staff associations. The evaluation team also met with senior officials of the Ministry of Health in Burkina Faso, Congo, Gabon and Zimbabwe. Additionally, telephone interviews were conducted with representatives from three key external stakeholder groups (members of the Regional Programme Sub-Committee, members of the Regional Independent Advisory Group, and international partners and donors).

#### **Findings**

The mid-term evaluation finds that the Transformation Agenda is relevant and timely. It is a clear strategy for organizational change guided by the Regional Director's vision. This vision and the need to become a better Organization is well received and accepted by staff in general. It is recognised both internally within the Secretariat and externally by partners that the Transformation Agenda also addresses the reputational difficulties of the Organization in the aftermath of the Ebola crisis. Furthermore, the Transformation Agenda, through its alignment with the WHO global reform, also provides a renewed focus for the reform in the African Region. The evaluation confirms the relevance of the Transformation Agenda's four focus areas and the related expected results.

The evaluation notes reasonable progress towards achieving the aim of the Transformation Agenda to render the Regional Office more effective, timely and efficient in providing the best possible support to Member States. However, any reform will require not only a change in processes but also of behaviours and this takes time. The evaluation notes completion of, and progress in, many activities that were planned and there is also an emerging change in behaviours and mindset. However, there have also been delays in achieving a number of planned activities which has slowed progress, and weaknesses in communication and change management support have led to lack of understanding of the Transformation Agenda and engagement with it among some staff.

Major efforts to support the control of the outbreak of Ebola Virus Disease (EVD) appear to have had implications for the speed of implementation of the Transformation Agenda during its early phase. Nevertheless, progress was made and key achievements per focus area are noted below.

#### 4.1 Pro-results value

The purpose of this focus area is to foster the emergence of an organizational culture that is defined by the values of excellence, team work, accountability, integrity, equity, innovation and openness. The expected results for this focus area are: enhanced accountability by individuals and teams; improved fairness in rewards, recognition and sanctions for staff members; responsive, supportive and inclusive teams; and enhanced ethical standards for the staff.

Completed activities within this focus area include: the launching of the Accountability and Internal Control Strengthening Project, the establishment of the Compliance and Risk Management Committee, and establishing and filling the full-time position of ombudsman in

the Regional Office. In addition, a staff welfare officer position was established and efforts are under way to develop and implement staff well-being and welfare programmes at all levels.

#### 4.2 Smart technical focus

The technical areas of WHO's work in the African Region will be prioritized in line with regional priorities and commitments, and interventions will be based on evidence and lessons learned from experience. The expected results for this focus area are: EVD epidemic controlled; strengthened regional capacity for health security, including effective preparedness and timely response to disease outbreaks and emergencies, and polio eradication; accelerated progress on Millennium Development Goals (MDGs) and implementation of sustainable development goals (SDGs); functional cross-cutting systems approach within the WHO African Region facilitating progress towards universal health coverage (UHC); and enhanced knowledge management.

Within this focus area, a number of activities relating to the control of the EVD epidemic have been completed and a recovery and rebuilding strategy is under implementation. Other successful efforts to strengthen regional capacity for health security include: the restructuring of the Regional Office to effectively address outbreaks and emergencies, the prioritization of polio eradication in the Region and high-level advocacy undertaken by the Regional Director in this regard; the definition of mechanisms for effective coordination between the three levels of the Organization in the context of the emergency reform; and the engagement with the African Union to support the establishment of an African Centre for Disease Control and Prevention and to support accelerated implementation of the MDGs.

#### 4.3 Responsive strategic operations

The goal of this focus area is to evolve into an Organization with enabling functions that efficiently support the delivery of programmes. The expected results for this focus area are: human, financial and material resources aligned with the identified priorities; strengthened WHO human resource capacity; enhanced transparency in recruitment, placement and performance management; improved efficiency and accountability in the areas of finance, procurement and general management; and improved leveraging and use of available technologies and tools, especially the Global Management System (GSM) and business intelligence dashboards.

A number of activities have been completed in this focus area. For example, accountability and efficiency have been enhanced with the review of delegation of authority in the Region, regional compliance functions have been strengthened and streamlined, and key performance indicators (KPIs) for performance monitoring have been developed. Formal training programmes have also been developed on the use of new technologies. There is progress in the human resources component of the Transformation Agenda with the restructuring process completed in 4 of the 6 clusters in the Regional Office. With regard to the transparency of recruitment and selection process, standard, harmonized recruitment processes were used, in alignment with the processes used for professional positions throughout WHO and a transparent and competitive bidding process for procurement of services is in place. In an effort to ensure staff are well equipped for working in the Organization and performance is appropriately recognised, a mandatory induction programme for newly-recruited staff members has been established, a learning and development needs assessment was conducted and transparency in rewarding good performance has been enhanced. The Regional Director has also made critical senior-level appointments in the Regional Office and in country offices.

#### 4.4. Effective communications and partnerships

This focus area seeks to foster a more responsive and interactive organization, internally among staff members and externally with stakeholders. The expected results for this focus area are: enhanced internal communication between and across all the three levels of the Organization; reinforced external communication; and strengthened strategic partnerships.

Activities in this area that have been completed in order to enhance internal communication include the engagement of a communications consultancy firm to conduct an assessment of communications in the African Region, the regular sharing of information with regard to the Regional Director's travel and the outcome of her missions/meetings, and the institution of regular fora for discussing progress in the implementation of strategic programmes. With regard to the reinforcement of external communication, closer working relations with media houses have been established, with regular WHO slots in key television and radio channels within the Region.

#### **Areas for future focus**

Going forward, areas for further work internally include: (i) reviewing the activity workplan to ensure outstanding activities are completed or sunsetted and that further activities are planned; (ii) completing the restructuring exercise in a fair, transparent and participatory manner; (iii) completing the functional reviews in country offices; (iv) providing greater clarity and advocacy on the role of the ISTs and their interaction both within the country offices and with the Regional Office; (v) rolling out the technical KPIs; (vi) strengthening change management and project management efforts; (vii) continuing efforts to engage staff in the activities of the Transformation Agenda, including, where appropriate, increasing knowledge and awareness of staff through briefings or training possibilities; and (viii) ensuring funding for the overall budget of the Regional Office, and the activities of the Transformation Agenda in particular.

In addition, further areas on which to concentrate efforts, both internally and externally, include: (i) strengthening communication, as an integral part of the Transformation Agenda, to cover both internal and external audiences with greater focus in the next phase, including better articulation of success stories and results at the country level; (ii) moving from a process focus to a stronger focus on delivery of results and better communication of the work of the Regional Office in this regard; and (iii) broadening the engagement of Member States and partners in the next phase.

Finally, all the above efforts need to be underpinned by a clear governance structure for the Transformation Agenda.

#### Recommendations

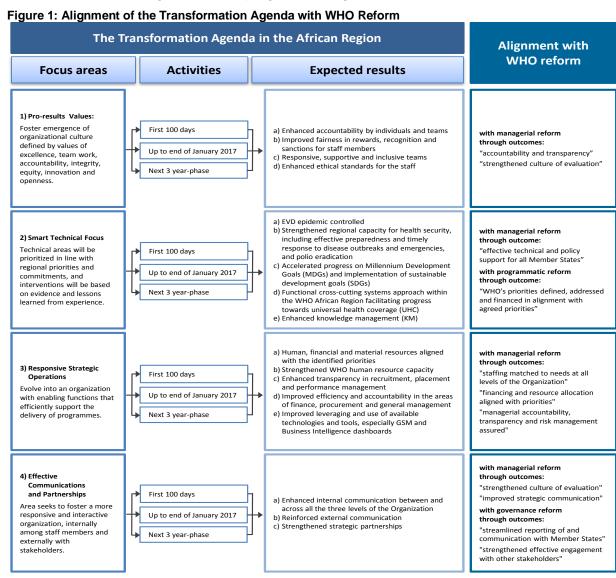
- 1. The Regional Director and executive management team should revisit the activity workplan of the Transformation Agenda, ensuring outstanding activities are completed or sunsetted, and plan activities for the next phase.
  - consider a second stage launch, targeted at staff and Member States, in order to renew the Regional Director's vision and engage staff, Member States and partners
  - the next phase of Transformation Agenda to concentrate on technical focus, delivery and results.
- 2. Establish a clear governance structure for the Transformation Agenda with membership made up of the executive management team and staff representatives.

- governance team to review progress on a monthly or bi-monthly basis, provide guidance to project team and address any delays or bottle-necks in implementation.
- 3. Strengthen the Transformation Agenda project management team with appropriately skilled staff and resources.
- 4. Develop and implement a change management strategy to institutionalize the Transformation Agenda
  - identify change agents in regional office, inter-country support teams and country offices
  - identify and support champions among directors, WRs and other staff
- Develop and implement an effective communication strategy, commencing with a conscious "relaunch" to staff and Member States, recalling the vision and purpose, detailing progress, and recognizing some of the challenges and shortfalls in the first two years.
- 6. Complete cluster restructuring exercises for General Management and Noncommunicable Diseases clusters, and any other major human resource reorganisation as soon as possible.
- 7. Provide regular updates on planned functional reviews of country offices and complete these as soon as possible.
- 8. Encourage active engagement of Member States and partners in the next phase of the Transformation Agenda.

### 1. Introduction

The Transformation Agenda<sup>2</sup> of the World Health Organization Secretariat in the African Region 2015-2020 was launched by the Regional Director for Africa in February 2015. Its objective is to ensure that the WHO Secretariat in the African Region evolves into the primary leader in health development in Africa and is a reliable and effective protector of Africa's health stock.

The Transformation Agenda has four focus areas: pro-results values, smart technical focus, responsive strategic operations and effective communications and partnerships. The managerial, programmatic and governance themes of the ongoing WHO global reform were factored into its development. It is not only a commitment to positive change in the Regional Office but also a programme for accelerating the implementation of WHO global reform within the Region, with each focus area (and expected results) closely aligned with specific outcomes of the WHO global reform programme (Figure 1).



<sup>2</sup> The Transformation Agenda is one of five interrelated and overarching priorities identified by the Regional Director: (i) improving health security; (ii) strengthening national health systems; (iii) sustaining focus on the health-related MDGs/SDGs; (iv) addressing the social determinants of health; and (v) transforming the African Region into a responsive and results-driven Organization.

The Transformation Agenda aims to be bold, ambitious and seeks to engender a regional health organisation that is foresighted, proactive, responsive, results-driven, transparent, accountable, appropriately resourced and equipped to deliver on its mandate. It also seeks to be an organization that meets the needs and expectations of its stakeholders. To realise this ambition, the single most important ingredient for success has been identified as the human resource capacity of the African Region. Strengthening capacities to enhance the effectiveness of the work at the country level is considered pivotal to the success of the Transformation Agenda.

The Transformation Agenda also responds to increased expectations of Member States and regional and global stakeholders for a change in the way WHO does business in the African Region. There is anticipation of accelerated implementation and institutionalization of the WHO reform agenda as well as improvement in the effectiveness and efficiency of actions in line with the Organization's mandate. Stakeholders want to see an appropriately resourced and equipped WHO that is responsive and effective in strengthening national health systems; coordinating disease prevention and control, including outbreak preparedness and response; and launching supranational actions in support of global health security. Whilst it is a vision and a strategy for change aimed at facilitating the emergence of "the WHO that the staff and stakeholders want", its success will depend on the commitment and cooperation of staff, Member States and partners.

### 2. Background to the evaluation

The Transformation Agenda envisages both a mid-term and a final evaluation of its implementation. It also sets forth a list of 101 activities to be carried out in the first two years, of which the first 40 activities were to be completed within the Regional Director's first 100 days in office from February to April 2015 and the remaining 61 activities were to be completed within the first two years ending in January 2017.

The end of the first two-year period in January 2017 provided an opportune time to undertake the mid-term evaluation, which was done as an independent evaluation by the WHO Evaluation Office at the request of the Regional Director. This formative mid-term evaluation of the Transformation Agenda therefore aims to review progress, document achievements and best practices, identify challenges and areas for improvement and provide recommendations on the way forward. It may also serve as a source of baseline material for the final evaluation.

The final evaluation will, at the end of implementation period, seek to provide accurate and reliable answers to the questions that have been identified to evaluate the implementation of the Transformation Agenda: (a)Have we become more results-focused or not? Do we have a better delivery culture? (b)Have our behaviours changed? (c)Have our processes become more efficient and faster? Have our relationships with partners improved? (d)Have we become an appropriately resourced and equipped regional health organization that is foresighted, proactive, responsive, results-driven, transparent and accountable?; (e)Have we become an organization that is a clear leader in health in the Region and that meets the needs and expectations of its stakeholders?

### 3. Methodology

The evaluation was carried out as a mid-term or formative evaluation by a team of staff from the Evaluation Office and a senior external consultant. The evaluation objectives were to review the progress in the implementation of the Transformation Agenda, to document achievements and best practices, to identify challenges and areas for improvement and to provide recommendations on the way forward. To this end, the evaluation was conducted as a mixed-method approach using a combination of document review, key informant interviews, site visits and an all-staff online survey.

The document review was mainly based on relevant WHO documents related to the transformation agenda and included reports to the Regional Committees, other related progress reports and self-assessments.

The key informant interviews were mainly conducted face-to-face during on-site visits across the different levels of the Region (at the Regional Office in Brazzaville and with the ISTs and WHO country offices in Brazzaville, Harare, Libreville and Ouagadougou). During on-site visits and follow-up video or teleconferences, individual or group interviews were held with senior staff, professional staff, general service staff and the staff associations. During on-site visits, the evaluation team also met with senior officials of the Ministry of Health in Burkina Faso, Congo, Gabon and Zimbabwe. Additionally, telephone interviews were conducted with representatives from three key external stakeholder groups (members of the Regional Programme Sub-Committee, members of the Regional Independent Advisory Group, and international partners and donors).

The online survey was addressed to all staff across the Region. The questionnaire, in English, French and Portuguese, was online from 22 February to 22 March (4 weeks) with one reminder being sent. In total, 449 staff members participated, a return rate of approximately 17%. Of the 358 staff who provided optional personal information: 64% were from country offices, 18% from ISTs and 17% from the Regional Office in Brazzaville. This group could be further broken down as: 38% international professionals, 32% National Professional Officers (NPOs) and 29% general service staff.

The timeframe of the evaluation was from mid-January to end April 2017. While preparatory work was done in January, the main data collection followed in February and March. The data analysis and drafting of the report was done in late March and April.

A detailed description of the methodology, the questionnaire and the online survey results are presented in the Annexes.

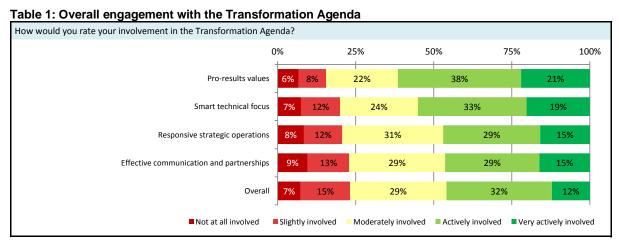
### 4. Findings

The mid-term evaluation finds that the Transformation Agenda is relevant and timely. It is a clear strategy for organizational change guided by the Regional Director's vision. This vision and the need to become a better Organization is well received and accepted by staff in general. It is recognised both internally within the Secretariat and externally by partners that the Transformation Agenda also addresses the reputational difficulties of the Organization in the aftermath of the Ebola crisis. Furthermore, the Transformation Agenda, through its alignment with the WHO global reform, also provides a renewed focus for reform in the African Region. The evaluation confirms the relevance of the Transformation Agenda's four focus areas and the related expected results. The evaluation notes reasonable progress

towards achieving the aim of the Transformation Agenda to render the Regional Office more effective, timely and efficient in providing the best possible support to Member States. However, any reform will require not only a change in processes but also of behaviours and this takes time. The evaluation notes completion of, and progress in, many activities that were planned and there is also an emerging change in behaviours and mindset. However, there have also been delays in achieving a number of planned activities which has slowed progress, and weaknesses in communication and change-management support have led to lack of sustained understanding of, and engagement with, the Transformation Agenda among staff across the Region.

The Regional Director took office on 1 February 2015 at a time when the African Region was hit by its largest and most complex EVD outbreak in West Africa, and was also dealing with other severe outbreaks, including a meningitis outbreak in Niger and a cholera outbreak in Tanzania. During the first 100 days, efforts were therefore concentrated on the control of the EVD virus and improving health security in the Region. The Regional Director visited the three severely affected EVD epidemic countries and engaged with strategic partners to advocate for support to the three countries. An inter-cluster task force on public health security and emergencies was established and a regional strategic plan for EVD response and recovery was developed. The end of the last flare-up of EVD in Liberia was declared on 9 June 2016.

During the first two years of implementation of the Transformation Agenda, key achievements include: contribution to the control of EVD; maintaining the momentum towards polio eradication in the Region; support provided to the African Union for the establishment of the African Centre for Disease Control and Prevention; the launching of the Accountability and Internal Control Strengthening Project; the establishment of the Compliance and Risk Management Committee; the introduction of managerial and administrative KPIs; and the creation of a full-time ombudsman position in the Regional Office. Progress has also been made in the human resources component of the Transformation Agenda with the restructuring in the Regional Office completed for four of the six clusters and the introduction of a mandatory induction programme for newly-recruited staff and an internship programme. The Regional Director has also made critical senior-level appointments in the Regional Office and in country offices and more transparent recruitment and selection processes.

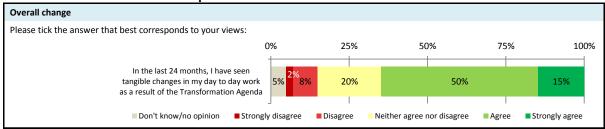


Through the online survey, the evaluation also sought to have a better sense of both overall engagement of staff with the Transformation Agenda and the overall evolution of work practices over the past two years. Table 1 shows that about 44% of respondents to the online survey were either actively or very actively involved in the Transformation Agenda, with a further 29% rating their involvement as moderate. Among the four focus-areas, pro-

results values was the focus area in which most respondents rated themselves as being most involved.

The most frequent responses to an open-ended question seeking examples of staff contributions to the Transformation Agenda include: providing comments on drafts of documents and reports; submitting proposals on issues to be considered in implementation of the Transformation Agenda; coordinating discussions around the Transformation Agenda; promoting the tenets of the Transformation Agenda in internal and external communications; and acting as Transformation Agenda champion for the country office.

Table 2: Overall evolution of work practices



When asked whether they had experienced tangible changes in their day to day work as a result of the Transformation Agenda, 65% of respondents replied positively either agreeing or strongly agreeing (Table 2).

The online survey results are further supported by the findings of the on-site visits. Overall awareness of the Transformation Agenda had clearly been boosted by the launch of the midterm evaluation, and the visits of the evaluation team, but throughout group and individual interviews, staff consistently listed the key aims of the Transformation Agenda and the Regional Director's reasons for launching it.

Key partners and donors also demonstrated significant awareness of the Transformation Agenda, recognizing the assiduous work of the Regional Director in engaging with partners over the past two years, although knowledge of the Transformation Agenda was less evident in discussions with the ministries of health visited by the evaluation team.

#### 4.1 Pro-results values

The purpose of this focus area is to foster the emergence of an organizational culture that is defined by the values of excellence, team work, accountability, integrity, equity, innovation and openness. It is aligned with the WHO managerial reform area through the "accountability and transparency" and "strengthened culture of evaluation" outcomes.

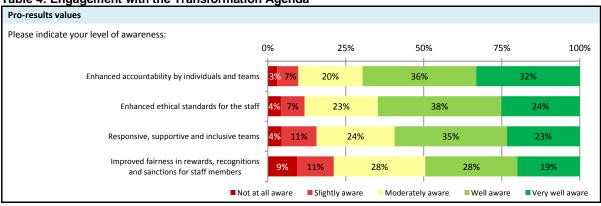
The expected results for this focus area are: enhanced accountability by individuals and teams; improved fairness in rewards, recognition and sanctions for staff members; responsive, supportive and inclusive teams; and enhanced ethical standards for the staff.

Table 3: Status of implementation of strategic actions<sup>3</sup>

Pro-results Value	es				
Expected Result	Timeline	Activity Title	Status		
	Enhanced countability individuals d teams  Improved rness  Responsive, proportive and clusive teams  Enhanced nical modards for	1.0.01. Prepare and share a list of WHO and UN policy documents	100%	Completed	
) Enhanced ccountability y individuals nd teams ) Improved airness ) Responsive, upportive and nclusive teams Enthalpy (Enhanced thical		1.0.02. Develop an attestation form to document staff compliance with mandatory personal study	38%	Ongoing	
a) Enhanced	First 100 days	1.0.03. Conduct and report on periodic budget centre reviews on the promotion of transparency	100%	Completed	
by individuals and teams		1.0.05. Convene a special regional programme meeting (RPM) to engender buy-in, ownership and joint implementation	100%	Completed	
		1.0.15. Identify change agents in each budget centre and train them	8%	Delayed	
b) Improved fairness		1.0.04. Conduct and report on the promotion of transparency, accountability and ethical behaviour	100%	Completed	
		1.0.06. Identify a consultancy firm to design and implement a training program	30%	Ongoing	
		1.0.07. Develop and implement staff well-being and welfare programmes at allevels	40%	Ongoing	
supportive and		1.0.08. Encourage professional relationships between respective programme units	63%	Partially completed	
inclusive teams	End of Ion 2017	1.0.09. Revamp the staff development learning (SDL) programme in the Region	83%	Nearing completion	
d) Enhanced	e, nd ms End of Jan. 2017	1.0.10. Encourage leaders and managers to take personal initiatives	19%	Delayed	
ethical		1.0.11. Establish and fill the position of a full-time Ombudsperson	100%	Completed	
the staff		1.0.12. Adapt the WHO/HQ staff orientation services for the African Region	55%	Partially completed	
		1.0.13. Implement the global performance management and accountability framework	81%	Nearing completion	
		1.0.14. Conduct regular (anonymous) staff surveys on values, team building, fairness and accountability	83%	Nearing completion	
		0-25% = Delayed; 26-50% = Ongoing; 51-75% = Partially completed; 76-99% = Nearing com	pletion;	100% = Completed	

The status of implementation of strategic actions related to this focus area is presented in Table 3 above. A number of activities have been completed including: periodic budget centre reviews on the promotion of transparency, accountability and ethical behaviour; a list of WHO and UN policy documents that promote transparency, accountability and ethical behaviour; and establishing and filling the full-time position of ombudsman. Finally, a staff welfare officer position was established and efforts are under way to develop and implement staff well-being and welfare programmes at all levels. Other activities are at different stages of completion and two activities have been delayed.





The online survey also sought to gauge the awareness among staff of the 4 expected results linked to this focus area and the findings show that the highest level of awareness among staff relates to enhanced accountability by individuals and teams with 68% being well aware or very well aware of this expected result (Table 4). The low scores for awareness about 'improved fairness in rewards, recognitions and sanctions for staff members' is significant here.

<sup>3</sup> Based on self-assessment and supported by document review.

\_

**Table 5: Evolution of work practices** 

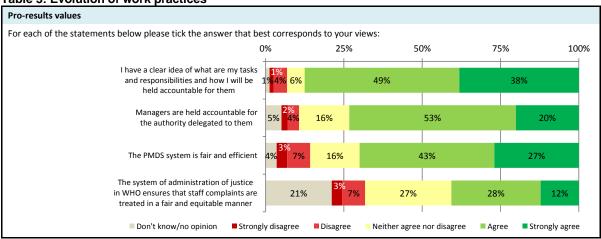


Table 5 shows encouraging results with regard to the evolution of work practices, with 87% of respondents affirming that they have a clear idea of their tasks and responsibilities and how they will be held accountable for them and 73% of respondents agreeing that managers are held accountable for the authority delegated to them. There is also positive feedback with regard to the Performance Management and Development System (PMDS) system with 70% of respondents considering that the system is fair and efficient. However, only 40% of respondents agreed that the system of administration of justice in WHO ensures that staff complaints are treated in a fair and equitable manner. This system has been brought into sharper focus during the prolonged and often painful restructuring, and is clearly an area for further work in the next phase of the Transformation Agenda.

In response to the open-ended survey question asking respondents to cite the greatest achievement of their cluster, IST or country office to the pro-results values focus area, respondents cited: an increased focus on results; enhanced team work; a culture of accountability; and the linkage of the KPIs to the PMDS.

The online survey results are further supported by the findings of the on-site visits. In particular, in numerous group and individual interviews, staff noted that a stronger culture of accountability is emerging and there is a change in the way staff are working together. The PMDS system was recognized as a very useful tool to help increase awareness of staff of how they can contribute to the work of the Organization and what is expected of them. The creation of the ombudsman position at the Regional Office is a major step in strengthening the internal justice system and is welcomed by staff. There was a strong feeling that management training was much needed, particularly in ISTs now that the coordinator position has been abolished, and there was a general feeling in the country offices, particularly among the General Service staff, that not enough training was being offered in general, e.g. language training and GSM, and that career opportunities for General Service staff were limited.

Partners interviewed recognized and welcomed the organizational culture change that is emerging.

Key achievements in this area are the establishment and filling of the full time ombudsman position and the stronger culture of accountability that is emerging.

Going forward, there is a need to review and complete the outstanding planned activities in the Transformation Agenda, and to continue efforts to engage staff in the activities in this focus area, including, where appropriate, increasing knowledge and awareness of staff through briefings or training possibilities.

#### 4.2 Smart technical focus

The technical areas of WHO's work in the African Region will be prioritized in line with regional priorities and commitments, and interventions will be based on evidence and lessons learned from experience. This focus area will contribute to WHO's managerial reform through the outcome on "effective technical and policy support for all Member States", and the programmatic reform theme through the outcome on "WHO's priorities defined, addressed and financed in alignment with agreed priorities."

The expected results for this focus area are: EVD epidemic controlled; strengthened regional capacity for health security, including effective preparedness and timely response to disease outbreaks and emergencies, and polio eradication; accelerated progress on Millennium Development Goals (MDGs) and implementation of sustainable development goals (SDGs); functional cross-cutting systems approach within the WHO African Region facilitating progress towards universal health coverage (UHC); and enhanced knowledge management .

Table 6: Status of implementation of strategic actions<sup>4</sup>

Smart Technical	Focus			
Expected Result				
		2.1.1. Undertake high-level missions to the three severely affected EVD epidemic countries	100%	Completed
a) EVD epidemic controlled  a) EVD epidemic controlled  Ei  b) Strengthened regional capacity for health security  c) Accelerated progress on Millennium Development Goals d) Functional cross-cutting systems approach towards universal health coverage (UHC) e) Enhanced knowledge management  Ei		2.1.2. Set up an inter-cluster taskforce on EVD	100%	Completed
	First 100 days	2.1.3. Develop a regional strategic plan for EVD response and recovery	100%	Completed
controlled		2.1.4. Develop a medium- to long-term human and financial resource plan	100%	Completed
	Percent   Perc	100%	Completed	
		100%	Completed	
		2.2.01. Restructure the Regional Office to effectively address outbreaks and emergencies	100%	Completed
	First 100 days	2.2.02. Prioritize the unfinished agenda of polio eradication	100%	Completed
a) EVD epidemic controlled  Err  b) Strengthened regional capacity for health security  Err  c) Accelerated progress on Millennium Development Goals  d) Functional cross-cutting systems approach towards universal health coverage (UHC)  e) Enhanced knowledge	First 100 days	2.2.03. Update and maintain a roster of WHO staff in the Region	83%	Nearing completio
		2.2.04. Approaches for persuading countries to meet financial commitment to African Public Health Emergency Fund	66%	Partially completed
		2.2.05. Organize a high-level meeting on the development of IHR core capacities	100%	Completed
		2.2.06. Support the initiative to establish a fully functional African Centre for Disease Control and Prevention	100%	Completed
		2.2.07. Conduct an external programmatic assessment of the African Region's epidemic/emergency response capacities	75%	Partially complete
	F-4-f1 2017	2.2.08. Undertake high-level advocacy (by the Regional Director) for polio eradication	100%	Completed
	End of Jan. 2017	2.2.09. Mobilize resources and strengthen capacity to emergencies in the Region	63%	Partially complete
		2.2.10. Establish a multi-disciplinary African Health Corps to serve as a continental rapid response platform	69%	Partially complete
		2.2.11. Define mechanisms for effective coordination between the three levels of WHO	100%	Completed
		2.2.12. Conduct regular refresher training courses on emergency and outbreak management	63%	Partially complete
-> 4   +	First 100 days	2.3.1. Engage with AU to support accelerated implementation of the MDGs	100%	Completed
•		2.3.2. Engage with AU in the implementation of the SDGs and the AU's Agenda 2063	68%	Partially complete
a) EVD epidemic controlled  b) Strengthened regional capacity for health security  c) Accelerated progress on Millennium Development Goals d) Functional cross-cutting systems approach towards universal health coverage (UHC) e) Enhanced knowledge management	End of Ion 2017	2.3.3. Facilitate the adoption of a resolution on SDGs by the WHO Regional Committee	78%	Nearing completio
	Eliu ol Jali. 2017	2.3.6. Allocate a portion of resources from each of the technical programme	25%	Delayed
Couis		2.3.7. Support countries to document progress made on the MDGs and support the domestication of SDGs	70%	Partially complete
	Eirct 100 days	2.1.1. Undertake high-level missions to the three severely affected EVD epidemic countries 2.1.2. Set up an inter-cluster taskforce on EVD 2.1.3. Develop a regional strategic plan for EVD response and recovery 2.1.4. Develop a medium-to long-term human and financial resource plan 2.1.5. Recruit short-term staff at P2 or P3 levels to enhance the capacity of the health systems strengthening of Jan. 2017 2.1.6. Document and disseminate experiences of WHO in the African Region in responding to the EVD epidemic 2.2.0.1. Restructure the Regional Office to effectively address outbreaks and emergencies 2.2.0.2. Prioritize the unfinished agenda of polio eradication 2.2.0.3. Update and maintain a roster of WHO staff in the Region 2.2.0.4. Approaches for persuading countries to meet financial commitment to African Public Health Emergency Fund 2.2.0.5. Organize a high-level meeting on the development of IHR core capacities 2.2.0.6. Support the initiative to establish a fully functional African Centre for Disease Control and Prevention 2.2.0.7. Conduct an external programmatic assessment of the African Region's epidemic/emergency response capacit 2.2.0.9. Mobilize resources and strengthen capacity to emergencies in the Region 2.2.1.1. Define mechanisms for effective coordination between the three levels of WHO 2.2.1.2. Conduct regular refresher training courses on emergency and outbreak management 2.3.1. Engage with AU to support accelerated implementation of the MDGs 2.3.2. Engage with AU to support accelerated implementation of the MDGs 2.3.3. Facilitate the adoption of a resolution on SDGs by the WHO Regional Committee 2.3.6. Allocate a portion of resources from each of the technical programme 2.3.7. Support countries to document progress made on the MDGs and support the domestication of SDGs 2.4.1. Establish a cross-cluster technical team on the development of a UHC strategy 2.4.2. Enhance regional human resource capacity by developing a robust system for supporting young professionals 2.4.5. Develop/implement strategic	55%	Partially complete
	2.1.1. Undertake high-level missions to the three severely affected EVD epidemic countries 2.1.2. Set up an inter-cluster taskforce on EVD 2.1.3. Develop a medium-to long-term human and financial resource plan 2.1.5. Recruit short-term staff at P2 or P3 levels to enhance the capacity of the health systems strengthening End of Jan. 2017 2.1.6. Document and disseminate experiences of WHO in the African Region in responding to the EVD epidemic 2.2.0.1. Restructure the Regional Office to effectively address outbreaks and emergencies 2.2.0.2. Prioritize the unfinished agenda of polio eradication 2.2.0.3. Update and maintain a roster of WHO staff in the Region 2.2.0.4. Approaches for persuading countries to meet financial commitment to African Public Health Emergency Fund 2.2.0.5. Organize a high-level meeting on the development of IHR core capacities 2.2.0.6. Support the initiative to establish a fully functional African Centre for Disease Control and Prevention 2.2.0.9. Mobilize resources and strengthen capacity to emergencies in the Region 2.2.0.9. Mobilize resources and strengthen capacity to emergencies in the Region 2.2.1.1. Define mechanisms for effective coordination between the three levels of WHO 2.2.1.2. Conduct regular refresher training courses on emergency and outbreak management 2.3.1. Engage with AU to support accelerated implementation of the MDGs 2.3.2. Engage with AU in the implementation of the SDGs and the AU's Agenda 2063 2.3.3. Facilitate the adoption of a resolution on SDGs by the WHO Regional Committee 2.3.3. Support countries to document progress made on the MDGs and support the domestication of SDGs 2.4.1. Establish a cross-cluster technical team on the development of a UHC strategy 2.4.2. Enhance regional human resource capacity by developing a robust system for supporting young professionals 2.4.3. Conduct a joint internal and external functional review of the WHO Secretaria 2.5.1. Establish a comprehensive KM programme 2.5.2. Develop miniplement a regional KM strategy 2.5.3. Hold cluster	100%	Completed	
approach		2.4.3. Conduct a joint internal and external functional review of the WHO Secretaria	55%	Partially complete
	End of Jan. 2017	2.4.4. Recruit an external consultancy firm to develop and implement a capacitybuilding plan	30%	Ongoing
2.1.5. Recruit short-term staff at P2 or P3 levels to enhance the capacity of the health systems strengthening  End of Jan. 2017 2.1.6. Document and disseminate experiences of WHO in the African Region in responding to the EVD epidemic  2.2.01. Restructure the Regional Office to effectively address outbreaks and emergencies  2.2.02. Prioritize the unfinished agenda of polio eradication  2.2.03. Update and maintain a roster of WHO staff in the Region  2.2.04. Approaches for persuading countries to meet financial commitment to African Public Health Emergency Fund  2.2.05. Organize a high-level meeting on the development of IHR core capacities  2.2.06. Support the initiative to establish a fully functional African Centre for Disease Control and Prevention  2.2.07. Conduct an external programmatic assessment of the African Region's epidemic/emergency response capacities  2.2.08. Undertake high-level advocacy (by the Regional Director) for polio eradication  2.2.09. Mobilize resources and strengthen capacity to emergencies in the Region  2.2.11. Define mechanisms for effective coordination between the three levels of WHO  2.2.12. Conduct regular refresher training courses on emergency and outbreak management  Accelerated ogress on  illiennium  evelopment pals  First 100 days  First 100 days  Accelerated ogress on  illiennium  End of Jan. 2017  E	50%	Ongoing		
e) Enhanced		2.5.1. Establish a comprehensive KM programme	40%	Ongoing
•	End of Ian 2017	2.5.2. Develop and implement a regional KM strategy	5%	Delayed
e) Enhanced knowledge management	Eliu Ol Jali. 2017	2.5.3. Hold cluster directors accountable for contribution of documents to Organization's intranet/internet platforms	100%	Completed
(KIVI)		2.5.4. Hold regular cross-cluster briefing meetings on ongoing innovative/strategic activities	70%	Partially complete
		0-25% = Delayed; 26-50% = Ongoing; 51-75% = Partially completed; 76-99% = Nearing com	oletion;	100% = Complete

The status of implementation of strategic actions related to this focus area is presented in Table 6 above. A number of activities have been completed e.g. the EVD epidemic was

\_

<sup>&</sup>lt;sup>4</sup> Based on self-assessment and supported by document review.

controlled and a recovery and rebuilding strategy is under implementation. Other successful efforts to strengthen regional capacity for health security include: the restructuring of the Regional Office to effectively address outbreaks and emergencies, the prioritization of polio eradication in the Region and high-level advocacy undertaken by the Regional Director in this regard; the definition of mechanisms for effective coordination between the three levels of the Organization in the context of the emergency reform; and the engagement with the African Union to support the establishment of an African Centre for Disease Control and Prevention and to support accelerated implementation of the MDGs. The regional human resource capacity has been enhanced to attract young professionals with the creation of an internship programme in the Regional Office and encourage the recruitment of Junior Professional Officers (JPOs). Other activities that were planned are at different stages of completion with two activities delayed.

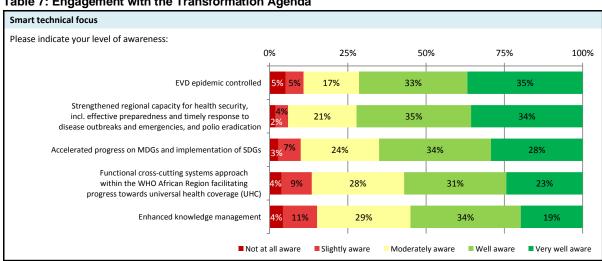


Table 7: Engagement with the Transformation Agenda

The high level of awareness of the control of the EVD epidemic (68%) and the strengthened regional capacity for health security (69%) is confirmed by the online survey results (Table 7). The survey results show lower awareness of the expected results relating to knowledge management and a functional cross-cutting systems approach within the Region to facilitate progress towards UHC.

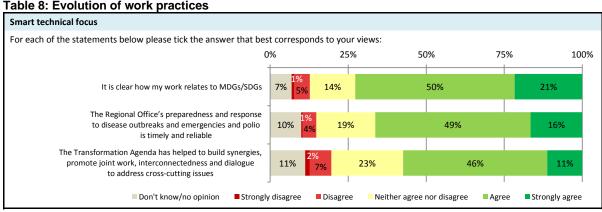


Table 8: Evolution of work practices

With regard to the evolution of work practices, 71% of respondents claimed that it is clear how their work relates to MDGs/SDGs, whereas a lower number of respondents (57%) felt that the Transformation Agenda has helped build synergies, promote joint work, interconnectedness and dialogue to address cross-cutting issues (Table 8). In the latter regard, this may be addressed through the implementation of the planned regional flagship

programmes (e.g. on adolescent health) and the African Health Transformation Programme for UHC.

In response to the open-ended survey question asking respondents to cite the greatest achievement of their cluster, IST or country office to the smart technical focus area, respondents referred to: the strengthened capacity of national and field staff for effective preparedness and timely response to outbreaks, emergencies and polio eradication; and incorporating the unfinished agenda of the MDG and the SDGs into the new Country Cooperation Strategy.

Findings from the on-site visits revealed overwhelming agreement that the Organization needed to improve its way of working in the aftermath of the Ebola outbreak. There was a general feeling that the Regional Office has made good progress in strengthening regional capacity for health security. There is a sense that the reform efforts being made by the Regional Office are appreciated by donors and other partners who are more willing to engage with the Region. A major SDG forum was organized in December 2016 and an SDG standing committee has been created under the leadership of the Director of Programme Management in the Regional Office. The need to reduce silos was acknowledged and it was felt that the recent restructuring efforts were addressing this issue. Many highlighted the urgency to accelerate the completion of the restructuring exercise. Some clusters are reporting enhanced inter-cluster collaboration and the positive effects of bringing related programmes together in the same cluster (e.g. IVD and CAN in FRH cluster) are being felt. Furthermore, the first flagship programme on adolescent health has been established and should facilitate further cross-cluster activities.

In the interviews with external stakeholders, polio was cited as a good example of quicker responses and more efficient planning, possibly an outcome of the higher priority being given to it as a programme in the Regional Director's office. It was also noted that processes for trainings and workshops are more streamlined and reporting has improved. The support of the Regional Office for the establishment of the African Centre for Disease Control and Prevention was acknowledged as important. The Regional Office is encouraged to continue with this good work but also to improve its support to countries, including through the provision of more leadership for health matters at country level in support of the national authorities. Furthermore, more attention needs to be paid to ensuring a holistic approach between disease programmes, health promotion and determinants, strengthening health systems and efforts being made to support UHC.

Two particular achievements in this focus area are the contribution towards the control of the Ebola Virus Disease, with the end of the last flare up of EVD in Liberia declared on 9 June 2016, and the prioritization of the "unfinished agenda" of polio. The "unfinished agenda" means maintaining the gains until the certification of polio eradication in the African Region, including the transition period during which the polio legacy could be transferred efficiently to other priority health programmes. The Polio Eradication Programme was moved to the Office of the Regional Director in order to focus on the necessary inter-cluster interaction to effect the transition, and also to facilitate the administrative processes for the programme as an emergency programme. In this regard, the Regional Office for Africa is considered as a good example among the WHO regions for transition planning. The regional polio transition working group is working efficiently with active support from the General Management Cluster and other technical clusters such as FHR, WHE and HSS.

However, the area of knowledge management remains a challenge. While many tools, such as research, library/publications and data/web management, are fully functional and knowledge management is reflected in the cluster structure and organigram, progress in the establishment of a comprehensive knowledge management programme and regional strategy has been delayed.

### 4.3 Responsive strategic operations

The goal of this focus area is to evolve into an Organization with enabling functions that efficiently support the delivery of programmes. This area is aligned with WHO's managerial reform through the following outcomes: staffing matched to needs at all levels of the Organization; financing and resource allocation aligned with priorities; and managerial accountability, transparency and risk management assured.

The expected results for this focus area are: human, financial and material resources aligned with the identified priorities; strengthened WHO human resource capacity; enhanced transparency in recruitment, placement and performance management; improved efficiency and accountability in the areas of finance, procurement and general management; and improved leveraging and use of available technologies and tools, especially the GSM and business intelligence dashboards.

Table 9: Status of implementation of strategic actions<sup>5</sup>

Responsive Strat	egic Operations			
Expected Result	Timeline	Activity Title		Status
a) Resources	First 100 days	3.1.1. Monitor the lifespan of assets and dispose of them once obsolete or fully depreciated	89%	Nearing completion
-	End of Ian 2017	3.1.2. Conduct an external operational HR assessment of the 47 WHO Country Offices	25%	Delayed
Resources ligned with priorities   First 100 days   3.1.1. Monitor the lifespan of assets and dispose of them once obsolete or fully depreciated	0%	Delayed		
	First 100 days	3.2.1. Develop a mandatory induction programme for newly-recruited staff members	100%	Completed
h) Strengthened		3.2.2. Improve staff recruitment outreach	31%	Ongoing
priorities  E b) Strengthened WHO human resource capacity  Fi c) Enhanced transparency in recruitment, placement and performance management  d) Improved efficiency and accountability		3.2.3. Develop SOP for the establishment of recruitment committees	75%	Partially completed
	End of Jan. 2017	3.2.4. Implement a policy on mobility and rotation for different categories of staff	63%	Partially completed
		3.2.5. Enhance transparency in rewarding good performance	100%	Completed
		3.2.6. Set up a recruitment committee at country office level	25%	Delayed
	First 100 days	3.3.1. Brief selection committee(s), directors and WRs on the WHO's recruitment policy and human resource reforms	38%	Ongoing
a) Resources aligned with priorities  Er  b) Strengthened WHO human resource capacity  Fi  c) Enhanced transparency in recruitment, placement and performance management  d) Improved efficiency and accountability  Er  e) Improved leveraging and use of available technologies	FIRST 100 days	3.3.2. Enhance transparency in the staff recruitment process by involving the budget centres in the process	85%	Nearing completion
	End of Ion 2017	3.3.3. Develop an induction programme for newly-recruited staff	85%	Nearing completion
		3.3.4. Implement recommendations on transforming the compliance and quality assurance functions	100%	Completed
		3.3.5. Improve the conflict of interest management system	58%	Partially completed
	Eliu ol Jali. 2017	3.3.6. Conduct an external feasibility on possible devolution of some regional operational support functions	65%	Partially completed
		3.3.7. Promote a transparent and competitive bidding process for services	100%	Completed
	First 100 days  As Develop a mandatory induction programme for newly-recruited staff members  3.2.2. Improve staff recruitment outreach  3.2.5. Enhance transparency in rewarding good performance  3.2.6. Set up a recruitment committee at country office level  3.3.1. Brief selection committee(s), directors and WRs on the WHO's recruitment policy and human resource reforms  3.3.2. Enhance transparency in the staff recruitment process by involving the budget centres in the process  3.3.3. Develop an induction programme for newly-recruited staff  3.3.3. Implement a policy on mobility and rotation for different categories of staff  3.3.1. Brief selection committee(s), directors and WRs on the WHO's recruitment policy and human resource reforms  3.3.2. Enhance transparency in the staff recruitment process by involving the budget centres in the process  3.3.3. Develop an induction programme for newly-recruited staff  3.3.4. Implement recommendations on transforming the compliance and quality assurance functions  3.3.7. Promote a transparent and competitive bidding process for services  3.3.8. Conduct a review of key business processes and performance  3.4.1. Review delegation of authority (DOA) in the Regional  2.3.4. Enhance the Regional Office's human resource capacity to deliver health promotion  3.2.7. Enhance budget centres' performance monitoring (KPI)  3.5.1. Conduct an internal audit of the use of the GSM platform in the African Region  3.5.2. Implement appropriate policies and guidelines on maximization of the GSM platform  3.5.3. Conduct an internal evaluation of the management and use of available electronic data management platforms	31%	Ongoing	
Pirst 100 days   Sample of the process of the pro	100%	Completed		
	First 100 days	3.4.2. Conduct a review of compliance and quality assurance functions in the Regional Office	100%	Completed
First 100 days 3.1.1. Monitor the lifespan of assets and dispose of them once obsolete or fully depreciated 3.1.2. Conduct an external operational HR assessment of the 47 WHO Country Offices 3.1.3. Conduct 360 degrees assessments of managers and team leaders 3.2.2. In Develop a mandatory induction programme for newly-recruited staff members 3.2.3. Develop SOP for the establishment of recruitment committees 3.2.4. Implement a policy on mobility and rotation for different categories of staff 3.2.4. Implement a policy on mobility and rotation for different categories of staff 3.2.5. Enhance transparency in reverding good performance 3.2.6. Set up a recruitment committee at country office level 3.3.1. Brief selection committee(s), directors and WRs on the WHO's recruitment policy and human resource reform 3.3.4. Implement are committee(s), directors and WRs on the WHO's recruitment policy and human resource reform 3.3.4. Implement recommendations on transforming the compliance and quality assurance functions 3.3.7. Promote a transparent and performance 3.3.8. Conduct an external feasibility on possible devolution of some regional operational support functions 3.3.7. Promote a transparent and competitive bidding process for services 3.3.8. Conduct a review of key business processes and performance 3.4.1. Review delegation of authority (DOA) in the Region defficiency and accountability and possible devolution of some regional operational support functions 3.4.1. Review delegation of authority (DOA) in the Region defice the process of the service of compliance and quality assurance functions in the Regional Office 3.4.3. Use the most recent audits to establish a baseline for monitoring progress in management (enabling function 3.2.7. Enhance budget centres' performance monitoring (KPI) 3.5.1. Conduct an internal audit of the use of the GSM platform in the African Region 4.5.2. Implement appropriate policies and guidelines on maximization of the GSM platform 3.5.3. Conduct an internal audit of the use of the GSM platfo	100%	Completed		
		2.3.4. Enhance the Regional Office's human resource capacity to deliver health promotion	63%	Partially completed
	End of Jan. 2017	2.3.5. Conduct an external review of the implementation of health promotion	54%	Partially completed
		3.2.7. Enhance budget centres' performance monitoring (KPI)	100%	Completed
e) Improved		3.5.1. Conduct an internal audit of the use of the GSM platform in the African Region	73%	Partially completed
0 0	First 100 days	3.5.2. Implement appropriate policies and guidelines on maximization of the GSM platform	90%	Nearing completion
	First 100 days	3.5.3. Conduct an internal evaluation of the management and use of available electronic data management platforms	25%	Delayed
		3.5.4. Organize formal training, retraining and reorientation of existing staff on new technologies	100%	Completed
			pletion;	100% = Completed

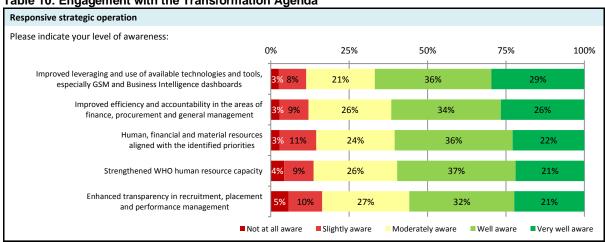
The status of implementation of strategic actions related to this focus area is presented in Table 9 above. A number of activities have been completed: accountability and efficiency have been enhanced with the review of delegation of authority in the Region, the strengthening and streamlining of the regional compliance functions and the development of KPIs for performance monitoring. Formal training programmes have also been developed on the use of new technologies. There is progress in the human resources component of the Transformation Agenda with the restructuring process completed in 4 of the 6 clusters in the Regional Office. With regard to the transparency of recruitment and selection process,

-

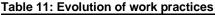
<sup>&</sup>lt;sup>5</sup> Based on self-assessment and supported by document review.

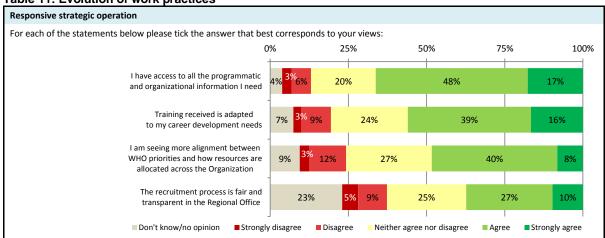
standard, harmonized recruitment processes were used, in alignment with the processes used for professional positions throughout WHO and a transparent and competitive bidding process for procurement of services is in place. In an effort to ensure staff are well equipped for working in the Organization and performance is appropriately recognised, a mandatory induction programme for newly-recruited staff members has been established, a learning and development needs assessment was conducted and transparency in rewarding good performance has been enhanced. However, a number of planned activities in this focus area are at various stages of completion with four activities delayed.

Table 10: Engagement with the Transformation Agenda



The online survey also sought to gauge awareness among staff of the 5 expected results linked to this focus area and the findings show that between 53% and 65% of respondents are well or very well aware of the expected results of this focus area with the greater percentage of respondents aware of available technologies and tools, especially GSM and business intelligence dashboards (Table 10).





With regard to the evolution of work practices in this focus area (Table 11), it appears that, despite the progress made in the human resources component of the Transformation Agenda, only 37% of respondents agreed that the recruitment process is fair and transparent in the regional office. This is clearly an area for further work in the next phase of the Transformation Agenda. Training is another area for future activity. By contrast, 65% of respondents agreed that they have access to all the programmatic and organizational information that they need to carry out their work.

In response to the open-ended survey question asking respondents to cite the greatest achievement of their cluster, IST or country office to the responsive strategic operations focus area, respondents mentioned: enhanced transparency in recruitment, placement and performance management; improved efficiency and accountability in the areas of finance, procurement and general management; regular evaluation of the KPIs; and improved use of available technologies and tools, especially GSM and Business Intelligence dashboards.

On-site visits confirm that the managerial KPIs are seen as a major innovation and are generally well accepted. However, the technical KPIs are still not in use and are much sought after by staff. Improvements in internal controls have been welcomed as facilitating the work of concerned staff (improvements in direct financial cooperation reporting were frequently mentioned as a good example in this regard). In the area of human resources, it was felt that more work was needed in standardization of grades and functions. There is widespread recognition of the need for the right staff in the right places but many concerns were expressed about the future of the ISTs, and particularly how this would affect the General Service staff in the ISTs. With regard to training sessions being offered, it was mentioned that uptake in country offices is low, perhaps because staff do not inform themselves enough of what is on offer or perhaps because training is not always offered in the three official languages of the Region. The Regional Staff Association values the good contacts it has with management but would appreciate direct contact with the Regional Director. However, the fact that the Regional Staff Association now participates in relevant agenda items of the Regional Programme Meeting was welcomed. Country Office staff associations feel that they could play a greater role in informing staff about the Transformation Agenda and assisting and reassuring staff throughout the restructuring process if they were better informed themselves.

External stakeholders note that the Regional Office is now more responsive in general and that staff are motivated. However, they would like to see the functional review being accelerated and the vacant posts being filled more quickly. Recruitment procedures are recognized as being more transparent since the introduction of the Transformation Agenda. Countries look to WHO for solid technical advice and this is sometimes lacking. The Regional Office was also encouraged to consider capacity building for its senior staff, perhaps based on a skills audit. In the current context of declining resources, it is also proposed that the Regional Office should continue to advocate for increased domestic funding for health at country level.

A best practice in this focus area is the deployment of the managerial KPIs (design, roll-out and reporting). The General Management Cluster regularly follows up with budget centres to verify that respective KPIs are understood and regularly monitored by country offices and low performing budget centres are assisted to ensure that corrective actions are taken. The experience gained from the deployment of the managerial KPIs will be indispensable as the technical KPIs are progressively rolled out during 2017.

Another important innovation is the quarterly reporting by clusters and the WHO country offices to the Regional Director. This is promoting an important avenue for accountability and reporting on results and the feedback received to these reports from the Regional Director is very much appreciated.

Going forward, there is a need to complete the outstanding planned activities, also to continue efforts to engage staff in the activities in this focus area. Human resource restructuring has not been consistently linked to appropriate resourcing to cover additional staff costs, and this needs to be addressed.

#### 4.4 Effective communications and partnerships

This focus area seeks to foster a more responsive and interactive organization, internally among staff members and externally with stakeholders. It is aligned with WHO's managerial reform through the following outcomes: strengthened culture of evaluation; and improved strategic communication. It is also aligned with governance reform through the following outcomes: streamlined reporting of and communication with Member States; and strengthened effective engagement with other stakeholders.

The expected results for this focus area are: enhanced internal communication between and across all the three levels of the Organization; reinforced external communication; and strengthened strategic partnerships.

Table 12: Status of implementation of strategic actions<sup>6</sup>

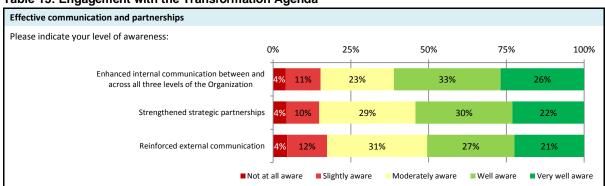
Effective Commi	unications and Pa	rtnerships				
Expected Result	12200, 102					
		4.1.1. Provide regular briefings on the work	100%	Completed		
		4.1.2. Engage a communications consultancy firm to conduct an assessment of communications in the African Region	100%	Completed		
Expected Result  a) Enhanced nternal communication  F  a) Reinforced external communication  E  c) Strengthened characteric partnerships	First 100 days	4.1.3. Create and operate an online ideas/suggestions box to obtain staff feedback	100%	Completed		
	FIRST 100 days	4.1.4. Regularly share the travel information of the Regional Director and cluster directors	100%	Completed		
		4.1.5. Prepare and disseminate quarterly briefings on the outcomes of the Regional Director's missions/meetings	100%	Completed		
		4.1.6. Create a SharePoint for staff networking to stimulate a culture of knowledge and experience sharing	56%	Partially comple		
		4.1.7. Institute regular for a for discussing progress in the implementation of strategic programmes	100%	Completed		
	End of Jan. 2017	4.1.8. Develop and implement a communication strategy and conduct regular reviews of the communications function	75%	Partially comple		
		4.1.9. Strengthen capacities for documentation of WHO work at all levels	51%	Partially comple		
a) Enhanced internal communication  End of Jar  b) Reinforced external communication  End of Jar  First 100 of Jar  c) Strengthened strategic partnerships	First 100 days	4.2.1. Establish, within the Office of the Regional Director, an External Relations Office	60%	Partially comple		
		4.2.2. Create and manage a blog for the Regional Director	100%	Completed		
		4.2.3. Establish closer working relationships with media houses	100%	Completed		
		4.2.4. Obtain regular WHO slots in key television and radio channels within the Region	100%	Completed		
	End of Jan. 2017	4.2.5. Recruit and assign communication officers to support clusters in communicating on their activities	60%	Partially comple		
		4.2.6. Establish a WHO Regional Office for Africa award to promote health journalism in Africa	100%	Completed		
		4.2.7. Upgrade the communication studio in the Regional Office with live shot capability	20%	Delayed		
		4.2.8. Develop job descriptions, create posts and recruit communication officers for regional communication hubs	60%	Partially comple		
		4.3.02. Update donor reports	79%	Nearing comple		
	First 100 days	4.3.03. Promote and monitor regular and timely submission of high quality technical and financial reports to donors	79%	Nearing comple		
Expected Result  a) Enhanced internal communication  E  b) Reinforced external communication  E  c) Strengthenedstrategic partnerships	First 100 days	4.3.04. Map potential partners for effective engagement in programme implementation and resource mobilization	40%	Ongoing		
		4.3.05. Ensure timely submission of donor/partner reports	79%	Nearing comple		
		4.3.06. Engage with regional economic groups to identify common areas of intervention	63%	Partially comple		
		4.3.07. Implement actions to engage effectively with regional partnerships and negotiate working on health platform	55%	Partially comple		
	End of Jan. 2017	4.3.08. Engage philanthropists in the Region to support health and WHO's work	30%	Ongoing		
		4.3.09. Organize a regular regional health forum	78%	Nearing comple		
		4.3.10. Update donor reports on a regular basis	83%	Nearing comple		
		0-25% = Delayed; 26-50% = Ongoing; 51-75% = Partially completed; 76-99% = Nearing com	pletion;	100% = Comple		

The status of implementation of strategic actions related to this focus area is presented in Table 12 above. Activities in this area that have been completed in order to enhance internal communication include the engagement of a communications consultancy firm to conduct an assessment of communications in the African Region, the regular sharing of information with regard to the Regional Director's travel and the outcome of her missions/meetings, and the institution of regular fora for discussing progress in the implementation of strategic programmes. With regard to the reinforcement of external communication, closer working relations with media houses have been established, with regular WHO slots in key television and radio channels within the Region. Other activities in this area are at different stages of completion with one delayed.

\_

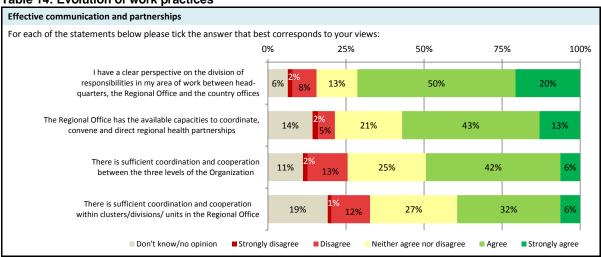
<sup>&</sup>lt;sup>6</sup> Based on self-assessment and supported by document review.

Table 13: Engagement with the Transformation Agenda



The online survey also sought to gauge awareness among staff of the three expected results linked to this focus area and the findings show a lower level of awareness of the expected results of this focus area compared to the other focus areas. While 59% of respondents were well or very well aware that the Transformation Agenda should lead to enhanced internal communication between and across all three levels of the Organization, only 48% were aware that reinforced external communication was also an expected result of this focus area (see Table 13).

Table 14: Evolution of work practices



With respect to the evolution of work practices in this focus area (Table 14), an encouraging 70% of respondents felt that they had a clear perspective on the division of responsibilities in their area of work between the three levels of the Organization, hence internal communication in this regard seems to be functioning well. However only 38% agreed that there was sufficient coordination and cooperation within clusters/divisions/units in the Regional Office. This clearly an area for future focus.

With regard to the open-ended survey question asking respondents to cite the greatest achievement of their cluster, IST or country office to the effective communications and partnerships focus area, respondents cited: improved visibility of the Organization; enhanced internal communication and strengthened strategic partnerships; use of social media platforms to enhance communications; and increase in number of shared reports and publications by the country offices.

In addition, the most common responses to another open-ended online survey question inviting suggestions for improving communication on the Transformation Agenda included

the desire to receive more regular updates in the form of town hall or cluster meetings, intranet pages or more frequent newsletters. Greater involvement of, and communication with, staff at country level and targeted communications to General Service staff were also frequently cited as was the use of champions or change agents to support the process. Finally, the need for more communications in all three official languages of the Region was also mentioned.

The responses to the open-ended survey question are in line with the information gathered from the on-site interviews. While the direct communication from the Regional Director about the Transformation Agenda was initially good, it became less frequent and staff felt they were left to inform themselves about the process on the intranet or through discussions with colleagues. Some supervisors tried to keep their staff abreast of the process but they also felt that they were not sufficiently informed. The town hall meetings were considered very useful, but technological difficulties with video and telecommunications from the Regional Office meant that staff in country offices could not easily follow the proceedings and the intended participatory nature of such meetings was significantly reduced. It was felt that the communication should also have been more targeted as many staff are highly unlikely to voice their opinions in such a big arena. The fact that the Regional Director shares her mission reports was seen in a very positive light. Another acknowledged improvement was the increased diligence of WHO Representatives (WRs) (and cluster leads) in providing timely 3-monthly reports to the Regional Director and the fact that Regional Director provides feedback on these reports (mentioned also under the previous focus area).

Clusters that have been restructured valued the retreats as, inter alia, a means of informing themselves about progress in the Transformation Agenda and the IST cluster leads in the restructured clusters thought that in general there is more sharing of information now. This sense is not always shared by other professional staff in ISTs. In many instances, the lack of clear communication about the different activities of the Transformation Agenda has led to confusion and anxiety among staff. There is a sense among many staff, including in country offices and ISTs, that the Transformation Agenda is just about restructuring and that jobs are at risk. Country office staff also highlighted the need to better inform Ministry of Health counterparts about the changes in operational procedures (although a Handbook for Ministries of Health in the African Region was published in 2016 there was no reference to this during the country visits). There was a strong request from staff for the process to be more participatory and transparent in the future to allow them to be better engaged in, and informed of, the Transformation Agenda and communication should also enable feedback from staff to the Regional Director on the process.

Another positive outcome that was mentioned is the fact that senior Regional Office staff now receive media training and engage more frequently with the press.

With regard to strengthening of strategic partnerships, interviewed staff felt that the reputation of the Regional Office is improving and partners are now more confident in the work of WHO. A number of staff and partners said much of this was directly attributable to the Regional Director's strong efforts in direct engagement over her first two years in office.

Interviews with external stakeholders revealed that representatives of Member States, international partners and donor institutions were aware of the reforms that are taking place in the Regional Office but did not receive adequate documentation or reports in this regard. There was a perception that the Regional Office is becoming more visible in regional activities, for example the Regional Office's involvement with the African Centre for Disease Control and Prevention is acknowledged and needs to continue. The fact that the Regional Director participates in key dialogues and key global forums on health is recognized and welcomed. Major donors have expressed their satisfaction with current leadership in the African Region and new donors are emerging.

The major achievement in this focus area is the recognition by external stakeholders that the Regional Office is making concerted efforts to regain donor confidence.

However, going forward, communications with Member States and partners, and within and between the Regional Office and the country offices, on the Transformation Agenda needs to be more regular and more targeted towards the different audiences. One of the pro-results values activities that also relates to this focus area was to identify change agents in each budget centre and train them, with WRs and cluster directors designated as principal change agents. However, this has not progressed much and needs to accelerated in the next phase.

### 5. Specific issues for consideration

#### Communication

Communication is an integral part of any change process, and this also applies to the Transformation Agenda. It should cover both internal and external audiences. It is about staff being informed in an adequate and timely manner and about them being able to access information without difficulty, and feeling motivated to do so. Furthermore staff need to be able to receive information from credible sources and be able to discuss and raise any points for clarifications. The evaluation found that there were a number of useful avenues to share information on the Transformation Agenda and its progress with staff e.g. the town hall meetings, the intranet and other reports. However, this was more passive in nature and tended to lead to corridor talk which perpetuated misunderstandings of the Transformation Agenda and unnecessary anxiety. The active engagement of staff, either through retreats or cluster/country office/IST meetings, to inform, discuss and engage staff on the Transformation Agenda and any restructuring exercises, facilitates better understanding and participation of staff in taking forward the Transformation Agenda. Cluster directors, WRs and other senior staff, as well as identified "champions" have a key role to play here.

The desire to receive greater and more targeted communication around the Transformation Agenda was a recurrent theme among staff interviewed. Staff repeatedly referred to the Regional Director's early communiqués, but then suggested that more recent communication had been sporadic, and supplied no clear sense of where progress has been made, nor of any intention to learn from what has gone less well. The Town Hall meetings were well received but technology enhancements are needed in the Regional Office communications systems so that this process can be more participatory i.e. to have other sites effectively connected. Also, the need for all communications with regard to the Transformation Agenda to be issued in the three official languages of the Region was frequently mentioned.

The importance of regular communications on progress in the Transformation Agenda with Member States and partners was also highlighted. To date, communication on the progress of the Transformation Agenda to Member States, and other partners has been largely through the regular reports of the Regional Director to the regional committees and updates on the website of the Regional Office. While this appears to have been adequate for the first phase, there will be a need for more proactive communication of progress to these key external stakeholders in the next phase.

A comprehensive, clear and targeted communication strategy needs to take account all of this, to support the communication of the Transformation Agenda both internally and with external stakeholders. It also needs to be aligned to a robust change management strategy for the next phase.

#### **Inter-Country Support Teams**

The purpose of the ISTs is to provide proximity support to groups of countries according to their priority needs. There have been changes in the organizational set-up for the three ISTs. While there is general agreement that the recent change in reporting lines, with the cluster leads and teams in the ISTs reporting directly to the relevant cluster director in the Regional Office, made sense in terms of alignment, there is a feeling that this change has not been accompanied by a simplification of processes. It would appear that the practicalities of this arrangement still need to be sorted out.

Overall, it was felt that this realignment had led to greater exchange of information for all parties concerned. However, at IST level, the change is often perceived as being more cumbersome in administrative terms and there is a concern that the new procedures are preventing the ISTs from being as responsive as they were in the past. IST staff feel less empowered, also because they no longer have any control over budget, and that they have more administrative tasks than before.

Another issue flagged by interviewees is that, in the past, the IST coordinator ensured a better team spirit and there was a sense of a single team, whereas currently, there is more of a sense of disease programme/cluster silos. This is further aggravated by the different speeds of implementation of the cluster restructuring in Brazzaville. Greater use of electronic communications e.g. through electronic memo clearance is seen to help reduce the bureaucracy in this regard. Communications between the IST staff, the host-country WR and the other WRs in the "sub-region" need to be fluid in order for the new arrangement to be successful.

Although the evaluation did not observe any problems between the WR and the IST team in the three locations visited, the arrangements need to be clear and institutionalized to avoid any future difficulties. WRs of countries covered by the ISTs have had to change past practice and now submit requests for technical support at country level to the appropriate cluster directors in Brazzaville. Greater clarity is also required on the respective roles of ISTs and the new hubs that are planned.

#### **Restructuring exercise**

The implementation of the Transformation Agenda focussed on strengthening WHO's human resources, delivering results, and improving accountability and transparency. As a means to achieve this, realigning human resources with programmatic priorities and new organigrams was undertaken within a broader restructuring exercise. The start of the Transformation Agenda coincided with the restructuring of the first cluster leading to a perception that the Transformation Agenda is largely a restructuring process which will result in loss of jobs. Human resource reforms to get staff who were fit for purpose is a major aim of the Transformation Agenda and human resource reform in any instance needs to be carefully managed to avoid the mistrust and anxiety it normally creates. This is an aspect which could have been better handled during the restructuring process, including with better communication and change-management support. Furthermore, restructuring of clusters took place in a staggered approach and over a long period and appears not to have followed a uniform approach for all clusters. While this may have been inevitable due to recruitment of new cluster leads, it has led to unnecessary staff concerns and difficulties.

The staggered approach to restructuring of the clusters, with the GMC and NCD clusters still not restructured, coupled with the lack of clear information about the delays in the process, has accentuated a sense of insecurity. The delay in the restructuring of GMC is especially problematic as this is the largest cluster.

Even when clusters undertook restructuring in a transparent and participatory manner, some interviewees mentioned a lack of confidence in the matching exercise, including grading of staff, which was not always considered to be transparent/fair. This is also reflected in the survey responses.

#### Functional reviews in country offices

The general impression among interviewed staff at country level is that, apart from the changes in the way of working of the ISTs, only some aspects of the Transformation Agenda are seen at the country level. The country office functional review is still outstanding and the lack of information on the timing of this process is also leading to concern among country office staff. As the functional reviews and their implementation are taken forward, there is a strong need for the WRs to be properly equipped for their increased leadership role, and be supported by an appropriately skilled and resourced change management team. The functional reviews need to be completed as soon as possible.

### Programmatic issues/technical KPIs

While the managerial KPIs are well received by staff and seen as a best practice, the technical KPIs are still not in use, though eagerly awaited. It is understood that a progressive roll-out is in progress and that they will be deployed in all 47 countries of the Region by the end of 2017. Timely updates on experiences with this roll-out should be communicated to all staff to enable early buy-in. In light of some suggestions that the set of technical KPIs might be over-elaborate and complex, efforts need to be made to ensure staff feedback is sought, and the set reviewed as necessary.

### Change management/project management

Change management is a critical element of this process. Reform takes time and change is difficult. It requires a change in organizational culture and the process needs to be well managed in order to better manage perceptions and expectations of staff. In this regard, regular and targeted communication coupled with in-person interaction with staff throughout the process is of the utmost importance. The human dimension needs to be at the centre of the Transformation Agenda, with appropriate psychological support provided where necessary during the restructuring.

The overall impression is that the critical changes are taking too long. Much work has been carried out to date on the process but now it is time to move towards results. Leadership and governance need high-level advocacy and the tone from the top is very important. The project management team needs to be strengthened and empowered and directors and WRs, as principal change agents, should play a stronger role in the process. In fact, the excellent proposal in the Transformation Agenda of having transformation champions and change agents needs to be implemented as soon as possible. Furthermore the recently developed Dashboard should be widely promoted as a tool for monitoring progress in implementation of the Transformation Agenda.

#### **Partnerships – Member States/partners**

Many suggestions were received from Member States' representatives and partners interviewed on how the Regional Office could best take forward the Transformation Agenda. On the whole, the need for better communications and closer contacts with Member States and partners was observed, and not just with regard to the Transformation Agenda. As an

example, regional African Development Bank hubs would welcome closer contact with WRs in relevant countries. It was noted that the Regional Office needs to become more engaged in emerging health partnerships and the renewed momentum with the Harmonization for Health in Africa framework is strongly supported by partners.

One suggestion received was for the Regional Office to capitalize on strong donor, partner, Member State support by investing in a purposeful partnership strategy. This would entail a proactive approach whereby the Regional Office demonstrates a plan that shows their vision and identified gaps for the Region that donors and partners can then respond to and support. This could become something Member States, ministries of health and WHO country offices could all rally around. For example a partnership forum for the Region could be one such platform to set the stage for building this kind of partnership.

### 6. Conclusions

The mid-term evaluation finds that the Transformation Agenda is relevant and timely. It is a clear strategy for organizational change guided by the Regional Director's vision. This vision and the need to become a better Organization is well received and accepted by staff in general. It is recognised both internally within the Secretariat and externally by partners that the Transformation Agenda also addresses the reputational difficulties of the Organization in the aftermath of the Ebola crisis. Furthermore, the Transformation Agenda, through its alignment with the WHO global reform, also provides a renewed focus for the reform in the African Region. The evaluation confirms the relevance of the Transformation Agenda's four focus areas and the related expected results.

The evaluation notes reasonable progress towards achieving the aim of the Transformation Agenda to render the Regional Office more effective, timely and efficient in providing the best possible support to Member States. However, any reform will require not only a change in processes but also of behaviours and this takes time. The evaluation notes completion of, and progress in, many activities that were planned and there is also an emerging change in behaviours and mind set. However, there have also been delays in achieving a number of planned activities which has slowed progress, and weaknesses in communication and change-management support have led to lack of understanding of the Transformation Agenda and engagement with it among some staff.

Major efforts to support the control of the outbreak of EVD appear to have had implications for the speed of implementation of the Transformation Agenda during its early phase. Nevertheless, progress was made and key achievements include: contribution to the control of EVD; maintaining the momentum towards polio eradication in the Region; support provided to the African Union for the establishment of the African Centre for Disease Control and Prevention; the launching of the Accountability and Internal Control Strengthening Project; the establishment of the Compliance and Risk Management Committee; the introduction of managerial and administrative key performance indicators (KPIs); and the creation of a full-time ombudsman position in the Regional Office. Progress has also been made in the human resources component of the Transformation Agenda with the restructuring in the Regional Office completed for four of the six clusters and the introduction of a mandatory induction programme for newly-recruited staff and an internship programme. The Regional Director has also made critical senior-level appointments in the Regional Office and in country offices.

Examples of best practices include the deployment of the managerial KPIs (design, roll-out and reporting), the quarterly reporting by clusters and the WHO country offices to the

Regional Director, staff retreats to discuss the Transformation Agenda and organizational changes and other means of informing and engaging staff, such as the town hall meetings.

Going forward, areas for further work internally include: (i) reviewing the activity workplan to ensure outstanding activities are completed or sunsetted and that further activities are planned; (ii) completing the restructuring exercise in a fair, transparent and participatory manner; (iii) completing the functional reviews in country offices; (iv) providing greater clarity and advocacy on the role of the ISTs and their interaction both within the country offices and with the Regional Office; (v) rolling out the technical KPIs; (vi) strengthening change management and project management efforts; (vii) continuing efforts to engage staff in the activities of the Transformation Agenda, including, where appropriate, increasing knowledge and awareness of staff through briefings or training possibilities; and (viii) ensuring funding for the overall budget of the Regional Office, and the activities of the Transformation Agenda in particular.

In addition, further areas on which to concentrate efforts, both internally and externally, include: (i) strengthening communication, as an integral part of the Transformation Agenda, to cover both internal and external audiences with greater focus in the next phase, including better articulation of success stories and results at the country level; (ii) moving from a process focus to a stronger focus on delivery of results and better communication of the work of the Regional Office in this regard; and (iii) broadening the engagement of Member States and partners in the next phase.

Finally, all the above efforts need to be underpinned by a clear governance structure for the Transformation Agenda.

### 7. Recommendations

- 1. The Regional Director and executive management team should revisit the activity workplan of the Transformation Agenda, ensuring outstanding activities are completed or sunsetted, and plan activities for the next phase.
  - consider a second stage launch, targeted at staff and Member States, in order to renew the Regional Director's vision and engage staff, Member States and partners
  - the next phase of Transformation Agenda to concentrate on technical focus, delivery and results.
- 2. Establish a clear governance structure for the Transformation Agenda with membership made up of the executive management team and staff representatives.
  - governance team to review progress on a monthly or bi-monthly basis, provide guidance to project team and address any delays or bottle-necks in implementation.
- 3. Strengthen the Transformation Agenda project management team with appropriately skilled staff and resources.
- 4. Develop and implement a change management strategy to institutionalize the Transformation Agenda
  - identify change agents in regional office, inter-country support teams and country offices
  - identify and support champions among directors, WRs and other staff

- 5. Develop and implement an effective communication strategy, commencing with a conscious "relaunch" to staff and Member States, recalling the vision and purpose, detailing progress, and recognizing some of the challenges and shortfalls in the first two years.
- 6. Complete cluster restructuring exercises for General Management and Noncommunicable Diseases clusters, and any other major human resource reorganisation as soon as possible.
- 7. Provide regular updates on planned functional reviews of country offices and complete these as soon as possible.
- 8. Encourage active engagement of Member States and partners in the next phase of the Transformation Agenda.

### **Annex 1: Methodology**

The Transformation Agenda of the World Health Organization Secretariat in the African Region was launched by the Director of the WHO Regional Office for Africa in February 2015. At the request of the Regional Director, a mid-term evaluation of the Transformation Agenda was conducted by the WHO Evaluation Office. The evaluation team comprised staff of the Evaluation Office and a senior external consultant (Ms Kathryn Tyson).

The evaluation was conducted during the period January to April 2017. The preparatory work and document review was carried out in January, the data collection followed in February and March and the data analysis and drafting of the report were done in late March and April 2017.

The evaluation objectives were to review the progress in the implementation of the Transformation Agenda, to document achievements and best practices, to identify challenges and areas for improvement and to provide recommendations on the way forward. To this end, the evaluation was conducted as a mixed-method approach using a combination of document review, key informant interviews, site visits and an online survey for all staff across the Region.

#### **Document review**

The document review comprised relevant WHO documents related to the Transformation Agenda and information obtained from the website of the Regional Office for Africa. This included reports of Regional Committees, other related progress reports and self-assessments.

#### **Online survey**

The online survey was addressed to all staff across the Region. The questionnaire, in English, French and Portuguese, was launched on 22 February 2017 and was accessible for 4 weeks until 22 March with one reminder being sent. In total, 449 staff members participated, a return rate of approximately 17%. Of the 358 staff who provided optional personal information, 64% were from country offices, 18% from intercountry support teams and 17% from the Regional Office in Brazzaville. This group could be further broken down as: 38% international professionals, 32% NPOs and 29% general service staff.

#### Key informant interviews and site visits

The evaluation team visited the Regional Office and WHO Country Office in Brazzaville and also the three inter-country support teams and WHO country offices in Harare, Libreville and Ouagadougou. During these site visits, the members of the evaluation team conducted individual or group interviews with the following staff members:

- Regional Director and executive management in the Regional Office
- Transformation Agenda project team in the Regional Office
- Cluster directors in the Regional Office
- Professional and General Service staff in the Regional Office
- Heads of WHO country offices (WRs) in Brazzaville, Harare, Libreville and Ouagadougou
- Cluster leads in the Inter-country Support Teams
- Professional staff at the Intercountry Support Teams
- Professional staff at the WHO country offices
- General Service staff at the Intercountry support teams
- General Service staff at the WHO country offices
- Staff Association representatives in all sites visited

Where staff were absent during the visits, the possibility of follow-up telephone or video interviews was offered.

Face-to-face interviews were also held during the on-site visits with Ministry of Health counterparts in Brazzaville, Harare, Libreville and Ouagadougou. Additional telephone interviews were conducted with representatives from three key external stakeholder groups: members of the Regional Programme Sub-Committee, members of the Regional Independent Advisory Group and international partners and donors.

#### Data analysis and preparation of report

Qualitative data collected through the online survey and interviews were analysed by identifying emerging themes and subthemes. Quantitative survey data was analysed through calculation of frequencies and trends in the survey questions. Finally, the data were triangulated to identify common response patterns and draw conclusions. A draft of the mid-term evaluation report was shared with the Office of the Regional Director for fact checking.

### **Annex 2: Survey questionnaire**



# The Transformation Agenda of the WHO Secretariat in the African Region 2015-2020

Dear respondent,

The Transformation Agenda of the World Health Organization Secretariat in the African Region was initiated by the Regional Director in February 2015. The objective of the Transformation Agenda is to ensure that the WHO Secretariat in the African Region evolves into the primary leader in health development in Africa and the reliable and effective protector of Africa's health stock. The Transformation Agenda has four focus areas, namely: pro-results values, smart technical focus, responsive strategic operations, and effective communication and partnerships.

The Regional Director has requested the WHO Evaluation Office to carry out a formative or mid-term evaluation of the Transformation Agenda in order to:

- review progress in the implementation of the Transformation Agenda
- document achievements and best practices
- identify challenges and areas for improvement
- provide recommendations on the way forward.

The evaluation is conducted through a combination of document review, interviews, country studies and an online survey.

We would like to invite you to complete this online questionnaire, which will permit us to collect your views as a WHO staff member working in the African Region. It is thus a key survey tool and we urge you to reflect on and respond to the questions candidly and in sufficient detail in order to allow an accurate assessment of the current situation.

Your answers will be completely anonymous and strictly confidential as the responses given will only be reported at an aggregate level.

In order for your inputs to be adequately reflected in the analysis, kindly complete this questionnaire by 17 March 2017.

Thank you for your cooperation.

#### Section 1 - Communication on the AFRO Transformation Agenda

This section seeks to understand how well you are informed about the Transformation Agenda.

#### 1.1 For each of the statements below please tick the answer that best corresponds to your views:

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Don't know/no opinion
I am aware of the Transformation Agenda	0	0	0	0	0	0
I am aware of the different components of the Transformation Agenda (e.g. focus areas, strategic actions)	0	0	0	0	0	0
I am regularly kept informed about the Transformation Agenda	0	0	0	0	0	0
I believe that management is communicating adequately with staff about important issues relating to the Transformation Agenda	0	0	0	0	0	0
The communication on the Transformation Agenda is adapted to my needs	0	0	0	0	0	0
There are sufficient ways for me to get information about the Transformation Agenda	0	0	0	0	0	0

<ul> <li>Updates in management or cluster meetings</li> </ul>						
<ul><li>My supervisor</li></ul>						
O Participation in Transformation Agenda-related projects or ta	isk forces					
The Staff Association						
<ul><li>Briefings by RD and senior management</li></ul>						
<ul> <li>AFRO Intranet and Internet pages on the Transformation Age</li> </ul>	enda					
Other (please specify):						
1.3 Do you have any suggestions for improving communication on	the Transf	ormation	Agenda?			
Section 2 – Your engagement in the AFRO Transformation	n Agenda	1				
In this section, we seek to understand your level of involvement in, a	_		e Transforr	mation Ag	enda.	
2.1 Please indicate your level of awareness of the four focus areas these areas:	of the Tra	nsformati	on Agenda	and the e	expected re	esults of
<b>Pro-results values:</b> The purpose of this focus area is to foster the values of excellence, teak work, accountability, integrity, equity,	•		•	al culture	that is defi	ned by th
	Not at all aware	Slightly aware	Moderat- ely aware	Well aware	Very well aware	Don't know/no opinion
Enhanced accountability by individuals and teams	0	0	0	0	0	0
Improved fairness in rewards, recognitions and sanctions for staff members	0	0	0	0	0	0
Responsive, supportive and inclusive teams	0	0	0	0	0	0
Enhanced ethical standards for the staff	0	0	0	0	0	0
Smart technical focus: The technical areas of WHO's work in the priorities and commitments, and interventions will be based on a						П
	Not at all aware	Slightly aware	Moderat- ely aware	Well aware	Very well aware	Don't know/no opinion
EVD epidemic controlled	0	0	0	0	0	0
Strengthened regional capacity for health security, including effective preparedness and timely response to disease outbreaks and emergencies, and polio eradication	0	0	0	0	0	0
Accelerated progress on Millennium Development Goals (MDGs) and implementation of Sustainable Development Goals (SDGs)	0	0	0	0	0	0
Functional cross-cutting systems approach within the WHO African Region facilitating progress towards universal health coverage (UHC)	0	0	0	0	0	0
Enhanced knowledge management	0	0	0	0	0	0

1.2 I am primarily informed about the Transformation Agenda through (more than one choice possible):

O Available governing bodies documentation (e.g. Regional Committee documentation)

O Informally by other colleagues

**Responsive strategic operations:** The goal of this focus area is to evolve into an Organization with enabling functions that efficiently support the delivery of programmes.

	Not at all aware	Slightly aware	Moderat- ely aware	Well aware	Very well aware	Don't know/no opinion
Human, financial and material resources aligned with the identified priorities	0	0	0	0	0	0
Strengthened WHO human resource capacity	0	0	0	0	0	0
Enhanced transparency in recruitment, placement and performance management		0	0	0	0	0
Improved efficiency and accountability in the areas of finance, procurement and general management	0	0	0	0	0	0
Improved leveraging and use of available technologies and tools, especially GSM and Business Intelligence dashboards	0	0	0	0	0	0

**Effective communications and partnerships:** This focus area seeks to foster a more responsive and interactive Organization, internally among staff members and externally with stakeholders.

	Not at all aware	Slightly aware	Moderat- ely aware	Well aware	Very well aware	Don't know/no opinion
Enhanced internal communication between and across all the three levels of the Organization	0	0	0	0	0	0
Reinforced external communication	0	0	0	0	0	0
Strengthened strategic partnerships	0	0	0	0	0	0

#### 2.2 How would you rate your involvement in the Transformation Agenda?

	Not involved at all	Slightly involved	Moder- ately involved	Actively involved	Very actively involved	Don't know/no opinion
Overall	0	0	0	0	0	0
Pro-results values	0	0	0	0	0	0
Smart technical focus	0	0	0	0	0	0
Responsive strategic operations	0	0	0	0	0	0
Effective communications and partnerships		0	0	0	0	0

2.3 If	f possible, pl	lease provide	e examples of	your contri	bution to	the Trans	formatio	n Agend	la:
--------	----------------	---------------	---------------	-------------	-----------	-----------	----------	---------	-----

2.4	What would you consider to be the greatest a across each of the four focus areas?	chievement of your cluster, inter-country support team or country office
	Pro-results values	
	Smart technical focus	
	Responsive strategic operations	
	Effective communications and partnerships	

#### Section 3 – Evolution of work practices

This section lists a number of work areas related to the Transformation Agenda and seeks to understand how it is impacting your work practices.

#### 3.1 For each of the statements below please tick the answer that best corresponds to your views:

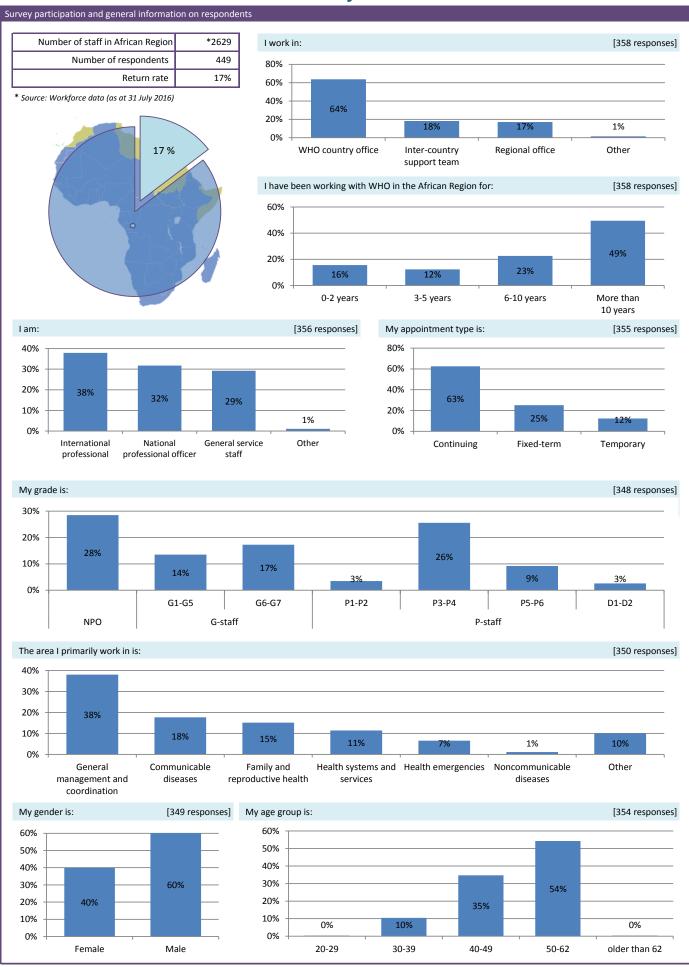
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Don't know/no opinion		
Overall change								
In the last 24 months, I have seen tangible changes in my day to day work as a result of the Transformation Agenda	0	0	0	0	0	0		
Pro-results value								
Managers are held accountable for the authority delegated to them	0	0	0	0	0	0		
I have a clear idea of what are my tasks and responsibilities and how I will be held accountable for them	0	0	0	0	0	0		
The system of administration of justice in WHO ensures that staff complaints are treated in a fair and equitable manner	0	0	0	0	0	0		
The PMDS system is fair and efficient	0	0	0	0	0	0		
Smart technical focus								
The Regional Office's preparedness and response to disease outbreaks and emergencies and polio is timely and reliable	0	0	0	0	0	0		
The Transformation Agenda has helped to build synergies, promote joint work, interconnectedness and dialogue to address cross-cutting issues	0	0	0	0	0	0		
It is clear how my work relates to MDGs/SDGs	0	0	0	0	0	0		
Responsive strategic operations								
I am seeing more alignment between WHO priorities and how resources are allocated across the Organization	0	0	0	0	0	0		
Training received is adapted to my career development needs	0	0	0	0	0	0		
The recruitment process is fair and transparent in the Regional Office	0	0	0	0	0	0		
I have access to all the programmatic and organizational information I need	0	0	0	0	0	0		
Effective communications and partnerships								
I have a clear perspective on the division of responsibilities in my area of work between headquarters, the Regional Office and the country offices.	0	0	0	0	0	0		
There is sufficient coordination and cooperation within clusters/divisions/ units in the Regional Office	0	0	0	0	0	0		
There is sufficient coordination and cooperation between the three levels of the Organization	0	0	0	0	0	0		
The Regional Office has the available capacities to coordinate, convene and direct regional health partnerships	0	0	0	0	0	0		

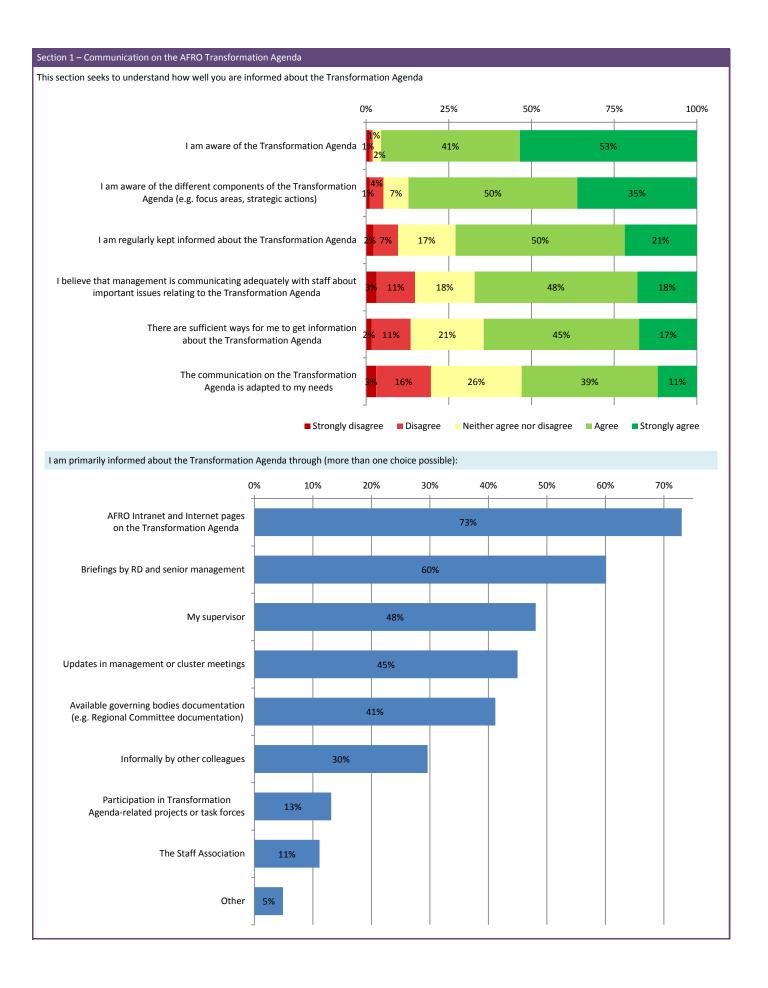
3.2 What are the main changes that you have experienced in your day to day work as a result of the Transformation Agenda?
Section 4 – Areas for further work
4.1 Can you identify any areas for further improvement in the Transformation Agenda?
4.2 Is there something else the Transformation Agenda should be doing?
4.3 How would you like to be engaged in the Transformation Agenda in the future?
Section 5 - Engagement of partners
5.1 What has been the implication of the Transformation Agenda for Member States in the African Region and other partners, including donors?
Section 6 – General staff information  This survey is anonymous. However, it would be much appreciated if you could provide some general information on your employment at WHO in order to allow a more meaningful analysis.
6.1 I work in:
O Regional Office
O Inter-country support team
<ul> <li>WHO country office</li> </ul>
Other (please specify):
6.2 I have been working with WHO in the African Region for:
O 0-2 years
O 3-5 years
O 6-10 years
O More than 10 years
6.3 I am:
O International professional
O National professional officer
O General service staff
Other (please specify)
6.4 My appointment type is:
Continuing
O Fixed-term
O Temporary

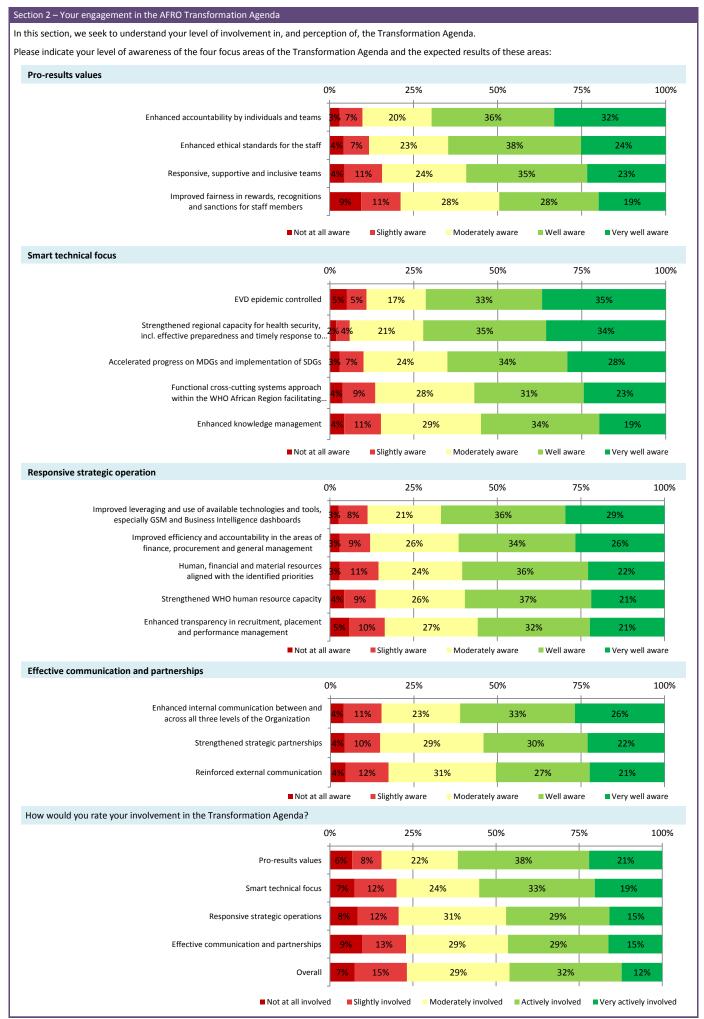
6.5	My grade is:
	O D1-D2
	O P5-P6
	O P3-P4
	O P1-P2
	O G6-G7
	O G1-G5
	O National professional officer
	Other (please specify):
6.6	My age group is:
	O 20-29
	O 30-39
	O 40-49
	O 50-62
	Older than 62
6.7	My gender is:
	O Female
	O Male
6.8	The area I primarily work in is:
0	General management and coordination
0	Communicable diseases
0	Family and reproductive health
0	Health systems and services
0	Noncommunicable diseases
0	Health emergencies
0	Other (please specify):

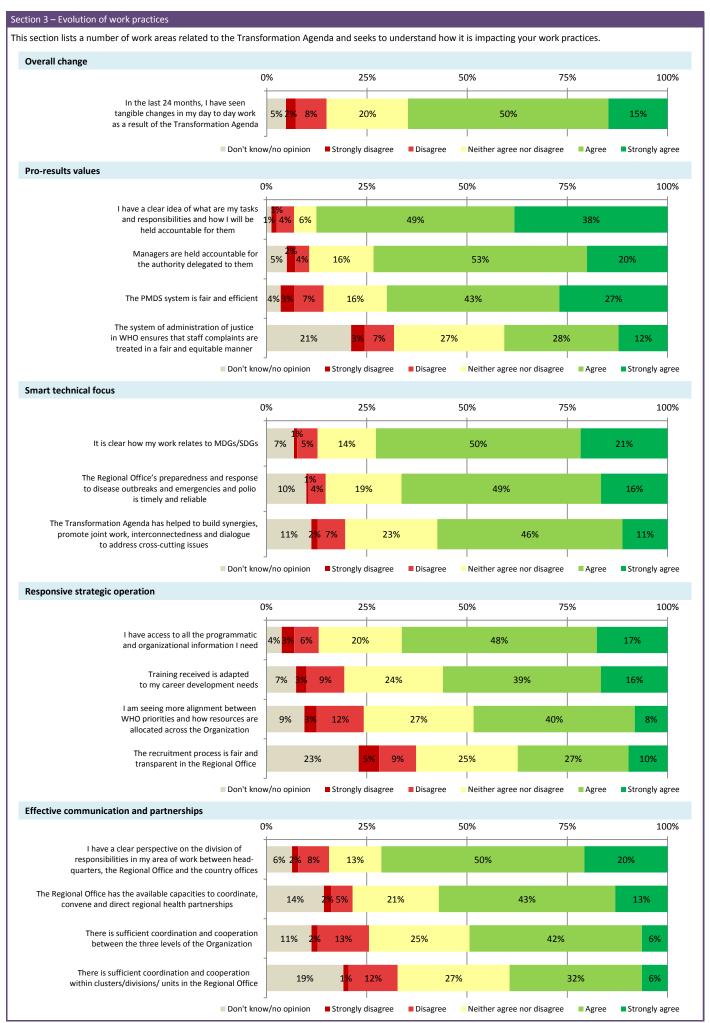
We would like to thank you for having taken the time to respond to this questionnaire.

## **Annex 3: Results from the online survey**

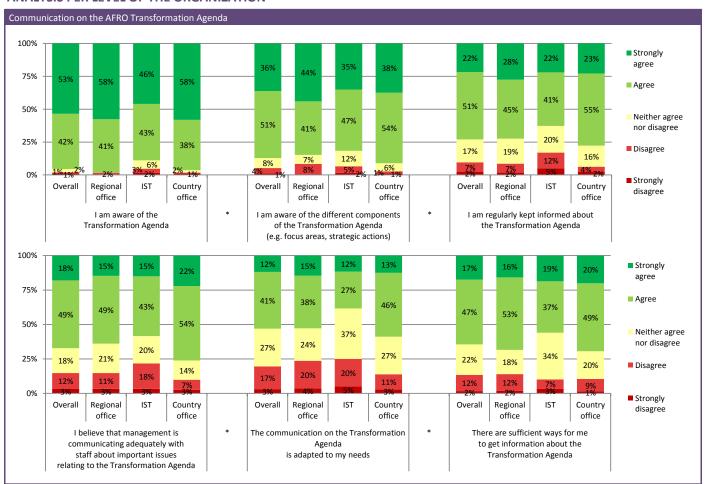


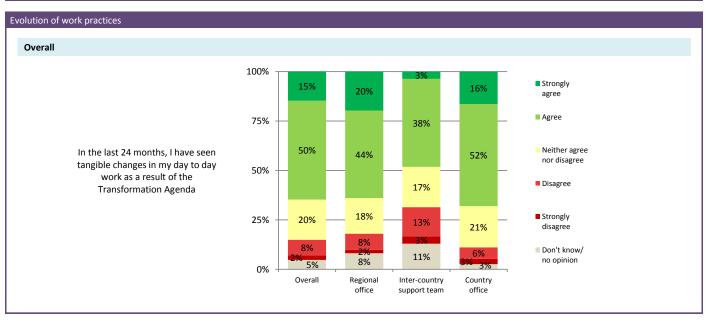


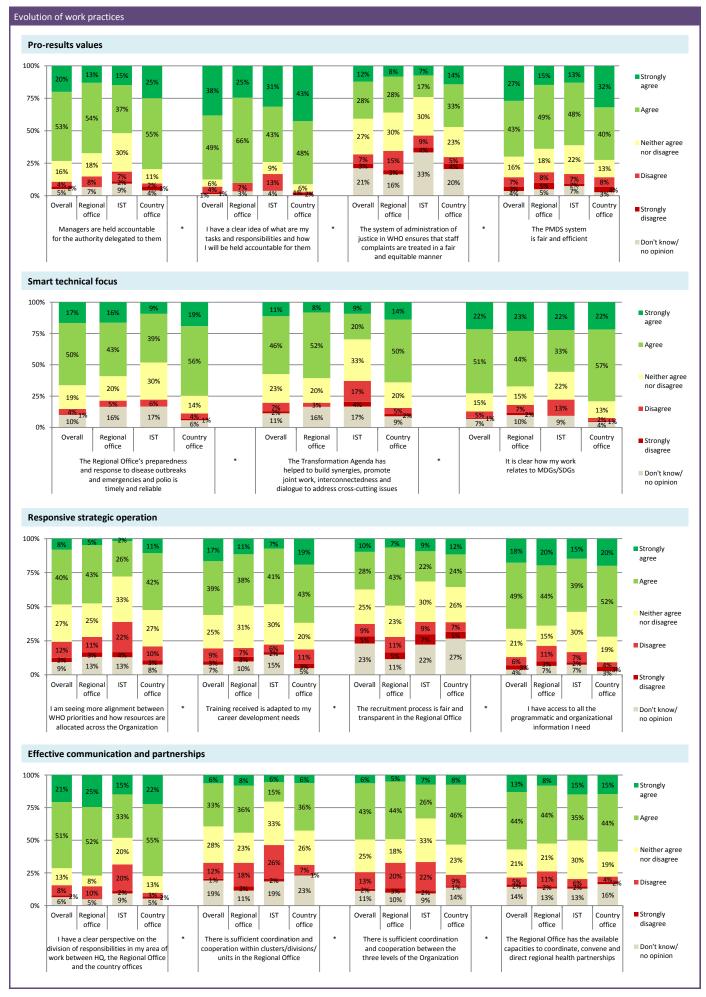




#### ANALYSIS PER LEVEL OF THE ORGANIZATION







### Responses to open-ended questions in the online survey

#### Do you have any suggestions for improving communication on the Transformation Agenda?

202 responses included (most common themes sorted by number of mentions):

- · Need for more regular updates
- (More) information sessions in townhall or staff/cluster meetings
- (More) internal newsletters, e.g. one page highlight report to staff every month/quarter
- Internet page to keep internal and external stakeholders informed
- Better involvement of and communication to staff at country level
- · Better involvement of and communication to G-staff
- Use of champions or change agents to support the process
- Distribution of Transformation Agenda or related material (in hard or soft copy)
- More communication in French language

#### If possible, please provide examples of your contribution to the Transformation Agenda:

188 responses included (selected responses):

- Provided comments on draft of documents and reports
- · Improving quality of work; being accountable for the work I am doing; communicating with partners effectively
- I am the transformation agenda champion for the WCO
- Submitted a written proposal on issues to be considered in implementation
- I am always discussing the impact of the Transformation Agenda with peers and managers sighting where it should be improved
- · Providing technical support to countries, building partnerships
- Use and implementation of Business Intelligence (BI) and managerial Key Performance Indicators (KPIs)
- Compliance with the new rules for travel authorization
- In communicating with both internal and external audience, I always project the tenets of the Transformation Agenda
- I strive in my work to incorporate all the key values. I actively promote transparency and accountability whenever I can
- · Coordinating some of the discussions around the transformation agenda

## What would you consider to be the greatest achievement of your cluster, inter-country support team or country office?

#### **Pro-results values** – 215 responses included (selected responses):

- There is good team work and culture of accountability
- Increased focus on results and Key Performance Indicators
- Responsive, supportive and inclusive teams
- Making the workplan SMART
- Our office has a strong focus on results, invested very strongly in measuring results regularly
- Retreat held with objectives defined to enhance the team, professional relationships and expected ethical standards

#### Smart technical focus – 200 responses included (selected responses):

- Strengthened the capacity of national and field staff for effective preparedness and timely response to outbreaks
- Better alignment of PMDS objectives to 2016-2017 work plan
- Weekly evaluation of KPIs and the association of the KPIs to the PMDS
- Incorporating the unfinished MDG agenda and SDGs into new CCS
- Reforming country offices based on priorities
- Effective preparedness and timely response to disease outbreaks, emergencies and polio eradication
- Ensuring most suitable recruitments and assignment of teams based on expertise

#### Responsive strategic operation – 185 responses included (selected responses):

- Well prepared to support outbreaks, emerging problems and other priorities.
- Improved communication and timely provision of well trained staff
- Improved leveraging and use of available technologies and tools, especially GSM and Business Intelligence
- Increased preparedness and response for disease outbreaks
- Improved efficiency and accountability in the areas of finance, procurement and general management
- Transparency in recruitment of new staff has greatly improved since the arrival of current WR
- Enhanced transparency in recruitment, placement and performance management

Effective communication and partnerships – 185 responses included (selected responses):

- · Improved visibility of the organization through better branding and use of visibility materials
- · Providing adequate information and updates to all stakeholders
- Strengthen the communication team, increase resource mobilization and WHO visibility at country level
- Enhanced internal communication and strengthened strategic partnerships
- Use of social media platforms to enhance communication
- · External communication with increase in number of shared reports and publications by WCO

What are the main changes that you have experienced in your day to day work as a result of the Transformation Agenda?

In addressing the open-ended question on what were the day to day changes experienced as a result of the Transformation Agenda, more than half of the respondents quoted positive changes, a sizeable number highlighted negative changes and a few respondents highlighted areas with room for improvement. The positive changes highlighted centered on three areas (1) Rigorous internal control systems (2) Team spirit, better communication and collective responsibility, and (3) Accountability and results. The negative changes centered on stress mainly evoked by job insecurity due to the restructuring exercise or lack of clarity around newly established positions.

In terms of better control systems, many respondents appreciated the changes in method of work, use of new tools to manage GSM requisitions, timeliness in PMDS, greater speed in file processing, better control tools and checklists and an overall better understanding and respect for rules and procedures. In terms of team work, they cited more integration of activities, more motivated country teams that are eager to strengthen ties with Ministries of Health and highlighted that they experienced more activities carried out with support of other colleagues and fluid communication across different levels of the Organization. Respondents perceived that staff is more focused on results as they have more defined priorities. For some, the performance indicators have helped improve service delivery, including better analysis of requests received from countries, staff is motivated and work faster. There is more transparency on the allocation, use and accountability of resources.

Respondents who perceived more stress sited that clusters who were still waiting for profiling had lower morale and greater anxiety as well as feelings of being isolated and abandoned. For these respondents they reported an increase in their day to day tasks and felt that the current human resource distribution did not align to the high quantity of their work. They observed that while new structures are being applied, job contents had not been fully understood.

Can you identify any areas for further improvement in the Transformation Agenda? Is there something else the Transformation Agenda should be doing?

In addressing the open-ended question on areas for further improvement in the Transformation Agenda, respondents focused on three areas (1) rebuilding WHO's reputation on technical focus (2) effective communication on the Transformation Agenda and, (3) human resource challenges, particularly the reforms. In addition, a very small minority of respondents reported feeling satisfied and indicated no need for improvement or that it was too early in the Transformation Agenda implementation.

On technical focus, there was a clear and present request for more attention to WHO's mandate as a technical Organization. It was highlighted that there is a need to put systems in place that move away from 'business as usual' and to help staff change attitudes. Key actions suggested include: an overhaul of perceived slower administrative systems such as the 14-day rule as well as ensuring that administrative functions are done by administrative staff not technical staff; move from mechanical interactions between the Regional Director and programme staff to more human technical conversations; strengthen the capacity of staff to deliver results both in the Regional Office and in the country offices; improve interaction with non-state actors as they are delivering significant health services in-country; implement measures for consistent mobilization of financial and human resources for program implementation tailored to the country's priorities and linked to well-defined key performance measurement indicators for program implementation; recruit staff who are relevant to the area of expertise; create synergies between the Transformation Agenda's deliverables and current programme workplans.

On communication, there was an overwhelming consensus that there is a need to step up the involvement of and consultation with staff on the Transformation Agenda. Respondents highlighted that it is critical to articulate and communicate and ensure an understanding of the key elements of the Transformation Agenda beyond the Regional Office. Respondents referred to a need for a two-way flow of communication with country offices. Proposed changes and goals related to the Transformation Agenda would gain more staff ownership if responsibilities were devolved to managers by briefing them so they are enabled to communicate further to staff. This would contribute to ensuring that information is not dependent only on the Transformation Team. It was also highlighted that staff buy-in could be enhanced if managers prioritize the Transformation Agenda implementation and lead by example. Respondents suggested that significant improvements would result from a strategy that encourages linkages between departments, across the three levels of the Organization and one that fosters

collaboration between programmes. Publication and dissemination of success stories about the Transformation Agenda would increase its visibility.

Concerns around human resources focused on the lack of speed in implementation of the reforms. Respondents called for a finalization of the restructuring process as a matter of urgency. Some felt that the deadlines set for completion of staff re-organization were not being met and that it was not acceptable that positions -with resources attached to them- were still not filled. Initiatives to foster respect for timelines of the Transformation Agenda are needed. It was suggested that next steps could focus on filling vacant strategic positions as well as focus on allocating qualified staff where there is technical work overload.

The Transformation Agenda is about moving towards a pro-results, improved and respectful organizational culture but a number of respondents felt that more efforts must be made to sanction unfairness, favouritism and lack of transparency in recruitment practices and to establish an effective performance appraisal system. It was suggested that the Transformation Agenda would be more operational if it had key performance indicators to enable all staff to understand its outputs.

Suggestions to address the general environment within the Regional Office include ensuring that meetings, trainings and conference calls are not only in English; changing what was felt by some to be a culture that underrates and harasses local staff while placing more value on international staff; finding a solution to the constant problem with water and electricity in the offices to create a conducive space for optimum delivery.

#### How would you like to be engaged in the Transformation Agenda in the future?

In addressing an open-ended question on how staff would like to be engaged in the Transformation Agenda in the future, many staff indicated they are already engaged or would like to be as champions and agents of change. The majority of staff were excited about remaining engaged especially in areas directly linked to their work. A good amount of staff provided ideas for strengthening their involvement and there were a few exceptions of staff who felt they had no idea how they could be involved.

Some of the suggestions for more effective engagement included regular briefings and continuous communication about the Transformation Agenda to all staff through electronic media. Several felt it would be beneficial to ensure feedback between regional and country offices through ISTs to update on the experiences on implementation of the Transformation Agenda especially at country level. Other suggestions focused on creating spaces for consultation and providing opportunities for staff to express their views on the implementation of Transformation Agenda, for example having a committee focusing on this at the level of each country office ensuring that local and international staff, professional and general service staff are represented in that dialogue. Some staff felt that their engagement would be enhanced if their superiors would show support for their involvement in the Transformation Agenda, others expressed their willingness to help by ensuring Transformation Agenda is adapting to the realities of country challenges and moving it towards more innovation. It was also indicated that job insecurity was compromising enthusiasm for future engagement.

# What has been the implication of the Transformation Agenda for Member States in the African Region and other partners, including donors?

In addressing an open-ended question on whether the Transformation Agenda had an impact on Member States and partners in the Region including donors, staff highlighted a range of insights into the effects of the Transformation Agenda. In most cases, the tone was either positive or hopeful and in fewer responses it was circumspect or showed that some staff felt no connection between their work and the Transformation Agenda or felt completely uninformed.

The majority of staff thought the Transformation Agenda provided a framework for Member States and partners to visualize a real change in WHO's African Region. Staff perceived a better quality in interactions with Member States who now see the Regional Office as able to respond to their requests in a more decisive and timely manner. They highlighted that they felt there is a high level of awareness and greater accountability reflected in a more responsive strategic operations and effective communications and partnerships at the managerial, programme and governance levels of implementation on the part of the Regional Office with respect to its partners and Member States. There is an overall feeling of better trust in WHO's African Region evidenced by an increase in the number of engagements with partners and more resources flowing into certain areas of work. Although the Transformation Agenda requires Member States to adapt to new ways of working, it also has made some Member States more aware of their responsibilities. There is greater awareness and respect for existing WHO systems for reporting. For example, if Direct Financial Cooperation reports are not submitted it has become difficult to access future WHO funds. Other efforts by Member States include making more efforts to address their own challenges with health systems strengthening, preparation for epidemics is improved and there is more synergy between partners at country level.

The more cautionary staff responses indicated that it is too early since the roll out of the Transformation Agenda to begin attributing positive results directly to it. Other respondents highlighted that there is more focus on partners

and donors than Member States and more work needs to be done to ensure that the needs of Member States are not superseded by donors and partners. Some responses indicated that, although the Transformation Agenda's intentions are good, there remains tension between high expectations and the fact that change and impact take time. Some felt that the human resource reforms accompanying the Transformation Agenda have derailed WHO's focus from delivering technical support to Member States. Key issue highlighted include the fact that it is the second year since the launch of the Transformation Agenda, yet positions continue to be unfilled. This has caused anxieties and uncertainties and is creating gaps in technical support delivery that other organizations are beginning to fill

### **Annex 4: Documents reviewed**

2<sup>nd</sup> Meeting of the Independent Advisory Group (IAG), Johannesburg, Republic of South Africa, 3-4 October 2016, World Health Organization, Regional Office for Africa, 2017.

53<sup>rd</sup> Regional Programme Meeting, Final Report, Brazzaville, Republic of Congo, 14-16 November 2016, World Health Organization Regional Office for Africa, 2016.

Intercountry Support Teams - operational guidelines, World Health Organization, Regional Office for Africa, 2016.

Key Performance Indicators for WHO Country Offices in the African Region, annual progress report, January to December 2016.

Leading change for enhanced performance, my first 100 days in office by Dr Matshidiso Moeti, WHO Regional Director for Africa, World Health Organization Regional Office for Africa, 2015,

http://www.afro.who.int/en/rdo/reports/4859-leading-change-for-enhanced-performance-in-the-african-region-my-first-100-days-in-office.html

Phase 1: KPI Development in the WHO African Region, Deloitte consultancy report, 2016.

Progress report on the implementation of the Transformation Agenda of the World Health Organization Secretariat in the African Region: 2015-2020, document AFR/RC66/INF.Doc/10, Sixty-sixth session of the Regional Committee for Africa, 22 August 2016,

http://www.afro.who.int/index.php?option=com\_docman&task=doc\_download&gid=10272&Itemid=2593

The African Health Transformation Programme 2015-2020 – A vision for universal health coverage, World Health Organization Regional Office for Africa, 2015, <a href="http://www.afro.who.int/en/rdo/reports/4928-the-africa-health-transformation-programme-2015-2020-a-vision-for-universal-health-coverage.html">http://www.afro.who.int/en/rdo/reports/4928-the-africa-health-transformation-programme-2015-2020-a-vision-for-universal-health-coverage.html</a>

The Transformation Agenda of the World Health Organization Secretariat in the African Region: 2015-2020, Document AFR/RC65/12, Sixty-fifth session of the Regional Committee for Africa, 29 October 2015, <a href="http://www.afro.who.int/index.php?option=com/docman&task=doc/download&gid=9893&ltemid=2593">http://www.afro.who.int/index.php?option=com/docman&task=doc/download&gid=9893&ltemid=2593</a>

The Transformation Agenda of the World Health Organization Secretariat in the African Region 2015-2020, World Health Organization, Regional Office for Africa, 2015, http://apps.who.int/iris/bitstream/10665/178621/1/9789290232827.pdf?ua=1

The work of WHO in the African Region, 2014-2015, Report of the Regional Director, World Health Organization Regional Office for Africa, 2016, http://www.afro.who.int/en/rdo/reports/4765-2014-2015-biennial-report.html

The work of WHO in the African Region, 2015-2016, Report of the Regional Director, World Health Organization Regional Office for Africa, 2015, <a href="http://www.afro.who.int/en/rdo/reports/4996-the-work-of-who-in-the-african-region-2015-2016.html">http://www.afro.who.int/en/rdo/reports/4996-the-work-of-who-in-the-african-region-2015-2016.html</a>

Transformation Agenda Newsletter Issue 1, July 2015.

Transformation Agenda Newsletter Issue 2, September 2015.

Understanding WHO business rules, Handbook for Ministries of Health in the African Region, World Health Organization, Regional Office for Africa, 2016, <a href="http://apps.who.int/iris/bitstream/10665/250075/1/9789290233121-eng.pdf?ua=1">http://apps.who.int/iris/bitstream/10665/250075/1/9789290233121-eng.pdf?ua=1</a>

WHO AFRO Transformation, functional review of WHO country offices, Dahlberg consultancy report, 2015.

WHO AFRO Transformation, Improvement of key business processes, Dahlberg consultancy report, 2015.

WHOs AFRO Transformation, Realignment of teams to strategic priorities, Dahlberg consultancy report, 2015.

Websites of the Regional Office for Africa.