STAGED DEVELOPMENT TOOL (SDT)

BACKGROUND AND DESCRIPTION

Topics

- Maturity Models and Discussion Guides
- SDT Workshops
- Other Ways to Use Discussion Guides and the SDT

MATURITY MODELS

- The conceptual framework of the SDT is the maturity model

- A maturity model describes stages of development: Basic, Developing, Advanced, and Leading Edge

- NPHIs use the SDT to assess their current and desired stages of development in priority areas and create plans to achieve their desired stages

Basic

Developing

Advanced

Leading Edge
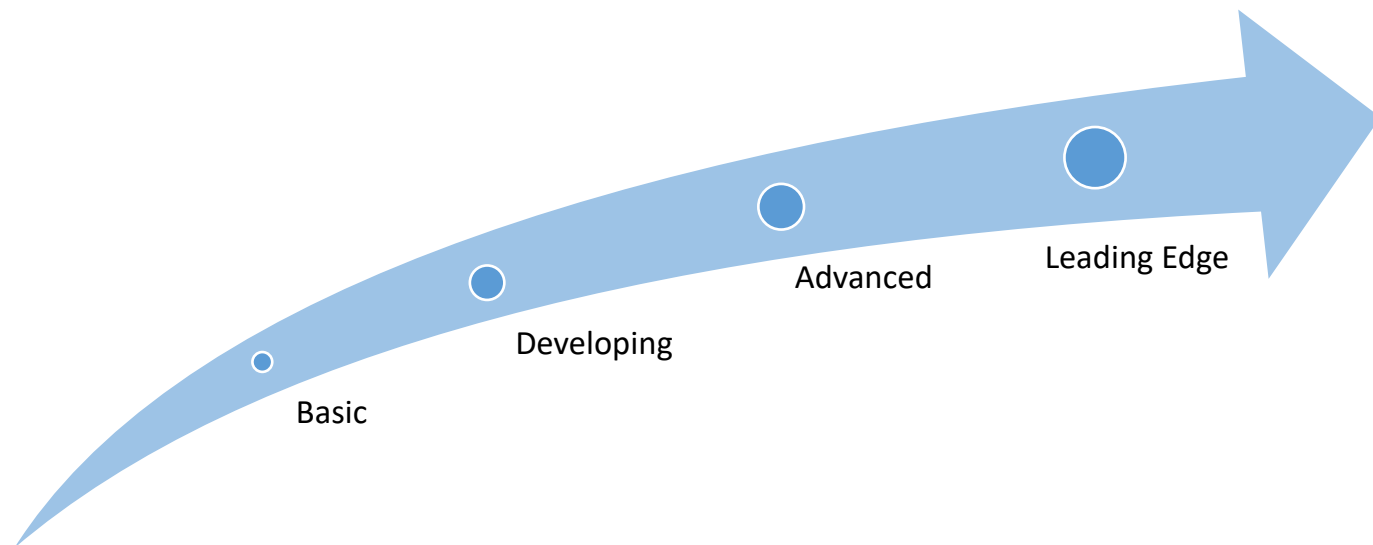
DISCUSSION GUIDES (DGS)

- DGs have been designed specifically for NPHIs

- They cover
  - Internal-facing topics, such as leadership and management, and internal communication
  - External-facing topics, such as surveillance, multi-sectoral collaborations
    - A "generic" Discussion Guide can be modified for use with topics not on the current list, such as injuries or mental health

DISCUSSION GUIDES

- Title
- Four columns, one for each of the stages
  - Numeric scores allow for more nuanced discussion about the SDT's stage along the continuum
- Each of the columns contains descriptions covering 6 domains:

  - Strategic Direction
  - Systems
  - Resources

  - Quality
  - Engagement
  - Impact

14. Data-to-Action

	Basic			Developing			Advanced			Leading Edge		
	1	2	3	4	5	6	7	8	9	10	11	12
Strategic Direction	The NPHI sometimes provides policy or program recommendations to the MOH or others upon request. The data used by the NPHI to develop recommendations have major limitations. The NPHI rarely follows up about whether its recommendations are used.			The NPHI's policy or program recommendations are mainly in response to requests. They draw from several information sources, but data quality is often low, and data gaps persist. The NPHI is starting to disseminate its recommendations more widely and sometimes works with the MOH or partners to encourage uptake.			In addition to responding to requests, the NPHI proactively identifies critical public health issues and develops recommendations. It documents its data sources and provides critiques about their strengths and limitations. It disseminates its recommendations widely and actively collaborates with the MOH and other stakeholders to encourage uptake.			The NPHI is known for using diverse information sources to make robust recommendations and for its creative approaches to dissemination and increasing uptake. The NPHI attempts fills important data gaps so future recommendations can be more robust.		
Systems	The NPHI lacks a consistent approach to accessing and analyzing data for use in decision-making. It lacks standardized formats for reporting or disseminating recommendations, for example, on its website, through a public health bulletin, or in regular meetings with partners or			The NPHI's systems for accessing and synthesizing information and creating recommendations are improving, but gaps remain. Formats for reports, policy briefs, etc. are being standardized. The NPHI sometimes requests meetings with MOH or partners to discuss recommendations, but			The NPHI has systems, tools, and SOPs to create evidence-based guidance. It has systems for ensuring wide dissemination, and it is developing more systematic ways to ensure specific audiences are aware of recommendations of particular relevance for them.			The NPHI's systems for developing and disseminating recommendations are models for organizations around the world. For some issues, such as immunizations, it has systems for managing external advisory groups. The NPHI develops and evaluates new technologies and approaches to data-to-action work and		

DISCUSSION GUIDES: DOMAINS

There are 6 SDT domains – each is a row in the Discussion Guide

1. **Strategic Direction**: Are priorities clear and strategic?

2. **Systems**: Does the NPHI have the necessary tools, processes, etc. to accomplish its work?

3. **Resources**: Are human and material resources adequate?

4. **Quality**: Is quality measured and are standards met?

5. **Engagement**: Are the key stakeholders engaged with the NPHI and helping it achieve its goals?

6. **Impact**: For internal-facing Discussion Guides: Is the NPHI operating effectively? For external-facing Discussion Guides: Is the NPHI contributing to better health?

USING THE SDT

- The complete SDT process involves a workshop
  - Usually led by a neutral, SDT-trained facilitator and recorder
  - Results in a detailed plan that will lead the NPHI to a higher stage of development
- The SDT Discussion Guides can also be used in an informal manner
  - Discussion Guide content can be used by the NPHI or groups within the NPHI as a basis for discussions about existing and desired attributes and capacities

SDT WORKSHOPS

SDT WORKSHOPS

- Preferably facilitated by a team – a facilitator and a recorder – trained on SDT
  - In-person is best, to encourage conversation
  - Can also be conducted virtually or using a hybrid approach

- Best used by an established group that will remain in existence long enough to implement the plans, such as
  - An NPHI
  - A department in an NPHI
  - Sections of the Ministry of Health that are being brought together to create the NPHI

SDT WORKSHOPS INVOLVE 3 STEPS

ASSESS ▸ PRIORITIZE ▸ PLAN

- During assessment, the Discussion Guides are used to prompt discussion

- Issues for follow-up are then prioritized

- The final step is to identify specific next steps for the priority efforts

STEP 1: ASSESSMENT

- Participants first read the Discussion Guide silently
- They then discuss the NPHI's **overall** current stage
  - The initial determination of overall stage provides a starting place for the more in-depth discussion to follow
- They then discuss the NPHI **domain-by-domain**
  - The recorder captures the discussion on the Assessment Form

Assessment Form

Discussion Guide: **Date:**

Current Stage: **Desired Stage:**

Domain	Current Score	Examples/Reasons	Desired Score	Gaps/Underlying Issues
Strategic Direction				
Systems				
Resources				
Quality				
Engagement				
Impact				

Notes:

STEP 1: ASSESSMENT

- The initial discussion of the overall stage of the NPHI is brief, focused on getting a general sense of the NPHI's stage

- This is followed by in-depth probing and discussion. Going domain-by-domain, participants:
  - Discuss the current score in that domain, providing detailed justifications for their proposed scoring
  - Identify the score they would like to achieve within a defined timeframe, e.g., a year
  - Identify the reasons that are not at the desired score, probing for the underlying issues

- Key points are recorded on the Assessment Form

- After all the domains are discussed, participants revisit their estimate of the overall current and define the desired score, which are also recorded

EXAMPLE: ASSESSMENT FORM

- This is an example of ideas that might be recorded on an Assessment Form during discussion, using the Discussion Guide on Surveillance

- This country is "Developing" and wants to be "Advanced" by the end of the year

- Note that several issues have arisen that will be discussed as other domains are explored in more depth

Assessment Form				
Discussion Guide: Surveillance				**Date:** February 22, 2023
Current Stage: Developing				**Desired Stage:** Advanced
Domain	**Current Score**	**Examples/Reasons**	**Desired Score**	**Gaps/Underlying Issues**
Strategic Direction	4	We have too much data – no time to analyze it all. Need to prioritize. NGOs pressure leadership to prioritize their issues. Decisions about priorities based on donors not public health For meningitis, we just send the data to WHO. We don't even analyze it Haven't talked to MOH about their priorities—maybe that could lead to more MOH support Too many people have pet projects. We need a systematic way to set priorities, based on rates in the country, whether we could prevent disease, etc. Should engage stakeholders in strategic planning Need systems for getting data and feeding back to	7	Need strategic plan—takes resources - Need systematic way to set priorities - Need to think about how to impact the country's health Need to engage with MOH Need to engage with other sectors, e.g., AMR We are not opportunistic enough, take advantage of opportunities to build our capacity, not just pass-through where we do the

TRANSITION

- During a break, the facilitator and recorders organize Assessment Form information into categories on the Next Steps Form

- Categories should be designed to group related ideas to make prioritization and planning easier

- All ideas generated during Assessment should appear on the Next Steps Form, either in the Category column or in Details

<table>
<tr><td colspan="4" align="center">Next Steps Form</td></tr>
<tr><td colspan="2"><u>Discussion Guide:</u> Surveillance</td><td colspan="2"><u>Date:</u> February 22, 2023</td></tr>
<tr><td colspan="2"><u>Current Stage:</u> Developing</td><td colspan="2"><u>Desired Stage:</u> Advanced</td></tr>
<tr><th>Category</th><th>Details</th><th>Next Steps</th><th>Who/When</th></tr>
<tr><td>Strategic planning</td><td>Need a clearer sense of priorities – which data are most important to analyze and report?
  - Engage stakeholders? MOH?
  - Haven't had success with subnational…need to try new approaches
Need to build subnational capacity
Regular reports could help with NPHI visibility and build stakeholder relations</td><td></td><td></td></tr>
<tr><td>Limited data from labs, hospitals and health facilities</td><td>Need better reporting for notifiable diseases
Include chronic diseases?
We don't have AMR surveillance
Need formal data sharing agreements</td><td></td><td></td></tr>
</table>

STEP 2: PRIORITIZATION

- When participants return, the facilitator reviews the information on the Next Steps Form
- Often, some issues need to be explored further to clarify what is keeping the NPHI from reaching the desired stage
- Participants select the most important items for follow up (highlighted) and those that are lower priority for now (crossed out)

Next Steps Form

Discussion Guide: Surveillance   **Date:** February 22 , 2020

Current Stage: Developing   **Desired Stage:** Advanced

| Categories	Details	Next Steps	Who/When
Strategic planning	Need a clearer sense of priorities – which data are most important to analyze and report - Engage stakeholders? - Engage MOH? - Engage subnational? - - This has been tried. Not a high priority now. Be more systematic in identifying opportunities to build capacity		
Routine surveillance not integrated with lab surveillance - Lab and epi use different data	Databases probably could be integrated—could talk to IT NPHI needs formal data sharing agreement		

STEP 3: PLANNING

- Participants identify the action steps for the priorities, including milestones and due dates, and who is responsible for each step

- Although not on the form, the follow-up plan should include regular check-ins and updates

Next Steps Form

Discussion Guide: Surveillance

Date: February 22, 2023

Current Stage: Developing

Desired Stage: Advanced

| Category	Details	Next Steps	Who/When

Strategic planning	Need a clearer sense of priorities – which data are most important to analyze and report?
	- Engage ~~stakeholders?~~ MOH?
	- Haven't had success with subnational…need to try new approaches
	Need to build subnational capacity Regular reports could help with NPHI visibility and build stakeholder relations
		1. Develop a plan to do strategic planning
		2. Engage with MOH about its priorities
			Lola to do concept note by Mar 1
			  1. Review at Mar 8 staff meeting
			  2. Rough draft by May 15, for discussion with MOH
			Dr. Humphries will talk to DG next week about our strategic planning, MOH priorities, etc.

Limited data from labs, hospitals and health facilities	Need better reporting for notifiable diseases ~~Include chronic diseases~~ We don't have AMR surveillance Need formal data sharing agreements	1. Establish formal data sharing agreement with the national hospital lab, could serve as model for others 2. Meet with MOH about ways	Ellen will talk to DG next week about setting up meetings • Need to draft agenda, including sharing lab data (highest priority), possible

IDENTIFY EASY WINS

- Easy wins are activities that can be done relatively easily or quickly and will be impactful

  - Some of the next steps discussed already on the Next Steps Form will be easy wins

  - Sometimes participants have ideas for easy wins that are not related to the Discussion Guide being discussed. It is important to probe for these and capture them as well
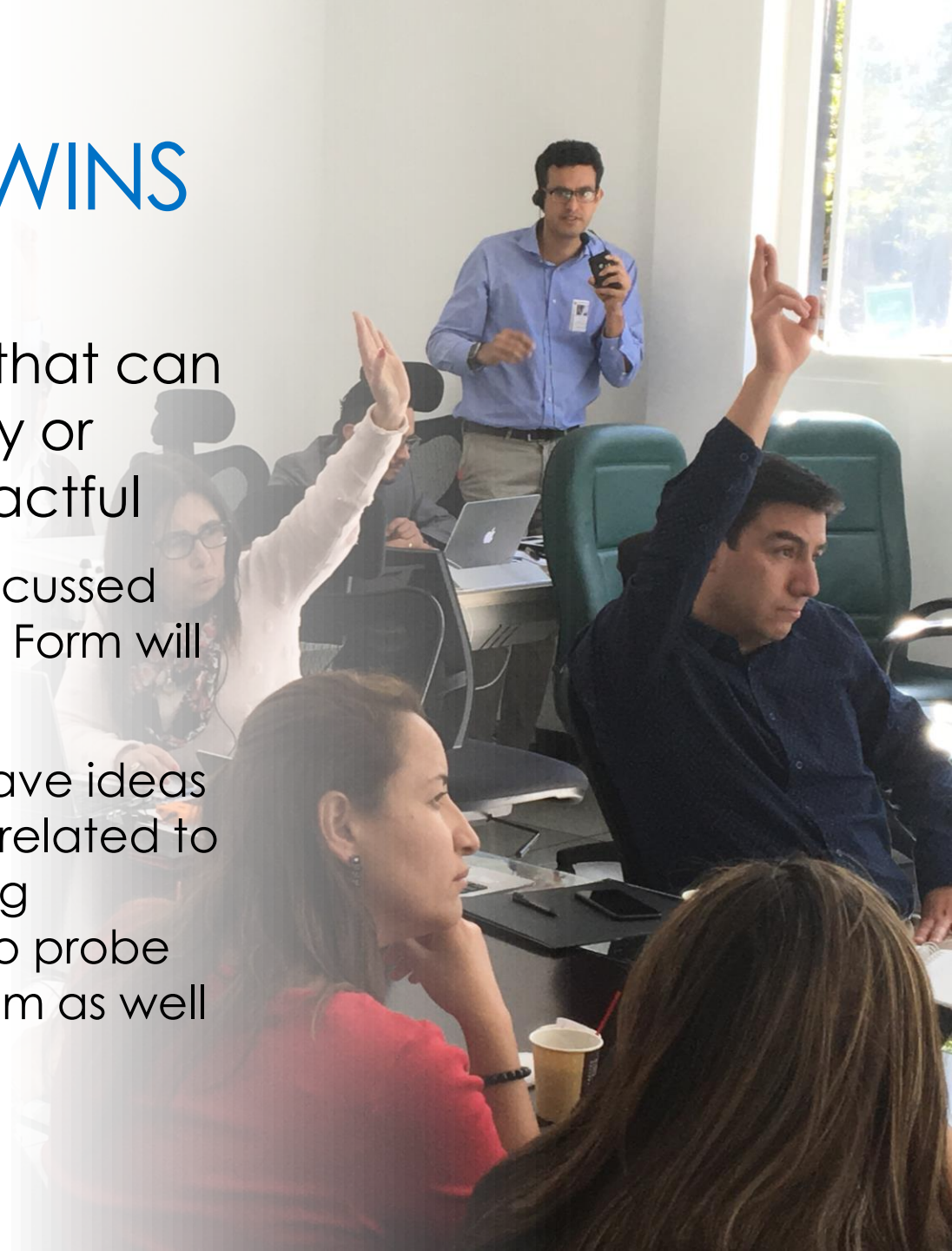
WHEN DONE PLANNING, REVIEW THE PLANS

- If the NPHI completes the workplan, will it make the desired progress towards achieving the desired stage?

- Are additional resources needed? What is the plan for obtaining them?

- Does leadership understand and support the plan?

- Do all NPHI staff understand their roles in carrying the plan forward?

- How will progress be monitored?
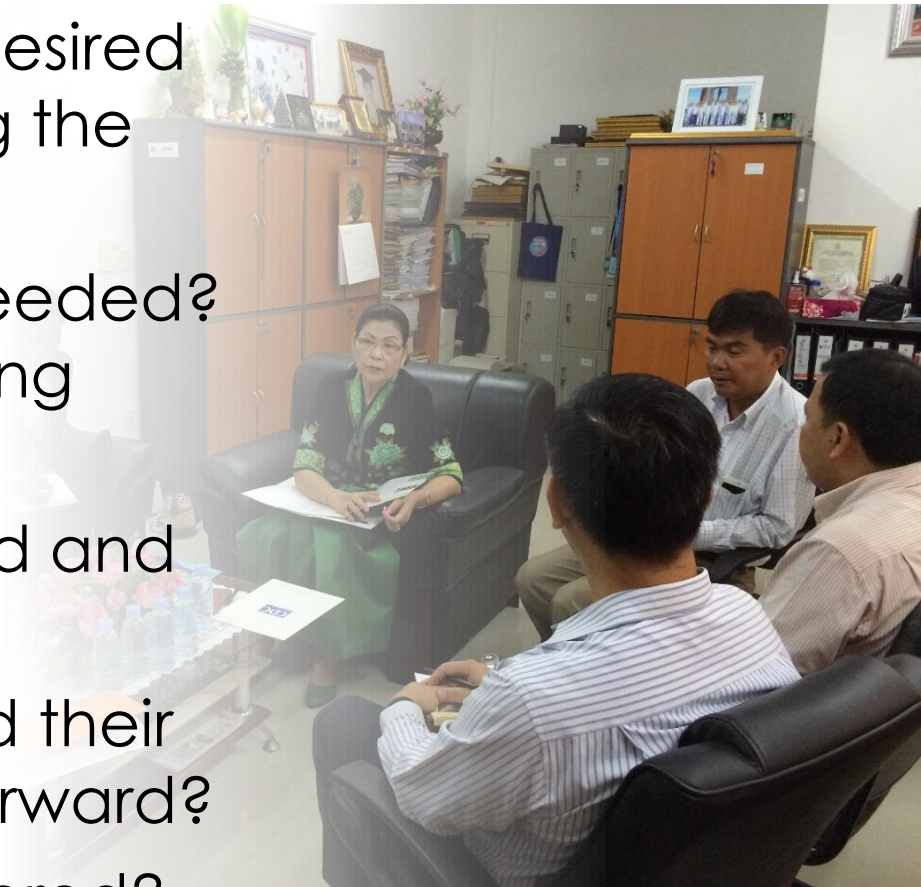
OTHER WAYS TO USE DISCUSSION GUIDES AND THE SDT

EXAMPLES OF OTHER WAYS TO USE THE DISCUSSION GUIDES

- The Discussion Guides have been used in less formal settings, for example, to prompt discussion during planning or staff meetings

- Nine African countries participated in peer-to-peer workshops about noncommunicable diseases (NCDs) using a simplified SDT process combined with a WHO tool

- A modified version of the SDT is a component of the NCD Capacity Assessment and Planning (N-CAP) Process (https://www.tephinet.org/noncommunicable-diseases-capacity-assessment-and-planning-process)

GOOD LUCK WITH PLANNING USING THE SDT!!!

- If you have any questions, please contact us
- Please also let us know about your experiences using the SDT or Discussion Guides
- We look forward to hearing from you

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