Staged Development Tool (SDT) for NPHIs

Background and Description
Topics

- Assessment
- Prioritization
- Work-Planning
What Is the SDT?

• A process and toolkit to help NPHIs function at a higher level.
• Involves 3 steps

1. ASSESS
2. PRIORITIZE
3. PLAN

• Includes
  ▪ Detailed Discussion Guides
  ▪ Forms for assessment and work-planning
Step 1: Assessment

- Maturity models guide the assessment
- A maturity model describes stages of development
  - Basic
  - Developing
  - Advanced
  - Leading Edge
- 30 Discussion Guides describe stages for a range of topics
  - Internal-facing Discussion Guides – e.g., leadership and management, health and safety, and internal communications
  - External-facing Discussion Guides (overlap with Core Public Health Functions) – e.g., surveillance, research, emergency response, and data-to-action
Discussion Guides

• Title

• Four columns, one for each of the stages
  ▪ Numeric scores allow for more nuanced staging

• Each of the columns contains descriptions covering 6 Domains:
  ▪ Strategic Direction
  ▪ Systems
  ▪ Resources
  ▪ Quality
  ▪ Engagement
  ▪ Impact

<table>
<thead>
<tr>
<th>16. Surveillance</th>
<th>Basic</th>
<th>Developing</th>
<th>Advanced</th>
<th>Leading Edge</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategy</strong></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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<tr>
<td><strong>Direction</strong></td>
<td></td>
<td>5</td>
<td>6</td>
<td>7</td>
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<tr>
<td><strong>Systems</strong></td>
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<td>8</td>
<td>9</td>
<td>10</td>
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<tr>
<td><strong>Resources</strong></td>
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<td>11</td>
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<tr>
<td><strong>Quality</strong></td>
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<td>12</td>
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<td><strong>Engagement</strong></td>
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<td><strong>Impact</strong></td>
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</table>

- The NPHI conducts surveillance based on WHO guidance or donor interest, but it does not analyze or use the collected data.
- The NPHI attempts to use data from its surveillance to inform policies and programs. However, there is often a mismatch between what is needed and what is collected.
- The NPHI's surveillance is designed to provide data to guide policies and programs. In designing systems, all aspects of surveillance are considered, from data collection through analysis and use of the data.
- The NPHI uses multiple approaches, including engaging decision-makers, to ensure surveillance systems are maximally useful. Systems are regularly evaluated, and are modified or ended if they are not useful.
How are Discussion Guides Used?

- Participants read the relevant Discussion Guide silently and, as a group, guess their stage of development

- Going Domain-by-Domain, participants:
  - Have in-depth discussions to define their score, providing detailed justifications for their proposed scoring
  - Identify their desired score for that Domain – the score they would like to achieve within a defined timeframe
  - Identify the gaps they need to be filled to get to the desired score

- After all the Domains are discussed, participants provide an overall current and desired score for the topic covered by the Discussion Guide

- Key points are recorded on the Assessment Form

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<td>The NPHI attempts to use data from its surveillance to inform policies and programs. However, there is often a mismatch between what is needed and what is collected.</td>
<td>The NPHI’s surveillance is designed to provide data to guide policies and programs. In designing systems, all aspects of surveillance are considered, from data collection through analysis and use of the data.</td>
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<tr>
<td>The NPHI has some surveillance SOPs and guidelines, but these are hard to use (e.g., incomplete or poorly written), and are not widely distributed. Review of surveillance systems is ad hoc, if it occurs.</td>
<td>The SOPs for surveillance are sometimes outdated. Reporting entities sometimes do not have them. Most surveillance systems have been reviewed, but reviews are not comprehensive and are rarely acted on.</td>
<td>All reporting entities receive SOPs, and these are generally followed. Surveillance systems are regularly reviewed using standard indicators (e.g., timeliness, completeness). The NPHI often follows up on evaluation results, resulting in increasingly useful and efficient systems.</td>
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# The Assessment Form

## Discussion Guide Title

<table>
<thead>
<tr>
<th>Domain</th>
<th>Current Score</th>
<th>Justification/Examples</th>
<th>Desired Score</th>
<th>Gaps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategic Direction</td>
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<tr>
<td><strong>Overall Score</strong></td>
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</table>
### The Assessment Form (example)

#### Surveillance

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<td></td>
<td>4</td>
<td>NGOs asking us to prioritize their issues. Decisions about surveillance are based on donor input. For meningitis surveillance, we just send the info to WHO, don’t even analyze it. The way we do respiratory pathogen surveillance, we don’t have denominators and can’t calculate rates; limits use of data for vaccine policy. We haven’t had any discussion with the MoH on their priorities. We could use funding for data analysis and supplemental data collection, but we haven’t established priorities and haven’t written out what we need</td>
<td>7</td>
<td>- NGO priorities not taken into account. - We don’t modify reporting to meet our needs (e.g., respiratory pathogens, denominators) - Although data are collected, we don’t have plans for analyzing and using the data (e.g., meningitis) - Lack of info on MoH needs - We haven’t developed a plan that we can take to funders laying out our priorities</td>
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Step 2: Prioritization

- The next step after assessment is prioritization.
- Prioritization can be done using the SDT forms as the basis for discussion.
- Other approaches, such as multi-voting or criteria matrices, may also be useful, either on their own or in combination with using the SDT forms.
- Whatever approach or approaches are used, careful definition of the gaps is essential as a basis for good work-planning.
Step 3: Work-Planning

- Work-planning can follow directly after prioritization or be done at a later time
- Work-planning should focus on the highest priorities
- Using the SDT Work-planning Form or another planning tool, identify the action steps, including milestones and due dates, and who is responsible for each step

<table>
<thead>
<tr>
<th>Gaps</th>
<th>Activities</th>
<th>Milestones</th>
<th>Who</th>
<th>When</th>
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</thead>
</table>
| No plans for analyzing and using data | 1. Develop an analysis plan and analyze priority datasets (meningitis, respiratory pathogens)  
2. Develop a report on findings, with recommendations | 1a. Analysis plan developed (1 month)  
1b. Statistical group contacted, review plan, promise support (NOTE: need to think through denominators) (2 months)  
1c. Analyze data  
2a. Develop format for report  
2b. Create report | 1. Lola (Mening)  
Alex (Resp)  
1b. Francois  
1c. Lola and Alex, with help from Stats group | Would like to have report completed before next elections (9 months)  
1. 6 months  
2a. 3 months  
2b. 9 months |
| Lack of info on MoH needs         | 1. Develop a plan for identifying and addressing MoH priorities (Note: This priority will not be fully developed until we get input from NPHI and MoH) | 1a. NPHI Dir or Deputy meets with Minister or DG to identify priorities, or whether need to talk to MCH and others/form working group to | 1a. NPHI Dir or Deputy – need to check  
1b. NPHI Dir or Deputy | 1a. 2 weeks  
1b. 3 months |
When Done Work-Planning, Review the Plans

- If the NPHI completes the work-plan, will it make the desired progress towards achieving the desired stage?
- Are additional resources needed? What is the plan for obtaining them?
- Do all NPHI staff understand their roles in carrying the plan forward?
- Does leadership understand and support the plan?
- How will progress be monitored?
Good Luck with Planning Using the SDT!

If you have any comments or questions about this material, please contact

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Or

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