Leadership and Management for Trachoma Elimination

KCCO
Kilimanjaro Centre for Community Ophthalmology
This manual was made possible through funding from the International Trachoma Initiative (ITI) to the Kilimanjaro Center for Community Ophthalmology (KCCO). Support was provided based upon the recognition that in order to reach the GET 2020 goal of eliminating trachoma as a public health problem, effective and supportive leadership by National Trachoma or NTD Coordinators will be critical. The setting of a vision, the development of the pathway for achieving the vision and engaging the necessary stakeholders to participate in the vision are principal components of leadership.

The workshop outlined in this manual is designed to help national trachoma/NTD coordinators to understand and maximize their leadership qualities and skills, to strategize on how to effectively delegate, to understand principles of change management, and to design a plan for moving forward to increase their leadership profile.

KCCO would like to acknowledge those coordinators who participated in the two workshops from which this manual is based. Thanks goes to Ernest Wanyama (Kenya), Mariamo Mbofana (Mozambique), Uwaez Onyebuche (Nigeria), Upendo Mwingira (Tanzania), Michael Masika (Malawi), Khaled Amer (Egypt), Asad Khan (Pakistan), Makoy Logora (South Sudan), Balgesa Elkheir Elshafie (Sudan), Patrick Turyaguma (Uganda), Teddy Sokesi (Zambia) and Isaac Phiri (Zimbabwe). Co-facilitators Amir Bedri and Caleb Mpyet contributed hugely to the development of this document and its application in a number of settings.

We hope you find this manual useful and ask that you share with us your experience in using it.

Paul Courtright
Robert Geneau
Chad MacArthur
Considerable progress has been made over the last 10 years in terms of mapping trachoma and implementing the SAFE strategy in most trachoma endemic countries. This has come about through a variety of funding initiatives, government commitment, and commitment of programme personnel. It has been recognized that most of the challenges facing trachoma elimination are not necessarily due to funding available but, instead due to management and leadership weaknesses; these are not specific to the field of trachoma or NTDs but often a reflection of the health systems in which these programmes reside. By strengthening management and leadership not only do trachoma programmes or NTD programmes benefit, the entire health system benefits. The Kilimanjaro Centre for Community Ophthalmology (KCCO) has a long history of a focus on strengthening management systems and improving leadership in the eye care field in Africa. Many of the lessons learned from these endeavors were the foundation for developing this manual on leadership strengthening to achieve GET 2020.

Recent WHO meetings of the Alliance for Global Elimination of Trachoma have also highlighted the need, expressed by many national coordinators, to improve their leadership skills and their understanding of some of the theoretical underpinnings of effective leadership. This document seeks to provide some of that information and to help leadership mentors support change management in these countries. Improving leadership skills is a never-ending process simply because it involves life-long learning. All of us, no matter where we are in terms of our position, can always learn more and do our work better. Thus, this document should serve as a foundation; we hope that, with time, readers will be able to offer their own experiences. There is no one-size-fits-all approach to leadership strengthening simply because the health systems and the cultural contexts in trachoma endemic countries are quite varied. For this reason the manual proposes that each participant develop their own plan based upon their, often unique, environment.

As noted in one of the quotes often used during leadership sessions:

“It is better to lead from behind and to put others in front, especially when you celebrate victory when nice things occur. You take the front line when there is danger. Then people will appreciate your leadership.”
– Nelson Mandela

With thanks,
Paul Courtright
Objectives of the Workshop

The participants will:

1. Understand different leadership styles, individual personality traits and associated leadership approaches.

2. Learn strategies or activities to maximize their existing leadership skills.

3. Understand how to effectively and efficiently delegate.

4. Understand the differences between leadership and management and how a leader should be able to shift to the “green zone” (more leadership, less management).

5. Understand “change management” and be able to apply the steps in managing change in the local context.

6. Strategize how to build and maintain partnerships.

7. Identify different health systems and how to effectively lead within these different health systems.

8. Appreciate all of the groups that are required to implement trachoma control and their roles and responsibilities as leaders.

9. Develop an action plan that allows the participant to maximize his/her leadership capabilities.

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<td>How health systems (centralized versus decentralized) impact leadership and management</td>
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Day 1

Session 1: Introductions

**Session Summary:** As the leadership workshop is designed to be an interactive/participatory three days, introductions are kept to a minimum with the understanding that people will get to know each other through the course of being together. This session is just to make sure that names, nationalities and positions are known to each other. If the facilitator feels that the various participants are strangers to each other, an ice-breaking activity may be introduced here. If this is the case, an additional 30-45 minutes will be required, necessitating an adjustment of the overall agenda.

**Objective:** To ensure that all members of the workshop (facilitators and participants) are acquainted with each other.

**Duration:** 15 minutes

**Materials:** None

**Handouts:** None

**Training Procedure:**

1. Ask the participants to individually introduce themselves including name, country they are from, and their position in the Ministry of Health particularly their relation to national trachoma elimination efforts;

2. The facilitators should also introduce themselves providing similar information.
Session 2: Setting the Tone

Session Summary: This session presents an opportunity for the participants and facilitators to become better acquainted and to understand the various opinions members of the workshop have about leadership. Designed to set the overall tone of the workshop 10-15 quotations concerning leadership are posted on the walls for consideration by the participants and to stimulate discussion about what leadership means to each of them. A number of quotations follow the description of this session but the facilitator should feel free to use other quotations if desired.

Objectives:
1. To begin the initial steps of identifying what leadership means to the individual participants;
2. To allow participants to get to know each other;
3. To demonstrate that this workshop is interactive and participatory relying on the thoughts and experiences of the participants.

Duration: 60 minutes

Materials:
1. Quotations printed on large paper and posted on the walls of the training room (see next page).
2. Flip chart paper with the focus questions written or PowerPoint slide with the questions (see below).

Handouts: None

Training Procedure:
1. Indicate to the participants the quotations posted on the walls;
2. Inform the participants that they will get up, walk around the room and read all the quotations;
3. Present the power point slide (or flip chart paper) with the following questions:
   a. What resonates with you about these quotes as they relate to leadership?
   b. How do you view these quotes in terms of what you aspire to be as a leader?
   c. What aspect of leadership do you see in the quotes that are the biggest challenge for you?
   d. Are there any quotes that you don’t agree with?
4. Allow the participants 20 minutes to read the quotations;
5. Invite the participants to return to their seats and facilitate a discussion on their reactions to the quotations. As an alternative activity, ask participants to form pairs and have each pair discuss between themselves their reactions. In the group discussion, have each individual report back on their partner’s choices of quotations.
6. The facilitators should also contribute their thoughts about the quotations as well.
7. Conclude the session in saying that many of the points discussed are what the workshop is designed to hone in on and to identify ways to strengthen all the participants’ leadership abilities.
Quotations on Leadership

Leadership defines what the future should look like, aligns people with that vision and inspires them to make it happen despite the obstacles.” (John Kotter, from Leading Change.)

The art of mobilising others to want to struggle for shared aspirations.” (James Kouzes and Barry Posner, from The Leadership Challenge.)

Leadership is a process that involves: setting a purpose and direction which inspires people to combine and work towards willingly; paying attention to the means, pace and quality of progress towards the aim; and upholding group unity and individual effectiveness throughout. (James Scouller, from The Three Levels of Leadership, 2011.)

Good leaders make people feel that they’re at the very heart of things, not at the periphery. Everyone feels that he or she makes a difference to the success of the organization. When that happens people feel centered and that gives their work meaning. (Warren Bennis)

Motivation and inspiration energize people, not by pushing them in the right direction as control mechanisms do, but by satisfying basic human needs for achievement, a sense of belonging, recognition, self-esteem, a feeling of control over one’s life, and the ability to live up to one’s ideals. Such feelings touch us deeply and elicit a powerful response. (John P. Kotter)

Leaders don’t have solutions; they pose the right questions (Stephen Covey)

It is amazing what you can accomplish if you do not care who gets the credit. (President Harry S Truman)

The most important thing in life is not to capitalise on your successes – any fool can do that. The really important thing is to profit from your mistakes. (William Bolitho, from Twelve against the Gods.)
Session 3: Workshop Objectives, Expected Outputs and Expectations

Session Summary: This session briefly presents the overall objectives of the workshop and the agenda designed to achieve those objectives. It aims also to make clear that the workshop will involve individual work that will result in a leadership plan to take back to their countries to refine and to implement. Time is also allowed for participants to express any expectation they might have arrived with and a discussion will be held as to the workshop’s capacity to meet the expectation.

Objectives:
1. To reiterate (or introduce) the objectives of the workshop;
2. To present the agenda designed to achieve those objectives;
3. To share the expectations the facilitators and the participants have regarding the workshop and to reconcile expectations as needed.

Duration: 15 minutes

Materials: PowerPoint presentation of objectives and agenda or flip chart paper with the same written on it

Handouts: Objectives and agenda

Training Procedure:
1. Using the PowerPoint presentation, the facilitator presents the objectives making sure that the participants are 100% clear of what is trying to be achieved;
2. The facilitator then presents the agenda of the workshop indicating the objective that each activity is designed to support;
3. The facilitator then asks the participants if they have other expectations for the workshop writing the responses on the flip chart;
4. The facilitator then decides how these expectations can be addressed or if they cannot be, explain why.
Session 4: Management and Leadership

Session Summary: Often the concept of leadership becomes entangled with management. The mixture of the two, particularly within under-resourced Ministries of Health is to be expected. This session looks at the difference between the two and assists the participants to look at their own context and to see how much they focus on management and how much time they have to be an effective leader. This session sets the stage for the individual work at the end of Day 1 in which participants identify ways they may increase their time as a leader and delegate more of the management tasks they have.

Objectives:
1. To distinguish between management activities and leadership activities;
2. To provide the participants with an opportunity to assess their own situation in regards to the time they spend managing as opposed to leading;
3. To discuss the importance of increasing their leadership time by delegating management tasks.

Duration: 1 hour 45 minutes

Materials: 1 set of paper slips for every two participants with each slip listing roles and responsibilities of managers and leaders (see top of next page); 1 set of paper slips for every two participants with each slip listing a characteristic of either management or leadership (see bottom of next page); PowerPoint slide of “Green Zone” (see page 10)

Handouts: Slips of paper as described directly above

Training Procedure:
1. Introduce the session by letting the participants know that we will focus on differentiating leadership roles from management roles;
2. Ask the participants to form pairs; and provide each pair with a set of the roles and responsibilities slips of paper (mixed together);
3. Instruct the pairs of participants to look at each activity and sort them according to whether they are an activity a manager should be responsible for or a leader;
4. After 15 minutes, ask the pairs for their responses;
5. After each pair presents ask the other pairs if they had the same results;
6. For any differing responses, facilitate a discussion of why one might be a task for managers and not for leaders or vice versa;
7. Have the participants identify whether they are currently engaged in some of the management roles and how much time these roles occupy;
8. Next hand out the slips (mixed together) that list the characteristics of leaders and managers. The participants, again in pairs, will identify which characteristics are needed for each of the roles (leaders and managers);
9. Again, discuss the various characteristics;
10. Present the PowerPoint slide “Green Zone;”
11. Explain that the ideal for a leader is to expand the green space in their job by delegating management tasks to others;
12. Discuss what the concept of delegation means. Ask the question: when should they delegate? Why should they delegate? Who should they delegate to?;
13. Discuss how delegation enables them to increase their “green space;”
14. In conclusion, at the end of the day (session 6) the participants will be tasked to identify what management tasks they think they can shift and to whom.
## Roles and Responsibilities of Leaders and Managers

<table>
<thead>
<tr>
<th>Leaders</th>
<th>Managers</th>
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<tbody>
<tr>
<td>Strategic planning</td>
<td>Organizing work</td>
</tr>
<tr>
<td>Inspires team</td>
<td>Scheduling activities</td>
</tr>
<tr>
<td>Does trouble shooting</td>
<td>Prepare reports</td>
</tr>
<tr>
<td>Creates vision</td>
<td>Account for spending</td>
</tr>
<tr>
<td>Promotes vision</td>
<td>Prepare budgets</td>
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<tr>
<td>Overcomes resistance to change</td>
<td>Track progress</td>
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<tr>
<td>Motivates people</td>
<td>Maintain order</td>
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<tr>
<td>Guides team</td>
<td>Follow procedures</td>
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<tr>
<td>Identify opportunities</td>
<td>Define tasks</td>
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<tr>
<td>Celebrates success</td>
<td>Manage risk</td>
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</table>

## Characteristics of Leaders and Managers

<table>
<thead>
<tr>
<th>Leaders</th>
<th>Managers</th>
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</thead>
<tbody>
<tr>
<td>Ingenuity</td>
<td>Dependable</td>
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<tr>
<td>Big-picture approach</td>
<td>Detail-oriented</td>
</tr>
<tr>
<td>Inspiring</td>
<td>Diligent</td>
</tr>
<tr>
<td>Helping others</td>
<td>Dutiful</td>
</tr>
<tr>
<td>Bold</td>
<td>Security</td>
</tr>
<tr>
<td>Risk taker</td>
<td>Traditional</td>
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<tr>
<td>Gratitude</td>
<td>Discipline</td>
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<tr>
<td>Guidance</td>
<td>Organize</td>
</tr>
<tr>
<td>Adaptable</td>
<td>Follows</td>
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<tr>
<td>Flexible</td>
<td>Tracks</td>
</tr>
<tr>
<td>Conviction</td>
<td>Maintain</td>
</tr>
</tbody>
</table>
“Green Zone” slide

Worker | Manager | Leader
---|---|---
Planning | Directing | Knowing

0 | 20 | 40
20 | 40 | 60
40 | 60 | 80
60 | 80 | 100
80 | 100 | 120
Session 5: Leadership Styles

Session Summary: This session begins with a presentation of John Adair’s model of Action Centered Leadership which outlines the various tasks a leader must consider in leading organizations, teams and the individuals. This session will build upon the discussions of the previous session differentiating management from leadership. In discussing the tasks, various qualities and traits of a leader will arise. Prior to the workshop, participants are asked to complete an on-line personality test (DISC) to determine their style of leadership. The results they bring with them, the discussion of Adair’s Action Centered Leadership as well as the presentation on the 15 Qualities of a Good Leader will foster discussions on what the participants feel are most essential in their context, the areas in which they feel confident as well as the areas they would like to strengthen. The concept of conflict resolution should be introduced here, with a follow up discussion in the session on Day 2 – National Level Coordination and Leadership.

Objectives:
1. To introduce a model for leadership (Adair’s) and to discuss the various responsibilities for completing tasks, leading teams and leading individuals;
2. To discuss the qualities of a good leader;
3. To identify the types of leaders, their strengths and weaknesses and the areas of improvement they would like to pursue.

Duration: 90 minutes

Materials: PowerPoint Presentations: Adair’s Action-Centered Leadership, 15 Qualities of a Good Leader (see following pages)

Handouts: 15 Qualities of a Good Leader

Training Procedure:
1. Begin the first presentation by saying that there are many different perspectives on leadership but this session will use a simple model by John Adair, one of the foremost theorists on leadership and currently the Chair of Leadership Studies United Nations System Staff College in Turin.
2. Present the schema of Action-Centered Leadership discussing the various points starting with the role of a leader in achieving tasks, leading groups and leading individuals.
3. During the presentation elicit comments from the participants as to their understanding, agreement, disagreement and experience;
4. Ask the participants from their perspective as national trachoma/NTD coordinators, what challenges they face in being able to provide action-centered leadership to eliminate trachoma as a blinding disease;
5. Based on the Adair presentation, ask the participants what they feel the best qualities of a leader are, noting the responses on the flip chart;
6. Present the PowerPoint 15 Qualities of a Good Leader again eliciting from the participants as to their agreement, disagreement and experience.
7. Pass out the handout of the 15 Qualities of a Good Leader and ask the participants what 2 areas they would most like to improve in, advising them in the next session they will be able to think more about what actions will be needed to do so.
8. Conclude the session by introducing the concept of conflict resolution and explore the experience the participants have had in this area. Discuss how conflict resolution may differ from how a manager resolves conflicts and how a leader does.
Adair’s Action-Centered Leadership

Responsibilities for Achieving Tasks
• Define the task – determine the vision and direction of the group.
• Identify the resources (people, process, and tools) to achieve the task.
• Create a plan – measurements, timescales, deadlines, tactics etc.
• Establish roles and responsibilities within the team.
• Delegate work to team members.
• Set the standards the team must meet: reporting deadlines, quality expected, etc.
• Monitor, control, and maintain the overall performance against the plan.
• Report on the progress the team is making towards its objective.
• Assess and then recalibrate the plan and targets as necessary.

Responsibilities for Leading or Supervising the Group
• Establish and communicate the standards for both behaviour and performance.
• Establish key soft area aspirations for the group: style, culture, ethics, etc.
• Maintain discipline and the focus on objectives.
• Watch for and then facilitate resolution of conflicts within the group. Additionally, you will need to watch for conflicts between the group and external parties.
• Monitor the overall balance of the group. Fix gaps in the mix where appropriate.
• Develop morale, team working, cooperation, and the team’s spirit. Build a common sense of purpose.
• Provide training to the group as appropriate.
• Build the maturity and capability of the group by slowly but steadily increasing authority and freedom. Discuss and communicate with the group as this happens.
• Identify and develop roles within the group.
• Develop communications both within the group and externally to be appropriate, timely, and effective.
• Engage with the group to give feedback to them and receive feedback from them.

Responsibilities for Leading or Supervising Individuals
• Aim to understand the people who make up your team. Understand their personal situations, ambitions, strengths, weaknesses.
• Be sensitive to personal issues.
• Provide support to individuals.
• Agree and communicate an individual’s level of responsibility, what they are accountable for, and their targets.
• Give recognition and praise to individuals. Do this liberally.
• Reward individuals: a financial reward, increased status, or increased responsibility.
• Work with individuals to plan how to develop their maturity and capability, through training, increased authority, increased responsibility, etc.
15 Qualities of a Successful Leader

1. Make Others Feel Safe to Speak-Up
   • Successful leaders deflect attention away from themselves and encourage others to voice their opinions.
   • They make others feel safe to speak-up and share their perspectives and points of view.
   • They create an approachable environment.

2. Make Decisions
   • They either facilitate the dialogue to empower their colleagues to reach a strategic conclusion or they do it themselves.
   • They focus on “making things happen” at all times – decision making activities that sustain progress.

3. Communicate Expectations
   • Successful leaders are great communicators, when it comes to “performance expectations.”
   • They remind their colleagues of the organization’s core values and mission statement – ensuring that their vision is properly translated and actionable objectives are properly executed.

4. Challenge People to Think
   • Leaders understand their colleagues’ mindsets, capabilities and areas for improvement.
   • They challenge their teams to think never allowing them to get comfortable and enabling them with the tools to grow.
   • If you are not thinking, you’re not learning new things. If you’re not learning, you’re not growing – and over time becoming irrelevant in your work.

5. Be Accountable to Others
   • Successful leaders allow their colleagues to manage them. This doesn’t mean they are allowing others to control them – but rather becoming accountable to assure they are being proactive to their colleagues needs.
   • Beyond just mentoring and sponsoring selected employees, being accountable to others is a sign that your leader is focused more on your success than just their own.

6. Lead by Example
   • Successful leaders practice what they preach and are mindful of their actions.

7. Measure & Reward Performance
   • Great leaders always have a strong “pulse” on performance.
   • They are active in acknowledging hard work and efforts (no matter the result).
   • Successful leaders never take consistent performers for granted and are mindful of rewarding them.

8. Provide Continuous Feedback
   • Employees want their leaders to know that they are paying attention to them and they appreciate any insights along the way.
   • Successful leaders always provide feedback and they welcome reciprocal feedback by creating trustworthy relationships with their colleagues.

9. Properly Allocate and Deploy Talent
   • Successful leaders know their staff’s talent and how to use it.
   • They are experts at activating the capabilities of their colleagues and knowing when to deploy their unique skill sets given the circumstances at hand.

10. Ask Questions, Seek Advice
    • Successful leaders ask questions and seek advice all the time.
    • They have a deep desire to learn new things because of their commitment to making themselves better through the wisdom of others.

11. Problem Solve; Avoid Procrastination
    • Successful leaders tackle issues head-on and know how to identify the heart of the issue.
    • They don’t procrastinate and thus become incredibly proficient at problem solving.
    • They learn from and don’t avoid uncomfortable circumstances.

12. Positive Energy & Attitude
    • Successful leaders create a positive and inspiring workplace culture.
    • They bring an attitude that motivates their colleagues to take action.
    • They don’t allow failures to disrupt momentum.

13. Be a Great Teacher
    • Successful leaders never stop teaching because they are self-motivated to learn themselves.
    • They use teaching to keep their colleagues well-informed and knowledgeable.

14. Invest in Relationships
    • Successful leaders don’t focus on protecting their domain – instead they expand it by investing in mutually beneficial relationships. Successful leaders associate themselves with “lifters and other leaders” – the types of people that can broaden their sphere of influence. Not only for their own advancement, but that of others.
    • Leaders share the harvest of their success to help build momentum for those around them.

15. Genuinely Enjoy Responsibilities
    • Successful leaders love being leaders – not for the sake of power but for the meaningful and purposeful impact they can create.
    • When you have reached a senior level of leadership – it’s about your ability to serve others and this can’t be accomplished unless you genuinely enjoy what you do.

Taken from: Forbes.Com – The Most Successful Leaders Do 15 Things Automatically, Every Day
http://www.forbes.com/sites/glennlopis/2013/02/18/the-most-successful-leaders-do-15-things-automatically-every-day/#6824e3957b26
Session 6: Individual Work on Skills Development to Move into the Green Zone

Session Summary: This session is designed to allow the participants to synthesize the learnings of the first day into what they need to focus on to strengthen their leadership capacity to assure their country’s achievement of GET 2020 goals. It is the first step in developing their leadership plan of action.

Objective: To allow the participants to begin formulating what they need to do to strengthen their ability to lead by delegating management responsibilities and building upon their existing repertoire of leadership qualities.

Duration: 90 minutes

Materials: Individual computers

Handouts: (at end of the session) “11 Leadership Mistakes”

Training Procedure:
1. Remind the participants that one of the outputs of the workshop is the development of an individual leadership action plan, a guide for them to take back to their countries and further develop their leadership skills;
2. Summarize the various Day 1 sessions with emphasis on the shift into the “Green Zone;”
3. Ask the participants to answer the following questions:
   a. What current management tasks do they currently have that could be delegated?
   b. To whom would they delegate these tasks? (names, current position, organization)
   c. What will they need to do in order to be able to delegate these tasks?
   d. In creating more opportunity to lead, what leadership skills would they like to strengthen?
4. Before adjourning for the day, give the participants the sheet “11 Leadership Mistakes” and ask the participants to select one of the mistakes that they have made and be ready to discuss this mistake during the Day 1 review at the beginning of Day 2.

Case Study

Participants at recent leadership strengthening exercises often report that their biggest headache is developing budgets for various meetings, workshops, and interventions. Drafting budgets is often not a skills-set national coordinators have high comfort level with and it can be quite time-consuming. They would like to delegate this task to others but often there is no one on-staff to delegate this task to and other sectors in the Ministry of Health (MoH) who have the skills often are not available. One particular option that percolated up was the suggestion that others, outside the MoH could assist; specifically, this referred to engagement with NGO partners who generally have someone on staff with the skills in budget development. Participants listed advantages and disadvantages.

Advantages including strengthening relationships with NGO partners, having budgets developed in a timely fashion, empowerment of national staff, and more effective use of leader time. Potential disadvantages included perception that the MoH is not committed to the programme and perception by the NGO partner that it has some leverage over the national coordinator. Participants felt that the disadvantages do not out-weigh the advantages and it was their role to ensure that neither happened.

In considering your own country and partners, would this work for you? What would the challenges be? What advantages and disadvantages in addition to those listed above would you need to balance?
11 Leadership Mistakes to Avoid

1. Attempt to set your own standard of what is right and wrong
2. Fail to delegate decision making
3. Expect uniformity of opinions
4. Fail to give praise
5. Not to yield on unimportant decisions
6. Look for perfection in actions
7. Worry ourselves and others about what can’t be remedied
8. Believe only what our finite minds can grasp
9. Fail to make allowances for the inexperience or weaknesses of others
10. Consider impossible what we cannot ourselves perform
11. Not to help everybody wherever, however, and whenever we can
Day 2

Session 1: Review of Day 1

Session Summary: This session is to review Day 1’s discussions and to allow the facilitators to assess what the participants have gotten out of it while also allowing the participants to bring up any points they would like clarification on or would like to discuss more.

Objectives:
1. To provide the participants with the opportunity to discuss in more depth the main points from the previous day’s sessions;
2. To provide an opportunity for the facilitators to assess the participants’ understanding of the major points from the previous day;
3. Review of the “11 Leadership Mistakes.”

Duration: 30 minutes

Materials: Flip chart

Handouts: None

Training Procedure:
1. Ask the participants what they felt were the most salient points of the previous day’s sessions, noting responses on the flip chart;
2. Ask the participants what points were new or different i.e. aspects they had not previously considered within their roles as national trachoma/NTD coordinators. Write the responses on the flip chart or on half-sheets of paper that can be collected. Did other participants have similar reactions? Ask for personal experience to better illustrate their reaction.
3. During the discussion, the facilitator(s) should use the opportunity to reinforce the main points such as the need to allow more time in their position for leadership (green zone) and less for management.
4. Ask each participant one “leadership mistake” they have made and why they think it was a mistake. The goal is to help people understand that all leaders make mistakes—the important thing is to learn from one’s mistakes.
Session 2: A Leader's Role in Planning

Session Summary: One of the key roles a leader plays is in planning and working with the team to achieve the agreed upon goals. In the context of trachoma, this is developing an overall plan to guide the national program from the present to the target elimination date keeping in mind the need to embrace all four components of the SAFE strategy. In many countries, this takes the form of the Trachoma Action Planning (TAP). This session will focus on three areas: a) the roles and responsibilities of leaders in planning, b) how leaders can build consensus in setting targets and activities and c) how leaders can update target-setting and activities as needed to ensure everything stays on track. The session is conducted as a brainstorming activity.

Objectives:
1. To identify the role a leader plays in overall planning and gain an understanding of the differences between strategic planning and implementation planning;
2. Within the personal experiences and work contexts of each participant, discuss how they may more effectively demonstrate leadership.

Duration: 60 minutes

Materials: Flip chart

Handouts: List of data/information needed for planning for trachoma elimination (on next page)

Training Procedure:
1. The facilitator introduces the session by discussing the GET 2020 goals and the need to make sure that each national program has a path delineated of how they are going to eliminate blinding trachoma by 2020 or the designated target year. Advise the participants that the various aspects in planning may differ country to country depending on their progress to date; the organization of the MOH, etc.;
2. Ask the participants what they feel their 2-3 most important roles and responsibilities are in planning how to achieve GET 2020, writing the response on the flip chart; the idea will be to get the participants to appreciate that their role focuses on strategic planning not on implementation planning, which should be developed by managers and programme implementers;
3. Following the discussion on roles and responsibilities, the facilitator points out that with an integrated strategy, partnerships will be critical (see session 3-4 of Day 2) and thus developing consensus among the stakeholders as to the activities and targets along the path to elimination will be paramount;
4. The facilitator hands out the list of data/information needed for planning and reviews with participants. The goal is to ensure that participants understand that planning without data is useless and that it takes time to collect and compile the data properly;
5. Note that the amount of F&E data on the information sheet is quite limited; specifically discuss how leadership of F&E planning may be different from leadership for S&A planning;
6. The final brainstorming session is on updating targets and monitoring the progress to GET 2020 and the individual participants’ experience with that area. Ask the participants if their country has completed the Trachoma Action Planning (TAP) and if so what they remember about the TAP being a living document and specifically what is their role in keeping the TAP as a “living” document;
7. Ask the participants a) how they plan to make sure they receive the necessary information in a timely fashion from partners; b) how often they will be updating their progress; and, c) what mechanism they will use to update the progress to ensure all partners are kept informed and that further planning can take place.
Data and Documents to be Collected Prior to a TAP workshop

Documents

- Existing national strategic plans on trachoma control (previous TAP with any updates)
- Existing NTD master plans
- Existing plans within the Ministries of Education related to school health
- Existing plans within Ministries of Water and/or Sanitation related to hygiene and sanitation plans

Data on trichiasis

- Number and placement of trichiasis surgeons and year (re) trained
- Number of trichiasis surgeries done in each district in the years AFTER the baseline mapping was undertaken
- The annual productivity of individual surgeons
- Number and location of TT training facilities (trainers, trainees, etc.)

General data

- List of districts and their population and map(s) showing districts
- TF and TT data for surveyed districts (including year of survey)
- TF and TT data from impact assessments
- Plans for baseline mapping, impact assessments and surveillance
- Information on latrine and safe water coverage by district (if possible)

Data on MDA

- MDA undertaken in each of the districts (year by year) showing coverage
- Use coverage data to create a bar chart showing coverage by year (to identify trends)
### Session 3: National Level Coordination and Leadership

**Session Summary:** Following up on the previous session and the need to build partnerships and develop consensus so all stakeholders share a similar vision, this session explores coordination and leadership to a greater level of detail. The basis of this session will be stakeholder mapping and defining for each stakeholder what they have to offer the elimination efforts and how to get the most out of the partnership; also what does the partner need to continue the partnership. Identifying what needs to change (and what things, even though they may pose an obstacle, cannot be changed) and how to effect that change. This will also be a time to identify potential stakeholders and how they will engage with them.

**Objectives:**

1. To identify the various types of stakeholders within the national trachoma programme, what is desired from the stakeholders, what the stakeholders need from the leader, and the challenges of leading and coordinating multiple partners.
2. To identify the factors of facilitating stakeholder engagement and the obstacles that may bring about conflict and how reconciliation might be achieved.
3. To identify new potential stakeholders and how to engage them.

**Duration:** 60 minutes

**Materials:** Stakeholder sheet

**Handouts:** Stakeholder template (see next page)

**Training Procedure:**

1. Distribute the stakeholder sheet (and word file for those wanting to put on computer) to each individual. If more than 1 person from the same country are attending they can work as a group;
2. Discuss the type of stakeholders (donors, NGOs, people receiving the services, other government agencies, private businesses);
3. Review the sheet to make sure all participants understand the various categories;
4. Instruct the participants they have 20 minutes to identify the 2-3 most important stakeholders by each of the types (noting that some types may remain blank), what they want from those stakeholders, and what those stakeholders want from them. Finally, they are to identify 2 new potential stakeholders;
5. After 20 minutes, the participants will report to the large group;
6. Inform the participants that during the late afternoon session (Session #7) they will then be tasked with making a plan for how to engage with the proposed new stakeholders.
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<thead>
<tr>
<th>Type of stakeholder*</th>
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<tr>
<th>Name of stakeholder</th>
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<tr>
<th>What do you need and want from this stakeholder?</th>
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<tr>
<th>What does this stakeholder need and want from you?</th>
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<tr>
<th>What steps can you take to strengthen your relationship with this stakeholder?</th>
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* Type of stakeholder: donor, NGO, other government institution, private business/business person, major religious leader, people receiving the service
**Session 4: Case Study on Partnerships**

**Session Summary:** In this session the participants are presented with a case study through which they will individually read and then as a group answer various questions that should stimulate discussion. The session concludes with a discussion and PowerPoint presentation on factors that enable strong partnerships.

**Objective:** To provide an opportunity to the participants to analyze their national situation pertaining to partnerships for trachoma elimination.

**Duration:** 60 minutes

**Materials:** PowerPoint presentation on partnership

**Handouts:** Case Study (next page)

**Training Procedure:**
1. Distribute a copy of the case study to each person;
2. Ask the participants to read through the case study;
3. After 10 minutes, making sure everyone has finished, pose the case study questions to the participants trying to tie various answers to one another and generate a discussion;
4. Ask the participants if the case study has any direct relevance to their own situation as leaders of the effort to eliminate blinding trachoma in their countries.
5. Ask the participants (based on their experience) what are the elements that make a partnership successful; writing responses on the flip chart.
6. The presentation on partnership, which should reinforce items mentioned by the participants, is given.
Case Study

Mandu is a region with 1.2 million people in the country of Linkula (population 28 million). Mandu has one eye unit at the regional hospital in Maachini. There are 4 districts, however, recent surveys indicate that trachoma is only endemic in Chinimaa District and Tsonga District.

<table>
<thead>
<tr>
<th>District</th>
<th>Population</th>
<th>TF%</th>
<th>TT%</th>
<th>Estimated TT Backlog</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chinimaa</td>
<td>200,000</td>
<td>18.7%</td>
<td>0.8%</td>
<td>880</td>
</tr>
<tr>
<td>Tsonga</td>
<td>300,000</td>
<td>12.3%</td>
<td>0.3%</td>
<td>495</td>
</tr>
</tbody>
</table>

The regional hospital has one ophthalmologist (Dr. Ndola). She does very few (less than 10) trichiasis surgeries per year at the hospital. Dr. Ndola works hard and has a good team supporting her but she has no outreach programme. There is one ophthalmic nurse in each of the district hospitals but none of them have had much training in trichiasis surgery since their initial training was conducted in the capital city where there is no trachoma.

In the eastern part of Maachini Region, Chinimaa District Hospital receives periodic visits from a trichiasis surgical team (every 6 months for the past 3 years) from Big Mission Hospital in the neighboring region. The Big Mission Hospital team (which has support from a Canadian NGO) spends about 5 days per visit, doing about 30 operations each visit. The ophthalmic nurse in Chinimaa assists the visiting team.

In Alikuna, the capital of Linkula, there is a group of well-meaning people who are part of the Impala Club. They want to help blind people. One of them is originally from Central District. They get funding to conduct a trichiasis camp, bringing an ophthalmic nurse from Alikuna to the camp. Dr. Ndola only learns about the camp later when she finds that some people are not pleased with the outcome of the trichiasis surgeries done during the camp.

The Impala Club has no plans to return to this area; however, you hear that they want to go to Chinimaa District. You are worried about the impact this may have on uptake of trichiasis surgical services. Also, you recognize that none of the groups doing surgeries has submitted reports so you do not know the coverage of the existing services.

You are the national coordinator. What are you going to do?
Session 5: The Impact of Health Systems on Leadership and Management

Session Summary: The GET 2020 looks to eliminate trachoma as a blinding disease throughout a country. Generally this is led and managed by persons at the national level. However the degree of decentralization of the health system will impact on how effectively a person can lead and manage a national initiative when decision-making may reside at lower levels such as the province, region, state, district, etc. This session will examine the challenge this poses for the participants working in their respective countries. The session will start with a discussion of what decentralization means. Participants will be given a diagram with centralized at one end and completely decentralized at the other end. After completing the diagram people will be asked what implications this has on leadership approaches.

Objective: To identify the opportunities and challenges various health systems and their degree of devolution pose to a national level leader and to discuss possible strategies to lead in a decentralized system

Duration: 60 minutes

Materials: None

Handouts: Sheet showing the range from completely centralized to completely decentralized (see below)

Training Procedure:
1. Start by discussing decentralization and what it means. Have the participants give examples from their own countries.
2. Following the discussion, the facilitator will hand out the sheet and participants will mark where their country is situated. This will only take 5 minutes. The facilitator then puts the findings on poster paper so everyone can see where countries are along the range.
3. The facilitator then facilitates a discussion on how the various systems impact a person’s ability to lead to achieve national elimination of trachoma looking at both the opportunities as well as the challenges. Key points should be documented on flip chart paper.

Centralized to Decentralized Health Systems

<table>
<thead>
<tr>
<th>Centralized</th>
<th>In process</th>
<th>Decentralized</th>
</tr>
</thead>
<tbody>
<tr>
<td>(All decision making resides at central level)</td>
<td></td>
<td>(All decision-making resides at District Level)</td>
</tr>
</tbody>
</table>
Session 6: Adaptation and Adoption of Preferred Practices

Session Summary: Much work has been conducted over the past years to document preferred practices for both the distribution of azithromycin and the implementation of trichiasis management programs. These evidence-based preferred practices have been distilled into a number of guides and manuals for countries to use. The preferred practices are distilled from the experiences in a number of endemic countries but it is recognized that not all of them will directly apply to any one country. For some participants this session will be the first time to introduce the various documents that exist under the ICTC umbrella. Other participants have already started the process of adaptation and adoption. The session will focus on getting participants to discuss how the process of adaptation and adoption worked; the challenges, how were they overcome, etc.

Objective: To begin the process of adapting and adopting ICTC manuals and guides for preferred practices in trachoma elimination.

Duration: 60 minutes

Materials: Presentation on ICTC process of adapting and adopting preferred practices; PowerPoint slide listing the available materials

Handouts: List of various ICTC manuals and guides (next page)

Training Procedure:

1. The facilitator presents a brief introduction of the S&A preferred practices work that ICTC has been engaged in. The focus of the presentation is on how preferred practices need to be adapted to the local context and then adopted in national programmes and that, by their very nature, preferred practices need to change as more evidence and experience becomes available;

2. The presentation on how adaption and adoption is done followed by fielding any questions the participants may have;

3. Following any needed clarification, the list of the various documents is presented and copies of the list are distributed to the participants;

4. Depending upon the group, participants with experience adapting and adopting will be asked to discuss their experiences (they should be notified about this on the previous day);

5. The participants are requested to choose the preferred practice manual they feel will pose the biggest challenge to them within their own context to adapt and/or adopt;

6. They will be tasked (Session 7) with developing ideas and strategies of how they could accomplish this in their country.
## ICTC Manuals and Guides

<table>
<thead>
<tr>
<th>Resource</th>
<th>Language</th>
<th>Format</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>All You Need for F&amp;E</td>
<td>English, French</td>
<td>pdf</td>
<td><a href="http://www.trachomacoalition.org/sites/default/files/content/resources/files/All%20you%20need%20for%20FandE%20-%20a%20toolkit%20for%20planning%20and%20partnering_web_incl_tools_0.pdf">http://www.trachomacoalition.org/sites/default/files/content/resources/files/All%20you%20need%20for%20FandE%20-%20a%20toolkit%20for%20planning%20and%20partnering_web_incl_tools_0.pdf</a></td>
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<tr>
<td>Trichiasis Counselling Guide</td>
<td>English</td>
<td>pdf</td>
<td><a href="http://www.trachomacoalition.org/sites/default/files/content/resources/files/ICTC%20TrichiasisCounsellingGuide%20022616%20FINAL.pdf">http://www.trachomacoalition.org/sites/default/files/content/resources/files/ICTC%20TrichiasisCounsellingGuide%20022616%20FINAL.pdf</a></td>
</tr>
<tr>
<td>Training Curriculum for Trichiasis Case Identifiers</td>
<td>English</td>
<td>pdf</td>
<td><a href="http://www.trachomacoalition.org/sites/default/files/content/resources/files/ICTC%20TrichiasisCaseFindersTrainingCurriculum%20111915%20v6.pdf">http://www.trachomacoalition.org/sites/default/files/content/resources/files/ICTC%20TrichiasisCaseFindersTrainingCurriculum%20111915%20v6.pdf</a></td>
</tr>
<tr>
<td>Zithromax MDA Trainers Guide</td>
<td>English</td>
<td>MS word</td>
<td>Coming soon</td>
</tr>
<tr>
<td>Training of Trainers for Trichiasis Surgeons</td>
<td>English</td>
<td>pdf</td>
<td><a href="http://www.trachomacoalition.org/sites/default/files/content/resources/files/Training%20of%20Trainers%20for%20Trichiasis%20Surgeons.pdf">http://www.trachomacoalition.org/sites/default/files/content/resources/files/Training%20of%20Trainers%20for%20Trichiasis%20Surgeons.pdf</a></td>
</tr>
<tr>
<td>Trichiasis Supervision Training Manual</td>
<td>English</td>
<td>MS word</td>
<td>Coming soon</td>
</tr>
<tr>
<td>Zithromax MDA Supervision Training Manual</td>
<td>English</td>
<td>MS word</td>
<td>Coming soon</td>
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Session 7: Moving Forward

Session Summary: This last session of Day 2 Participants will be given time to synthesize the various points of the past two days and note down what activities they propose to undertake after returning home. These activities should include how to free up more of their time for leadership activities; the various characteristics of a good leader they would like to start to embrace more fully; the work to build up and strengthen partnerships and the how they will begin the process of adapting and adopting the preferred practices materials. This session will allow them to start considering what they need to do when they get back to their country (what they will do, who they are going to work with, this is how it will be done, when, what capacity building they will need, why it is important). This session will be complemented on Day 3 by a session on change management as changes are likely needed to achieve GET 2020 goals.

Objective: To allow time for the participants to synthesize the various learning points and begin prioritizing what they will need to do upon their return.

Duration: 30 minutes

Materials: None

Handouts: None

Training Procedure:
1. The facilitator reviews the major points of the day;
2. The facilitator comments that how in most countries, in order to achieve elimination targets, changes in how programs are led and managed will need some change;
3. The facilitator advises the participants that this session will focus on three topics: [a] how they will engage with 1-2 potential stakeholders, [b] how they will strengthen existing partnerships, and [c] how they will ensure that preferred practices get adapted and adopted;
4. The participants are also invited to stay in the training room to work or to retire to their hotel rooms to begin thinking about their overall plan. They should consider potential responses to the following questions. The questions should be presented on a PowerPoint slide or on flip chart paper and time should allocated to make sure the responses we are looking for are clear:
   a. What am I going to do when I return to improve my leadership?
   b. Who am I going to work with to make the necessary changes?
   c. What steps do I need to take and when will it happen?
   d. What additional capacity building will I need and what capacity building will those around me need?
   e. How will these changes move me further to achieving GET 2020 goals?
Day 3

Session 1: Review of Day 2

Session Summary: This session is to review Day 2’s discussions and to allow the facilitators to assess what the participants have learned while also allowing the participants to bring up any points of clarification or to discuss more.

Objectives:
1. To provide the participants with the opportunity to discuss in more depth the main points from the previous day’s sessions;
2. To provide an opportunity for the facilitators to assess the participants’ understanding of the major points from the previous day.

Duration: 30 minutes

Materials: Flip chart

Handouts: None

Training Procedure:
1. Ask the participants what they felt the most salient points of the previous day’s sessions were noting the responses on the flip chart;
2. Ask the participants how much progress they were able to make on their leadership plan;
3. Elicit from the participants any concerns or questions they have about the plan.
Session 2: Change Management

Session Summary: In order to achieve GET 2020, endemic countries will have to adopt a number of evidence-based preferred practices that may seem to challenge the status quo of what countries have been doing over the past years. The need to change is often met with concerns, fear, and at times resentment. It challenges current precepts and asks institutions, organizations and individuals to leave their comfort zone to learn and implement new practices. This session introduces the participants to the concept of managing change within the context of eliminating trachoma as a blinding disease and to help prepare them to begin to effect change upon their return.

Objectives:
1. To introduce the participants to the concept of change management;
2. To frame these concepts within the context of trachoma control within their own countries and the changes that may need to be implemented to achieve GET 2020;
3. To develop a preliminary plan to introduce change within their respective Ministries and among their partners.

Duration: 1 hour 15 minutes

Materials: Flip chart, Change Management PowerPoint presentation (next page)

Handouts: None

Training Procedure:
1. Introduce the session by asking the participants what the term “change management” means to them;
2. After a general discussion of change management, ask the participants to reflect on this concept within the context of the elimination of blinding trachoma;
3. Present Slide 2 and discuss the three definitions in light of what the participants have put forth;
4. Present Slides 3 and 4, discussing first the Change Curve and then the curve with Managed Change;
5. Introduce Slide 5, by providing a bit of background on Kurt Lewin noting that he is considered one of the pioneers of social, organizational and applied psychology and one of the first to focus on group dynamics and organizational development;
6. Present Lewin’s “Unfreeze, Change, Refreeze Model (Slide 5) discussing the various points which are further detailed in Slides 6-8;
7. Slide 9 sums up these points;
8. Present the questions on Slide 10. If time is available, ask the individuals or country teams, to answer the questions on paper or their computers. If time does not allow, ask participants to respond giving examples from their own context;
9. Close the session by noting that the answers to these questions will be important in terms of their moving forward leading their respective countries’ trachoma elimination efforts.
CHANGE MANAGEMENT

What Changes Are Necessary in Your Country to Reach GET 2020 Goals?

Change Management is an approach to transitioning individuals, teams and organizations to a desired future state.

In the context of project management, change management may refer to the introduction, approval of and compliance with changes in how a project is managed and implemented to achieve the desired outcome.

In the context of trachoma, change management refers to identifying and managing the changes necessary to allow a country to achieve the elimination of blinding trachoma by the target date.
Unfreezing

- Determine what needs to change to achieve GET 2020 goals
- Ensure there is strong support from above
  - Identify and win the support of key people
  - Frame the issue as one of organization-wide importance
  - Create the sense of urgency – 2020 is only 5.5 years away
- Create the need for change
  - Create a compelling message as to why change is needed
  - Define and use your vision and strategy as supporting evidence
  - Communicate the vision in terms of the change required
  - Emphasize the why
- Manage and understand the doubts and concerns
  - Remain open to concerns and address them in terms of the need to change
Change/Transition

- Communicate often
  - Do so throughout the planning and the implementation of the changes
  - Describe the benefits
  - Cite the evidence
  - Explain how the changes might affect those involved in trachoma control
  - Prepare everyone for the future

- Dispel Rumors
  - Answer questions openly and honestly ex. Epilation as an alternative management tool
  - Deal with problems immediately
  - Relate the need for change back to operational necessities

- Empower action
  - Provide opportunity for involvement
  - Generate short-term wins to reinforce the change
  - Negotiate with external stakeholders

Refreezing

- Anchor the changes into the culture
  - Identify the factors that will support and sustain the change
  - Identify what barriers exist to sustaining the change

- Develop ways to sustain the change
  - Ensure leadership support
  - Create a reward system
  - Establish feedback systems
  - Gather the evidence
  - Adapt the organizational structure as needed

- Provide support and training
  - Keep everyone informed and supported
Key Points

**Sponsorship:** Ensuring there is active sponsorship for the change at higher levels of the ministry of health and engaging this/these person(s)

**Buy-in:** Gaining buy-in for the changes from those involved and affected either directly or indirectly

**Involvement:** Involving the right people in the design and implementation of the changes to make sure the right changes are made

**Impact:** Assessing and addressing how the changes will affect people

**Communication:** Telling everyone who’s affected by the changes and responding to questions and concerns

**Readiness:** Getting people ready to adapt the changes by ensuring they have the right information, the necessary training and any support they require

**External to the MOH:** Ensuring that key partners understand the changes and agree to support any new directions

---

**Key Questions for Managing Change for Trachoma Elimination**

What are the critical changes needed in your particular situation?

Who would you seek as a sponsor or champion of the change?

Who would you need to get buy-in from to assist with implementation of change?

What impact do you anticipate and whom would it impact?

How would you manage your external partners?
Session 3: Moving Forward – Leadership Plans

Session Summary: Following the last session of Day 2 and the previous session on Change Management, the participants are asked to put down their thoughts of how they are going elevate their role as the leader and how they will go about it. If time is available the participants may be asked to present their plans but more critical is that they think through what needs to be done. This can be accomplished by the facilitators discussing individually with the participants rather than having presentations. The key questions for them to answer are found below.

Objective: To provide the time for the participants to begin developing their leadership plans to implement upon their return home.

Duration: 1 hour 30 minutes

Materials: Individual computers

Handouts: None

Training Procedure:
1. Discuss with the participants the progress they made in thinking about the questions posed during the previous day’s last session;
2. By sampling their responses to the questions, the facilitator will be able to detect any confusion as to what the questions are seeking and can clarify;
3. The participants are then asked to begin work on their plan. The facilitators should work with the individual participants to a) make sure they are on the right track and b) to pose questions to further their critical thinking;
4. Present a summary of the questions;
5. The facilitator should check on progress and assess whether to have presentations by the participants or to have them continue with individual work.

Key Questions for Individual Leadership Plan

What are the current management tasks that you can delegate?

To whom would you delegate these tasks? (person, position, organization)

What will you need to do in order to be able to delegate these tasks?

If new staff would be needed, what steps will you take to hire them?
  • When will these steps be taken?

In creating more opportunities to lead what leadership skills would you like to strengthen?

What steps will you take when you return to increase your leadership role?
  • When will these steps be taken?

What steps are you going to take to improve coordination and partnership in your country?
  • When will you do this?

What new partners or stakeholders would you like as part of your programme?
  • What steps would you take to engage those partners?
  • When will you do this?

What are the other critical changes are needed to strengthen efforts to eliminate trachoma?

How would these changes help achieve GET 2020 goals?

From whom would you need to get buy-in in the MOH to approve changes?

Who would you need to involve to assist with the implementation of change?

What impact do you anticipate and whom would it impact?

How would you manage your external partners to accept change?