



# THE TRANSFORMATION AGENDA OF THE WORLD HEALTH ORGANIZATION SECRETARIAT IN THE AFRICAN REGION 2015 -2020



World Health  
Organization

REGIONAL OFFICE FOR

Africa

# THE TRANSFORMATION AGENDA OF THE WORLD HEALTH ORGANIZATION SECRETARIAT IN THE AFRICAN REGION

## 2015–2020

WORLD HEALTH ORGANIZATION  
Regional Office for Africa  
Brazzaville • 2015

## AFRO Library Cataloguing-in-Publication Data

### The Transformation Agenda of the World Health Organization Secretariat in the African Region 2015 -2020

1. World Health Organization – organization and administration
2. Regional Health Planning – organization and administration
3. Organizational Innovation – organization and administration – methods
4. Program Development
5. Health Care Reform
6. Health Priorities
7. Personnel Management
8. Health Planning Support

I. World Health Organization. Regional Office for Africa II. Title

ISBN: 978-929023282-7 (NLM Classification: WA 541.1)

© WHO Regional Office for Africa, 2015

Publications of the World Health Organization enjoy copyright protection in accordance with the provisions of Protocol 2 of the Universal Copyright Convention. All rights reserved. Copies of this publication may be obtained from the Library, WHO Regional Office for Africa, P.O. Box 6, Brazzaville, Republic of Congo (Tel: +47 241 39100; Fax: +47 241 39507; [E-mail: afrobooks@afro.who.int](mailto:afrobooks@afro.who.int)). Requests for permission to reproduce or translate this publication, whether for sale or for non-commercial distribution, should be sent to the same address.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either express or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization or its Regional Office for Africa be liable for damages arising from its use.

Designed and Printed in the WHO Regional Office for Africa,  
Republic of Congo

---

# TABLE OF CONTENTS

<b>FOREWORD</b>	<b>v</b>
<b>1. INTRODUCTION</b>	<b>1</b>
1.1 Context	1
1.2 Process	2
<b>2. THE TRANSFORMATION AGENDA</b>	<b>3</b>
2.1 Objective, Focus Areas and Alignment with WHO Reform Programme	3
2.2 Expected Results	4
2.3 Strategic Actions	6
<b>3. IMPLEMENTATION, PERFORMANCE MONITORING AND RISK MANAGEMENT</b>	<b>21</b>
3.1 Transformation Champion and Core Teams	21
3.2 Performance Monitoring and Risk Management	22

---

## FOREWORD

When I stood before the WHO Regional Committee for Africa in November 2014, I declared: “I have carefully examined our deliberations in this assembly, examined the scientific literature and information coming through our Country Cooperation Strategies. I have identified five interrelated and overlapping priorities.” They are: (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. These are the priorities I commit myself to and would like to be held accountable for throughout my tenure as the WHO Regional Director for Africa.



The fifth priority embodies my vision for change in the way we do business. In pursuit of this agenda for change I have consulted staff members within and outside the African Region. I have also taken on board the views and suggestions of people outside WHO. The result of these consultations is this document entitled “The Transformation Agenda of the World Health Organization Secretariat in the African Region.” We will effect change across four focus areas namely: pro-results values; smart technical focus; responsive strategic operations; and effective communications and partnerships. Each of these focus areas will have a set of strategic actions with clear implementation timelines, and be closely aligned with the ongoing global reforms (managerial, programmatic and governance) of WHO.

The Transformation Agenda is 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; an organization that meets the needs

and expectations of its stakeholders. The single most important ingredient for success is the human resource capacity of WHO in the African Region. Strengthening capacities for enhanced effectiveness in the work of WHO at the country level will be pivotal to the success of The Transformation Agenda. I therefore count on the commitment and cooperation of all colleagues at all levels of WHO in the African Region and globally.

I am personally committed to leading and modelling this transformation. It is therefore my pleasure to invite you all — colleagues and stakeholders in the work of WHO in the African Region — to join me in the arduous but very rewarding journey to do more and achieve more for the people of the WHO African Region.

**Dr Matshidiso Moeti**



WHO Regional Director for Africa  
Brazzaville, Congo, May 2015

---

# 1. INTRODUCTION

## 1.1 Context

The new World Health Organization (WHO) Regional Director for Africa assumed office on 1 February 2015. This has raised the expectations of Member States and regional and global stakeholders regarding 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, timeliness and efficiency of actions in support of Member States, in line with the organization's mandate. The need to speed up reform was brought into sharp focus by the Ebola Virus Disease (EVD) epidemic in West Africa which raised widely-expressed concern about the response of WHO. Some of the issues that have come to the fore are the perceived misalignment of the structure and technical capacity of the WHO Secretariat to deliver on its mandate in the African Region and the need to improve human resource management and operations.

There is no doubt that the global community wants WHO to deliver on its mandate. Regional and global stakeholders would like 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.

*The Transformation Agenda of the WHO Secretariat in the African Region* (hereinafter referred to as “The Transformation Agenda”), which marks a commitment to positive change, is a programme for accelerating the implementation of WHO reform within the WHO African Region. It is a vision and a strategy for change aimed at facilitating the emergence of “the WHO that the staff and stakeholders want.”

## 1.2 Process

The Transformation Agenda is the product of wide-ranging consultations on the vision of the Regional Director, declared at both the Sixty-fourth session of the WHO Regional Committee for Africa (RC64) and the 136th session of the WHO Executive Board (EB 136). These consultations included the strategy meetings of a transition team and strategic reviews at the Regional Programme Meeting (RPM) of 9-11 April 2015 and at each budget centre.



---

## 2. THE TRANSFORMATION AGENDA

The objective, focus areas and their alignment with WHO reforms, expected results, and strategic actions of The Transformation Agenda are outlined below.

### 2.1 Objective, Focus Areas and Alignment with WHO Reform Programme

The objective of The Transformation Agenda from 1 February 2015 to 31 January 2020 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 communications and partnerships. The managerial, programmatic and governance themes of the ongoing WHO reform were factored into its development. Each of these focus areas is closely aligned with specific outcomes of the WHO reform programme.

#### *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.

#### *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.”

### ***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.

### ***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.

## **2.2 Expected Results**

For each of the four transformational focus areas, a set of expected results have been defined as follows:

### ***Expected Results for Pro-results Values:***

The expected results 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.

### ***Expected Results for Smart Technical Focus***

The expected results 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 (KM).

### ***Expected Results for Responsive Strategic Operations***

The expected results 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 GSM and Business Intelligence dashboards.

### ***Expected Results for Effective Communications and Partnerships***

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

## **2.3 Strategic Actions**

In order to achieve each expected result, strategic actions have been defined. The strategic actions for each area are organized along three levels of timeline: actions to commence within the first 100 days; strategic actions for the first two years (deadline, January 2017); and actions that will continue into the third, fourth and fifth years of the term of the WHO Regional Director for Africa (up to January 2020).

## Strategic Actions for Pro-results Values

The emergence of pro-results values in the work of WHO in the African Region will be facilitated through the following strategic actions:

### *First 100 days*

- ❑ Prepare and share a list of WHO and UN policy documents, with URLs, that promote transparency, accountability and ethical behaviour;<sup>1</sup>
- ❑ Develop an attestation form with which to document staff compliance with mandatory personal study of all relevant documents that promote transparency, accountability and ethical behaviour;
- ❑ Conduct and report on periodic budget centre reviews on the promotion of transparency, accountability and ethical behaviour;
- ❑ Identify change agents in each budget centre and train them in conflict management and resolution, team building, prevention of harassment and promotion of justice, and support them to model and drive change;
- ❑ Convene a special regional programme meeting (RPM) to engender buy-in, ownership and joint implementation of “The Transformation Agenda” by WHO Representatives (WRs), managers and team leaders.

---

<sup>1</sup> The list includes the following documents: Accountability Framework; Ethical principles and conduct for staff; ICSC code of conduct; Policy on whistle blowing; Policy on prevention of harassment; WHO internal control self-assessment check lists; WHO internal control guide; and WR Induction handbook.

## *Up to the end of January 2017*

- ❑ Identify a consultancy firm to design and implement a training programme and support systems on “Transforming Values and Managing Organizational Change” for cluster directors, WRs, managers, team leaders and other designated change agents;
- ❑ Develop and implement staff well-being and welfare programmes at all levels including: training on work-life balance; peer support/buddy mechanisms for team leaders and managers; and the operation of staff clinics, staff canteens and staff gyms;
- ❑ Encourage professional relationships between respective programme units in the Regional Office and selected peer institutions (departments in partner universities) with the aim of enhancing excellence through professional interactions with peers in the partner universities;
- ❑ Revamp the staff development learning (SDL) programme in the Region;
- ❑ Encourage leaders and managers to take personal initiatives on technical, managerial or leadership skills improvement with the support of the Organization, where necessary;
- ❑ Establish and fill the position of a full-time Ombudsperson;
- ❑ Adapt the WHO/HQ staff orientation services for the African Region, including the development of an induction package for new staff, and designation of a focal person and alternate within the human resource management (HRM) team to coordinate staff orientation/briefing in the Regional Office and country offices;
- ❑ Implement the global performance management and accountability framework that rewards or sanctions staff based on outstanding and/or poor performance;
- ❑ Conduct regular (anonymous) staff surveys on values, team building, fairness and accountability;
- ❑ Conduct and report on WHO country office staff meetings on the promotion of transparency, accountability and ethical behaviour.

## **Strategic Actions for Smart Technical Focus**

Prioritization of technical portfolios based on evidence and lessons learned from experience will be enhanced through the following strategic actions:

### **First 100 days**

#### **(a) EVD Epidemic controlled**

- ❑ Undertake high-level missions to the three severely affected EVD epidemic countries and relevant stakeholders (AU,ECA, ECOWAS, etc.) to reinforce WHO's focused engagement and support towards achieving zero Ebola cases;
- ❑ Set up an inter-cluster "taskforce" on EVD to coordinate and accelerate regional efforts for response, recovery and preparedness in collaboration with WHO headquarters and relevant United Nations structures;
- ❑ Develop a regional strategic plan for EVD response and recovery, including plans for supporting the restoration of routine health services in the three severely affected EVD countries;
- ❑ Develop a medium- to long-term human and financial resource plan for enhancing the capacities of the WHO country teams in the three severely affected EVD countries as part of the strategy for sustaining the gains of current investments in EVD response, recovery and preparedness;
- ❑ Recruit short-term staff at P2 or P3 levels to enhance the capacity of the health systems strengthening (HSS) cluster to effectively facilitate response, recovery and preparedness in the three severely affected EVD countries.

**First 100 days****(b) Strengthened regional capacity for health security including effective preparedness and timely response to disease outbreaks and emergencies and polio eradication**

- Restructure the Regional Office to effectively address outbreaks and emergencies in line with the resolution of the Executive Board special session on Ebola;
- Prioritize the unfinished agenda of polio eradication by placing polio eradication under the Office of the Regional Director and assigning an experienced manager to the polio eradication portfolio;
- Update and maintain a roster of WHO staff in the Region to facilitate rapid deployment in times of disease epidemics and other health emergencies;
- Explore innovative approaches for persuading countries to meet their financial commitment to the African Public Health Emergency Fund.

**First 100 days****(c) Accelerated progress on millennium development goal (MDGs) and implementation of sustainable development goals (SDGs)**

- Engage with AU to support accelerated implementation of the MDGs.

**First 100 days****(d) Functional cross-cutting health systems approach within the WHO African Region facilitating delivery of programmes towards universal health coverage**

- Establish a cross-cluster technical team on the development of a UHC strategy and plan for the African Region;
- Enhance regional human resource capacity by developing a robust system for supporting young professionals to work at AFRO as interns or junior professional officers (JPOs).

## *Up to the end of January 2017*

### *Up to the end of January 2017*

#### *(a) EVD epidemic controlled*

- Document and disseminate experiences of WHO in the African Region in responding to the EVD epidemic.

### *Up to the end of January 2017*

#### *(b) Strengthened regional capacity for health security, including effective preparedness and timely response to disease outbreaks and emergencies and polio eradication*

- Organize a high-level meeting on the development of IHR core capacities with the participation of health, foreign affairs, agriculture and security ministers of Member States;
- Support the initiative to establish a fully functional African Centre for Disease Control and Prevention in close collaboration with the African Union Commission;
- Conduct an external programmatic assessment of the African Region's epidemic/emergency response capacities to identify human, financial and other resource gaps;
- Undertake high-level advocacy (by the Regional Director) for polio eradication in priority countries of the African Region;
- Mobilize resources and strengthen Regional Office technical capacity for prompt and effective response to disease epidemics and emergencies in the Region;
- Establish, in consultation with Member States, RECs, the AUC and relevant institutions and without prejudice to the resolution of the Executive Board (EB) special session on EVD, a multi-disciplinary African Health Corps to serve as a continental rapid response platform that can be triggered and deployed for disease epidemics and health emergencies;
- Define mechanisms for effective coordination between the three levels of WHO during disaster response activities;
- Conduct regular refresher training courses on emergency and outbreak management for staff on the WHO roster;



### ***Up to the end of January 2017***

#### ***(c) Accelerate progress on the Millennium Development Goals (MDGs) and the implementation of sustainable development goals (SDGs)***

- Engage with the African Union (AU) in the implementation of the SDGs and the AU's Agenda 2063;
- Facilitate the adoption of a resolution on SDGs by the WHO Regional Committee for Africa;
- Enhance the Regional Office's human resource capacity to deliver health promotion, social determinants of health, gender equity and human rights, including the use of social scientists;
- Conduct an external review of the implementation of health promotion, social determinants of health, gender equity and human rights across priority public health programmes in order to define strategic directions for enhanced Regional Office investment and impact on the health of the people of the Region;
- Allocate a portion of resources from each of the technical programmes that receive technical support from the Health Promotion and Social and Economic Determinants of Health Unit.
- Support countries to document progress made on the MDGs and support the domestication of SDGs.

### ***Up to the end of January 2017***

#### ***(d) Functional cross-cutting health systems approach within the WHO African Region facilitating delivery of programmes towards universal health coverage***

- Conduct a joint internal and external functional review of the WHO Secretariat in the African Region (including the Regional Office, Intercountry Support Teams and country offices) aimed at making it fit for purpose;<sup>2</sup>

<sup>2</sup> Questions to be answered include: What is expected of WHO in Africa by its stakeholders? What is the appropriate structure for meeting these expectations? What human resource capacities are required to meet these expectations? What human resource capacities are currently available in terms of numbers and skills; and what human resource capacity gaps exist and need to be filled in order to meet the expectations of stakeholders? What human resources are redundant and need to be transitioned out? What human resources are trainable to meet the needs of a fit-for purpose organization?

### *Up to the end of January 2017 Cont'd*

#### *(d) Functional cross-cutting health systems approach within the WHO African Region facilitating delivery of programmes towards universal health coverage*

- Recruit an external consultancy firm to develop and implement a capacity-building plan based on the results of the functional review;
- Develop and implement a strategic approach/investment case on how technical programmes can contribute to health systems strengthening and implement the strategy.

### *Up to the end of January 2017*

#### *(e) Enhanced knowledge management (KM)*

- Establish a comprehensive KM programme that promotes knowledge generation, storage, sharing and utilization for staff members, stakeholders and the general public;
- Develop and implement a regional KM strategy;
- Hold cluster directors accountable for contribution of documents to the Organization's intranet and internet platforms and updating of cluster documents in the SharePoint;
- Hold regular cross-cluster briefing meetings on ongoing innovative/strategic activities within clusters.

## *Strategic Actions for Responsive Strategic Operations*

### *First 100 days*

To ensure that WHO evolves into an organization whose enabling functions are robust enough to efficiently support the delivery of the its programmes, the following strategic actions will be implemented:

**First 100 days****(a) Human, financial and material resources aligned with the identified priorities**

- Monitor the lifespan of assets and dispose of them once obsolete or fully depreciated.

**First 100 days****(b) Strengthened WHO human resource capacity**

- Develop a mandatory induction programme for newly-recruited staff members.

**First 100 days****(c) Enhanced transparency in recruitment, placement, promotion, motivation and performance management**

- Brief selection committee(s), directors and WRs on the WHO's recruitment policy and human resource reforms;
- Enhance transparency in the staff recruitment process by involving the relevant budget centres in the end-to-end process.

**First 100 days****(d) Improved efficiency and accountability in the areas of finance, procurement and general management**

- Review delegation of authority (DOA) in the Region and ensure that it is in alignment with organizational procedures, appropriate behaviours and a risk management approach;
- Conduct a review of compliance and quality assurance functions in the Regional Office;
- Use the most recent internal and external audits to establish a baseline for monitoring progress in management (enabling functions);

### ***First 100 days***

#### ***(e) Improved leveraging and use of available technologies and tools, especially GSM and Business Intelligence dashboards***

- Conduct an internal audit of the use of the GSM platform in the African Region to identify unused and underutilized components and maximize use of the same;
- Implement appropriate policies and guidelines on maximization of the GSM platform, including implementing a capacity building initiative for staff members;
- Conduct an internal evaluation of the management and use of available electronic data management platforms in the African Region (AHO; rSiS; etc.) and define and implement strategic actions for effective internal and external use;
- Organize formal training, retraining and reorientation of existing staff on new technologies.

### ***Up to the end of January 2017***

#### ***Up to the end of January 2017***

##### ***(a) Human, financial and material resources aligned with the identified priorities***

- Conduct an external operational assessment of the 47 WHO Country Offices aimed at defining human resource needs and taking appropriate actions;
- Conduct 360 degrees assessments of managers and team leaders;

#### ***Up to the end of January 2017***

##### ***(b) Enhanced transparency in recruitment, placement, promotion, motivation and performance management***

- Improve staff recruitment outreach (through the use of headhunting, LinkedIn, etc.) to attract a larger talent pool with a view to addressing gender and language imbalances;

### ***Up to the end of January 2017 Cont'd***

#### ***(b) Enhanced transparency in recruitment, placement, promotion, motivation and performance management***

- Enhance budget centres' performance monitoring through adaptation or development of global key performance indicators (KPIs) and linkage of same to the annual performance objectives of relevant staff (e.g. development of generic performance objectives for all WRs and Operations Officers; etc.);
- Implement a policy on mobility and rotation for different categories of staff within the WHO African Region;
- Enhance transparency in rewarding good performance through intranet publication of criteria for promotion and/or upward position reclassifications and identify and implement innovative ways of recognizing high-performing staff/teams at all levels (country offices, Intercountry Support Teams and clusters in the Regional Office);
- Set up a recruitment committee at country office level to oversee every step of the recruitment process;
- Develop standard operating procedures for the establishment of recruitment committees at all budget centres.

### ***Up to the end of January 2017***

#### ***(c) Improved efficiency and accountability in the areas of finance, procurement and general management***

- Conduct a review of key business processes and performance and develop an action plan to address identified systemic weaknesses;
- Implement recommendations on transforming the compliance and quality assurance functions into a capacity-building, monitoring and reporting office;
- Improve the conflict of interest management system through review of current operations and compliance levels and implementation of recommendations, including regular staff orientation;

### ***Up to the end of January 2017 Cont'd***

#### ***(c) Improved efficiency and accountability in the areas of finance, procurement and general management***

- Conduct an external feasibility and cost-benefit analysis and implement recommendations on possible devolution of some regional operational support functions (including procurement, translation/interpretation, information technology, travel, human resource management, recruitment and other services) to a more cost-effective location;
- Promote a transparent and competitive bidding process for services by recruiting an external firm to review the current system in place and implement appropriate recommendations;
- Develop an induction programme for newly-recruited staff.

### ***Strategic Actions for Effective Communications and Partnerships***

In order to foster a more responsive and interactive Organization, both internally among staff members and externally with stakeholders, the following strategic actions will be implemented:

#### ***First 100 days***

##### ***First 100 days***

#### ***(a) Enhanced internal communication between and across all the three levels of the organization***

- Provide regular briefings on the work of WHO in the African Region through scheduled town hall and cluster meetings;
- Engage a communications consultancy firm to conduct an assessment of communications in the African Region and suggest ways of improving communication across the three levels of the Organization;
- Create and operate an online ideas/suggestions box to obtain staff feedback and use these ideas and suggestions to make adjustments that improve the system;

### ***First 100 days Cont'd***

#### ***(a) Enhanced internal communication between and across all the three levels of the organization***

- Regularly share the travel information of the Regional Director and cluster directors;
- Prepare and disseminate quarterly briefings on the outcomes of the Regional Director's missions/meetings;
- Create a SharePoint for staff networking to stimulate a culture of knowledge and experience sharing, joint problem solving and mutual support in order to improve efficiency and effectiveness in the Organization's work.

### ***First 100 days***

#### ***(b) Reinforced external Communication***

- Establish, within the Office of the Regional Director, an External Relations Office in charge of communications, advocacy, partnerships and resource mobilization, and redeploy staff to the office;

### ***First 100 days***

#### ***(c) Strengthened strategic partnerships***

- Implement a mandatory end-term evaluation of all donor-supported projects or grants;
- Update donor reports;
- Promote and monitor (using, inter alia, scorecards) regular and timely submission of high quality technical and financial reports to donors, and hold regular teleconferences with key stakeholders at the technical level;
- Map potential partners for effective engagement in programme implementation and resource mobilization;
- Ensure timely submission of donor/partner reports.

## *Up to the end of January 2017*

### *Up to the end of January 2017*

#### *(a) Enhanced internal communication between and across all the three levels of the Organization*

- Institute regular fora for discussing progress in the implementation of strategic programmes and take actions to address identified challenges;
- Develop and implement a communication strategy and conduct regular reviews of the communications function and existing capacities to enhance its effectiveness;
- Strengthen capacities for documentation of WHO work at all levels.

### *Up to the end of January 2017*

#### *(b) Reinforced external communication*

- Create and manage a blog for the Regional Director;
- Establish closer working relationships with media houses through regular media briefings by the Regional Director and cluster directors;
- Obtain regular WHO slots in key television and radio channels within the Region;
- Recruit and assign communication officers to support clusters in communicating on their activities;
- Establish a WHO Regional Office for Africa award to promote health journalism in Africa;
- Upgrade the communication studio in the Regional Office with live shot capability;
- Develop job descriptions, create posts and recruit communication officers for regional communication hubs (e.g. Dakar, Johannesburg, Nairobi, Addis Ababa and Abuja).



## *Up to the end of January 2017*

### *(c) Strengthened strategic partnerships*

- Engage with regional economic groups, AfDB and Islamic Development Bank (IsDB) to identify common areas of intervention and implement joint programmes;
- Map and implement actions to engage effectively with regional health partnerships and initiatives with a presence in Africa and negotiate working on one regional (Africa) health platform as a basis for enhanced partnerships;
- Engage philanthropists in the Region to support health and WHO's work;
- Organize a regular regional health forum;
- Update donor reports on a regular basis.

## 3. IMPLEMENTATION, PERFORMANCE MONITORING AND RISK MANAGEMENT

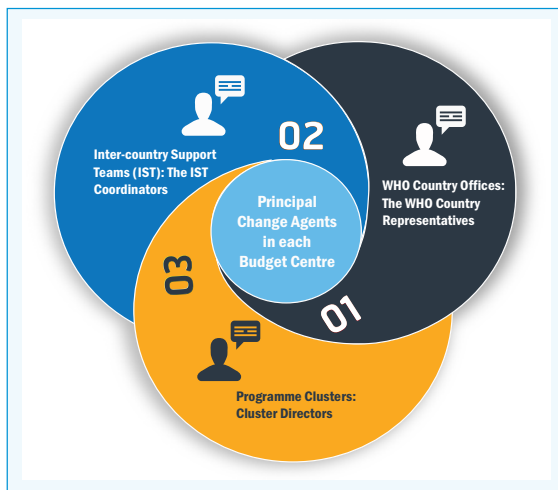
### 3.1 Transformation Champion and Core Teams

The WHO Regional Director for Africa is the Transformation Champion. She is supported by the following:

#### 3.1.1 *Principal Change Agents in each Budget Centre*

- (a) WHO country offices: the WHO country representatives;
- (b) Inter-country Support Teams (IST): the IST coordinators;
- (c) Programme Clusters: Cluster Directors.

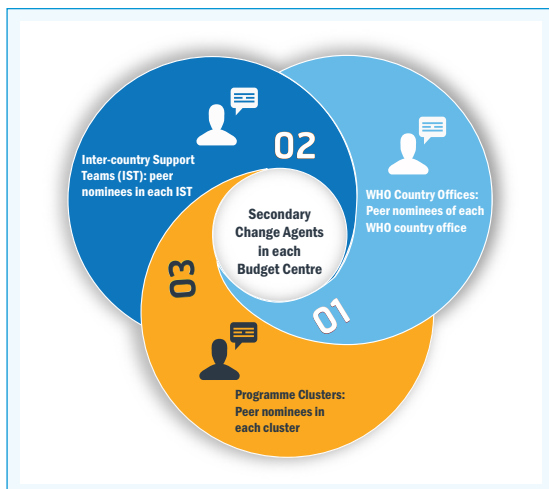
FIG 1: PRINCIPAL CHANGE AGENTS IN EACH BUDGET CENTRE



### 3.1.2 Secondary Change Agents in each Budget Center

- (a) WHO country offices: Peer nominees of each WHO country office;
- (b) Intercountry Support Teams (IST): Peer nominees in each IST;
- (c) Programme Cluster: Peer nominees in each cluster.

**FIG 2: SECONDARY CHANGE AGENTS IN EACH BUDGET CENTER**



## 3.2 Performance Monitoring and Risk Management

### Performance Monitoring

#### Monitoring

The core thrust of The Transformation Agenda is accountability. The Principal Change Agents, supported by the Country and Intercountry Support (CIS) Team in the WHO Regional Office for Africa, will develop and oversee the implementation and monitoring of rolling-plans with a set of performance indicators and milestones. Reports on the development and implementation of The Transformation Agenda will also be produced and disseminated every 100 days and annually.

## *Evaluation*

The implementation of The Transformation Agenda will be evaluated at mid-term and end-term. Such evaluation will, inter alia, provide answers to the following questions:

- (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?

## *Risk Management*

Risk management is critical for the long-term survival of any organization, programme or project. The following risks have been identified and will be monitored and actions taken to mitigate them when necessary during implementation of The Transformation Agenda:

- (a) Missed timeframes (e.g. 100 days);
- (b) Inadequate resources (funding, time);
- (c) Scepticism of partners;
- (d) Staff indifference, passivity, complacency and resistance;
- (e) Inability to institutionalize the required transformation;
- (f) Inability to keep the transformation process simple; and
- (g) Overwhelmed Transformation Champion and Change Agents.

World Health Organization  
Regional Office for Africa  
Brazzaville • 2015