

Annex F. Capacity Development strategy, version 30.11.2011

Introduction

The aim of the RESYST capacity development strategy is to enhance the capacity of partners and affiliates to generate and synthesise knowledge about health systems, and to support the effective application of such knowledge in the formulation and implementation of health policies.

In so doing, we will work across individual, organisational, and network/system levels to influence a number of key groups (researchers, research leaders and research users), and to develop the capacities to conduct high quality research, to use research in informing policy, and to lead sustained programmes of Health Policy and Systems and Research (HPSR). Our strategy explicitly recognises the heterogeneous nature of member organisations and their contexts. We will optimise the use of consortium resources to meet these diverse needs, and aim to leverage additional funding where possible.

This strategy has been prepared in two phases: first, when preparing the original proposal, each RESYST member undertook a broad capacity needs self-assessment; second during the inception phase, the members conducted a further, detailed in-depth needs assessment and identified the priority needs of their group. The RESYST capacity development activities, therefore, focus both on areas of common need and address the particular needs of some groups. Our strategy allows for broad based capacity development by devolving many aspects of research responsibility and leadership to southern partners. A substantial element of capacity development will also be deliberately planned as part of routine RESYST activities, to allow a sharing of experience and skills.

Although members have considerable strengths, the capacity gaps identified include:

- 1) Organisational development: financial / business model that supports and sustains a productive and engaged HPSR group operating in a context of predominantly “soft” (grant) funding; staff appraisal and performance management systems, including coaching and mentoring skills; some groups lack support staff (don’t have or don’t have enough);
- 2) Specific research resources: books; journal subscriptions; internet access and therefore access to journals; software packages;
- 3) Research management: research grant writing and budgeting; accounting and financial reporting; managing the timely delivery of research outputs; some groups don’t have a research manager;
- 4) Research leadership: training in leadership; approaches to leading and managing multidisciplinary teams in order to provide a productive, intellectually stimulating and supportive research environment;
- 5) Individual research skills: qualitative analysis, systematic literature reviewing, discrete choice experiments, equity analysis, health policy analysis, evaluation of complex interventions; paper writing for peer-reviewed journals; multi-method studies / organisational management;
- 6) Policy engagement and research uptake skills: understanding of the policy process and the role of evidence; approaches to managing the media; engaging with policymakers to support sharing of knowledge and to build trusting relationships; collaboration between researchers and research uptake staff; developing and implementing a research uptake strategy; giving presentations; writing for, and communicating with, policy makers; opportunities to develop capacity of research users;

7) HPSR group development: opportunities for the HPSR group to meet discuss strategic directions for the group, and substantive research issues; external review of the HPSR group's papers; networking opportunities for the HPSR group.

Following from the revised needs assessment, the following activity areas will be prioritised for RESYST support for the next 5 years:

1) Organisational development

- I. Facilitate and support the development of a "business model" that will account for the full cost of managing HPSR groups, that can be incorporated into costing of research grants and institutional budgets
- II. Support for HPSR group level planning and continuous professional development activities
- III. Targeted material support in those institutions with particular constraints

We will strategise how to encourage institutions (e.g. Universities) and funders of research to invest in organisational capacity to support senior researcher time to manage research, manage the research group, manage support staff, mentor staff, write proposals, plus support capacity building activities, support time for the group to come together to strategise the future directions of their research and building and strengthening of the group, holding regular writing workshops, etc. We will begin this process by forming a small group within the consortium, led by the CEO, to develop a costing model for these various organisational activities and determine what proportion of time (and therefore total salary) these activities require of senior staff at each member organisation. With this information we will then decide on the next steps to take in discussing this with interested RESYST members so that the full costs of managing a research group can be included in the development of future budgets. This will involve sharing and reviewing experiences across the RPC, developing a strategy for members who want to pursue this with their organisations, and thinking through how to engage research funders on these issues.

We will support members to conduct group level planning and continuous professional development activities. For example, the HPSR group at the Ifakara Health Institute (IHI) are spread out over three sites across the country which makes it difficult for them to come together for strategic planning and to discuss cross-cutting research issues. In order to ensure value for money, RESYST will fund a 2-day extension to the regular IHI Annual Scientific Meeting which is held each year for all research staff, to allow the HPSR group to meet.

We will provide targeted material support as identified by specific members, such as subscription to HPSR journals that are not available through HINARI, purchase of software packages, etc.

2) Individual development

I. Support to research leaders

- i. Co-mentoring among senior staff (by structuring engagements in annual meetings that allow senior researchers to share experiences and offer support to each other, and through interaction with CAG members where appropriate)
- ii. Specific activities to develop mentoring skills for these staff (e.g. one day workshop linked to the annual meeting)
- iii. Activities aimed at future research leaders, specifically those who have recently completed PhDs, to assist them in future proposal development, through workshops and by setting up peer review systems

The senior researchers of the consortium will have opportunities to learn from each other and receive peer support in research leadership and management by being part of the Management Group and/or being a Research Theme Leader – this process has started in the inception year and will continue throughout the life of the consortium. We will create opportunities at the annual meetings for discussions

around managing multi-county / multi-partner research projects and leading HPSR groups; this will start at our next annual meeting in September 2012. Starting early in 2012 we will pair up interested senior researchers across partners and affiliates to provide peer support and learning, asking them to set aside dedicated time per month to discuss issues they are facing in research management and leadership; these conversations will take place by phone/skype. We will hold specific training courses in coaching and mentoring, and staff appraisal and performance management, at the annual meetings; the first training session will be held at the annual meeting in 2012.

Research leaders, and new and potential leaders, will gain on the job experience of taking part in, and in some cases leading, multi-centre, multi-country research projects in RESYST; research projects will start in 2012. We will have a reflection on this experience at the annual meetings.

We will support workshops for potential research leaders to write grant proposals – this activity will start in 2013. In 2012 we will set up a system of peer review of papers and proposals within the consortium - and will encourage members to do this within their own HPSR groups. This will involve members sending their papers and/or proposals to the research directors (RDs) who will then ask senior researchers from the RESYST members (or CAG) to volunteer to review the paper or proposal with a new or potential research leader from their group – this will help provide a culture of peer review and support within RESYST. We will encourage senior researchers to share reviewing of external scientific papers for journals with new and potential research leaders and junior researchers in their group to enable them to understand the peer review process (this could also lighten the review process for senior researchers and allow them to review more papers than previously possible).

II. Development of skills of individual researchers

- i. Regular review and discussion of key developments in the field of HPSR at annual meetings and conferences
- ii. Workshops for writing papers (e.g. writing workshops, writing day at the annual meeting with support from an editor)
- iii. Support for applications to Masters and PhD training programmes (e.g. Commonwealth Scholarships Commission, CARTA Wellcome Trust-funded consortium of which CHP and IHI are part)
- iv. Programme of short courses and workshops focused on the specific needs of the research programme (e.g. discrete choice experiments, quantitative equity analysis, systematic review and synthesis of qualitative studies), research theme specific activities at the annual meeting; links with CHEPSAA (see below)
- v. Strengthening of skills in policy engagement, through the use of consortium resources to create fora for sharing of knowledge between researchers and research users; this might include measures such as inviting policy makers to attend the annual meeting where we will have specific sessions to discuss the research programme and how it relates to policy development; development or strengthening of formal training programmes in research-to-policy activities; and links with CHEPSAA

We will hold events at the annual meetings to reflect as a group on the development of the field of HPSR. To begin this process we held a journal club at the inception year annual meeting where members were provided with current “cutting edge” HPSR papers in advance of the meeting, and then the papers were reviewed in small groups. We will hold events like these to review the field of HPSR at each annual meeting and at any conferences where there is a large group of RESYST researchers attending.

We will hold workshops for writing papers further into the life of the consortium when researchers have results to publish; probably from 2013 onwards. We will look for opportunities for funding for RESYST researchers to attend masters and PhD programmes.

We will hold knowledge synthesis events from 2013 onwards, some of which will allow researchers and policy makers to engage with each other and so build mutual understanding of the topic of focus and of how to engage with each other in generating evidence for policy making.

III. Research users

- i. Strengthen existing formal training programmes on HPSR attended by health system officials and other research users; links to CHEPSSA

Many research users attend training and educational courses given by some of our members, and increasing the quality and scope of these courses will contribute to building research users' capacity. Some RESYST members will hold formal training courses for health system officials to build research user capacity; the HPRG will hold a workshop for health systems officials from two different states in Nigeria, and from the Federal level government, in 2012. We will also hold knowledge synthesis events which will have a dual function of generating new knowledge and strengthening research user knowledge in specific technical areas and more generally in the role of research evidence in policy development; these will start in 2013.

3) Network/ system level support to develop a community of practice in HPSR

- I. Support for national and regional level engagement among the broader HPSR community (e.g. routinely invite other groups interested in HPSR to our annual meetings, as we did in 2011 in India); support for knowledge synthesis workshops which bring these communities together to share experience and distil wider lessons
- II. Support for the development of RESYST members' HPSR teaching programmes, where relevant and desired (primarily through links with CHEPSAA)
- III. Engaging, as an RPC, with international developments in the field and sharing opportunities for such engagement with RPC members (e.g. contributing to the HSR Symposium in Beijing in November 2012)

In 2012 we will support our members to attend the HSR Symposium in Beijing to learn the latest in the field; this will be a valuable symposium for health system researchers to attend due to the breadth and depth of the topics that will be presented. This symposium will also provide an ideal and unique environment in which to engage with others working in HPSR and with policy makers. To make the most of our collective experience at the conference, we will take time on a daily basis to discuss the day's presentations and debates and how these relate to our present work and possible future directions.

In implementing our capacity development strategy we will, as highlighted above, take particular advantage of our links to the Consortium for Health Policy and Systems Analysis in Africa (CHEPSAA), coordinated by Lucy Gilson (RD). The goal of CHEPSAA, which is funded by the EU, is to extend sustainable African capacity to produce and use high quality HPSR by harnessing synergies among a consortium of African and European universities with relevant expertise. Following an initial needs assessment (currently being undertaken), activities will focus on three main areas: staff and organisational development, and course development, to strengthen and sustain teaching programmes in the area of HPSR; and development of organisational and country networking strategies to support the use of evidence in decision-making. The CHEPSAA consortium includes four RESYST members (HEU, CHP, HPRG and HESA). The University of Leeds is also a member, and Andrew Green from this group is a member of our CAG. CHEPSAA will hold their next annual meeting in March 2012 where we can discuss with them areas of common interest and opportunities to cost share capacity development activities.

We will strengthen the capacity of RESYST members to carry out research uptake activities effectively. We are providing salary support to members for a research uptake officer or focal person to help the HPSR group focus on research uptake when designing research projects and in the future dissemination of the results. The RESYST Research Uptake Manager, one RD (Kara Hanson) and the members' research uptake officers and focal points will, in 2012, create an informal group (the research uptake coordination group) providing peer support and learning opportunities. The RESYST Research Uptake Manager will provide

members with a TOR and / or Scope of Work for the research uptake officers if needed, and will help in the development of guidelines such as preparing briefs for policy-makers. We will hold the first bi-annual capacity development workshop for the research uptake officers and focal points in 2012.

Oversight of RPC capacity development activities lies with the CEO, in consultation with the Capacity Development Coordination Group. The Capacity Development Coordination Group will meet 2-3 times per year by phone conferences and at the annual meeting. M&E will take place through both routine monitoring of logframe indicators, and through a commissioned external assessment of our capacity development activities in 2014.

An **annual RPC capacity development plan**, including the specific plans of members and for research themes, will be presented for final approval by the Management Group. The capacity development budget includes both pooled resources for joint activities and individual member budgets to be used for local priorities and initiatives. The capacity development strategy will be regularly reviewed, at annual meetings, and revised when needed through agreement among RPC members. The annual plans will be discussed and further developed at the annual meetings.

Appendix 1: RESYST Capacity Development Coordination Group: Membership and Terms of Reference

Purpose

The Capacity Development Coordination Group supports the CEO to develop, and revise as needed, the RESYST capacity development strategy.

Composition

- CEO
- 1 RD (Lucy Gilson)
- 1 non LSHTM member of the Management Group (Jane Goudge, CHP, South Africa)
- 3 Affiliate members with budgets for capacity development activities (Obi Onwujekwe, HPRG, Nigeria; VR Muraleedharen, IITM, India; Fatuma Manzi, IHI, Tanzania)

We will review membership after 2 years to see if rotation of the Management Group member is appropriate.

Activities

- Develop a capacity development strategy in the inception phase in consultation with all RPC members
- Advise on and coordinate the planning of the capacity development activities and timing, including workshops and training as required
- Identify and address capacity development needs of partners and affiliates, and conduct regular (annual) review of needs
- Identify synergies and opportunities for joint activities among consortium members in capacity development
- Assist in the development of the monitoring and evaluation of the capacity development strategy

Approval process for the capacity development strategy and plans of activities

The Management Group will review and approve the strategies and detailed activity / workplans of the Capacity Development Coordination Group, and approve the related budget allocations. This can be done at the Management Group meetings or by phone conference / email as needed.

The capacity development strategy will be regularly reviewed at annual meetings and revised when needed through agreement among RPC members.

Meetings

The Capacity Development Coordination Group will meet 2-3 times per year by phone conferences. Some members will also meet at additional times by taking advantage of other opportunities and at Annual Meetings.

Appendix 2: Capacity Development Plan for 2012

Activity	Budget	Q1	Q2	Q3	Q4	Responsible
Organisational development						
Brainstorm “business model” to account for full cost of managing HPSR groups	n/a	X				[REDACTED]
HPRG: Group level planning and continuous professional development (CPD) activities	3230		X			[REDACTED]
IHI: Group level planning and CPD activities	3000	X				[REDACTED]
HSPI: Support for monthly scientific meetings on HPSR	1400	X	X	X	X	[REDACTED]
AMREF: Participation in training workshop in health systems evaluations	2600		X			[REDACTED]
HPRG: Targeted material support (software)	1650	X				[REDACTED]
AMREF: Targeted material support (journals)	500	X				[REDACTED]
Individual development						
All: Session on managing multicountry research projects at annual meeting	n/a			X		[REDACTED]
All: Establish peer mentoring system	n/a		X			[REDACTED]
All: Training session in mentorship at annual meeting	1000			X		[REDACTED]
All: Develop peer review system for papers and funding proposals	n/a		X			[REDACTED]
All: HPSR Journal Club at Annual Meeting	n/a			X		[REDACTED]
HEU: Contribution to local PhD fees (Orgill, Govender)	1000				X	[REDACTED]
AMREF: Training in data management	600		X			[REDACTED]
Network / system level support						
HEU/CHP: Invite local HPSR communities to attend annual meeting in Cape Town	n/a			X		[REDACTED]
All: Support development of members’ HPSR teaching programmes; specific discussions to follow CHEPSAA annual meeting in March 2012	n/a	X				[REDACTED]
All: Support RESYST researchers to attend HSR Symposium in Beijing	38,900				X	[REDACTED]
All: Form Research Uptake community of practice	n/a	X				[REDACTED]
All: Research uptake professional development workshop	(see RU budget)				X	[REDACTED]

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