

THE HEALTH CLUSTER CAPACITY DEVELOPMENT STRATEGY 2016 – 2019



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FOREWORD

The number, scale and severity of protracted humanitarian crisis shows an increasing trend in recent years while the humanitarian system has never been so challenged as of now. Effective leadership and good coordination in health plays a vital role in addressing these challenges. The Global Health Cluster has identified a number of crucial functions such as in coordination and health information management, which needs to be strengthened and further developed and will be part of the current WHO reform process under its 'one single program approach'.

The overall aim of the Health Cluster Capacity Development strategy is to reduce death and vulnerability by building effective leadership and coordination mechanisms to address future epidemics of large scale and continue to address chronic and protracted crisis and strengthen health systems in fragile and vulnerable countries, effectively and in a cost-efficient manner. This will be achieved by developing a cadre of high performing personnel to effectively lead and coordinate the cluster to deliver an effective response to achieve better health outcomes. Synergies will be built with other roles under the Global Health Emergency Workforce such as the Standby Partners, the Emergency Medical Teams and GOARN.

This requires financial commitment and support, human resources and technical expertise with a profound set up and structure. In order to address those, the Health Cluster Capacity Development Strategy 2016-2019 was developed to provide a clear framework and guidance.

The strategy and framework sums up the ideas and views which have been studied during the training needs analysis and the last training course and experiences by people in the field but it also provides the agenda for future work. There is still much to do. The strategy and the related competency framework will enable us to improve the health care for affected populations by identifying the right personnel and build up high level performers for the health clusters globally.

The Global Health Cluster Strategic Advisory Group are delighted that the WHO and its partners, under the Global Health Cluster has produced this collaborative work, and we look forward to following the impact of this strategy.

ACKNOWLEDGEMENTS

The Global Health Cluster would like to thank the members of the Global Health Cluster Capacity Development Task Team and Peer Reviewers who have contributed, by means of their feedback, reflections, ideas and conversations, to the thinking behind the development and writing of this Strategy

Between 2008 and 2015 nine Health Cluster Coordinator Trainings and three Tri Cluster Coordinator Trainings (Health, Nutrition and WASH) took place in: Tunisia, Tanzania, Ecuador, Egypt, Indonesia, Switzerland, El Salvador and France. The Global Health Cluster would also like to thank the Participants, Trainers, Facilitators and Donors who took part or supported these trainings; this Strategy is based on the learning and experience which came from all of these events.



EXECUTIVE SUMMARY

The Health Cluster Capacity Development Strategy 2016 – 2019 has been developed in order to ensure high quality and effective leadership and coordination in all health responses to acute and protracted humanitarian crisis. The strategy provides the basis for strengthening the recruitment, learning and performance of current and potential health cluster personnel and for providing them with opportunities for continuous professional development.

The Strategy was developed by the Global Health Cluster Capacity Development Task Team with further input and feedback from Peer Reviewers drawn from Global Health Cluster partners.

The Learning Needs and GAPS which are addressed by the strategy were identified by means of two Learning Needs Analysis, which were conducted in 2014 and 2015 respectively. But needs change over time, so the strategy will ensure that these needs are refreshed and reprioritised at least once during the life of the strategy.

The Strategy will ensure that there is a blended and competency based approach to learning and development, in which a variety of learning and training activities and access to high quality learning resources will be provided, and it also recognises and supports the critical role played by Line Managers in ensuring that learning takes place in a timely manner, is acted upon and is part of a Health Cluster Professional Development Plan.

The strategy proposes nine strategic objectives and it will be implemented by means of the Log frame in Annex 4 which will be underpinned by an Annual Plan and budget for each year of the strategy.

1. The Vision - What will we have achieved four years from now?

A cadre of high performing health cluster coordination personnel will have been established in order to ensure that the leadership and coordination of all health responses to an acute or protracted humanitarian crisis is responsive, accountable, consistent, predictable, and efficient and provides Value for Money¹. The coordination of the response will build national capacity, resilience and preparedness and be delivered in support of the response efforts of national authorities, and in collaboration with other partners and clusters, in order to meet the needs and the rights of the affected population and lay the foundations for recovery.

2. The Aim

To establish a systematic and structured approach to high quality, blended and impactful capacity development that responds to the increased need and expectation for health clusters to demonstrate effective health response leadership and coordination in all types of emergencies.

The Strategy addresses the need to identify and develop high-performing, dynamic and adaptable health cluster coordination personnel and teams that:

1. Have the required combination of skills, knowledge and attitudes needed to lead and coordinate an effective health response that meets the needs of the affected population.
2. Are ready to be deployed to crisis-affected countries
3. Are able to stay in their role for the time required
4. Are continuously supported at all levels (by the Global Health Cluster Unit, WHO HQ, ROs, WCOs, cluster partners and other stakeholders)
5. Are able to transfer knowledge and build the capacity of local counterparts
6. Have professional development incentives, career paths and job stability.

¹ Value for Money (VFM) is defined as ensuring that an input is provided at the right time, to the required quality standard and at the right cost.

3. The Scope

The specific target audience for this Capacity Development Strategy is all health cluster coordination personnel at both national and sub-national levels who have identified capacity gaps. This includes, but is not exclusive to, the roles of Health Cluster Coordinators, Information Management Officers, Public Health Officers and any other identified personnel.

Since personnel come to the health cluster through a variety of recruitment and management mechanisms, the strategy is not specific to any agency. Rather, it includes all health cluster personnel who come to their roles through the WHO's Division of Human Resources, surge mechanisms, partner organisations, globally-managed stand-by partner rosters or recruitment at country level. At present, this includes an estimated national level 24 Health Cluster Coordinators, 12 public health information officers, as well as co-leads, surge support and other public health officers working across the 71 sub-national hubs.

4. The Strategic Objectives

Over the four years of the Strategy the following Strategic Objectives will be achieved:

YEAR 1 - 2016

4.1. A modular and competency based blended learning programme², using a variety of knowledge and skills based learning and training activities for Health Cluster Coordination and Health Cluster Teams is developed and implementation commences, and is supported by the Health Cluster at global, regional and national levels.

The 2014/15 Learning Needs Analyses strongly suggests the following training programmes:

- Health Cluster Coordination Training: aimed at Health Cluster Teams and emphasising the strategic, coordination and information requirements of a health response, the core skills (such as leadership, communications, advocacy and partnership building) and the collective deliverables of the Humanitarian Programme Cycle.

² When fully developed the blended learning programme will consist of induction, direct training, on line learning, mentoring, coaching and a Community of Practice

- Public Health Information System Training, specifically emphasising the information requirements of a health response and the tools that support them.

Existing and future relevant training courses and programmes will also be mapped out and personal placed on them if appropriate.

4.2. The Health Cluster Capacity Development Task Team is fully operational and its' outputs are fully harmonised with other GHC Task Teams, and informed by the capacity development activities of other clusters.

4.3. Access to high quality blended learning materials and the use of consistent and effective learning approaches/methodologies is established, by means of:

- An online learning resource bank containing contextualised learning resources and training materials, case studies, examples of best practice, work based assignments, detailed sessions plans and evaluation tools, feedback and impact assessment tools.
- A pool of high quality facilitators /trainers and resource people who meet the criteria established by the GHC Capacity Development Task Team identified from GHC Partners, appropriate regional and national agencies and authorities and other appropriate stakeholders.
- Ensuring that all learning and training events and activities are informed by best practice from other clusters, consortiums and partners

4.4. The critical role of partner agencies and Line Managers in identifying and supporting individual learning and team performance is strengthened and supported, and all Health Cluster personnel regularly participate in performance management reviews that are aligned with the Health Cluster Capacity Development Strategy and Competency Framework and form part of a Health Cluster

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