

Evaluation report: Evaluating the Outcomes of Leadership and Management Training Program in Health System - Sudan

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Evaluating the Outcomes of Leadership and Management Training Program in Health System - Sudan

Evaluation team:

Dr. Amjad Mohammed Idries

Ms. Sanaa Osman Elobeid

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Introduction and Background:

The experience showed that leadership training is a vital part of organizational learning opportunities in today's workplace. The successful organizations seek to empower their employees, leadership development is crucial to help teams and individuals move forward toward accomplishing the organization's goals. Change is a constant in our world and good leaders help people deal with change. Globalization and competition for resources, both natural and human, create a need for conflict resolution and problem solving skills, which are necessary for successful leadership. In addition to that, the strong organizations tend to develop its leadership from within, and the key ability of winning organizations is creating leaders. Moreover, because public health provides population-focused services to entire communities rather than individualized care, an increasing need exists for public health personnel capable of leading efforts to ensure the effectiveness and quality of the services is essential.

Sudan is at the verge of drastic and critical political changes and developments. This indeed will dramatically affect the local health systems and services. Therefore, there is a great need to prioritize development of smart capacity building programs in all sectors involved in managing health system. The need for leaders in Sudan public health sector is considerably huge and large number of trained and skilled staff is needed to fill the gap in the leadership. The high turnover, lack of specialized leadership training programs and many other factors make any initiative to train more leaders of high importance and great impact. Progress in public health in Sudan has been greatly advanced throughout its history by outstanding individuals who fortuitously combined all these qualities. Today, the need for leaders is too great to leave their emergence to chance. Greater emphasis in public health curricula should be placed on management and leadership skills, such as the ability to communicate important values to employees and enlist their

commitment; to deal with important changes in the environment; to plan, mobilize, and use resources effectively; and related to the operation of the agency in its larger community role. Although many public health managers display these capabilities, the emphasis in the field on technical competence and professionalism sometimes leads to a neglect of management as a skill in its own right. Management is often assumed to be purely a matter of common sense or innate ability rather than a body of knowledge that can be acquired through training and experience.

Directors of public health at state and local levels have critical role to play in order to improve the health of the population and in achieving the goals of their ministries of health. Directorate of Planning and Health Development, in collaboration with Continuous Professional Development centre (CPD) in FMOH, supported the generation of these superiority leaders by improving their skills through a dedicated learning strategy. The joint training project on leadership in CPD state branches seems to have leading role in supporting the overall change anticipated form different capacity building initiatives that come in from different parts and with different funding streams. Part Planning Directorate mission is to harmonize all of the efforts and focusing more on the product "the leaders" rather than focusing on the process itself.

Literature review:

Despite the fact that globally there is huge knowledge about the evaluation of training programs in different aspect of human sciences, however, limited number of evaluation was conducted in areas of health and leadership. One of these evaluations is the study conducted by Wang and his colleagues in China (1). The evaluation provided insights about the outcomes associated with leadership training program delivered to those work in the field of public health emergency. The evaluation pointed out the importance of such kinds of training activities in improving the overall health workers performance if designed appropriately to cover the needs of the participants and their areas of work.

Cheryl R. Westley in his study on the impact and effectiveness of the leadership training on adult learning provided good recommendations on how to design effective programs that make the best outcomes (2). He asked to add technical dimension to the training contents and to link different leadership components to what the people actually do to help the students to understand how to apply what they learn.

Program Description:

Background:

Since the summer of 2008, the Sudan Ministry of Health and the University of Washington have worked together to strengthen the human resources capacity of the Sudan health system. In Sudan's decentralizing system, key to this capacity building is upgrading the leadership, management, and policy development skills of program and senior staff at both federal and state levels. This partnership was supported by the World Bank and the Multi-Donor Trust Fund, which provided funds to create the Technical Assistance Facility (TAF) for Sudan Government. The federal MOH and UW Global Health Leadership Program (GHLP) designed a joint human resources development project that employed adult learning methods, hands-on project experience, and mentoring.

"TAF project" had two overarching goals:

- To strengthen health system planning, policy, management, and financing capacity in 15 target states. The TAF project worked toward this goal by training 24 current or future managers from 14 states in leadership, management, and policy skills; and
- To support and enhance the capacity of the Public Health Institute to conduct effective leadership and management training programs in order to continuously strengthen Sudan's health system at all levels. The TAF project worked toward this goal by training 5 senior FMOH/PHI staff as trainers and developing, with FMOH staff, curricula and other training material that FMOH can then use for ongoing training.

Progress in public health in Sudan has been greatly advanced throughout its history by outstanding individuals who fortuitously combined all these qualities. Today, the need for leaders is too great to leave their emergence to chance. Greater emphasis in public health curricula should be placed on management and leadership skills, such as the ability to communicate important values to employees and enlist their commitment; to deal with important changes in the environment; to plan, mobilize, and use resources effectively; and related to the operation of the agency in its larger community role. Although many public health managers display these capabilities, the emphasis in the field on technical competence and professionalism sometimes leads to a neglect of management as a skill in its own right. Management is often assumed to be purely a matter of common sense or innate ability rather than a body of knowledge that can be acquired through training and experience.

Management of bodies providing public health services is a demanding duty requiring, in addition to technical and political acumen, the ability to motivate and lead personnel, to plan and allocate agency resources, and to sense and deal with changes in work environment and to relate the organization to the larger community. FMOH was committed to complete the need for highly professional public health specialists and those working in relevant areas to fulfill these needs. This will be achieved by providing a rich environment and obligated and highly committed staff, trainers & supportive teams. The experts in PHI are well oriented with local situations and settings and will provide their best to deliver and facilitate different components under this program.

Objectives:

The overall objectives of the management and leadership program are:

- Improve institutional capacity and system development at all levels of governance, i.e. at national, state and locality level in the Northern states for sustainable financing and development of the health system;
- Support organization and management of the decentralized health system;

The specific objectives of this program:

- Enhancing the leadership capacities of senior public health officials at state level to address the challenges facing public health;
- To develop scholars' ability to mobilize resources and the organizational and community capacity necessary to address public health challenges and achieve the national health objectives;
- To develop a national network of leaders that fosters life-long learning and shapes the future of public health in Sudan;

Expected outcomes & Targeted audience:

The plan of this program aimed to provide the training for 150 public health professionals from 15 states in the country. At least 10 MOH managers from each state expected to be enrolled in this program to become able to effectively carry out the core functions of management in their positions at state level.

By the end of the program, the actual number of the participants exceeded the target with more than 350 participants from 15 states attended this training. This achievement

reflects the efficiency of planning department in implementing this training project and the way by which the value of money was considered in the implementation.

Funding:

Since the leadership program is very ambitious in its vision and targets, this was entailed on considerable financial implications. The training program was basically funded through health system strengthening unit in the Directorate of Planning and Health Development at FMOH. The project was part of the collaboration plan with GAVI with partial support from the GFATM HSS grant.

Contents:

The training program was very reach in its contents; it included about 15 different topics. The delivery methods covered both the concepts sides as well as the practical applications of some parts. The contents included were:

- 1. The Elements of Leadership Development
- 2. The Role of Mission in Guiding your Plan
- 3. Human Resource Management
- 4. Digital Storytelling as a Leadership Tool
- 5. The Role of Self-Awareness
- 6. Emotional Intelligence
- 7. Effective Teamwork
- 8. Diversity in the Workplace
- 9. Conflict Resolution
- 10. Listening, Conflict, and Diversity
- 11. Delegation
- 12. Managing in Situations of Scarcity
- 13. Presentation Skills for Managers
- 14. Leadership Journey
- 15. Networking

For detailed timetable of this training course please refer to annex XXX

Achievements:

Up to this report the FMOH succeeded to provide the training program to more than 360 participants from all over the states. With the available resources and compared with the time, this was positive outcomes of this activity.

The details of trained participants per state, end of April 2012, are as follows:

State	Number
Khartoum	84
River Nile	56
North Kurdofan	43
Northern State	36
White Nile	35
Gadarief	35
Blue Nile	32
West Darfur	9
North Darfur	7
Kassala	7
South Darfur	6
Gazira	5
Sinnar	4
South Kurdufan	4
Red Sea	4
Total	367

Evaluation of management and leadership training program:

Rationale for the evaluation:

It is important to realize that the long term effectiveness of leadership training needs to be evaluated and assessed to learn from this experience and to document this experience. Information resulting from evaluation of training effectiveness could be used to determine whether the training met its previously defined aims and objectives. This information provides feedback necessary to modify future training programs features by reassessing training needs, revising course objectives, or altering the delivery methods. The leadership training model is continually evolving, with results from previous programs being used to continuously improve future training programs.

No similar study or evaluation has targeted the outcomes of leadership training over the last period of time. If topic areas can be identified which have a long lasting effect, then similar topic areas can be used in other leadership courses. The survey itself, which provided past participants with the opportunity to give their own opinions of the leadership course, was designed to discover the effective aspects from the learner's perspective. The results of the learner-reported study can be utilized by leadership training designers, facilitators and instructors, as well as those who seek effective leadership training.

Objectives:

This evaluation aimed at the following:

General

• To evaluate the outcomes of this program to inform the decision about the investment and expansion of this program in the future.

Specific:

- 1. To identify the strengths and weaknesses of leadership training program.
- 2. To provide the organizers of the course with evaluative information for continuous improvement purpose.

Methodology:

Design:

This evaluation was designed as cross sectional survey targeting the participants in the Leadership and Management Training Workshops conducted at the state level during the period January 2011 and September 2011. The first line mangers for the participants and the facilitators were also targeted in this evaluation.

Study area:

This evaluation was conducted in all of the states in which at least one workshop on leadership and management training was conducted during the last nine months. The targeted states included: Northern state, River Nile State, Khartoum State, Blue Nile State, Gadarif State, White Nile State and North Kordofan State (total of 7 states).

Study population:

The subjects of this study were those who attended the Leadership and management training programs offered by the CPD branches at state level during the period January 2011 – September 201. The direct line managers of this targeted group at state and locality levels were also targeted in the evaluation. In addition to these two groups, the key staff in Federal CPD and Planning Directorate and were also targeted under this

evaluation. The list of the participants will be obtained from the planning directorate and the key staff will be identified in consultation with this directorate.

Sample size and sampling technique:

For the purpose of this evaluation, the following sample size was considered:

- Stratifications of the localities and targeting 3 localities all of the trainees. And targeting the same at all states
- Participants in Leadership and Management Training: out f the 360 participants, a
 total of 66 participants were randomly selected and surveyed in this evaluation.
 The list of the participants in each state will be obtained from state CPD branch.
 Out of the total number of the participants, 9 trainees were randomly selected
 based on calculated sampling interval (based on the number of trainees).
- Direct line managers at state level: out of 110 managers, a total of 52 managers were structurally selected for this evaluation. After identifying the targeted participants in each state, 3 line managers were selected based on the positions of targeted participants. Rapid assessments of the top 3 managers who deal more frequently with the targeted participants were selected. The locality health manager (the most senior and relevant to the trainees)

Data collection technique:

This program was evaluated by two different methods: anonymous questionnaires designed to interview the participants of the training, and semi-structured interviews designed to elaborate on some key areas around the program.

Data collection tools:

The required data was collected through a questionnaire based survey used to gather information on the evaluation questions. The questionnaire (see annex 1) was a non-self-reported instrument. It was designed to obtain the data desired for analysis and was developed from several sources: the generated research questions, the descriptive brochures of the course itself, the daily outline and evaluation forms utilized for the course, and the leadership competencies identified by the course designers and instructors.

The questionnaire contained twenty questions requiring a variety of responses. But in general the questionnaire targeted the key competencies that represent the main focus of the training program. This included: Individual basic skills, Knowledge levels and Self-assessment of skills regarding the key management competencies.

The questionnaire was designed by experts in the field of training programs. In order to assess the questionnaire, a pilot test was carried out among other public health leaders who did not participate in this program (but received leadership training). Based on their feedback, subsequent modifications were made on the contents and the structure of the questionnaire.

The main focus of the semi-structured interviews with the key mangers at the state level was on the capacity of the trainees (representative sample) regarding the following issues:

- 1. Cope with and lead changes in public health practice
- 2. Match the skills and knowledge of health workers with appropriate tasks
- 3. Deal with cultural and ethnic diversity in the context of access to health services

- 4. Mobilize resources in the community needed to increase access to health services
- 5. Communicate clearly and effectively health laws and regulations
- 6. Advocate for the enforcement of laws and regulations pertaining to public health
- 7. Work with, coordinate, and/or lead community efforts to address public health problems
- 8. Build strong and ongoing relationships with colleagues and the community
- 9. Interact, inform, and educate individuals from diverse backgrounds
- 10. Use the media and other forums to inform, educate, and empower people about health issues
- 11. Collaborate with colleagues and the community to manage and investigate public health problems
- 12. Accurately and effectively communicate information to a professional and a lay audience
- 13. Lead and participate in groups to identify public health problems
- 14. Use visual representations of data to identify public health problems

Main variables and measures:

There are four levels widely used today in the field of human resource development and are important for planning and design of any training programs. These included the following:

Level 1 – Reaction

Measures the reactions, initial response and/or feelings of those who participate
in the training, and are often gathered by using "happiness sheets" or "smile
sheets".

Level 2 – Learning

 Measures the extent to which participants change attitudes, improve knowledge, and/or increase skill as a result of attending training through the administration of pre and post tests or questionnaires.

Level 3 – Behavior

 Measures the extent that change in behavior has occurred as a result of participation in training. In the workplace this is connected to job performance and how the participants apply learning on the job. These data are gathered over time through observation of the individual.

Level 4 – Results

 Measures what occurred due to program attendance and what effect the training had on the organization. This data is gathered by examining factors such as productivity, quality, costs and profit, or turnover rates.

The overall results of this evaluation will help in building rich picture about the outcomes of this training program around these levels.

Data analysis:

The data analysis process included mixed analysis methods according to the type of data and the tool of data collection, but in general it was done using the following:

- Manual analysis.
- Computer programs e.g. SPSS + MS Excel + MS Access was used.

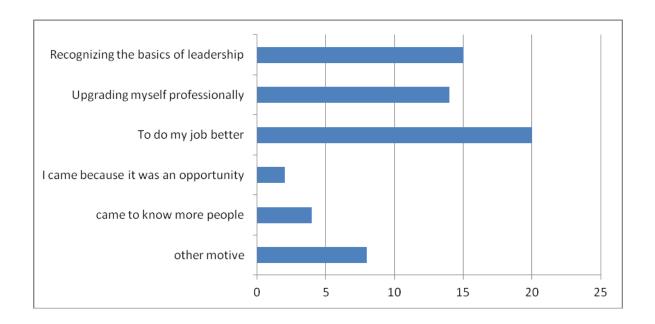
Findings and discussion:

Needs for this training:

By asking the participants about their actual needs for this program and whether or not it came at the right time during their career; most of them (49 of the participants) stated that it came very late in their career. Moreover, 31 of them said that they should participate in such program at most before they finished their fifth year in their work in order to get the most benefits from this program. On other hand, 45 trainees said that it just comes at the right time and more than 90% of this group was in the age range between 29-40 years. In this regard, we will find clear relation between the age, years of experience and the response to this question in general. We will see a trend in which the older participants tend to see the timing of the program is too late, while the participants in the age between 25 and 34 years of age were more satisfied about the timing of this training.

Reasons behind attendance:

Many reasons are seems to be the motive behind attending this kind of programs, but it in most of the cases the title of the training was very attractive to those who attend this program. By asking them about the reasons, their answers were as follows:



The previous analysis showed that the main motive that logically linked to the attendance to this program is the desire for professional development in management. Despite of that, we will find many of the participants stated that they actually came at the first time just because it was a training opportunities. This reflected the common culture linked with the training programs in the public sector in general and its linkage with certain concepts. Here we quote from the interview with one of the participants "Before I came to the training, and when I was nominated, I found this as an opportunity to get the per-dium (financial incentive). But honestly, now I don't really remember whether I was given the per-dium or not, because my participation in this training is bigger than any financial incentive. This will give us more hints about the type of this kind of training programs as it covers wide gaps in the motivation needs of the participants and the targeted groups in general.

Expectations of direct managers:

The direct managers of the participants were asked, in the groups' discussion, to identify the skills they expected that their subordinates participated in the training program to develop after the completion of this training. The managers identified the following key skills that are essential to health professionals.

- 1. Ability to supervise and follow up the employees and subordinates;
- 2. Ability to do multiple managerial functions;
- 3. Ability to employ the available human resources based on their skills and capabilities with good distribution of tasks and role;
- 4. Ability to improve effective delegation skills;
- 5. Ability to interact with different people with different behavioral styles;
- 6. Ability to lead, coordinate and participate in the team work;
- 7. Ability to write quality reports and making adequate feedback;
- 8. Ability to evaluate the performance and achievement of the targets;
- 9. Ability to continuously improve the social communication skills in work and communities;
- 10. Ability to work through different cultures;
- 11. Ability to use emotional and social inelegance;
- 12. Ability to analyze the surrounding environment;
- 13. Ability to learn from the others and from the surrounding environment;

- 14. Ability to manage within the available resources;
- 15. Ability to translate the knowledge into practice in work;
- 16. Ability to manage change in work;
- 17. Ability to manage time effectively;
- 18. Ability to recognize problems and solve it;
- 19. Ability to take appropriate decision at the right time;
- 20. Ability to develop effective listening skills;
- 21. Ability to improve the self-awareness and capabilities;

General analysis of the program and its content:

Objectives of the training versus the participants' objectives:

By asking the participants about the suitability of the training objectives and its contents to their managerial and leadership skills they need to perform their jobs, 70% of them said the programs matches their expectations and 40% said that it was exceeded their expectations. On other hand, some of them said the program miss some important aspects that they expecting it to be part of the training. This includes decision making and problem solving skills, identification and recognition of responsibilities and authorities, in addition to the practical side of the training. All were needed to be covered as part of the contents in the future programs.

After each training course, the participants were asked whether the program added to them and covered their expectations. The responses were as follows:

Leadership component	Totally agree	Agree	Disagree	Totally disagree
It was suitable and covered my needs	82%	18%	0	0

HR Component	Totally agree	Agree	Disagree	Totally disagree
It was suitable and covered my needs	74%	22%	4%	0

Communication skills	Totally agree	Agree	Disagree	Totally disagree
It was suitable and covered my needs	84%	16%	0	0

Comparison with other similar programs:

More than 90% of the participants said it was the first time to participate in similar program in term of comprehensive and linked program. However, some of them were participated in programs that cover only parts of the contents under this program. This group was asked to compare between this program and the programs they attended, the responses were vary and here is the summary:

- 1. The components that were attended previously were team management, time management, and vision & mission development in most of the cases.
- Ares that were attended for the first time were: delegation, emotional intelligence, self-awareness components, diversity & conflicts resolution, partnership aspects (including stakeholder analysis & networking) and digital story telling.
- The training approach in this leadership and management program was unique and the trainers have clear role in delivering the information and targeted messages.
- 4. Some of the participants said that the program covered the skills required in some of the components; however it missed knowledge and theoretical basis of other components (e.g. emotional intelligence).

Organization of the program:

Upon completing the training, the participants were asked about their reflections on the general organization of the training program, the response was as follows:

What	Excellent	Good	Acceptable	Weak
Duration of the program	66%	14%	13%	7%
General distribution of daily time table	89%	10%	1%	0
Time management of sessions	92%	8%	0	0
Organization of the course	79%	21%	0	0
Treatment I found from the organizing team	100%	0	0	0

Trainers:

The participants provided simple evaluation on the performance of the trainers and facilitators of the three main components of the program (leadership, HR and partnership development). The responses were as follows:

Leadership	Excellent	Good	Acceptable	Weak
Ability to attract attention	86%	14%	0	0
Organized information flow	64%	28%	8%	0
Level of qualification	68%	32%	0	0
Ability to communicate	71%	25%	4%	0

HR development	Excellent	Good	Acceptable	Weak
Ability to attract attention	74%	12%	4%	0
Organized information flow	71%	12%	17%	0
Level of qualification	76%	34%	0	0
Ability to communicate	82%	18%	0%	0

Partnership development	Excellent	Good	Acceptable	Weak
Ability to attract attention	92%	8%	0	0
Organized information flow	89%	11%	0	0
Level of qualification	86%	14%	0	0
Ability to communicate	92%	8%	0	0

Training outcomes and gained skills:

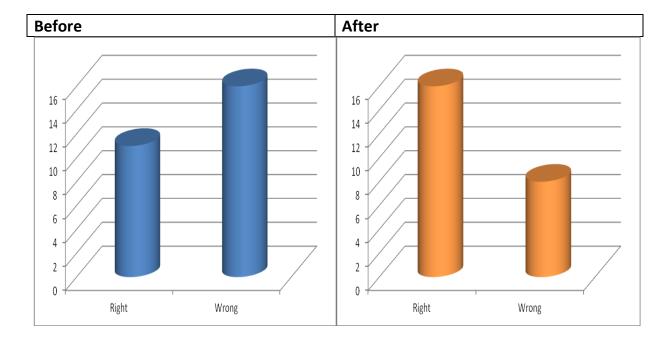
Knowledge:

The group supporting this training program conducted two consecutive tests pre and post to each training course in order to measure the change in knowledge about leadership and management. The set of questions was selected carefully so as to cover most of the contents in the course and to give some reflection on how this knowledge will be reflected on their practice.

Here will provide a quick comparison in a general manner:

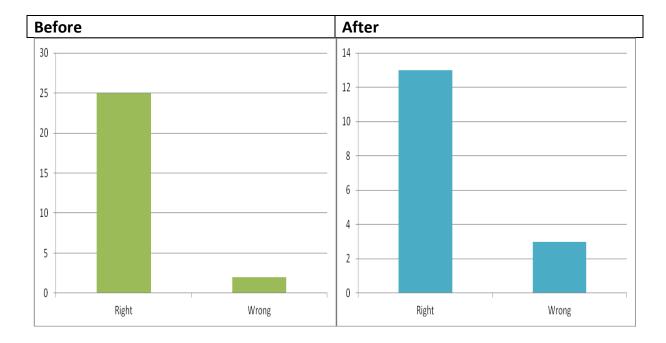
Leadership concept:

This addressed the participants' knowledge about the overall concept of leadership and how that is differing from management.



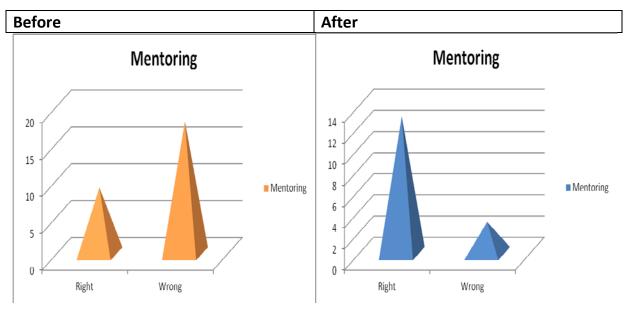
<u>Leader's journey:</u>

The question was about the important aspects in the leadership journey.



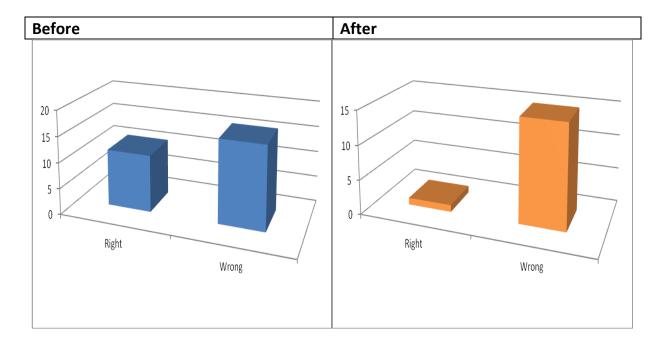
Mentoring:

The question aimed to let the participants think about mentoring as important leadership concept.



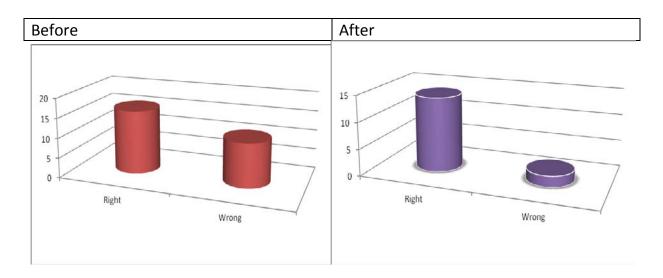
Coaching:

Similar to previous question, this one was about the importance of coaching in leadership and the key concepts.



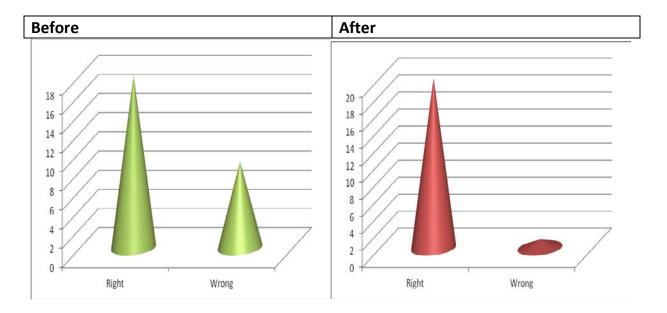
Delegation:

The question assessed the knowledge of the participants about the key elements of the delegation.



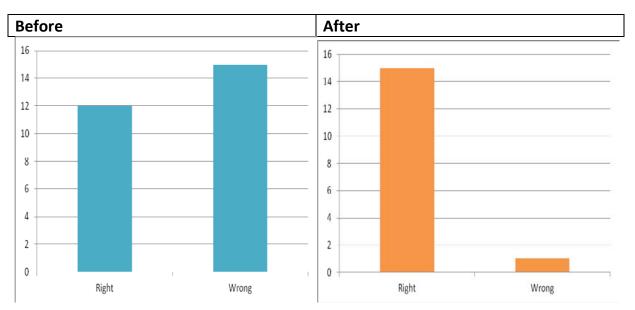
Diversity:

The question was designed to assess the awareness about the different dimensions of diversity and its forms.



Communication modes:

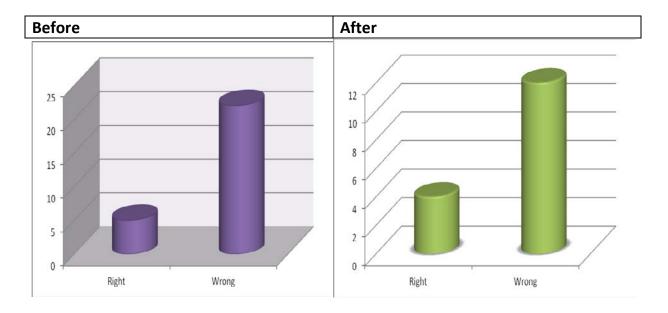
The question was designed to assess the knowledge of the participants about different communication modes.



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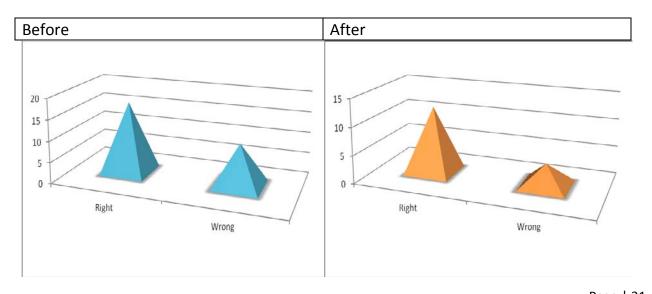
Common communication modes:

The question asked about the most common communication modes and how this affected by the communities, cultures and situations.



Effect of behavioral style on team work:

This part addressed the awareness of the participants about effects that should be considered when dealing with the team members.



In general from the above analysis it was clear that the participants achieved obvious improvement in their knowledge that related to some of the training components as the knowledge level was generally low even before the training course and was improved after its completion. The knowledge in some of the components was not clearly changed as the participants' knowledge was relatively high prior to the training and the course may add a little more knowledge side to the participants. In addition, in some of the components, there was no any improvement observed as a comparison before and after the training.

Linked to this pre and post-tests, the participants were asked in training evaluation form if they gained practical knowledge in the training, the responses were as follows:

Leadership component	Totally agree	Agree	Disagree	Totally disagree
The program improve my knowledge in this area	100%	0	0	0

HR Component	Totally agree	Agree	Disagree	Totally disagree
The program improve my knowledge in this area	95%	5%	0	0

Communication skills	Totally agree	Agree		Totally disagree
The program improve my knowledge in this area	100%	0	0	0

Personal development plan:

Personal development plan (PDP) was one of the components during the training course, and the participants were given considerable time to understand its concept, to write and to discuss. This component was built on the assumption that the program will provide good opportunity to the participants to develop their personal plans that will help them to continue their success stories. The participants were asked directly and deeply about the existence of a written plan more than 6 months after the training. The primary response to this question was 100% yes to all of the surveyed participants. The study team decided to analyze deeply the dialogue with each participant in order to understand better if the participant has clear vision to his/her future objectives, his/her own skills and how the way he/she think self-capacity is linked with the future development and improvement plans. From this perspective will find only 67% of the participants seems to have clear vision about his/her future as a leader after completing this program. Despite the fact that the evaluation in this part relay on the personal view of the study team, however, it seems that the culture of ensuring the sustain effect of this program after its completion was not clear to all who attend the program. Still when we recall the interviews with some of the participants who actually have PDP, we felt that the message was clear to some of them. Here we quote part of an interview conducted with one of the participants, who was interviewed without prior notification and was asked if she has written PDP she said "yes, I have a written plan and keep it all of the time in the first rack in my office desk, I used to look on it at least once per week to make sure I am still doing what I was committed to".

Language used to describe the program:

At very start of making the interviews with the participants, the language voice used to talk about the program was not considered as indicator to evaluate the program; however, after a while it was clear that this part was very important to consider it as part of the analysis. It is important because it indicate many aspects related to how the participants remembered the program, if they remembered it well means it is more likely that it may make sustainable changes to their attitude and practice. Here is the summary about this general analysis:

Language	%
Talked with passion	59
Talked on the program as important thing	19
Talked using flat voice	22
Talked indifferently	0

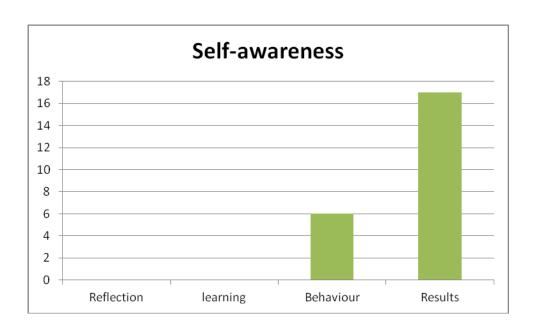
By linking this analysis with the outcomes of individual skills profile, below, it was not clear if there is clear relation between each other, still there is some sort of association between the two parts. It was found that the group of participants those who talked with passion about the program and its importance where generally the same group who have clear PDP and they were committed to its achievement. The group talked with passion about the program also showed advanced pattern of practicing the transferred knowledge (results) from the training compared to the group who used less indicative language who showed patterns that impeded at the levels of knowledge and sometimes attitude but not practice. This part was noticed especially in some of the components related to self-awareness, delegation and emotional intelligence.

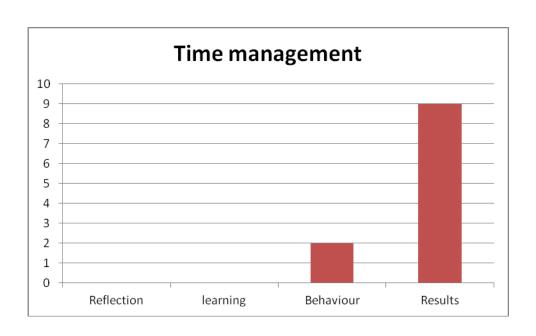
Individual skills profile:

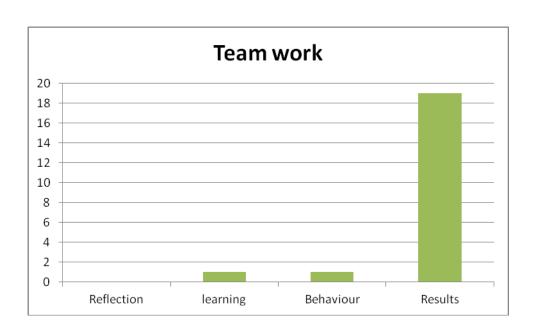
The study team extracted the key indicative terms used by the participants to describe their development under the key areas in this training. This included:

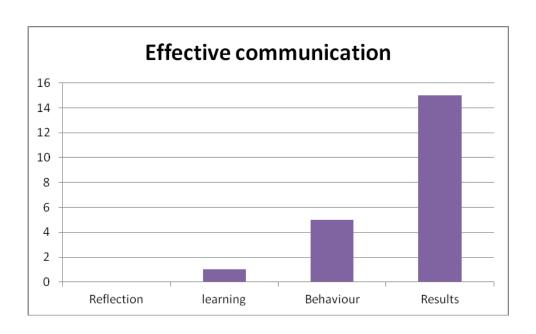
- Self-awareness and understanding others;
- Understanding own leadership style;
- Using the right styles at the right situations;
- Effective communication;
- Effective listening;
- Conflicts resolution;
- Good presentation skills

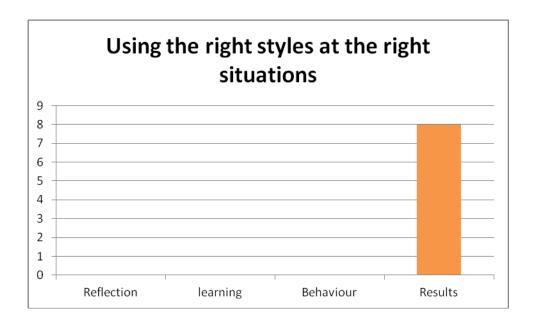
The analysis of this part focused on identifying the individual profile for each trainee separately to identify the pattern of skills developed. In addition to that, collective view of the separate skill areas was obtained to get some hints about areas of improvement and areas where more focused will be needed in the future.

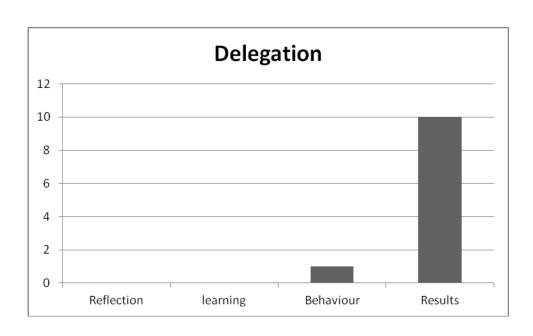


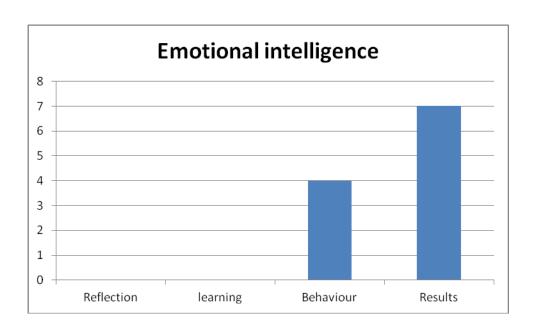


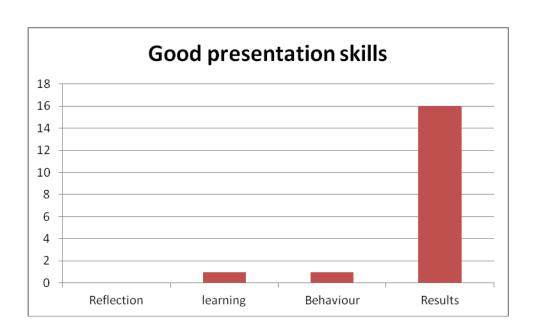


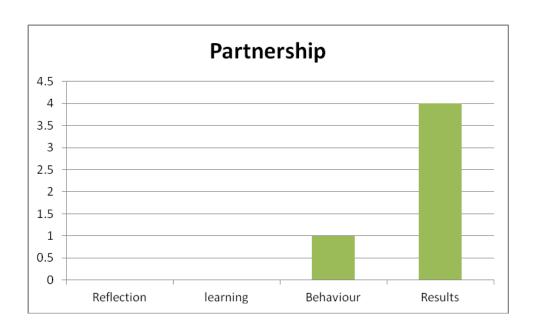


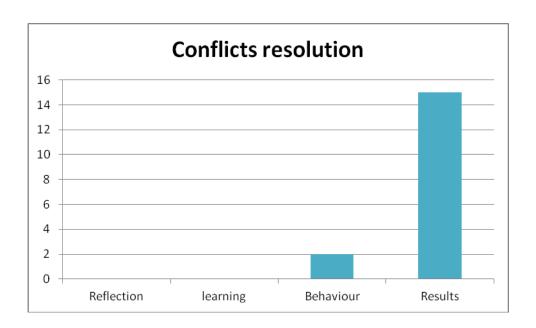












From the pattern of the data, as shown above, it was clear that the training succeeded to shift most of the participants among different type of skills into the domain of achieving results. Some of them, the participants, remain either in the behavior domain, however few of them remain in the learning domain and no one was stayed in the

reflection domain. Again these results reflected the achievement of the objectives and desired outcomes of the program in the targeted participants.

Feedback on skills improvement:

The direct and line managers of the participants at the state level were asked to provide feedback about selected random sample of the participants. The feedback aimed to assess the performance each participant, what are the skills they think it was developed after the leadership and management program, what are the skills that were already existed before the training and what are the gap in his/her skills.

The managers agreed on the following list of skills that they observed remarkable improvement of its areas after the training. This includes:

- 1. Team work skills
- 2. Effective communication
- 3. Effective listening
- 4. Using emotional intelligence skills
- 5. Problem solving skills
- 6. Ability to develop effective partnerships
- 7. Ability to manage in sacristy of resources
- 8. Effective delegation
- 9. Time management

Despite this, the managers realized that, some of the participants were already strong in some of these areas; however, the improvement was seen as general rather than observations focusing on individual participants.

Gap in skills:

Based on the feedback from the managers during the groups' discussion sessions, the following areas seem to be weakly improved in the participants' capacities. This includes:

- 1. Ability to take evidence-based decisions
- 2. Ability to interact with differences
- 3. Time management
- 4. Ability to manage in sacristy of resources
- 5. Networking;
- 6. Ability to lead through change;
- 7. Initiation, positivity in work, with sprit of innovation;

Program improvement: (Suggestions and recommendations)

A. General issues

In training like management and leadership training, how we can, as health managers, make sure that it was achieving its desired benefits and it helped in improving the required skills in comparison to its contents?

General comments about the teaching delivery methods, and opportunities for improvement

- 1. The general working environment in the public sector sometime is not favorable to enable good practicing and transfer of knowledge;
- 2. Continuous work pressure add more load on the employees that make it difficult for them to focus on personal development;
- 3. There is obvious need to training more health workers and from different disciplines to enrich the outcomes;
- 4. Importance of developing a follow-up mechanism to monitor the outcomes of the training and to ensure the continuous skills improvement;
- 5. Expanding the number of local trainers form the states and localities;
- 6. Importance of involving the higher levels in this training in addition to medical professionals and other health professionals;

B. Design and management of the program:

Here are some of the suggestions raised during the group discussions about this training and how to manage it:

- Increasing the time allocated for emotional intelligence with more practical sessions on it;
- The training for clinical and middle staff should be oriented so as to help them in improving their communication skills with the people in the rural communities;
- Compilation of practical and true experiences from the health field to be used in the training program as part of the case studies and practical sessions;
- There are 4 options suggested to organize the training program that put into the considerations important factors including:
 - Suitable and adequate duration of the program for trainees, their managers and the organizers;
 - 2. Cost implications of the training organization arrangements;
 - The targets of the training program (large number from diverse professions);
- The options include:
 - 4. The current duration of 5 days is adequate and enough; 7 out of 52 respondents agreed with this option.

- 5. Another option with a suggestion to extend the duration for 10 continuous days (2 consecutive days); 9 out of 52 respondents agreed with this option.
- 6. Some of the respondents, 13 out of 52, suggested a segmentation of the training program into two courses with one basic and another on advance (on some of the topics).
- 7. Similar to the previous suggestion, 23 out of the 52 respondents suggested the distribution of the same contents into two weeks separated by a period of at least 1 month.
- All of the respondents agreed with the importance of having certain follow-up mechanism that to ensure the best outcomes of this training. This should include evaluation and assessment activities, coaching and mentoring activities and on job training sessions.
- The program might more suiting the needs of trainees if to be adopted as core program at early times during the services of targeted health professionals.
- It is important to work on developing similar programs as part of motivational training package targeting different health professionals in the health system.
- Conduction of proper revision of the program based on the areas identified by field managers with regard to skills and competencies expectations as detailed in this report.
- Revision of the human recourse management contents to address the issues identified by the participants.

Conclusion:

The management and leadership training program succeeded to achieve its targets in terms of number and in terms of objectives and outcomes expected from the training. Further improvement should be considered in the next period. It will be wise to invest more in this training and to expand the targeted number to contribute further in the improvement of health services in the country.

Impressive commentaries from the interviews:

The evaluation team was impressed sometimes by the way the participants talked about the training. Some of them said:

"It gave me more space to think about my life"

"The program was a real motivation for success"

"Before I was very nervous; I became more cooperative and kind at home"

"I started to deal in different way with my wife and my kids"

"For the first time, I realized that the success of my team is my success"

"I started to understood myself before to understand my own team"

"The most favorable and exciting about this training that it brings different professions with different knowledge and experience together, and made them see the same thing, this happened for the first time in my experience in the health system"

"For the first time; I started to realize that the success needs delegation and partnership"

"This training made me more clear about how I see myself and give me clear map of myself"

"Thinking is the basis for development and improvement"

"Confidence is the key for success"

"Our basic education does not gave us the opportunity to see our potentials and its importance for our leadership future, this training succeeded to do that"

"Your social effect could not be separated from your success in your work"

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- 3. Report on TAF training program on Leadership and Management in Sudan 2009.