

Yale Global Health Leadership Initiative

Expanded Programme on Immunisation Leadership and Management Programme (EPI LAMP)

Results to Date: Spring 2020

Background

The Expanded Programme on Immunisation Leadership and Management Programme (EPI LAMP) is a 9-month certificate program to strengthen the leadership and management capabilities of EPI teams in national Ministries of Health (or on a subnational level in countries with devolved structures) from Gavi priority countries in Anglophone and Francophone Africa and Asia. EPI LAMP is grounded in the conviction that strong EPI teams are critical for the effective management of Gavi grants and achievement of global immunization targets. Upon graduation, EPI teams emerge prepared to manage increasingly complex EPI programmes, with attention to efficient operations, robust performance management and improvement, and effective political engagement and advocacy.

The EPI LAMP consortium of partners is led by Yale's Global Health Leadership Initiative and includes PATH, the University of Global Health Equity in Kigali, Rwanda (for English-speaking teams), and the University of Yaoundé and the Department of Disease Control, Epidemics and Pandemics in Yaoundé, Cameroon (for French-speaking teams).

Evaluation design

We evaluate EPI LAMP using a mixed-methods developmental design grounded in GHLI's extensive expertise in implementation science. The measures are consistent across all EPI LAMP cohorts to allow for cross-cohort comparisons and learning over time.

The framework includes the following measures:

1. Participant experience surveys to inform the delivery of subsequent sessions
2. Self-assessments of individual management and leadership competencies and team-based organizational culture
3. Tracking of the measurable improvements in EPI system performance achieved through each breakthrough projects
4. In-depth interviews with participants to expand on quantitative measures and understand program impact

Results

Outputs: EPI LAMP's rigorous, team-based, blended learning model combines (1) 60 hours of online learning to build essential skills, (2) three one-week classroom-based forums to refine skills and leverage professional networks for peer learning, and (3) team-based mentored breakthrough projects to apply new skills for measurable impact on EPI programme performance. Delegates that successfully complete all program components are awarded a certificate from Yale, PATH, and the local host university. **16 teams (54 delegates) across three cohorts have successfully graduated from the 9-month program, an 86% graduation rate (54% male and 46% female).**

Outcomes: Surveys at enrollment and graduation showed delegates demonstrated a statistically significant increase in self-assessed management and leadership competency across eight domains (Figure 1). These results were consistent across cohorts and language groups.

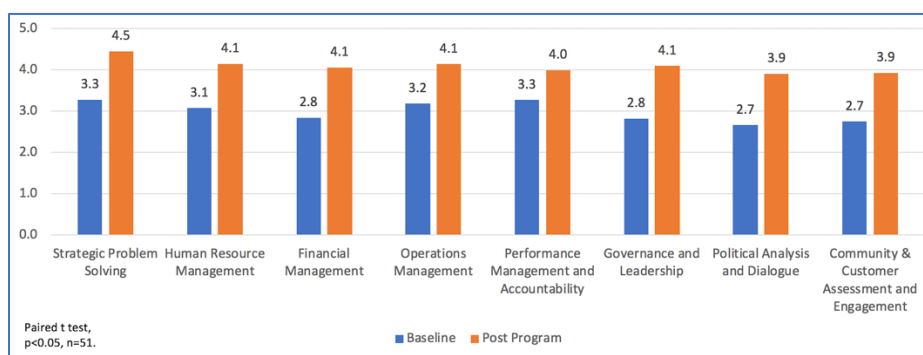


Figure 1. Changes in management and leadership competencies among EPI LAMP alumni

Thematic analysis of interview transcripts (n=51) revealed early signals of shifts in organizational cultures that participants attributed to participation in EPI LAMP.

1. **Improved problem solving:** Delegates described improved skills and confidence in problem solving, with attention to working in multidisciplinary teams and using data throughout the process. Importantly, delegates articulated ways in which, because of their participation in EPI LAMP, their proactive approaches to problem solving differed from their organizations' norms.
2. **Enhanced attention to team dynamics:** Delegates described improving their teams' effectiveness by promoting role clarity, strengthening team responsibility, working across hierarchical boundaries, and giving structured feedback.
3. **Development of shared accountability for EPI program success:** Delegates were able to identify their leadership roles and understand how their actions contributed to programme success. For professionals new to their roles or from outside the EPI team, EPI LAMP gave rise to confidence in their understanding of the operational challenges and objectives of the programme.
4. **A more nuanced vision of leadership:** Delegates described how EPI LAMP transformed their vision of leadership and yielded new insights into their own capacity for leadership. Many delegates reported that following EPI LAMP, they have been placed into more senior decision-making roles and are entrusted with more and expanded EPI responsibilities.
5. **Translation of new skills and approaches: Participants described ways in which they incorporated learnings from other national delegations into their work at home, and expressed on** urgency to disseminate key learnings from EPI LAMP to the subnational levels in order to continue improvement within programme performance. They also described how EPI LAMP learnings could be adapted to other programmes within the Ministries of Health.

"Before when we had a problem, we would just say, 'Okay, this district is not performing.' Now we think, 'This district is not performing, but why is it not performing? When there is any problem, we can use this.'" (Tanzania, Cohort III).

"This is the very first systematic approach to financial management that I had ever been to" (Myanmar, Cohort III).

"EPI LAMP enabled us to reorganize and improve the directorate" (Burkina Faso, Cohort II).

"We really work more like a team, more than before" (Cameroon, Cohort II).

"We are now going slightly deeper into our data and trying to use it" (Zambia, Cohort I).

"It has helped my colleagues in the EPI program. They were experiencing problems, but actually they could not find the root causes. They can now find the root cause of the problems" (The Gambia, Cohort I).

Impact: The breakthrough project developed by each team targeted a different aspect of national EPI program performance, and each team developed a measurable objective and set of process and outcomes indicators. Examples of projects include:

- Increase the 2nd dose of Measles and Rubella coverage from 56% to 70% by the end of 2021 in Zambia.
- Reduce administrative Pentavalent dose 3 coverage over-reporting by 30% in Somali and Oromia regions by the end of 2021 in Ethiopia.
- Increase birth dose Hepatitis-B coverage from 28% to 65% by 2021 in the Solomon Islands
- Increase the 2nd dose of Measles and Rubella coverage by 20% in high conflict regions in Burkina Faso (Center North, East, North and Sahel) by the end of 2022.

Next Steps

EPI LAMP has proven to be a highly relevant and meaningful program as evidenced by high rates of retention, meaningful changes in participant management and leadership competencies, and rich descriptions of shifts in ways of working across national EPI teams. Participants have also driven measurable change in various aspects of EPI program performance through their breakthrough projects.

The current evaluation framework does not include longer-term follow-up or national-level measures of EPI management systems and practices which would allow for quantification of impact and comparison across Gavi's investments in leadership, management, and coordination (LMC). We look forward to the potential to develop and pilot these measures, in collaboration with EPILAMP stakeholders and other grantees in Gavi's LMC portfolio.