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# Tips for Design and Facilitation of Learning Sessions in the Context of Collaborative Improvement of Zika-related Services

**SEPTEMBER 2018**

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This guide was prepared by University Research Co., LLC (URC) for review by the United States Agency for International Development (USAID) and authored by Lani Marquez, Alison Lucas, and Ximena Gudiño of URC under the USAID Applying Science to Strengthen and Improve Systems (ASSIST) Project. The work of the USAID ASSIST Project to improve Zika-related health services is made possible by the generous support of the American people through USAID.



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SEPTEMBER 2018

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## DISCLAIMER

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For more information on the work of the USAID ASSIST Project, please visit [www.usaidassist.org](http://www.usaidassist.org) or write [assist-info@urc-chs.com](mailto:assist-info@urc-chs.com).

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## **Acronyms**

ASSIST	USAID Applying Science to Strengthen and Improve Systems Project
CDE	Ciudad del Este, Paraguay
CSaZ	Congenital Syndrome associated with Zika
IHI	Institute for Healthcare Improvement
MOH	Ministry of Health
MSPAS	Ministry of Public Health and Social Assistance (Guatemala)
MSPBS	Ministry of Public Health and Social Welfare (Paraguay)
QI	Quality improvement
SESAL	Secretariat of Health of Honduras
URC	University Research Co., LLC
USAID	United States Agency for International Development

## I. Introduction

What differentiates quality improvement collaboratives from other improvement approaches is shared learning. In a collaborative, multiple teams—as few as 10 or as many as 100—all try to make improvements in the same focus area, simultaneously testing change ideas following the Model for Improvement. The structure of the collaborative supports them with shared learning mechanisms that allow teams to communicate their results, challenges faced, and insights with other teams, learn how other teams have improved specific aspects of care, and generate new insights about the way forward to strengthen and sustain the improvements they have made.

Shared learning allows all teams in a collaborative to benefit from the knowledge of both successful and unsuccessful change ideas tested by any team and avoid “re-inventing the wheel” in discovering successful change ideas. The shared learning mechanisms used in a collaborative might include coaching<sup>1</sup> calls and visits, exchange visits (where one team visits another to learn how they implement some idea), virtual communication through WhatsApp or cell phones, data sharing and feedback, and learning sessions.

This guide was prepared to support country teams of the USAID Applying Science to Strengthen and Improve Systems (ASSIST) Project in designing and conducting effective *learning sessions* as part of quality improvement collaboratives for Zika-related health services. In the context of ASSIST’s facility-based Zika services improvement program, learning sessions are an important knowledge management strategy for gathering and integrating learning from the work of improvement teams about how to improve specific areas of Zika prevention, care, and support.

The guide first describes what we mean by learning sessions and their purpose within collaborative improvement methodology to promote experience sharing and integration of learning. The next section systematically presents options and considerations in designing a learning session and is followed by a section with tips for convening and facilitating learning sessions, including planning for what happens after the learning session.

Annexes to the guide include sample agendas from Zika collaborative learning sessions conducted in Honduras, Guatemala, Paraguay, and the Dominican Republic (**Annex 1**) and descriptions of techniques we have found useful to facilitate group dynamics that are conducive to exchange and integration of learning (**Annexes 2-9**).

## II. What Are Learning Sessions?

In collaborative improvement, a learning session is a meeting that brings together representatives from participating teams in a particular region or, for a small collaborative, possibly the entire country, with one of more the following central purposes:

- 1) Develop and strengthen the skills of team members in the content areas addressed by the collaborative and in quality improvement (QI) methods,
- 2) Support QI teams in applying QI methods to address real problems in care processes,
- 3) Share experiences with change ideas (both successful and unsuccessful) and results and insights from each team’s improvement work, and

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<sup>1</sup> Coaches or facilitators are individuals with additional training or experience in quality improvement who provide direct support to facility improvement teams. Coaches may be ASSIST staff, district or regional supervisors, quality focal persons, or others who can help guide and motivate facility improvement teams to improve care.

- 4) Identify innovations and promising practices that have yielded good results and discuss how to implement them.

### ***Why are learning sessions important in a collaborative?***

Learning sessions are the primary mechanism for strengthening the knowledge of QI team members about the application of improvement methods and for sharing learning across teams in a collaborative, once they have tested changes to care processes. A collaborative usually involves three to six learning sessions over its one- to two-year life span. The first learning sessions, often held when teams have recently begun analyzing gaps in their services or just started to test change ideas, may have a greater emphasis on team performance and skill building in the use of QI methods and tools or on the analysis of gaps to prioritize improvement objectives or even on clinical topics. The final learning session of a collaborative usually reviews the overall results and seeks to synthesize all that has been learned in the collaborative to develop guidance products and change packages that can support institutionalization and scale-up of better care.

Learning sessions also have an important motivational component. In addition to people's natural inclination to want to share knowledge that could help others, the friendly competition among QI teams—where teams all want to be able to highlight achievements—and the persuasive power of hearing how others like themselves have successfully improved care can be effective motivators for improvement teams to achieve better outcomes.

### ***When to convene a learning session?***

There are two main considerations for convening: 1) There is important content that needs to be shared and discussed with teams (such as, basic QI methods or clinical updates, or early in a collaborative, to review baseline assessment findings); and 2) At least some teams have identified effective change ideas worth spreading, and the learning session serves to disseminate those change ideas to all teams.

In many collaboratives supported by ASSIST and its predecessor projects, learning sessions were held quarterly to help maintain the pace of the improvement work. Waiting more than six months between learning sessions can cause teams to lose momentum.

## **III. Considerations in Designing Learning Sessions**

This section of the guide summarizes insights and lessons for key aspects of organizing and planning learning sessions.

### **A. Participants**

Because facility improvement teams often include 6-10 members, it is usually not possible for all team members to attend each learning session. Typically, a few members of each team attend the learning session and bring back knowledge, insights, and materials from the meeting to the other team members at the home facility. In such cases, participation in learning sessions is usually rotated among team members so that over the course of the collaborative, everyone on the team has the opportunity to attend at least one learning session.

Nevertheless, it may be appropriate, especially for each learning sessions with a greater focus on training, to include all team members.

In addition to facility-based improvement teams and quality improvement and subject matter experts, it is recommended to invite to learning sessions Ministry of Health (MOH) program managers, district health managers from the districts involved in the collaborative, facility directors, and other implementing partners.

#### **Considerations in designing learning sessions**

- Participants
- Facilitators and speakers
- Objectives and expected results
- Agenda and group dynamics
- Duration
- Location
- Team preparations for the learning session
- Materials



During the scale-up phase, when the collaborative may be expanding to new facilities and districts, representatives of new teams may be invited to the learning session to have the opportunity to talk directly with and learn from experienced QI teams. Such “mixed” learning sessions benefit new teams by enabling them to take advantage of the knowledge of experienced teams but also benefit the experienced teams by helping them to reflect on and systematize their learning.

## B. Facilitators and speakers

In order to ensure that learning sessions achieve their main purpose of enabling teams to share and learn from each other, much of the learning session should involve work in small groups or direct conversation between QI teams. It is helpful to have sufficient facilitators in a learning session to place a facilitator as the host for every discussion group to both help the group stay on task and also to pose guiding questions to the group and facilitate meaningful discussions which can help to draw out learning. Since 7-8 people is the ideal group size to allow a good conversation, a good rule is to have one facilitator for every 8 participants. In Guatemala, where the ASSIST team has tended to convene group tables with 20-30 people, they assign 2 or 3 facilitators per table.

Learning session facilitators should be drawn from the coaches who support the QI teams attending the learning session as well as technical staff who are leading the collaborative at the national level. Ideally, supervisors or QI focal points from the districts with facilities in the collaborative will also participate in the learning session as discussion hosts. However, not having Ministry of Health facilitators should not preclude holding the learning session.

For learning sessions focusing on sharing experiences, a series of PowerPoint presentations by many teams on their changes and results is not an effective way to convey their learning. Participants tend to tune out after one team has presented. A more effective way for teams to share what they have had achieved or learned is in small group discussions where team members are asked to speak specifically on one aspect of care for 2-3 minutes, followed by an opportunity for other teams to ask them specific questions about the change ideas they tested, barriers and challenges they faced, or their results.

For learning sessions aimed at training teams, a more didactic approach may be appropriate in the learning session in order to teach teams how to apply QI methods. These presentations can be made more participatory through the use of feedback mechanisms such as polling and visual display of responses in word clouds dynamically generated from words suggested by participants. Nevertheless, adult learning principles tell us that more important for learning than presentations are the practical exercises that engage participants in applying QI concepts and techniques, such as defining objectives, calculating indicators, developing flow charts, identifying changes to test, etc.

In learning sessions focused on sharing of experiences, short presentations without slides that go into depth about one aspect of the results and that are followed by conversation between the presenter and other participants enable deeper learning than do long presentations.

Technical experts or teams may also be asked to speak at learning sessions, especially to present on a challenging clinical or operational topic or to refresh participants’ understanding of key QI concepts. However, it is important to make sure that such presentations do not dominate the learning session.

### Tools to make presentations more interactive

**Live polling:** Mentimeter (<https://www.mentimeter.com/>) is a free online tool that enables participants to respond to pre-defined polls through their cell phones and have the results displayed in the presentation (assuming Internet access).

**Word clouds:** Wordclouds (<https://www.wordclouds.com/>) is a free online tool to generate word clouds from inputted text. When linked with the output of live polling through Mentimeter, can generate a word cloud from participants’ responses.

In place of formal presentations, another effective way to share new information and expert judgement is through panel discussions that do not use PowerPoint slides. A best practice is that more than half of the learning session time should involve health workers talking with each other or with experts about how to improve care, and less than half the time spent listening to others. We learn best when we talk.

Another strategy that has worked well is to have each QI team come to the learning session to create their own “situation room” where they put up posters, charts, flipcharts, and other materials to illustrate their objectives, tested changes, indicators, time series graphs, achievements, and recommendations, using boards or stands. During the learning session, teams can take turns visiting each other’s stand and hearing each team talk about its experience. (See **Annex 1B** for a description of how the Guatemala team set up this activity.)

Preparing all facilitators and speakers on their role and expectations for the learning session contributes to successful implementation of the learning session design. It is a good practice to convene a meeting with all facilitators prior to the learning session to make sure everyone is familiar with the specific objectives of the learning session, the agenda, their role, the methodology to be used in the group work, and any expected products, such as notes on key conclusions reached by the participants in their assigned discussion group. It is a good practice to develop a facilitator’s version of the learning session agenda with more detailed instructions on the activities that will take place during the learning session, including designation of which individuals will be responsible for facilitating which activities and identifying all supplies that will be needed during the learning session. Another good practice is to develop a methodological guide for the small group work to standardize the approach among all discussion groups.


### **C. Defining specific learning session objectives and expected results**

A key task in planning for a learning session is to decide what are the specific objectives of that particular session and what the collaborative organizers hope to achieve through the learning session. For learning sessions focused on sharing experiences, often this involves identifying which part of the care process being addressed by the collaborative merits priority attention. A priority area could be an aspect of care where teams have made substantial progress, and consequently the learning session is an opportunity to integrate what teams have learned as guidance for others. Alternatively, a priority area may be an aspect of service delivery where many teams are struggling; in this case, the learning session can stimulate further improvement by harnessing the creative energy of the whole group to strategize on new ways to address the challenge.

Prior to designing the learning session, the collaborative lead and coaches should meet to identify: 1) Aspects of care where results have been good across most teams and where learning can be consolidated; 2) Areas where teams are struggling and where further analysis during the learning session may help them; and 3) Content areas (either clinical topics or improvement methods) in which they feel teams need reinforcement.

A good practice before the learning session is to have coaches assemble information from each team they support on effective change ideas that teams have identified related to each key area of learning

## We Learn When We Talk



Ideas only take shape in our mind  
when we explain them to others.

A key concept in knowledge management is that “we learn when we talk.” Technical experts can inform our thinking, but teams learn best when they talk with other teams about how to overcome mutual challenges.

within the collaborative as well as to identify areas where teams are still facing challenges that could be addressed in the learning session. Teams can also be asked to prepare a poster or banner summarizing their key results and recommended change ideas.

The agenda for learning sessions held with teams after they have started testing changes should be designed around consolidating learning in areas where teams have made substantial progress, identifying remaining challenges, and discussing ideas for how to overcome them.

## D. Agenda and participant dynamics

The time available for a learning session is often limited, so the agenda should be developed in a way that makes the most effective use of the opportunity of bringing members of improvement teams together. While some initial remarks from health authorities are important to formally open the meeting, try to plan activities that engage participants early in the meeting. Giving every person a chance to say something early on (for example, within the first 30 minutes) in a meeting puts participants in an active mode of participating, rather than a passive mode of just listening. For example, asking each participant or team to start with sharing one thing that has happened in their improvement work that they are proud of is a good way to introduce teams in a way that gives meaning to their introduction. Innovative approaches for participant introductions can have a big impact on setting expectations for an engaging, participatory event.

Participant dynamics—how participants engage with each other—determines how much they will learn and take away from the session. The field of knowledge management provides many insights and techniques for facilitating the sharing of information which have proven valuable in improvement initiatives.

General principles and approaches that encourage sharing of knowledge between improvement teams include:

- **Give participants who don't already know each other a chance to get connected to each other before they try to construct new ideas together.** Use introductions, social activities, information provided before the meeting, or ice-breakers to allow participants an opportunity to talk informally and get a sense of each other before asking them to work on problem-solving in small groups.
- **Always start with the opportunity for attendees to put their best foot forward, rather than starting with a discussion of problems.** Asking “What have you achieved on this topic since the last learning session?” can embarrass some who have not made progress. Instead, ask participants to name one thing they would like to learn from other teams.
- **Use small groups of 4-8 people to allow participants to explore and discover knowledge; use larger groups to integrate knowledge that has been created in small groups.** Deliberately assign individuals to groups; participants tend to sit with people they know, but those may not be the people from whom they can learn the most.
- **Before asking participants to discuss their thoughts on an idea or question, ask them to reflect silently for a minute to think about their answer first.** Even a short time for individual reflection improves the quality of individual responses.
- **Avoid the “Beauty Contest.”** This is where the improvement teams that are excelling are put on display to present all their successes to the rest of the teams. For the “beautiful” teams, being

### Knowledge Is Created and Shared in Conversation



It is through the give and take of conversations that we share experience and develop new knowledge and insights.

held up before all the other teams is a very positive experience, but the same is not true for the other teams listening, who may feel very inadequate. Feelings of inadequacy do not inspire teams to want to return for the next learning session.

- **Foster peer-to-peer learning rather than beauty contests.** The basic proposition of the peer learning model is that every team comes to the learning session with something meaningful to offer to others. The task is to deliberately put participants in groupings where such learning can happen.
- **Follow small group discussions with a whole group session.** Giving four to eight individuals in the room a chance to answer, “What did you learn in your small group that is important for the group to understand?” is enough to bring back the rich insights from the small groups to the large group. Systematic group report-outs (where each table reports in turn on what main ideas were discussed) should be used sparingly because what is reported is too often a very limited representation of a rich discussion, and the report-outs can be repetitive and boring. It is better to have individuals speak for themselves.
- **Limit any presentations to 15 minutes and always follow them with small-group discussions about what was just said to enable participants to process the new information in discussion with each other.** Questions and answers don’t count as small-group discussion.
- **Have many notetakers with notepads, laptops, recording devices, flip charts for capturing plenary comments, and cameras who are assigned to capture moments, stories, lessons, and insights.** Be sure to tell these notetakers what form their notes should take and collect them immediately after the session ends.

### Learn in Small Groups, Integrate Knowledge in Large Groups



It is during conversations with a few others that we learn most deeply. The learning from small group conversations can be integrated in plenary sessions to generate a sense of the whole group.

Sharing knowledge using conversational approaches reinforces the concept that everyone has something to learn and share rather than having the “best” present to others. Be assured that in the many conversations everyone will hear the “best.” Conversational approaches include:

- **Materials fairs** (where teams that have job aids, counseling tools, and other materials to show are visited by others who want to know more about their materials),
- **Knowledge exchanges** (where two teams are paired to share what they each know about a topic),
- **Speed consulting** (a small group exercise that leverages the experience of all those at the table to advise one participant on how to address a specific challenge posed by that participant—see **Annex 3**),
- **Knowledge cafés** (where tables are assigned specific questions to discuss and participants move between tables for focused conversations around each question—see **Annex 4**),
- **Storytelling** (where participants share a 2-3 minute story on a specific experience with three or four others to hear their stories—see **Annex 2**), and
- **Visits to situation rooms** (booths where each QI team displays materials to characterize their improvement experience, that are visited by other QI teams. In Guatemala, members of QI

teams have even worn traditional dress and brought local foods and other items from their community to decorate their booths or hand out as mementos to other teams—see **Annex 1B**).

In assigning participants to small groups, keep in mind whether the discussion topic would benefit from diversity of experience (to stimulate new ideas and thinking) or whether it would be more advantageous to have those working in a similar setting work together to plan implementation (for example, grouping all participants from large hospitals together or all those from small health centers). If there are two or three participants from the same facility, assigning them each to different groups will ensure that the facility's experience is shared the most widely and that the facility will benefit from the most ideas. It is also important, before the end of the learning session, to provide time for participants from the same team or facility to meet together to share what each has learned and plan their next steps.

Another engaging way of analyzing experiences across a few teams is to bring one representative from each of two or three teams to be interviewed by a coach or activity leader as if on a **television talk show (Annex 5)**. The talk show host's questions can bring out each team's insights about its experience with questions that address what worked, what was challenging, and what that team would recommend to others. The rest of the participants can also be invited to pose questions to the talk show panelists.

If the learning session includes teams from more than one collaborative, one option is to divide the agenda into two parts (see the example in **Annex 1D**). Some parts of the learning session will be the same for both groups of teams, while some activities may require that teams meet by collaborative. If teams from the two collaboratives are from the same facility, it may be useful to have both collaborative teams develop their action plans together, since their activities may be linked.

## **E. Duration**

Learning sessions supported through ASSIST have varied from one to three days, with the most common duration being one and a half days. Several ASSIST country teams in Latin America have focused on one-day learning sessions due to resistance of national health authorities to health workers on QI teams being taken away for longer than one day from their posts. If the time for the learning session is limited to only one day, avoid individual presentations by teams (which take up a lot of time and are not very engaging) and instead use small group conversations to explore the most important issues facing teams. Remember that a learning session is not a program review; it should be focused on specific areas where learning is possible or needed. Results from every indicator do not necessarily need to be reviewed or discussed.

**Annex 1** provides sample agendas from learning sessions convened by the ASSIST teams in Honduras, Guatemala, Paraguay, and Dominican Republic for Zika improvement teams.

## **F. Location**

There is a tradeoff between holding the learning session in the capital city (which is usually more convenient for ASSIST staff and national MOH officials) and holding learning sessions in a location closer to where teams work, reducing the time teams are taken away from clinical duties. One ASSIST country team found that it was better not to bring teams to the capital city since they would be tempted to disappear during the learning session to attend to business at the Ministry of Health headquarters. However, for experience-sharing learning sessions, it may be more appropriate to locate them in the capital so that all teams from across the country participate.

If there is reluctance on the part of MOH officials to allow health workers who are part of QI teams to be away from their facilities, arrange for decentralized learning sessions where a smaller number of teams meet to share their experiences. If multiple learning sessions addressing the same topic but held in different geographic areas are conducted, think through how to integrate and share the key insights generated in each learning session with all of the teams. This can be accomplished through newsletters, web seminars, or report-outs from coaches on their next visit.

## **G. QI team preparations for the learning session**

Having QI teams prepare before the learning session helps increase the effectiveness of the exchange, especially when the duration of the learning session is short. Typically, teams are asked to create a poster or storyboard presenting the time series graph for one or two of their indicators, with annotations to show the main change ideas teams have tested. It is also helpful to ask teams to think about:

- Are there changes and strategies they have applied which they feel could benefit other teams and which they could describe in the learning session?
- Is there some aspect of care they are having difficulty improving?
- What advice do they have for other teams based on their work so far?
- What steps have they taken to sustain the results they have achieved?

As discussed above, individual PowerPoint presentations are not an effective way for teams to share what they know. Posters can serve as the basis for an oral presentation, but they should also be clear enough for others to read on their own. Coaches can help teams prepare for the learning session by helping them develop their poster and by discussing with them the questions that the learning session organizers want teams to think about ahead of the learning session. The coaches should have a good idea of areas where the teams they support have been successful and areas where each team might need help, and they should use this knowledge to help in assigning teams and individuals to small groups during the learning session.

Creating opportunities during the learning session for every improvement team to share something is important to achieve the collaborative improvement principle of “all teach, all learn.” Achieving a meaningful exchange of experiences during the learning session requires prior work with teams to focus them on identifying important insights to share with other teams. It also demands good time management during the learning session to ensure that the initial teams to share don’t take up more than the allotted time and leave limited time for other teams to share their experiences.

## **H. Materials**

Materials that may be useful to have at the learning session include:

- Name badges (on cords or clipped on to allow notations on the back of the name badge)
- Agenda
- List of all participants, indicating their facility and contact information to enable participants to contact each other after the learning session if they want to learn more about something they heard
- Pens and paper for participants to take notes
- Markers for participants or facilitators to make notes on flipcharts or wall posters
- Flip chart paper
- Flip chart stands
- Tape or pins to affix posters to the wall
- Cards or pads of paper for individuals to record specific ideas and post them
- Guidance for table hosts, note takers, and facilitators
- Action planning templates
- Recorders
- Laptop computers
- Microphones
- Bells/chimes to signal transitions

## IV. Tips for Conducting Successful Learning Sessions

### A. Registration

Because attendance at a learning session may be linked with URC's per diem compensation or even assignment of continuing professional development credits, a registration table is helpful, where participants should be asked to indicate name, health facility or organization they represent, and email address or cell phone. If the identity of the facility representatives is not known in advance, a participant list can be generated after registration and distributed to all participants before the end of the day.

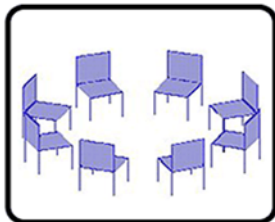
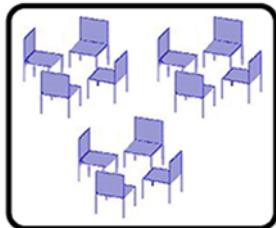
If small groups or parallel sessions are used in the agenda, be sure to give participants directions on how they will know which group or parallel session they should attend. One consideration when assigning participants to different small group discussions is how to communicate table assignments to a large number of participants. A simple technique is to put a number and/or a colored dot on each name badge, which indicate their table assignment at different points in the agenda.

### B. Venue set-up

How the room is set up makes a big difference in how participants interact. If the room is set up in classroom style (all chairs facing the front of the room), that arrangement puts participants in a passive mode of listening but not contributing.

Small group conversation is the best way to facilitate exchange of tacit knowledge, so having the room set in with round tables (seating no more than 8 people) is preferable. Small tables that seat 4-6 people are much better for good conversation than big tables that seat 10-12 people because at large tables, people end up too far apart and have to yell across the table to be heard in a full room.

Consider whether the entire meeting or at least certain activities could be convened with *no tables* in the room. Having only chairs makes it easy to move chairs around in many different configurations, although it may be inconvenient to conduct the entire meeting without tables, given that many participants may bring laptops.



Whether or not you have tables, it is preferable to convene the learning session in a large room where it's easy to move around and where round tables can be far enough apart that participants at each table can hear each other but not the other groups' discussions.



### C. Key roles during the learning session

As with any event with a large number of participants, a learning session is more easily managed if several key roles are assigned ahead of time and if the persons performing these roles are oriented to what is expected of them. Key roles during the learning session may include:

- **Master of ceremonies (or meeting moderator):** This person acts as the host of the meeting and keeps the agenda moving on track, starting and ending the day and introducing each speaker or activity leader. (The master of ceremonies may also lead some activities.) If the learning session lasts more than one day, this role may be played by a different person each day.

- Group discussion hosts and notetakers:** For each small group discussion, it is helpful to have an assigned “table host” who knows the purpose of the discussion and can help the participants keep the discussion on track without leading the discussion. It is also helpful to assign one member of the group to take note of key points raised that might be shared in plenary. The table host can also play this role. During action planning discussions, it is helpful to recommend that teams appoint a notetaker from within their team.
- Activity leader:** If one part of the learning session will focus on a particular topic or theme, it can be helpful to designate one person who is well versed in that topic to lead that activity. If the activity is a small group discussion followed by sharing in plenary, then the activity leader should explain what participants are going to do in small groups and let groups know when the discussion time is over and that they should come back to the large group. If there is some type of group sharing, the activity leader would facilitate that. If the activity is a panel discussion, the activity leader would be the panel moderator.
- Timekeeper:** If there are many activities or presentations within a learning session, it may be helpful to have one person designated as the timekeeper to alert the master of ceremonies or activity leader when the time allotted is running out. If there are formal presentations during the learning session, the timekeeper can also alert each presenter when she or he has 5 minutes, 1 minute, and no time left. This person should also communicate time available for breaks and lunch. An easy way to convey how much time is left is to project the Timer/Stopwatch function of a laptop computer on the screen to show how many minutes and seconds are left before the break ends.
- Commentator:** If an activity seeks to identify common themes from a discussion or series of presentations, it can be helpful to designate one person to provide commentary on what they have heard. This individual should not have other responsibilities during the activity so that he or she can direct his or her full attention to listening and reflecting on the discussion. The commentator role is often a good one to assign to a regional or district health official who is attending the learning session, to hear that official’s reflections on what teams have discussed.
- Energizer leader:** After the group has been engaged in an activity for a long period, or if participants in the meeting show signs of fatigue, a short energizer may be helpful, especially after lunch. This individual would be responsible for leading a short stretching exercise or other activity to get participants on their feet.
- Administrative personnel:** Any event with dozens of participants requires a team to manage participant registration, distribution of materials and name badges, and general meeting logistics.
- Photographer:** It may be helpful to assign an ASSIST staff member to take photographs during the learning session and of each QI team with their poster or banner.

The role of group discussion host
<ul style="list-style-type: none"> <li>Establish a welcoming environment where all feel motivated to participate and share their insights</li> <li>Manage the time and flow of planned activities</li> <li>Encourage participation of everyone in the meeting</li> <li>Ensure that no one participant dominates the discussion</li> <li>Pose questions that will elicit insights from speakers and participants</li> <li>Avoid expressing personal opinions or judgement</li> <li>Capture or summarize the main points discussed</li> </ul>



## D. Integrating the key learning from small groups

Achieving the learning session purpose of identifying innovations and promising practices requires ongoing reflection and synthesis of key learning throughout the learning session. It is tempting to designate one activity at the very end of the learning session to try to summarize or review all the key lessons learned; however, this approach runs the risk of neglecting lessons and insights covered earlier in the learning session and instead only focusing on the last few activities. A better practice is to take a few moments at the end of each activity during the learning session to verbalize for the whole group what key lessons were identified in that activity. These can be noted on flip chart pages that are posted on the wall so that they are visible to all participants throughout the learning session. If the master of ceremonies or activity leader is tasked with summarizing the key points of learning after an activity, it's a good practice to assign a notetaker to record what the person says, since the collaborative leaders will want to create a written record of key insights and conclusions from the entire learning session. This notetaker should not be a technical advisor responsible for the activity since that person will want to participate in the discussion.

**Popcorn report-outs** is a technique for eliciting comments from those who feel moved to share them, rather than calling on tables or groups sequentially to report out. After participants have met in small groups to discuss a particular topic area and come back to the plenary session, the master of ceremonies or activity leader can simply ask the open question, "What did you hear in your small group that is important for the whole group to understand?" and allow the group to think for 20-30 seconds before you say anything further. Some people (like the first kernels of popping popcorn) will be moved to share their thoughts or reflections. Hearing from a few people will likely encourage others to also share reflections. The facilitator can also ask a question such as, "Did anyone have a different view?" to elicit other views. Hearing from 5-8 individuals in a large group can create a sense of the key issues discussed across the small groups and takes less time and usually involves less repetition than group-by-group report-outs.

Other techniques that have proven useful for stimulating the synthesis of knowledge among improvement teams include:

- **Field Trip Around the Room** is a technique that can be used in a meeting to organize how members of the group discuss several topics and integrate their ideas for how to address them. It uses small group conversation and successive discussions of the same topic by different groups to help integrate the ideas of the whole group around specific topics and questions. (See **Annex 7** for a more complete description of this technique.)
- **Knowledge Café** is an approach for hosting conversations about questions that foster discussion about a topic important to participants. These conversations link and build on each other as people move between groups, cross-pollinate ideas, and discover new insights into the questions or issues that are most important in their facility and/or community. As a process, the Knowledge Café can make visible the collective intelligence of the group. (See **Annex 4** for a more complete description of this technique.)
- **1-2-4-All** is a technique that facilitates rich conversation in groups of two and then in groups of four, as two pairs come together to integrate their ideas around an important question or issue, such as, What are critical elements to promote the sustainability of a specific practice? (See **Annex 8** for a more complete description of this technique.)

## E. Action planning

Learning sessions typically end with an action planning exercise organized by team or facility. It is a good practice to give participants a template for how they should describe their next steps in ways that can be easily shared with other participants. A simple template works best if there is a verbal report-out of what the team plans to do next as a result of the learning session. Teams can also be asked to write out their

high-level action plan on one flip chart page; these can be shared in the form of a **Gallery Walk** (see **Annex 6**) or shared in rapid style by asking each team to have one team member say one thing the team will do as a result of this learning session. More detailed action plan templates are fine if the teams are typing up their plans on a computer for later sharing with their coach and with other team members who did not attend the meeting. However, keep in mind that detailed action plans are not very interesting for other participants to hear and so should not be shared in plenary. As part of their action planning, one activity that is helpful to suggest to teams is to identify how and when they will share what they heard and learned in the meeting with other members of their improvement team who were not able to attend the learning session.

## F. Learning session products

It is a good practice to create a short, written record of the key insights and ideas that were shared in a learning session. It can also be very helpful to produce a version of the detailed facilitator agenda with notes on what worked well and what might be done differently going forward. These annotated agendas are very helpful for planning the next learning session.

Some ASSIST teams have published technical reports describing the methods used in their learning sessions and identifying the effective practices shared among teams. Two examples of these reports, which were prepared after the third learning session of two different collaboratives in Honduras, are available in Spanish at: <https://www.usaidassist.org/honduras-informe-tercera-sesion-zika> and <https://www.usaidassist.org/resources/informe-de-la-tercera-sesion-de-aprendizaje-zika-honduras-planificacion-familiar>.

## G. Evaluation/After action review

Generally, ASSIST teams have not asked participants in a learning session to fill out detailed evaluation forms or post-tests, as might be done in a training. However, it is a good practice to get feedback from participants on the learning session—what they found most useful and what they would like to see done in the next learning session. This feedback can be collected through a short, well-structured opinion survey or could also be collected informally by coaches talking with the teams they support and by ASSIST staff talking with MOH officials. Feedback can be collected more systematically in a large group by asking each participant to note on a card what they found most useful and what they would like to see repeated in the next learning session. The cards can be collected, and a sample of the responses read aloud to the whole group to give a “sense of the room” without reading the response of every participant.

In addition to participant feedback, a best practice is for the ASSIST team that organized the learning session to hold a debrief in which they review what worked well and what they would change next time. An **After Action Review** is a structured but rapid process for team members to reflect on an event or task they have just accomplished (see **Annex 9**). These reviews can be conducted after each day or after the session. The key to an effective learning session debrief is to capture what will be done the following day or for the next learning session.

## H. Post-learning session follow-up by coaches

If teams create a detailed written action plan at the learning session, it's a good practice for the team's coach to get a copy of the completed action plan to be able to follow up with the team on their progress in following their plan during the next coaching visit. If a written summary of key lessons and practices discussed in the learning session is prepared, provide a copy for each improvement team. The coach can review the document with the entire team as another way of sharing what was discussed in the learning session with other team members who did not attend.

## Annexes

### Annex 1: Sample agendas for Zika learning sessions

#### Annex 1A: Workshop Agenda: Learning Session on Successful Experiences in Preventing Zika Infection in Family Planning Services

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**SECRETARIAT OF HEALTH (SESAL)  
HONDURAN INSTITUTE OF SOCIAL SECURITY (IHSS)  
USAID ASSIST PROJECT**

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#### INTRODUCTION

The Secretariat of Health (SESAL) and the Honduran Social Security Institute (IHSS), with the technical support of the USAID Applying Science to Strengthen and Improve Systems (ASSIST) Project, are implementing health care improvement activities with a dynamic and continuous learning agenda to generate knowledge that can be shared with other programs, organizations and even countries.

Currently the SESAL and the IHSS are implementing an improvement collaborative focused on integrating Zika prevention counseling within family planning (FP) services, involving improvement teams in prioritized health facilities. Within the structure of the collaborative, each team define its improvement objectives, analyzes gaps in its own care processes, identifies changes to test to bridge those gaps, and conducts periodic measurement of key indicators to prevent Zika infection in women of reproductive age and their partners.

Between the SESAL and the IHSS, 20 health facilities have teams participating in the Zika prevention in family planning collaborative. To identify and document that changes these teams have made to improve care, the SESAL and the IHSS, with support from ASSIST, have organized a learning exchange event in which both successful and unsuccessful experiences will be discussed to learn what practices should be scaled up in Zika-FP services. This document describes the agenda and methodology of the learning session.

**LOCATION:** Tegucigalpa, Honduras

**DATE:** February 7-8, 2018, 08:00 a.m. to 4:00 p.m.

**PARTICIPANTS:** Coordinators and active members of QI teams SESAL and IHSS facilities participants in the Zika-FP collaborative.

**OVERALL OBJECTIVE:** Present the successful experiences of QI teams on FP care in the context of Zika, with the goal of identifying changes that led to improvement so that these could be disseminated among all teams and adopted through an intentional scale-up process.

#### METHODOLOGY:

##### Activities carried out before the learning session:

1. The SESAL Quality Management Unit sent to each QI team a tool to complete to document their tested changes.
2. Each team was also asked to prepare a short PowerPoint presentation highlighting the information in the documentation tool.
3. ASSIST and the SESAL Quality Management Unit reviewed the documentation tools received to identify those QI teams with promising changes and results related to Zika counseling as well as those teams that needed more support.

- The documentation tools also served to identify three teams that would be recognized for their results with a prize; the remaining teams would also receive a whiteboard for graphing team series charts.

**Methods used in the learning session:**

- To share experiences and disseminate learning by QI teams, we used a variation of the “Speed Consulting” technique** which consisted of organizing 8 discussion tables in which representatives of mixed groups of teams are placed (i.e., teams that have achieved results, teams that have not achieved results, and teams that have not yet started FP improvement work). Prior to the exercise, consultant “experts” were selected from among the teams that had tested a successful change in the Zika counseling in FP services. The experts took turns visiting each table to “sell” their change ideas related to Zika counseling in family planning, explaining how they implemented the change and encouraging the participants in each team to adopt these changes. During approximately 20-minute rounds, the consultant would pitch their successful changes and answer questions from the table participants. Other table participants could also try to “sell” their change ideas to the group.
- Presentations were made** on technical topics like national Zika services quality indicators, the Filter (Screening) Sheet to identify clients for Zika counseling, use of time series charts, and use of the Zika counseling tool.
- A panel discussion focused on male partner involvement in Zika prevention**, moderated by Dr. Manuel Carrasco who posed questions to the panelist on the topic of male involvement. The panelists were men who are involved with organized men’s group in the North Zone and who were invited to share their experiences. Each panelist was given 5 minutes to tell his story and answer the question posed. At the end of the panel, the moderator summarized the key points discussed, emphasizing the key factors for deciding how to replicate the experience in other health facilities.
- Prizes for the most impactful changes** were given to three teams selected based on ranking by SESAL and ASSIST of the impact of the change ideas. The rest of the teams were given a whiteboard on which to graph time series charts.

**Products:**

- Successful experiences of 20 QI teams in improving Zika counseling in family planning services
- Change ideas that yielded improvement identified
- Operational proposals for strengthening Zika counseling discussed (Filter Sheet, Zika counseling tool)
- Teams empowered to include men in family planning and family health services
- Teams with the most impactful change idea recognized

<b>WEDNESDAY FEBRUARY 7, 2018 Master of Ceremonies: Dr. Eva Chacón</b>			
<b>TIME</b>	<b>TOPIC</b>	<b>METHODOLOGY</b>	<b>RESPONSIBLE</b>
8:00 am -8:30 am	Participant Registration and distribution of name badges	List of participants	Ms. Lucila Bustillo Quality Management Unit, SESAL Dr. Tania Díaz, ASSIST Technical Advisor
8:00-8:40	Presentation of the Speakers	Remarks by Master of Ceremonies	Dr. Eva Chacón
8:30am - 8:40 am	Opening of the event	Presentation	Dr. Roberto Cosenza
8:40am - 8:45 am	Palabras de Representante de USAID	Presentation	USAID representatives
8:45am -9:00 am	Introduction and methodology of the learning session	Dr. Eva Chacón	Master of ceremonies

<b>WEDNESDAY FEBRUARY 7, 2018 Master of Ceremonies: Dr. Eva Chacón</b>			
<b>TIME</b>	<b>TOPIC</b>	<b>METHODOLOGY</b>	<b>RESPONSIBLE</b>
9:00 -9:20 am	Introduction of participants	Introduction to the group dynamic	Ms. Zayda Cáceres, ASSIST Technical Advisor
9:20 am -9:40 am	The Collaborative Approach to Improving Health Care in the Context of Zika	Presentation	Dr. Manuel Carrasco, SESAL Quality Management Unit
9:40 – 10:00 am	Review of National Indicators, emphasizing Family Planning	Presentation	Ms. Mirian Moradel, ASSIST Technical Advisor
	Directions for the Group Work		Dr. Eva Chacón/Ms. Malena Banegas, ASSIST
10:00 am-10:20 am	<b>BREAK</b>		
<b>Family Planning Improvement Teams Facilitator: Malena Banegas</b>			
10:20 am-10:40 am	8 working groups using speed consulting (buying change ideas from speed consultants)	Group discussion	Assigned technical staff
10:40 am -11:00 am	8 working groups using speed consulting (buying change ideas from speed consultants)	Group discussion	Assigned technical staff
11:00 am – 11:20	8 working groups using speed consulting (buying change ideas from speed consultants)	Group discussion	Assigned technical staff
11:20 am – 11:40	8 working groups using speed consulting (buying change ideas from speed consultants)	Group discussion	Assigned technical staff
11: 40 am -12:00	8 working groups using speed consulting (buying change ideas from speed consultants)	Group discussion	Assigned technical staff
12:00 m-1:30 pm	<b>LUNCH</b>		
1: 30 am -1:50	8 working groups using speed consulting (buying change ideas from speed consultants)	Group discussion	Assigned technical staff
1:50 am- 2:10	8 working groups using speed consulting (buying change ideas from speed consultants)	Group discussion	Assigned technical staff
1:50 am- 2:10	8 working groups using speed consulting (buying change ideas from speed consultants)	Group discussion	Assigned technical staff
2.10-2:30	<b>BREAK</b>		
2:30-3:10	Comments from the reporters of each table to express in 5 minutes the key ideas discussed in the table	Report-out	Ms. Malena Banegas
3:10-4:10	Use of the Zika Counseling Tool in Preconception, Pregnancy, Delivery, Post-Partum, and Family Planning Services	Presentation	Dr. Melvin Chavez

<b>THURSDAY FEBRUARY 8, 2018 – Master of Ceremonies: Mayra Colindres</b>			
<b>TIME</b>	<b>TOPIC</b>	<b>METHODOLOGY</b>	<b>RESPONSIBLE</b>
8:00-8:15	Summary of Key Points Discussed on Day One	Presentation	Dr. Eva Chacón
8:15-8:30	Annotating Time Series Graphs	Presentation	Dr. Karen Cordova
8:30-9:30	<b>Panel:</b> Experiences involving men in reproductive health services in Tela Hospital, Carlos B. Gonzalez Health Center, Progreso Hospital, and Ceiba Metropolitan Hospital	Panel discussion	Moderator: Ms. Zayda Caceres, ASSIST QI team representatives
9:30- 9:50	<b>BREAK</b>		
9:50 - 12:00	Male Participation in Reproductive Health Services	Presentation	Ms. Maribel Lozano, Gender Consultant
12:00- 1:00	<b>LUNCH</b>		
1:00-1:30	Identifying Clients for Zika/Family Planning Counseling Using the Modified Filter Sheet	Presentation	Ms. Malena Banegas Ms. Zarvia Iveth Lanza
1:30 am-2:00	Presentation of Certificates of Recognition	Plenary	Dr. Norma Aly, ASSIST Country Director
2:00-2:30	Closing and Next Steps	Plenary	Dr. Manuel Carrasco, SESAL Dr. Norma Aly, ASSIST

## Annex 1B: Learning Session for Quality Improvement Teams from Seven Hospitals and a County Maternity in Guatemala

Antigua Guatemala, Guatemala, July 19-20, 2018

### 1. OBJETIVES

- Share experiences among improvement teams in the three Zika collaboratives in Guatemala
- Identify and discuss successful change ideas and the process of adapting them in health facilities
- Identify best practices in the context of Zika and define how they can be scaled up in health services
- Systematize change ideas in the context of Zika
- Plan the organization of follow-on activities and reinforce teams' understanding of collaborative improvement
- Introduce the topic of institutionalization

### 2. RATIONALE

In the context of collaborative quality improvement, learning sessions where improvement teams from different facilities come together to share and analyze their experiences to explore the feasibility of spreading effective practices to other facilities.

In this meeting, improvement teams from Zacapa, Chiquimula, Cuilapa Santa Rosa, Poptún, Amatitlán, Coatepeque, and Quetzaltenango hospitals and the County Maternity in Amatitlán that are participating in the three Zika collaboratives supported by the USAID ASSIST Project will share their results, time series graphs, and change ideas that they have tested to identify best practices. An expected result of the session is to systematize the change ideas and best practices for spread.

### 3. PARTICIPANTS

Approximately 80 participants representing the improvement teams from 7 hospitals y one County Maternity and ASSIST staff.

#### AGENDA for 1.5 day learning session

Time	Content - Topic	Methodology	Materials and Staff Responsible
FIRST DAY			
08.00-08:30	Registration and distribution of participant materials	Register each participant in the electronic register, print form for participant signature	Electronic participant register, banner, sheets, printer, computer. Ms. Jennifer Aguilón, ASSIST and ASSIST coaches
8:30- 9:00	Welcome and objectives	ASSIST Project Director gives words of welcome to the participants. Welcome by senior MSPAS representative present at the learning session	Dr. Roberto Adana Slide with learning session objectives, projector
9:00 – 9:20	Participant introductions	Name each hospital present and ask that they identify themselves by improvement team, beginning with the maternal care team, followed by the newborn care team and lastly the care and support team	Dr. Karen Orellana
09:20 – 10:00	Organization of the Situation Rooms	<i>Prior to the start of the learning session, the coaches have designated spaces for each facility with a wall covering with the name of each hospital.</i>	ASSIST coaches All participants Room number 2

Time	Content - Topic	Methodology	Materials and Staff Responsible
		Participants from each collaborative team puts up information on its results, the change ideas the team tested, and whether they improved care or not.	
10:00 – 11:00	Continuous quality improvement	Presentation “Continuous quality improvement, improvement cycles, and what to do with them”	Dr. Jafet Arrieta, Institute for Healthcare Improvement (IHI) Presentation, projector
11:00 - 11:30	<b>BREAK</b>		
11:30-13:30	Presentation of the situation rooms of each improvement team	<p><b>INSTRUCTIONS:</b></p> <p>Tell participants to move to the room with the team stands (Situation Room). Ask each team to meet by its stand.</p> <p>Instruct each team to select one person (<b>the presenter</b>) who will explain to visitors how their improvement work was carried out, the change ideas tested that were not successful and those that were successful. Give each presenter the card with guidance on what should be presented in each round of visits.</p> <p>The other members of the team will play the role of <b>visitors</b> to the situation rooms of other hospitals and will take notes on what most impressed them from other facilities’ work in the visit guide sheet.</p> <p>Each visit will last 20 minutes. There will be 10 minutes for the presenter to share their results and 10 minutes for questions from the visitors.</p> <p>When the bell sounds, each group of visitors will move to their right to the next stand presenting work in their collaborative. The person left behind to explain their hospital’s work on that collaborative will explain to the group that comes to the stand:</p> <ul style="list-style-type: none"> <li>- Results for each indicator</li> <li>- How they started work on each indicator</li> <li>- What changes the team tested to improve the indicator’s performance</li> <li>- What changes didn’t work</li> <li>- What challenges the team faced</li> <li>- What the team’s main accomplishments have been</li> </ul> <p>After explaining the team’s work for 10 minutes, the next 10 minutes will be used to answer the visitors’ questions to help them complete their visit guide sheet.</p> <p>After the 20-minute round, the bell will sound, and visitors will move to the next stand for their collaborative, repeating the same process.</p> <p>After the second 20-minute round, <b>the bell will sound twice</b> to signal that the person who served as each team’s <b>presenter</b> should switch places with another team member so that the person can also learn from visit to other stands.</p> <p>After two more 20-minute rounds, <b>the bell will sound twice</b> again to signal another substitution of presenter, to give all team member the chance to hear the presentations of other situation rooms.</p> <p>After six rounds of 20 minutes (two hours), the moderator will thank participants and invite them to lunch.</p>	<p>Wall tape</p> <p>Visit guide sheet</p> <p>Cards with guidance for team presentations</p> <p>Clip boards</p> <p>Pens</p> <p>Bell</p>



Time	Content - Topic	Methodology	Materials and Staff Responsible
13:30 – 14:30	<b>LUNCH</b>		
14:30 – 15:00	Team group dynamics to energize people after lunch	<p><u>Ask</u> that participants distribute themselves by collaborative and make three parallel lines (one per collaborative).</p> <p><u>Explain</u> that one by one participants should run to the wall and remove one of the figures posted there and take it to the facilitator for that line, who will collect all the figures gathered by each line, and then go to the end of the line.</p> <p><u>Emphasize</u> that the team that collects the highest number of figures in the time allotted will win.</p> <p>Stress that the next team member in line cannot start running to the wall until the person in front of them has given the figure to the facilitator. If any of the figures are placed too high on the wall for the participant, at that moment, other members of their line can support them.</p> <p>Chairs, ladders, tables or other type of help may not be used.</p> <p><u>When time is up, tell</u> participants to stop collecting and determine the number of figures collected by each line to determine the winner.</p> <p><u>Reflect</u> on why the team won, talk about the value of team support and work, how men and women contribute equally, each with the same capacity to perform team tasks. Speak about how working in teams is about doing things right, even working with people you don't know, and doing our best to work toward a common objective.</p> <p><u>Reinforce</u> the value of the group work.</p> <p><u>Hand out</u> the recognition to the winning team.</p> <p><u>Ask</u> for a round of applause for all participants.</p>	Cut-out figures Wall tape Prizes
15:20 – 16:00	Analyzing what participants learned from the situation rooms	<p><u>Gather</u> all participants in tables by collaborative and QI team</p> <p><u>Distribute</u> the summary sheet on observations from the visits to the situation rooms</p> <p><u>Ask</u> that each table discuss that they saw they saw in the visit—what change ideas and best practices they observed that could be applied in other facilities and record these ideas on the summary sheet</p> <p><u>Ask</u> them to write their conclusions on the summary sheet</p> <p><u>Take</u> photos of what each table wrote and print to provide a copy to everyone</p> <p><u>Thank</u> participants for their work</p>	Summary sheet to record observations from the visits to the situation rooms
16:00 – 17:00	Selecting best practices	<p><b>FIRST PART</b></p> <p><u>Place</u> the tape recorder in the middle of the room to capture all the comments</p> <p><u>Open</u> the session stating that there will be brainstorming exercise to identify change ideas that they think can be applied to all hospitals to improve the quality of care</p> <p><u>Note</u> each idea on the flipchart</p> <p><u>Be sure to record</u> all the change ideas suggested</p> <p><u>Ask</u> who has implemented the change idea</p>	Tape recorder Flip chart Markers

Time	Content - Topic	Methodology	Materials and Staff Responsible
		<p><u>Ask</u> them to explain all the details about how they implemented the change, what were the difficulties encountered, and how they overcame them</p> <p><i>One of the facilitators records on laptop the details mentioned about each change idea. Another facilitator writes on the flipchart all the ideas and summarizes them.</i></p>	
<b>SECOND DAY</b>			
8:00 – 8:30	Summary of previous day	<b>Summarize</b> the key points discussed/conclusions from the previous day	Dr. Oscar Ixquiác, ASSIST
8:30 – 9:15	Selecting best practices	<p><b>SECOND PART</b></p> <p><u>Select</u> for each collaborative one person to present in the plenary the selected change ideas that can be implemented in all health facilities (15 minutes to present per collaborative)</p>	
9:15 – 10:00	Presentation	<p><b>Institutionalization</b></p> <ul style="list-style-type: none"> <li>• What is it</li> <li>• How do you achieve it</li> <li>• Why institutionalize</li> <li>• When should a change idea be institutionalized</li> <li>• Steps to follow to institutionalize change ideas</li> </ul>	Dr. Jafet Arrieta, IHI Presentation, projector
10:00 – 10:30	<b>BREAK</b>		
10:30 – 10:50		<p>Present the video “8 powerful decisions to change your attitude” (10 minutes)</p> <p><a href="https://www.youtube.com/watch?v=J0C6PnJQ3mw">https://www.youtube.com/watch?v=J0C6PnJQ3mw</a></p> <p><u>Reflect</u> on how the video relates to the presentation on institutionalization</p> <p><u>Ask</u>: How do you see the environment with respect to the changes?</p> <p><u>Thank</u> participants for sharing their insights.</p>	Dr. Mérida Chaguaceda, ASSIST
11:20 – 12:50	Next steps	<p><u>Distribute</u> the institutionalization worksheet</p> <p><u>Ask</u> each improvement team to list out the steps to institutionalize effective change ideas (20 minutes)</p> <p><u>Ask</u> two teams from each collaborative to present their work (10 minutes each, 60 minutes total)</p> <p><u>Make</u> a final summary of common elements</p> <p><u>Congratulate</u> teams for their work</p>	Dr. Mérida Chaguaceda ASSIST coaches
12:50 – 13:05	Evaluation of the learning session	<p>Distribute an evaluation form to each participant</p> <p>Collect the completed evaluations</p>	ASSIST coaches
13:05 – 13:20	Closing Distribution of certificates of participation	<p>The facilitator emphasizes the importance of the learning session and the results achieved and reaches agreement on a possible date for the next learning session</p> <p>Distribution of certificates and group photo</p> <p>Closing remarks</p>	Facilitator URC Dr. Roberto Aldana

**Annex 1C: First Learning Session – Health Region X, Alto Parana, Paraguay**

**USAID ASSIST PROJECT**

***JULY 27, 2018***

***Gran Nobile Hotel & Convention Center – Ciudad del Este (CDE), Paraguay***

**AGENDA**

<b>TIME</b>	<b>ACTIVITY</b>
8: 00 - 8:30	Participant registration
8:30 - 8:50	Welcome and opening remarks: Ms. Graciela Avila, USAID ASSIST Project Dr. Cynthia Diaz, Ministry of Public Health and Social Welfare (MSPBS) Dr. Gregorio Gustavo Giubi Romero, Regional Director, Region X
8:50 - 9:15	Icebreaker and participant introductions. Ms. Dominica Vera, ASSIST
9:15- 9:20	Review of the agenda and learning session methodology. Ms. Graciela Avila, ASSIST
9:20 - 9:40	Presentation: “The collaborative approach to improving health care.” Ms. Lani Marquez, ASSIST
9:40 - 10:10	Team presentations of posters on improvement cycles on prenatal care (10 minute per team). Presidente Franco Hospital, Hernandarias District Hospital, and CDE Regional Hospital
10:10 - 10:30	Break
10:30 -11:00	Presentation of posters on improvement cycles on newborn screening (10 minutes per team). CDE Regional Hospital and Presidente Franco Hospital
11:00 a 11:30	Feedback to the improvement teams and next steps. Ms. Lani Marquez, ASSIST, and Dr. Hugo Siu, IHI
11:30 -12:30	Work groups by collaborative: prenatal care and newborn screening. Challenges and how to overcome them. Participants first met by collaborative (two groups), and then divided in two groups, each discussing one challenge area and identifying strategies to address it (four groups).
12:30 -13:00	Sharing insights. Hugo Siu, IHI, and Lani Marquez, ASSIST
13:00 -13:15	Presentation of certificates, closing remarks by MSPBS representative
13:15 – 14:00	Lunch

## Annex 1D: Learning Session from the National Newborn and Care and Support Collaboratives in the Dominican Republic

August 23, 2018

### Objetivo

Facilitate the exchange of learning among improvement teams from the Zika Newborn Care and Zika Care and Support collaboratives: change ideas, results achieved, lessons learned, and challenges in the context of interventions supported by the USAID ASSIST Project.

Time	Activity	Responsible
8:00 am–8:30 am	Participant registration and distribution of materials	ASSIST team
8:30 am–8:45 am	Welcome	National authorities
8:45 am–9:00 am	Presentation of the agenda: Objectives and context	Dr. Cecilia Villaman, ASSIST
9:00 am–9:45 am	Session I: Presentation “Towards the sustainability and institutionalization of improvement changes”	Dr. Jafet Arrieta, Dr. Luis Fernando Vieira, ASSIST
9:45 am–10:00 am	Break	
10:00 am–10:10 am	Session II: Introduction to the presentation of regional posters for the Newborn Collaborative and group work instructions	Dr. Eneyda Almonte, ASSIST
10:10 am–10:40 am	Session III: Visits to regional posters: Region 0 (2 posters), Regions I and VI (San Cristóbal, Azua, San Juan), Region II (Santiago, Puerto Plata), Region IV (Barahona, Bahoruco, Independencia)	Ms. Lani Marquez, Dr. Eneyda Almonte, ASSIST
10:40 am–11:20 am	Session IV: Small group work applying the guide including in the participant folders	Ms. Lani Marquez, Dr. Eneyda Almonte, ASSIST
11:20 am–12:00 pm	Session V: Plenary sharing of conclusions of the small groups	Ms. Lani Marquez, Dr. Luis Fernando Vieira, ASSIST
12:00 pm–12:30 pm	Session VI: Feedback from the health authorities	Ms. Lani Marquez, Dr. Eneyda Almonte, ASSIST
12:30 pm– 1:30 pm	Lunch	
1:30 pm–1:40 pm	Session VII: Introduction to the group work and presentation of the experiences of the Care and Support collaborative improvement teams	Dr. Viery Franco, ASSIST
1:40 pm–2:30 pm	Session VIII: Presentation of Care and Support improvement team experiences (posters projected on the meeting room screen): Region 0, Region I, and Region VI. Experiences and achievements	Region 0: Dr. Taina Malena, Dr. Candelaria Region I: Dr. Clara Quezada Region VI: Dr. Elizabeth Lizardo
2:30 pm–3:15 pm	Session IX: Small group work applying the guide included in the participant folders	Dr. Viery Franco, ASSIST
3:15 pm–3:45 pm	Session X: Plenary sharing of conclusions of the small groups	Ms. Lani Marquez, Dr. Luis Fernando Vieira, ASSIST
3:45 pm–4:00 pm	Session XI: Feedback from national health authorities	Ms. Lani Marquez, Dr. Eneyda Almonte, ASSIST
4:00 pm–4:10 pm	Session XII: Evaluation of the learning session	Dr. Luis Fernando Vieira, ASSIST
4:10 pm–4:30 pm	Session XIII: Presentation of certificates of participation and Closing	Dr. Cecilia Villamán, ASSIST Dr. Carolina Diaz, National Health Service

## Annex 2: Storytelling

*Adapted from Nancy M. Dixon, [www.commonknowledge.org](http://www.commonknowledge.org)*

**Storytelling** is an effective way of sharing knowledge between people that incorporates context, emotion, and tacit knowledge. In a short amount of time, a wealth of information with a high level of detail can be expressed. Not only does the listener learn from the story, but the storyteller can gain new insights to what they are describing through the practice of telling their story.

### A good story is...

- *About an event — something that really happened to you or someone you know*
  - “When I was .....”
  - “My friend told me about when he .....”
- *Told from your perspective.*
  - Different people see things differently.
  - This is important, as much of the richness of opinions and ideas comes out only if you tell the story from your viewpoint.
- *A description of something that happened at a specific time*
  - “Last year when I was working on .....”

### Why tell stories?

#### 1. *To share knowledge between members of a group*

- Stories help members of a group build relationships. Ask members to tell a story about a topic the group members are interested in, for example, “Think about a time when you felt really successful in counseling a patient.” You don’t need to use the word “story”—you can just ask people to tell about that experience.
- It is helpful for the facilitator to give an example so that participants can understand the length and detail expected.
- Relationships are built in small groups, not large groups. Have participants tell their stories in small groups (4-6 people), rather than to the whole room. Telling a story to a large group feels like “public speaking,” while telling a story to a small group feels like talking to friends.
- Stories can be quick: 2-3 minutes is all that is needed.
- Ask members to tell about a success. Only after members have built a strong trust relationship should you ask people to tell stories of failure.
- After a group meeting, members may forget the names of others they met, but they will remember their stories. And from the story, they will remember how they connected with that person because they could identify with the story.

#### 2. *To gain greater understanding of a complex issue*

- Stories contain context and reasoning as well as facts. This helps the members who are listening learn: 1) why the storyteller took a specific action, and 2) what the conditions were that required that action. By contrast, PowerPoint bullets only provide the what, not the why.
- When the story provides listeners an understanding of the context and reasoning, it allows them to decide if the solution would be effective in their own context.

- Because stories naturally have an emotional content (how the person felt about the situation described), the storyteller seems more approachable. Members who listen to another member tell a story are more willing to give that person a follow-up call or email to learn more detail about what happened.
- Stories can also allow the storyteller to reflect on a specific insight. The storyteller might be asked, “When you implemented [the activity], tell about a time when you were frustrated or pleasantly surprised.”

### 3. *To build stronger relationships between members*

- Invite 5-10 people to a story circle to talk about a difficult issue they all face. Make sure the group is made up of peers only.
- By collecting a large group of stories on a specific issue, for example, “Tell a story about your experience working with the community health teams,” it is possible to analyze the stories to determine how to help participants get up to speed faster.

### **Ground rules for storytelling**

- Be honest and open.
- Be respectful of others — their experiences, anecdotes, and ideas.
- Celebrate the people who share “things that went wrong.” Sharing such stories takes courage.
- Give permission to not use the real names of people in the story. What is important are the issues or themes across all the stories. Instead of naming individuals, the storyteller can describe personalities and characteristics.
- Listen - Give people a chance to share their stories without interruption.
- Share context – Encourage storyteller to make their stories as vivid and as rich as they can.
- Give examples – don’t just state concerns.
- Set the ground rule that members don’t correct others about what happened as the other is telling a story. The issue is not accuracy but perspective. If someone interrupts with a correction, ask them to wait and then tell the story from their perspective when the current storyteller is finished.
- At the end, let participants know what will happen with the stories and how they will be used.

### **Example of using storytelling in a large group**

**Activity:** Have people gather in small groups of three to five. The facilitator should explain the exercise and ask someone (usually this is arranged ahead of time) to tell an example story. In each small group, each member has two minutes to tell a story centered on a question provided by the facilitator. Use a bell or other signal to let all groups know when it’s time to begin and when it’s time to go on to the next story. After two minutes, the next person begins their story.

Once each person in the small group has told their two-minute story, everyone is asked to get up and find a new small group of three to five people that have not yet heard their story. Repeat the process of each person sharing a two-minute story in groups of three to five people. Continue until each person has had the chance to tell their story three or four times. In this way, each person will also have heard 12-16 other stories.

**Processing:** Bring everyone back into the large group. One way to process what people heard in the stories is for the facilitator to ask people to share what they learned from the stories they heard and from the act of telling them. What new methods have they heard about? What insights have they gained into the problem being discussed? What do they want to know more about?

Another way is to ask everyone to “vote” on the one story that “most resonates” with them. A simple way to accomplish such voting in a large group is to ask each person to put her or his hand on the shoulder of the person whose story most resonated with them. Participants will soon be linked in clumps of people, all with one hand on the shoulder of specific person. The person with the most hands on his or her shoulder can be identified as the storyteller with the most captivating story. Ask the chosen storyteller to retell the story to the entire group.

## Annex 3: Speed Consulting

*Adapted from Nancy M. Dixon, [www.commonknowledge.org](http://www.commonknowledge.org)*

**Speed Consulting** is a group technique that draws on the experience of participants to advise another participant on how to address a specific problem or issue. It uses small group conversation and a fast-paced schedule to focus participants on providing concrete, actionable advice.

### Steps in Speed Consulting

#### Identify some issue owners

In advance, identify a number of people (around 10% of the total) with a program implementation challenge which they would like help with – they are to play the role of the **client** who will be visited by a team of brilliant management **consultants**. Implementation issues should not be highly complex; ideally, each issue could be described in three minutes or less. Brief the issue owners privately coach on their body language, active listening, acknowledgement of input, etc. Remind them that if they are seen to have stopped taking notes (even when a suggestion has been noted before); they may stem the flow of ideas.

#### Arrange the room

You need multiple small consultant teams working in parallel, close enough to generate a “buzz” from the room to keep the overall energy high. Round tables or circles of chairs work well. Sit one issue owner at each table. Everybody else at the table plays the role of a consultant. The issue owner will remain at the table throughout the exercise, whilst the groups of “visiting consultants” move around.

#### Set the context

Explain to the room that each table has a program implementation issue and a team of consultants. The consultants have a tremendous amount to offer collectively – from their experience and knowledge – but that they need to do it very quickly because they are paid by the minute! They have 15 minutes with each client before a bell sounds, and they move on to their next assignment.

The time pressure is designed to prevent any one person monopolizing the time with detailed explanation of a particular technique. Instead, they should refer the issue owner to somewhere (or someone) where they can get further information. Short inputs also make it easier for less confident contributors to participate.

#### Start the first round

Reiterate that you will keep rigidly to time and that the consultants should work fast to ensure that everyone has shared everything that they have to offer. After 15 minutes, sound the bell and synchronize the movement to avoid a “consultant pile-up”.

#### Repeat the process

Issue owners need to behave as though this is the first group and not respond with “The other group thought of that!” They may need to conceal their notes.

Check the energy levels at the tables after the second round. More than two or three rounds can be tiring for the issue owners.

#### Ask for feedback and reflection on the process

Emphasize that the issue owners are not being asked to “judge” the quality of the consultants! Invariably, someone will say that they were surprised at the breadth of ideas and that they received valuable input from unexpected places.

Ask members of the “consulting teams” to do the same. Often they will voice their surprise at how sharing an incomplete idea or a contact was well received and how they found it easy to build on the ideas of others.



## **Annex 4: Knowledge Café**

*Adapted from Nancy M. Dixon, [www.commonknowledge.org](http://www.commonknowledge.org)*

A **Knowledge Café** is a conversational process that is sometimes called World Café. It is an innovative yet simple methodology for hosting conversations about questions that matter. These conversations link and build on each other as people move between groups, cross-pollinate ideas, and discover new insights into the questions or issues that are important in their work or community. As a process, it can be used with as few as 15 or with as many as 200 people. The Knowledge Café can evoke and make visible the collective intelligence of any group, thus increasing people's capacity for effective action in pursuit of common aims.

### **How to Conduct a Knowledge Café**

The most critical factors for success of a Knowledge Café are: 1) clarifying the reason for bringing people together, and 2) constructing stimulating, open-ended questions. Other crucial success factors are described below.

#### **Clarify the purpose**

The facilitator and the organizer of the Knowledge Café must be very clear about the purpose of the meeting. A clear purpose enables the organizers to consider which participants need to be there and what parameters are important to achieve the purpose.

#### **Create a hospitable environment**

It is important that the meeting organizers create a hospitable space—one that feels safe and inviting. When people feel comfortable to be themselves, they do their most creative thinking, speaking, and listening. In particular, organizers should consider how their invitation and the physical set-up of the meeting room contribute to creating a welcoming atmosphere.

#### **Explore questions that matter**

Finding and framing *questions that matter* to those who are participating in the Café is an area where thought and attention can produce profound results. A Knowledge Café may only explore a single question, or several questions may be developed to support a logical progression of discovery throughout several rounds of dialogue. In the latter case, the meeting organizers must select one question for each café table (and there will be one café table for each 5-7 meeting attendees). The meeting organizers must carefully select questions that focus discussion towards the purpose of the event and are sufficiently open to allow good dialogue.

#### **Connect diverse perspectives**

Invite a widely diverse group of participants. The opportunity to move between tables, meet new people, actively contribute thinking, and link discoveries to ever-widening circles of thought is one of the characteristics of the Knowledge Café. As participants carry key ideas or themes to new tables, they exchange perspectives, greatly enriching the possibility for surprising new insights.

#### **Encourage everyone's contribution**

Leaders are increasingly aware of the importance of participation, but most people don't only want to participate, they want to actively contribute to making a difference. It is important that the meeting facilitator encourages everyone in the meeting to contribute their ideas and thoughts, while also allowing anyone who wants to participate by simply listening, to do so.

#### **Each table has a host who is paying attention to themes and insights**

One host is needed for each table. The table hosts should be briefed on the role in advance of the meeting. They are to take notes on the discussion but are not expected to facilitate or direct the

discussion. The participants can easily facilitate themselves with brief instructions from the table host.

### **Room set-up**

- Small round tables of 36-42 inches in diameter are ideal but small square tables will also work
- Each table has a table tent or card indicating the discussion question or topic for that table
- If possible, cover the tables with paper and provide colored markers to allow the participants to draw or write comments on the paper table coverings as one means of sharing their thoughts with other table visitors
- One chair per participant
- No podium or projectors are used

### **Knowledge Café Meeting Process**

#### **Assigning participants to their home table**

If the Knowledge Café is held after a break or at the start of the day, the event organizers can purposefully assign participants to their home table and direct participants to sit at their assigned table before the Café starts. Table hosts should begin the session sitting at their assigned table. Alternatively, after the Knowledge Café facilitator has given the welcome and explained the topics to be discussed, participants can be invited to stand and move to the table that most interests them. If all of the chairs of a table have been filled but more participants still want to join, the Café facilitator invites the excess participants to choose a different table for the first round and visit the “full” table in the next round.

#### **Welcome**

The Café facilitator welcomes the participants to the Knowledge Café and establishes a tone of curiosity and friendliness. The Café facilitator introduces the guidelines for the Café. The Café facilitator explains the theme or question that will be discussed at each table or can ask each table host to stand and state the topic to be discussed at that table. After the topics to be discussed at each have been explained, if participants are not already sitting at assigned tables, the Café facilitator invites participants to stand and move to the table of their choice. The Café facilitator rings a bell to indicate that the first round of table discussions has begun.

#### **Round 1 of the table discussions**

At each table, participants discuss the “table question” for 20 to 30 minutes. The table host introduces himself or herself and states that he or she is not there to guide the group to a specific conclusion, because through the exchange of thinking, the unexpected can happen, that is, new ideas, new ways of thinking, and new solutions can emerge. The table hosts encourage the table guests to write or draw key ideas on the table paper, or to note key ideas on large cards or placemats in the center of the group. The table host uses a notebook or pad to summarize the discussion as it continues.

#### **Moving on**

When the allotted time is almost up, the café facilitator sounds a bell to give the “two-minute warning”. This means it's time to finish up and get ready to move on. When the café facilitator gives a second signal, everyone except the table host moves to another table of their choice. Ideally, the members of the table should try to choose different tables so that they do not move from table to table as a group.

#### **Round 2 of the table discussions**

The table host welcomes the new guests and briefly shares the main ideas, themes and questions of the initial conversation (no more than 3 minutes – it is not necessary to share everything that was said, only a broad outline). The host encourages the new table guests to *link and connect ideas* coming from their

previous table conversations—listening carefully and building on each other's contributions. Again each table host continues to encourage participation and records the discussion. By providing opportunities for people to move in several rounds of conversation, ideas, questions, and themes begin to link and connect. At the end of the second round, all of the tables or conversation clusters in the room will be cross-pollinated with insights from prior conversations.

### **Subsequent rounds of discussion**

The meeting organizers decide in advance how many rounds of discussion there will be. There should be a minimum of three rounds, but in any case, the number of rounds should not be greater than the number of café tables. In further rounds, the table guests continue travelling to new tables, leaving the same host at the table. If there are more tables than topics, it is fine to repeat some topics (that is, have conversations about the same topic at more than one table). Some guests may also want to repeat a topic (that is, participate in a second conversation about the same topic with new guests).

### **Final round of discussion**

When the Café facilitator announces the final round, everyone returns to their home table. The table host shares what visitors contributed to the table topic since the others left the table. Table guests share what they learned in their visits to other tables. The table host records the collective results in a form that can be used after the Knowledge Café to build a consolidated view from the entire Café.

### **Whole group conversation**

The Café facilitator asks the meeting participants to move the tables to one side and gather all the chairs into one large circle. The host then facilitates a whole group conversation to share discoveries and insights. It is in these whole group conversations that patterns can be identified, collective knowledge grows, and possibilities for action emerge. The facilitator may also ask each table host to share one or two important insights from their tables or may simply invite individual participants to share any discoveries they considered important.

### **Variations**

The Knowledge Café is a very versatile process that can be used in many situations and can accept many modifications. For example, one question can be used for all tables, or different questions can be used for different tables. In some setting, a “talking stick” (the person holding the stick is the only one that can speak until it is passed to another) may be used, but in others conversation is more natural. Some Knowledge Cafés end with a *gallery walk* with participants taking a tour of the tablecloths to read what is written there; in others, notes from the tables are published or distributed to all participants after the Café.

### **When not to use a Knowledge Café**

A Knowledge Café should not be used just to build relationships or to just get people acquainted. It must always be used to address serious issues that matter to the group that has been brought together. It should not be used to get “buy in” on an issue that has already been decided. If an issue has been decided, people will view asking for their thinking about it as a waste of their time.

### **Roles**

The roles associated with the Knowledge Café are as follows:

#### **The Café facilitator is responsible for:**

- Working with the planning team to determine the purpose of the Café and decide who should be invited to the gathering
- Naming the Café in a way appropriate to its purpose, for example: Leadership Café; Strategy Café; Discovery Café, etc.

- Helping frame the invitation
- Create a welcoming environment
- Welcoming the participants as they enter
- Explaining the purpose of the Café
- Presenting the questions for rounds of conversation and make sure that the question is visible (for example putting the question on table tents or standing cards at each table)
- Explaining how the logistics of the Café will work, including the role of the table host (the person who remains at each table throughout all the rounds of conversation)
- During the conversation, moving among the tables to listen in on conversations
- Encouraging everyone to participate
- Reminding people to write down key ideas, doodle, and draw on the tablecloths or write notes on the tablecloths
- Letting people know in a gentle way when it's time to move and begin a new round of conversation
- Asking people NOT to move as a group, but for each member to select a different table
- Making sure key insights are recorded visually or are gathered and posted

**The table host is responsible for:**

- Reminding people at their table to jot down key ideas, discoveries, and deeper questions as they emerge
- Remaining at the table when others leave and welcome travelers from other tables
- Briefly sharing key insights from the prior conversation so others can link and build on them using ideas from their respective tables
- Encouraging the active participation of everyone at the table
- Keeping any one participant from monopolizing the conversation by inviting others to comment
- Using effective communication to clarify concepts: ask for more explanation, pose follow-up questions, etc.
- Taking notes to summarize for the next group

**Participants are responsible for:**

- Listening for themes, patterns and insights, when others are talking
- Sharing their discoveries with others at the table
- Freely contributing their own ideas

## Annex 5: Talk Show

Adapted from Group Jazz, <http://www.liberatingstructures.com/>

Sometimes you want to feature one or more people who have information/ideas that can catalyze your conversations. Instead of having a traditional presentation or panel discussion, create a “talk show” atmosphere where an interviewer can draw out key ideas to help inform others a more conversational way. This lets you:

- Convey a small number of ideas associated with a key dimension of a topic or project in a compelling, memorable, engaging way.
- Intrigue the audience enough to make them want to review more in-depth documents, handouts, and related materials that you provide before, during, and/or after the meeting.
- Introduce a key player (source) and their relationship to the topic/project in a way that allows their individual personality, passion, and style to show up.
- Establish an interactive, conversational, inviting tone to a meeting so that all participants will be more likely to speak up and be engaged in the meeting at later times.
- Avoid draining/deadening the energy in the meeting (which happens when people have to listen to any one voice for more than 5 minutes – especially if they are being given large amounts of data, especially if it is text on slides).

### **Examples of questions the talk show host might ask the QI team “guests”**

Please tell me about [one aspect of care]. What is working well? What is still challenging?

What would you recommend to other teams to replicate your results? What has been the most important change you made at your facility?

What do you think needs to happen to sustain [this improved aspect of care] after the support from ASSIST ends?

Coach both the talk show guests and the talk show host so that the questions (and answers) open up rather than limit the conversation.

For example, “What do your indicator data tell you?” tends to elicit boring responses. A better question might be, “Having reviewed your data, What surprised you? What strikes you as most important change you made?”

### **Taking questions from the audience**

The talk show host can also invite the rest of the participants to ask questions (or share comments). When taking audience question, take questions in batches (2-3 at a time) rather than one question and answer, followed by another question and answer. Taking several questions at once avoids a problem that can happen when the first question sends the conversation off in a non-productive direction and it makes it possible for many more participants to get their question into the mix. You can also ask participants to write their questions on cards so that you can collect them and allow them to be answered later in the learning session.

The talk show host can elicit and listen to several questions and then invite the guests to respond however they choose. This lets them combine questions or select one that allows them to build on the ideas they find intriguing.

## **Annex 6: Gallery Walk**

*Adapted from Group Jazz, <http://www.liberatingstructures.com/>*

The **Gallery Walk** is a good alternative to PowerPoint presentations by each team. Gallery walks can also be used to see the key ideas discussed by a small group and serve as an alternative to group “report-outs.”

Have each team put what they want to share on a poster or large flip chart page. Ideally place all the posters side by side along a long wall so that everyone can appreciate the range of contributions. Somebody from each team should stand by their poster to answer questions (members of the team could take turns doing this).

Everyone else takes a walk through the gallery, stopping at each poster to take in what's there and ask any questions to the team member stationed there.

It works well to follow a gallery walk with a whole-group conversation:

- What did we notice?
- What were the themes?
- What was surprising?
- What was new?
- How does this change our thinking?

## Annex 7: Field Trip Around the Room

Adapted from: Nancy M. Dixon, [www.commonknowledge.org](http://www.commonknowledge.org)

The *field trip* is a technique that can be used in a meeting to organize how members of the group discuss several topics and integrate their ideas for how to address them. It uses small group conversation and successive discussions of the same topic by different groups to help to integrate the ideas of the whole group around specific topics and questions.

### Steps in a Field Trip Around the Room

1. Prior to the meeting, decide on the key topics and questions or topics that will be discussed. The topics or questions should be issues that matter and ones where those who will participate in the meeting have experience. The topics/questions should each be written on a flip chart and placed at distance from each other around the edge of the room. If the purpose of the meeting is action planning, possible questions might be: What needs to change to make this happen? What could keep this from working? Who should be held responsible for making this happen? How will we know that it has improved? The questions can be anything that would benefit from group thinking.
2. At the beginning of the meeting, the group leader explains why this meeting is important and what are the issues the group will work on. The facilitator then explains the process:
  - Divide the participants in groups—one group for each issue to be discussed (ideally, 5-8 people per group). The groups should be “mixed”—made of people from different levels or sites. (A quick way to divide participants into groups is to have them count off in sequence—1, 2, 3, 4, 5, 1, 2, 3, 4, 5, etc.—and join the group of the number they said.)
  - Have each group stand by one of the flip charts.
  - When instructed to do so, each group discusses the questions and writes their answers on the flipchart.
3. Carry out the field trip: Each group has the opportunity to address the issues on each chart sequentially in 10-minute intervals. Each group has 10 minutes to make notes on the chart in front of them before moving on to the next chart. Each group leaves one person behind to explain what their group has just put on the chart – that person has 1 minute to explain before moving on to rejoin his or her group.
4. After every group has worked on every flip chart, have the groups return to the flip chart they started at. Give each group 5 minutes to study the comments left by all groups.
5. The large group reconvenes. The facilitator asks each group to give a 3-minute report-out of the key ideas noted on the chart and suggest next steps to follow up on these ideas.
6. The leader thanks the groups and talks about what will happen next.

## **Annex 8: 1-2-4-All**

Adapted from Group Jazz, <http://www.liberatingstructures.com/>

1-2-4-All is a group process from the guide, *Engaging Everyone with Liberating Structures*, guide that facilitates rich conversation in small groups and then brings the small groups together to integrate their ideas around an important question or issue. It can be done on its own or in combination with other group engagement techniques described in the Liberating Structures guide. Because of the need to form pairs and then bring pairs together, 1-2-4-All works best in a room where participants can easily pick up their chairs and re-assemble them in small groups as needed. The technique can also be done as 1-3-6-All, using trios rather than pairs.

### **Steps in 1-2-4-All**

#### **1 (Individual Reflection)**

Give participants a short amount of time (a couple of minutes is fine) to reflect on a question or issue. Some may want to jot down a few notes. Others may want to close their eyes. Ask for silence during this time so that individuals really have time and space to get their own thoughts together.

#### **2 (Reflection in Pairs or Trios)**

Ask participants to find one other person and share their ideas. You can invite them to talk to the person next to them or, if you'd like them to move around and mix it up a bit more, ask them to stand up and find a partner. Depending on how much time you have, you could spend 5-10 minutes in pairs.

#### **4 (Small Groups of Two or Three Pairs or Two Trios)**

Invite each of the pairs to join up with one or more pairs to make groups of 4-6. (Larger than six is too big to give everyone a chance to talk.) Suggest that they each first share interesting things they heard or said in the previous rounds. Then continue with the conversation as a group.

#### **All (Whole Group)**

Invite everyone back to the whole group. Without "calling on" individual small groups, ask an open question such as "What insights emerged from your conversation?" or "How has your understanding/view of the issue changed?" Then ask, "What did you learn in your small group that is important for the large group to understand?" Let individuals speak up with ideas they consider important to share.

Group report-outs should be used sparingly. It is better to have individuals speak for themselves.



## Annex 9: After Action Review

*Adapted from Nancy M. Dixon, [www.commonknowledge.org](http://www.commonknowledge.org)*

**After Action Review** is a brief meeting of team members to reflect on an event or task they have just accomplished. The purpose of the After Action Review is for the team to learn from its experience in order to take the lessons learned into the next phase of the project or to accomplish the task more effectively the next time it is done. The After Action Review seeks to help the team develop insights about the event or task and turn that knowledge into action.

To keep the meeting focused on its purpose, the After Action Review has a specific format of group discussion around these four questions:

- 1) *What did we set out to do?* What was our intent? What should have happened? Were there any differences of opinion among team members?
- 2) *What did we actually do?* What would a video camera have shown? Avoid blaming any individual. Look at the sequence of events, roles, etc. to establish what actually happened.
- 3) *What have we learned?* Focus on what we have learned, not what we will do next. What do we know now that we didn't know before? What strengths and weaknesses have we discovered? What advice would we give to others about how to best undertake the task or event?
- 4) *What are we going to do?* Based on what we learned, what will we do next time? Are there follow-up actions to be taken? If so, who will do what, by when? Are there others to whom we should communicate this learning?

### Guidance for Conducting After Action Reviews

#### When should an After Action Review be held?

After Action Reviews are held at the end of a defined action, that is, a phase of a project or the accomplishment of a key event. It is the discipline of the regularity of these meetings that makes them effective. They are not called just to address an exception or a problem; rather they are a part of the way the work of the team gets accomplished – a work routine. The regularity also reduces team members' anxiety that the meeting is about placing blame – a concern that arises when meetings are only held after something has gone wrong.

#### How long should the After Action Review meeting be?

After Action Reviews should be quick and to the point. The focus is on what just happened and what can be learned from it. They are **not** the time to address long-standing problems. In some organizations, After Action Reviews are “standing meetings” - everyone stands rather than sits - as a kind of tacit assurance that the meeting will be short. An After Action Review might last as little as 15 minutes or perhaps an hour, if held at the end of a month-long activity.

#### Who should participate?

Because the goal of the review is for the group to improve, the meeting should bring together all the people involved in carrying out the event or task. The information and ideas of everyone are necessary to get a full picture; someone may well have seen or been aware of some action or detail that others did not see. When everyone is in attendance, it sends an important visual message about accountability - no one is so unimportant (top to bottom) that they can avoid responsibility for what happened, and everyone (top to bottom) is responsible for making it happen more effectively the next time. In this way, After Action Reviews can help build the shared understanding of actions and results that is often critical to effective team performance.

### **After Action Reviews need to be facilitated.**

After Action Reviews need to be facilitated by a member of the team. The facilitator's responsibility is to keep the discussion focused on the few critical questions. After repeated meetings that responsibility may become almost perfunctory. The facilitator role may rotate between members or may be taken by someone in the group that is recognized as having particularly good facilitation skills.

### **Don't assign blame.**

The only way to learn in After Action Reviews is to get everything out on the table. To do that there has to be an agreement that no one gets into trouble (put on report; reflected in performance evaluation) because of what is discussed in an After Action Review. Without such a rule, team members are unwilling to own up to mistakes and equally reticent to speak about the mistakes of others. This is a hard rule to believe in, and it often takes a team a while to get comfortable with speaking openly. Equally important, this is not a "find the blame" meeting. Rather, mistakes are data to be taken into account in figuring out how to make the action more effective the next time.

### **Notes taken are only for the use of the team itself.**

Notes are taken at the meeting are only for the team's use and are not distributed to other parts of the organization. The openness of the discussion in an After Action Review is greatly reduced if team members think their mistakes will be broadcast to higher levels. If important issues are raised that others in the organization need to learn from, at the end of the meeting the team can agree to what items can be shared and how.

### **What does the After Action Review look like?**

- The team meets as soon as possible following an action or event.
- The facilitator puts the questions to be addressed on a flipchart or white board.
- The questions are addressed one at a time.
- The facilitator manages the contributions:
  - Calling on individuals who might have some special knowledge to contribute
  - Preventing any one person from dominating the discussion
  - Stopping any blaming behavior or punitive remarks
  - Bringing the group back to the topic when the discussion strays
- The facilitator captures the ideas on a flip chart or asks a member of the team to do this.
- The facilitator manages the time so that all the questions are addressed in a minimum amount of time.
- Individual members take notes for themselves about what they need to do differently next time.
- Near the end of the meeting the facilitator asks for agreement on actions to be taken to get the desired results.



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