

**Knowledge Resources on PPP in Health:**  
**Resource Book for Capacity Development for PPP in Health**



# **Capacity Development for PPP in Health**



Knowledge Series  
on PPP in Health

*Resource Book No. 2*

# Capacity Development for PPP in Health



Asian Development Bank  
Mandaluyong City Philippines  
November 2012

**Knowledge Series on PPP in Health**  
Capacity Development for PPP in Health



**ASIAN DEVELOPMENT BANK**  
Mandaluyong City Philippines  
November 2012

This Resource Book was developed through the ADB TA 7257 PHI: Public-Private Partnership in Health, which is executed by the Development Bank of the Philippines, with support from the Department of Health and the Philippine Health Insurance Corporation. Opinions expressed in this publication do not necessarily represent those of the ADB, DBP, DOH, PhilHealth, or the ADB TA 7257 PHI: PPP in Health with the exception of material/s specifically adopted by an accompanying policy issuance. The mention, if any, of specific companies or of certain products does not imply that they are endorsed or recommended by the ADB or its partners in preference over other companies/products of similar nature. Likewise, any part of this publication does not constitute investment, commercial, or legal advice. ADB, DBP, DOH, PhilHealth, and the ADB TA 7257 PHI: PPP in Health make no representations or recommendations for any PPP modality or enterprise and following the insights shared in this Resource Book does not guarantee commercial success of any venture. Cases or opinions given in this publication should not be taken as a promise or guarantee as to the occurrence of any future event. Some sources cited may be informal documents that are not readily available. Sections may be reproduced in full or in part for non-profit purposes without prior permission provided credit is given to the ADB and/or the technical writer/s. This is an evolving document that may continuously be enhanced based on new lessons and experiences. Therefore, insights, comments, and suggestions that may help in making this document more useful and practical are welcome. Feedback may be sent through [emasaki@adb.org](mailto:emasaki@adb.org).

Asian Development Bank  
6 ADB Avenue, Mandaluyong City  
1550 Metro Manila Philippines  
[www.adb.org](http://www.adb.org)

The findings, interpretations, and insights expressed herein are those of the authors and not of the DBP, DOH, PhilHealth, ADB, or the ADB TA 7257 PHI: PPP in Health.

Technical Writers  
Mary Anne Velas-Suarin and Jose Miguel Dela Rosa

Editorial and Technical Support Team  
Emiko Masaki, Jaime Galvez Tan, and the Project Management Team of the Credit for Better Health Care Project of the Development Bank of the Philippines.

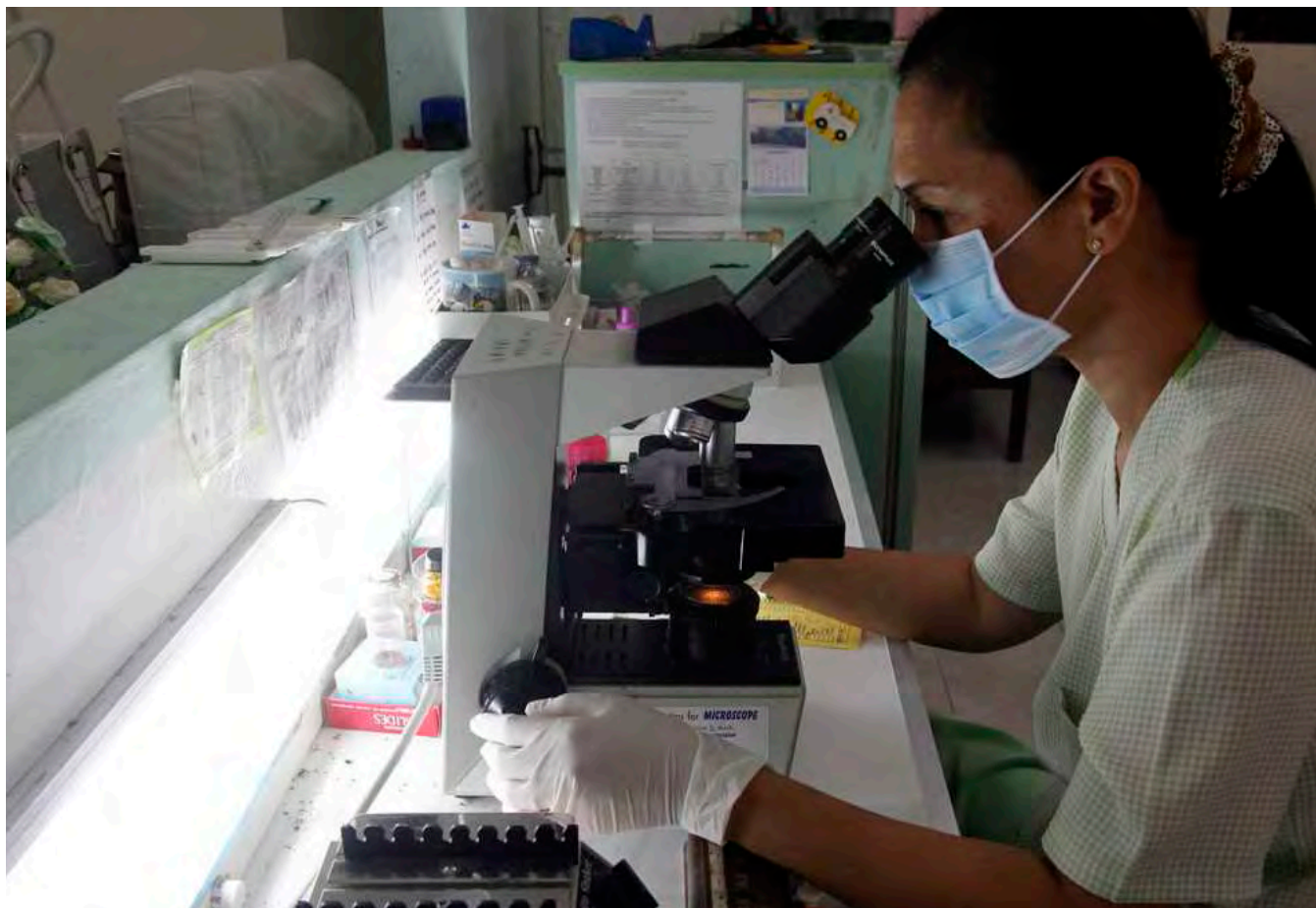
Design and Layout  
Jason Valenzuela and Rustum Casia

# Table of Contents

---

<b>Part 1. Introduction</b>	7
<b>Part 2. Capacity Development for PPP in Health</b>	9
2.1 Typical Areas for Skills Development	
2.2 Suggested Courses	
<b>Part 3. Basic Course on Knowledge Management and Social Marketing</b>	11
<b>Part 4. Concluding Notes</b>	12
ANNEX A	
<b>Sample Training Needs Analysis Survey Form</b>	29
ANNEX B	
<b>Sample Training Course Evaluation Questionnaire</b>	37





Capacity development is an important component in any social development intervention. The technical assistance team responsible for the development of this *Knowledge Series on PPP in Health*—where this resource book is a part of—looks at capacity development as an urgent requirement in ensuring successful and sustainable implementation of PPP modalities and applications in the health sector.

For example, in the Philippine context, local governments find it challenging to implement PPP programs in health because, to begin with, many have not been adequately equipped and prepared in managing health facilities after the devolution of public health services (a system that may be referred to as decentralization in other countries).

Introducing and implementing a PPP approach is understandably not the entire solution but is a clear option worth considering. For local governments who are willing to adopt a PPP approach, it is apparent that it requires capacity development particularly in the development of feasibility studies and good financial models/assessment, drafting of terms of references and other legal documents,



management of bids and tenders, implementation of monitoring and evaluation systems, and development and management of knowledge management and social marketing programs.

To this end, the team initiated meetings with the Development Academy of the Philippines<sup>1</sup> and the following were considered as crucial issues:

- There are existing training programs meant for local governments but there is no course that is specifically focused on PPP yet;
- Existing DAP modules (e.g., Project Management Course, Health Business Planning Course, etc.) can be 'customized' or reformatted to suit the needs that are specific to PPP in health;
- Governments (perhaps through the Departments/Ministries of Health) and learning institutions such as DAP (in the Philippine context) can jointly develop and run pilot training programs in pilot local governments or even national government agencies. If proven successful, such programs can continue to be enhanced with the learning institutions (with support from the departments/ministries of health) becoming the official provider of capacity-building programs for PPP initiatives in health and even in other sectors; and

- This approach answers the need for sustainability particularly that technical assistance packages from bilateral and multilateral agencies normally have fixed and short tenures.

As the title suggests, this document is a resource book on capacity development on PPP in health. It is not a comprehensive training manual but rather addresses some of the basic issues and questions that a trainor or capacity development professional may want to look at it as he considers the requirements in developing the skills and capacities of PPP in health project developers and implementers.

While this resource book takes off from the experiences of a team that worked with Philippine government, this should still be a useful material for international readers who are interested in looking at capacity development particularly focusing on social marketing and knowledge management. (A supplemental reading is *Monograph No. 5, Reflections on Social Marketing and Knowledge Management*, which is part of the this *Knowledge Series on PPP in Health*.)

Moreover, while this document focuses on social marketing and knowledge management, users may easily adopt some of the premises here in developing capacity development and training courses in other aspects of PPP in health.

---

<sup>1</sup> For the sake of simplicity and to facilitate discussions, this resource book often refers to the Development Academy of the Philippines (DAP) as an example of a learning institution or DOH as a department/ministry of health. It also refers to Northern Samar and Sarangani which are two local governments that had been benefited by a training course on social marketing and knowledge management.

## 2.1 Typical Areas/Topics for Skills Development

In a nutshell, the capacity development component should aim to prepare the implementers (e.g., local governments, departments/ministries of health, social health insurers, etc.) and build their capacity and set of skills in developing and managing PPP programs and applications in health. Such a preparation will ensure successful program development and implementation and sustainability of operations.

The capacity building component may specifically aim to train PPP in health implementers in the following topics and set of skills:

- Development of feasibility studies and good financial models/assessment;
- Drafting of terms of references and other legal documents; management of tenders and bids;
- Implementation of monitoring and evaluation systems; and
- Development and implementation of knowledge management and social marketing programs.

## 2.2 Suggested Courses

As mentioned earlier, the government may consider working with an accredited or official learning institution in developing and implementing

training modules for local governments and other implementers.

In a latter portion of this book, a training course developed for the Philippine Health Insurance Corporation (PhilHealth) will also be discussed. By all means, international readers may easily adopt this as a guide for the development of training courses specifically for knowledge management and social marketing. However, users should also refer to an accompanying resource material in this knowledge series, Monograph No. 5, Reflections on Social Marketing and Knowledge Management.

As a starting point, governments can develop modules for selected local governments and then later enhance such modules or develop entirely new modules depending on the needs of future users.

The following modules can be developed and implemented for local governments:

1. Health Business Planning (with additional module on Development of Feasibility Studies for PPP Applications in Health)
2. Taking Care of Legalities: A Crash Course on the Management of Tenders and Bids in PPP in Health Applications
3. Ensuring Effective Monitoring and Evaluation: A Guide in PPP in Health Implementation
4. Ensuring that the Health Insurance System

Works: Working with Social Health Insurers  
5. A Basic Course on Knowledge Management and Social Marketing

A separate program management course may also be developed with focus on the modalities / applications that a local government may intend to pursue. For example, the government along with a learning institution may develop a specific course anchored on the need to understand how to establish and operate a proposed PPP in hospital management. Slightly patterned after the modules cited above, this customized course may have the following modules:

1. Building Financial Models and Business Planning for a New Hospital
2. A Crash Course on Hospital Management: From Legalities to Monitoring
3. Selling a New Hospital: A Guide to Knowledge Management and Social Marketing

Depending on the needs and thrust of organizations, the government should also customize capacity development courses. For example, a government financing institution interested on financing PPP in health projects will have specific needs so a modified course should be developed for them. A useful course for financing professionals may have the following modules:

1. Understanding PPP in Health: Prospects and Challenges for Financing Professionals
2. Keeping Tab of Failures and Successes: A Guide to Monitoring Implementation of PPP in Health Programs
3. PPP in Health: A Guide to Knowledge Management and Social Marketing

Specific modules for the department/ministries of health (for example, for the personnel of the national office) may also be developed, particularly in equipping the concerned staff and officers on facilitating, coordinating, and monitoring PPP programs. The following are possible modules:

1. Facilitating and Managing PPP in Health Programs: A DOH National Perspective
2. Convincing PPP Prospects and Stakeholders: A Guide to Knowledge Management and Social Marketing
3. Ensuring Success of PPP on a National Scope: Guide to Monitoring and Evaluation for DOH

The development of these training programs and modules are challenging but with strong partnerships with stakeholders and learning institutions and policy and implementing institutions such as a government 'PPP Central Institution' (PPP Center in the Philippine context), it can be manageable and focused.

A basic training course on knowledge management and social marketing for local governments and then a refresher course on communications and media management for a national government agency were developed and conducted. The technical assistance team deemed it necessary to assist the partner government institutions principally because of the unique characteristics of a PPP approach and the personnel assigned to develop and promote such an intervention agreed that they needed enhancement of knowledge

and skills. The two types of interventions are briefly discussed below.

### 3.1 A Typical Course for Local Government Users.

The following table shows a typical course content and schedule for a basic course on knowledge management and social marketing, meant for local government users. This was used in the basic courses that was developed and implemented for Philippine local governments of Northern Samar in the Visayas and Sarangani in Mindanao.

**Table 1. A Typical Course Content for KM and SM (designed for local government users)**

Session Title	Content Highlight
<b>DAY 1</b>	
<b>9:00 – 9:30 am</b> <b>Introductory Session</b>	This session gives a brief introduction on the purpose and objectives of this course as well as level-off expectations of the participants and resource persons.
<b>9:30 – 10:30 am</b> <b>Session 1:</b> <b>Basics of Social Marketing and Knowledge Management</b>	The session enables participants to further understand concepts, and strategies in knowledge management (KM) and social marketing (SM). The session covers the following topics:  <ul style="list-style-type: none"> <li>- Definition of knowledge management and social marketing</li> <li>- KM and SM - For what?</li> <li>- Strategies and applications</li> </ul>
<b>10:30 – 12:00 nn</b> <b>Session 2:</b> <b>Audience Analysis</b>	The session provides a quick review of how to conduct audience analysis. This covers the following topics:  <ul style="list-style-type: none"> <li>- PPP in Health: The Local Government Experience</li> <li>- Who are the key players? (Developing an 'inventory' of players)</li> <li>- How do we deal with those players?</li> </ul>
<b>1:00 – 5:00 pm</b> <b>Session 3:</b> <b>Developing a Social Marketing Plan</b>	The session helps participants understand the importance of a social marketing plan not only to the local government but also in ensuring the success of PPPs, thereby ensuring sustainability and replication. The session walks through the steps in the development of the SM plan. This covers the following topics:  <ul style="list-style-type: none"> <li>- Goals of the social marketing plan</li> <li>- Key components of a social marketing plan</li> <li>- Key messages</li> <li>- Guide/tips in social marketing</li> <li>- Likely pitfalls and how to overcome them, etc.</li> </ul> <p><i>(This session may also include a brief discussion on the current/previous communication plan and health-related campaigns of the LGU, where the participants and resource persons can draw lessons and insights from.)</i></p>

DAY 2	
<b>Part 1</b> 9:00 am – 12:00 nn <b>Part 2</b> 1:00 – 2:30 pm <b>Session 4:</b> <b>Preparing the 'Champions'</b>	<p>The session enables participants to prepare themselves as the 'champions' of PPP in the LGU. It recognizes the importance of both theoretical knowledge-sharing and practical experience so this session will have exercises and mock session. It covers the following topics:</p> <ul style="list-style-type: none"> <li>- Public speaking</li> <li>- Writing/developing press statements</li> <li>- Managing the media</li> </ul>
3:00 – 4:00 pm <b>Session 5:</b> <b>Measuring and monitoring success</b>	<p>The session discusses the importance of monitoring and evaluating the success of the LGU's SM plan. It will discuss possible M&amp;E framework and parameters. This covers the following topics:</p> <ul style="list-style-type: none"> <li>- Purpose of M&amp;E</li> <li>- What will be measured</li> <li>- How and when measures will be taken</li> </ul>
4:00 – 5:00 pm <b>Closing Session</b>	<p>The session allows the participants and resource persons to share their thoughts and experiences in the whole course. A course evaluation form may also be filled up.</p>

To give readers a snapshot of how some of the sessions are typically conducted, the presentations shared by the resource speakers are shared below.

### **a. A Typical Presentation on Knowledge Management**

This presentation was given during Session 1 of the course. (The design and graphics of the actual slides used were no longer adopted here to allow users some room for creativity.)

## **Knowledge as Resource Forging and Promoting PPP in Health through Knowledge Management**

TA 7257-PHI: Public-Private Partnership (PPP) in Health  
Credit for Better Health Care Project

### **Outline of Presentation**

1. Knowledge Management Defined
2. Why KM for Sarangani?
3. Decision Points
4. Discussion/Other Concerns

### **Before we define KM...**

“The only irreplaceable capital an organization possesses is the knowledge and ability of its people. The productivity of that capital depends on how effectively people share their competence with those who can use it.”

- Andrew Carnegie (A famous industrialist)

# 1

## Knowledge Management Defined

### 1. Knowledge Management Defined

“...a discipline that promotes an integrated approach to identifying, managing, and sharing all of an enterprise’s information assets. These information assets may include databases, documents, policies and procedures, as well as previously unarticulated expertise and experience resident in individual workers.” (Gartner Group Inc.)

### 1. Knowledge Management Defined

**Let’s try to dissect this definition...**

“...a discipline that promotes an integrated approach to identifying, managing, and sharing all of an enterprise’s information assets...”

- “INTEGRATED APPROACH”
- IDENTIFYING, MANAGING, SHARING
- INFORMATION ASSETS

### 1. Knowledge Management Defined

**Let’s try to dissect this definition...**

“...These information assets may include databases, documents, policies and procedures, as well as previously unarticulated expertise and experience resident in individual workers.”

- DATABASES, DOCUMENTS, POLICIES, ETC.
- PREVIOUSLY UNARTICULATED
- EXPERTISE AND EXPERIENCE
- RESIDENT IN INDIVIDUAL WORKERS

## 1. Knowledge Management Defined

“...a discipline that promotes an integrated approach to identifying, managing, and sharing all of an enterprise’s information assets. These information assets may include databases, documents, policies and procedures, as well as previously unarticulated expertise and experience resident in individual workers.” (Gartner Group Inc.)

## 1. Knowledge Management Defined

### Another definition

“Knowledge management is an audit of “intellectual assets” that highlights unique sources, critical functions, and potential bottlenecks which hinder knowledge flows to the point of use. It protects intellectual assets from decay, seeks opportunities to enhance decisions, services and products through adding intelligence, increasing value and providing flexibility.” (Denham Grey)

## 1. Knowledge Management Defined

### Let’s try to dissect this definition...

“Knowledge management is an audit of “intellectual assets” that highlights unique sources, critical functions, and potential bottlenecks which hinder knowledge flows to the point of use.”

- AUDIT
- INTELLECTUAL ASSETS
- UNIQUE SOURCES
- CRITICAL FUNCTIONS
- POTENTIAL BOTTLENECKS
- KNOWLEDGE FLOWS
- POINT OF USE



## 1. Knowledge Management Defined

Let's try to dissect this definition...

Let's try to dissect this definition...

"It protects intellectual assets from decay, seeks opportunities to enhance decisions, services and products through adding intelligence, increasing value and providing flexibility."

- PROTECTS FROM DECAY
- ENHANCE DECISIONS, SERVICES, PRODUCTS
- ADDING INTELLIGENCE
- INCREASING VALUE
- PROVIDING FLEXIBILITY

## 1. Knowledge Management Defined

Importance of KM

- Allows systematic management of vital knowledge and its processes of creating, gathering, organizing, diffusion, use, and exploitation.
- It turns personal knowledge into corporate knowledge that can be widely shared throughout an organization and appropriately applied. (Skyrme, D.)

## 1. Knowledge Management Defined

A simple appreciation...

KM is about developing, utilizing and "packaging" today's knowledge so future users can adopt and improve on them

## 1. Knowledge Management Defined

In the context of PPP in health...

KM - considering knowledge (including insights and experiences) as an important resource—

- in understanding, promoting, and deepening PPPs;
- building, managing, and sharing such knowledge

## 1. Knowledge Management Defined

In the context of PPP in health...

- ensuring present users can fully utilize and capitalize on them and future users adopt/reuse and continuously improve them.

## 1. Knowledge Management Defined

Two approaches in KM

Codification approach is a 'people-to-document' approach.

- Knowledge is explicit.
- Knowledge is extracted & stored in databases, reports, etc.

## 1. Knowledge Management Defined

Two approaches in KM

Personalization approach is a 'person-to-person' approach.

- Knowledge is tacit.
- Involves the person who developed it via face-to-face communication
- Example, brainstorming, workshops or other one-to-one sessions.

## 1. Knowledge Management Defined

Sarangani can use both the  
**codification and personification**  
**approaches.**

## 2

### Why KM for Sarangani?

#### 2. Why KM for PPP in Sarangani?

- Develop user-friendly knowledge resources that will offer project managers a 'roadmap' and guide in the development and implementation of PPP in health programs;

#### 2. Why KM for PPP in Sarangani?

- Increase awareness of clients and users of the public health goals of the province (and of PPP as an approach) through systematized knowledge resources;

#### 2. Why KM for PPP in Sarangani?

- Stimulate discussion and shared learning on how to develop and benefit from PPP in health applications and programs; and

## 2. Why KM for PPP in Sarangani?

- Engage national and local implementers in the development and ownership of PPP in health programs (e.g., “We are here together”);

## 3

### Decision Points

## 3. Decision Points

- How “public “ do you want to be – e.g., the use of social networking sites and blogging platforms?
- What is the best KM resources for Sarangani?
- Working with media – issues, protocols, templates (e.g., for press releases and media kits), need for press briefing/conference?, etc.

## 3. Decision Points

Human resources – who does the KM work?

- Content depends on actual experiences on the ground – how can Sarangani capture best/good practices?

## 4

### Discussion/Other Concerns

#### References

Andre Saito, “KM Technologies and Implementation”, found at <http://www.slideshare.net/asaito/km-technologies-and-strategy>

Karishma Daswani, Approaches to Knowledge Management, found at <http://karishmadaswani.com/karishmadaswani/index.php/2009/10/approaches-to-knowledge-management/>

Morten Hansen, Nitin Nohria, and Thomas Tierney, “What’s Your Strategy for Managing Knowledge?,” Harvard Business Review (1999)

Sheila Corral, “Are We in the Knowledge Management Business?,” found at [http://www.ariadne.ac.uk/issue18/knowledge-mgt/PPPH Program Documents](http://www.ariadne.ac.uk/issue18/knowledge-mgt/PPPH%20Program%20Documents)

**Thank you!**

## **a. A Typical Presentation on Social Marketing**

This presentation was given during Session 1 of the course. (The design and graphics of the actual slides used were no longer adopted here to allow users some room for creativity.)

### **Social Marketing for PPP in Health**

**TA 7257-PHI:  
Public-Private Partnership (PPP) in Health  
Credit for Better Health Care Project**

#### **General Premise:**

The Public-Private Partnerships in Health program is relatively a new national government thrust. The experience akin to the subject is limited to national-level programs and have little field-level implementation.

#### **General Premise:**

Social Marketing is selling an idea, a benefit, and other intangible programs.

Marketing strategies and principles are applicable (product, price, promotion, and placement)

## SM zeroes in on:

Knowledge

Approval and acceptance of the stakeholders

Intention of the stakeholders to be partners in or users of the service/program

Actual practice or use whatever program or service is being offered

Advocacy activities to propagate the program

## Public-Private Partnership in Health

It is not privatization.

The operative word is partnership between the public sector and the private sector.

The partnership is the means to achieve the goals of availability, accessibility, and improved quality of health services.

The product is health service.

The SM objective is to achieve long-term behavior change to improve the health status of the individuals and the community.

## Stages of the SM framework:

- Introductory Stage

Orientation of key agencies involved in PPPH (i.e., ADB, DBP, DOH, PhilHealth, NEDA, COA, CSC)

Initial contact with prospective partners (LGUs and private sector)

**SM intervention:** Presentation of PPPH, its modalities, and requisite components (face to face or group presentation)

**Tools:** Audio-visual material, presentation materials for different modalities, FAQs, flyers/brochures

**Implementing units:** TA Team, DBP, DOH, PhilHealth

**SM intervention:** Focus Group Discussions (involving key stakeholders); Soft campaign (decision-makers, beneficiaries, stakeholders, community in general); training of Speakers Bureau (Presentation skills)

**Tools:** FGDs, training, comics, radio/tv guesting and plugs, endorsement by “champions”, “paid” advertisements by private sector partners

- **Development Stage**

Preparation of TOR, loan instruments, and requisite statutory documents

Development of key messages and materials

“Different strokes for different folks”

Organization of “Speakers Bureau”

**Implementing units:** TA Team, DOH, PhilHealth, Speakers Bureau, private sector partners



- **Implementation Stage**

**Operations and management**

**Construction**

**SM intervention: Continuing SM/information campaign**

**Tools: campaign materials, signage, radio/tv guesting and plugs, comics**

**Implementing units: TA Team, Speakers Bureau, DOH, PhilHealth, private sector partners**

- **Monitoring and evaluation**

**Process documentation, assessment sessions, revision of strategies**

**SM intervention: KM materials, evaluation sessions, policy review**

**Implementing units: TA Team, PPPH groups in DBP, DOH, PhilHealth, NEDA, private sector partners**

### 3.2 A Typical Course for National Government Agencies.

Table 2 shows a typical course content and schedule for a refresher course on communications and media engagement, meant for national government users. This was used in the basic course that was developed and implemented for PhilHealth.

A word of caution before proceeding: a training needs analysis (TNA) should always be done prior to any capacity development intervention. In the case of the technical assistance team that is responsible for the development of this knowledge series, it conducted a TNA first prior to its intervention in Sarangani and PhilHealth. A sample TNA questionnaire (used for PhilHealth) is found in Annex A.

For the specific needs of PhilHealth, a 'repackaging' of the modules done for Northern Samar and Sarangani was necessary. These are for the following reasons: first, the TNA revealed that the prospective PhilHealth participants had undergone several training courses already on social marketing, communications, and public/media relations; second, the PhilHealth personnel who had collabora-

ted with the TA team has mentioned that the prospective participants need more practical sessions rather than theoretical; and finally, "there is, sadly, quite a dearth of effective, competent and confident speakers/interviewees taking into consideration that these PR officers face the "heat," deal with questions, hostile or not, and are the public face of the corporation."

The resource persons then proposed that the course for PhilHealth should be more 'experiential' in approach rather than lecture-based. It also focused more on media work and communications rather than social marketing and knowledge management although some inputs on SM and KM were still shared.

As a practical course, this module offered 'refresher' inputs on the key concepts, principles, and strategies in media work and communications, some of which were delivered by the participants themselves, in collaboration with the resource speakers. Practical sessions on public speaking, development and delivery of presentation, and writing were also conducted.

**Table 2. A Typical Course Content for KM and SM (designed for national government users)**

Session Title	Content Highlight
<b>DAY 1</b>	
9:00 – 9:30 am <b>Introductory Session</b>	This session gives a brief introduction on the purpose and objectives of this course as well as level-off expectations of the participants and resource persons.
9:30 – 10:30 am <b>Session 1: Basics of Communications and Media Engagement (A Refresher Session)</b>	The session enables participants to further understand concepts and principles communications. The session will cover the following topics:  - Communications and media work- For what? - Revisiting key concepts, principles, and strategies
10:30 – 12:00 nn <b>Session 2: Audience Analysis</b>	The session provides a quick review of how to conduct audience analysis. A workshop will be conducted and the outputs here can already serve as inputs to PhilHealth's marketing plan. This covers the following topics:  - PPP in Health: The PhilHealth Experience - Who are the key players? (Developing an 'inventory' of players) - How do we deal with those players?

Session Title	Content Highlight
<p>1:00 – 5:00 pm</p> <p><b>Session 3:</b> <b>Developing a Communications Plan</b></p>	<p>The session helps participants understand the importance of a communications plan and how it ensures sustainability and replication. The session walks through the steps in the development of the communications plan. This covers the following topics:</p> <ul style="list-style-type: none"> <li>- Goals of the communications plan</li> <li>- Key components of the plan</li> <li>- Guide/tips in communications</li> <li>- Likely pitfalls and how to overcome them, etc.</li> <li>- Workshop and writeshop: (1) Developing key messages (based on the discussions in the earlier session); and (2) Developing/Writing actual sections of the communications plan.</li> </ul> <p><i>(This session may also include a brief discussion on the current/previous communication plan and health-related campaigns of the social health insurer, where the participants and resource persons can draw lessons and insights from.)</i></p>
<b>DAY 2</b>	
<p><b>Part 1</b> 9:00 am – 12:00 nn</p> <p><b>Part 2</b> 1:00 – 3:30 pm</p> <p><b>Session 4:</b> <b>Preparing the 'Champions'</b></p>	<p>The session enables participants to prepare themselves as the 'champions' of PhilHealth. It recognizes the importance of knowledge-sharing and practical experience so this session will have exercises and mock session. It covers the following topics/assignments:</p> <ul style="list-style-type: none"> <li>- Public speaking</li> <li>- Writing/developing press statements</li> <li>- Managing the media; enhancing benefits from social media outlets</li> <li>- Mock sessions (1) Some participants will be asked to prepare and deliver a speech on a particular topic; (2) a group work will be assigned (through the use of learning methodologies such as role-playing); and (3) A Q&amp;A portion will be conducted, to simulate a TV interview.</li> </ul>
<p>3:30 – 5:30 pm</p> <p><b>Session 5:</b> <b>Photography and Communications</b></p>	<p>The session reviews the basic concepts in photography but goes beyond the basics by inviting participants to explore photography as a medium of communications and as a tool in social marketing campaigns. A photoshoot may and critiquing be arranged.</p>
<p>5:30 – 6:00 pm</p> <p><b>Session 6:</b> <b>Measuring and monitoring success</b></p>	<p>The session discusses the importance of monitoring and evaluating the success of PhilHealth's communications plan. It will discuss possible M&amp;E framework and parameters. This covers the following topics:</p> <ul style="list-style-type: none"> <li>- Purpose of M&amp;E</li> <li>- What will be measured</li> <li>- How and when measures will be taken</li> </ul>
<p>6:00 – 6:15 pm</p> <p><b>Closing Session</b></p>	<p>The session allows the participants and resource persons to share their thoughts and experiences in the whole course. A course evaluation form may also be filled up.</p>

The sample course designs shared here may be adopted by future users hoping to give basic or refresher courses on knowledge management and social marketing. Users should agree on specific capacity development requirements and implement a training needs analysis.

They can prepare course designs based on a TNA and then implement pilot training courses. Further reformatting/modification may be done later to suit PPP in health needs in their localities or organizations.

The 'final' course designs may continuously evolve over time. PPP in health interventions are expected to adopt to changing needs and circumstances.

Some modules/courses may be jointly run and facilitated by specific experts in TA projects (e.g., enterprise development experts, banking and credit specialists, legal experts, etc.) and resource persons from learning institutions and other government agencies.

The challenge for any country or organization is to develop a framework for capacity development for PPP in health, designate partner learning institutions, and continuously develop, implement, and evaluate capacity development interventions. Evaluation ensures continuing enhancement, suitability, and relevance of such capacity development interventions. (Annex B shows a sample evaluation form.)



## Training Needs Analysis

### General Survey Information

Good day!

We have been requested by PhilHealth to assist in developing and conducting a training course for its personnel, with likely focus on social marketing and knowledge management. We hope you can take the time to answer this survey, as part of PhilHealth's continuing learning and capacity development program.

The questionnaire (on the following pages) is divided into various parts to address a variety of organizational needs, particularly as our government encourages NGAs and LGUs to develop and implement PPPs in health.

The areas covered by the questionnaire include:

- Confirmation of your current job description
- A job analysis
- Skills needed to perform the present job
- Skills needed to perform other roles in the organization
- Future career aspirations
- The identification of prior learning obtained
- Agreed actions for training delivery

While our planned focus is on social marketing and knowledge management, we deem it useful to cover other areas in this questionnaire so PhilHealth will be able to keep this survey as a reference for future capacity development initiatives.

Thank you for your willingness to answer this survey!

– The ADB TA 7257 PHI: PPP in Health Team

**Organization's Name: PhilHealth**

**Name of personnel:**

.....

**Department/Section:**

.....

### General

1. Are you a new employee or a long-standing employee of the organization?

.....

2. How long have you been in your **present** job?

.....

### Confirmation of Current Duties

3. Do you have a duty statement for your job?

Yes

No (Go to Q 6)

.....

4. Is your job accurately described in the duty statement?

Yes (Go to Q 14)

No

.....

5.A If no, what extra duties do you do that need to be added to your duty statement?

.....

.....

.....

.....

5.B What duties are no longer part of your job and can be deleted from your duty statement?

.....

.....

.....

.....

### Job Analysis

6. Describe the tasks you regularly perform that are critical to carrying out your job effectively.

.....

.....

7. Enumerate and describe the type of equipment and software you are required to use (for example, PC, DSLR, Adobe Illustrator, Excel, etc). Please also mention whether you wish to learn to use other equipment or software and briefly enumerate them.

8. Do you require a high degree of technical knowledge for your job?

Yes

No

9. How do you work? Please encircle your answer.

Alone

Part of a team

Other (specify below)

10. If you work as part of a team, do you perform the same or different work as performed by the other members of your team?

11. To what extent does your job require you to work closely with other people, such as customers/clients or people in your own organization? Please encircle your answer.

Very little

Moderately

A lot

12. How much autonomy is there in your job, i.e., to what extent do you decide how to proceed with your work? Please encircle your answer.

Very little

Moderately

A lot

13. How much variety is there in your job, i.e., to what extent do you do different things at work, using several skills and talents? Please encircle your answer.

Very little

Moderately

A lot



## Training Needs

- 14. To perform your current job:** What training do you still need (either on-the-job or a formal course) to perform your current job competently (e.g., social marketing, knowledge management, technical writing, public speaking, bookkeeping, English as a second language, etc.)?

---

---

---

- 15. Willingness/aspiration to transfer to another position/job in the organization:** What other roles in the organization would you be interested in doing if a vacancy became available (e.g., transfer to another section, supervisor position, etc.)?

---

---

---

- 16. To perform other jobs in the organization:** What training or experience would you require if you are to perform this position/job in the organization? (e.g., machine operation, negotiation skills, etc.)?

---

---

---

17. In the matrix below, place a check mark in the column that reflects your current level of skill or ability for each skill listed. Rank your skills on a sliding scale, with 1 being poor or beginner-level skills and 5 being strong skills or more advanced experience in that area. Your responses will help us determine your current skill set, so PhilHealth can plan the most effective training program to help you excel at your job.

<b>Sales/Marketing/Social Marketing Skills</b>	<b>1</b> Weak	<b>2</b>	<b>3</b> Avg.	<b>4</b>	<b>5</b> Strong
Identifying clients and their needs					
Identifying clients' objections					
Overcoming customer objections					
Knowledge of social marketing concepts					
Developing social marketing plans					
Implementing social marketing programs					
Evaluating social marketing programs					
<b>Knowledge Management/ Communications/ Media Skills</b>	<b>1</b> Weak	<b>2</b>	<b>3</b> Avg.	<b>4</b>	<b>5</b> Strong
Showing enthusiasm when dealing with clients/ being client-focused					
Ability to develop knowledge management plans					
Ability to execute knowledge management plans					
Ability in developing presentations					
Ability in writing/technical writing					
Ability in press release writing/development					
Competence in public speaking					
Understanding and working well with media					
Ability to answer questions of media with clarity and substance					
Ability to plan for and manage press conferences					
Ability to mentor/train others					
<b>General Business/Organizational Development Skills</b>	<b>1</b> Weak	<b>2</b>	<b>3</b> Avg.	<b>4</b>	<b>5</b> Strong
Ability to develop business plans					
Ability to execute business plans					
Ability to conceptualize projects/programs					
Knowledge in organizational development					
Ability to execute organizational development plans					
Understanding financial goals					

## Future Development Needs

18. What are your career aspirations?

.....

.....

.....

.....

19. What training or development do you need to help make this happen (e.g., external degree study, formal meeting procedures, leadership training, etc.)?

.....

.....

.....

.....

## Recognition of Prior Learning

20. What training programs in social marketing, communications, and knowledge management have you attended within the last three years? (This will help identify if any training sessions have been missed or if any refresher training is required.)

.....

.....

.....

.....

21. What training or skills have you acquired outside your current job that may be relevant to the wider organization?

.....

.....

.....

.....

Signature of Personnel

:

.....

Date :

.....

**PLEASE DO NOT ANSWER BEYOND THIS PAGE.**

**THIS SECTION MUST BE ACCOMPLISHED BY PHILHEALTH AND/OR TRAINORS**

**Action Plan**

**Agreed training and development to be provided over the next 12 months:**

(Give the titles and details of the training courses, on-the-job experiences, buddy systems or mentor arrangements that are being recommended for this personnel.)

Training	Date
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

Signature of Supervisor/Trainor	:	.....	Date :	.....
---------------------------------	---	-------	--------	-------



**Capacity Building for PPP in Health  
Refresher Course on Communications  
and Media Engagement**

**Course Evaluation Form**

(Please submit to your resource persons at the end of the course.)

Course Title: Refresher Course on Communications and Media Engagement	Date:
Resource Persons:	Venue:
Course Provider: PhilHealth and ADB TA 7257 PHI: PPP in Health	No. of Hours: 17 (approximate)
Course Type: Lecture, practical sessions, open forum	No. of Sessions: 8 (including introductory and closing sessions)

Your comments will help us (and future educational/training services providers) in evaluating this course and improving the quality of the next ones as we develop and implement PPP in health projects. Please take a few minutes at the completion of the course to evaluate this course, the resource persons, and participants. Thank you for your time and participation.

**PLEASE CIRCLE YOUR RESPONSE TO EACH OF THE FOLLOWING:**

	<b>Strongly Disagree</b>			<b>Strongly Agree</b>	
Meeting site was adequate in size, comfortable, and convenient.	1	2	3	4	5
Course objectives were consistent with the course as announced.	1	2	3	4	5
Course materials were relevant and helpful.	1	2	3	4	5
Resource persons demonstrated a comprehensive knowledge of the subjects.	1	2	3	4	5

Resource persons appeared to be interested and enthusiastic about the subjects.	1	2	3	4	5
Resource persons encouraged questions and participation.	1	2	3	4	5
Participants were active and participative.	1	2	3	4	5
Handout materials enhanced course content.	1	2	3	4	5
Overall, I would rate this course as effective:	1	2	3	4	5
Overall, I would rate the resource persons as effective and encouraging in the discussions:	1	2	3	4	5

**Comments (positive or negative):**

**Other topics you would like your organization or other service provider to offer in the future:**







Asian Development Bank  
Mandaluyong City Philippines  
November 2012