

Nine Steps

Worksheets for developing a scaling-up strategy

NOTE: These worksheets are to be used in conjunction with the ExpandNet/WHO document entitled Nine-Steps for developing a scaling-up strategy. For more extensive guidance on scaling up, see Practical guidance for scaling up health service innovations. These and other scaling up tools are available on the ExpandNet website at www.expandnet.net/tools.htm.

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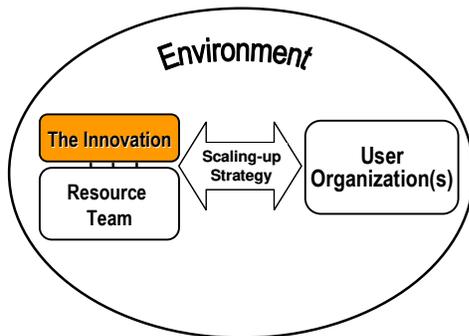


World Health
Organization

Introductory visioning exercise: Expectations for scaling up

1. Have you already started the process of scaling up? If so, what has been accomplished?
2. What are your hopes and expectations for scaling up?
3. Five years from now, how far do you expect scaling up to have progressed?
4. Do you have any concerns/worries about scaling up? If you are already scaling up what are the challenges that have emerged?

Step 1: Planning actions to increase the scalability of the innovation



The innovation refers to health interventions and/or other practices that are being scaled up. The innovation is a package of interventions, often consisting of several components.

1. What is the innovation or the package of interventions that you have produced? (List all of the components/activities that were necessary to implement the innovation. An innovation can consist of changing a technology or clinical technique; community or individual behaviors or values; a teaching, or management or other institutional practice; introducing a product or any other desirable intervention ranging from simple to more complex ones.)
2. For projects which include several innovations (e.g.: 1) community-based distribution of contraceptives, and 2) involving the private sector) etc:
 - Is the intention to scale up all of the ones that prove successful or were there some innovations that are not/were never intended for scale up? If so, which ones were these?
 - If not all innovations are intended for scale up, what is the evidence that the overall success can be maintained without them?
3. Proceed through the subsequent questions and steps for each innovation separately.

Credibility (Is the innovation based on sound evidence and/or advocated by respected persons or institutions)

1. What is the evidence?

- Have the innovation's results been documented? Where? How?
- What form does this evidence take? (Internal evaluation? External evaluation?)
- How sound is the evidence for the success of the innovation?
- Do results show how the innovation affects overall service provision, for example the provision of quality of care in the delivery of contraceptive services more generally?
- Are the results clearly associated with the innovation, or could there be alternative explanations for these outcomes?
- Is the innovation supported by respected individuals and institutions? If so, by whom?
- ➔ Is further evidence/better documentation needed? If so, what should be done to obtain better evidence/documentation?
- ➔ What else can/should be done to increase the credibility of the innovation?

2. What are the most important components of the innovation?

- Which components of the innovation are central to the success of the pilot? Describe these components and the evidence.
- Are there components which are less essential to achieving impact? Describe the components and the evidence.
- ➔ Can the innovation be simplified to facilitate scaling up? (without losing its essential technical, service delivery, gender and human rights components)
- ➔ Are there components of the innovation that need to be added or strengthened?

3. Has the innovation been tested in the type of setting and within the resource constraints which will characterize scaling up?

- ➔ If not, is further testing needed to evaluate results in such settings? If so, how should this be done?

4. Is the innovation sustainable in the setting where it was tested? Is it likely to be sustainable in the settings where it will be scaled up?

- ➔ What can be done to ensure sustainability?

Observability (Can potential users of the innovation see the results in practice?)

1. How observable are the results of the innovation?

- ➔ Should the results be made more observable or better communicated to program managers, the public and other key stakeholders? If so, how?

Relevancy (Does the innovation address persistent and sharply felt problems?)

1. Does the innovation address a felt need or persistent problem? If so, whose felt need/persistent problem (community members, program managers, policy makers, etc)? What are the key problems addressed? Is the intervention acceptable to the intended beneficiaries?
2. Can it be feasibly implemented in the routine program setting?
 - ➔ Does the perceived relevancy of the innovation need to be strengthened?

Relative Advantage (Does the innovation have an advantage over existing practices or over other models?)

1. Does the innovation have relative advantage over other existing practices?
 - ➔ Is there a need to promote the advantage more effectively? How can this be done?
2. Is the innovation cost-effective in comparison to existing practices, other models or in comparison with doing nothing?
 - ➔ Does the innovation's cost and cost effectiveness need to be assessed or documented?

Ease of Installation/Transfer (Will it be easy or complicated to implement the innovation in new sites)

1. What is the degree or amount of change implied by the innovation (in its simplified version)? (How different is it from current beliefs and practices of the target population or the user organization? Does it require a change in values or rights, for example in relation to gender practices? Is the level of technical sophistication higher than current standards in the user organization?)
 - ➔ What implications does this degree of change have for the extent and pace of scaling up?
 - ➔ How can one ensure that new values introduced by the innovation (e.g. human rights, gender, quality of care) become part of general service delivery to ensure long run sustainability?
 - ➔ How can one ensure that the essential components of the innovation are maintained in the process of scaling up?
2. Are there major additional resource requirements in scaling up the innovation? What are these (e.g. materials, infrastructure, training)? Were there external inputs during pilot testing?
 - ➔ What are the implications of this for scaling up?

Compatibility (Is the innovation compatible with established values, practices, facilities?)

1. Is the innovation compatible with current norms, values, services and facilities of the user organization, providers and of the target population?
 - ➔ Does the innovation need to be differently presented/packaged to make it more compatible? How?
 - ➔ How can changes in infrastructure/facilities be minimized to facilitate scaling up? What changes are essential?
 - ➔ What components might need to be locally adapted?

Testability (Can the user organization test the innovation without fully adopting it?)

1. Can the innovation be introduced in stages, or do all components need to be introduced simultaneously in each setting?
 - ➔ What is the appropriate sequencing?

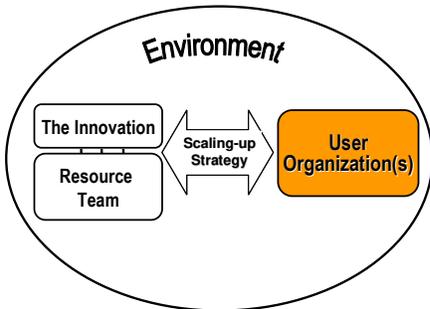
Is it still appropriate to proceed with plans for scaling up or is the innovation too complex and difficult for larger scale replication and institutionalization?

If several innovations have been tested, reach conclusions about whether all or only a subset of the innovations should be scaled up.

If it is considered appropriate to proceed with either one or more innovations, continue with scaling up strategy development working through the other eight steps in these worksheets.

SUMMARY OF RECOMMENDED ACTION STEPS

Step 2: Increasing the capacity of the user organization to implement scaling up



The user organization refers to the institution(s) or organization(s) that seek to or are expected to adopt and implement the innovation. (Also referred to as the implementing organization).

Instruction: If several innovations will be scaled up, and different user organizations are involved for each, the planning team may have to go through this step for each innovation that has a different user organization(s).

1. What organizations are expected to adopt the innovation or are already in the process of implementing it?
 - Is one organization or are several organizations involved?
 - What are these institutions/organizations?
 - ➔ If a user organization/institution has not yet been identified, what options exist and what steps need to be taken to ensure appropriate selection?
2. If there are several user organizations that will jointly implement the innovation, which one will be (or is) the lead organization that will take overall responsibility for managing the process?
 - ➔ If the division of labor among them has not been determined, what needs to be done to ensure clarity about the division of labor?
 - ➔ Does anything need to be done to ensure appropriate coordination? If so, what?
 - ➔ What decisions remain to be made? When will they be made? Who will make them?
3. Were members of the user organization involved in designing and implementing the pilot project?
 - ➔ If not, what can/should be done to build a sense of ownership in the user organization?
3. If the innovation was tested in a different type of organization (e.g. NGO) than where it will be scaled up (e.g. public sector) have the differences between these settings and their potential impact on future scaling up been understood and discussed by the resource team or does this need to be further explored?

➡ What needs to be done?

4. Has it been determined at what level(s) of the institution/organization the innovation will be adopted (national, provincial/district, community/primary/secondary/tertiary)? If so, at what level(s)?

➡ If not, what steps need to be taken to make these decisions?

Perceived Need

1. Is there a perceived need for this innovation in the user organization(s)? Is it considered a priority?
2. Who perceives this need? Are there individuals who are advocates/champions of the innovation? Who and where within the organization(s)? How strong? Why?
3. Within the organization is there likely to be any opposition to the innovation? If so, who and at what level?

➡ Is there anything that needs to be done to strengthen perceived need in the user organization and/or reduce opposition?

➡ Are there existing advocates/champions? How can new champions be mobilized?

Implementation Capacity

1. Does/do the user organization(s) have the capacity to implement the innovations that have been tested in the pilot project in terms of:
 - training capacity
 - technical skills/quality of care
 - leadership, management/supervision
 - personnel to take on the new tasks implied by the innovation
 - resources needed
 - logistics/supplies
 - physical facilities
 - values and orientation supportive of the innovation (e.g. client-centeredness, focus on quality of care or emphasis on gender sensitivity)
 - monitoring/evaluation capacity

➡ If not, what needs to be done to create sustainable capacity in the sites where the innovation is to be introduced?

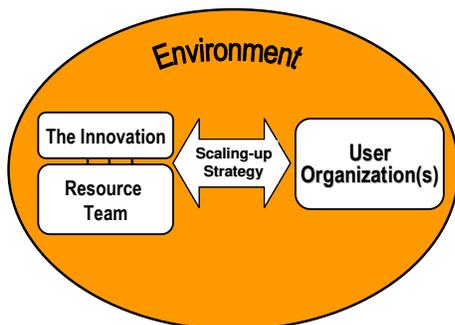
- ➔ Can such capacity strengthening to implement the innovation be done without detracting from the user organization's ability to provide existing services? What needs to be done to ensure that capacity strengthening benefits the user organization more generally?
- ➔ Is further testing required to determine how capacity can be strengthened?
- ➔ If external inputs were available during the testing of the innovation, but are not routinely available in the user organization, what should be done to mobilize these inputs?

Timing and Circumstances

1. Are there impending changes within the organization (personnel changes, funding issues, reorganization, health sector reform, decentralization, elections) that might affect the success of scaling up?
 - ➔ If so, what can/should be done to ensure that scaling up can proceed in spite of these changes or is as little negatively affected as possible?

SUMMARY OF RECOMMENDED ACTION STEPS

Step 3: Assessing the environment and planning actions to increase the potential for scaling-up success



The environment refers to the conditions and institutions which are external to the user organization but fundamentally affect the prospects for scaling up.

1. What are the different environmental factors that are influencing or are likely to influence the process of scaling up the innovation?
 1. Health sector?
 2. Ministry of Education or other relevant government institutions?
 3. Bureaucratic culture?
 4. People's needs and rights?
 5. Policy setting / political system?
 6. Socioeconomic, gender & other socio-cultural characteristics?
 7. Funding agencies?
 8. Other?

Environmental Opportunities/Constraints for Scaling up

1. Where, in each dimension of the environment, is there support (or is there likely to be support) for scaling up the innovation?
2. Where, in each dimension of the environment, is there opposition (or likely to be opposition), obstacles or constraints?
3. Are any of these opportunities or constraints likely to change while scaling-up occurs?
 - ➔ How should potential support from these factors in the environmental be mobilized to facilitate scaling up?
 - ➔ What should be done to reduce or avoid constraints or opposition in the environment?

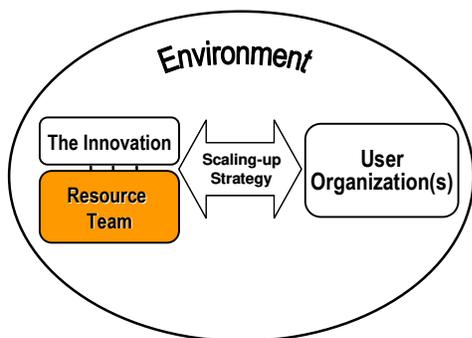
➡ Will it be possible to build flexibility into the scaling-up strategy to ensure that environmental changes can be accommodated? If so, where/how?

4. Are there opportunities for collaboration with other agencies/projects that will facilitate scaling up? If so,

➡ What should be done to institute such collaboration?

SUMMARY OF RECOMMENDED ACTION STEPS

Step 4: Increasing the capacity of the resource team to support scaling up



The resource team refers to the individuals and organizations that seek to promote and facilitate wider use of the innovation. A resource team may be formally charged with promoting the innovation or may act informally in this role.

Necessary Skills and Size of the Team

1. Who facilitated the initial development and testing of the innovation? How large is the team?
2. What institutions/organizations were represented?
3. Will these individuals/institutions serve as members of the resource team during scaling up?
4. Have additional individuals/institutions already been identified as additional members of the resource team to assist in scaling up?
5. The skills listed below are likely to be needed in the resource team to ensure that the team can effectively facilitate the scale up of the innovation. Are these characteristics adequately represented in the resource team:
 - Effective and motivated leaders with a unifying vision who have authority and credibility with the user organization
 - Understanding of the political, social, cultural and economic environment in which scaling up will take place
 - The ability to identify and help generate financial resources
 - In-depth understanding of the user organization's capacities and limitations
 - Capacity to train members of the user organization
 - Capacity to assist the user organization with management tasks
 - Ability to advocate in favour of the innovation with policy-makers, government officials and program managers
 - Experience with research, monitoring and evaluation and the dissemination of key findings
 - Experience with human rights and gender perspectives
 - Skills/experience with scaling up
 - Technical skills and a quality of care perspective

- Availability to provide support over a multi-year period
- ➔ If not, what needs to be done?
 - Is there need for additional training/skills development?
 - Should new members be added to the resource team? If so, what considerations regarding skills, regional and institutional representation, and participatory philosophy should be taken into account in adding to the team?

Financial Resources

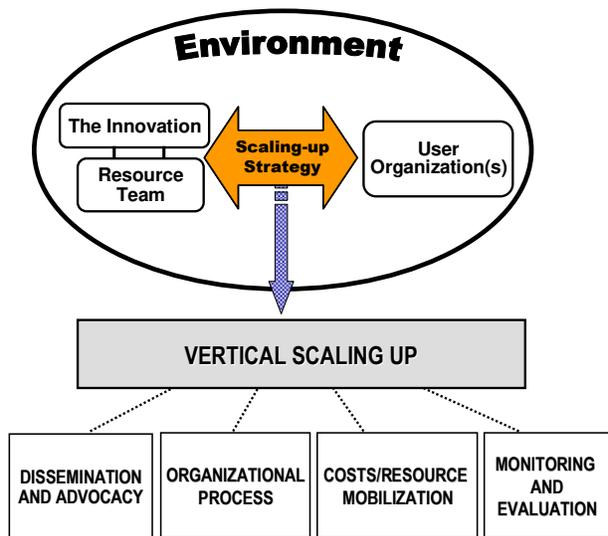
1. Are sufficient resources available to support the work of the resource team? What additional types of support/resources will be needed for the resource team?
 - ➔ What can be done to ensure that funding and support for the resource team is available?
 - ➔ How can funding be sustained?

Stability of the Resource Team

1. Are key members of the resource team likely to stay in their roles for as long as scaling up is underway?
 - ➔ Are there mechanisms for retaining them in the team?
 - ➔ What are ways of ensuring flexibility in the capacity of the resource team to respond to changing needs?
 - ➔ What are ways of ensuring sustainability and stability of team members?

SUMMARY OF RECOMMENDED ACTION STEPS

Step 5: Making strategic choices to support vertical scaling up (institutionalization)



Vertical scaling up refers to the policy, political, legal, regulatory, budgetary, programmatic, operational or other health systems changes needed to institutionalize the innovation at the national or sub-national level.

Strategic Choices: Dissemination and advocacy, Organizational process, Costs and resource mobilization, and Monitoring and evaluation

1. Have changes at the policy, legal, institutional or political level to support scaling up already been made? If so, what are these?
2. What additional changes are needed so that expansion can proceed and the innovation is sustainable? (Be sure to consider logistics and information systems or changes in the human resource or training system)
 - What are appropriate approaches to advocate for the needed changes?
3. Who will organize the necessary advocacy? Are there advocates within the user organization who will support such change? What is the expected role for the resource team? Will other organizations be involved?
 - ➡ What needs to be done?
 - ➡ How long will be required to achieve these results? By when can one realistically expect these changes to be accomplished?
4. Are resources for advocacy and related costs of vertical scaling up available or do they need to be mobilized?
 - ➡ What needs to be done to accomplish this?
5. Are there mechanisms in place for monitoring/evaluating or assessing the policy, political, legal, organizational or institutional strategy as scaling up proceeds? If not,
 - ➡ What needs to be done?

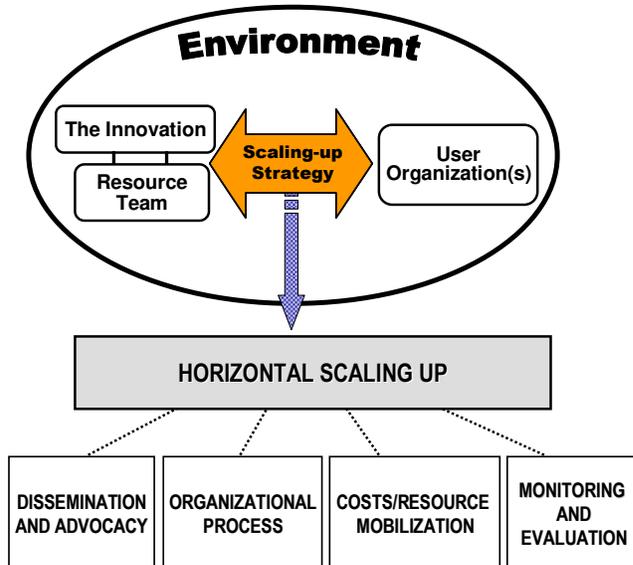
6. How feasible are these strategies given the capacities of the user organization and the resource team, and the characteristics of the innovation and the environment?

➡ Where do compromises need to be made?

➡ If none, or very few of the needed changes can be accomplished – what implications does this have for the future expansion of the innovations? (horizontal scaling up)

SUMMARY ASSESSMENT OF RECOMMENDED ACTION STEPS

Step 6: Making strategic choices to support horizontal scaling up (expansion/replication)



Expansion or replication is also referred to as horizontal scaling up. Innovations may be replicated in different geographic sites or can be extended to serve larger or different population groups.

Dissemination Approaches and Advocacy

1. What methods/approaches/activities will be used (or are already being used) to transfer, communicate or advocate for the innovation to the user organization and other relevant stakeholders? What will be the role of personal interventions such as training, technical assistance, peer to peer exchanges, conferences and other presentations, and dialogues? What about impersonal approaches – e.g. websites, training curricula, toolkits, job aids, media, reports, briefing papers?)
 - ➔ Are there innovative approaches that should be tried?
2. Who are your key audiences (policy makers, the media, managers, providers, community members, professional and advocacy groups)? Are the key aspects of the innovation packaged in clear and concise messages for each respective audience?
 - ➔ If not, what needs to be done? Who has responsibility for this?
3. Are the dissemination tools and advocacy messages clear and understandable?
 - ➔ Should the tools and messages be simplified so that they are more understandable? Do materials need to be translated into local languages?
4. What is the time frame for dissemination and advocacy?
 - ➔ Is this feasible, does anything need to be changed?

5. Are these dissemination/advocacy approaches sufficient?
- ➔ Should additional channels of communication and advocacy approaches be used?

6. Is the dissemination/advocacy approach feasible given the capacities of the user organization and the resource team, and the characteristics of the innovation and the environment?

- ➔ Does anything need to change?
- ➔ What needs to be done to ensure sustainability?

Organizational Choices

1. How many sites are expected to adopt (or are already adopting) the innovation? Where are they located? (scope of expansion).
 - ➔ How feasible is the proposed scope of expansion given the capacities of the user organization and the resource team, the characteristics of the innovation and the environment, and the financial and other resources available?
2. What is the time period during which expansion will take place? (pace of expansion)
 - ➔ If planned expansion is rapid, is this feasible given the capacity of the user organization, the resource team and the complexity of the innovation?
 - ➔ Is there agreement among the members of the resource team about how fast and where scaling up should proceed? If not, what needs to be done?
3. Are there regional differences between sites (economic, cultural, political, and programmatic)?
 - ➔ If so, is further testing of the innovation needed in these settings?
4. Does the implementation capacity of the user organization(s) differ in the different sites?
 - Are there champions/advocates who are interested in supporting and working on these issues in these sites?
 - Is there a local resource team in each site? How distant from the core resource team are the sites to which the innovation will be expanded?
 - ➔ Does the scaling-up strategy need to be adjusted to reflect these differences; if not, how should this be done?
 - ➔ If the user organization's capacity is stronger in some sites or regions of the country than others, should scaling up begin in these areas?
5. Will the implementation strategy have a top-down, centralized approach, or have a bottom-up, decentralized approach?

- Will the implementation strategy be standardized or flexible and adaptive?
 - ➔ What needs to be done to ensure flexibility in the face of regional and other differences?

- 6. Will the strategy be participatory and involve the community? If so, in what ways --
 - ➔ What needs to be done to ensure such a participatory approach?

- 7. Are there additional new partners or organizations who could be brought in to support or implement scaling up?
 - ➔ What should be done to ensure this happens?

- 8. How will sustainability be ensured?

Costs/Resource Mobilization

1. What are the costs of implementing the intervention(s) for a “scalable unit”. E.g. cost per village, per district, or per region?
2. Will the costs of expansion be the same for each new area/site? Are economies of scale possible?
 - ➔ Can expansion be more efficiently organized?
3. Are resources for expansion available?
 - ➔ If not, do they need to be mobilized?
 - ➔ If so, how?

Monitoring/Evaluation

The following are key factors that need to be monitored in the progress of expansion:

- Whether all the components of the innovation are implemented
 - Whether local adaptation maintains the essential elements of the innovation
 - Whether local adaptation continues to produce the desired outcomes and impact of the innovation
 - Impact on overall service delivery and quality of care
 - The influence of ongoing environment changes
 - Unexpected results with either positive impact (e.g. community empowerment, or increased provider sense of confidence) or negative impact on other service delivery components
 - Perceptions of progress and problems at each level of service delivery
1. Which of these can be monitored and evaluated using the existing management and

information system/service statistics or other existing sources of information?

➔ What new systems need to be established (or have already been established) for such monitoring?

➔ Who will be responsible for monitoring/evaluation and are the resources for such monitoring available?

➔ If not, what needs to be done?

2. What special studies need to be undertaken if routine service statistics cannot capture the essential aspects of scaling up (for example changes in quality of care?)

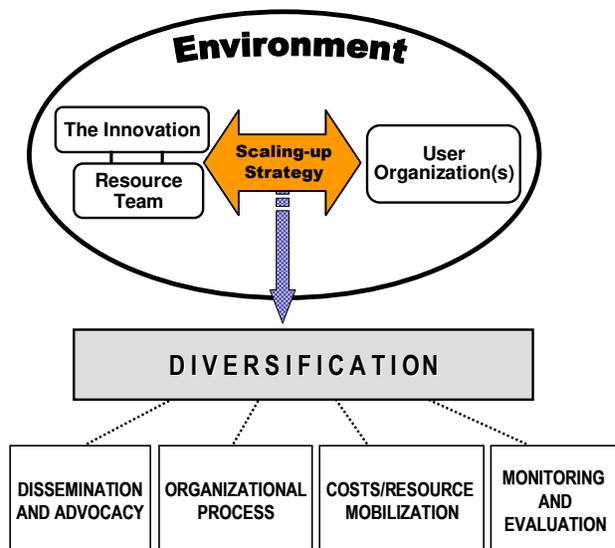
3. Is there funding and support for special studies if routine service statistics cannot capture the essential aspects of scaling up?

- Do the resource team and the user organization have the necessary skills, capacities, and funding to conduct routine monitoring and necessary research/evaluation?

➔ If not, what can/should be done?

SUMMARY OF RECOMMENDED ACTION STEPS

Step 7: Determining the role of diversification (grafting, or functional scaling up)



Diversification, also called functional scaling up or grafting, consists of testing and adding a new innovation to one that is in the process of being scaled up.

Strategic Choices: Dissemination and advocacy; Organizational process; Costs and resource mobilization; Monitoring and evaluation

1. Are there plans underway, or has testing already begun, to add additional components to the existing innovation? If yes, what are these new components? If no, should this be considered?

If new components will be added, refer back to Steps 1-4 and assess the scalability of the new components, and the implications for the scaling-up strategy.

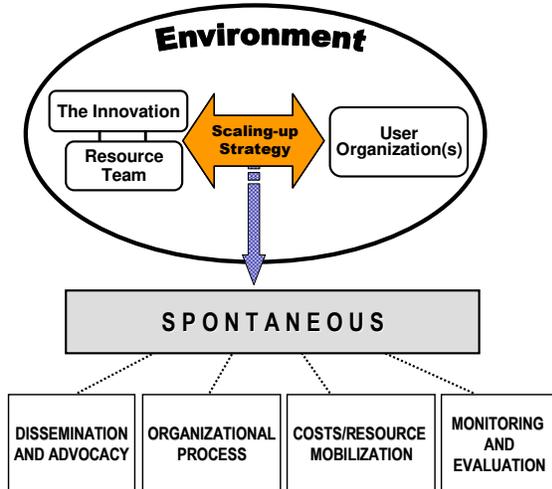
2. Will new components be added to sites where the original innovation is being or has been implemented?
 - ➔ If yes, what implications does this have for the resources and capacity needed?
 - ➔ Is there evidence to show how these two innovations function effectively together or is there need to gather additional evidence on whether they reinforce each other, are neutral or detract from each other when implemented together?
3. What user organizations are expected to adopt the new component? Is this the same user organization that adopted the innovation, or is it different? If different, how does it differ?
 - ➔ What needs to be done to ensure appropriate coordination?
4. Are resources available to ensure sustainable diversification or do they need to be mobilized?
 - ➔ If so, how?
5. What are plans for monitoring process, outcomes and impacts?

6. How feasible is the proposed pace and scope of this work given the capacities of the user organization and the resource team, and the characteristics of the new component and the environment?

➡ Does anything in the strategy need to be adjusted to make it more feasible and sustainable?

SUMMARY ASSESSMENT OF DIVERSIFICATION OR FUNCTIONAL SCALING UP

Step 8: Planning actions to address spontaneous scaling up



Spontaneous scaling up refers to diffusion of the innovation without deliberate guidance. Spontaneous scaling up may occur from individual to individual and from scale up programme settings to other settings.

1. Is there evidence that spontaneous scaling up is occurring? What is this evidence? (Where, how and why is it happening?)
2. Are all the components of the innovation being scaled up, or only some aspects of it?
 - ➔ Should this be further explored or evaluated? Who will be responsible for measuring and evaluating this process?
 - ➔ If spontaneous scaling-up is occurring, what can one learn to make the strategy for guided scaling up more effective?
 - ➔ If spontaneous scaling up is resulting in only partial implementation of the innovation, what needs to be done to correct the situation?

SUMMARY OF RECOMMENDED ACTION STEPS

Step 9: Finalizing the scaling-up strategy and identifying next steps

1. Summarize the recommended action steps from steps 1-8.
2. Follow the instructions under step 9 in the ExpandNet/WHO document “Nine steps for developing a scaling-up strategy”, available at www.expandnet.net/tools.htm.