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PROGRAMME MANAGEMENT IN WHO

OPERATIONAL PLANNING

GUIDANCE FOR 2004-2005

World Health Organization
Programme Planning, Monitoring and Evaluation

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FOREWORD

The introduction of *results-based management*¹ is a key element of the WHO reform agenda. It has introduced a structured approach to **accountability** and **commitments** to achieve stated results.

Under this Organization-wide approach:

- Areas of Work have been identified as the common building blocks for results-based management
- the budget allocation for each Area of Work has been linked to WHO Objectives, each of which has several Expected Results;
- the formulation of measurable Expected Results and the results-based budget process provide the foundation for future monitoring and evaluation;
- the preparation of the Programme Budget involves various stakeholders in countries, regions and headquarters in a collaborative process, as a means of reaching agreement on an accountability framework.

In reforming its programme management framework in this way, the WHO Secretariat recognizes that a key challenge for the period 2002-2005 is to ensure:

- a **common understanding** of the basic requirements for planning, monitoring, evaluation, and reporting
- **consistency** between strategic planning, the Programme Budget and operational planning **at all levels**
- the use of **monitoring and evaluation** at all levels in decision-making.

Achieving this entails common business rules, compatible tools and harmonized practices throughout the Organization.

Further, significant efforts are being made to improve planning and reporting on the totality of WHO's work in and with individual countries. The development of Country Cooperation Strategies is one important step towards these improvements.

Significant progress is being made towards more efficient and effective programme development and management across the Organization. This in turn should promote greater confidence among Member States and donors in the transparency and accountability of the WHO Secretariat.

¹ Terms in italics are defined in the *Glossary of Terms: Annex 1*

PART I : INTRODUCTION

1. *Results-based management* was introduced in WHO in the Programme Budgets for 2000-2001 and 2002-2003. With the *Programme Budget 2004-2005*, the WHO Secretariat has built on experience to date and developed the approach further, including setting performance indicators for WHO Objectives.

2. The WHO Secretariat is collectively accountable for achieving the *Expected Results* set out in the Programme Budget. How the commitments will be achieved is detailed in the *workplans* prepared by each organizational entity of all WHO offices. Furthermore, systematic performance monitoring and evaluation will ensure that the results are achieved efficiently and effectively.

3. This document provides guidance for the preparation of workplans for 2004-2005. Substantive changes to the operational planning guidelines have been kept to a minimum between 2002-2003 and 2004-2005. Overall the emphasis has been on clarifying instructions for those areas of operational planning where compliance with the 2002-2003 guidelines has proven weakest.

4. The new requirements for 2004-2005 are:

- to specify the contribution of each office (country offices, 6 regional offices and Headquarters) to each Organization-wide Expected Result in terms of an *office-specific expected result* (see paragraph 43);
- where appropriate, to indicate work that benefits directly a given country or named countries (see “specifying country beneficiary” in paragraph 51).

5. A workplan defines a set of *products* or *services*, with their associated *activities* and *resources*, to be delivered by an *organizational entity* in support of one or more Expected Results in the Programme Budget. **Each WHO office (country office, regional office and Headquarters) is responsible for the development of its workplans and for compliance with this guidance.** While offices may adapt the guidance to reflect local needs and context, planning, monitoring, evaluation and reporting at all levels must relate to the Expected Results in the Programme Budget. These Expected Results, and the contribution of each part of the Organization to achieving them (office-specific expected results), are key features of WHO’s approach to results-based management.

6. For 2004-2005, this operational planning guidance seeks to provide a single planning framework for all levels of the Organization, i.e. WHO country offices, regional offices and Headquarters. But it specifies only common principles and key requirements. In recognition of the fact that practices vary between regions and between countries within the common framework, it does not attempt to define the full suite of business rules, particularly for use at country level. Each regional office and Headquarters will issue its own detailed guidance.

PART II : GUIDING PRINCIPLES

Corporate strategy and priorities

7. The planning process should both reflect Organization-wide strategies and commitments, and foster their ownership by each office and each team. At all levels, WHO's budget should be used primarily and increasingly for agreed Organization-wide priorities and Expected Results.

Consultation and collaborative approach

8. Consultation within the Organization will ensure, as far as possible, synergy and coordination of work between all levels of WHO, in particular for working in and with countries. Country Cooperation Strategies, where they exist, are an expression of WHO's corporate strategy at country level, and can guide consultations and decisions.

9. At country level, WHO's work is determined by the national health priorities, taking account of WHO's corporate strategy. Where a Country Cooperation Strategy has been defined, this serves as the reference for planning the work of all levels of the Organization in and with that country. The WHO Secretariat works with the Ministry of Health, and other partners, to identify how it will support the agreed priority areas for cooperation and collaboration, and reflect these in its workplans.

Managing according to organizational structure and by Areas of Work

10. Workplans set out how units or teams within each office will deliver the programmes. These plans define the products and services to be delivered, related activities and the resources that each organizational entity is directly responsible for planning, monitoring and evaluating. For these purposes, the workplan is an essential tool.

11. At the same time, from Organization-wide and office perspectives, programmes and budgets are managed according to the 35 Areas of Work defined in the Programme Budget 2004-2005². For these purposes, the workplans developed in relation to organizational structures will be aggregated by Area of Work.

Linking staff performance and programme performance

12. All staff members should have a clear understanding of WHO's objectives and strategies, and of their own responsibilities, activities and roles as contributors to the success of the Organization. Individual staff workplans are derived from workplans of their unit or team. They are formulated on the basis of the products and services to be delivered and are clearly linked to Organizational objectives and strategies. WHO's staff Performance Management and Development System (PMDS) is based on principles of participatory workplanning, performance dialogue and performance review. Full details can be found in the WHO Performance Management and Development Users' Guide (January 2002).

² See Annex 3 for the 35 Areas of Work in the Proposed Programme Budget 2004-2005

Integrated management

13. WHO's results-based management includes planning, budgeting, monitoring, evaluation and reporting. Its principles apply to both programmatic and resource management. In the Programme Budget, performance indicators have been defined for each Organization-wide Expected Result, to provide the basis for assessing whether the Expected Results have been, or are likely to be, achieved. Monitoring, evaluation and reporting against these indicators form an integral part of the work of programme managers and teams in all offices, and should be appropriately reflected in the workplans of organizational entities and individual staff. Monitoring and evaluation and collecting information for indicators, require human and financial resources. Each office should identify and budget the associated costs.

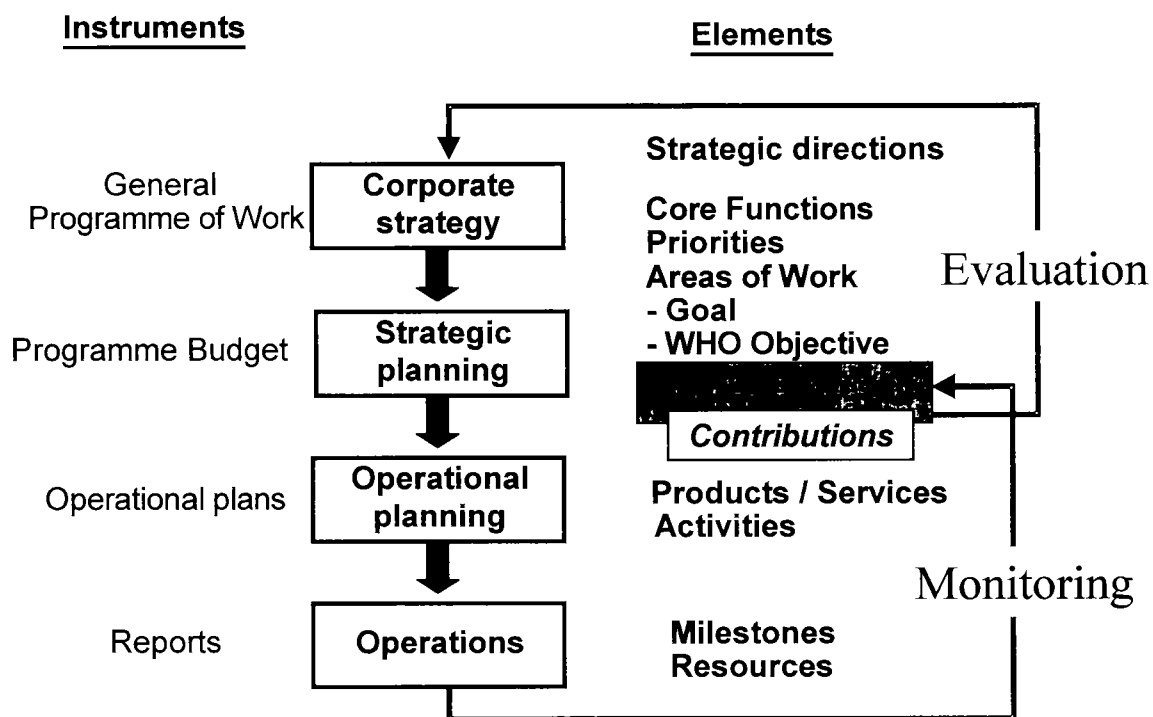
Management information system

14. The *Activity Management System* (AMS) is the global tool for planning, monitoring, evaluating and reporting. It can aggregate relevant workplans in order to produce *composite workplans* at the level of Area of Work. Where AMS is not currently used, the local programme management information system must provide a *core data set* that will be periodically uploaded to the global database (see paragraph 29).

PART III : OVERALL MANAGERIAL FRAMEWORK

15. The managerial process in WHO is based on management cycles that proceed from the formulation of long-term orientations through the refinement of these into medium-term objectives to the definition of short-term expected results. At each step, the emphasis is on defining **what will be achieved in measurable terms**. Figure 1 illustrates the overall managerial framework for WHO, including the instruments used for planning and operations, and the key planning elements.

Figure 1: Overall managerial framework in WHO



16. The *General Programme of Work* provides the policy orientations for programme design and implementation, currently for two biennia, e.g. 2002-2005. The *Country Cooperation Strategy*, where it exists, provides specific policy orientations for that country.

17. The *Programme Budget* defines the commitments for programme delivery for a single biennium by Area of Work, providing an Organization-wide planning framework and common objectives for the work of the WHO Secretariat. It is operationalized through workplans developed for the whole biennium.

18. For each Area of Work, the *Programme Budget* defines three levels of results:

- the broad development *Goal* to which WHO’s work will contribute;
- the *WHO Objective*: the medium-term change to which the Secretariat as a whole is committed to achieve over several biennia;
- the *Expected Result* for which the WHO Secretariat as a whole is responsible for achieving in one biennium.

19. This hierarchy clearly distinguishes the **responsibilities of the WHO Secretariat** from those of Member States, and establishes the relationship between different levels of results.

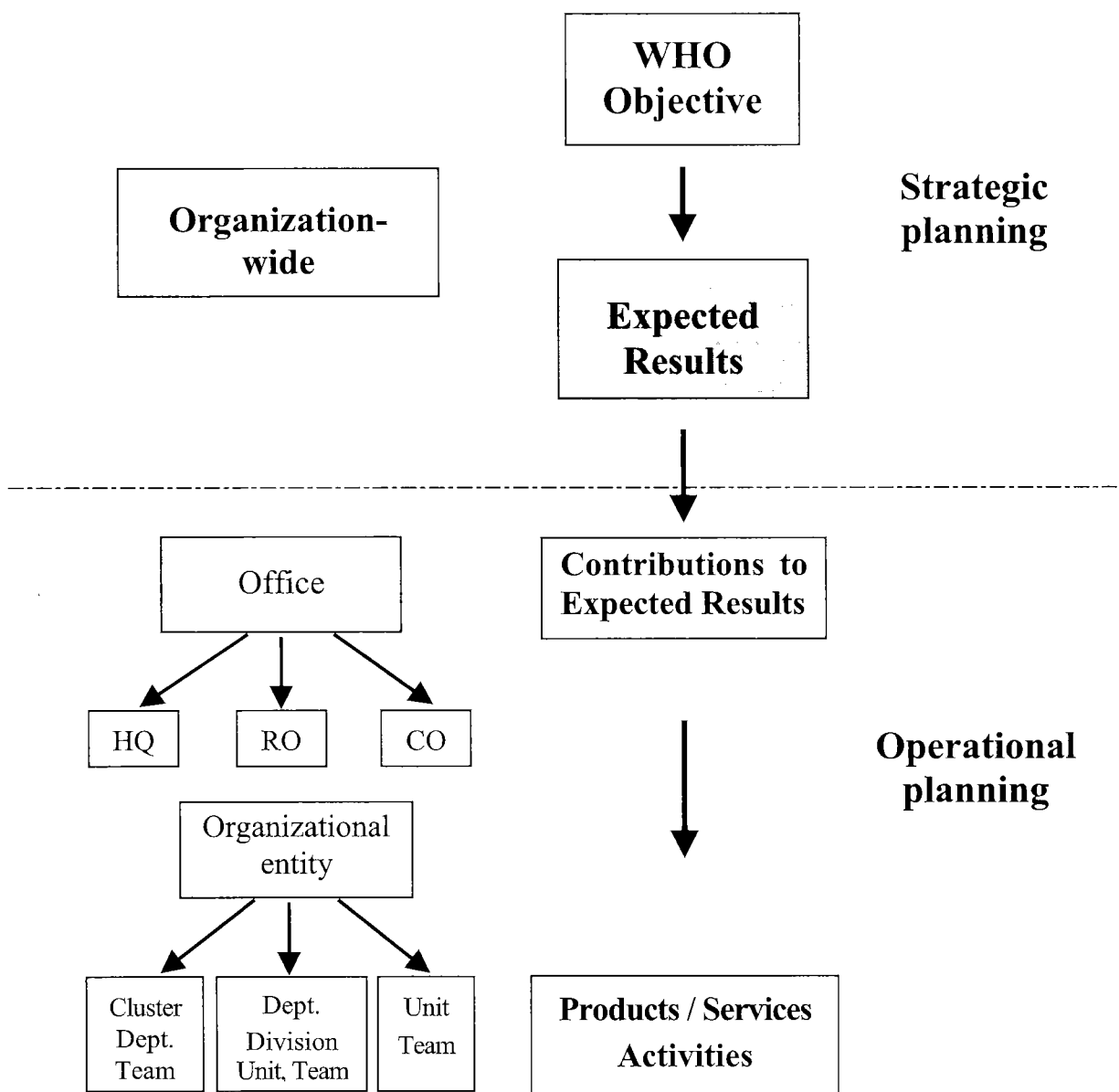
20. Expected Results are the **link between strategic and operational planning**. The starting point for operational planning is therefore the set of Expected Results stated in the Programme Budget and approved by the World Health Assembly. Each WHO office (country office, regional office, Headquarters) provides a detailed statement of its office-specific expected results towards achieving the relevant Organization-wide Expected Results as the basis for work planning and for assessing the performance of the office.

PART IV : COMMON REQUIREMENTS FOR OPERATIONAL PLANNING

21. While designed to accommodate needs at each level, operational planning across the Organization is based on common requirements.

22. Figure 2 illustrates the organizational level at which the various planning elements are defined.

Figure 2 : Planning framework and organizational structure



Content and structure of workplans

23. A *workplan* defines a *set of products and services*, with their associated **activities** and **resources**, to be delivered by an *organizational entity* such as a unit, division, department or country office. The purpose is to ensure that each office achieves its office-specific expected results, thus contributing to the Organization-wide Expected Results.

24. Workplans are developed in each office in accordance with its own **organizational structure**. Every organizational entity will prepare its workplan(s) for the whole biennium. To ensure their continuing usefulness as a management tool, workplans should be reviewed periodically and updated as necessary (see [paragraph 65-71](#)).

25. In the workplan, each product and service must be linked to one, and **only one**, office-specific expected result. Each office-specific expected result in turn is linked to one, and **only one** Expected Result in the Programme Budget. Each product or service may also contribute indirectly to other office-specific expected results or Expected Results.

26. Two or more organizational entities may support the same expected result. In this case, the AMS can be used to create a *composite workplan* to show the totality of the work planned towards a single Expected Result by different organizational entities.

27. Programme Budget 2004-2005 specifies eleven Organization-wide priorities³. If a product or service contributes to the achievement of an Organization-wide priority in any Area of Work, this must be indicated, to form the basis for assessing whether the priorities are being given sufficient attention.

28. One of the assumptions of workplan preparation is that the responsibilities and inputs from the Member States or external stakeholders should be confirmed at the time of implementation. At country level in particular, the results framework⁴ for WHO Secretariat should make explicit the relationship between WHO Secretariat resources and programme delivery, and outcomes to the beneficiaries. Related "*assumptions*" and "*risks*" should be stated at the planning stage.

Mandatory planning data and core data set for exchange

29. The set of data defined in [Table 1](#) is **mandatory** for all workplans⁵. In order to share and aggregate information and to support Organization-wide monitoring and reporting, a *core data set* for exchange is required across the Organization. This core data set is a subset of mandatory planning and monitoring data and will be accessible in the Organization-wide database⁶. Where applicable, mechanisms and tools for exchange of compatible data between a local system and the global system will be operated. Detailed specifications of the core data set are available in a separate document⁷.

³ See [Annex 4](#) "Priorities for the biennium 2004-2005" (EB109/19)

⁴ See "[Results-based management. Application of a Logical Approach to Managing Programmes in WHO](#)" (WHO/PME/02.3, December 2002)

⁵ Similarly, a set of mandatory data for monitoring has been defined. See "[Monitoring, evaluation and reporting. Guidance for 2002-2003](#)" (WHO/PME/02.5, October 2002)

⁶ See [Annex 2](#) "Core data set for the Organization-wide database"

⁷ "Organization-wide Monitoring and Reporting Data Base. Conceptual model"

Table 1 : Mandatory data to be provided in workplans

The reference of an office-specific expected result as the contribution of the office to a given Expected Result in the Programme Budget, establishes the link of a workplan to that Expected Result.

Office-specific expected result	Product or service	Activity
<ul style="list-style-type: none"> • title • description • responsible officer • partnerships (list of partners) • indicator • baseline and target (for each indicator) • approved budget by source of funds (RB, AS and XB) • total planned activity costs • total planned staff costs 	<ul style="list-style-type: none"> • title • description • reference to an office-specific expected result • responsible officer • reference to an Organization-wide priority (as appropriate) • beneficiary country (as appropriate) • scheduled dates (start and end) • milestone(s) • deadline for each milestone • planned costs (activity only) • approved budget by source of funds (RB, AS and XB) 	<ul style="list-style-type: none"> • title • description • reference to a product or service • responsible officer • beneficiary country(as appropriate) • scheduled dates (start and end) • planned costs

Budget planning

30. The Programme Budget 2004-2005 sets out budgets at the level of Area of Work. There is no budget breakdown at Expected Result level. Before preparation of workplans in each office, *tentative budget* allocations are communicated to all organizational entities for planning purposes (see [paragraph 45](#)). Allocations and budget planning should take into account both regular budget and anticipated extra-budgetary funds, including any raised locally.

31. Workplans are **approved with budgets** set at least at the level of product and service. Planned costs and *unmet needs* must also be indicated at the level of products and services. Expenditure will be reported at the end of the biennium against *approved budget*, and monitored by the organizational entities, at least at the level of product and service, against *working budget* and *planned costs*.

42. Figure 3 illustrates how the range of individual planning elements are articulated at Organization-wide, office and team levels. Figure 2 (page 8) complements Figure 3.

Figure 3: Planning stages and levels

