ARMM Health Research and Development Consortium

Strategic and Operational Planning Workshop

WORKSHOP PROCEEDINGS

as supported by the Philippine Council for Health Research and Development
Department of the Science and Technology

May 24-26, 2016 Badjao III, Garden Orchid Hotel Zamboanga City

2016-2020

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EXECUTIVE SUMMARY

The Strategic and Operational Planning Workshop was held at the Garden Orchid Hotel in Zamboanga City from 24th to 26th of May 2016. It was attended by 24 participants, which included the delegates from the various institutions, PCHRD officials and the secretariat.

This report describes the process of developing a five-year strategic and operations plan for ARMM Health Research and Development Consortium (AHRDC). The first part of the report highlights the setup of the workshop, welcoming remarks and an overview of health research and development setting in the Philippines as well as the relevance of sustaining a consortium in ARMM. This is followed by the formulation of AHRDC Vision, Mission, and Core values, which guided the next steps taken to identify strengths, opportunities, problems, and threats in health R&D community in ARMM, identification of current consortium focus, and ultimately the strategic and operations plan. The report includes the Workshop Participant List, and Workshop Program (Annexes A and B, respectively).

The overall result of the strategic planning, which were generated by the AHRDC delegates after a series of workshop sessions are as follows:

Vision and Mission

VISION

 A dynamic and responsive health research community committed to the attainment of the health goals of the ARMM

MISSION

 To generate and use knowledge, products and services in improving the health status of the people in ARMM

Core Values

Accountability

• We follow the principle of transparency by being responsible to our actions, plans to the consortium and to the people who we serve

Honesty and Integrity

- We perform our duties and responsibilities and relate with our members, partners and clients
- We are committed to make researches honestly. accurately with integrity to the best of our ability for the improvement of the health status of our constituents

Responsiveness

• We match and adapt our health research endeavor to the peculiar needs and demands of people in ARMM

Dynamism and Excellence

• We are dynamic in performing our duties to the people in ARMM

Cooperation and Commitment

- We work together to pursue the vision, mission and goals of AHRDC.
- We are sincere and dedicated to perform and act harmoniously towards a productive and quality service.

As part of the planning process, the participants were asked to identify and define their internal and external environments using the SLOC analysis (Strengths, Limitations, Opportunities and Challenges) and the PESTLE analysis (Political, Economic, Socio-cultural, Technological, Legal, Environmental), respectively.

The following key result areas and corresponding key performance indicators were identified:

Key Results Area	Key Performance Indicator
1. Increased participation of AHRDC members (including membership of health related NGOs, provincial hospitals, private academes and professional associations)	1.1 No. of committed member institutions attending meetings and/or AHRDC activities1.2 No. of mentoring activities within member institutions of AHRDC, e.g. twinning
2. Improved Good Governance	 2.1 Proportion of activities implemented over activities initiated, organized per committee 2.2 Percentage of established operational system which includes the financial management system (e.g. check and balance), communication system and sustainability plan 2.3 No. of functioning committees
3. Improved R&D programs responsive to current emerging needs	3.1 Percentage of implemented programs, e.g. Health and Halal, Health and Climate Change, and Health and Poverty, addressing RUHRA 3.2 Availability of updated Regional Unified Health Research and Development Agenda (RUHRDA) - previously RUHRA
4. Improved capacities of AHRDC members/parties and partners in health research	4.1 No. of researches submitted, approved, implemented, completed and published4.2 No. of trained researchers with publication
5. Improved research utilization and dissemination to concerned institutions/sectors/public	5.1 No. of health R&D results used as inputs in health policies and programs in ARMM5.2 No. of researches registered at Health Research and Development Information Network (HERDIN) and Philippine Health Research Registry (PHRR)
6. Increased resource mobilization for health R&D	6.1 Percentage of health R&D funded by partners sourced by AHRDC (e.g. 2% from DOH)

PROCEEDINGS

May 24, 2016 (FIRST DAY)

1.0 **Opening**

The planning workshop started with a prayer. Ms. Maria Belen Balbuena, regional project officer for ARMM Health Research and Development Consortium (AHRDC) commenced the meeting by welcoming the guests. She acknowledged the presence of the participants by mentioning the institutions they represented.

Dr. Norma Dalamban, Chief Science Research Specialist of the Technical Division, delivered her welcoming remarks and opening message in behalf of Regional Secretary Myra Mangkabung, Department of Science and Technology (DOST) in the Autonomous Region in Muslim Mindanao. She expressed her gladness towards the progress of the consortium. She also stated the importance of the meeting, as it will define the continuing process and partnership arrangement of the AHRDC and the group's continuing efforts for the local community.

She mentioned that the re-appointment of Regional Governor Mujiv Hataman might cause some changes in leadership of most institutions, which will affect the activity of the consortium. Nonetheless, she trusts that AHRDC will still be able to subsist adversity. She recalled that even the inception of the consortium had been tough as their scattered geographical location makes it difficult for them to be gathered. Nonetheless, with the help of the DOST Philippine Council for Health Research and Development (PCHRD) through the efforts of Dr. Jaime Montoya and Ms. Carina Rebulanan, assembling the R&D researchers, implementers, managers and users in the region had been possible. The problem in congregating was addressed by having cluster meetings in Zamboanga for institutions from the island provinces and in Cotabato/Davao for institutions from the mainland. She noted that through these years, there had been multiple changes in leadership of the institutions but the members, staff, and faculty remained to continue and support the activities of AHRDC. She asked the representatives to report to their heads immediately upon return and cascade information to others. Dr. Dalamban ensured PCHRD of the region's reciprocation, equal support to the consortium and its activities.

Ms. Carina Rebulanan, Chief of the Institution Development Division (IDD) of PCHRD, gave a brief background on the Philippine National Health Research System (PNHRS) to eventually present the PNHRS Strategic Map and Scorecard. She wishes the actual integration of AHRDC activities with the 5-year regional plan. She mentioned that all consortium-related actions are being supported by the PNHRS Republic Act of 10532, a framework that aims to unify in the R&D institutions; working closely with the pillars of PNHRS: DOH, CHED, DOST and UP Manila. There are six building blocks of PNHRS, also known as the organizational committees, namely: (1) Structure, Organization, Monitoring and Evaluation (2) Capacity Building, (3) Ethics, (4) Research Management, (5) Research Utilization, (6) Resource Mobilization committees. These national committees are projected and reflected in the 17

Regional Health Research and Development Consortia (RHRDC); soon 18 regions with the addition of Negros Island Region (NIR). AHRDC currently has 2 committees – Research Management and Ethics Committees. As there are specific projects led and run by each national committee, she encouraged the group to consider building a regional equivalent for Research Utilization and Capacity Building. This step might be beneficial in increasing the likelihood of the members to vie for grants from PCHRD that may amount as much as Php 500,000.00 for each research project.

She mentioned that the 2015-2019 PNHRS plan entails strategies that will be translated into actions. The map shows a logical step-by-step ways to address the PNHRS objectives with a financial to governance perspective flow. This plan sets the direction towards achieving the PNHRS Vision. She gave tips in how to formulate plans by presenting the strategic objectives and performance measures. She hoped for ARMM to do the following:

- 1. Align their researches to either the Regional Unified Health Research Agenda (RUHRA) or the National Unified Health Research Agenda (NUHRA).
- 2. Comply in putting data into the databases such as the Philippine Health Research Registry (PHRR) for on-going researches and the Health Research and Development Information Network (HERDIN) for completed researches. Using these databases in doing research may prevent researchers even students in making duplications
- 3. Pursue publication rather than just keeping research outputs in the library
- 4. Take the opportunity to join free trainings by PCHRD, e.g. for ethics Standard Operating Procedures (SOP), basic and advanced trainings, and
- 5. Widen the scope of the PNHRS. Do not limit its scope just in the urban areas.

Ms. Anicia Catameo, Supervising Science Research Specialist of IDD followed and gave a loaded review of RHRDC organizational structure, duties and benefits of member institutions. She also emphasized that the group can achieve more if they gain more partners and collaborators. She hoped that AHRDC become a true representation of the PNHRS in ARMM and be able to produce relevant research outputs that will not only be placed in the library shelves but as well as be translated into actions and policies. She believes that this meeting will be a step forward towards achieving better, more coordinated, more objective implementation of the AHRDC.

2. 0 Leveling of Expectations

Ms. Merle Pimentel, facilitator of the 3-day workshop expressed her great hopes for the group's progression after learning of the strong support given by the national government through the PCHRD.

She then asked the group to think of how they will answer the following questions: (1) "What do you want to achieve in this 3-day strategic operations planning workshop?" and (2) "What are you willing to contribute to attain the objectives of the workshop"?

Below are their responses:

NAME/INSTITUTION	GAIN	GIVE
1. Jeraphen Jikilula Statistician, Philippine Statistics Authority (PSA) - ARMM (attached agency of the National Economic and Development Authority)	My agency and job are not directly related to health. However, I hope to learn how I can be a productive member of this group.	I will give everything in my capacity.
2. Nursidar Mukatil Faculty, Mindanao State University (MSU)-Sulu	This early, I'd like to ask DOST-ARMM as the secretariat to send out letters to the heads and ask for the names of the permanent representatives. I hope that this activity will enable us to boost/intensify our works in the consortium, and devise/hatch up plans for human resource development.	I will share, be involved and participate.
3. Gafur Pasang Nurse, Essential Healthcare Program of DepEd Basilan	I hope to gain knowledge and understanding of the AHRDC.	I can give my cooperation and support in my own capacity including time and effort.
4. Marlon Garrigues R&D and Extension Representative and College Instructor, Upi Agricultural School Maguindanao	I see this activity as a way to strengthen the connection with PCHRD and the national government.	I will give my time and play the part.
4. Jeanette Alicaya Clinical Instructor, Notre Dame of Jolo College (NDJC)	Faculty development is a priority in the Notre Dame System. It is supported strongly by Notre Dame Jolo College. Hence, I hope to know more of PCHRD and its grants so I could access different activities especially training in publication writing.	I will share knowledge and give my 100% participation.

informed of the consortium's

trainings and scholarship

grants.

continue as the

consortium.

representative in this

12. Maridiza Martin

Nurse II, Dep Ed ARMM, Basilan Division

I hope to learn how to write proposals in health R&D for the benefits of my constituents. I am expecting that the output in this workshop will be relevant and clear.

I can give my untiring support and cooperation with love and interest.

13. Dr. Norma Dalamban

Chief, Technical Division of DOST ARMM

I am expecting a clear and implementable strategic operations plan.

I will always give my full support.

Response from Ms. Carina Rebulanan

- 1. The activities for the consortium are not intended for just one institution but for all of its members.
- 2. PCHRD always try to empower the regions to make their own plans. The regional consortium may still use the PNHRS plan as a guide.
- 3. PCHRD assures everyone that they will aid in the development of each program/project proposal.
- 4. There are a lot of awards provided by PCHRD such as for State Universities and Colleges (SUCs) and an undergraduate award. These grants will be informed to the regions through the consortium.
- 5. The invitation of the PNHRS Week, which will be conducted in August 10-12, 2016 in Palawan is on-going. There will be 10 delegates from each RHRDC namely: the chair, 4 committee chairs, 4 delegates for competitions and the regional project staff/secretariat.
- 6. Regarding the conduct of research projects especially invasive, there are clearances required to be obtained prior conduct, such as clearances from the Ethics committee, Bureau of Animal Industry, National Commission for Indigenous Peoples, and for flora and fauna from protected area, permits from the Biodiversity Bureau. Also, the reviews can either be expedited or full board review. List of functional research ethics committee are available in the PCHRD website. PCHRD thru the ARMM consortium will assist the researchers to identify and process request for ethics review.

Agreements

To enable realization of all their wishes for the planning workshop and hence, making the activity a success, the group agreed on the following agreements as assisted by Ms. Merle Pimentel:

1. Be open to newness. It is always best to challenge the status quo. 2. Time is of essence. Stay focused.

The objective of the activity is to produce a 5-year strategic plan and one-year operational plan. The group agreed to extend the meeting to accomplish the activity's intent and goals.

- 3. Expansion of ideas is good but keep it simple.
- 4. Keep it interactive. Ask questions. Clarify.
- 5. Plan "big". Nonetheless, be grounded with the treasures of time and resources. The group agreed to think big while ensuring that the outputs and aims are doable and within the timeframe. She also mentioned the importance of sending a permanent representative to avoid wasting of resources, efforts and time - to which the participants agreed on.
- 6. There are many pathways and options. It is not a one-fix solution. Ms. Pimentel suggested implementation of training needs assessment of the group as

individuals and as part of their institutions. This assessment must be aligned to a formulated program that will boost research capacity of individuals and allow them to apply gained knowledge immediately thru conduct of activities and researches.

7. Respect for diversity.

ARMM is composed of diverse cultures and hence, have distinct needs. The group is hopeful to explore on the different strategies to sustain the consortium.

- 8. Think unlimited. Think out of the box.
- 9. Always have a chillax mode.

Most participants during planning workshops have the tendency to lose focus as most adults have 5- to 7-minute attention span. Ms. Pimentel assured the group that she will try to energize the group in each section of the workshop to relax them.

10. Get focus on Deliverables.

The tentative deliverables of the workshop are as follows: (1) 5-year strategic plan (2016-2020) of the consortium, (2) one-year operational plan of the consortium and (3) review of the profile of each member-institution in terms of health research.

3.0 **Building the Team**

Two different activities were conducted before the actual Strategic Planning to better prepare the participants mentally and emotionally. Below are the details of the activities.

3.1 **Learning to Celebrate Differences**

The participants did the Celebrating Differences activity by answering the worksheet. The results are presented below:

Fruit	Number
Grapes	4
Oranges	5
Bananas	2
Melons	3
Grape and Orange	1
Grape and Banana	1
Total	16

Realizations

- 1. All have differences. These differences shouldn't become hindrances. Instead, it should complement one another's uniqueness.
- 2. Learning that people have weaknesses and strengths, the members should understand each other better and be able to adjust to each one.
- 3. Change can't be forced into other people. Change happens to people who decide to change.
- 4. With the knowledge that all people are not perfect, the expectations from each one are lowered and become factual.

The interpretation of the different fruits can be found in Annex C.

3.2. Team effectiveness: Changes I want to see and how will I effect the change

Discussion Points

There are three elements of teamwork, namely:

- 1. Relationships Advocate for AHRDC. Be a champion for health research.
- 2. Task Tasks should be clear and the members should be committed to accomplish the tasks.
- 3. Communication Identify easy and effective ways to coordinate among members, such as via text messages or by using Facebook

Ms. Pimentel reminded the group not to compromise their values such as cooperation, harmony, and commitment in every consortium activity. Synergy should be applied. Its formula, 1+1=3, offers win-win solutions.

Participants were divided into two groups, i.e. those coming from the academe as implementers and those from the local government units were grouped as the coordinators/support. The consolidated responses are presented below:

1. **Implementing group** (Notre Dame of Jolo College, Mindanao State University – Sulu, Upi Agricultural School Maguindanao)

	What are the changes I want to see in the organization?	How will I be effective the changes I want to see?
SELF	Strong advocacy for health research Expansion of knowledge/capacity by conducting health research both national and international levels	Access all relevant health research trainings Network with funding agencies

	Conduct of relevant health researches that will foster peace and development	Formulate and submit health research proposals for funding consideration
PARTICIPATION and REPRESENTATION	Active participation to the consortium's existing health research program	Enhance knowledge and skills in promoting health research
	Strong representation of other relevant institution to health research endeavors	Maximize or increase number of participants in every activity
	Each member institution submitting at least one proposal in a year	
PARTNERS	More institutions joining health research programs	Establish active linkages among member institutions
	Strong collaborative activities and/or research programs among member institutions	Develop collaborative health research programs that will encourage members to partake
		Provide regional experts for the conduct of capacity building activities
CONSORTIUM	Members playing active roles in the consortium	Optimize the submission of health research proposals for funding consideration
	Established regular communication and updating among members	Conduct regular committee meetings and update especially via social media consistently
	Established system in health research product utilization	Create health research utilization committee
		Pursue development of innovative products and technologies
SERVICES	Proposals developed are aligned to either national or regional health research agenda and thereby, addressing local health needs	Conduct consultative meetings with community/users and stakeholders

Provision of lab equipment that are accessible to all researchers	Propose establishment of necessary lab equipment in every province of ARMM
Research outputs are responsive to the needs and concerns of the locals	Conceptualize health research programs, which address local demands and needs
Strong Ethics Review Committee in every member institution	Produce or capacitate skilled researchers

PROGRAM STRATEGIES AREAS

Discussion Points

- 1. Mr. Audie Janea, VP for Research and Extension of Sulu asked the possibility of expediting the release of funds for regional activities. Ms. Rebulanan explained that while the region is responsible in initiating and planning the conduct of trainings, PCHRD facilitates the funds for the conduct of most trainings in ARMM. Thus, downloading of funds is not necessary. She reminded the group that they should request for the support of an activity approximately 2 weeks prior the target schedule in order to give time in processing of funds and invitation of resource persons for the activity to be conducted on time.
- 2. Ms. Rebulanan reminded the group that the grant given to beginning researchers amounting to Php 500,000.00 is the maximum amount —but not requiring that the grant actually be that high. This amount includes provision of lab instruments necessary for the conduct of the approved research project. Provision of camera and laptop should be a counterpart support of the implementing institution. Only those lab instruments amounting to Php 10,000.00 and above are considered equipment. She suggested conduct of mapping or profiling of resources, e.g. expertise and lab facilities, among members to make the resource sharing possible and for the researchers to access such lab facilities of other institutions within the consortium.
- 3. Ms. Lilian Macadupang, Health Research Coordinator from Department of Health shared that her agency is actually required to utilize 2% of their MOOE budget to health research activities. Ms. Rebulanan mentioned that this fund sharing with RHRDC is already being done in most regions, with some even using the DOH money to fund regional researches and trainings. Ms. Macadupang assured the discussion of this concern with the DOH-ARMM Secretary. She mentioned that the complementation of AHRDC activities with DOH-ARMM might result to revising the DOH-ARMM Work and Financial Plan (WFP) 2016. For 2017, AHRDC should be able to provide WFP as early as the 3rd quarter of this year, which may be funded by DOH-ARMM.
- 4. Ms. Macadupang also shared that DOH-ARMM has health facilities, which they offer for usage of other member institutions.

2. Coordinating/support group (DOST-ARMM, DOH-ARMM, DepEd-ARMM, DILG-ARMM, PSA-ARMM, Regional Planning and Development Office ARMM)

	What are the changes I want to see in the organization?	How will I be effective the changes I want to see?
SELF	Stable and constant communications system in informing members of updates	Use Social Media to inform members on current programs, activities and other opportunities available for researchers and research institutions (both for AHRC and PCHRD
PARTICIPATION and REPRESENTATION	Consortium members displaying strong commitment Encourage active participation of members	Formulate policies that will engage member institutions to send permanent representatives for each committee and express commitment by providing funding support during consortium activities Improve advocacy programs to boost culture of research
		among members
PARTNERS	Strong ties with funding agencies	Establish linkages with agencies which may be able to give financial support to the approved research proposals
CONSORTIUM	New institutions joining in the consortium	Orient potential new members about the consortium
	Strong ties among members	Create the capacity building and research utilization committees to aid in building research connections among members

SERVICES	Increased number of researchers trained	Provide local mentors
PROGRAM STRATEGIES AREAS	Published research outputs translated into policies and practices	Encourage member institutions to support their researchers in publishing research results and engage media in research advocacies

Discussion Points

- 1. Ms. Rebulanan noted that the optimal number of participants in every activity is 30 - not too little or too many as it may thwart learning due to lack of dynamic interaction and overcrowding, respectively.
- 2. The group is being encouraged by PCHRD to conduct collaborative researches. For example, the academe may work with other agencies such as NEDA, DSWD and hospitals to ensure that the community will utilize the research outputs. Through collaboration with line agencies, the users may also be engaged at the onset of the research so the researchers can adequately respond to their needs.
- 3. Utilization of research outputs through programs to the community may produce publications, patents, prizes, and policy enhancement (including formulation or revision of program guidelines) apt for the local needs. Policy guidelines and programmatic strategies result to an efficient, cost-effective and transparent utilization of resources.
- 4. Ms. Rebulanan stated that upon request, the PCHRD could fund oral paper presentations whether in national or international competitions as long as the individual who will be sponsored is the main author and the study is peer-reviewed and funded by PCHRD/consortium.
- 5. Members should be the primary promoters of AHRDC in the regional and local levels. PCHRD and the PNHRS pillars are only considered support groups.

Realization

The members should be responsible for all operations and activities of the consortium and not just rely on others.

4.0 **Strategic Planning**

Strategic planning is a process by which the organization identifies and discusses key organizational issues, analyzes its environment, determines its priorities, and maps out a medium term future (usually 3-5 years).

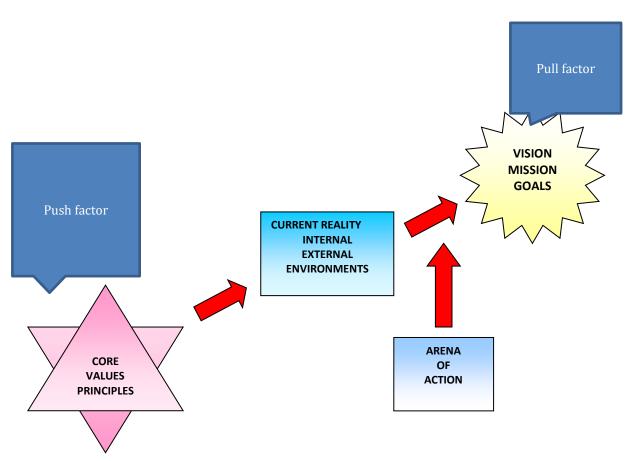
Why is there Strategic Planning?

Strategic planning is important in (1) affirming the relevance of the organization, (2) enabling AHRDC to apply best practices and value the learning from the past, (3) clearing future thinking of AHRDC members by looking into the effects and efforts needed from internal and external environment stakeholders and (4) transform vision into actions.

Purpose of Strategic Planning

- To assist an organization in establishing priorities and to better serves the needs of its constituency.
- A strategic plan must be flexible and practical and yet as a guide to implementing programs, evaluating how these programs are doing, and making adjustments when necessary.
- A strategic plan must reflect the thoughts, feelings, ideas, and wants of the developers and mold them along with the organization's purpose, mission, and regulations into an integrated document.
- The development of a plan requires much probing, discussion, and examination of the views of the leaders who are responsible for the plan's preparation.

Strategic Planning Framework



5.0 Formulate the Core Values, Vision, and Mission of AHRDC

5.1 **Core Values**

- Value statements are developed from the members' values and define how they want to behave with each other in the organization.
- The organization's value statements provide a measuring device against which they evaluate all of their actions and behaviors. The value statements give words and meaning to the values that the group decides to live by daily.
- Value statements are declarations about how the organization will value customers, suppliers, and the internal community.

Workshop

Participants were asked to write their top 3 values. The responses are written below:

Responsible Timeliness Integrity Confidence **Cultural Sensitivity** Resourcefulness Commitment Teamwork Cooperation Honesty Accountability Responsiveness Excellence Commitment Dynamism

The group agreed to style the values in an order based on the consortium's abbreviation, AHRDC, i.e. Accountability; Honesty and Integrity; Responsiveness; **D**ynamism and Excellence, and **C**ooperation and Commitment.

Task

The group was asked to discuss among themselves during their free time, the value statements for the top values.

On the third day of the workshop, the group presented behavioral terms of AHRDC Core Values as follows:

Accountability

We follow the principle of transparency by being responsible to our actions, plans to the consortium and to the people who we serve.

Honesty and Integrity

We perform our duties and responsibilities and relate with our members, partners and clients

We are committed to make researches honestly, accurately with integrity to the best of our ability for the improvement of the health status of our constituents

Responsiveness

We match and adapt our health research endeavor to the peculiar needs and demands of people in ARMM

Dynamism and Excellence

We are dynamic in performing our duties to the people in ARMM

Cooperation and Commitment

We work together to pursue the vision, mission and goals of AHRDC. We are sincere and dedicated to perform and act harmoniously towards a productive and quality service.

5.2 Vision

- A vision is a statement about what the organization wants to become. It should resonate with all members of the organization and help them feel proud, excited, motivated, and part of something much bigger than themselves.
- A vision should stretch the organization's capabilities and image of itself. The vision gives shape and direction to the organization's future.

In a panel discussion led by Ms. Pimentel, the group agreed on the vision statement as follows:

VISION

A dynamic and responsive health research community committed to the attainment of the health goals of the ARMM

5.3 Mission

Mission or Purpose is a precise description of what an organization does. The mission should describe the business the organization is in. The mission is a definition of why the organization exists currently.

Plenary

Why does AHRDC exist?

- To provide R&D outputs in addressing health needs and improving health status of clients - women, children and all constituents in ARMM
- For the researchers and users alike to have a greater access to resources in terms of health research

After the discussion with the whole group, the agreed mission statement is as follows:

MISSION

To generate and use knowledge, products, and services in improving the health status of the people in ARMM

May 25, 2016 (SECOND DAY)

6.0 Reflection

To start the second day of the planning workshop, the participants were asked to choose the color, which represents their experience of day 1.

Below are the responses of the group, to which Ms. Pimentel responded and wished for all their learning to be put into practice:

YELLOW	RED	BLUE	GREEN
YELLOW Yellow represents transparency and enlightenment. We were enlightened with the purpose and goals of AHRDC as were able to come up with a clear vision and mission and are now expecting for quality outputs.	We felt in yesterday's activity the empowerment. We need courage in order to face the obstacles and difficulties in terms of making health researches and courage for us to stand firm as mandated by the vision and mission that we created. We need to have bravery in order to assert to our heads that "this" or "that" should be done for	Blue represents vastness, unlimited horizon, and freedom to choose topics that can address the needs of the people we serve in ARMM. It also represents futuristic yet realistic qualities. We try to provide answers to questions like what can we do from now on, etc. There is a new window/ vast	GREEN For us, green represents life and growth of AHRDC. From this time on, we will grow as we agreed on. Green also represents that we are now SET TO GO for the health benefits of all the ARMM constituents.

7.0 SLOC (Strengths, Limitations, Opportunities, Challenges) Analysis

Various complementary analyses to SLOC have been proposed to understand internal and external environment factors, such as the internal analysis and the PESTLE (Political, Economic, Socio-cultural, Technological, Legal, Environmental) analysis. The guide used for the group discussion is shown below:

Strengths (Internal)	Opportunities (External)
We want to maintain and	We want to invest in opportunities.
leverage strengths.	
Weaknesses (Internal)	Threats or Challenges (External)
We want to minimize	We want to identify threats or challenges
weaknesses.	that need to be addressed and
	understand their potential impact

7.1 Internal Analysis

The internal analysis of the organization should include its culture, expertise/people, resources/structures, and tasks/services. The extent to which the organization could adapt to changing circumstances is also a factor that needs to be considered.

Below are the group's outputs:

Internal Environment Assessment: Assessment encompasses organizational assets, resources, people, culture, systems, partnerships, and suppliers

Areas	Strength	Limitations
People	The consortium members have varied expertise, technical skills and knowledge in research, technical writing.	There's non-continuity of representation and thus, some new breeds lack technical knowledge on research.
	Most members are exposed to many health research activities since ARMM is a frequent subject to many health researches/surveys (e.g. field, WHO/DOH). With a diverse background, AHRDC members can easily blend/work together in harmony.	There's geographical inaccessibility in most areas and even local researchers fear for their security. While most members are exposed to health research and surveys, there's still limited specific R&D trainings for members to participate in. The members of the AHRDC are located dispersedly.
Task	Members are considered competent in networking and have basic knowledge of target clients/constituents.	There are a lot of grey areas in the task of AHRDC. Also, most members have multiple responsibilities that require their full attention that leaves the consortium with nothing.
Organization System/Structure	There's diversity in the group and all are well represented, e.g. academe, line agencies.	There is no focal group to facilitate, manage and monitor the implementation of AHRDC.

		There is limited budget for the conduct of activities. There is no institutional awareness among members as well as no public awareness programs for advocacy.
Organization Culture	The key officials are committed to support the AHRDC activities. There is a strong support from DOST-ARMM and DOH-ARMM to AHRDC.	The consortium became very dependent to PCHRD support. Hence, the accountability of each member is not well defined.

7.2 PESTLE (Political, Economic, Socio-cultural, Technological, Legal, Environmental) Analysis

The guide used for the group discussion is shown below:

PESTLE Factors	
Political	Political factors refer to the stability of the political environment and the attitudes of political stakeholders or activities.
Economic	Economic factors represent the wider economy so may include economic growth rates, levels of employment and unemployment, costs of raw materials such as interest rates and monetary policies.
Socio-cultural	Socio-cultural factors represent the culture of the society that an organization operates within. They may include demographics, age distribution, population growth rates, level of education, distribution of wealth and social classes, living conditions and lifestyle.
Technological	Technological factors refer to the rate of new inventions and development, changes in information and mobile technology, changes in internet, and government spending on research. There is often a tendency to focus Technological developments on digital and internet-related areas, but it should also include new methods of R&D, distribution and logistics.
Legal	Legal factors are inevitably entwined with political factors such as national laws, international trade regulations and restrictions.
Environmental	Environmental impacts can include issues such as limited natural resources.

External Environment Assessment: Marketplace, competitor's social trends, technology, regulatory environment, and economic cycles (those elements the organization can't control)

Areas	Opportunities	Challenges
Political	The progressive political leadership might be beneficial to the consortium as the appointed Regional Governor has health research as one of his main agenda.	There is a turbulent political climate for most ARMM provinces. For LGUs, health is a low priority.
	In the prospect of Federalism, LGUs will be empowered.	
	ARMM has friendly linkages with strong Arab countries which may give support for R&D.	
Economic	In the onset of new national leadership, employment rates may boost.	There's a continuing mass poverty in the region.
	ASEAN integration may open a	There is a high rate of underemployment in ARMM.
	lot of opportunities for local researchers.	Aside from conflicts, ARMM is also prone to disasters.
Social	ARMM is composed of varied tribes and indigenous people. This cultural diversity can led to creative solutions, thereby may have high potential in producing multidimensional prospect for research.	Cultural diversity can also lead to conflict.
Technology	There's a limited internet connection in most areas in ARMM. This situation makes it hard for members and users to access information.	Most cities in Mindanao experience power shortage. ARMM experienced worse than these urban cities with more than 12-hour blackouts.
Legal	There's political will in regional level to implement legislation.	Weak implementation of policies hampers progress in R&D.

Environment/ Industry

More labor force will be needed in ARMM in the next vears.

There are available intensive labor trainings.

Labor force is available.

Discussion Points

- 1. Ms. Pimentel pointed out that the Memorandum of Agreement (MOA) is not operational. It should be defined by putting it into mechanisms. The consortium should review coming up of AHRDC manual operations to look at the peculiarities of the region.
- **2.** The group discussed on looking into forming an executive committee who can decide in the daily operations of the consortium for the time being as they are still studying how they can formulate their own Manual of Operations.
- 3. Ms. Anicia Catameo mentioned the plan of the PNHRS SOME to create a main frame for the PNHRS Manual of Operations. Although, they are allowing the Metro Manila Health Research and Development Consortium (MMHRDC) to pilot for the whole country. She mentioned Regions II, VI, VIII and XI as those consortia that have previously formulated their local manual of operations. She also said that upon getting permission, the group could borrow manual of operations from other regions in the formulation of their regional operational manual. Ms. Balbuena shared some contents and outline of the manual of operations prepared by the MMHRDC. The group eager to see the whole manual of operations so they could be guided in drafting the AHRDC manual was advised to request from MMHRDC to provide them with a copy of this manual. Their request will be facilitated by PCHRD.
- **4.** Ms. Pimentel suggested that it might be best to create a management group who will focus on making the operational manual as there are a lot of aspects to be considered in preparing the manual.
- 5. Regarding minimal awareness of the members on the consortium's activities, the group agreed that it is necessary to keep the website up-todate. Ms. Nadjiyah Sinarimbo reported that she can't access the website due to lost password which was not divulged to her by the former regional project staff. Ms. Balbuena proposed to facilitate getting of new password for the AHRDC secretariat from PCHRD - Information Technology Unit. She also suggested that in the meantime, the uploading of news could be coursed through her. Ms. Catameo encourage uploading of health research news and activities by individual member institutions, even if it is not an activity of the AHRDC. Ms. Catameo added that most consortia maintain a Facebook group. Ms. Sinarimbo assured the group that a Facebook community for AHRDC will be created within the week.
- **6.** Ms. Catameo reinforced the importance of profiling the expertise and lab facilities of each member institution for information/resource sharing.

8.0 Strategy/Objectives/Formulation per Key program area

The participants were asked to formulate the consortium's strategic direction by formulating strategic goals/major strategies and activities and performance indicators/outcomes.

In this session, they were asked to think of strategies that will allow each member to:

- 1. Take advantage of opportunities
- 2. Reduce the challenges
- 3. Defend against threats
- 4. Build on organizational weaknesses
- 5. Offer some basis for future competitive advantage

Considering the results of the SLOC Analysis, the group identified that most concerns are related to governance. Governance involves strategic direction and policy. Ms. Pimentel outlined the interrelated responsibilities of governance:

- 1. Establishing and implementing AHRDC's mission and vision
- 2. Setting the rate of progress the consortium takes in accomplishing its mission and vision
- 3. Providing continuity for the management and implementation of the AHRDC's activities
- 4. Securing community support for all aspects of AHRDC.

Governance, or directing, is different than managing. Management focuses on the present and covers planning, leading/taking responsibility, organizing, and controlling (financial/program monitoring). While governance also covers management, it includes promoting a cause and focuses on the future. Governance leads the advisory group to explore options and establish long-term goals and plans.

Through good governance, the advisory group delegates authority and responsibility to management group and staff for day-to-day activities. Governance creates goals and ensures that the proper organizational structure of management, systems and people is in place to achieve those goals. At the same time, governance requires that the structure maintain the AHRDC's integrity, reputation and responsibility to its stakeholders.

The following table outlines the strategic objectives to be delivered in the year 2016-2020. The strategic objectives draw on the PNHRS Strategy Map and Plan 2015-2019. The table outlines the key result areas, key performance indicators and the target outcomes.

Key Results Area	Key Performance Indicator	2016	2017	2018	2019	2020
1. Increased participation of AHRDC members (including membership of health related NGOs, provincial hospitals, private academes and professional associations)	 1.1 No. of committed member institutions attending meetings and/or AHRDC activities 1.2 No. of mentoring activities within member institutions of AHRDC, e.g. twinning 1.3 Percentage of resources (e.g. expertise, lab instruments) shared among members of AHRDC 	Baseline -	-	-	90%	90%
2. Improved Good Governance	2.1 Proportion of activities implemented over activities initiated, organized per committee	Baseline	100%	100%	100%	100%
	2.2 Percentage of established operational system which includes the financial management system (e.g. check and balance), communication system and sustainability plan	Baseline	(accurate, timely submission of financial reports)	3070	3070	1070
	2.3 No. of functioning committees	4 committees	6 committees	6 committees	6 committees	6 committees
3. Improved R&D programs responsive to current emerging needs	3.1 Percentage of implemented programs, e.g. Health and Halal, Health and Climate Change, and Health and Poverty, addressing	Baseline	60% of RUHRA	70% of RUHRA	80% of RUHRA	100% of RUHRA

	RUHRA		addressed	addressed	addressed	addressed
	3.2 Availability of updated Regional Unified Health Research and Development Agenda (RUHRDA) - previously RUHRA	Revisit				
4. Improved capacities of AHRDC members/parties and partners in health	4.1 No. of researches submitted, approved, implemented, completed and published	Baseline	3	3	4	4
research	4.2 No. of trained researchers with publication	Baseline	1	1	2	2
5. Improved research utilization and	5.1 No. of health R&D results used as inputs in health policies and programs in ARMM	Baseline	1	1	2	2
dissemination to concerned institutions/sectors/public	5.2 No. of researches registered at Health Research and Development Information Network (HERDIN) and Philippine Health Research Registry (PHRR)	3	3	3	4	4
6. Increased resource mobilization for health R&D	6.1 Percentage of health R&D funded by partners sourced by AHRDC (e.g. 2% from DOH)	Baseline	2%	5%	10%	15%

The group discussed possible activities per Key Result Area (KRA) and matched corresponding output indicators, time frame, responsible agencies/ committees and estimated cost. This strategic plan is shown in Annex D.

Discussion Points

- 1. The group hyped in increasing the no. of AHRDC membership to include NGOs in health, private academe, government hospitals, professional associations. The group is very interested in engaging doctors and healthcare practitioners that do research and implement health R&D projects.
- 2. The group defined the AHRDC membership as any public or private institution in ARMM, which has the intent, capability, resources to undertake, or advocate/promote health research and related development activities.
- 3. Reg. Sec. Mangkabung would like to initiate lobbying of the creation of R&D office or unit in each institution through DepEd and CHED ARMM. She trusts that by the creation of R&D units per member-institution this will aid in the resource mobilization and communications within the consortium.
- 4. Reg. Sec. Mangkabung proposed branding of trainings. She suggested giving a course name to the trainings in research management.
- 5. For the profiling of experts and facilities of each member institution, the group agreed to give DILG the responsibility of designing the evaluation form.
- 6. Reg. Sec. Mangkabung believes that member-institutions should give counterpart financial support in sustaining the activities of the consortium. The counterpart can be provision of travel funds of their representatives during meetings/trainings.
- 7. The group agreed to hold a Logo contest. Members will be asked to submit logo proposals with high-resolution image and description of logo until June 16, 2016. The winners will be declared the following day on June 17, 2016. Prize will be provided by DOST-ARMM and DOH-ARMM, which will amount to Php 20,000.00 (Twenty Thousand Pesos).

May 26, 2016 (THIRD DAY)

9.0 Organizational Structure of AHRDC

Ms. Sinarimbo, regional project staff of AHRDC presented the current organizational structure of AHRDC as follows:

REG. SEC. MYRA MANGKABUNG, DOST- ARMM CHAIR VICE CHAIR REG. SEC. KADIL SINOLINDING, DOH- ARMM

RESEARCH MANAGEMENT COMMITTEE

1. DR. TATO USMAN, Chair

MS. ELOISA USMAN, alternate representative

2. DIR. DAUD LAGASI, Vice-Chair

MR. ABDUL NASEEF ULONG, alternate representative

- 3. MS. SAKURA ABDURAJI
- 4. MS. MERLITA TRESPECIOS
- 5. MS. ARVIE ARRIETA

- Department of Health (DOH) ARMM
- DOH ARMM
- Department of Agriculture and Fisheries-ARMM
- DAF-ARMM
- Notre Dame of Jolo
- Upi Agricultural School Maguindanao
- Mahardika Institute of Technology,

Tawi-Tawi

ETHICS REVIEW COMMITTEE

1. DR. SHARIFA PEARLSIA ALI-DANS, Chair - DILG ARMM

2. MS.AHME DEE SENDAD, Vice-Chair - Regional Planning Division Office

3. MS. ANISA MATUAN - DOH ARMM

- Department of Labor and Employee -ARMM 4. MR. AMRON CAYE

5. MR. JOHNNY EVANGELISTA - DOST-ARMM

SECRETARIAT

1. MS. RAMLA LANTONG - DOST- ARMM

2. MR. JOHNNY EVANGELISTA - DOST- ARMM

3. MS. NADJIYAH SINARIMBO - DOST- ARMM

Ms. Balbuena gave a brief presentation on roles of committee members. Reg. Sec. Mangkabung assured the group that they would attach a copy of this document to the Memorandum Circular from Regional Governor, which they will farm out Memorandum Circular creating an R&D unit/committee in each institution. The attachments will help the members to clearly share this information to their heads and other concerned officials and researchers. Ms. Balbuena further presented the following PCHRD – Capacity Building Programs:

1. MD-PhD and MS programs

PCHRD supported scholarship programs for MS/PhD to sustain much needed health research human resource. PCHRD's participation to the Accelerated Science and Technology Human

Resource Development Program (ASTHRDP) is by way of evaluating applications and monitoring progress of the qualified scholars under the health sciences category.

The program aims: (1) To help improve the country's global competitiveness and capability to innovate through alternative approaches on HRD in S&T and (2) To accelerate the production of high-level human resources needed for S&T activities particularly in the area of R&D.

2. Alberto G. Romualdez Jr. Outstanding Health Research Awards (AROHRA)

PCHRD, with PNHRS partners, gives this award every 2 years to an individual researcher or research group whose research work has been translated to policy and practice. The award is given in two categories: biomedical and health services research.

3. <u>DOST-PCHRD-Gruppo Medica Award for Outstanding Undergraduate Thesis in Herbal Medicine</u>

This award is given to undergraduate students engaged in herbal medicine research. It is awarded to studies that have potential for practical or commercial applications. The award provides motivation for students to view undergraduate thesis not merely as an academic exercise, but as an excellent opportunity to contribute to the national agenda.

4. Best Mentor in Health Research Award

This bi-annual search recognizes and rewards vital contributions of mentors in health research. Awards are given to four cluster winners from Luzon, Visayas, Mindanao, and National Capital Region and one national winner.

5. Balik Scientist Program

This program seeks to encourage highly trained overseas Filipino scientists and technologists, experts, and professionals to return to the Philippines and share their expertise for the acceleration of the scientific, and economic development of the country.

Ms. Merle Pimentel stressed the importance of giving out copy of all the mentioned programs so that the members can integrate these with their institutional and consortium plans. PCHRD committed to send out copy to the institutions thru the AHRDC secretariat.

Discussion Points

- 1. Reg. Sec. Mangkabung highlighted that all heads of the member institution are considered members of the General Assembly or Advisory Group. She also noted the need to reorganize the committees and include Research Utilization (RU), and Capacity Building Committees (CBC) by September 2016 and Resource Mobilization (RM) and Structure, Organization, Monitoring and Evaluation (SOME) Committees by 2017. She wants the assessment of all the members of the committees. She deems it necessary to define the composition, tasks and the basic special competencies of the members of the committees. Ms. Pimentel pointed out that for Ethics Committee there is a standard criterion for the composition set by the National Ethics Committee. For example, the committee should include a religious leader, lawyer, layman, etc.
- 2. Reg. Sec. Mangkabung stressed that ARMM is autonomous and distinctive to most regions but will make it a point to complement with the structures set by PNHRS. The structure will definitely be based on the needs of the region. For example, the research management/ R&D

- committee will be divided per topic, e.g. Food, Climate Change, Medicine, etc. or the committees being equally represented by 2 mainland provinces and 3 island provinces.
- 3. Reg. Sec. Mangkabung sees that getting a lot of relevant institutions on board is possible. She illustrated Executive Order on Halal as an example where all line agencies are actively partaking to and conducting activities related to Halal. She hopes to engage hospitals, nongovernment organizations and professional associations soon. She also mentioned inviting DILG's police and army groups.
- 4. Reg. Sec. Mangkabung expressed the challenge in funding that they are currently confronting. She shared that their partnership in Philippine Council for Agriculture, Aquatic and Natural Resources Research and Development (PCAARRD) had been very smooth as the funding is directly downloaded to DOST-ARMM. Unlike PCAARRD, PCHRD does not provide money for operations. PCHRD gives money only for researches. Pooling of resources and imposing membership fee to AHRDC members could be a possible solution to this challenge.
- 5. Reg. Sec. Mangkabung shared that the clinic in DOST ARMM is being converted to AHRDC room.
- 6. The group requested for a copy of all the laws and other legal documents affecting the consortium's operations and activities from PCHRD.

10.0 Schedule

This session guides the participants to devise a schedule of activities for the first 3 months of the second half of 2016 based on the strategic goals/major strategies, activities and performance indicators/outcomes agreed.

TARGET MONTH	TARGET ACTVITIES	RESPONSIBLE AGENCIES/COMMITTEES
JUNE	 Set up an AHRDC office room at ARMM DOST with staff (PS) 1.1 DOH also committed another staff for	c/o DOST ARMM and DILG
	2. Farm out a Memorandum regarding request for institutions to create R&D unit c/o DOST ARMM	
	3. Define the composition, tasks and the basic special competencies of the members of the committee led by DOST ARMM	
	3.1 send copy of laws and other legal documents c/o PCHRD	
	3.2 Logo Competition (Award c/o DOH- ARMM)	
	3. Design of Evaluation Tool for the Profiling and TNA of member institutions c/o DILG Profiling of	

Member 4. Submission of 6 month Operations/Action Plan to PCHRD – 1st week of June, c/o DOST ARMM JULY Conduct of members: Profiling/TNA (mapping) DILG **AUGUST** GA Assembly 1st week

Discussion Points

- 1. Reg. Sec. Mangkabung committed for DOST-ARMM to prepare a more comprehensive Gantt chart from June to December 2016 with a corresponding budget in the first week of June. DOST-ARMM, DOH-ARMM and PCHRD will have to discuss on the preparation of the Gantt chart.
- 2. Reg. Sec. Mangkabung perceived that the current delegates could not compel their heads to make a commitment to AHRDC as most are representatives of the focal persons. For continuity, she suggested those who are willing to continue on taking part in consortium activities and to be champions and advocates for research to make it known to the AHRDC secretariat so that AHRDC could facilitate this information to the respective heads and request their institutions to make them permanent focal persons or official alternates.

11.0 Closing

Regional Secretary Myra Mangkabung, Chair of AHRDC and Regional Secretary of the DOST-ARMM thanked the group for their active participation during the strategic planning workshop. She's happy that despite the hectic schedule of everyone they were still able to push through with the event. She showed her gratitude in tokens to PCHRD officials and Ms. Merle Pimentel for aiding AHRDC to set their directions.

She continued that ARMM is a melting pot of different tribes, religious attributions and rich cultures such as Yakan, Maranao, Kalagan, and etc. Even in diversity, they still share one regional direction set by the Regional Governor. The consortium should always align its activities and works with the priorities set by Regional Governor Mujiv Hataman to make sure that the consortium's efforts will have an impact in the region.

Reg. Sec. Mangkabung suggested the following 3 main programs to focus on:

1. Poverty as related to health

It is alarming that while most provinces of ARMM are improving, 2 are still considered the poorest in the country. Sulu and Maguindanao are pulling the region down with the drastic change in statistics, which increases the incidence of poverty. AHRDC

2. Climate Change as related to health

Maternal and child health is compromised due to a lot of displacements happening in the region due to natural disasters. Aside from problems in food security, infectious diseases and rapid mutation of viruses threatens the health of most locals. Other than that it is said that the pacific area will be the first one to be affected as the temperature of the world increases.

3. <u>Halal as related to health</u>

Halal is the current trend in most Muslim countries. As the ASEAN integration takes effect, ARMM should take this as a very good opportunity to take advantage of the open market to any countries. Halal is a way of life as it represents more than ethics.

She shared that as the election period had come to an end, all constituents of ARMM now share one color. She encouraged everyone to continuously learn. They should open themselves to learning every time especially to research.

She once again thanked the participants and their heads for making the event possible. She will try to push in making the participants permanent representatives so they can experience the full benefits of becoming a member in the AHRDC.

She shared that she already rendered her resignation effective June 30, 2016. However, she still hopes to be retained in DOST-ARMM so she could continue the works she initiated in AHRDC. Nonetheless, even without her presence, she is positive that as AHRDC is an autonomous body, it will definitely take off. It is not dependent to one person or one department. She highlighted the need to motivate the agencies and members to be part of the consortium. She wants all members to ask everyone to be on board and be proactive. She added that everything begins once they take the risk and encourage everyone to move forward together.

R&D is still not a part of the region's priority but if the AHRDC can lobby for the creation of R&D unit in every institution, they could effect change not just in the region but as well as in the world. "Let's go global and not just local!" she ended.

ANNEXES

A. Workshop Participant List

No.	Name	Designation	Institution
1	Jeanette Alicaya	Clinical Instructor	Notre Dame of Jolo
1	Jeanette micaya	Giffical first actor	College (NDJC)
2	Gafur Pasang	Nurse	Essential Healthcare
-	Gurar rasang	Traise	Program of DepEd Basilan
3	Nursidar Mukatil	Faculty	Mindanao State
	Training Training	lacarey	University (MSU)-Sulu
4	Marlon Garrigues	R&D and Extension	Upi Agricultural School
1	Figures duringues	Representative and	Maguindanao
		College Instructor	Magamaanao
5	Jacerna Tarnate	College Instructor	Upi Agricultural School
	Jacerna Farnace	Conege mistractor	Maguindanao
6	Magna Anissa Hadudini	Clinical Instructor and	MSU Sulu
	Magna /missa madaumi	Chairperson	14150 Sulu
7	Lilian Macadupang	Nurse V and Health	Department of Health
/	Linan Macadupang	Research Coordinator	ARMM
		Nestai cii cooi uillatoi	AKWIW
8	Ahme Dee Sendad	POI	Regional Planning and
	7 mile Dec Schaad		Development Office
			ARMM
9	Noronisa Macadadaya	Provincial Statistics	PSA-Provincial Office
	Not offish Macadady a	Officer	1 511 1 10 vinetar office
10	Audie Janea	VP for Research and	Sulu State College
	Tradic Janea	Extension	Sura State donege
11	Maridiza Martin	Nurse II	Dep Ed ARMM, Basilan
		Transo II	Division
12	Jeraphen Jikilula	Statistician	Philippine Statistics
	,,		Authority (PSA) - ARMM
			(attached agency of the
			National Economic and
			Development Authority)
13	Tohammi Abas	Local Government	Department of Interior
		Operations Officers II	and Local Government
		1	ARMM
14	Numiery Said	Local Government	Department of Interior
		Operations Officers II	and Local Government
		1	ARMM
15	Regional Secretary	Chair	AHRDC and DOST-ARMM
	Myra Mangkabung	-	
16	Dr. Norma Dalamban	Chief, Technical	DOST ARMM
=		Division of	
17	Nadjiyah Sinarimbo	Science Research	DOST ARMM
		Specialist II	
18	Marinell Mabazza	Project Assistant I	DOST ARMM
19	Munir Mutalib	Executive Assistant	DOST ARMM
20	Carina Rebulanan	Chief, Institution	Philippine Council for
		Development Division	Health Research and
		2 cvelopinelie Division	Development
L	I	1	Development

21	Anicia Catameo	Supervising Science	Philippine Council for
		Research Specialist	Health Research and
			Development
22	Maria Belen Balbuena	Science Research	Philippine Council for
		Specialist II	Health Research and
			Development
23	Merle Pimentel	Facilitator	
24	Sheryl Joyce Grijaldo	Documenter	

B. Workshop Program

Day 1

- Opening
 - o Welcome Remarks
 - o PNHRS Strategy Map and Plan 2015-2019
 - o RHRDC Organizational Structure
- **Leveling of Expectations**
- **Building the Team**
 - o Learning to Celebrate Differences
 - o Team Effectiveness: Changes I want to see and How will I effect the change
- Strategic Planning
- Formulate the Vision, Mission and Goals of AHRDC
- Develop the Core Principles or Values of AHRDC

Day 2

- Assess the internal and external environments of the organization
 - o Internal Environment (People, task, organizational system/structure/financial, organizational culture/leadership)
 - External Environment (Political, Economic, Legal, Social, Industry,)
- Formulate AHRDC strategic and operational plan

Day 3

- Develop organizational structure •
- Plot schedule for 2016

C. **Celebrating Differences Material**

Read across each row and place a 4 in the blank that best describes you. Now place a 3 in the blank for the second word that best describes you. Do the same for the final words using a 2 and a 1. Do this for each row. See example below:

Imaginative	3	Investigative	4	Realistic	1	Analytical	2
COLUMN 1		COLUMN 2	·	COLUMN 3		COLUMN 4	
Imaginative		Investigative		Realistic		Analytical	
Adaptable		Inquisitive		Organized		Critical	
Relating		Creating		Getting to Point		Debating	
Personal		Adventurous		Practical		Academic	
Flexible		Inventive		Precise		Systematic	
Sharing		Independent		Orderly		Sensible	
Cooperative		Competitive		Perfectionist		Logical	
Sensitive		Risk – Taking		Hard – Working		Intellectual	
People – Person		Problem Solver		Planner		Reader	
Associate		Originate		Memorize		Think Through	
Spontaneous		Changer		Wants Direction		Judger	
Communicating		Discovering		Cautious		Reasoning	
Caring		Challenging		Practicing Examining		Examining	
Feeling		Experimenting		Doing		Thinking	

Now add up your totals (don't include the example, of course) for each column and place the total in the blanks bellows.

COLUMN 1 COLUMN 2 COLUMN 3 COLUMN Croppes Repenses Molons	Grapes —	— Oranges └──	– Dananas –		
COLUMN 1 COLUMN 2 COLUMN 3 COLUMN	Grapes	Orangos	[」] Bananas ∟	——— Melons L	
	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN	

If your highest score was in column 1, consider yourself a grape. If your highest score was in column 2, consider yourself an orange. If your highest score was in column 3, consider yourself a banana. If your highest score was in column 4, consider yourself a melon. Now find your fruit below and review what this may mean to you.

GRAPES

Natural abilities include:

- Being reflective
- Being sensitive
- Being flexible
- Being creative
- Preference for working in groups

Grapes learn best when they:

- Can work and share with others
- Balance work with play
- Can communicate
- Are noncompetitive

ORANGES

Natural abilities include:

- Experimenting
- Being independent
- Being curious
- Creating different approaches
- Creating change

Oranges learn best when they:

- Can use trial and error
- Produce real products
- Can compete
- Are self-directed

BANANAS

Natural abilities include:

- Planning
- Fact finding
- Organizing
- Following directions

Bananas learn best when they:

- Have an orderly environment
- Have specific outcomes
- Can trust others to do their part
- Have predictable situations

Grapes may have trouble:

- Giving exact answers
- Focusing on one thing at a time
- Organizing

To expand their style, Grapes need to:

- Pay more attention to details
- Not rush into things
- Be less emotional when making some decisions

Oranges may have trouble:

- Meeting time limits
- Following a lecture
- Having few options or choices

To expand their style, Oranges need to:

- Delegate responsibility
- Be more accepting of others' ideas
- Learn to prioritize

Bananas may have trouble:

- Understanding feelings
- Dealing with opposition
- Answering "what if" questions

To expand their style, Bananas need

to

- Express their own feelings more
- Get explanations
- Be less rigid

MELONS

Natural abilities include:

- Debating points of view
- Finding solutions
- Analysis ideas
- Determining value or importance

Melons learn best when they:

- Have access to resources
- Can work independently
- Are respected for intellectual ability
- Follow traditional methods

Melons may have trouble:

- Working in groups
- Being criticized
- Convincing others diplomatically

To expand their style, Melons need to:

- Accept imperfection
- Consider all alternatives
- Consider others' feelings

D. MAJOR STRATEGY/OBJECTIVES/FORMULATION PER KEY PROGRAM AREA GROUP OUTPUTS

D.1 KRA: Increased participation of AHRDC members (including membership of health related NGOs, provincial hospitals, private academes and professional associations) /Expansion of Membership (maximum of 3 months)

ACTIVITIES	OUTPUT INDICATOR	TIME	AGENCY/IES IN CHARGE	RESOURCES NEEDED
		FRAME		
1. Evaluation of all existing members and Identification of experts, facilities activities (with CBC, and R&D) including TNA and Profiling of experts and lab facilities	100% Evaluated existing members	July 2016	DILG	10, 000.00
2. Identification of Possible Members for Expansion	10 added possible member institutions	August 2016	DOH	5,000.00
3. Conduct general assembly for the expanded AHRDC	General Assembly	August 2016	DOST-ARMM/PCHRD	50,000.00
4.Team Building	-	-	-	-
(To develop camaraderie)				

D.2 KRA: Improved Good Governance

ACTIVITIES	OUTPUT INDICATOR	TIME	AGENCY/IES IN CHARGE	RESOURCES NEEDED
		FRAME		
1. Financial Management		Aug 2016	DOST/DOH	
1.1 Draft Resolution creating a finance team	Team/bank account created			
1.2 Draft Resolution The cons. Will open a bank account	Financial communications group will manage/audit consortium funds (much better if SEC registered for legal personality and international support)			
2. Accomplishment Report	Accomplished report	Quarterly	All members	
The submission of the accomplishment reports should be timely.				
3. Communication System	No. of articles uploaded, FB,	After every activity	DOST	
3.1 Regular updating of website (artcles, etc.)	chat group			
3.2 Drafting and creation of communication plan for health research		Oct 2016	DOST-ARMM/PCHRD	
3.3 AHRDC logo contest	Logo created		All members	Prize

4. Sustainability			
4.1 Memorandum Circular from Regional Governor creating a RD unit/committee in each institution	No. of institutions with R&D committee/unit	January 2017	
4.2 Conduct of regular meetings	No. of meetings conducted	Quarterly	
4.3 Creation of AHRDC office	Identified location of AHRDC office	September 2016	
4.4 Issuance of membership			
5. Reorganization meeting	4 Additional committees created	2017	AHRDC
5.1 Capacity building of			
identified committee head + members	No. of members trained	2017	

D.3 KRA: Improved R&D programs responsive to current emerging needs

OUTPUT INDICATOR	TIME	AGENCY/IES IN CHARGE	RESOURCES NEEDED
	FRAME		
80-100% advocacy implemented			
No. of proposals			
	80-100% advocacy implemented	80-100% advocacy implemented	FRAME 80-100% advocacy implemented

D.4 KRA: Improved capacities of AHRDC members/parties and partners in health research

ACTIVITIES	OUTPUT INDICATOR	TIME	AGENCY/IES IN CHARGE	RESOURCES NEEDED
		FRAME		
1. Conduct training needs assessment (TNA)			CBC	
2. Classify available human resources based on field of specialization			CBC	
3. Capacitate all committee members and researchers			CBC	

D.5 KRA: Improved research utilization and dissemination to concerned institutions/sectors/public

ACTIVITIES	OUTPUT INDICATOR	TIME	AGENCY/IES IN CHARGE	RESOURCES NEEDED
		FRAME		
1. Publication of research results to different scientific communities	1 research paper/member institution in local, national, international journals and registered at HERDIN, PHRR	May 2017-Nov 2017	Academe and member institutions	1,000,000.00 Publication assistance and funds
2. Identify champions to present and lobby for the policy making bodies for the integration of research recommendation to legislative formulation	Majority of the members of the legislative body approved the utilization of the research results and recommendation		RU "policy declaration"	Mobilization funds and legwork supports (1,000,000.00)
3. Conduct activities exhibits, fair to promote and present researche.g. NSTW (forum/contests) in July will made as a venue for research competitions,				

D.6 KRA: Increased resource mobilization for health R&D

ACTIVITIES	OUTPUT INDICATOR	TIME FRAME	AGENCY/IES IN CHARGE	RESOURCES NEEDED
1. Source out funds from inst from all levels				
2. Collect membership fee				
3.5% of honoraria for consultants retained in the AHRDC				
4. Tap local funds – budget hearing of local agencies				
5. Fundraising events – e.g. Forum in halal and health				
5.1 Create events – registration fee				
6. Percentage of royalty fee will be retained to PCHRD – internal discussion with the board				

The group assigned the AHRDC secretariat to refine the workshop outputs for the approval of the Chair of AHRDC and the General Assembly/ Advisory Board composed of the heads of the member institutions.