

Summary of external review recommendations and secretariat responses and actions

Major Recommendations

Recommendation	Action
<p>1. TDR should continue its focus on implementation research and should confirm its current direction of travel in withdrawing from supporting product research and development through its own funds.</p>	<p>This will be made explicit in the 2018-23 strategy. Inputs into R&D, such as the pooled fund, will be clearly distinguished as a facilitation role, in keeping with broader TDR aims and not play the role of either an investigator nor funder of R&D products.</p>
<p>2. TDR should seek to clarify precisely what it means by IIR, focusing on what TDR will and will not do under this heading.</p>	<p>An explicit statement of the working definition for IIR and the scope that TDR will focus on will be included in the 2018-23 strategy, as the global definition of IR is still quite diverse. This will build on TDR's role in developing the guidance on reporting implementation research.</p>
<p>3. If TDR does take on the management of the Health Product R&D Fund, the risks of doing this need to be clearly identified and mitigated.</p>	<p><u>If</u> a request is made to TDR to manage this scheme, a close risk monitoring strategy will be implemented and overseen by JCB. The option of transitioning to a separate entity will be considered if growth starts to exceed limits set by the JCB.</p>
<p>4. In its next Strategic Plan, TDR should clearly outline its approaches to partnerships, ensuring that costs of inputs, including opportunity costs, into such partnerships are covered and expectations clarified.</p>	<p>An explicit statement on partnership and the strategy of engagement will be made in the 2018-23 strategy. A deeper analysis of current engagements will begin the process.</p>
<p>5. While TDR should continue to support capacity building initiatives, it should explore the possibility of conducting such work in collaboration with other organisations, e.g. Research and Training in Human Reproduction (HRP) and the Alliance for Health Policy and Systems Research (AHPSR).</p>	<p>Discussions have already commenced with HRP and joint areas of activity will be developed where there is mutual benefit.</p>

Recommendation	Action
<p>6. Consideration should be given to the further development of the TDR Global database to support a community of individuals who have an interest and expertise in implementation research.</p>	<p>The TDR Global Community Engagement Strategy, which will be released at the end of 2016, will take this into consideration.</p>
<p>7. TDR's structure should be appropriate for its strategic focus. There may be a need for greater senior management capacity over two or more technical work-streams and greater capacity for monitoring and evaluation, resource mobilisation and research uptake across TDR</p>	<p>Organisational structure will be reconsidered in the light of the 2018-23 strategy, to ensure TDR continues to be fit for purpose. Given the desirability of not increasing permanent staff numbers and to avoid raising administrative costs at the expense of operational funding, mechanisms to address the highlighted functional needs without increasing staffing will first be considered. This will include management skills development of current staff.</p>
<p>8. In general, TDR benefits from being a programme with several UN agencies as co-sponsors. This situation should be maintained. This may involve explaining more clearly how TDR's work is relevant to the co-sponsors and identifying ways in which mutual benefit can be leveraged.</p>	<p>TDR secretariat and JCB will advocate for a more collaborative mechanism of interaction and demonstrate TDR's added value and relevance, in the context of current co-sponsor priorities and strategies. Efforts are being made to identify specific projects of mutual interest, to facilitate closer engagement.</p>
<p>9. The director has contributed hugely to restoring TDR's credibility. There is now a need to ensure management capacity is extended into technical areas and succession planning is actively managed.</p>	<p>To reflect the evolution of TDR to a manager of research, management capacity development at the technical level is a priority. A management skills development programme has been instigated with team leaders. Further skills development is planned within technical teams.</p>
<p>10. Where donors provide designated funding, it is important that TDR only engages with agreements that it can effectively handle administratively, and for which all costs are covered by that funding.</p>	<p>TDR will continue to consider every agreement on an individual basis to cover related salary and support costs. It will review the standard support costs based on the administrative requirements of the grant schemes.</p>
<p>11. TDR urgently needs to improve its project management systems, which may involve entering into intensive negotiation with WHO.</p>	<p>A system (CONNECT) has been designed in collaboration with the Human Reproduction Programme (HRP). Objections from WHO-IT have prevented it being linked to WHO system. Renewed efforts will be made to resolve this impasse and alternatives are also being actively investigated.</p>

Recommendation	Action
<p>12. Consideration should be given to reviewing the working of the Scientific Working Groups (SWGs) to optimise their contribution.</p>	<p>The SWGs are a recent introduction and efforts are underway to standardise activities and optimise their effectiveness. When operation is fully established a review will be undertaken.</p>

Minor detailed recommendations

Recommendation	Action
Governance	
<p>Standing Committee meetings should only be held away from HQ when there are demonstrable benefits or economies in so doing.</p>	<p>Full involvement of co-sponsors is unlikely if all meetings require travel to Geneva, as attendance at JCB is already an issue for some. Rotating the venue between Europe and the USA, based on availability of participants, is more feasible. Perhaps holding the November meeting by remote communication might be worth considering by the SC.</p>
<p>There is no case for changing the roles, responsibilities or structure of the JCB, but efforts need to be made to utilise the opportunity of so many stakeholders being present. Consideration could be given to making the JCB meetings more participative and to providing attendees with more information to disseminate on their return home.</p>	<p>JCB has undergone considerable reform in the last 3-4 years. We will continue to evaluate meetings carefully, based on participant feedback, and to continue to improve the meeting with suggestions such as those made here.</p>
<p>Review the criteria for selecting STAC members to make more transparent and to ensure the widest spread of complementary competences and experience. Basing selection on some form of skills and knowledge audit would be ideal.</p>	<p>A more formal mapping of STAC expertise has been undertaken and appointment of new members matches the skills of candidates with the needs of replacing outgoing members, or introducing any new capacity requested by STAC. To achieve balance, gender and geographic origin of candidates are also considered.</p>

Recommendation	Action
Mechanisms for the STAC to provide rapid scientific advice need to be identified and documented and a feedback loop created on advice given. These may primarily be SWGs rather than the STAC itself.	Informal mechanisms do exist, but these will be added to SOPs to formalise the process. SWGs have been established to play this role by providing a closer and continuous link with the secretariat.
Processes need to be agreed and standardised across the three SWGs . Introduce a scoring system for prioritisation against agreed criteria.	SWGs are a recent introduction and the initial meetings have helped shape the format. SOPs, including standard reporting procedures, are in progress. Models for scoring priorities will be explored with SWG chairs.
Engage SWG members in a smaller agenda with more time to explore issues in-depth. Use SWGs to their optimum potential by creating a mechanism for additional inter-meeting input and create a feedback loop on advice given.	We are reviewing the scope of the content that SWGs are expected to provide comment on and the information required to do this effectively. Inter-meeting input has developed very effectively in some groups and will be extended in a more standard manner across all SWGs . All actions will be reported back to SWG .
TDR should make more use of remote communication , which has significant potential to reduce cost, increase contribution and strengthen oversight.	Committees provide strong feedback that meeting face-to-face is very important. A mixed model will be developed where periodic meetings are complemented by remote communication. Training in virtual leadership has already commenced for TDR staff. A TDR staff group will form to produce guidance on this.
Secretariat	
Consideration should be given to strengthening management within the technical work-streams.	A management skills development programme has been instigated with technical team leaders. Further skills development is planned within teams.
Consideration should be given to strengthening both resource mobilisation and M&E by providing more specialist support.	Note is taken of the suggestion to strengthen capacity in TDR in both of these areas. Given financial constraints, ways of addressing these needs without increasing staffing will first be considered.
Consider placing knowledge management in the Director's department, with a specific remit to work across all three work-streams and a more explicit focus on promoting research uptake.	This will be thought through further, in light of the definition and scope of activity in knowledge management described in the 2018-23 strategy. KM is a cross organisational activity.

Recommendation	Action
Address workload anomalies, as neither over-commitment nor under-commitment is good for individuals or the organisation.	Workload is being monitored by Team Leaders, as the functions of some positions continue to evolve. If required, some reorganisation of positions will be made to respond to needs of the 2018-23 strategy.
The travel policy needs to be reviewed and clear criteria established, taking into account direct cost and opportunity costs of being away from the office.	All travel is currently reviewed by both the Team Leader and the Director. Further to this, a TDR staff group will be formed to review criteria and produce further objective guidance to improve consistency in travel approval across TDR (alongside discussion of increased use of remote communication).
Consideration should be given to introducing a more formal system for identifying personal development needs.	Individual development needs are discussed at the performance management development system (PMDS) meeting with supervisors. Any institutional skills gaps identified in light of making TDR fit for purpose for the 2018-23 strategy will be used in suggesting and prioritising training needs.
The potential impact of the WHO mobility policy needs to be made absolutely clear and the case for exception pursued.	JCB is clear about the potential negative impact and is monitoring this closely. A case for exception has been put to WHO and if not accommodated, further JCB support will be required to appeal.
Efficiency might be improved by the appointment of a manager who has overall management responsibility across the two research streams, with scientists giving more time to the technical management of individual pieces of work.	It is difficult to justify additional staff without substantial budget increase. This may also separate management responsibility from activity in the technical teams. The initial approach will be looking for alternate mechanisms to cover the need, including management training of team leaders.
Research quality and ethics	
Clear definitions of quality and a comprehensive and well-documented quality assurance system is needed for TDR's work. Monitoring could then be focused on checking the extent to which elements of the system are operating appropriately.	Processes and standard operating procedures are being developed to ensure quality in a systematic way through standardized approaches in prioritizing and selecting grants and managing external expert committee review (Scientific Working Groups and ad hoc working groups).

Recommendation	Action
<p>Grantees require more project-specific, individual, and systematic support in turning grant proposals into ethically sound research protocols.</p>	<p>Within programme constraints TDR will explore how to further work with partners to address this issue of the need to support grantees to develop protocols, for example through protocol development workshops and engaging external experts.</p>
<p>Issues with ethics approval support the need for the Regional Training Centres (RTCs) to make available a full suite of short courses, including courses on implementation research ethics. Support might also come from the Alliance for Health Policy and Systems Research (AHPSR) proposal writing workshops, the Implementation Research Toolkit and massive open online course (MOOC) on implementation research.</p>	<p>Work will continue on developing and disseminating the range of TDR training tools across the continuum of implementation research (IR), including the MOOC as an introduction to IR, basic principles in IR, the ethics of IR, the IR toolkit, and the guidance on reporting IR. We will continue to explore working with relevant partners to cover the range of training needs, building on ongoing activities in support of protocol development workshops.</p>
<p>Planning and financial management</p>	
<p>The portfolio prioritization model provides criteria against which proposals can be measured but there is no weighting attached nor is there a scoring system to allow direct comparisons. This would be helpful at all levels and would demonstrate transparency.</p>	<p>The portfolio prioritization model is being reviewed together with the processes and standard operating procedures to ensure research quality.</p>
<p>The current systems cannot provide sufficient information on specific grants, resulting in delays, reputational damage and increased risk; effective project management is hampered and scarce professional time is wasted in compensating for system shortcomings. This is an urgent need for a project management system which affects all aspects of TDR's work.</p>	<p>The current project management system (TIMS) has become obsolete and efforts in the past few years have focused on developing, in collaboration with HRP, a fit-for-purpose project management system called CONNECT. Following the WHO-IT rejection of linking this system to the WHO management system (GSM), TDR has commissioned an IT firm to analyse TDR's IT systems and needs. Their recommendations on alternative options are awaited.</p>
<p>The risk management system should now be cascaded into all work-streams and risk should be assessed prior to, during and after any new initiative. The risk register should be made available to the SC and the JCB with formal reports on risks over an agreed score threshold.</p>	<p>TDR's risk management system has been developed at both programme and project level and implementation in 2012 was well ahead of the launch of the WHO policy for risk management. Risk management plans are requested for all expected results approved by STAC. In 2016 to the monitoring of risk mitigation plans will engage all teams. The risk register will continue to be a standing item submitted to STAC and SC for endorsement and JCB for approval, as well as to WHO as part of the organization-wide risk register.</p>

Recommendation	Action
The dual budget plan provides a measure of operational flexibility and the ability to manage risk. However, TDR should consider developing scenario planning to accommodate greater uncertainty, either through additional (possibly informal) scenarios or through making its current 'pessimistic' scenario even more conservative.	The 2018-2019 budget scenarios have been developed to accommodate more uncertainty, including a more 'pessimistic' starting scenario, that will avoid a major restructure of work plans if unforeseen circumstances arise.
The Gantt chart system is functional but does not yet play the central role in project management that it should. Further targeted training is desirable to make the most of this system.	Efforts will be made to strengthen the use of Gantt charts during the whole project cycle. Additional training will be given, if required.
The current assumption of 13% support costs needs to be reviewed, but there may also need to be a range of apportionment rates used, depending on the project type. This should help create incentives for resource mobilisation and teams to only accept designated funded work that is genuinely cost-effective.	Project support costs of specified funded grants received by TDR are being reviewed and will be adjusted as per the administrative complexity of the grant scheme.
Working capital provision is a sensible risk management mitigation tool and it would be worth considering increasing its level.	TDR will continue setting aside savings to increase the working capital to a level covering up to a 24 month salary liability.
TDR should increase the inputs available for resource mobilisation and ensure that all team leaders have personal annual targets. There is an argument for appointing a dedicated resource mobilisation specialist who would both undertake some part of this role but also coordinate efforts by all the senior managers.	A strategy for resource mobilization is being prepared across TDR. Annual fundraising targets for designated funds will be set for respective teams. Given the desirability of not increasing permanent staff numbers and the problem of raising administrative costs at the expense of operational funding, further resource mobilisation capacity is being sought externally, as required.
TDR should consider the need to strengthen the M&E function to improve the identification and reporting of benefit.	The TDR Performance Assessment Framework and its monitoring and evaluation (M&E) processes and indicators have been developed in close collaboration with TDR governance, donors and stakeholders to ensure it meets their needs and allows TDR continuous performance improvement. The framework will be revised in light of the new TDR strategy (2018-2023), in close collaboration with donors and stakeholders. This will be a good opportunity to review how best to identify and report benefit.

Recommendation	Action
Partnerships and communication	
To ameliorate the risks of the Health Product R&D Fund coming to dominate TDR and bringing excessive risk, there should be agreement about a transition strategy when it reaches a given size.	If a request is made to TDR to manage this scheme, a close risk monitoring strategy will be implemented and overseen by JCB. The option of transitioning to a separate entity will be considered if growth starts to exceed limits set by JCB.
TDR should continue to contribute to ESSENCE through membership of ESSENCE’s steering committee and by hosting the ESSENCE secretariat. However, the partnership and governance manager’s role should be limited to more strategic engagement in line with the dedicated funding supporting the position. The risks (financial and reputational) to TDR of being associated with ESSENCE should be formally assessed.	As per the ESSENCE-specific review undertaken in 2015, dedicated additional resources will be contracted out to support the work of the ESSENCE Secretariat and the Manager of Partnerships and Governance. Consideration will be given to including ESSENCE-related risks in TDR’s risk reporting system.
Given that the credibility of TDR and its director have been re-established, it may be helpful for future communications about TDR to focus on the broader staff team.	This is a good suggestion, reflecting the evolution of the communication message, and will be incorporated into our communication strategy.
Communications products could focus increasingly on the content and findings of research supported through TDR. This overlaps with work on knowledge management and it may be worth bringing these two elements together as ‘ <i>research uptake</i> ’.	TDR has already started to post news on research findings from initiatives that it supports and this will be increasingly highlighted. Communications and knowledge management started to collaborate on promoting and supporting research uptake. This will be further strengthened. The TDR website will feature more examples of research being used for policy by TDR grantees.
Less success has been achieved overall on ensuring a greater focus on francophone and lusophone countries .	A number of initiatives are underway and additional efforts will be made to engage French and Portuguese speaking countries in TDR committees. Specific projects focused on these countries will be part of the 2018-23 strategy.
Clarifying what TDR means by key terms such as intervention and implementation research would make the work of those who seek to communicate what TDR does easier.	An explicit statement of the working definition for IIR and the area of work this defines will be included in the 2018-23 strategy.

Recommendation	Action
<p>In-depth case studies are likely to be an effective way of collecting evidence of the impact of published research.</p>	<p>Case studies are already being used to report initiatives such as SORT IT and we recognise the power of such reporting for identifying the impact of the research, in addition to quantifying specific outputs and outcomes.</p>
<p>Research capacity strengthening- knowledge management</p>	
<p><i>Postgraduate training</i></p>	
<p>The call for applicants needs to be explicit about the implementation research focus of the Master's courses. Timelines for selection and for course delivery need to be realistic.</p>	<p>Further attention will be paid to highlighting the focus of the scheme on implementation research. Ensuring realistic timelines will be facilitated by the decrease in the time pressure that inevitably accompanied the reorientation and launch of the new scheme in 2015.</p>
<p>Universities need to ensure that they can provide adequate supervision and support, particularly outside the country, and the ability to teach implementation research needs to be confirmed.</p>	<p>TDR will further ensure that the universities provide adequate supervision and support, building on this emphasis as one of the criteria for the selection of the universities in the competitive process in 2015. Further opportunities in this regard will arise from the ongoing work in developing a framework for monitoring and evaluation of the scheme, which will be implemented in quarter 3 of 2016.</p>
<p>In the next strategic period consideration will need to be given to focusing where the capacity is most lacking and where the potential for benefit is greatest. This might be geographical or by disease programme.</p>	<p>TDR will further consider the implications of the key strategic issues of ensuring quality, relevance, equity and impact for the postgraduate training scheme as part of the process of developing the overall 2018-2023 strategy.</p>
<p>Whilst the recent focus of TDR has been on providing a body of people with the knowledge and skills to support implementation research at grassroots level, parallel grants to support career researchers at an early stage after their doctorate should be considered.</p>	<p>Further work on supporting career researchers at an early stage after their doctorate will build on the experience of and lessons learned from the ongoing pilot postdoctoral scheme hosted by the Noguchi Institute in Accra, Ghana. Advice from SWG and STAC help us identify relevant partners and balance emphasis on this career stage across the portfolio.</p>

Recommendation	Action
<i>Small grants in regions</i>	
<p>Consideration might be given to offering fewer but bigger grants, making it more realistic to address some of the priority focal areas. The focal areas need to be more consistently realistic in order to reduce the risk of failure to achieve goals.</p>	<p>The increased number of regionally specific prioritisation processes (e.g. reports of regional advisory committees on health research) will help further prioritize the focal areas of joint interest to TDR Regional Offices. With small amounts used as seed funding, the scheme is achieving its goal of supporting researchers in the regions as well as strengthening TDR's collaboration with the WHO Regional Offices. Other avenues in TDR are used for more substantial investment in larger projects.</p>
<i>Regional Training Centres</i>	
<p>There is much goodwill in the institutions acting as RTCs but the core funding was reported to primarily fund administration staff. Care must be taken that senior scientists are not being asked to overcommit to TDR activities to the detriment of their 'day job'.</p>	<p>TDR will continue to actively manage the network in such a way as to minimise the risk of overloading the senior researchers. For example, the identification of focal points for each area of training in the Gadjah Mada University in Indonesia is serving as a model for other RTCs.</p>
<p>Where courses appear to be sustainable without TDR funding, a planned tapering should be agreed, coupled with the offer of support to develop a business plan.</p>	<p>TDR will continue to work with the RTCs in developing their business plans, building on the process currently underway, with initial draft business plans expected in 2017.</p>
<p>RTCs should be encouraged to communicate across the RTC network outside of formal meetings and to work more closely with the respective regional and country WHO offices and local research institutions and ministries of health.</p>	<p>Further communication among the six RTCs will be encouraged through a range of network development activities, including the framework and plan for coordination and networking currently underway. We will also continue to foster and strengthen the current links between each RTC and the relevant WHO Regional Office.</p>
<p>TDR should agree a reporting framework which will over time enable outcomes and impact to be identified.</p>	<p>The process of developing a framework for monitoring, evaluation and reporting is currently under development, coordinated by CIDEIM (the RTC supported by TDR in the WHO Region of the Americas). The first draft of this framework is in circulation and will be presented to STAC.</p>

Recommendation	Action
<p>A review should be undertaken, including those regional research partners supported by AHPSR and HRP, to rationalise and focus on the centres with the greatest potential that might support research capacity building with a wider focus.</p>	<p>TDR will continue to work with AHPSR and HRP to identify and support centres with potential for supporting research capacity strengthening with a wider focus. This will build on the joint AHPSR, HRP and TDR initiative for Strengthening Capacity for Implementation Research (SCAPIR), launched in 2015 following review of activities of regional research partners coordinated by AHPSR.</p>
<p><i>Working with others</i></p>	
<p>There are opportunities for implementation research courses to be offered with support from the other WHO special programme and regional centres, as well as with other departments in WHO HQ.</p>	<p>Opportunities for collaboration with the other special programme and relevant WHO departments and RTCs will be pursued further to develop and offer courses on implementation research. This will build on our experience so far of developing the IR toolkit (in collaboration with AHPSR, HRP and the WHO Department of Maternal and Child Health), the Massive Open Online Course (with AHPSR and WHO departments), and the training course on ethics of implementation research (with AHPSR and WHO Ethics).</p>
<p>TDR should continue with its work on MOOCs and consider expanding their use to disseminate other training products, possibly in collaboration with other programmes, including AHPSR and HRP.</p>	<p>Work on developing the first MOOC (an introduction to implementation research) is well underway, with launch planned for November 2016. The experience of, and lessons learned from, this first MOOC will inform plans for potential development of other MOOCs. The development of this first MOOC in collaboration with AHPSR and the WHO Departments of Neglected Tropical Diseases and Global Malaria Programme will facilitate its dissemination in conjunction with these other partners and identification of suitable topics in considering other MOOCs.</p>
<p>Consideration should be given to moving towards a joint programme of capacity building activities with HRP and AHSPR; developing a team competence framework for implementation research and using commonly agreed approaches and a common framework for evaluation.</p>	<p>Discussions have already commenced with HRP and AHSPR, and joint areas of activity, building on existing collaboration, will be developed where there is mutual benefit.</p>

Recommendation	Action
<i>Knowledge management</i>	
Given TDR's focus on implementation research, it may be worth bringing together TDR's work on communications and knowledge management as ' research uptake '.	The best organisational fit for Knowledge Management will be reconsidered as part of the process of developing the 2018-2023 TDR strategy.
Jointly, TDR and EVIPnet could work towards a continuum of support.	We will explore the benefits and feasibility of working towards developing this continuum of support with EVIPnet.
Any creation of an M&E function needs to recognise the synergy with knowledge management in identifying organisational benefit .	TDR will address these needs to recognise and capitalise on the synergies that arise from the use of a central database as part of the development of a new grant management system.
<i>TDR Global</i>	
Consideration might be given to the further development of the database to support a community of individuals who have an interest and expertise in implementation research . This might be wider than its application in diseases of poverty. There seems to be opportunity to support this community, either with TDR working alone, or with HRP and the AHPSR.	The TDR Global platform is being developed to map expertise of current and past grantees and committee members, track their careers, and enhance new collaborations. Once launched and implemented successfully for its primary objectives, extension to non-TDR affiliated individuals could be explored.
Vectors, environment and society	
There is a need to develop strategic objectives for each of the four work-streams, outlining how they will support VES's overall goal and long-term aims.	Strategic objectives will be developed for each of the VES work-streams, outlining how they will support VES's overall goal and long-term aims, in line with the TDR Strategy for 2018-2023. Discussion on this has already started within the VES team.

Recommendation	Action
<p>The size of the VES team reduces the scope of work that can be conducted while maintaining quality standards. TDR may like to consider expanding the number of technical staff if the financial situation allows. An alternative solution is that SWG members could provide advice on particular projects.</p>	<p>Expanding the size of the permanent technical team would need careful consideration, as it reduces the flexibility of TDR to cope with financial fluctuation. Engagement of short-term assistance, where costs can be covered by funding, is more desirable. Engagement of SWG members has been enhanced and utilised, but the perception of SWG members as project implementers must be avoided, as it may result in a conflict of interest.</p>
<p>The VES team needs to be more proactive in raising designated funds, including the transitioning of Strategic Development Fund (SDF) projects to designated funding.</p>	<p>The VES team is increasingly pro-active in raising designated funds, including current proposals for transitioning SDF pilot projects to external funding,</p>
<p>VES should consolidate its position as a leading convener and facilitator of VES research. To avoid undermining this, VES should not undertake research directly and should not conduct basic R&D.</p>	<p>VES does not currently undertake research directly and does not conduct basic R&D. It will continue to act as a facilitator and convener of research, in line with the broader TDR strategy.</p>
<p>VES should place greater emphasis on getting research findings into practice than on producing academic publications. They could adjust the format of the Annual Results Report to explicitly present the number of publications and policy documents produced, and policies influenced.</p>	<p>VES research already focuses on transforming results into policy. The VES Annual Results Report explicitly presents the policy documents produced and specific indicators in the report are already devoted to the policies influenced.</p>
<p>VES should develop a capacity strengthening strategy and record and present capacity building achievements more systematically in their annual report. There needs to be improved communication and coordination with the RCS-KM portfolio in developing this strategy.</p>	<p>VES will make more explicit its approach to develop a capacity strengthening strategy, building on a range of current joint activities between VES and RCS/KM. VES will strengthen communication and coordination with RCS-KM in developing this strategy on cross-unit activities.</p>
<p>Moving forward, VES should continue to develop communication channels with WHO departments and to actively identify funding opportunities that would enable collaboration.</p>	<p>VES has made excellent progress in promoting cross-department collaboration and joint funding opportunities are already being explored. Cross-sector activities initiated by VES have greatly enhanced the WHO focus on vector control and surveillance in the wake of the Zika virus outbreak.</p>

Recommendation	Action
Intervention and implementation research	
No shared understanding of what precisely is meant by IIR , either within TDR or more broadly.	An explicit statement of the working definition for IIR and the area of work this defines will be included in the 2018-23 strategy.
TDR needs to confirm that IIR is a long-term key niche in which it can contribute.	This commitment was made in the 2012-17 strategy and followed in its implementation, as monitored by STAC. This direction will also be made explicit in the 2018-23 strategy and workplans.
It is unclear how specific issues and areas requiring IIR are identified and prioritized and the extent to which these explicitly identified priorities drive and determine project design and selection. This leads to questions on whether the activities and projects selected for IIR are necessarily the best available.	During the 2012-2017 strategy, some “orphan” activities initiated earlier were completed, as advised by STAC. Priorities for new activities were determined in consultation with the SWG and STAC, based on input from countries and control programmes. This process will be refined for determining the 2018-23 priorities. Clear definitions of the scope of work will be included in the new strategy and criteria for the selection of priorities will be listed in the workplan.
IIR should develop a capacity strengthening strategy and record and present capacity building achievements more systematically in their annual report. There needs to be improved communication and coordination with the RCS-KM portfolio in developing this strategy.	IIR will make more explicit its capacity strengthening strategy, building on a range of current joint activities between IIR and RCS/KM. IIR will strengthen communication and coordination with RCS-KM in developing this strategy on cross-unit activities.
More could be done to make IIR work known and to support the uptake of research evidence into policy and practice.	Communication around IIR-supported research and its results will be strengthened. Most research has a long lead-time to publication and even more to uptake into policy and practice, but many advocacy pieces, e.g. for SORT IT are being published, including assessments of impact on policy and practice and on operational research capacity building, and strengthening translation into policy and practice through partnership with EVIPNet.
Resource mobilisation to support sustainability should be a specific focus of work for the IIR team.	The team is aware of the importance of securing additional operational funding. An external adviser has already been engaged to map the funding landscape and advise on resource mobilisation strategy.