IDI: Building trust through governance, systems, and sustainability

A further reflection on the first 20 years of the Infectious Diseases Institute in Uganda

The Infectious Diseases Institute (IDI) is a largely autonomous, self-reliant, non-profit institution wholly owned by Makerere University in Kampala, Uganda that marks 20 years of existence in 2021. The vision of IDI is a 'healthy Africa, free from the burden of infectious disease' with IDI aiming to 'strengthen health systems in Africa, with a strong emphasis on infectious diseases, through research and capacity development'.[1]

Following a previous reflection on building trust through programme results at IDI,[2] this paper considers how IDI's governance, systems, and approach to sustainability, as well as the energy, drive and dedication of IDI staff, strengthened trust in the institution. IDI aspires to be trusted by: the people IDI serves, the government at national and local levels, Makerere University, national and international project partners, funders and others; as well as its own staff.

We summarise the evolution of IDI's governance structures, and the development of a range of critical management functions and systems, and the achievement of sustainable self-sufficiency after generous initial startup funding from the private sector (Pfizer Inc) which commenced in 2001 and had phased out by 2012. We highlight some of the key drivers of IDI's development and successes and share some lessons learned.

As with the first paper, our review is grounded in the concept of 'trust' and how institutional arrangements can strengthen trust and enhance sustainability (which itself can further bolster trust as the organisation is perceived as likely to endure). Also, as before, the authors include, among others, the current IDI Executive Director (ED) and all three previous EDs.

Key institutional achievements

Governance

Evolution of governance: IDI startup activities began in 2001, catalysed by a group of highly committed individuals from Uganda and North America, and funded by Pfizer Inc, but with important contributions in terms of land and other facilities from Makerere University – essentially a public–private partnership. A US-based agency (Pangaea Global AIDS Foundation) provided initial management focused on development of HIV-related services, but with invaluable leadership and support from an informal alliance of prominent Ugandan and North American medical academics (the Academic Alliance for AIDS Care and Prevention in Africa). This group evolved into Accordia Global Health Foundation and up to 2016, helped make vital supportive connections with the Government of Uganda, Makerere University and other partners, and mobilise funding for IDI programmes swiftly from major US private sector entities.[3] IDI was eventually registered in 2005 as a non-profit company limited by guarantee and owned by Makerere University, a public university. The University is represented by the Vice-Chancellor and the University Secretary who appoint the IDI Board members whom they hold accountable at an Annual General Meeting based on an Annual Report (since 2005). Ownership by the University means that there is mutual support, and integration, between the strategies of IDI, Makerere University and government. The University provides no core funding to IDI but does provide land and the benefit of the University reputation as well as linkages with other entities within the University. In turn, all publications by IDI contribute to the output and standing of Makerere University. This balance provides the autonomy necessary for IDI to responsibly pursue its programmatic and business goals and to thrive. The complex progression in IDI governance evolved on the basis of trust and common vision – from a multifaceted global partnership to a sustainable Ugandan institution of integrity, relevance and high quality.

IDI Board: The IDI Board meets three times a year and has 13 members (11 from Africa) who are not appointed by virtue of an office they hold but for the contribution they can make to achieving the IDI mission. It provides strategy and policy oversight, reviews progress against the IDI Strategic Plan, provides recommendations for progressing IDI's mission, considers internal audit reports, and approves the annual budget and periodically reviews IDI's financial position, among other things. It appoints and regularly evaluates the ED, but does not appoint any other senior managers (although Board members may be invited to participate in the recruitment process). Trust in IDI

Tom Kakaire is Head of Strategy and Development at IDI. Keith McAdam is Emeritus Professor of Clinical Tropical Medicine at London School of Hygiene & Tropical Medicine and was founding Executive Director at IDI, Alex Coutinho is a global health leader and was second Executive Director at IDI. Richard Brough is an institutional development specialist and was third Executive Director at IDI. Anna Kalbarczyk is an implementation scientist and gender specialist and is the Assistant Director of the Johns Hopkins Center for Global Health. Malvikha Manoj is a health systems researcher and practitioner. Andrew Kambugu is an infectious diseases physician and researcher and current Executive Director at IDI. Corresponding Author: Tom Kakaire tkakaire@idi.co.ug.

has been enhanced by a strong internal audit team primarily accountable to the Board (administratively to the ED) which randomly samples and analyses IDI activities with the aim of continuous systems quality improvement. The IDI 'whistle blowing' policy has proved valuable with the results of all investigations being considered by the IDI Board Audit Committee. IDI has always received a clean ('unqualified') external annual audit report.

Management, infrastructure and systems

IDI values its staff as the key resource for its success. This section focuses on factors that have enabled staff to optimise sustainable individual and organisational performance.

Resources and time to develop systems: The founders of IDI had a profound long-term vision. They established the systems that underpin efficient and effective programmes and enable sustainability and, equally importantly, were willing to give them sufficient time to work. Such funded 'learning' time enabled the IDI leadership and teams to develop self-belief (especially relating to winning competitive grants), to gain experience in responsible risk-taking, to introduce and refine systems for effective resource mobilisation, and to develop a culture of meeting financial sustainability targets alongside programme objectives. The provision of large startup funds and the development of enduring international partnerships was a major statement of trust in IDI's potential capacities and commitment. Internally, the trust by the Board in a succession of IDI EDs and their teams resulted in the agile leadership critical for seizing opportunities to develop and sustain the organisation.

Quality of leadership, management and succession planning: The IDI ED has, since inception, held unusually wide-ranging powers; and the post has benefited from a generous recurring annual grant that exclusively supports hiring a competent person to fill it. The ED leads IDI with the support of a senior management team comprising the heads and deputies for each programme and support function who are given genuine decision-making powers and the opportunity to gain experience that minimises the risk of a serious leadership gap due to the departure of the ED or a department head. Smooth transitions are also fostered by the robust IDI strategic plans, so that even if individuals change, the strategy continues to give direction. Staff turnover (especially among senior staff) is relatively low at IDI, which gives stability and strengthens confidence and solidarity among staff.

Policies and systems documentation: Documentation of IDI policies, guidelines and systems has been critical for consistency, equity, and efficiency; and reassures potential funders. It also helps to avoid potential litigation. Apart from the typical organisational manuals, IDI uses its own experience to document specific aspects of its operations and business processes. For example, the IDI Grants Manual, unique among IDI peer organisations and quite separate from the Finance and Operations Manual, strengthens sustainability by guiding IDI staff through the full grants and contracts cycle from identifying opportunities to project close out. Other policies ensure compliance, for example, with research regulations, HR obligations and minimum standards of behaviour (e.g. relating to bullying and sexual harassment) in keeping with national laws and funder expectations. This body of documentation, periodically reviewed to ensure continuing relevance and compliance with the law, contributes to IDI stability and bolsters funder confidence.

Strong Information Technology & Telecommunications (ITT) backbone: IDI opened in 2004 with state-of-the-art ITT (including satellite dish connectivity with the US National Library of Medicine) which (with upgrades) performed well right up until a complete overhaul began in 2021. Such high quality, reliable ITT has been central to the efficiency of IDI's operations and enabled many applications to be developed to meet IDI's needs – including a clinic and patient management system which has been licensed for use outside IDI. Many of these systems (such as the telephones and copiers) have inbuilt billing capability in order to efficiently allocate and recover the costs of their use – reinforcing sustainability.

Infrastructure: While a resource rather than a system, adequate and well-maintained physical infrastructure and equipment is essential for a high quality institution and makes for the safety of staff and clients, and for the efficient and effective provision of services. IDI rapidly outgrew the original space and, with generous external support, opened a major new building in 2015 which enabled the development of whole new programmes, such as Global Health Security (GHS), as well as accommodating major new units such as the African Centre of Excellence in Bioinformatics & Data Sciences and the Secretariat for the East, Central and Southern Africa College of Physicians (ECSACOP). IDI also developed various satellite sites (e.g. an HIV prevention research unit in periurban Kampala). The costs of infrastructure are monitored and recovered through billing out space to users by applying an audited rate.

Efficient billing for staff time and other distinct services: Costs of staff comprise most of IDI's costs. With over 1,500 staff and many funders (typically around 30 at any particular time), a 'staff cost recovery' process that meets multiple funders' requirements is complex. Paper-based in the early years, IDI developed the 'Clocktime' billing system, which significantly decreased staff cost recovery 'leakage', saved significant admin costs, and subtly changed the culture through staff more fully grasping the part each plays in sustaining the institution.

Within IDI programmes, 'business units' have developed to optimise billing for specific services (e.g., training courses, lab tests, data sets for analysis, among others). IDI has become more adept at precisely defining the billable item, documenting and auditing the associated unit costs, and charging them as a fee whenever possible/allowable, in order to minimise the related administrative burden. IDI also generates an externally audited 'general overhead' rate to be applied to project budgets which significantly facilitates negotiations with funders.

Adaptability to change as a constant: IDI as an institution embraces change as a constant – and expects management, infrastructure and systems to be continuously adapting and evolving to meet changing internal and external conditions. Policies may need updating, more processes may be automated, infrastructure may be re-purposed, staff training needs may change, and governance and management systems may be modified in response to strategic opportunities. For example, when IDI assumed full ownership of the main lab, creative institutional mechanisms were devised to integrate it without disrupting its sense of identity, business values and important related partnerships.

Progression and impact of IDI institutional development and sustainability

Sustainability

IDI was established within Makerere University with substantial unrestricted funding from Pfizer plus ongoing support from the Ugandan Government. IDI receives no core funding from Makerere University – indeed, IDI is formally committed to using a limited share of any annual IDI savings to contribute to causes identified by the University.

Annual IDI grant revenue grew from $3.8m in 2005 (95% Pfizer support) to $58.7m in 2020. Given funder policies on charging indirect costs,[4,5] the challenge has been to fund the core functions (like the finance team) from income from projects and other sources such as tuition fees, rental income, interest on reserves, and fees for services. Key factors in achieving sustainability include the following.

Leaders responsible for programmes and business objectives: Leaders of IDI programmes (e.g. training or research) were, from the start, held accountable not only for implementing programme activities efficiently and effectively, but also for identifying and pursuing opportunities to further develop their programmes within the bounds set by successive IDI strategic plans. IDI did not employ external 'grant writers', but looked to inhouse teams to write proposals (albeit often with support from partners). This approach fostered team culture, strategic thinking, writing skills, and awareness of the financial constraints to be accommodated by projects no matter how laudable the project objectives.

Strong independent business development and grants management team: Crucially for the sustainability of IDI, the business development function was, despite the substantial startup funding, prioritised early on with the appointment of senior leadership and the rapid establishment of a grants management team capable of not only supporting grants implementation, but proactively seeking resources through establishing partnerships and supporting IDI staff to apply for grants. The team was (critically) given time to develop systems/materials and to gain experience in grant applications so that when the startup funding diminished and ended they had the capacity to play a key role in mobilising resources for IDI. Another important decision was to separate the grants team from the finance team which enabled the grants team to support IDI to accomplish that vital, but problematical, balance between the achievement of programmatic and business objectives.

All income from projects is received by IDI and not by individuals: Income from projects is generally treated as income to the institution – individuals who bill time to a project do not receive that income personally, but simply receive their IDI salary. In this way, all

projects support the IDI core functions on which they all depend, and equity in terms of remuneration is maintained across the organisation.

Business/resource integration: IDI projects are designed so that they use as many of the products and services of other IDI programmes as possible and so that they maximise income to IDI and strengthen IDI sustainability.

Maintaining programme/business balance:[6] IDI has largely resisted undertaking attractive projects which do not contribute enough to funding the core functions of the institution (e.g. finance team; building maintenance; security; ITT) which underpin all the programmes. Without such discipline the institution may be endangered – although there may be exceptions for well-articulated strategic reasons.

Team culture[7] and mutually supportive programmes: IDI core values emphasise team culture which extends to supportive connections across IDI programmes. For example, the clinic provides a platform for research, and an outreach initiative may be supported by the training programme.

Range of IDI programmes: Financially, the range of IDI programmes has enabled IDI to respond to evolving funder priorities with specific IDI programmes making particularly strong contributions to IDI's sustainability at different times. For example, fixed fee research, high volume HIV-related training, and specialised reliable accredited lab testing have all made crucial contributions to IDI sustainability at different times. The range continues to expand, most recently with IDI investing core resources in growth areas such as a new GHS programme and a major data intensive science initiative.

Key drivers of IDI's institutional development

We suggest that the following have been critical drivers of IDI's institutional development.

- High degree of institutional autonomy within a university: IDI's positioning as a non-profit company/NGO thriving within a public university has proved a sound strategic governance context for IDI's institutional development.
- Sufficient startup funds to develop management, infrastructure and systems and gain experience: Discussed above.
- Quality of adaptable leadership: The initial provisional management of IDI decided that compensation packages should be competitive enough to attract competent individuals from Uganda or anywhere else in the world with the requisite skill sets to build an outstanding institution. This decision had far-reaching consequences as leaders across IDI mentored their successors and established enduring high standards of management. In addition, many IDI staff have moved around the organisation as their careers have unfolded (e.g. the current ED was a former head of two programmes). Staff are given the opportunity to develop their careers within IDI, which has helped to retain talent, prevent institutional sclerosis, and maintain a vibrant climate of flexibility and constant renewal.
- Programme heads responsible for business matters as well as programme activities: This double responsibility reduces the risk of programme leaders making programmatic commitments which jeopardise the institution as a business. It also makes for greater cohesion between the support functions (such as Finance) and the programme leaders – based on an appreciation of mutual dependency.
- Continuous Quality Improvement (CQI): IDI functions in a climate of CQI; with all staff encouraged to look for, and draw attention to, potential institutional improvements in a constructive spirit with no sense of tacit criticism implied; and to approach audits, not in a spirit of defensiveness, but rather as opportunities to learn and improve.
- Transparency and uncompromising integrity: The default for IDI has been transparency with all stakeholders (while ensuring confidentiality in appropriate clinical areas) in the belief that this strengthens both the integrity of the institution and its external relationships.
- Willingness to take risks: IDI leadership has recognised that sustainability is heavily dependent on innovation and that the biggest risk is to take no risks at all. IDI leadership has shown a responsible appetite for risk by, for instance: interpreting the IDI Strategic Plan and Mission to include a huge increase in outreach activities; constructing major infrastructure; and rapidly developing a new Global Health Security programme.

Conclusion

The first 20 years of IDI have shown how a largely autonomous, self-sufficient, African-owned and African-led non-profit health organisation can develop into a high quality institution generating a high level of trust among its various stakeholders.

The first paper in this series focused on achieving trust through enduring programmatic impact. This paper has explored how robust governance, strong systems, and financial sustainability contribute to building trust. The challenge and responsibility for IDI over the next 20 years is to maintain and deepen that trust and also to support other African institutions seeking to be trusted. The next paper will examine how the values of IDI have been critical to establishing trust and will put forward a practical approach which can be adopted by other institutions seeking to benefit from the IDI experience.

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