



The Collaboration Primer

Proven Strategies,
Considerations, and Tools to
Get You Started

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HEALTH RESEARCH &
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Introduction



Hospitals, clinicians, public health departments, and other service providers are learning that when it comes to delivering health care, it no longer pays to go it alone. Individually, organizations may face diminishing resources, yet when we think of these organizations as part of a community that includes schools, businesses, other providers, government agencies, concerned residents, and community-based organizations, all of which share concerns and visions for their community, suddenly we can see that there is a broader base of resources to tap into.

Whether your goal is to increase access to health care, to serve the uninsured, to be prepared for disasters, to affect local or state reimbursement policy, or any of dozens of other goals, you may be more effective if you collaborate with other organizations and stakeholders in your community. It's often said, and often true: *the whole is more powerful than the sum of its parts.*

Collaboration can help you better align resources with needs, reduce competition, increase effectiveness, and make your results more sustainable. Of course, achieving true and productive collaboration can also be challenging. It requires that organizations work outside historical boundaries; dedicate people, skills, and energy to the effort; deal with a diversity of priorities and culture; and think of their organizational plans and operations as part of a system that needs to function seamlessly and harmoniously. It is no wonder that many organizations are at a loss when deciding whether, when, how, and with whom to collaborate.



The Health Research and Educational Trust (HRET) has learned some valuable lessons about collaboration over the last 10 years through the National Community Care Network Demonstration Program and Evaluation. The Program has provided HRET an opportunity to examine and learn from the field what successful collaboration takes. Here we share:

- Ways to think about the degree to which you're ready to collaborate.
- Nuts-and-bolts as well as more abstract elements of the partnership that help make it successful.
- A checklist of questions and issues to consider before embarking on a collaborative arrangement.
- Examples of model collaboratives to help you visualize what your collaborative may look like, given the resources in your community.
- A tool to assess the status of your collaborative effort, identifying areas of strength and areas for improvement.

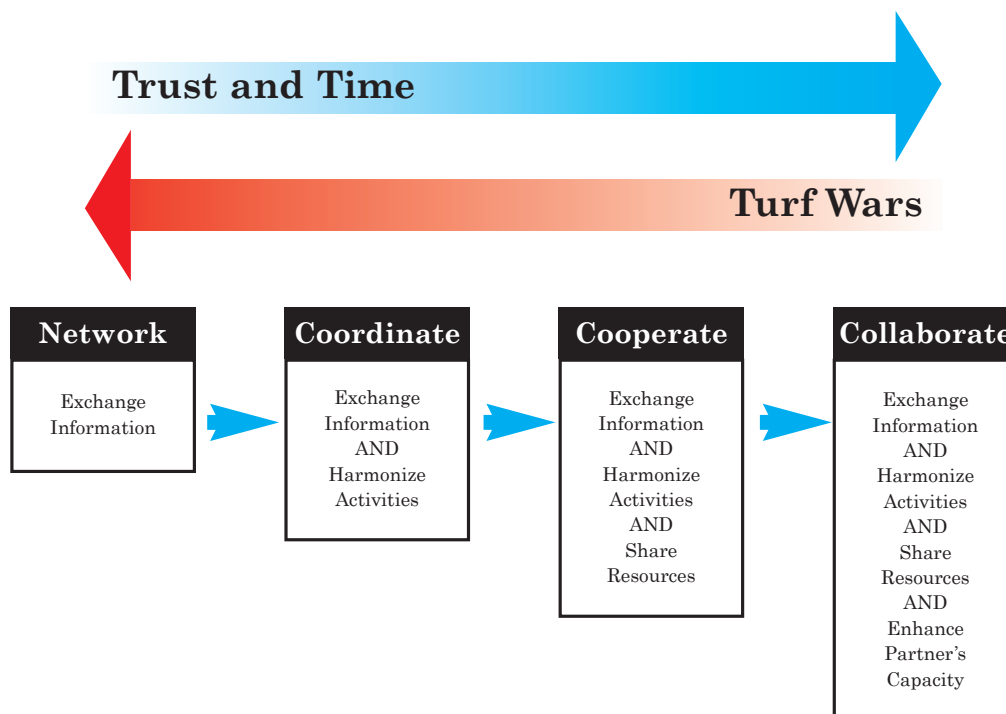


How far are you ready to go?







Alliance, partnership, coalition. These words are interchangeable and convey the idea that two or more organizations work together for a common goal. While organizations that work together may share resources, leadership, and responsibility, there are no hard and fast rules that dictate how they should do it. One thing is certain: *Collaboration involves a change in business as usual, and different kinds of partnerships will involve different levels of collaboration, depending on their goals and the partners' readiness to change how they do business.*

Organizations that successfully work together have typically achieved three things: high levels of trust, serious time commitment from partners, and a diminished need to protect their turf. As partners develop greater trust in each other, commit more time to the effort, and are more concerned about enhancing the capacity of their partnership than about protecting their organization's turf, they are able to collaborate in more substantive and productive ways. The more intense the level of collaboration is, the greater the potential outcomes. Partnerships may begin with the simple exchange of information and build up to a point at which partners harmonize their activities, share their resources, and work together to improve each other's capacity. The following diagram demonstrates how collaboration progresses in this fashion.



While the diagram implies four discrete stages of collaboration, it is helpful to think of them as points along a continuum. Achieving full-scale collaboration is an evolution, and partnerships may be at any point in the evolutionary process at any point in time, depending on the composition of the partnership, the nature of the work, and the goals of the partnership. Keeping in mind that each milestone paves the way to the next, here are some operational definitions.¹

-  **Networking** is the most basic and informal way for organizations to work together. Reflecting a minimal level of trust, limited time availability, and a reluctance to share turf, networking involves *exchanging information* and excludes working together on any activity or toward any goal beyond sharing information. **Example: A hospital and a community clinic share information about their respective pediatric services.**
-  **Coordinating** is the first big step towards actually working together and involves *harmonizing operations or activities*, often in order to make services more accessible and less redundant. Coordination requires more trust than networking and a greater organizational time commitment. It does not, however, require access to each other's turf. **Example: The hospital and community clinic alter their schedules in order to expand the total hours of operation available for pediatric services in the community.**
-  **Cooperating** entails a much higher level of organizational commitment, trust, and access to each other's turf. It is characterized by *sharing resources* and may involve written or legal agreements, such as memoranda of understanding or incorporation. Knowledge, staff, physical property, clients, money, and reputation are just some of the resources organizations may share. **Example: The hospital and community clinic agree to share physical space and funding for pediatric services in order to expand the range and depth of services provided to their common clients.**
-  **Collaborating** recognizes that some partners have special expertise or unique capability in certain services or among certain populations and is characterized by an openness and willingness to *enhance this capacity for mutual benefit*. It involves sharing risks, responsibilities, and rewards. It also means possibly giving up one area of business in return for another. **Example: The community clinic provides screening and prevention services and refers clients to the partner hospital for follow-up care. The hospital provides the community clinic with technical assistance in a new screening procedure, while the community clinic provides the hospital training in providing culturally competent care.**

¹ Adapted from A.T. Himmelman, "Collaborating for a Change: Definitions, Models, Roles and a Collaborative Process Guide."

Are you organized for success?



Collaborative efforts require a diverse yet complementary mix of players that convene to accomplish one or more of the following:

- ☞ Address a specific problem or opportunity.
- ☞ Work on a broad agenda of mutually beneficial goals.
- ☞ Provide a forum to vet and respond to community concerns, interests, and resources.

The nuts and bolts of a partnership's workforce include paid or volunteer coordinators, workgroups, and staff who do the work, while a governing board or executive committee provides the leadership and vision.

In addition to these core elements, there are roles—many without official names or status in the partnership—that will help get the partnership off the ground and ensure that it will be effective in what it does. Some considerations about these roles as you evaluate where your partnership stands:

- ☞ None is mutually exclusive—one person or organization can fill several roles.
- ☞ Nor does any role need to be filled by just one person or organization—several partners may share in the responsibility.
- ☞ Finally, some roles do not require that a partner fill them. They will be played out externally, such as by foundations, government, or community-based organizations.

Having these roles and perspectives residing in the partnership will lend it richness and add the operational depth and strength that will help ensure that the partnership's work is effective and sustainable.

The following list² describes some of these roles, their key functions, and considerations as you think of them in the context of your partnership. Use it to see whether your partnership has these different areas adequately covered and to determine where you may need to rethink, recruit, or restructure to fill in any gaps.

² From *Community Care Notebook: A Practical Guide to Health Partnerships*. HRET: Chicago, 2002; Himmelman.



■ CONVENER _____

- Engages public discussion of community issues.
- Gathers data and conducts studies to gain common understanding of issues at hand.

■ CATALYST _____

- Makes an early and clear commitment to participate in long-term community problem solving.
- Uses influence and resources to make the collaborative initiative real in the minds of other potential partners who may be waiting for leadership.

■ CONDUIT _____

- Identifies and channels grant money to the collaborative initiative.
- Could be a government agency or foundation that provides grants for local collaborative efforts.

Danger: May dominate the collaborative process. Its fiscal role may conflict with balance of power and trust that must be addressed and resolved by all partners.

■ FUNDER _____

- Funds collaborative initiatives.
- Helps promote understanding of partnership's goals to external groups or constituencies.
- May bring legitimacy to a local effort or increase awareness of a particular issue.

Danger: May fail to fully understand all that is involved in collaboration, such as time it takes to create a well-designed, trusting, mutually respectful collaborative before substantial results can emerge. Must be able to balance expectations between process and products.



■ ADVOCATE / CHAMPION

- Uses influence and resources to call stakeholders into action.
- Builds political will or rallies support for an emerging issue or response to a crisis.
- Promotes understanding of partnership's goals to external groups or constituencies.
- May bring legitimacy to a local effort or increase awareness of a particular issue.

■ COMMUNITY ORGANIZER

- Pays attention to who is at the decision-making table and how to include as full partners those who are traditionally excluded.
- Participates in ongoing recruitment, welcoming, and sustaining of participation by community-based, neighborhood-based, and constituency-based organizations and individuals.

■ TECHNICAL ASSISTANCE PROVIDER

- Retrieves data, gathers new research and information, or provides planning expertise, legal opinions, lobbying assistance, and access to information and assistance in preparing funding applications.

Keep in mind: Not highly visible and may be external to partnership.

■ CAPACITY BUILDER

- Increases ability of community, neighborhood, and constituency-based organizations to prioritize issues and secure resources relevant to addressing resources.
- Maintains focus on assets as opposed to deficits.



■ PARTNER

- ❑ Fully shares risks, responsibilities, resources, and rewards.
- ❑ Establishes mutually respectful, trusting relationships and understands other partners' motivations and hoped-for accomplishments.
- ❑ Defines and addresses challenges in a manner that provides opportunities for all partners to share in their solutions.
- ❑ Provides direct services, resources, financial support, or technical assistance on partnership initiatives.
- ❑ Level of activity may be characterized as:
 1. *Working* partners—contribute staff time and/or financial resources to assist in planning and implementing partnership initiatives.
 2. *Participating* partners—identify staff to work on partnership initiatives, or receive or convey information from or to the partnership.

■ FACILITATOR

- ❑ Helps collaborative problem-solving initiative work more effectively.
- ❑ May be perceived as another way of adding greater decision-making power to partner's role.
Keep in mind: Can be a mutually agreeable neutral or external facilitator and must be valued as a source of fairness, encouragement, and resource to all partners.

Ready or not? A checklist for collaborating



It's difficult to know where to start or even if your organization is ready to begin a close working relationship with others. The checklist below pinpoints the conditions required for a successful collaboration; it also provides some questions you may ask your organization and potential partners to determine whether or not collaboration makes sense. It is likely that not all questions will have answers, or even favorable ones, especially if this is a new partnership. But it is very helpful to have a clear sense of the state of affairs at the outset, so that potential problem areas can be brought to the surface and preemptive action taken, as appropriate.



The home organization is ready.

- Does your organization have goals it cannot meet alone?
- What do you gain from participating in a collaborative initiative? What do you lose? Do the gains outweigh the losses?
- Are you prepared to allocate time, staff, and other resources to the effort as needed?
- Do you understand how your own organization (silo) operates?
- How will it transition from working as a “silo” to working as part of a “system”? What is the incentive to do so? What has to change?

- Is your organization willing to devote staff and resources to develop trust and skills in the partnership?

The right partners are involved.

- What organizations and people have a stake in or share the partnership's goals?
- What organizations and people have the knowledge, expertise, and resources to make them happen?
- Can each of these organizations and people commit to being quality partners? Will they commit time, staff, and other resources as needed?

- ❑ Does the partnership include meaningful representation of those who will be directly affected by its efforts, such as community residents, service providers, and local officials?

❑ **A shared vision unifies the partners.**

- ❑ What motivates each of the partners to be involved?
- ❑ What do they most want to accomplish through their involvement?
- ❑ Do the key words and phrases gleaned from the above questions match the vision and objectives of the partnership?
- ❑ If not, can they be used as a basis for further discussion and refinement of a shared vision?
- ❑ What is the partnership's mission statement? How does it relate to the home organization's mission?

❑ **Partners are aware of what's expected of them.**

- ❑ What are the ground rules for participating in the partnership?
- ❑ Are roles and responsibilities within the partnership clearly defined?

❑ **Partners know the partnership's goals and objectives.**

- ❑ What are the partnership's goals?
Think of goals as long-term activities that help implement a mission and vision. Achieving them will serve as a measure of progress toward realizing the mission and vision.
- ❑ Are the objectives clear and realistic?
Objectives are short-term activities that help implement a goal and serve as a measure of progress on achieving that goal.

❑ **People to do the work have been identified, staffed, and made accountable.**

- ❑ Who is best suited to achieve an objective?
- ❑ Who will be accountable?
Workgroups? Individuals?
Organizations?
- ❑ Have specific individuals and organizations been linked to the specific objectives you have identified to ensure that the objectives will be carried out in a timely manner?
- ❑ Is staff paid or volunteer?

- ❑ Do partners donate staff? What challenges does this arrangement present?
- ❑ How is staff accountable to the partnership?

❑ **“Best practices” have been researched and shared in the partnership.**

- ❑ What kinds of interventions and programs work well for the goals the partnership is trying to achieve?
- ❑ What do you know about other collaborative efforts that have worked on a similar mission and goals?
- ❑ What are some lessons your collaborative can learn from these efforts?

❑ **Assets residing within the partnership have been mapped.**

- ❑ What can each partner contribute? Include financial and nonfinancial contributions (e.g., credibility, access to population, staff, technology, data, equipment, space).

❑ **Partnership encourages participation in and sustainability of its work.**

- ❑ What incentives and rewards are used to recognize and sustain partners’ contributions and the changes they make in their own organizations’ policies and practices that are consistent with the shared vision, mission, and goals?

❑ **Partnership actively recruits new members.**

- ❑ How does the partnership identify and encourage new members to participate?
- ❑ How well are new members informed about the roles, responsibilities, and rewards of participation?
- ❑ How well do new members reflect the diversity of the stakeholders that the partnership serves?

There is a defined governance model.

- Who makes decisions in the collaborative and what authority do they have to make them?
- How will governing responsibilities be rotated over time?
- How will governance reflect and respect the diversity of the collaborative and its stakeholders?

Leadership is effective.

- How adequate is the leadership team in securing resources, managing conflict, balancing needs and interests?
- How is new leadership identified and rotated into key positions?
- How is the partnership administered and managed?
- What could be done to improve it?

Partnership has a communications and outreach plan.

- How do people find out about the partnership's activities?
- How does the partnership publicize activities and provide effective stakeholder education and information about its work?
- How well can the partnership inform and engage people, organizations, and communities with diverse cultural and ethnic interests or for whom English is not their dominant language?
- Does the partnership communicate well and regularly with grassroots organizations?

Financial needs for the partnership are known and addressed.

- How much money does the partnership need and how will it be secured in a timely manner?
- What kinds of funding sources are necessary to be successful?
- Is there a written financial plan and a clear strategy with identified responsibilities for implementing it?

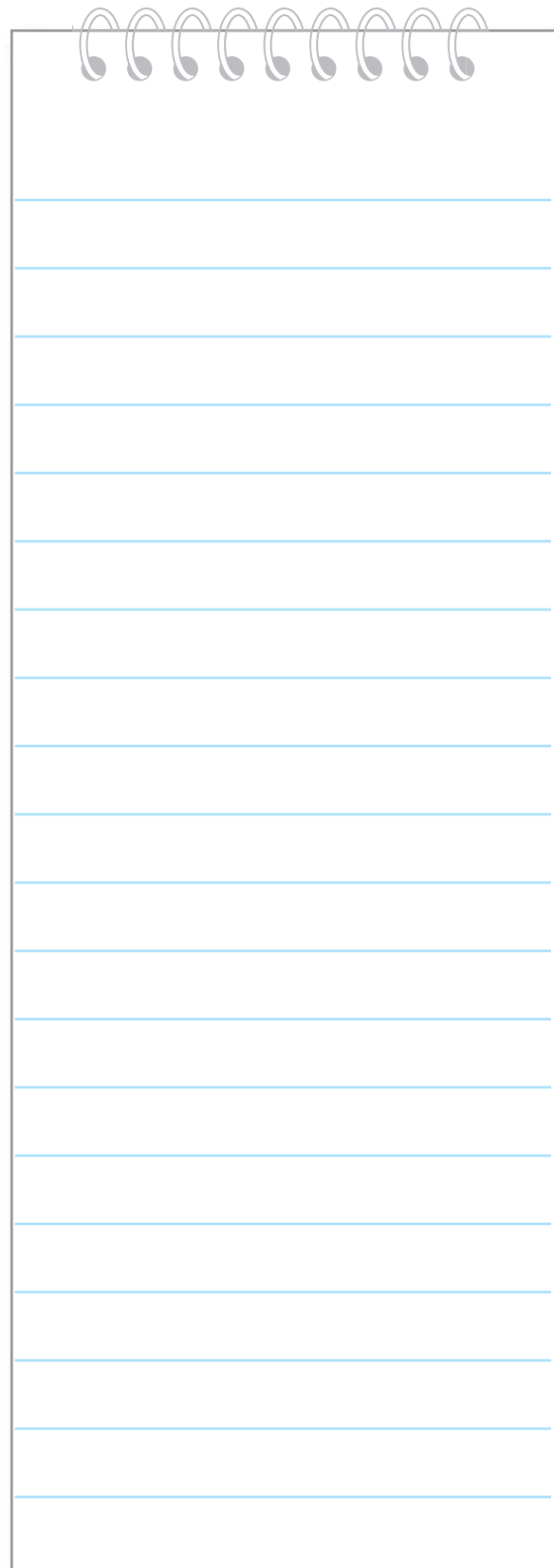
- Has the partnership made certain that the organization through which funding flows does not have greater decision-making authority in the collaborative because of this fiscal management role?

Partnership’s work is monitored, evaluated, and revised on a regular basis.

- How is progress monitored and success evaluated in the partnership?
- Are both the results and processes tracked?
- What data, resources, and evaluation expertise are available to the partnership?
- How can the findings of such evaluations be used to make changes in the partnership’s processes?

Partnership knows what challenges it faces.

- What barriers or conflicts make progress difficult?
- How can those barriers or conflicts be resolved or overcome?



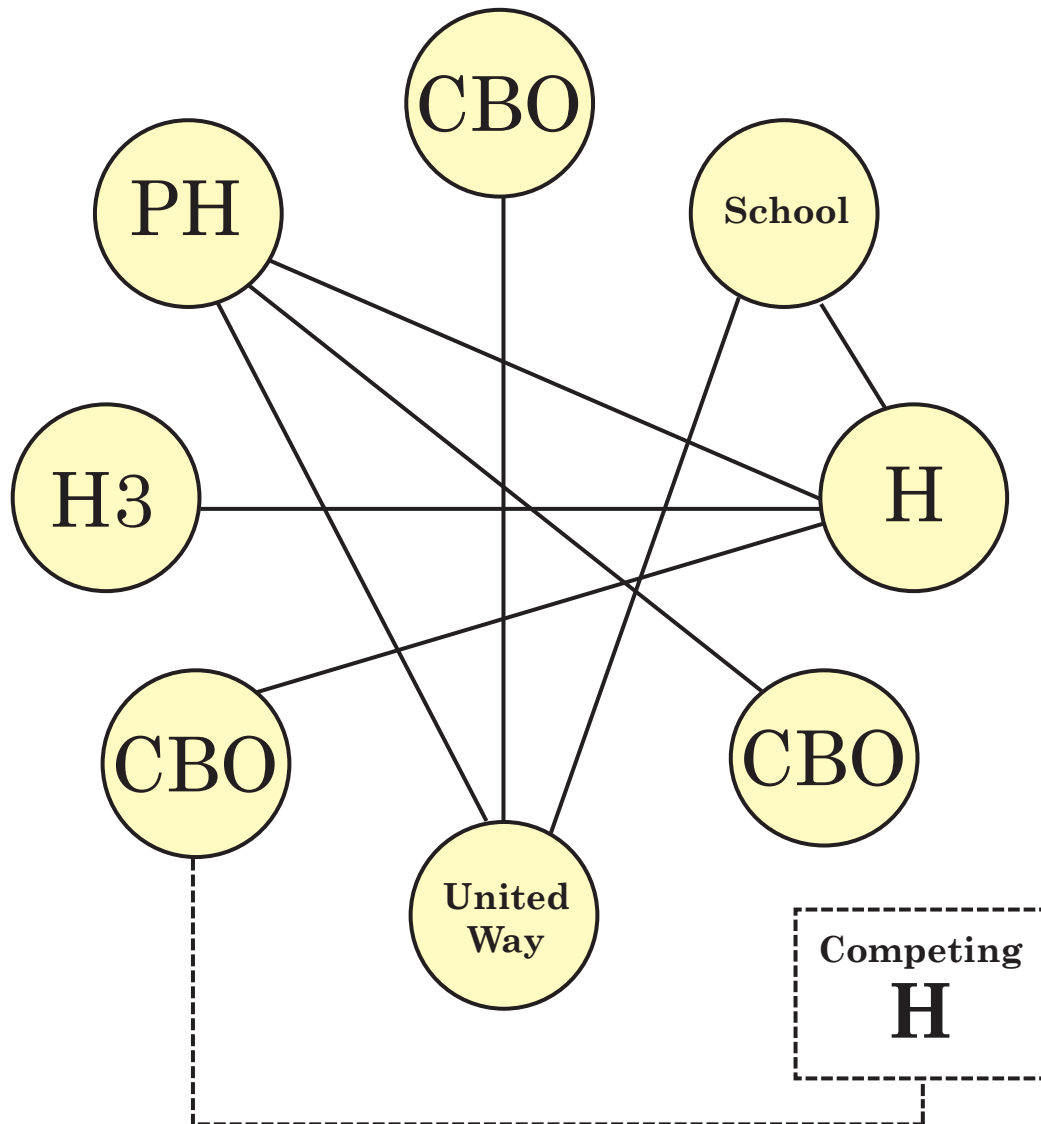
What might a partnership look like in your community?




While there is no formula for partnership composition, it is clear that a successful partnership will bring together all players and stakeholders in its shared goals. It will reflect the local environment where it operates in terms of who provides services, who receives services, and who can help expand both the scope of services and the recipients of services. Through the Community Care Network Demonstration Program, a few different kinds of partnerships emerged. Use these to help you think through who could be involved in your partnership.

- ❑ Local public health department, community hospital, and ethnic constituency groups partner to address immigrant health.
- ❑ Schools, the local university, the health department, a hospital and community clinic coordinate services to provide wraparound case management.
- ❑ State health department, local United Way, physician practice, hospital, and mental health agency create a community-based health care delivery system focused on wellness, education, and outreach.
- ❑ Law enforcement, neighboring community hospitals, and poison control center jointly plan to bolster emergency preparedness efforts.

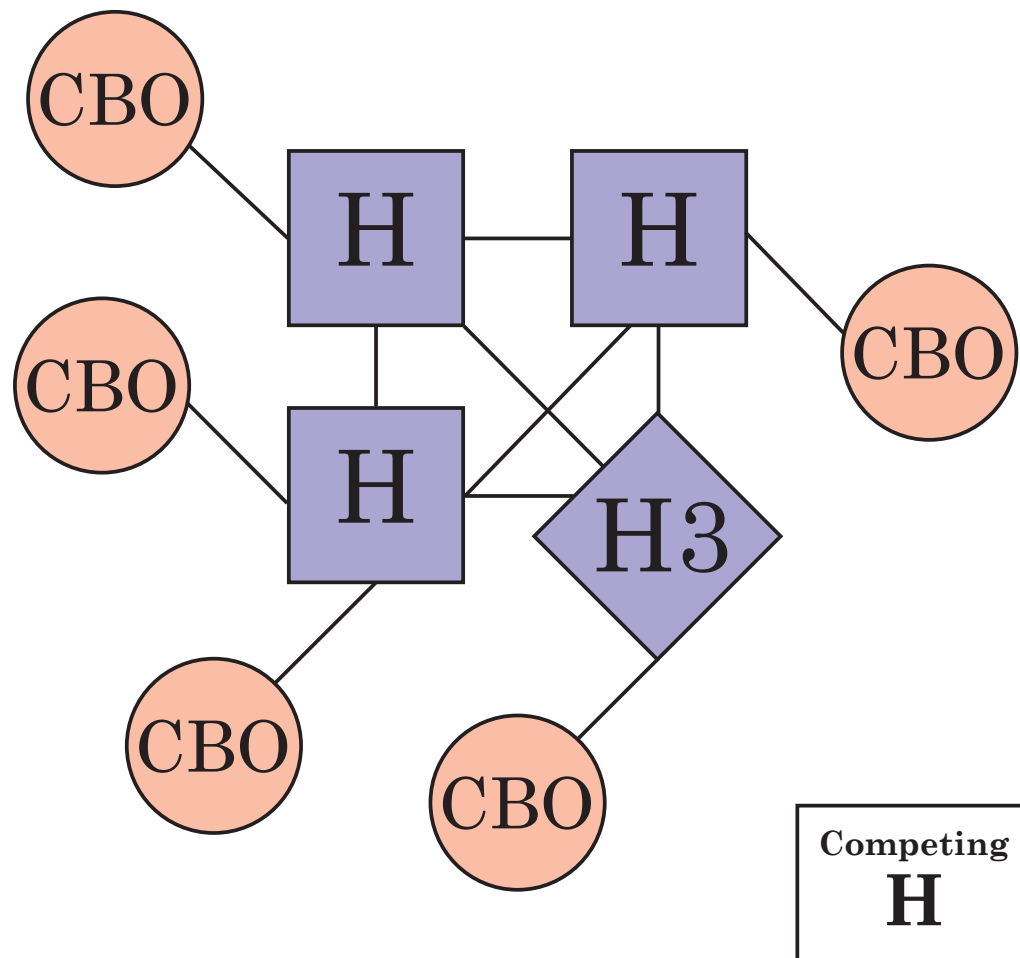
Community Organizations, Providers and Agencies



 Several community and tertiary hospitals in a community partner with public health departments, clinics, public schools, and health care professional schools to:

- ❑ Create and administer managed care plans for Medicaid participants and the uninsured.
- ❑ Expand screening and prevention services to underserved populations.
- ❑ Develop web-based, statewide program to screen and track program eligibility and patient information.

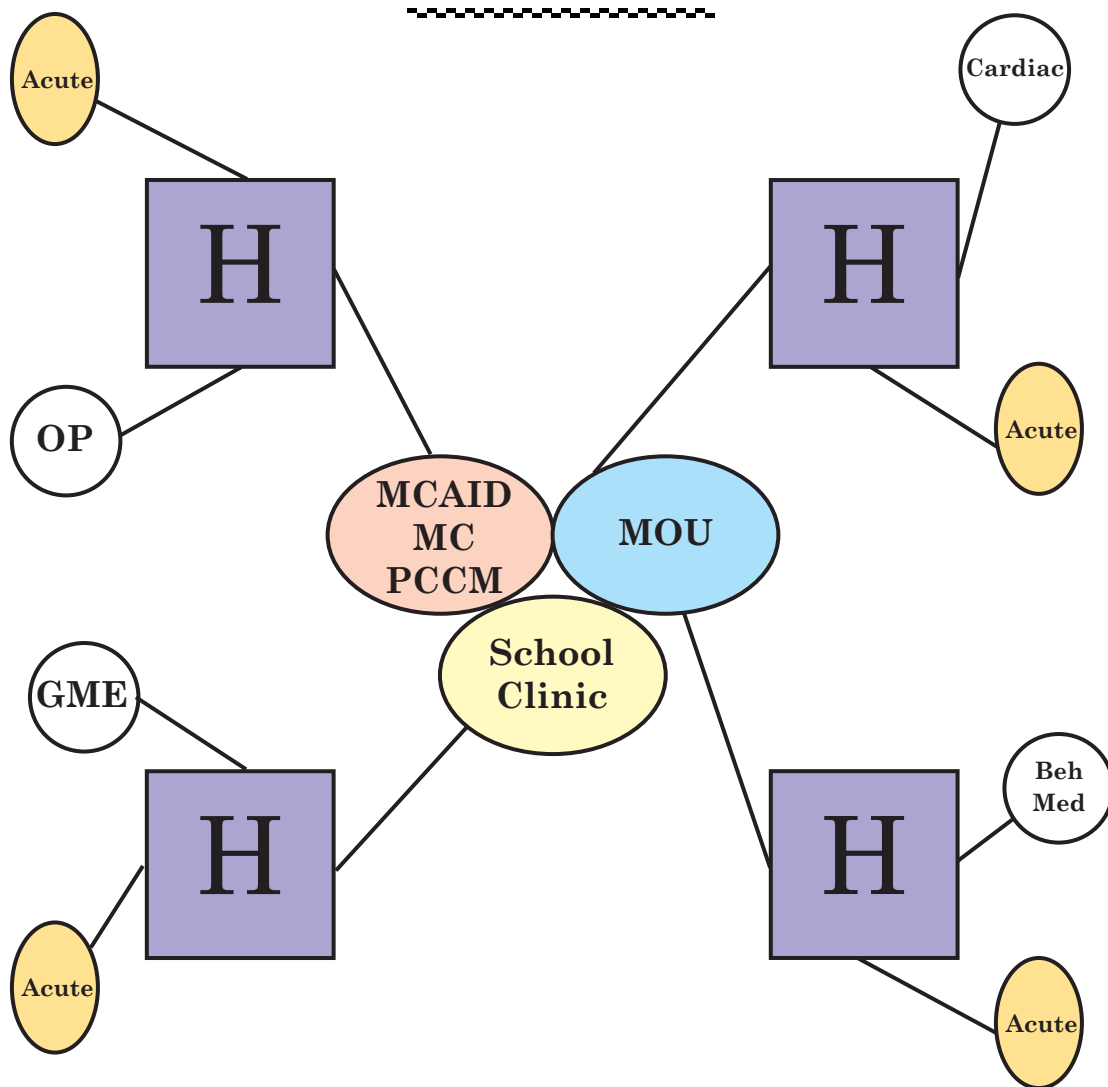
Multiple Hospitals and Community-based Organizations





Competing hospitals identify areas in which they will collaborate-“zones of collaboration”-in order to create a community-based solution to a shared concern, such as creating a primary care case management system for Medicaid recipients or engaging in mutual aid agreements and memoranda of understanding to create community-wide surge capacity in a mass casualty incident.

Neighboring Hospitals and Community-based Organizations



Is your partnership strong and effective?



Effective partnerships provide benefits to participating that far exceed any costs, and there is a clear sense that the partnership is an essential vehicle to getting work done. How do you gauge whether your partnership is effective?

Partnership members feel that benefits are greater than the costs when the partnership has:

- 1) Enough breadth and depth among its membership to achieve its objectives.
- 2) Infrequent and minor disagreements.
- 3) Leaders who build consensus, represent multiple viewpoints, and are successful in securing resources.

Costs are high when:

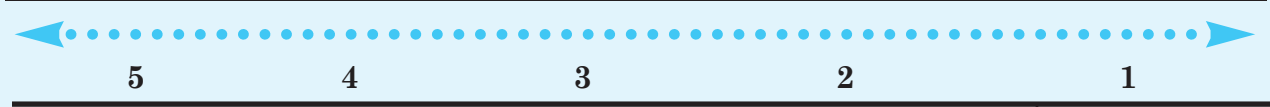
- 1) Leadership is ineffective and leaders advocate their own agenda.
- 2) Partnership activities limit time for members' own work.
- 3) There is not enough public recognition for participation.
- 4) Partnership activities do not reach the members' constituencies.

The partnership is essential when:

- 1) There are positive decision-making dynamics.
- 2) Leadership builds consensus, uses the skills and talents of many, is ethical, and gets things done.
- 3) The partnership has broad-based participation.

The factors below will help you assess how your partnership fares with respect to its benefits outweighing its costs, having effective leadership, and being essential. Use the 1- to 5-point scale below to identify strengths and target areas for improvement.

Doing Very Well, A Strong Asset Doing Well Average Performance Needs Improvement Doing Poorly, Needs Attention



FACTOR	SCORE
Partners share decision-making responsibility.	
Partners represent local nonprofit organizations, businesses, government, and residents.	
There is a high level of trust among partners.	
Roles and responsibilities among partner organizations and individuals are clearly defined.	
Financial and nonfinancial resources have equal weight in determining the distribution of power.	
New members are actively recruited.	
A system of incentives and rewards is in place to recognize and sustain partners' contributions.	
Partnership has an effective mechanism to resolve conflicts among members.	
Participation in assessing needs, identifying existing resources, and solving problems is broad and diverse.	
Partnership has a written financial plan and a clear strategy for obtaining financial resources with identified responsibilities for implementing it.	
Membership in the partnership reflects the diversity of the community's population and organizations.	

Doing Very Well, A Strong Asset **Doing Well** **Average Performance** **Needs Improvement** **Doing Poorly, Needs Attention**



5 **4** **3** **2** **1**

FACTOR	SCORE
Partnership has an effective governance structure.	
Leadership includes high-level, visible leaders.	
Leadership is open to perspectives, viewpoints, and suggestions of all members.	
Staff is accountable to partnership.	
Partnership has clearly articulated goals, strategies, and indicators of progress that provide a sense of direction and consensus among members.	
Learning generated from projects and processes is used to enhance future efforts.	
Partnership has evidence of progress in affecting desired outcomes.	
Partnership has evidence of affecting public policy.	
Partner organizations have changed the way they operate as a result of this partnership.	
Identified issues have improved as a result of this partnership.	
Other issues have been improved indirectly as a result of this partnership.	

Aggregate Score: _____

Overall Partnership Average Score (divide aggregate by 22): _____



The Collaboration Primer

Founded in 1944, HRET is a private, not-for-profit organization that conducts research, education, and demonstration programs addressing health management and policy issues. HRET, an American Hospital Association affiliate, collaborates with health care, government, academic, business and community organizations across the United States to conduct research and disseminate findings that shape the future of health care. To help support HRET with your tax-deductible contribution or for more information, please contact us.



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