Mile High Health Alliance

Wilder Collaboration Factors Inventory Results
Emma Lamothe and Dr. Lisa McCann
March 2016

Introduction

Upon completion of its first year of formal operations in January 2016, the Mile High Health Alliance undertook a rapid, early assessment of the effectiveness of its collaboration using the Wilder Collaboration Factors Inventory (CFI). This evaluation tool assists groups to quickly evaluate the strength of their collaboration by testing their performance on 20 research-tested collaboration factors.

The 42-question CFI survey was sent out to all 23 regular organizational members of the Alliance in January 2016, requesting that either their Voting or Alternative Voting Member, whichever was the more knowledgeable about the work of the Alliance, fill the survey. Respondents were asked to focus their responses on collaboration in the Alliance as a whole, rather than in the Working Groups. The survey was anonymous and took about 15 minutes to complete. Nine survey responses were received, indicating a response rate of 39%.

Scores for the Collaboration Factors

Scores for all 20 collaboration factors for the Alliance were on the positive end of the Wilder scale, which ranges from 1.0 to 5.0, with 1.0 indicating weakness and 5.0 indicating strength in the factor or survey item being assessed (see Appendix for complete survey results). Scores between 4.0 and 5.0 are to be considered strengths, while scores between 3.0 and 3.9 are borderline areas that warrant discussion, and scores between 1.0 and 2.9 are areas of concern that should be addressed.

Results of the survey showed that 13 out of the 20 collaboration factors (65%) ranked as strengths for the Alliance, seven (35%) ranked as borderline factors, and none ranked as factors of concern. The highest-scoring factors were: a favorable social and political climate (4.7); skilled leadership (4.7); unique purpose (4.6); open and frequent communication (4.5); mutual respect, understanding, and trust (4.3); concrete, attainable goals and objectives (4.3); and shared vision (4.3).

Borderline factors warranting discussion included the Alliance's ability to compromise (3.9) and its image as a legitimate leader in the community (3.8). Lower-scoring borderline factors included an appropriate cross section of members (3.6), multiple layers of decision-making (3.6), and adaptability (3.6). The weakest of the borderline factors were a history of collaboration or cooperation in the community (3.3) and sufficient funds, staff, materials, and time (3.3). The Executive Committee and Board of the Alliance may wish to take up these weaker items and discuss how to make improvements.

Results for the Individual Survey Items

Twenty-seven out of the 40 individual survey items (67.5%) ranked as strengths, while 11 (27.5%) ranked as borderline items, and two (5%) ranked as concerns to be addressed. The highest scoring items were as follows: that the time is right for this collaborative project (4.9); that respondents had a lot of respect for the people involved (4.8); and that what we are trying to accomplish with our collaborative project would be difficult for any single organization by itself (4.8). Respondents also strongly agreed: that everyone who is a member of our collaborative group wants this project to succeed (4.7); that the people in leadership positions for this collaboration have good skills for working with other people and organizations (4.7); that they are informed as often as they should be about what goes on in the collaboration (4.6); and that the people who lead the collaborative group communicate well with the members (4.6).

Of the 11 borderline items warranting discussion, the weakest items included: that leaders in this community who are not part of our collaborative group seem hopeful about what we can accomplish (3.6); that our collaborative group has adequate "people power" to do what it wants to accomplish (3.6); that the collaboration is able to adapt to changing conditions (3.2); that each of the people who participates in decisions in the collaborative group can speak for the entire organization they represent (3.1); and that our collaborative group has adequate funds to accomplish what it wants to accomplish (3.1). The Executive Committee and Board may wish to look into these specific items and discuss how to make improvements.

The two items that ranked as concerns to be addressed included: that trying to solve problems through collaboration has been common in this community (2.8); and that all the organizations that we need to be members of this collaborative group have become members (2.8). The first concern should be taken into account in the work of the Alliance, since it reflects a situation of relatively weak collaborative problem-solving in the community prior to the formation of the Alliance. The second concern should be addressed through outreach to important stakeholder organizations who are not yet engaged in the activities of the Alliance.

What is Working Well and What Needs Improvement

In addition to the 40 survey items to be scored, respondents were asked two open-ended questions about what was working well and what needed improvement in the Alliance's collaboration. Regarding what was working well, respondents noted that the people involved in the Alliance are bright, experienced, committed, passionate, and genuinely interested in making our communities healthier. They noted that the Alliance has a good mix of organizations, excellent project management and leadership, and good communication, and that it is making good use of community resources.

Regarding what needs improvement, respondents indicated that the Alliance needs more stakeholders to participate, more members to power our collective thinking and funding, more buy-in from hospitals and specialty care groups, and more stable funding.

Summary and Conclusions

The survey results indicate that collaboration in the Alliance after its first year of formal operations is going very well, particularly as regards its political and social climate, leadership, vision, purpose, goals, communication, and the mutual respect, understanding, and trust that are being experienced between members.

The Executive Committee and Board of the Alliance may wish to discuss the areas of collaboration in which the Alliance was found to weaker, primary among which are to shore up its membership to include additional stakeholders, increase and stabilize its funding, and overcome a relatively weak history of collaborative problem-solving in Denver prior to the formation of the Alliance. They may also wish to work on the Alliance's adaptability, decision-making processes, and ability to compromise, as well as its image as a legitimate leader in the community.

Appendix

Wilder Collaboration Factors Inventory for the Mile High Health Alliance

Scoring Guide:

4.0 to 5.0 – Strengths
3.0 to 3.9 – Borderline, deserves discussion
1.0 to 2.9 - Concerns that should be addressed

Scores for the 20 Collaboration Factors:

Rank	Collaboration Factor	Average
1	Favorable political and social climate	4.7
2	Skilled leadership	4.7
3	Unique purpose	4.6
4	Open and frequent communication	4.5
5	Mutual respect, understanding, and trust	4.3
6	Concrete, attainable goals and objectives	4.3
7	Shared vision	4.3
8	Members share a stake in both process and outcome	4.2
9	Flexibility	4.2
10	Established informal relationships and communications links	4.2
11	Members see collaboration as in their self-interest	4.1
12	Development of clear roles and policy guidelines	4.1
13	Appropriate pace of development	4.1
14	Ability to compromise	3.9
15	Collaborative group seen as a legitimate leader in the community	3.8
16	Appropriate cross section of members	3.6
17	Multiple layers of decision-making	3.6
18	Adaptability	3.6
19	History of collaboration or cooperation in the community	3.3
20	Sufficient funds, staff, materials, and time	3.3

Scores for the 40 Individual Survey Items:

Rank	Item No.	Survey Item	Average
1	6	The time is right for this collaborative project.	4.9
2	8	I have a lot of respect for the people involved in this collaboration work.	4.8
3	36	What we are trying to accomplish with our collaborative project would be difficult for any single organization to accomplish by itself.	4.8
4	14	Everyone who is a member of our collaborative group wants this project to succeed.	4.7
5	40	The people in leadership positions for this collaboration have good skills for working with other people and organizations.	4.7
6	27	I am informed as often as I should be about what goes on in the collaboration.	4.6
7	28	The people who lead this collaborative group communicate well with the members.	4.6
8	5	The political and social climate seems to be "right" for starting a collaborative project like this one.	4.4
9	31	I have a clear understanding of what our collaboration is trying to accomplish.	4.4
10	34	The people in this collaborative group are dedicated to the idea that we can make this project work.	4.4
11	9	The people involved in our collaboration represent a cross section of those who have a stake in what we are trying to accomplish.	4.3
12	19	People in this collaborative group are open to different approaches to how we can do our work. They are willing to consider different ways of working.	4.3
13	26	People in this collaboration communicate openly with one another.	4.3
14	29	Communication among the people in this collaborative group happens both at formal meetings and in informal ways.	4.3
15	32	People in our collaborative group know and understand our goals.	4.3
16	37	No other organization in the community is trying to do exactly what we are trying to do.	4.3
17	21	There is a clear process for making decisions among the partners in this collaboration.	4.2
18	33	People in our collaborative group have established reasonable goals.	4.2
19	35	My ideas about what we want to accomplish with this collaboration seem to be the same as the ideas of others.	4.2
20	11	My organization will benefit from being involved in this collaboration.	4.1
21	15	The level of commitment among the collaboration participants is high.	4.1
22	25	We are currently able to keep up with the work necessary to coordinate all the people, organizations, and activities related to this collaborative project.	4.1

Rank	Item No.	Survey Item	Average
23	4	Others (in this community) who are not part of this collaboration would generally agree that the organizations involved in this collaborative project are the "right" organizations to make this work.	4.0
24	16	When the collaborative group makes major decisions, there is always enough time for members to take information back to their organizations to confer with colleagues about what the decision should be.	4.0
25	18	There is a lot of flexibility when decisions are made; people are open to discussing different options.	4.0
26	24	This collaborative group has tried to take on the right amount of work at the right pace.	4.0
27	30	I personally have informal conversations about the project with others who are involved in this collaborative group.	4.0
28	12	People involved in our collaboration are willing to compromise on important aspects of our project.	3.9
29	13	The organizations that belong to our collaborative group invest the right amount of time in our collaborative efforts.	3.9
30	20	People in this collaborative group have a clear sense of their roles and responsibilities.	3.9
31	23	This group has the ability to survive even if it had to make major changes in its plans or add some new members in order to reach its goals.	3.9
32	1	Agencies in our community have a history of working together.	3.8
33	7	People involved in our collaboration always trust one another.	3.8
34	3	Leaders in this community who are not part of our collaborative group seem hopeful about what we can accomplish.	3.6
35	39	Our collaborative group has adequate "people power" to do what it wants to accomplish.	3.6
36	22	This collaboration is able to adapt to changing conditions, such as fewer funds than expected, changing political climate, or change in leadership.	3.2
37	17	Each of the people who participate in decisions in this collaborative group can speak for the entire organization they represent, not just a part.	3.1
38	38	Our collaborative group has adequate funds to do what it wants to accomplish.	3.1
39	2	Trying to solve problems through collaboration has been common in this community. It's been done a lot before.	2.8
40	10	All the organizations that we need to be members of this collaborative group have become members of the group.	2.8

Responses to Open-Ended Questions

1. What is working well in your collaborative?

- *Bright, experienced people within and leading the group*

- *Commitment and passion of the people involved*

- *People are genuinely interested in contributing to making our communities healthier. Without this, it is just another coalition/collaboration. With this, the work is sustainable*

- *Good mix of organizations*

- *Excellent project management and leadership*

- *Communication*

- *Good use of other community resources to get collaborative off the ground*

2. What needs improvement in your collaborative?

- *Need other system stakeholders to participate in this endeavor*

- *More members to power the collective funding and minds*

- *Even more buy-in from specialty groups and hospitals*

- *More stable funding*