

Sustainability for Community Quality Collaboratives: *An Overview of the Art & Science of Building Staying Power*

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Contents

Introduction

Life Stages: Designing for the Present and the Future

Managing Complexity: Artfully Blending the Stakeholder Organizations

Value Is the Core

Common Community Quality Collaborative Value Propositions

Public Good

Access to Data

Business Opportunities

Publications

Membership

Leading Practices

Leading Practice No. 1: Responding to Compelling Market Circumstances

Leading Practice No. 2: Providing Effective Leadership

Leading Practice No. 3: Maintaining Balance Among Stakeholders

Leading Practice No. 4: Delivering Tangible Value

Leading Practice No. 5: Communicating Proactively

Leading Practice No.6: Establishing a Transparent Management Style

Leading Practice No. 7: Employing Rigorous Prioritization

Leading Practices ‘To Do’ List

Community Quality Collaborative Business Model Insights

Key Themes in Financial Models

Common Types of Funding

Funding Source No.1: Member Fees

Funding Source No. 2: Grant Funding

Funding Source No. 3: Contract Payments

Funding Source No. 4: Revenue from Transactions or Products

Funding Source No. 5: Revenue from Services or Consultation

Funding Source No.6: Investment Returns

Funding Source No.7: Other Funding Sources

Tools to Help Build Staying Power in Your Community Quality Collaborative

Acknowledgments

Appendixes -- Sustainability Planning Toolbox

A. Case Studies

A-1 Pacific Business Group on Health Quality Initiatives: The Power of Diversification

A-2 The Puget Sound Health Alliance: Behind the Scenes of a Big Win

A-3 Pittsburgh Regional Health Initiative: The Quest to Bring Big Ideas to Life

B. Sample Sustainability Planning Project Goals and Roles Statement

C. Sample Timeline Template

D. Sample Prewrite Checklist

E. Stakeholder Surveys

E-1. Sample Priority Stakeholder Survey

E-2. Sample Market Scan Questions

- E-3. Sample Leading Practices Survey
- F. Strategic Prioritization Model
- G. Dashboard (Progress Report)– Program Level
- H. Development Committee Plan
- I. Annotated Bibliography
- J. Q&A on Two Pilot Sites
 - J-1 Oregon Community Quality Collaborative
 - J-2 Louisiana Community Quality Collaborative
- K. Sample Community Quality Collaborative Work Plan
- L. Sample Strategic Sustainability Plan

Introduction

Sustainability, in its simplest terms, is the ability to sustain or continue over time. For Community Quality Collaboratives, the pursuit of sustainability means building, maintaining, and refining an infrastructure that supports and advances the mission of the organization as market and stakeholder expectations change. Sustainability is not limited to funding or succession plans, but encompasses organizational structure, financial planning, the community of participants, and their approach to collaboration.

While there is no “silver bullet” that will guarantee success, there are powerful lessons to be learned from organizations that have faced and resolved similar challenges. These lessons come from a broad range of sources, including health and non-health care services, nonprofit entities, for-profit businesses, and supporting disciplines.

“This is no casual challenge,” said former U.S. Department of Health and Human Services Secretary Mike Leavitt, when he introduced the concept of a Learning Network at the first annual meeting of the Agency for Healthcare Research and Quality (AHRQ) in September 2007. “What I see is a network, literally, across the entire country where every community has or is part of a value exchange. And through that value exchange we’re able to develop information that is local but nationally standardized, and that people who are at the physician- and provider-level can deal directly with a local organization but know that it is part of a larger, national rollup.”

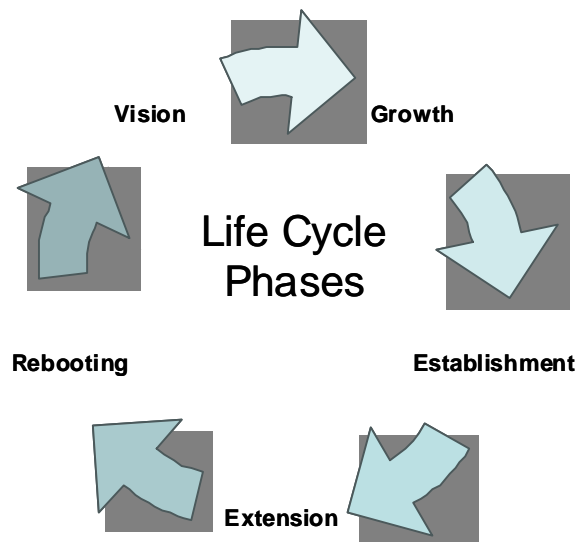
This overview is one component in a technical assistance program on sustainability developed by AHRQ for its Learning Network for Community Quality Collaboratives. The goal of this program is to support Community Quality Collaborative leaders and members in defining strategies that will lead to productive and financially sound collaboratives that grow, thrive, and deliver significant value over time.

This overview and the supporting case studies and toolbox explore the intersection of the *science* of organizational effectiveness—such as models, tools, and proven examples—with the *art* of collaborative success, including creativity, passion, and exploration. (See the list of appendixes for items in the Community Quality Collaborative Sustainability Toolbox.)

Life Stages: Designing for the Present and the Future

As a starting point, leaders should recognize and understand the Community Quality Collaborative’s stage of development in the life cycle of the organization. The challenges and opportunities facing a Community Quality Collaborative will vary depending on its stage of development and the prevailing forces in its local market. A variety of published models and tools exist to define organizational life stages.

For the purpose of this program, a simplified model is presented below, and the table that follows defines activities, questions, and desired outcomes typical of a Community Quality Collaborative in each stage.



Building Sustainability in Each Life-Cycle Phase			
Phase	Common Activities	Key Questions	Desired Outcomes
Vision	<ul style="list-style-type: none"> • Defining goals • Assessing market forces • Recruiting leaders • Securing initial funding 	<ul style="list-style-type: none"> • What are we trying to accomplish? • Who will help us get there? 	<ul style="list-style-type: none"> • Clear goals • High energy and engagement • Initial funding
Growth	<ul style="list-style-type: none"> • Demonstrating value • Recruiting members • Building strategic plans • Leveraging and extending funding 	<ul style="list-style-type: none"> • How will we get there? • What do our stakeholders expect? 	<ul style="list-style-type: none"> • Early “wins” – producing recognizable value • Roadmap for growth • Committed membership
Establishment	<ul style="list-style-type: none"> • Institutionalizing value • Executing plans • Retaining members • Building infrastructure 	<ul style="list-style-type: none"> • Are we on track and delivering value? • How do we sustain commitment and success? 	<ul style="list-style-type: none"> • Recognition as a leader and trusted source • Sustainable business plan • Reliable funding

Building Sustainability in Each Life-Cycle Phase			
Phase	Common Activities	Key Questions	Desired Outcomes
Extension	<ul style="list-style-type: none"> • Delivering recognized value • Assessing results; benchmarking • Adjusting plans and structure 	<ul style="list-style-type: none"> • What is working or not working? • How has the market shifted? 	<ul style="list-style-type: none"> • Continued demonstration of value and recognition • New perspectives • New or renewed funding
At times, organizations are challenged by events and circumstances that force significant regrouping and changes, which may be unplanned or outside of a typical life cycle.			
Rebooting	<ul style="list-style-type: none"> • Responding to significant shifts or negative events 	<ul style="list-style-type: none"> • What went wrong? • How will we adjust and continue? 	<ul style="list-style-type: none"> • Renewed vision • Practical plan of action • Retaining critical leaders, members, and funding

Managing Complexity: Artfully Blending the Stakeholder Organizations

Blending the established organizations that make up a Community Quality Collaborative into an effective collaborative is an important and potentially complicating factor for each Community Quality Collaborative. Each participating organization will have its own design and goals, based on its life-cycle stage, which may or may not coincide with the overall stage of the Community Quality Collaborative. This will provide opportunities to leverage the experience and insight of the member organizations. It also will challenge the collaborative leadership to achieve and maintain balance among the stakeholder organizations.

Key Questions in Building Your Sustainability Plan

- What is the life-cycle phase of the Community Quality Collaborative?
- What are the life-cycle phases of participating stakeholder organizations and how do they inform or impact our Community Quality Collaborative?
- What relevant models and tools will we use to frame and guide our efforts?
Sources may include: technical assistance materials, models used by stakeholder members, Internet resources, books, and other published sources.

Value Is the Core

Community Quality Collaboratives are founded on the principle of collaborating to deliver *value*. Yet, stakeholders have different perspectives on priorities and approaches, leading to variations in the emphasis they place on types of value.

In particular, the Social Return on Investment Model defines three overarching categories of value:

- **Social Value:** “[W]hen resources, inputs, processes, or policies are combined to generate improvements in the lives of individuals or society as a whole.”¹
- **Economic Value:** “[P]roviding additional inputs or processes that increase value, thereby generating a product or service that has greater market value. ...”²
- **Socioeconomic Value:** “[M]aking use of resources, inputs, or processes; increasing the value of these inputs. ... [G]enerating cost savings for the public system or environment of which the entity is a part.”³

A critical consideration in sustainability planning is understanding what stakeholders value: What motivates them to actively participate and contribute? This perspective helps successful collaboratives match the types of value expected by stakeholders with the types of funding available.

Leading Practice Example

Early in its development (2006), the Puget Sound Health Alliance conducted a survey of nearly 2,900 stakeholders in its regional market to assess needs and attitudes related to the mission or value proposition of the Alliance. The findings provided critical insight into the expectations of the various stakeholders that directly influenced the Alliance’s strategic plan.

For more information, see the Puget Sound Health Alliance case study included in the Community Quality Collaborative Sustainability Toolbox.

The “Business Model Insights” section of this document beginning on page 16 provides insight into how several successful collaboratives align value creation with funding.

¹ Jed Emerson, Jay Wachowicz, and Suzi Chun, *Social Return on Investment: Exploring Aspects of Value Creation in the Nonprofit Sector*, REDF Publications, 1999.

² Ibid.

³ Ibid.

Common Community Quality Collaborative Value Propositions

A value proposition is defined as: “The unique added value an organization offers customers through their operations.”⁴ One recommended sustainability strategy for Community Quality Collaboratives is to results that are valued by each of the four stakeholder groups—purchasers, plans, providers, and consumer organizations – in order to sustain their interest and support.⁵

Following is an overview of common categories of value offered by Community Quality Collaboratives. Most organizations offer value in several or perhaps all of these categories, while maintaining focus on central themes.

Public Good

This approach involves contributing to common knowledge or improving services of benefit to many and creates social value. Many efforts of Community Quality Collaboratives and similar organizations contribute to the collective knowledge and improved practice of health care. For example:

- The improvements in patient care generated by the Pittsburgh Regional Health Initiative’s Perfecting Patient Caresm model are transferable to practitioners at large.
- All the organizations studied, along with most Community Quality Collaboratives, publish health care quality information for the general public via Web sites and printed materials. By educating and engaging consumers, these organizations are increasing public knowledge and demand for quality services.

Access to Data

This approach involves sharing, comparing, and applying health care data in efficient, secure, and empirically sound ways and may create any of the three types of value: economic, social, and socioeconomic value, depending on how the information is applied. Collaboration leads to the richest data sets by combining information that would otherwise be evaluated separately. This provides stakeholders with added value. For example:

- The California Cooperative Healthcare Reporting Initiative (CCHRI) coordinates data gathering about California health plans and produces a comprehensive report. The public report is published online, and CCHRI members have access to additional details and expert discussions about the data.

Business Opportunities

This approach involves improved access to customers or service providers, reduced cost to serve, improved pricing or revenues, and insight into new products and services, and it creates

⁴ www.balancedscorecard.org, The Balanced Scorecard Institute, a Strategy Management Group company, December 18, 2007.

⁵ David Shute, MD, “Community Quality Collaborative Sustainability Workgroup Seeks Feedback: Preliminary Thoughts on Sustainability Options.” Presentation given at the National Meeting of AHRQ’s Learning Network for Community Quality Collaboratives, October 2, 2008.

primarily economic value. By working together on collaborative programs, business providers, such as health plans, build relationships with current and potential customers. For example:

- The California Quality Collaborative targets providers in the lowest performing counties in California for focused attention. This approach provides value to the selected providers by improving their services and ability to compete for business, while also benefitting health plans, purchasers, and consumers by raising the bar on quality across the state.

Publications

This approach involves sharing information with a broad audience through published reports, papers, Web sites, tools, and other documents and may create social or socioeconomic value. There may also be economic value if the publications generate revenue.

- In some cases, publications contribute to the public good by making information widely available.
- In other cases, stakeholders may receive and value documentation that is not publicly available. For example, collaborative participants may have access to preview materials before they are published or to view detailed data that is not part of a summarized report.

Membership

There are benefits of participation, which include access to other leaders and information. Collaborative stakeholders may place high value on the interaction and information provided by the Community Quality Collaborative. Specific benefits of membership may include:

- **Knowledge Sharing:** Sharing information among stakeholders; often live or real-time.
- **Networking:** Opportunities to connect both formally and informally with industry leaders and subject-matter experts. Collaborative participants have many opportunities to make connections and learn from each other, as well as from industry thought-leaders at conferences, retreats, and working sessions.

Leading Practices

Successful collaboratives consistently apply organizational focus and discipline—the *science* component—as well as creativity—the *art*—to the following seven leading practice areas that directly impact sustainability:

1. Responding to Compelling Market Circumstances
2. Maintaining Effective Leadership
3. Achieving Balance Among Stakeholders
4. Delivering Tangible Value
5. Communicating Proactively
6. Establishing a Transparent Management Style
7. Employing Rigorous Prioritization

Each leading practice is described in detail with examples on the following pages. The seven leading practices were the result of online research, interviews with staff and stakeholders conducted during the case studies, and review of documents provided by each organization.

Leading Practice No. 1: Responding to Compelling Market Circumstances

This practice addresses the two fundamental questions: What are the challenges in our region?; and, Why are we best suited to address them? Successful collaboratives identify and respond to compelling events, which engage and motivate key people to take action. Following are several examples of compelling circumstances that have directly contributed to the launch and continuation of multi-stakeholder collaboratives devoted to improving health care:

- **Quality Imperative:** The complexity of the American health care system and the recognized gaps in quality, as captured in the sentinel report *Crossing the Quality Chasm*, published by the Institute of Medicine in 2001, are quite compelling.⁶ According to the Network for Regional Health Improvement, a new consensus is emerging on the value of evidence-based care, measurement and reporting of performance, and rewards for results.⁷
- **Escalating Cost:** Since 2000, employment-based health insurance premiums have increased 100 percent, compared to cumulative inflation of 24 percent and cumulative wage growth of 21 percent during the same period.⁸ This trend has created significant pressure on stakeholders, including purchasers, providers, and consumers. These market conditions provided a high degree of motivation for stakeholders, such as those participating in the Puget Sound Health Alliance and the Pacific Business Group on Health, to collaborate to find more effective solutions.
- **Challenging Business Climate:** The Pittsburgh Regional Health Initiative grew out of a major initiative to advance the competitive position of the Pittsburgh business community. Leaders at the Allegheny Conference on Community Development—predominantly corporate CEOs—recognized the importance of health care and agreed to collaborate around promoting quality and development in the health care arena.

Key Questions in Building Your Sustainability Plan

- What compelling circumstances created this Community Quality Collaborative?
- How have those circumstances changed over time?
- How are we responding to changing circumstances?

Leading Practice No. 2: Providing Effective Leadership

This practice ensures that organizations have the right mix of talent and energy to deliver results. Along with passion and experience, the most successful leaders bring with them broad, established, and trusted networks of diverse contacts who may contribute support, ideas, resources, or funding to the collaborative.

⁶ Institute of Medicine, *Crossing the Quality Chasm: A New Health System for the 21st Century*, National Academy Press, 2001.

⁷ Gordon Mosser, Melinda Karp, and Barbra G. Rabson for the Network for Regional Healthcare Improvement, *Regional Coalitions for Healthcare Improvement: Definition, Lessons, and Prospects*

⁸ The Henry J. Kaiser Family Foundation. *Employee Health Benefits: 2007 Annual Survey*. September 11, 2006. <http://www.kff.org/insurance/7672/index.cfm>

For example, the Puget Sound Health Alliance began with a strong start under the passionate leadership of public executive Ron Sims. Sims “convened a broad-based leadership group, the King County Health Advisory Task Force, to develop an integrated strategy to address the systemic problems facing the health care system in the Puget Sound (Washington) region.”⁹ The task force, chaired by two local experts, brought together a broad group of stakeholders, including employers, physicians, a nurse practitioner, a pharmacist, and legal, labor, and economic experts.¹⁰

The task force recommended the creation of a regional partnership to provide the leadership necessary to implement an integrated set of system improvement strategies, which became the Puget Sound Health Alliance.¹¹ Sims was instrumental in recruiting other employers to the Alliance and demonstrating personal leadership in the county’s own health benefits program. The momentum grew with the recruitment of Margaret Stanley, an esteemed executive with broad experience from a variety of market perspectives, and continues under the leadership of Mary McWilliams.

This practice leads to successful collaboratives becoming a trusted source or “go-to” forum for critical issues. These organizations are often sought out as a sounding board for new ideas. This, in turn, creates opportunities to reach new stakeholders, resources, and funding opportunities.

Key Questions in Building Your Sustainability Plan

- Among our leaders, do we have a broad and active network reaching all sectors, including the community, health care industry, and national organizations?
- Do we have the right chemistry in our leadership roles?
- Is the passion of our leadership translating into tangible results?
- Are we being sought after as a forum for new ideas? If not, why not?

Leading Practice No. 3: Maintaining Balance Among Stakeholders

This practice includes balancing perspectives, skills, and work effort on multiple levels, as well as understanding the historical context of the collaboration. Collaboration is the centerpiece of the Community Quality Collaborative program. While there are disciplined methods for developing teams and facilitating collaboration, achieving a productive balance over time is often a fine art.

- For example, the Puget Sound Health Alliance has refined the balance among members, along with the expectations for participation, over time. Currently, the Alliance has a very broad reach, encompassing more than 160 members. Every member contributes financially, and the work is distributed and balanced across the group.

⁹ *A Collaborative Strategy for Better Care, Healthier People and Affordable Costs*, King County Health Advisory Task Force Final Report, June 30, 2004, p. i.

¹⁰ Ibid.

¹¹ *A Collaborative Strategy for Better Care, Healthier People and Affordable Costs*, p. iv.

- Governance also plays a critical role in achieving balance. Successful groups, such as the California Cooperative Healthcare Reporting Initiative and California Quality Collaborative have fine-tuned their governance approaches. Both maintain a thoughtful balance of stakeholders at the steering group-level that typically leads to consensus decisions. On the rare occasions when consensus is not possible, voting has been structured to ensure broad representation among stakeholders.

For more information on governance models, please see the individual case studies included in this toolbox.

Key Questions in Building Your Sustainability Plan

- Do individual stakeholders feel that there is balance in the group and its activities?
- Do the governance and funding models work together to promote balance?
- In practice, do any particular stakeholder views take more precedence on our agenda?

Leading Practice No. 4: Delivering Tangible Value

This practice addresses one fundamental question: Do we consistently deliver tangible results that are valued by our stakeholders? Demonstrating tangible value is critical to securing and sustaining funding, particularly in the business sector where funders and participants must demonstrate a return on their investments. In case study interviews, every stakeholder who also represents a business echoed the need for this practice. Yet, as discussed previously, stakeholders will have different expectations about what value the Community Quality Collaborative should deliver, which may include social, economic, and/or socioeconomic value. It is critical for the Community Quality Collaborative leadership to have a clear understanding of these expectations and a structured plan to deliver.

- For example, the Pittsburgh Regional Health Initiative galvanized a community to a shared goal of infection reduction and reduced central-line infections by 68 percent across more than 30 hospitals. This tangible outcome was the direct result of applying other leading practices, including leadership, transparent management, and rigorous prioritization.
- The California Quality Collaborative delivers quality improvement training to providers who receive low scores on clinical quality. The specific projects were selected based on market data comparing performance across 58 counties in the state, which identified that low performance was clustered in four counties. The training is funded by health plans and free to the participating groups, while the resulting improvements provide value to many stakeholders: Consumers receive better care; the low performers learn to improve their service; and the health plans and purchasers see improvement in their overall quality scores.

Key Questions in Building Your Sustainability Plan

- How do we know what stakeholders value?
- How do we measure what we deliver?
- Are we reliable in delivering what we promise?

Leading Practice No. 5: Communicating Proactively

This practice ensures that both the mission and the results of the organization are well known through frequent communication of a “value story” that is clear and consistent. Successful organizations not only deliver what they promise, they make sure that current participants and potential future stakeholders understand the value delivered and the mission it supports. This is accomplished through a variety of avenues, including Web sites, news coverage, publications, speaking engagements, and informal contacts through the broad networks of the leaders.

Key Questions in Building Your Sustainability Plan

- How well are we known in the market?
- What are we known for?
- Are we leveraging the right channels and approach to reach all our potential stakeholders?

Leading Practice No.6: Establishing a Transparent Management Style

This practice applies effective and enlightened management disciplines such that the Community Quality Collaborative is modeling the behavior desired in the health care market, including transparency, data-sharing, benchmarking (both formal and informal), and using sound data to make informed decisions. For example:

- Successful collaboratives typically share a wide variety of information about the operation with stakeholders and the general public. This practice builds trust and credibility, which are building blocks for other leading practices.
- Each of the successful collaboratives studied publishes a significant amount of information about its programs, staffs, and budgets on its Web site. While organizations may differ significantly, they often will gain insight and ideas by comparing and contrasting their practices with the information shared by successful collaboratives.
- Furthermore, successful collaboratives are profiled frequently in industry reports, such as this sustainability program, to provide insights and benchmarks for others, as well as to elicit feedback and ideas about what works.

To demonstrate progress that supports sustainability, Community Quality Collaboratives should seek and apply relevant benchmarks—formal and informal—for both programs and management practices. It may be challenging to identify relevant benchmarks for management practices owing to variations in the market and the priorities of each organization. However, AHRQ’s Learning Network is a good starting point for Community

Quality Collaboratives to compare processes and successful strategies with each other through project director calls, forum postings, and informal queries.

Key Questions in Building Your Sustainability Plan

- Have we clearly articulated our goals and initiatives in a way that is specific and measurable?
- Are we living up to the goal of transparency in sharing information about our projects and daily operations?
- Are we gathering and using data to make informed decisions? If not, what additional data do we need?

Leading Practice No. 7: Employing Rigorous Prioritization

Making choices among worthy projects is often a challenge, particularly when working with stakeholders with strong opinions. Leading collaboratives differ in their approaches to choosing projects, but all apply an agreed-upon methodology. “Steer clear of trying to do everything,” advised Peter Lee, executive director of national health policy for the Pacific Business Group on Health. For example:

- The Puget Sound Health Alliance has defined a matrix within its strategic plan that weights all initiatives within a total of 100 points. This structure provides a clear roadmap for stakeholders and staff.

Key Questions in Building Your Sustainability Plan

- How do we know what stakeholders value most?
- Are all stakeholders clear on our priorities?
- Do we have an agreed upon methodology for evaluating new opportunities?
- Do we have sufficient resources to deliver on our stated priorities?

Leading Practices ‘To Do’ List

Each Community Quality Collaborative and its leadership likely will have experience in several of these leading practices, but they may be less experienced or facing new challenges in other practice areas. The following checklist offers suggestions for next steps toward developing a sustainability plan that builds on these practices.

The Community Quality Collaborative Sustainability Toolbox includes templates and examples to assist in designing and completing these steps. For a complete list of available tools, see Appendix A.

- **Evaluate current application of leading practices within the Community Quality Collaborative** – A checklist of documents is provided in the toolbox. (See Item 5: Pework Checklist)

- **Survey stakeholders to ensure alignment around leading practices** – A sample survey tool is provided in the toolbox. Simple Web-based instruments work well and are inexpensive to administer. (See Item 6: Three survey samples)
- **Identify additional practices within the Community Quality Collaborative or its member organizations that may be of benefit** – This is an example of where the blending of organizations can benefit the collaborative. The leaders on your board of directors or from programs within the Community Quality Collaborative may have experience and insights about leading practices or lessons learned from their own organizations.
- **Define or refine a sustainability plan** – Planning for sustainability typically will be integrated with the strategic planning process. The toolbox includes components that may be incorporated into a comprehensive strategic plan, including a sample Prioritization Model (Item 7) and Development Committee Plan (Item 9).
- **Share insights through the AHRQ Learning Network**

Community Quality Collaborative Business Model Insights

To help Community Quality Collaboratives identify their strengths and weaknesses by comparing data and processes with successful organizations, this section provides an overview of the business model for each of the studied organizations. Details, including the sources of funds, uses of funds, and products and services, are shared in the case studies.

Key observations are summarized below, including similarities and differences among the studied organizations that may offer benchmarks, contrasts, or ideas for Community Quality Collaboratives. These insights are provided as examples to stimulate ideas and discussion, but they should not be construed as representative of all collaboratives or as a recipe for success in any given market.

Key Themes in Financial Models

The Community Quality Collaboratives highlighted in the case studies that are part of this toolbox demonstrated the following central themes:

- **Anchored:** Each case study reflects a different “anchor” or core of funding. The mission and funding are linked and together influence the approach and priorities of the organization.
- **Diverse:** Each organization relies on a diverse portfolio of funding sources.
- **Mission-focused:** The “Use of Funds” charts (provided in the case studies) illustrate how each organization applies funding among programs. Each organization has a clearly articulated mission supported by measurable objectives that are linked to the funding portfolio.

Common Types of Funding

As illustrated by the case studies, successful, sustainable organizations plan for and secure reliable funding, typically from a mix of the following categories. Each type is discussed in detail below.

1. Member Fees
2. Grant Funding
3. Contract Payments
4. Revenue from Transactions or Products
5. Revenue from Services or Consultation
6. Investment Returns
7. Other Funding Sources

Among the Community Quality Collaboratives in the Learning Network, all of these categories are represented to some degree. However, all categories may not apply to an individual organization.

Funding Source No.1: Member Fees

This category reflects dues paid by stakeholders on a recurring basis, typically for a specified period of time, such as one year, for the opportunity to participate in specified activities.

Benefits	Challenges
<ul style="list-style-type: none"> • Creates a recurring income stream • Allows for flexibility in designing the fee structure • Encourages active and recurring commitment by members 	<ul style="list-style-type: none"> • Developing a fair and acceptable structure for different types of stakeholders • Members may expect influence to match contributions (e.g., those contributing more may expect to have more say) • Ensuring that members renew their membership and pay fees in a timely manner

Member fee structures vary and are often adjusted over time as the organization grows and changes. Examples include fees based on:

- Size of an organization
- Level of participation
- Percentages, such as a percentage of cost savings

In one example, the Puget Sound Health Alliance applies the following fee structure. Every participant pays a fee to participate, ranging from \$25 per year for individual consumers to six-figure contributions for large corporations. The resulting fee structure is based on the type of organization as well as its size, and specifies minimum and maximum contributions for each type of participant. Puget Sound Health Alliance fee categories include:

- Purchasers – fees based on covered lives
- Health Plans – fees based on statewide enrollment
- Providers – fees based on full-time equivalent staff

- Other Organizations – based on a fee schedule
- Individuals – flat fee

In another example that illustrates savings-based fees, the Pacific Business Group on Health (PBGH) coordinates a portion of its funding through a Quality Improvement Fund (QIF), which began when PBGH purchaser members joined together to negotiate with health plans. At that time, the members agreed to contribute to the fund on a per-member basis. These contributions are leveraged with additional financial and in-kind contributions from other stakeholders. The funds are used to support quality programs, including the California Quality Collaborative and the California Cooperative Healthcare Reporting Initiative. While QIF funding is not guaranteed, it has continued for more than 10 years.

Funding Source No. 2: Grant Funding

This type of funding is provided by an organization, such as a foundation, corporation, or government entity, to encourage the development of desired benefits. The use of grant funds may be restricted by the grantor, based on specific objectives, or by the grantee, based on organizational guidelines that ensure integrity. In some cases, unrestricted grant funds are provided to support the daily operations of a nonprofit organization.

Benefits	Challenges
<ul style="list-style-type: none"> • Reliable income, once approved • Proposal process focuses work effort and priorities • Granting organization may provide additional resources and support in addition to financial funding 	<ul style="list-style-type: none"> • Time and discipline required to write proposals and secure grants • Grant funding may be for a limited period of time, which may not be sufficient to achieve all desired objectives • Grantor objectives and approach may not precisely match Community Quality Collaborative objectives and/or may distract from the core objectives of the Community Quality Collaborative

Funding Source No. 3: Contract Payments

This category includes government and other similar contracts that provide funding for an organization to achieve specific objectives.

For example, the Louisiana Health Care Quality Forum has been funded for three years under a contract with the Louisiana Department of Health and Hospitals. This contract specifies objectives and deliverables that the Forum is expected to achieve. Within those objectives, the Forum has considerable flexibility to design a model and approach that will be effective in Louisiana.

Benefits	Challenges
<ul style="list-style-type: none"> • Reliable income, once approved • Produces tangible deliverables • Contracting organization may provide additional resources and support in addition to financial funding 	<ul style="list-style-type: none"> • Time and discipline required to write proposals and secure contracts • Contract objectives and approach may not precisely match overall Community Quality Collaborative objectives and/or may distract

	from the core objectives of the Community Quality Collaborative
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Funding Source No. 4: Revenue from Transactions or Products

This category reflects fees paid for specific items or activities, such as publications or access to specific data sets. The fee structures vary depending on the structure of the Community Quality Collaborative, its funding mechanisms, and the level of participation. For example, in some cases, Community Quality Collaborative members or program participants receive end products while non-participants pay a fee. In other cases, all recipients pay a fee for specific products or increased access, although members or participants’ fees may be discounted.

Health Information Technology is a promising area for generating this type of income. For example, OneHealthPort.com based in Seattle began as a secure portal for providers to use a single sign-on to access multiple plans’ eligibility information. The Puget Sound Health Alliance is working with OneHealthPort to provide access to provider-level quality data. At this time, the portal is financially supported by the health plans, but the technology enables broader and more creative business models that may generate additional funds from other sources.

Benefits	Challenges
<ul style="list-style-type: none"> • Direct link between activities and funding • May increase market perception of value 	<ul style="list-style-type: none"> • Fee structure may conflict with other goals, such as access and transparency • When transactions involve data, there may be complex privacy issues that need to be addressed

Funding Source No. 5: Revenue from Services or Consultation

This category includes fees paid for specific services by an individual or group, such as speaking fees or advisory services.

For example, The California Cooperative Healthcare Reporting Initiative organizes and manages an integrated chart-pulling activity to support its annual *Report on Quality*, thereby linking the initiative’s funding, services, and mission. The Pittsburgh Regional Health Initiative (PRHI) has successfully applied manufacturing models and experience to improve safety and quality in health care. “Over the last five years, the PRHI has helped many hospital units and community health centers to streamline their work and eliminate waste and error using its own Perfecting Patient Care sm system, a quality engineering methodology adapted from the Toyota Production System.”¹² PRHI charges modest fees for the program.

Benefits	Challenges
<ul style="list-style-type: none"> • Direct link between activities and funding • May increase market perception of value • Additional opportunities to network 	<ul style="list-style-type: none"> • Ensuring a good fit with objectives and nonprofit status

¹² *Community Health Value Collaborative*, National Business Coalition on Health, <http://www.nbch.org/CHVC/summaries/pittsburgh.cfm>.

Funding Source No.6: Investment Returns

This category reflects returns on invested funds. This typically is not a substantial source of income for Community Quality Collaboratives. Organizations that have funds to invest generally choose very conservative investment options to minimize risk.

Benefits	Challenges
<ul style="list-style-type: none">• Recurring source of funds	<ul style="list-style-type: none">• Typically not a significant source of funding for health care collaboratives• Ensuring good fit between investment choices and organizational goals

Funding Source No.7: Other Funding Sources

Collaboratives may also consider out-of-the-box strategies to achieve organizational goals, including developing alternative sources of funding. When seeking creative strategies, consider the following questions:

- How can we partner with business ventures?
- What innovations have nonprofit organizations in other sectors developed?
- What can we learn from for-profit collaborative ventures?
- How can we inject fresh ideas from individuals in industries, sectors, or disciplines who might not be at the table?

In summary, a variety of opportunities exists for Community Quality Collaboratives to establish a niche that delivers significant value while diversifying funding sources that will lead to sustainability.

Key Questions in Building Your Sustainability Plan

- What types of value does the Community Quality Collaborative deliver? Are the value delivered and the sources of funding aligned?
- Is our funding portfolio adequately diversified?
- What other funding opportunities or sources may exist?
- Are all our funding sources compatible with our mission?
- Which funding strategies have been most effective? Are there ways we can further develop and extend those approaches?

Tools to Help Build Staying Power in Your Community Quality Collaborative

This *Overview* was created to provide insight and motivation to assist Community Quality Collaboratives in applying both *art* and *science* to building sustainable strategies. The needs of each Community Quality Collaborative will vary, depending on its market and stage of development. However, much can be learned and applied from successful collaboratives, as well as from related ventures and disciplines.

As you build strategic plans with a focus on sustainability, this Community Quality Collaborative Sustainability Program provides tools to help you:

- Understand and validate the starting point for your Community Quality Collaborative today
- Survey stakeholders to confirm expectations
- Apply and share leading practices
- Identify gaps and opportunities in your current approach
- Define a clear plan of action to integrate themes of sustainability into strategic planning as well as daily activities
- Measure and evaluate progress
- Share your successes and challenges with the Learning Network

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Reviewers

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We consider our Learning Network tools to be works in progress and always welcome your comments. Please forward suggestions to AHRQ's **Peggy McNamara** at peggy.mcnamara@ahrq.hhs.gov.

Appendixes: Sustainability Planning Toolbox

ID	Item	Description
A-1 A-2 A-3	Case Studies	The following three case studies offer insights about how three collaboratives approach sustainability strategies, funding models, and governance structures A-1. Pacific Business Group on Health Quality Initiatives: The Power of Diversification A-2. The Puget Sound Health Alliance: Behind the Scenes of a Big Win A-3. Pittsburgh Regional Health Initiative: The Quest to Bring Big Ideas to Life
B	Sample Sustainability Planning Project Goals and Roles Statement	This is a template for defining your sustainability planning effort, including goals, activities, roles, and timelines.
C	Sample Timeline Template	This is a template to provide a one-page view of activities and deliverables.
D	Sample Prewrite Checklist	This is a guide for organizing related documents and refreshing participants' knowledge of prior strategic planning work.
E-1 E-2 E-3	E-1 Sample Priority Stakeholder Survey	This is a sample of how one Community Quality Collaborative gathered feedback on what their stakeholders value.
	E-2 Sample Market Scan Questions	This is a sample questionnaire for structuring interviews of leaders in the marketplace, including stakeholders and external players.
	E-3 Sample Leading Practices Survey	This template can be used for gathering feedback about how effectively the Community Quality Collaborative is applying the seven leading practices associated with sustainability, which might be used to prioritize sustainability needs.
F	Strategic Prioritization Model	This shows how one Community Quality Collaborative has defined and is tracking their priorities using a point system.
G	Quarterly Committee Dashboard	This example shows how a Community Quality Collaborative is tracking the commitments of each program, to ensure that the Community Quality Collaborative delivers tangible value.
H	Development Committee Plan	This example shows how a Community Quality Collaborative delegated the work of building and executing its sustainability plan to a committee.
G	Annotated Bibliography	This bibliography provides a reference list of related books, Web sites, and other resources.
J-1 J-2	Q&A on Two Pilot Sites	These questions and answers address key issues of sustainability for the J-1 Oregon Community Quality Collaborative J-2 Louisiana Community Quality Collaborative
K	Sample Community Quality Collaborative Work Plan	This is a sample work plan for the Oregon Community Quality Collaborative.
L	Sample Strategic Sustainability Plan	This is a sample strategic sustainability plan for the Oregon Community Quality Collaborative.

* Table last updated on January 29, 2009.