FSG
REIMAGINING SOCIAL CHANGE

Sustainability Toolkit and Learning Collaborative

PREPARED FOR BMS FOUNDATION GRANTEE SUMMIT | APRIL 11, 2018

Introduction

Organizational reflection

Input for learning collaborative

Why is the "system" relevant for your work?

What are we talking about today?

GOAL
To identify how this system can enable you to sustain or scale your programs beyond the initial BMSF grant

Sustainability is core to the Foundation's goals

BMSF Theory of Change

Drive Mindset Change/Raise Awareness and Consciousness about Healthcare Inequities

⬇

Fund High Impact and Accountable Health Equity Work/Innovation R&D focused on community-clinic collaboration

⬇

Share Innovations and Lessons Learned

⬇

Advocate for and advance scaling and sustainability of best practices --- prioritizing highest risk populations

- This work is core to the Foundation's Theory of Change

- Our work will include:
  - Changing mindsets,
  - Expanding funding for high-impact solutions
  - And will enable organization to advocate for scale and sustainability

In the coming months, we will be facilitating a learning collaborative

- By the end of the learning collaborative, the **goal is for grantees to be well-prepared** to effectively engage in discussions with high-potential partners about sustainability

- The learning collaborative will be based on a **five-step toolkit** that was developed last year, to walk teams through each component step-by-step through monthly sessions

- The **learning collaborative** will provide opportunities for grantees to make progress on their own in between sessions, learn from one another, and hear from external perspectives (e.g., from payers, health systems leaders)

- Nearly every grantee will have an **opportunity to participate**. The collaborative will start with two groups: an early and a late-stage grantee cohort. The next round, starting in September, will be open to others.

The goal will be to help organizations build competencies to advance and sustain their work

Embrace a systems change approach to addressing health equity

Leverage short-term, grant-funded programing to spur long-term, sustained improvements in **the overall health system**

Cultivate new, mutually beneficial partnerships

Identify **new and nontraditional partners** striving towards similar goals of health systems change

Leverage the resources and expertise of others beyond funding

Seek to leverage the assets (e.g., expertise, new relationships, experience) of others to **complement existing resources and advance towards a common goal**

Take a long-term and comprehensive view of sustainability

Address the opportunities and challenges related to sustaining programmatic objectives at the outset, considering **sustainability choices alongside program strategy and design**

This toolkit includes five steps to support program sustainability and scale

1 | **VISION & GOAL SETTING** | *Articulating a vision for **sustaining improvements** in the health system*

2 | **HEALTH SYSTEM MAPPING** | *Developing a **comprehensive view of potential partners** in the system*

3 | **PARTNER ACTION PLANNING** | *Developing an **action plan** for engaging current and prospective partners*

4 | **DATA STORYTELLING** | *Identifying compelling **data-driven stories** for different partner types*

5 | **PARTNER ENGAGEMENT** | *Developing a **value proposition** and engaging potential partners*

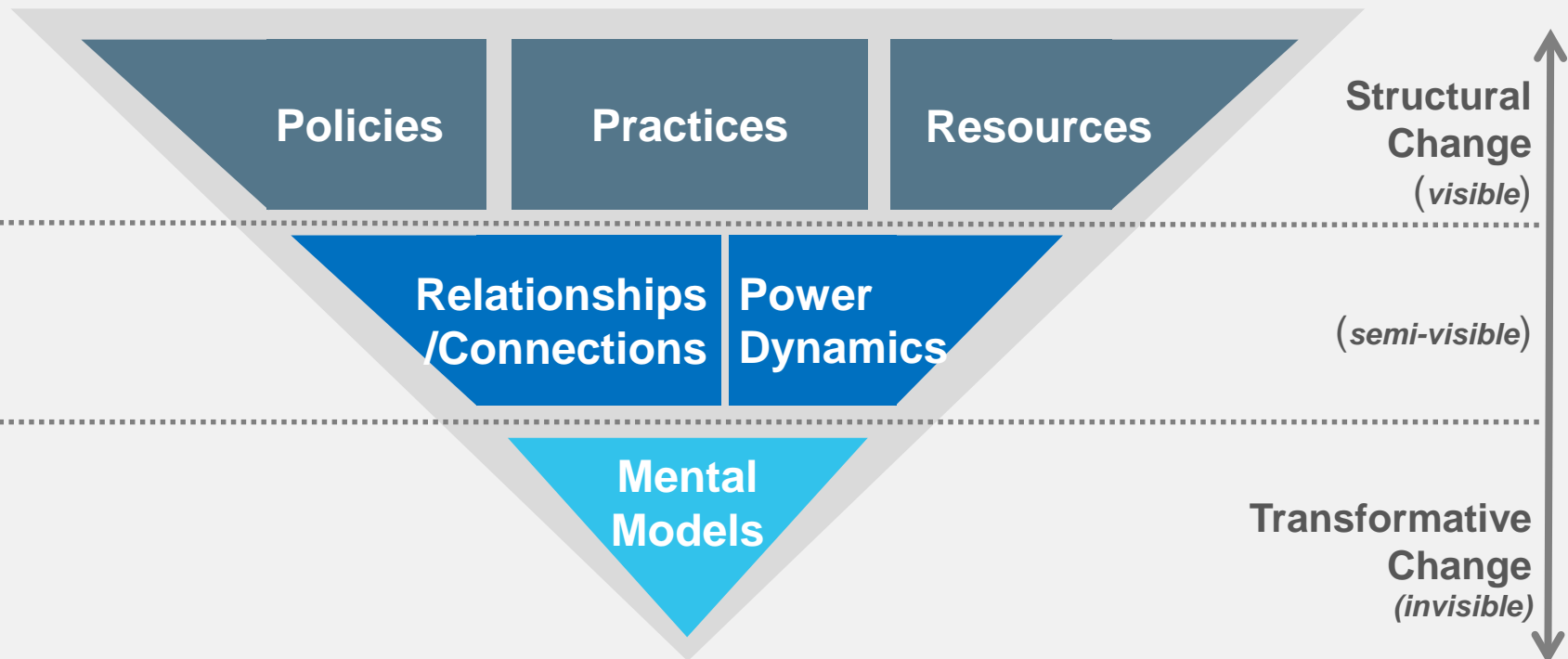# We will be starting with the concept of systems change

systems change

A system is a group of interacting, interrelated, and interdependent components that form a complex and unified whole. A system's overall purpose or goal is achieved through the actions and interactions of its components.

Changing a system, requires a history-dependent and holistic view of the system. Systems change leaders facilitate a shared vision for change to influence the key leverage points and, as necessary, shift the flow of resources to affect that system.

Six conditions can drive systems change

Systems change is a process of shifting the conditions holding a problem in place.

Systems Change Conditions

Policies	Practices	Resources

Relationships /Connections	Power Dynamics

Mental Models

Structural Change (*visible*)

(*semi-visible*)

Transformative Change (*invisible*)

One actor alone cannot create systems change, which is why effective partnerships are critical to achieving your goals.

Engaging in systems change requires new ways of working

	FROM. . .	TO. . .
ROLE OF PARTNERS	• Primarily seeking **financial resources** from partners • Having **one-on-one transactional or opportunistic relationships** with partners	• Leveraging money, people, knowledge and information from partners to **create the conditions** for change • Establishing proactive, long-term, multi-stakeholder relationships
APPROACH TO STRATEGY	• **Pre-determining** a strategy and **executing** against a set plan	• **Adapting** a strategy and plan as the work and external context evolve • **Co-creating** strategy with others • Aim to influence broader **systems**
EXPECTED TIMEFRAME FOR RESULTS	• Duration of a **grant or operating cycle**	• **Longer-term** population-level outcomes that show indicators of progress in the short- and medium-term
MEASUREMENT APPROACH	• Measuring **outputs** of programs or services	• **Monitoring indicators** that inform course-correction and learning • Building **data** that makes the case to partners and systems influencers

Sustainable health programs engage with different types of partners

Local & National Philanthropic Donors

Large Employers

Healthcare Systems

Private Payers

Public Payers

Partners can be engaged in different ways

Increasing Level of Partnership Engagement

Inform	Consult	Involve	Collaborate	Co-Lead
Provide an overview of program objectives to expand the reach and understanding of your program	Gather feedback from targeted stakeholders on the project's goals, processes, shared metrics, or strategies for change	Work directly with stake-holders to leverage mutually reinforcing activities and ensure that concerns are consistently understood and considered	Partner with stake-holders in each aspect of decision-making to sustain impact beyond individual interventions	Place final decision making in the hands of stakeholders so that they drive decisions and implementation of the work

Sustaining programs will require deep partnerships

Evaluation data can "make the case" to partners

1 **HEALTH OUTCOMES FOR INDIVIDUALS AND POPULATIONS**

- Improved patient likelihood of survival
- Reduced rates of morbidity and complications
- Improved patient quality of life
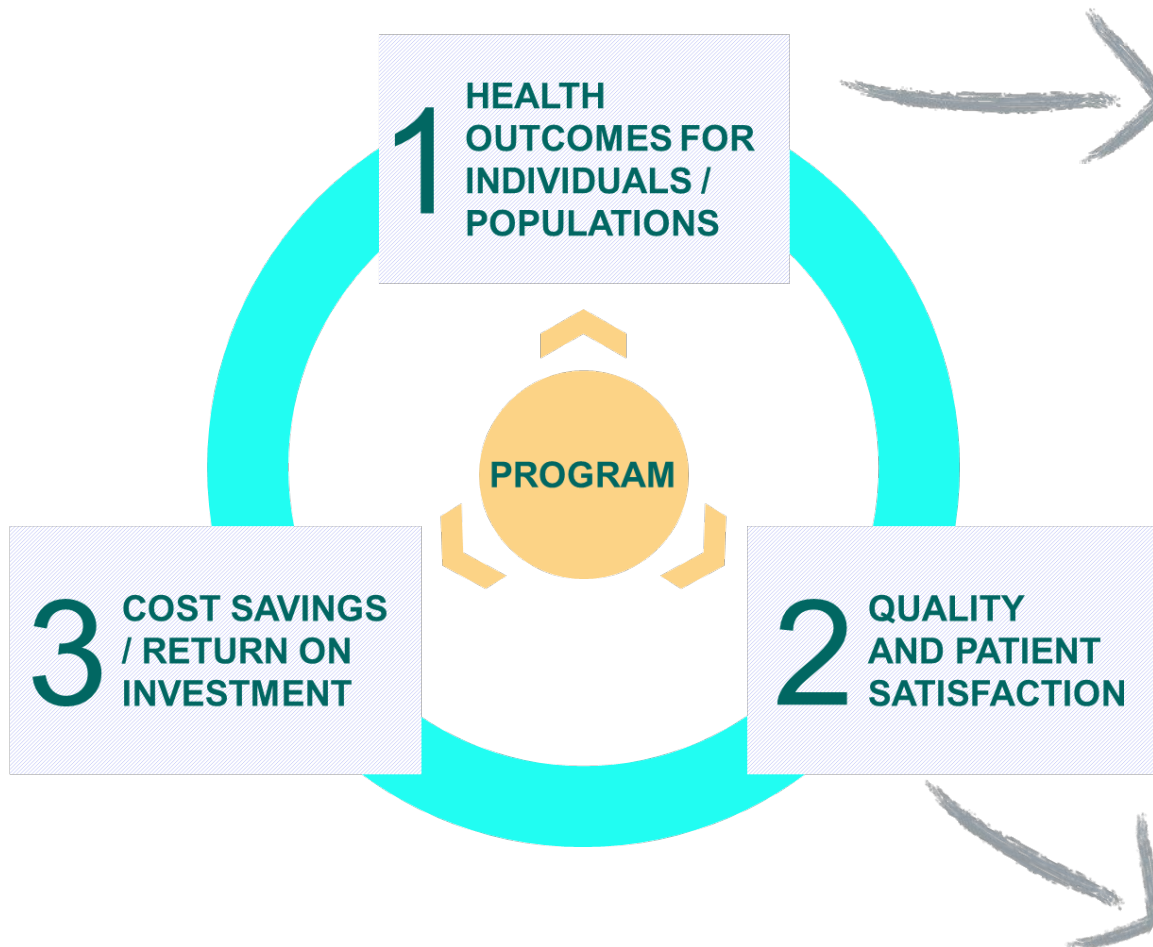
2 **QUALITY AND PATIENT SATISFACTION**

- Improved patient satisfaction
- Reduced rates of medically critical errors
- Improved quality "scores"

3 **COST SAVINGS / RETURN ON INVESTMENT**

- Reduced emergency department use
- More efficient human resource allocation
- Reduced cost of treatment with early diagnosis

Articulating the connections between these outcomes is critical to "making the case"

1 HEALTH OUTCOMES FOR INDIVIDUALS / POPULATIONS

PROGRAM

3 COST SAVINGS / RETURN ON INVESTMENT

2 QUALITY AND PATIENT SATISFACTION

- Health outcomes are relevant for all audiences
- Most programs already collect this information

- Measures of quality, patient satisfaction, and cost savings are most compelling for leadership at payer & provider organizations
- These will become increasingly important with the current shift to value-based care
- Fewer programs collect this information today

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Sustainability "self-diagnosis"
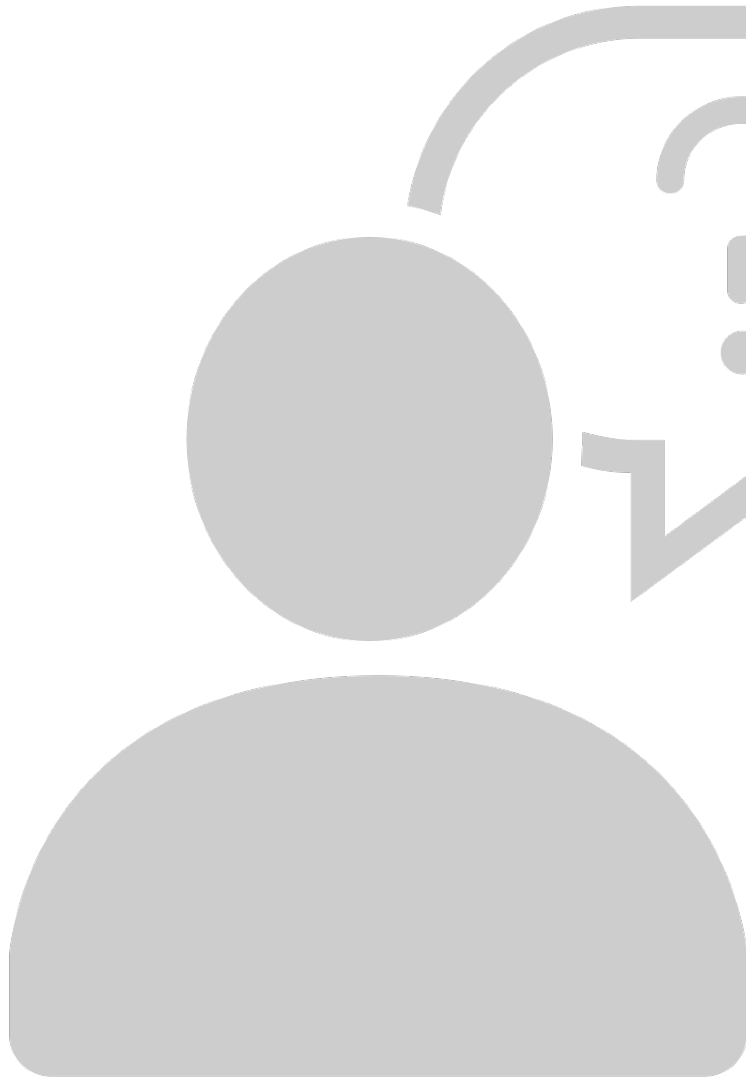
- The next 30 minutes are reserved for you to reflect on the different dimensions of the toolkit with your team

- The worksheets provided can serve as a "self-diagnosis" for where you are and what you will need to think about / plan for further

Discussion Questions

1 **VISION & GOAL SETTING**
- *What is your goal for this work and how does the BMSF grant help you achieve that goal?*
- *What is your "theory of change" for this work beyond the BMSF grant?*

2 **MULTI-SECTOR SYSTEM MAPPING**
- *What types of partners (e.g., community organizations, health systems, payers) are most relevant for your work?*
- *How are your relationships with these partners? Where are they strong / weak?*

3 **PARTNER ACTION PLANNING**
- *Which partners are important for sustaining your work beyond the grant period (e.g., health system community benefits programs, Medicaid waivers, local foundations)?*
- *What is your "ask" for these potential partners?*

4 **DATA STORYTELLING**
- *For these potential partners, what are their motivations? What messages and/or messengers will be most compelling (e.g., who are champions for your work?)?*
- *What data can you share to tell that story?*

5 **PARTNER ENGAGEMENT**
- *Where have you had success in engaging partners?*
- *What has been challenging (e.g., a certain type of partner or an aspect of developing partnerships)?*

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Input into Learning Collaborative

- Which **elements of the toolkit** do you feel will be most helpful for your work?

- What **questions or topics** will be most important for the learning collaborative to focus on?

- What can we incorporate into the learning collaborative to help you to **share tools and lessons** within the learning collaborative cohort? Out to your project team?

Sustainability Toolkit & Learning Collaborative Worksheet

Assessment		Current state	Needs / questions
VISION	What is your goal for this work and how does the BMSF grant help you achieve that goal?		
	What is your "theory of change" for this work beyond the BMSF grant?		
SYSTEM	What types of partners are most relevant for your work?		
	How are your relationships with these partners? Where are they strong / weak?		
PARTNERS	Which partners are important for sustaining your work beyond the grant period?		
	What is your "ask" for these potential partners?		
DATA	For these partners, what are their motivations? What messages and/or messengers will be most compelling?		
	What data can you share to tell that story?		
ENGAGE	Where have you had success engaging partners?		
	What has been challenging?		