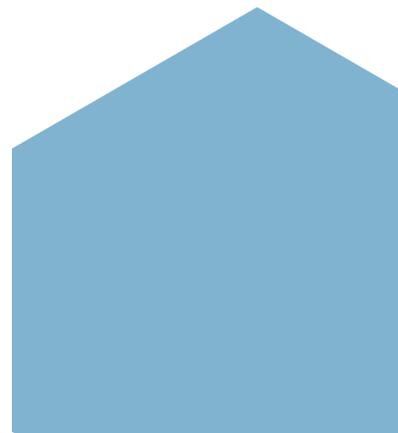
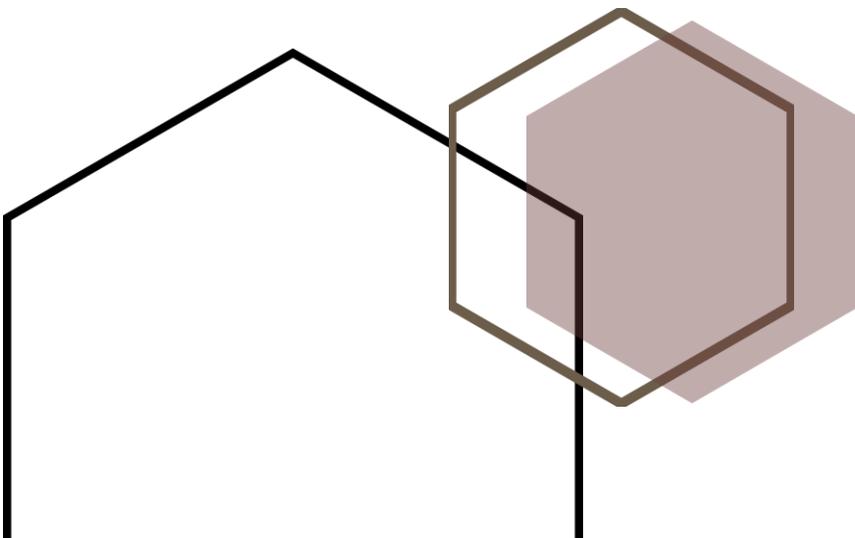


Insights on the Health Care and Health Promotion Synergy Initiative Model of Collaborative Problem-Solving

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June 12, 2018



Insights on The Synergy Initiative Model



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Executive Summary

In the fall of 2017, The Health Foundation of Central Massachusetts, Inc. (the “Foundation”) invited a research team from Wake Forest School of Medicine to conduct a review of the model of collaborative problem-solving embodied in the Health Care & Health Promotion Synergy Initiative (“the Synergy Initiative”). This initiative, formally launched in 2000, has supported 17 collaborative groups throughout the region in solving complex health problems involving issues such as mental health, oral health, homelessness, hunger, criminal justice, and breaking cycles of poverty. Under the Synergy Initiative, organizations concerned about a particular health issue apply to the Foundation for funding with the intent of developing and implementing a comprehensive systems-oriented strategy. Projects selected for funding receive an average of \$2 million over five years to support the planning process, the implementation of new programming, and the hiring of an evaluation consultant to support decision making and sustainability. In addition to these financial investments, the Foundation supports each Synergy Initiative project through the direct engagement of the CEO and/or Vice President for Programs.

The Synergy Initiative employs a model of collaborative problem-solving that is quite distinct from prevailing practice within philanthropy. Foundations throughout the United States have developed and implemented initiatives to foster collaborative problem-solving on large-scale community issues, but published evaluation reports indicate that many of these initiatives have failed to achieve their objectives. From the research team’s perspective, the Synergy Initiative model has a number of innovative and rigorous features which allow for more effective, impactful strategies. In consultation with Foundation staff, the research team identified the following five distinctive elements:

- Community-based groups (rather than the Foundation) have the authority to define the issue that will be the focus of their Synergy Initiative project.
- The Foundation emphasizes that the success of the project is gauged by its **impact** (especially systems-level impact), rather than simply demonstrating high-quality collaboration.
- The collaborative is expected to adopt and implement evidence-based strategies.
- An evaluator funded by the Foundation actively supports the project by assisting in the development of measurable objectives and data systems and by conducting formative and summative evaluations.
- The Foundation is an active partner throughout the collaborative process, assisting with planning, deliberation, learning, strategy development, and sustainability efforts.

The current study explores the question of how these elements influence the collaborative problem-solving process and support the development and sustainability of effective programs. The Foundation and the research team collaborated in designing a targeted study of four completed Synergy Initiative projects which are regarded by the Foundation as exemplars of what the Synergy Initiative model looks like when it is implemented according to design. The four studied projects are: Central Massachusetts Oral Health Initiative (CMOHI), Together for Kids, A Better Life, and Worcester Initiative for Supported Reentry (WISR).

Based on the interviews with key informants and a review of project-related reports, the research team concluded that each of the four exemplar projects has generated discernible and meaningful outcomes. These include new and/or improved programming, policy and systems changes, improved coordination,

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and increased organizational and individual capacity. Moreover, the new programming has provided measurable benefits for the people being served.

The research team identified the following seven mechanisms through which the Synergy Initiative model supported the collaboratives over the course of the problem-solving process:

1. **Committed partners:** Because applicants were able to select their own issue, the partners entered into the collaborative problem-solving process with high levels of commitment and enthusiasm.
2. **Entering with ambitious expectations:** When asked to explain their project's success, interviewees consistently pointed to the Foundation's high expectations for impact.
3. **Persistence:** Participants maintained their commitment and momentum throughout the ups and downs of a long-term process of planning, experimentation, adjustment and sustainability.
4. **Focusing on higher-order systems change:** With active encouragement from the Foundation, the four collaboratives pursued sophisticated and substantive forms of systems change.
5. **Rigorous thinking and analysis:** As a result of the expectations and supports offered by the Foundation, the collaboratives used rigorous forms of thinking, analysis and learning to select, design, implement, test, and adjust their program strategies.
6. **Emergent learning and adaptation:** The emphasis on evaluation and support by the evaluator allowed the collaboratives to make data-informed adjustments to their program strategies.
7. **Opportunities for policy change:** The collaboratives were able to achieve significant policy changes because of the expertise that the Foundation and partners brought to the process, combined with the use of evaluation to generate data that could be used to make a case to policy makers.

One of the most important recommendations to offer the Foundation is to be fully aware of what is required for the Synergy Initiative model to achieve success. The interviewees in this study consistently emphasized the high degree of **commitment** that the Synergy Initiative model requires from everyone involved. In addition, the analysis, problem-solving, decision making, and systems-change work that occurs within Synergy Initiative projects requires high levels of capacity within all the partners, but especially within the project director and project coordinator. Building on the Foundation's current practice, the research team recommends additional forms of assessment that would allow applicants and the Foundation to gain a fuller view of whether applicants have the analytic and problem-solving capacity that are required to carry out the Synergy Initiative model.

The remaining four recommendations to the Foundation are as follows:

2. Expand the pool of evaluators able to effectively support collaborative problem-solving initiatives by coordinating additional trainings in Empowerment Evaluation.
3. Increase the Foundation's capacity to support Synergy Initiative projects by hiring more staff members who are able to engage effectively in the work of funded collaboratives.
4. Delineate more explicitly the different ways in which Foundation staff support the Synergy Initiative process at various stages of the work.
5. Encourage the community organizations engaged in Synergy Initiative projects to occasionally engage in dialogue among themselves without the Foundation present.

The research team also encourages more extensive communication about the logic and merits of the Synergy Initiative model. Based on the Foundation's experience to date, the research team regards the Synergy Initiative as an emerging "best practice." When the collaborating parties come with the requisite capacity and commitment, the Synergy Initiative model provides the structure, tools, and principles that set the stage for impacts that exceed what typically occurs in systems-change initiatives.



Introduction

The Foundation of Central Massachusetts, Inc. (the “Foundation”) was founded in 1999 through the sale of a not-for-profit HMO, which provided the Foundation with an initial endowment of \$42 million. As of June 2018, the Foundation’s assets are valued at approximately \$73 million, which is near the median endowment size of the health conversion foundations surveyed by Grantmakers in Health (GIH) in 2015 (GIH, 2017). The Foundation’s annual grant budgets have ranged from \$1.6 million to \$2.7 million over its history. From the outset, the Foundation has been committed to using those assets to generate tangible and meaningful improvements to the health of the Central Massachusetts region – as opposed to acting as a transactional grantmaker that solely provides grants to health-related organizations.

The concept of “impact” is core to the Foundation’s identity, philosophy and strategy. Moreover, the Foundation is motivated not only by generating impact itself, but also by infusing an impact orientation within nonprofit and government organizations in the region. The Foundation routinely provides grantees and partnering organizations with training, resources, and encouragement to evaluate their programs, while also incentivizing grantees to clarify their intent and review available research when designing their programs. On a more specific level, the Foundation champions the “Getting to Outcomes” (GTO) framework with its Ten Accountability Questions, which is a core feature of Empowerment Evaluation (Wandersman, Imm, Chinman, & Kaftarian, 2000). The Foundation’s CEO, Dr. Jan Yost, has been a national leader in defining how evaluation, and more specifically Empowerment Evaluation, can be effectively incorporated within foundation strategy (Yost, 2015).

Evaluation, accountability and evidence-based programming are explicitly incorporated into the Foundation’s primary grantmaking strategy – the Health Care & Health Promotion Synergy Initiative (“the Synergy Initiative”). This initiative, formally launched in 2000, is designed to support local groups in defining and solving complex health problems. Under the Synergy Initiative, organizations concerned about a particular health issue apply to the Foundation for funding with the intent of developing and implementing a comprehensive systems-oriented strategy. Once funded, they enter into a collaborative relationship and work through a series of phases, including: developing a shared understanding of the problem, reviewing the literature for effective models, designing a strategy, implementing the strategy, evaluating the strategy, adapting the strategy, and identifying areas of policy change and systems change that will sustain impact. These different phases are typically operationalized in the form of a planning year, a pilot year, and approximately three years of implementation.

The Foundation supports the problem-solving process over a multi-year period (typically five years), investing an average of \$2 million in each Synergy Initiative project. In addition to providing funding to support planning and implementation, the Foundation brings a particular point of view to the process of collaborative problem-solving, one that emphasizes a set of “accountability questions,” the integrated use of evaluators, and advocacy for policy and systems change. Evaluation comprises approximately 10% of the total budget for each project.

To date, the Foundation has supported 17 Synergy Initiative projects involving a variety of health-related issues. The Foundation defines “health” broadly based on the World Health Organization’s definition of health as “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity” (WHO, 1948). Because the Foundation has applied such a broad definition of health, the issues addressed by Synergy Initiative projects have included mental health, oral health,

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homelessness, hunger, criminal justice, and breaking cycles of poverty. Many of these projects have achieved impressive results with regard to the introduction and sustainability of evidence-based programs, inter-agency coordination, organizational capacity building, policy change, and tangible improvements in the health and well-being of particular populations in Central Massachusetts. Some of the programs developed and tested through Synergy Initiative projects have become models for other communities.

In the fall of 2017, the Foundation invited a research team from Wake Forest School of Medicine to conduct a review of the model of collaborative problem-solving embodied in the Synergy Initiative. The Foundation was interested in an independent assessment of the effectiveness of the Synergy Initiative model, as well as in increasing its understanding of how the different elements of the model contribute to the success that has been observed to date. Additionally, in keeping with the Foundation's interest in learning and engaging in continuous quality improvement to maximize impact, the research team was also asked to provide recommendations for enhancing the effectiveness of the Synergy Initiative model.

The Foundation and the research team collaborated in designing a targeted study of four Synergy Initiative projects that are regarded by the Foundation as exemplars of what the Synergy Initiative model looks like when it is implemented according to design. The four studied projects are: Central Massachusetts Oral Health Initiative (CMOHI), Together for Kids, A Better Life, and Worcester Initiative for Supported Reentry (WISR). Synergy Initiative funding has concluded for all four projects, but the programming, collaboration, and strategizing stimulated by the Synergy Initiative process have continued to at least some extent in all four cases. [Appendix 1](#) summarizes each project with respect to the issue that was addressed, the organizations involved, the duration of the project, the amount of grant funding from the Foundation, the approach that the partners developed to address the issue, and key outcomes.

Because evaluation is such a major component of the Synergy Initiative, reports have already been written describing the programs and services that were developed under each of the four Synergy Initiative projects and their effectiveness. The current study is designed to answer a larger research question, namely, how do the different aspects of the Synergy Initiative model contribute to success.

In order to answer this question, the research team investigated how the Synergy Initiative model was implemented and how it was experienced by the key individuals involved in carrying out the required steps. Semi-structured interviews were conducted with individuals who played key roles in the four exemplar projects – as either a project director, a project coordinator, or an evaluator. The research team supplemented what it learned in those interviews with conversations with Foundation staff and a review of project-related materials and evaluation reports.

The focus on exemplar cases (i.e., cases where the Synergy Initiative model was successfully implemented) provides perspective on how the various elements of the model have been operationalized and how the model contributes to success. This study is not intended to answer other important evaluation questions such as what typically happens when an inter-agency collaborative pursues the Synergy Initiative approach to collaborative problem-solving, how the Synergy Initiative model compares to other collaborative problem-solving approaches, or why three Synergy Initiative projects were unable to meet the model guidelines. Addressing those questions would call for a different scope of work and a different study design.



The Synergy Initiative Model

A growing number of foundations around the country are seeking to achieve large-scale impact through inter-agency collaborative initiatives (AECF, 1995; Cabaj & Weaver, 2016; Christens & Inzeo, 2015; Hanleybrown, Kania, & Kramer, 2012; Norris, 2013; ORS Impact & Spark, 2018; Wolff, et al, 2017). The rationale for inter-organizational collaboration was spelled out succinctly by John Kania and Mark Kramer in their 2011 Stanford Social Innovation Review article introducing the “Collective Impact” approach: “large-scale social change comes from better cross-sector coordination rather than from the isolated intervention of individual organizations” (p. 38).

This quote points explicitly to the possibility that collaborative work will produce **synergy**. Roz Lasker and Elisa Weiss (2003) describe more specifically how this can occur:

When a collaborative process combines the complementary knowledge of different kinds of people—such as professionals in various fields, service providers, people who use services, and residents who are directly affected by health problems—the group as a whole can overcome these individual limitations and improve the information and thinking that undergird community problem solving (p. 25).

While it has long been recognized that inter-agency collaboration can solve complex, thorny problems that extend beyond the scope of influence of individual organizations, this line of work is challenging in practice. Many of the initiatives that bring together different organizations to develop a shared strategy have not delivered the intended results. In their review of 48 comprehensive community initiatives, Anne Kubisch and her colleagues concluded that

A few can point to accomplishments in policy and systems reform. While these are important, tangible outcomes, most of the interventions have not produced the degree of community transformation envisioned by their designers. For example, few (if any) have been able to demonstrate population-level changes in child and family well-being or rates of poverty (Kubisch, Auspos, Brown, & Dewar, 2011, p. 139).

More recent reviews of “collective impact” initiatives suggest that the effectiveness is increasing in at least some instances (ORS Impact & Spark Policy Institute, 2018). However, large-scale impact remains the exception rather than the rule for collaborative problem-solving initiatives.

Against this backdrop, the research team has observed that the Synergy Initiative model offers the potential for advancing the productivity, impact and relevance of collaborative problem-solving efforts. The Synergy Initiative model is distinct from other models in terms of who selects the problem, the rigor of the planning process, the emphasis on accountability and evaluation, and the role of the funder. In consultation with Foundation staff, the research team distilled these distinctions into the following five elements:

- Community-based groups (rather than the Foundation) have the authority to define the issue that will be the focus of their Synergy Initiative project.
- The Foundation emphasizes that the success of the project is gauged by its **impact** (especially systems-level impact), rather than simply demonstrating high-quality collaboration.
- The collaborative is expected to adopt and implement evidence-based strategies.
- An evaluator funded by the Foundation actively supports the project by assisting in the development of measurable objectives and data systems and conducting formative and summative evaluations.

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- The Foundation is an active partner throughout the collaborative process, assisting with planning, deliberation, learning, strategy development, and sustainability efforts.

These elements are described in more detail in Table 1.



Table 1. Distinguishing Elements of the Synergy Initiative Model

1. Community-Defined Issue

The problem to be addressed by each Synergy Initiative project is identified by “the community” rather than being specified by the funder. This occurs through a request-for-proposals process where groups of community organizations form a “collaborative” and can request financial support to delve deeply into a health-related issue affecting the community. The applicants commit to developing and implementing a shared strategy to impact that issue. This approach contrasts with the traditional approach whereby funders name the priority issues they wish to fund and often prescribe solutions.

2. Impact-Oriented Process

The Synergy Initiative approach emphasizes achieving results through systems-level changes rather than focusing on the specific aspects of the collaborative process (e.g., forming consensus, decision rules). The process steps within the Synergy Initiative model are designed to foster the rigorous analysis that leads to impactful strategies. These steps include: assessment, exploration of program models, program development, implementation, and evaluation. The process is guided by the accountability questions in the GTO framework shown below.

The Ten Accountability Questions

1. What are the underlying needs and conditions in the community? (**Needs/Resources**)
2. What are the goals, target populations, and objectives (i.e., desired outcomes)? (**Goals**)
3. Which evidence-based models and best practice programs can be useful in reaching the goals? (**Best Practice**)
4. What actions need to be taken so the selected program “fits” the community context? (**Fit**)
5. What organizational capacities are needed to implement the plan? (**Capacities**)
6. What is the plan for this program? (**Plan**)
7. How will the quality of the program and/or initiative implementation be assessed? (**Process Evaluation**)
8. How well did the program work? (**Outcome Evaluation**)
9. How will continuous quality improvement strategies be incorporated? (**CQI**)
10. If the program is successful, how will it be sustained? (**Sustain**)

Beyond encouraging the collaborative to develop effective program models, the Foundation encourages action to improve the systems within which those programs operate. The collaborative also strategizes and implements plans for sustaining whatever evidence-based programs it has developed and implemented, including through policy change.



3. Emphasis on Evidence

In developing its strategy, the collaborative is expected to review existing research. The collaborative is encouraged to focus on evidence-based or informed models when developing its own strategy. Once an approach has been designed, the collaborative routinely evaluates its effectiveness using appropriate forms of data and analysis. The Synergy Initiative model's timeline explicitly allows time for the collaborative to test and evaluate its programs and larger strategies. In addition, the collaborative is encouraged to collect data that will be rigorous enough to satisfy a set of critical audiences, including policy makers.

4. Using Evaluation for Learning, Improvement and Sustainability

With the assistance of an evaluator, the collaborative engages in formative and summative evaluation as it develops, implements, tests, and refines its strategy. Evaluation findings are used to support learning and to document the effects of programs. In order to focus the evaluation on the critical accountability questions and to build the collaborative's ownership over the evaluation findings, the Foundation encourages an "Empowerment Evaluation" approach. Fetterman and Wandersman (2005) define "Empowerment Evaluation" as "an evaluation approach that aims to increase the probability of achieving program success by (1) providing program stakeholders with tools for assessing the planning, implementation, and self-evaluation of their program, and (2) mainstreaming evaluation as part of the planning and management of the program/organization" (p. 28).

With assistance from the Foundation, the collaborative selects an evaluator who is trained in the methods and principles of Empowerment Evaluation. The evaluator designs and carries out short-term and long-term studies that allow the collaborative to understand how well its program is meeting its expectations. Evaluation findings are fed back to the collaborative to promote learning and adaptation. Once the program has been optimized, more summative evaluation is performed to generate data that can be used to demonstrate effectiveness and, in rare instances when appropriate, cost-effectiveness. Those data support efforts to sustain and disseminate effective program models, including advocacy efforts for policy change at the local and state levels. In contrast, traditional funders that conduct evaluations often do so only after projects conclude, and some do not conduct evaluations at all.

5. Active Participation by the Funder

In contrast to how foundations typically support collaborative problem-solving, the Foundation couples its financial support with direct engagement in the collaborative process. One or more Foundation staff members participate fully in all aspects of the process and act as a catalytic agent to drive the collaborative toward effective strategies. In full-group meetings and interactions with the project director, project coordinator, and evaluator, Foundation staff encourage the collaborative to move deliberately toward action while at the same time focusing attention on questions of evidence, logic, accountability, and sustainability. Foundation staff contribute specifically with regard to sustaining the work by engaging institutional leaders, securing co-funders, publicizing program outcomes, and advocating for public funding and policies to sustain programs long-term. This active role on the part of Foundation staff is in contrast to how most foundations support collaborative problem-solving initiatives (i.e., primarily through funding, convening partners, and promoting the collaborative's work).

The Foundation's active role within Synergy Initiative projects is in many ways equivalent to what is expected of the lead organization (especially the project director and project coordinator) and the evaluator. Together these three partners are sometimes referred to as a "three-legged stool," with each leg contributing importantly to the stability of the stool to support the complex long-term process of problem-solving that the Synergy Initiative model stipulates.



Study Design

The current study was designed to provide a high-level assessment of how the five aforementioned elements affect a collaborative's ability to develop effective programs, improve systems, change policy, when appropriate, and achieve measurable outcomes. The research team accomplished this by interviewing key players and reviewing documents associated with four "exemplar" Synergy Initiative projects: CMOHI, Together for Kids, A Better Life, and WISR.

The research team developed an initial understanding of each of these projects by reviewing key materials provided by the Foundation, including staff memos, summary reports from each project, reports written by evaluators (process evaluation and final reports), and project impact summaries. These documents provided information on the origins and intent of the project, the people and organizations who participated, the process that the collaborative underwent, the nature of the programs and services that were developed and implemented, outcomes for the populations of focus, policy advocacy work, and changes in policy and systems stemming from the project.

The research team gained a more in-depth and multi-dimensional view of these projects through conversations with Foundation staff and extended interviews with individuals who were central to the work, including project directors, project coordinators and evaluators. In particular, the research team conducted semi-structured telephone interviews (approximately one hour in duration) with the following eight key informants:

- John Gusha, DMD – CMOHI Project Director
- Lynn Hennigan, MEd, MSW – Together for Kids Project Coordinator and Project Director
- Carole Upshur, EdD – Together for Kids Evaluator
- Alex Corrales – A Better Life Project Coordinator and Project Director
- Emily Rothman, ScD – A Better Life Evaluator
- Opal Stone, MBA – WISR Project Coordinator
- Mary Brolin, PhD – WISR Evaluator
- Pam Imm, PhD – Previous Synergy Initiative Project Evaluator (project not included in this study) and general evaluation advisor to the Foundation

These interviews were recorded and transcribed. Selected excerpts are included in this report (edited lightly to improve clarity). Drawing on the transcripts and other sources of project information, the research team characterized each project in terms of how the Synergy Initiative model was implemented, what was accomplished, what factors supported those accomplishments, and challenges that arose in the project. The research team also compiled observations, critiques, and recommendations that the eight informants offered with regard to the Synergy Initiative model and how it might be revised or replicated.



Outcomes from the Synergy Initiative

Taken together, the four projects studied here provide ample evidence that the Synergy Initiative model is capable of stimulating collaborative problem-solving that leads to tangible progress in solving the target problem and improving the health and well-being of a particular population or sub-population. As described below, these projects generated impact through new and/or improved programming, policy and systems changes, and collateral benefits:

New and/or improved programming. All four of the studied Synergy Initiative projects developed new programs and services which better met the needs of their clients. These include:

- **CMOHI** provided new school-based dental screening and treatment services, including "screen and seal" and fluoride mouth-rinse programs in Worcester and South Worcester County schools. Another strategy for increasing access involved expanding the capacity of three community health centers. CMOHI worked with health centers to increase their ability to serve uninsured and Medicaid patients. The demand for dental services decreased over the course of the project, potentially due to school-based services or other providers offering services to Medicaid patients.
- The **Together for Kids** strategy has significantly reduced suspensions and expulsions from preschools by better addressing the behavioral health needs of children and families, and by offering more resources and trainings for educators. This comprehensive approach to behavioral health promotion, prevention, and intervention offers: 1) behavioral health consultation in childcare settings for educators and families; 2) trainings and informational sessions for educators and families on a variety of topics related to social-emotional health in children; and 3) referrals for more intensive services. This strategy significantly reduced the rate of suspensions within the participating preschools.
- **A Better Life** is an intensive case management approach provided to families living in public housing to help them become economically self-sufficient and move out of public housing. Case management focuses on five areas of need (educational, occupational, financial, personal, and healthcare) and is guided by each participant's service plan. As a result of the program, many participants have become employed, increased their income, and moved to private or Section 8 housing.
- The **WISR** model coordinated reentry services across agencies, case management starting before release, cooperation with the courts, and participation incentives. As a result of the project, it was shown that evidence-based interventions and individualized navigation plans helped men successfully reintegrate into the community following incarceration. Together, these program elements have generated a 47% reduction in the three-year recidivism rate and a 59% return on investment based on one-year incarceration costs.

Sustainability and policy change. Each of these programs has moved from a demonstration phase to becoming standard practice within local organizations, agencies, and systems. The Synergy Initiative projects have promoted sustainability by institutionalizing the programs within the budgets of the partner organizations, by publicizing the benefits of the programs to other stakeholders in the community (including funders), and by achieving changes in public policy that provide new revenue streams to support the programs and/or reduce regulatory hurdles. The following examples point to the degree of policy change that has occurred under these four Synergy Initiative projects:

- **CMOHI** worked to change Medicaid rules so that dental practices could specify the number of Medicaid patients to accept. Under the previous rules, dentists who chose to accept any Medicaid patients had to accept all Medicaid patients seeking care at a given practice, which weakened the

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financial stability of dental practices. As a result of the change, more dental practices began accepting Medicaid patients.

- **Together for Kids** presented their data to the state legislature and ultimately secured ongoing funding for the program through a line item in the Department of Early Education and Care budget. That funding allows the program to operate statewide beyond Worcester County, where the project was developed. The state legislature sought guidance from Together for Kids on the language used to form the direction of the Department of Early Education and Care.
- State policy was changed so that **A Better Life** could be implemented in public housing units operated by the state. One of the stated goals of A Better Life is to assist residents in transitioning out of public housing, which was at odds with state policy prior to the change. Policy change was also used to make available state funding to sustain A Better Life within the Worcester Housing Authority, as well as to replicate the program in other communities. In September 2017, the Massachusetts Department of Housing and Community Development awarded planning grants to four other state housing authorities (Chelsea, Gloucester, New Bedford, and Taunton/Stoughton) to expand the A Better Life program.
- The **WISR** program led to changes in institutional policy at the local jail so that inmates had more flexibility in attending treatment programs, as opposed to being restricted to their jail cell. The success of WISR influenced the state's criminal justice reform plan approved by the state legislature and governor, which includes reentry services. With state funding, the WISR model may be expanded to Offices of Community Corrections throughout the state.

Collateral benefits. In addition to these tangible outcomes from the Synergy Initiative projects, the interviewees provided evidence that the process had strengthened the working relationships among the various organizations participating in each project. This strengthening of relationships is leading to more coordination, improved referral processes, and co-location of services. It is also allowing agency leaders to be more effective at collaboration, co-strategizing, and aligning of interests.

The research team also heard testimonials from interviewees that the Synergy Initiative process had increased the capacity of participating organizations for strategic analysis, program development, program implementation, evaluation, and evaluative thinking.¹ The evaluators who participated in these four Synergy Initiative projects indicated that they had also developed new skills and knowledge that they were using in their own evaluation practice. This included a deeper understanding of the systems that their project was seeking to improve, as well as an increased ability to work effectively in partnership with agency leaders, to write research reports that specifically address the interests of policy makers, and to engage directly in the policy-change process.

¹ In some instances, interviewees used the term “evaluative thinking.” In other instances, they referred to more specific attributes associated with the concept of “evaluative thinking,” such as critical thinking, clarity of assumptions, distinguishing process from outcomes, and reaching appropriate conclusions (Patton, 2018).



Explanations for Impact

The previous section demonstrates that the Synergy Initiative model can deliver impressive impacts when it is fully implemented. This section addresses to the question of how and why these impacts occurred and, more specifically, why greater impacts are observed within the Synergy Initiative than in other collective-impact initiatives.

The research team identified seven explanations as to why the Synergy Initiative model leads to effective problem-solving and tangible impacts within the community. These explanations might also be viewed as *critical mechanisms* that allowed the Synergy Initiative collaboratives to succeed. In describing these seven mechanisms, the distinguishing elements of the Synergy Initiative model (from Table 1) most responsible for the effect are also identified. Those elements are listed in the order that the research team believes is reflective of their relative influence.

- 1. Committed partners:** In all four projects, there was a high level of commitment and enthusiasm among the partners of the collaborative who were most central to the work, especially the project director and lead organization. Generally, that commitment and enthusiasm was present from the outset and was maintained over the five (or more) years of intensive problem-solving work, even when the role of lead organization changed from one partner to another. For example, in the case of WISR, the lead organization changed three times due to challenges with organizational capacity, but the project was able to continue successfully because of the commitment of all project partners, not just the initial lead organizations, which highlights the strength of the collaboration. This sustained commitment occurred because the partners were able to define for themselves the problem they wanted to solve and find solutions that fit their collective goals, which likely strengthened partners' sense of ownership and investment in the Synergy Initiative project. ([Community-defined issue](#))
- 2. Entering with ambitious expectations:** When asked to explain the productivity of their Synergy Initiative projects, interviewees consistently pointed to the Foundation's high expectations for impact. The Foundation provided enough time and resources to allow the collaborative to do its work, develop its strategies, test those strategies, etc., but there were also clear guidelines on what the Foundation would provide in terms of time and money in order to create a sense of urgency to achieve outcomes as expediently as possible. As one interviewee said, *"Right from the beginning it was a challenge to all of us to really think much bigger and broader than we had ever been asked to think before. It was challenging. It was exciting. I think we were probably fearful along the way, too. We have an opportunity here and we want to make sure we don't squander it, but it was invigorating."* The collaboratives consistently (even relentlessly) focused on getting to outcomes – and, in particular, outcomes that transcended what the partners were able to achieve with the programs they had in place prior to the Synergy Initiative. ([Community-defined issue](#), [Impact-oriented process](#), [Active participation by the funder](#))
- 3. Persistence:** It was not only at the beginning of the process that Foundation staff stimulated the collaboratives' movement toward tangible results. As one interviewee said, *"The Foundation CEO sits down at a table with high level stakeholders. I think it is critical that she is at those meetings and she pushes them... [to make] more of a commitment and then the work can happen at lower levels."* Moreover, Foundation staff stayed highly engaged throughout the process and continued to encourage the collaboratives to move forward, translate their ideas into practice, evaluate and

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adjust, and identify opportunities to change policy to sustain and extend the progress that had been attained to date. One interviewee described this dynamic as follows: *“She held us to a really high standard to make sure that the money that [the Foundation] was giving us... [was being used] to the fullest potential. Some folks would say, ‘Here take the money back. This is too much work.’”* ([Impact-oriented process, Active participation by the funder](#))

- 4. Focusing on higher-order systems change:** Because of the Synergy Initiative’s emphasis on systems change, the four collaboratives studied here aspired to do much more than tweak specific programs or improve inter-agency coordination. Moreover, rather than treating “systems change” as an abstract construct, the collaboratives defined specific forms of systems change that would make a difference on the issue the partners were concerned with. The evaluator and Foundation staff often played critical roles in questioning the partners as to what sorts of systems changes were possible and would make a difference. They also brought a form of analytic and critical thinking that helped the collaboratives move from tactical remedies to larger, more impactful strategies. This is reflected in the following quote from an interviewee: *“We are in the weeds here and sometimes we had to try to force ourselves to get out of the weeds and [Foundation staff] was able to come in and just give us a different perspective but also to challenge us to say, ‘Well why do you want to keep doing it that way?’”* Another interviewee described it as follows: *“I had someone behind me pushing me and saying, ‘keep looking at the big picture.’”* ([Impact-oriented process, Active participation by the funder](#))
- 5. Rigorous thinking and analysis:** To an extent not often seen in collaborative problem-solving initiatives, the four Synergy Initiative projects were able to develop programmatic strategies that actually work and deliver meaningful benefits to their clients. In other words, the collaboratives were not only productive, but they produced effective programs and services, while also finding ways to change systems to support and reinforce these programs and services. These successes reflect the rigor with which the collaboratives selected, designed, implemented, tested, and adjusted their program strategies. In all four projects, the collaboratives focused on evidence-based models and engaged in a long-term process of analysis, planning, implementation, and experimentation. They tested whether their expectations were met and how well their assumptions bore out.

Having an evaluator directly engaged throughout the process allowed the evaluations to be designed in such a way that they would directly answer the collaborative’s questions. Multiple interviewees provided feedback such as the following: *“The evaluator was sitting at the table, part of the conversation, willing to push us, willing to listen, willing to be open and flexible to go where the data allowed.”*

Rigorous thinking entered into not only the program development process, but also the design and execution of the evaluation. One interviewee pointed specifically to how the evaluator provided a reality check on how to keep data collection reasonable and focused:

[The evaluator] was actively involved in helping us at the operations level understand the data that we were collecting and the kind of data that we could and could not collect... One of the things too that would happen when we went into these Taskforce meetings and Steering Committee meetings is that people would want to collect all different kinds of data just across the board; tons and tons and tons of different data and I think that having someone

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experienced...at the table helped keep the folks focused even when they got excited about something new they had learned or trend they thought they were recognizing.”

([Impact-oriented process; Emphasis on evidence; Using evaluation for learning, improvement, and sustainability; Active participation by the funder](#))

- 6. Emergent learning and adaptation:** In many other foundation-sponsored collaborative initiatives, the participants feel beholden to pursue whatever action plan emerged from the planning process or as prescribed by the funder, even if the action steps prove ineffective once they are implemented. In contrast, the Synergy Initiative model encourages the collaborative to make data-informed adjustments to its program strategy, and indeed provides the collaborative with an evaluator to ensure that data are available to support learning. The evaluator was obviously crucial in providing analyses and interpretations that allowed the program strategies to improve and evolve. The Foundation’s contribution here is just as noteworthy. Foundation staff brought a sense of inquisitiveness, curiosity, ambitiousness, and urgency which can be infectious. This can (if the collaborative is willing and able) lead the collaborative to venture into lines of inquiry, experimentation, and systems-change work that they would not otherwise pursue.

Along these same lines, interviewees reported that Foundation staff encouraged these programmatic adjustments during meetings and when applying for implementation grants. One interviewee summarized it as follows: *“The real benefit here is that the Foundation is not a partner who is going to look at your data and what’s going on and say, ‘I don’t like that. We are taking our dollars away.’ Instead, they are at the table with the implementers strategizing [and to say along with us] ‘well, that doesn’t seem to be working.’”*

Adaptation occurred not only with the program model, but also the evaluation strategy. In each of the four projects, the evaluators revised the evaluation design, methods and measures as the program models took shape and the collaborative learned more about how and where the program worked. As one interviewee recounted, *“We were constantly working [with the evaluators] and figuring things out on what’s working and what’s not working. What do we need to change and how do we need to do it? So, it was that kind of a process over the years that I think worked very well.”*
([Community-defined issue; Impact-oriented process; Emphasis on evidence; Using evaluation for learning, improvement, and sustainability](#))

- 7. Opportunities for policy change:** The Synergy Initiative model explicitly incorporates policy change as an essential step in the collaborative’s scope of work, when appropriate. Partners came into the process with the expectation that not only would they be changing systems in ways that matter to those systems constituents, but they would also be taking steps to ensure that new evidence-based programs and services can be sustained beyond the project. The Synergy Initiative model also expects partners to look at how effective program models can be disseminated and replicated. Interviewees reported that this expectation was front of mind throughout the process. The Foundation reinforced this expectation as it participated in the process. One of the evaluators we interviewed noted that: *“[Foundation staff] gets them thinking about sustainability early. What are the policies you have to change? Not just the steps you have to take to do work but what are the actual policies you need to change within city government or school district or something like that.”*

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The Foundation not only instilled this expectation around policy change, but also contributed in substantial ways to making policy change happen. A number of interviewees explicitly referenced Foundation staff's expertise in policy analysis and legislative processes, as well as the connections that the Foundation was able to take advantage of when advocating for policy change. As one interviewee said, *"It was very helpful to have them at the table and you know, when we got to the legislative part of it and we were giving public testimony in different forms and when we would honor legislators or have these different events."* ([Community-defined issue; Impact-oriented process; Using evaluation for learning, improvement, and sustainability; Active participation by the funder](#))



Analysis and Recommendations

The previous two sections demonstrate what the Synergy Initiative model is capable of stimulating, as well as the ways that the different elements of the model add value to the process of collaborative problem-solving. That analysis was based on four exemplars where the funded collaboratives were ready and able to carry out the Synergy Initiative model. This section expands on that analysis to consider the question of what needs to be in place for the model to succeed and how the Foundation can identify groups that are ready for the Synergy Initiative. The research team also offers up a set of recommendations for how the Foundation might strengthen the design and implementation of the Synergy Initiative, both through its own actions and by building the capacity of the people and organizations that participate in the process.

What Does the Synergy Initiative Model Require for Success?

The successes observed in the four Synergy Initiative projects stem in large part from the strong design features of the model. At the same time, it is important to also recognize the roles and contributions of the people and organizations who carried out these projects. The Synergy Initiative model (like any model of collaborative problem-solving) is just a model until it is implemented by real people who come together to solve a real problem. What do those people and their organizations need to bring to their Synergy Initiative project?

The interviewees in this study consistently emphasized the high degree of **commitment** that the Synergy Initiative model requires from everyone involved. This stems from both the extended length of time that Synergy Initiative projects typically run (approximately five years) and the emphasis that is placed on systems change and measurable impact. The Foundation fully expects that Synergy Initiative project partners will be willing to devote considerable time and effort to solving the problem at hand. Even higher expectations are placed on the lead organization and any other partners who occupy central roles in the project. Because the Synergy Initiative allows applicants to choose which problem they want to address, the funded collaboratives begin with higher levels of intrinsic motivation than is observed in coalitions where a funder pre-specifies the issue. This feature of the model facilitates commitment, but it does not guarantee it. Multiple interviewees noted that the time and effort required by the Synergy Initiative was considerably higher than what they envisioned at the outset of their project. They also reported that some peripheral partners opted out of the Synergy Initiative process as other commitments competed for attention. This was particularly true for leaders of organizations whose mission was not directly linked to the purpose of the Synergy Initiative project.

The Synergy Initiative model also requires the partners to possess various forms of **capacity** which support the design, development, implementation, and sustaining of effective program models. Within the four exemplar projects studied here, project partners solved complex problems across conceptual, practical, inter-personal, and political domains. They compiled and analyzed data from a variety of sources and drew sophisticated inferences in the design and adaptation of program strategies. The analysis, experimentation, problem-solving, decision making and systems-change work that occurs within Synergy Initiative projects requires high levels of capacity within all the partners, but especially within the project director and project coordinator.

Based on our analysis of the critical work conducted by the four Synergy Initiative collaboratives studied here, the research team believes that the following forms of capacity are particularly relevant:

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- In-depth understanding of the issue the collaborative is addressing, including what research says about prevalence, etiology, risk and protective factors, co-occurring issues, etc.
- Solid understanding (grounded in both experience and research) of different approaches to addressing the issue, including at least fundamental knowledge about whether, where and when these approaches are effective.
- Involvement of the people, programs, agencies, systems, funders, etc. addressing the issue locally.
- The ability to design a sound program based on research, experience, deliberation, and analysis.
- Analytic and conceptual skills, as evidenced by:
 - The willingness to work with data and interpret evaluation findings with assistance from the evaluator;
 - The willingness to think strategically and to develop strategies capable of achieving goals;
 - The willingness to think in terms of systems, recognize inter-connections between issues, understand how changes in one part of a system affect other parts of the system, etc.
- The ability and disposition to work effectively on teams and in collaborative processes, especially over the long run.

It is not strictly necessary for everyone involved in the project to have all these forms of capacity, but all forms should be present somewhere within the collaborative. It is particularly important that the individuals with leadership roles be capable in these ways.

Additionally, the research team does not contend that all these forms of capacity need to be fully formed at the outset of the project. Partners can expect to build their skills and knowledge as they engage in the different phases of the Synergy Initiative process. Many of the interviewees described the intensive learning and skill building that occurred for themselves and their colleagues over the course of their projects. This is directly in keeping with the Foundation's expectations for the Synergy Initiative model. For example, the first two bullets above are addressed during the initial planning year. Prior to the planning year, the Foundation matches Synergy Initiative projects and evaluators (following a "Speed Dating" event when project directors and evaluators can meet each other and select their top choices), and evaluators are paid by the Foundation to assist project directors develop the planning grant application, with particular emphasis on the research design and evaluation plan. This step enables evaluators to begin building the evaluation and problem-solving capacity of the project director and the lead organization before the project officially begins.

Even though the Synergy Initiative model supports partners in building their capacity over time, it is essential that those partners enter into the process with **foundational knowledge and skills**, as well an **authentic desire to further develop their ability** to design, implement, evaluate, and sustain effective programs. This was true among the four projects studied here. While the partners in these projects did not universally come in with all the requisite forms of capacity, they were by and large highly skilled and accomplished leaders within their organizations and within the larger community.

In sum, the research team believes that a Synergy Initiative project will achieve its goals only if the partners display high levels of commitment and bring high levels of problem-solving capacity to the project. The following two quotes from interviewees support this conclusion:

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- *“If you don’t have the resources and capacity, the expectations are probably overwhelming...I think it would be very difficult for any small agency to run a project of this size and with the expectations that come with that.”*
- *“I would hold up the Synergy Initiative model as a model for the field. I do think positive things occur in the communities around making these big social changes. But I don’t feel like everybody can do it; I mean certainly that level of intensity. Not every project director or community agency can do that so it’s like the right conditions have to be met and there are things like high expectations; understanding how to work with an evaluator; being flexible and adaptive.”*

Implications for the Foundation in Assessing Readiness

Based on conversations with Foundation staff, the research team is confident that the Foundation recognizes that commitment and capacity are required for success within Synergy Initiative projects. The Foundation has been diligent and selective in reviewing applications for the Synergy Initiative. (Selectivity is driven in part by the fact that the Foundation’s grantmaking capacity can typically only support four Synergy Initiative projects at any given time.) The Foundation is also attentive to the challenge of building the capacity of organizations throughout the region, at least in part so that they can succeed within the Synergy Initiative process. The Foundation’s other funding avenue, the Activation Fund, constitutes approximately 20% of the Foundation’s grantmaking and is one particular philanthropic strategy that helps increase an organization’s internal capacity in a way that can be sustained over time.

Taking into account the practices that the Foundation already has in place with regard to assessing and building readiness, the research team offers the following **recommendation for the Foundation**:

RECOMMENDATION #1

Incorporate the capacities listed above into the due-diligence process that the Foundation uses to evaluate proposals for the Synergy Initiative.

The Foundation is already highly selective when its Board decides which Synergy Initiative projects to support, especially with regard to ensuring that the lead partners are fully aware of the scope and intensity of the work that the Synergy Initiative process involves. Among the four Synergy Initiative projects studied in this report, there was evidence that the key partners indeed brought a high level of commitment and recognized that they were committing to an extensive and intensive process. Two other Synergy Initiative projects funded by the Foundation were discontinued because of a lack of commitment to systems change (i.e., the focus was instead on increasing the capacity of an individual lead organization), but these experiences have provided Foundation staff with additional insights as to what to look for when assessing an applicant’s actual willingness to engage in the demanding, long-term deliberative process that the Synergy Initiative model requires.

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While the Foundation has become quite savvy in assessing the commitment of applicants, there are opportunities to expand its approach to assessing capacity. The capacities described above are acknowledged implicitly within the Synergy Initiative Scorecard (e.g., “Capacity for enduring systems change,” “Advocacy/lobbying experience,” “Effectiveness/reputation of partners”), but there does not appear to be a mechanism in place to assess the capacities more specifically. One option is to provide applicant groups with a diagnostic tool they can use to assess their readiness. Another option is to make available a consultant with expertise in organizational development, collaboration, systems change, etc. to meet with the lead applicant and other key partners within finalist groups (i.e., those that have met the Foundation’s initial review criteria). In the course of one or two meetings, the consultant could lead the group through an interpretation of their readiness assessment results and assist in identifying issues that need addressing prior to initiating a Synergy Initiative project.

What does the Synergy Initiative Model Require of Evaluators?

The success of the Synergy Initiative model depends in large part on the abilities and disposition of the evaluator. Moreover, the skills that Synergy Initiative projects require in the evaluator extend beyond what many evaluators are trained to do. Based on the interviews (especially the interviews with evaluators), the research team views the following capacities as critical:

- Knowledge of and willingness to use Empowerment Evaluation.
- Skills in both formative and summative evaluation, with proficiency in a range of quantitative and qualitative methods, as well as data management (especially involving agency data systems).
- Sufficient understanding of the collaborative’s issue to be able to engage constructively with the collaborative and to know which measures are appropriate.²
- Strong inter-personal skills.
- Ability to facilitate complex group deliberations.
- Sensitivity as to what type of evaluation data will be valuable in efforts to change policy.

In addition to these sophisticated forms of capacity, the evaluator needs to be willing to devote considerable time to the Synergy Initiative project (especially for in-person meetings) and to be able to flex their involvement according to the needs of the project. Based on the research team’s experience in philanthropy (e.g., hiring evaluation consultants as the Director of Research and Evaluation within a foundation, assisting other foundations in recruiting and selecting evaluators for their initiatives), there are only a limited number of professionally trained evaluators who are willing and able to support community-based organizations in the ways that the Synergy Initiative requires. This leads to the following **recommendation to the Foundation**:

² Some of the evaluators working within the four exemplar projects began with significant knowledge of the content area, while others came with a more general understanding of health and social services. In either case, the evaluator needs to be willing and able to learn about the specific programs and systems that the collaborative is seeking to improve.



RECOMMENDATION #2

Expand the pool of evaluators able to conduct Empowerment Evaluation.

The research team recognizes that the Foundation has already taken a number of deliberate steps to build the supply of evaluators who have the skills and orientation that are required to work effectively within Synergy Initiative projects. In the early phase of the initiative, Dr. Abraham Wandersman, who has authored numerous academic articles and books on Empowerment Evaluation, helped the Foundation recruit and train evaluators. In subsequent years, the Foundation has engaged another expert in Empowerment Evaluation, Dr. Pam Imm, to train evaluators, project directors, and project coordinators on the use of evaluation within the Synergy Initiative. These efforts are commendable and provide a useful platform for additional training that the Foundation might coordinate with a wider audience of evaluators. These trainings might be offered in conjunction with regional affiliates of the American Evaluation Association (AEA) and graduate programs in program evaluation offered by universities in New England.

One key to building the supply of evaluators who able to work effectively with collaborative problem-solving initiatives is to increase demand among foundations for evaluators, especially the demand for evaluators who have the orientation and skills (both technical skills and inter-personal skills) that are required to work effectively with groups committed to improving outcomes for local communities. Again, the Foundation is already doing important work along these lines. The Foundation CEO has delivered 18 conference presentations spanning four professional associations (AEA, Grantmakers for Effective Organizations, Grantmakers in Health, and Independent Sector) about the Foundation's use of Empowerment Evaluation. The research team encourages the Foundation to continue along these lines and to use its experience and expertise to teach other foundations how to engage constructively with evaluators within their initiatives and in supporting their own strategic learning. Building on the articles and book chapters that Dr. Yost has published, the research team believes that it would be useful for the Foundation to further engage with organizations that support the practice of evaluation within philanthropy (e.g., Center for Evaluation Innovation, the Evaluation Roundtable, Center for Effective Philanthropy). The Foundation's experience with hiring, training and partnering with evaluators will be valuable in their field-building work.

The Role of the Foundation in Synergy Initiative Projects

One of the major findings from this analysis is that the Foundation's participation in the Synergy Initiative process was critical to the successes that occurred in the four exemplar projects. It is likely that the Foundation's engagement has also contributed to the success of all Synergy Initiative projects that produced tangible products.

This observation suggests that the Foundation's overall impact on improving health throughout its region is constrained by its assets and the small size of its staff. Synergy Initiative projects have historically been supported by the Foundation's CEO and/or Vice President for Programs. There are no other positions within the Foundation that are appropriate for the role of engaging directly in a Synergy

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Initiative process. Moreover, these two positions are responsible for a variety of responsibilities outside the Synergy Initiative, including the Foundation’s other grantmaking avenue, the Activation Fund. This leads us to the following **recommendation for the Foundation**:

RECOMMENDATION #3

Consider hiring additional program staff.

A limiting factor on the Foundation’s impact in the region is the number of Synergy Initiative projects that can be effectively supported at any given time. While the Foundation’s funding capacity is certainly a major determinant, the research team wants to emphasize how much time, attention, and effort Foundation staff invest in each Synergy Initiative project. Their engagement extends well beyond grant-management work to include background research, participating in meetings of the collaborative, more individualized interaction with partners, ensuring alignment between the partners and the evaluator, writing and editing reports, crafting communications materials, building awareness and support for the collaborative’s work among various stakeholders, and developing and implementing plans for policy change. Multiple interviewees indicated that the Foundation’s engagement in the process was at least as valuable as the financial support.

This line of reasoning suggests that the Foundation might be able to expand its impact in the region by hiring one or two additional staff members (i.e., program officers) with the skills, knowledge, and influence that are needed to help manage the Foundation’s Activation Fund grantmaking avenue, thereby enabling the CEO and/or Vice President for Programs to dedicate more time to Synergy Initiative projects.

This idea of hiring additional staff raises the important issue that whoever is hired in the future for the CEO and/or Vice President for Programs position(s) needs to carry out her/his role within Synergy Initiative projects in a manner that is consistent with what has led to the positive effects observed to date. Along those lines, below are additional **recommendation to the Foundation**:

RECOMMENDATION #4

Delineate more explicitly the different ways in which Foundation staff support the Synergy Initiative process at various stages of the work.

Such an analysis can be used to add important new elements to the job descriptions that the Foundation uses for hiring, supervising, and training its staff. The Foundation may wish to consider creating a “practice profile” which explicitly describes how Foundation staff support the Synergy Initiative process over time. [See Metz & Easterling (2016) for an example that defines the role of program officers within

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Kate B. Reynolds Charitable Trust’s place-based initiative, Healthy Places NC.] A practice profile specifies the core functions and critical activities that Foundation representatives perform, as well as how these functions evolve over the course of a Synergy Initiative process. A practice profile also spells out markers or milestones that the Foundation representative is having the desired impact on the process. This characterization of the Foundation’s role in the process allows for the identification of core competencies and sensibilities that Foundation staff should have, which in turn informs hiring, training, coaching, and supervision. In addition to these benefits to the Foundation, a practice profile would also be a valuable guide for any other foundation that might be interested in replicating the Synergy Initiative.

One of the critical issues to be incorporated into a practice profile for the Foundation would be the navigation of power dynamics.³ The Foundation’s active participation in a collaborative process involving funded organizations is relatively unusual within philanthropy. The upside pay-offs from this engagement have already been mentioned. In playing an active role in Synergy Initiative projects, the Foundation is able to push the partners to levels of performance they may not otherwise have achieved. However, any sort of “pushing” on the part of a funder raises the question of how that funder is using its power. The research team has experience on both sides of the table.

While a funder has a legitimate interest in drawing the most (and the best) from its grantees, there have been situations where funders have misused their power and pushed grantees in directions that are contrary to their mission or a waste of their energy. One highly publicized example was the Northwest Area Foundation’s Community Ventures Initiative, where the funder was inconsistent and ambiguous in the criteria it used to review the implementation plans developed during the planning phase. A leader in one of the coalitions that did not receive implementation funding reported that they “were being set up to fail” (FSG, 2011, p. 16). The negative consequences extended to the foundation when groups denied funding wrote columns critical of the foundation which were published in the *Chronicle of Philanthropy*. In addition, a resident in one of the participating communities filed a lawsuit against the foundation for making false promises. Although the lawsuit was dismissed, the episode damaged the reputation of the foundation (FSG, 2011).

Conversations with the staff of The Health Foundation of Central Massachusetts suggest that they are aware of and sensitive to the power dynamics that arise when they are “at the table” with the groups they fund. At the same time, multiple interviewees pointed to instances where participants in Synergy Initiative projects were reluctant to speak openly when representatives from the Foundation were present. Because this inhibition is natural and largely inevitable, an additional **recommendation to the Foundation follows:**

³ Effectively managing power dynamics is a key area of focus within the practice profile that The Colorado Health Foundation developed for its “IMPACT” approach to community-engaged grantmaking.
<https://www.coloradohealth.org/reports/community-engagement-impact-practice-model>



RECOMMENDATION #5

Encourage the community organizations involved in Synergy Initiative projects to occasionally engage in dialogue among themselves without the Foundation present.

One approach would be to routinely schedule sessions (e.g., once per quarter) where the collaborative plans to meet in “closed session” where the Foundation’s representatives are not present. The intent here is to allow the free flow of perspectives that is necessary to a healthy group process. Many meetings, phone conversations, and e-mail exchanges already occur among the project director, project coordinator, evaluator, and project partners organically and without the involvement of Foundation staff. This recommendation is for Foundation staff to actively encourage this type of engagement on a regular basis.

Our final observation regarding the Foundation’s participation in Synergy Initiative projects relates to the strong influence that the Foundation’s CEO has had in generating many of the initiative’s successes. Without diminishing the contributions of the various individuals who have held the Vice President for Programs position, the interviewees clearly and consistently noted that the CEO has had a singular impact on the four exemplar projects. It is likely that she has been similarly influential in Synergy Initiative projects not included in this present study.

This observation points to a critical question: Would the Synergy Initiative have produced the same level of results if someone else had been the CEO? This question cannot be answered without studying the counter-factual, but multiple interviewees pointed to traits in Dr. Yost that appear to be quite rare among foundation CEOs, especially her expertise in evaluation, her skills in critical thinking and policy advocacy, and her commitment to rigor, evidence, and accountability. A CEO without these traits might find it difficult to elicit the same degree of commitment, strategic analysis, learning, and perseverance that has arisen within the groups in which Dr. Yost has participated.

This conjecture has practical implications for the Foundation, as well as theoretical implications for the Synergy Initiative model. On a practical level, should the Foundation seek to continue the Synergy Initiative model as is, it needs to ensure that the next CEO possesses the skills, disposition, and commitment necessary for Synergy Initiative projects to achieve success. The practice profile described above can be helpful in recruiting and selecting someone with the required capacity.



Conclusion

Each of the four Synergy Initiative projects studied here developed and implemented program strategies which directly reached their populations of focus and changed the way that local agencies conduct business. These outcomes are much more tangible than what typically occurs in the field of foundation-sponsored multi-agency collaborative problem-solving. In fact, the program development and policy change that occurred under these four projects appear to be more pronounced than what was produced by the most successful of the collective impact initiatives identified in a recent evaluation of the field by ORS Impact and Spark Policy Institute (2018).

The research team does not contend that Synergy Initiative projects always outperform collaborative problem-solving efforts supported by other foundations. Any model of collaborative problem-solving will produce variable results across the different groups that implement the model. Indeed, Foundation staff have made the research team aware of three instances where Synergy Initiative projects were discontinued because the projects no longer met Synergy Initiative guidelines. When the research team indicates that the Synergy Initiative model outperforms other models of collaborative problem-solving, it is referring to instances where the model is fully implemented. It was clear from the interviews that the Synergy Initiative model requires the participants to devote high levels of commitment, time, and effort over an extended period of time.

The positive outcomes observed in the four exemplar cases leads the research team to recommend that the Synergy Initiative model be further publicized as “best practice” for collaborative problem-solving, but one that should be replicated only when the different actors involved in the work bring the requisite capacity and mindset. Whether it is The Health Foundation of Central Massachusetts or another foundation that replicates the Synergy Initiative, it is important to ensure that applicants understand that they are expected to engage in new and demanding work. The partners need to bring the capacity to do the analysis and learning that leads to real problem-solving, along with a commitment to solve a community-wide problem rather than to gain funding for their own organization. Likewise, the evaluator who supports the partners needs to be skilled in a range of evaluation methodologies and also able to engage constructively in a collaborative learning process.

Just as importantly, the success of the model that underlies the Synergy Initiative depends to a great extent on the ability of the funder to support the work monetarily and through direct engagement. The interviews conducted for this report suggest that the Foundation’s participation in the Synergy Initiative process substantially contributed to what was accomplished in the four exemplar projects. Other foundations need to be able to bring the same critical thinking, encouragement, adaptive problem-solving, and understanding of policy making and sustainability, while also building and maintaining honest and respectful relationships with the people and organizations participating in the collaborative process.



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Appendix 1. Summaries of the Four Synergy Initiative Projects Included in the Study

Central Massachusetts Oral Health Initiative (CMOHI)

Total Foundation Funding: \$3.6M

Time Period: 2000-2011 (no-cost extensions were granted to enable the establishment of a dental residency program)

Lead Organization: Worcester District Dental Society

Fiscal Sponsor: University of Massachusetts Medical School

Key Partners: Quinsigamond Community College; Great Brook Valley Health Center; Family Health Center; Massachusetts Department of Public Health; and others

Central Issue: Lack of access to oral health care for low-income individuals and families

Approach: Developed a Steering Committee to emphasize increasing access to oral health care, educating the medical community, legislature, and general public about the need for oral health care, and promoting advocacy, systems change, developing new programs and services, and promoting administrative and public policies to expand access to dental services

Key Outcomes:

- Spurred changes to Medicaid oral health policy (allowed dentists to limit caseloads, third-party administrator, increased reimbursement (billing changes), and reinstatement of coverage for adults in need)
- Increased the availability of oral health care for Medicaid patients in private dental offices and community health clinics
- Established school-based dental services
- Established a dental residency program
- Developed educational programming for medical students and professionals regarding oral health screening and referrals

Together for Kids

Total Foundation Funding: \$1.8M

Time Period: 2001-2009

Lead Organization: Together for Kids Coalition

Fiscal Sponsor: Community Healthlink

Key Partners: Edward Street Child Services; Rainbow Child Development Center; United Way of Central Massachusetts; Worcester Comprehensive Child Care Services; YOU, Inc.; YWCA; and others

Central Issue: Preschool suspension/expulsions

Approach: Developed and implemented a mental health consultation model to aid the social-emotional development of preschoolers in childcare settings who presented with challenging behaviors

Key Outcomes:

- Demonstrated that with an average of 24 hours of direct service, children's behavior and developmental skills were improved; preschool expulsions were reduced to near zero; and parents reported greater satisfaction with their preschools
- Over \$13M in funding in Massachusetts Early Education and Care for services across the state since 2008

Insights on The Synergy Initiative Model



- Contributed to authorization of ongoing funding for the Together for Kids model as community partners for Accountable Care Organizations

A Better Life

Total Foundation Funding: \$3.1M

Time Period: 2011-2017

Lead Organization: Worcester Housing Authority

Fiscal Sponsor: Worcester Housing Authority

Key Partners: Quinsigamond Community College; Edward M. Kennedy Community Health Center; Central MA Workforce Investment Board; Workforce Central; Worcester Community Action Council; American Consumer Credit Counseling; and others

Central Issue: Help residents of public housing increase economic self-sufficiency and transition to private-sector housing

Approach: Developed a program that provided a variety of supportive services aimed at promoting economic self-sufficiency for residents of public housing through optional and mandatory participation programs

Key Outcomes:

- Successfully housed approximately 15% of participants in private or Section 8 housing within five years
- Led to a larger increase in average income and lower self-reported depression among participants than the comparison group
- Authorization for the Worcester Housing Authority to operate in and expand the A Better Life model to state-subsidized housing properties

Worcester Initiative for Supported Reentry (WISR)

Total Foundation Funding: \$1.9M

Time Period: 2011-2016

Lead Organization: Advocates, Inc.

Fiscal Sponsor: Advocates, Inc.

Key Partners: Worcester Superior Court Probation; Worcester County Sheriff's Office/Worcester County House of Correction; Massachusetts Department of Correction; Massachusetts Parole Board, Region 4 Office; Worcester District Court Probation; Dismas House; Edward M. Kennedy Community Health Center; and others

Central Issue: Reduce the recidivism rate

Approach: Developed a coordinated reentry process starting before release and continuing post-release, including case management, supportive services, and reduced probation time for participants

Key Outcomes:

- A 47% reduction in the recidivism rate among WISR participants three years post-release
- Housing was arranged or provided for all participants within one day of release
- Most participants were enrolled in the state health care plan
- 62% of participants become employed after release

See project summaries on the Foundation's website for more complete details on these and other Synergy Initiative projects. <https://www.hfcm.org/CMS/Images/Impact.Summaries.2.1.18.pdf>