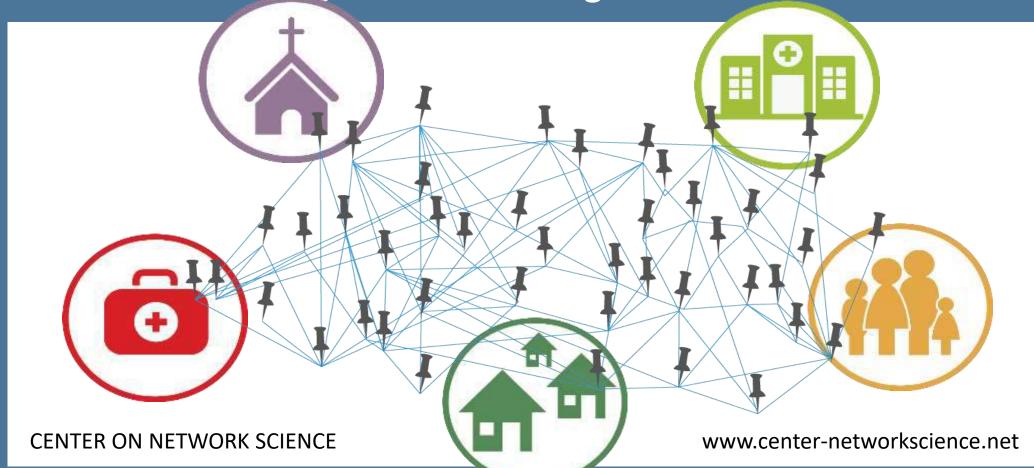


# NETWORK LEADERSHIP: LESSONS FROM THE FIELD WEBINAR SERIES

Cross-Sector Community Network Evaluations: Stories of Success Using the PARTNER Tool



### What We Do – Center on Network Science

**Build Interactive Accessible Tools** 

### **PARTNER Tool**

(Program to Analyze, Record & Track Networks to Enhance Relationships)

### **PCN App**

(Person-Centered Network App)

Design and Conduct Systems Evaluation

KIDS COUNT Grantee Network

(Annie E Casey Foundation)

Regional Health Connectors

(State Innovation Model)

Early Childhood
Systems Building
(CO Trust/ CDPHE)

Specialize in Measurement & Research

Hospital
Investment in
Public Health
Systems

(Robert Wood Johnson Foundation)

Impact of Personal Networks on Health and Well-Being Build Collaborative Capacity

Network Leadership Training Academy

Webinar Series: Network Leadership from the Field

PARTNER Tool Workshop

Community Based Participatory Research (CBPR)
Translating Data to Practice

# Tools for Assessing Networks

### **PARTNER Tool**

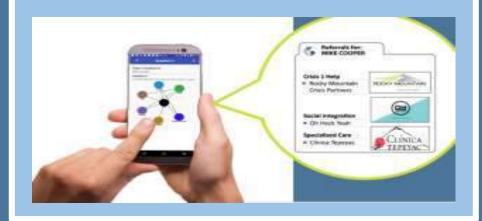
Program to Analyze, Record, and Track Networks to Enhance Relationships

- Practitioner designed SNA
- Survey, Analyze, Visualize
- www.partnertool.net



### Person-Centered Network App

- To assess gaps & strengths in personal support networks
- For providers screening clients
- Links to community resources
- <u>www.partnertool.net/tools-and-training/pcn-app/</u>



# Network Leadership: Future Training and Webinars www.networkleader.org

**Network Leadership Webinar Series: Lessons From the Field** 

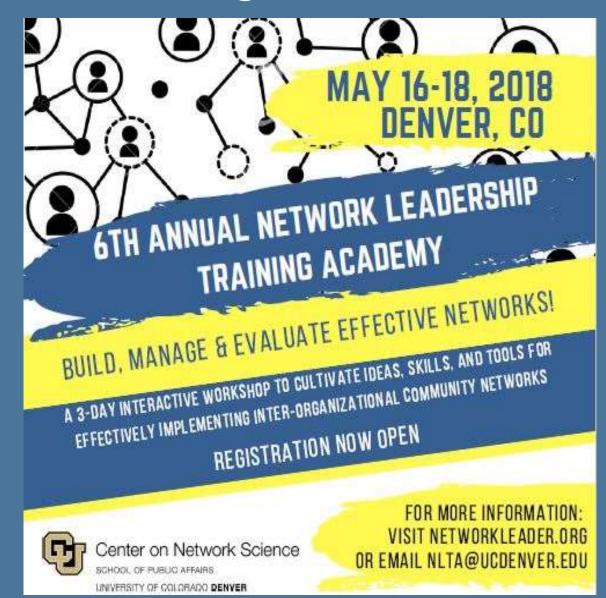
February 21, 10:00am MT

Emergent Network Leadership: How Community and Public Health Partnerships Contribute to Disaster Recovery And Resilience

Joie Acosta, Ph.D, Senior Behavioral Scientist, RAND

March 14, 12pm MT

Penny Scott, Capacity and Resource Strategist, Community Hubs Division CommunityHubsOntario.ca



# Get in touch with us:



www.center-networkscience.net www.networkleader.org



partnertool@ucdenver.edu nlta@ucdenver.edu



@partner tool
@NetworkLeaderTA

### **Webinar Logistics**

Webinar questions- Q&A box
Technical questions- Chat box
Webinar recording & slides
will be emailed

# **PARTNER**

Program to Analyze, Record, and Track Networks to Enhance Relationships



# Stats on PARTNER

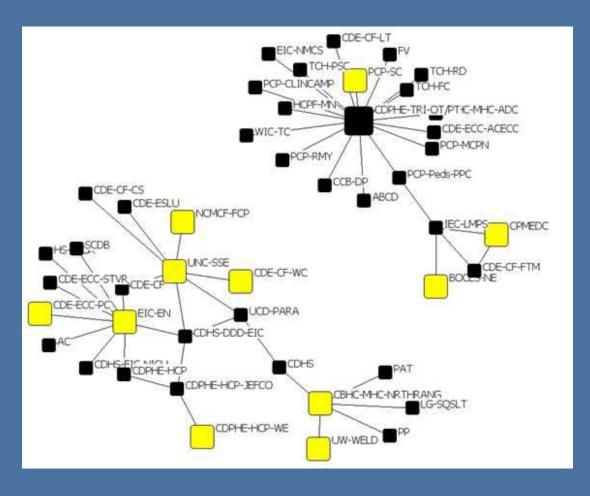
- Funded by the RWJF for 7 years
- Used by Practitioners, Evaluators, Researchers in Over 2000 Communities
  - All 50 states, over 40 countries
  - Each user represents a community coalition/group (e.g. Healthy Living, Tobacco Prevention, Cancer, etc)
- ❖As of Sept 2017, the database includes
  - N=1200 NETWORKS; N=45,000 ORGS
  - N=135,524 of DYADIC PARTNERSHIPS

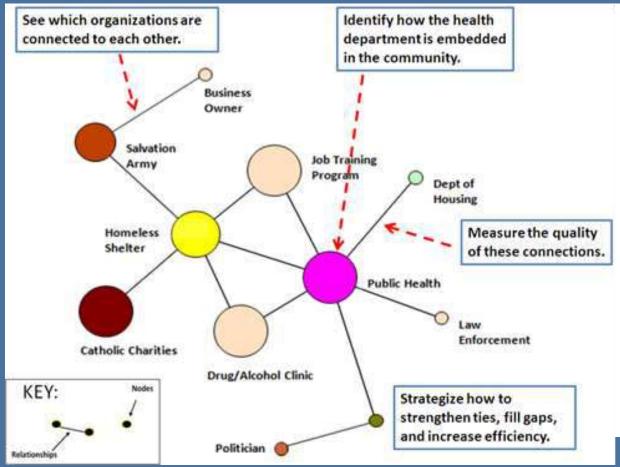






# What Does PARTNER Do?





# What Kinds of Questions Can We Answer Using This Approach?

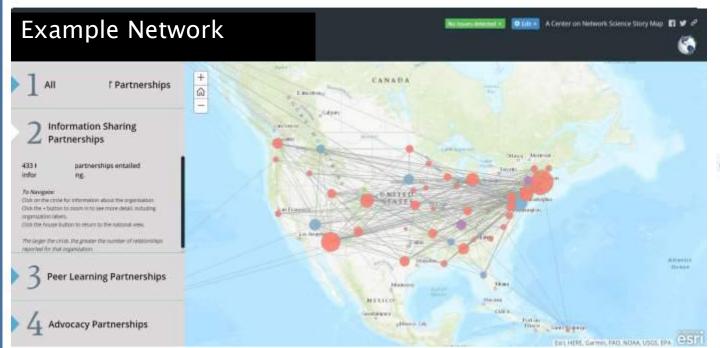
- How should organizations invest resources to build and strengthen new partnerships?
- How are cross-sector partnerships leading to health and well-being outcomes?
- Which sectors are already working together and where there are gaps?
- What social determinants of health functions are addressed collaboratively?

- What kinds of resources are organizations leveraging collaboratively?
- How do different sectors report perceptions of one another in terms of value and trust?
- What are the gaps and opportunities that exist?
- What are strategizes for how to leverage existing relationships?

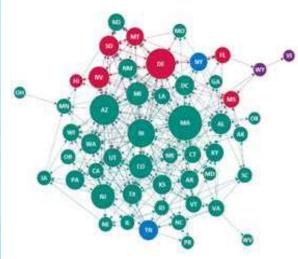
Project Examples
Completed and Ongoing

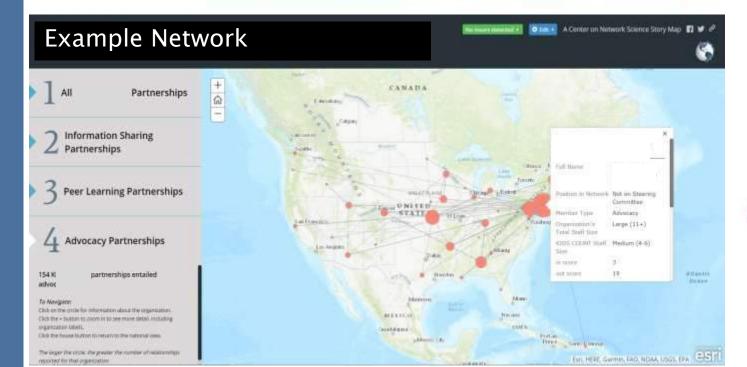
Assessing ROI on Network Investment

# National Network



### Information Sharing



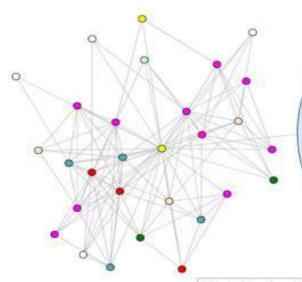




# Outcomes of an Intervention:

Building
Capacity for
a Networked
Workforce

| Has not resulted in any systems change                                 | 12% | N=22 |
|--|-----|------|
| Has not resulted in any systems change, but we anticipate that it will | 18% | N=32 |
| Has been informative only  | 15% | N=27 |
| Led to an exchange of resources  | 36% | N=64 |
| Led to new connections   | 44% | N=79 |
| Led to improved connections  | 44% | N=79 |
| Led to an improved screening/referral/follow-up process                | 16% | N=28 |
| Led to new program development   |     | N=49 |
| Led to development of new standards/guidelines                         | 9%  | N=16 |
| Led to improved services or supports                                   | 37% | N=66 |
| Improved my organization's capacity                                    | 26% | N=46 |



RHC has been the best partner of any kind our community has been associated with in the 20 years I have been the Director. In the past new programs and services have surfaced, promised partnerships, and delivered little or nothing sustainable or valuable to our communities. Our Regional Connector has become an intricate part of service delivery, accessing funding for long term health commitments, as well as a wonderful reliable resource and friend to evervone she has partnered with.

### Contribution/Resource Key

- Advocacy for the RHC within the region
- Connections to community resources
- Connections to health care providers/practices
- Expertise in behavioral health
- Expertise in program planning and strategy
- Facilitation/Leadership
  - Support for and engagement in systems building

# Developing State Profiles of Cross-Sector Networks

Create publicly accessible cross-sector network profiles for all 50 US states.

Improve network practitioner's ability to access and leverage interorganizational network information.

Improve funder/decision maker's ability to understand and compare interorganizational networks across the United States.

Increase scientific understanding of interorganizational network characteristics and factors contributing to success

### What does our region's health system look like?

- On average, each organization in our health system maintained 31 linkages with up to 16 other organizations in 2016.
- Our health system maintained 3% of potential linkages (every organization connected to every other organization) in 2016.
- Sometimes community collaboration happens in a disconnected way through siloes." In 2016, there were 62
- On average in 2016, it would take any organization 2.3 "hops" to link with any other organization in our



### How are organizations linked in our region's health system?



Collaboration could include exchanging information, attending meetings together. sharing resources completing joint projects, etc.



Client/patient referrals could include referring an individual to a health care provider. specialist, community support group, social



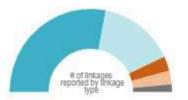
Client/patient data exchange includes the transfer of any personally identifying



Education could include Financial support could trainings, presentations. seminars, workshops,



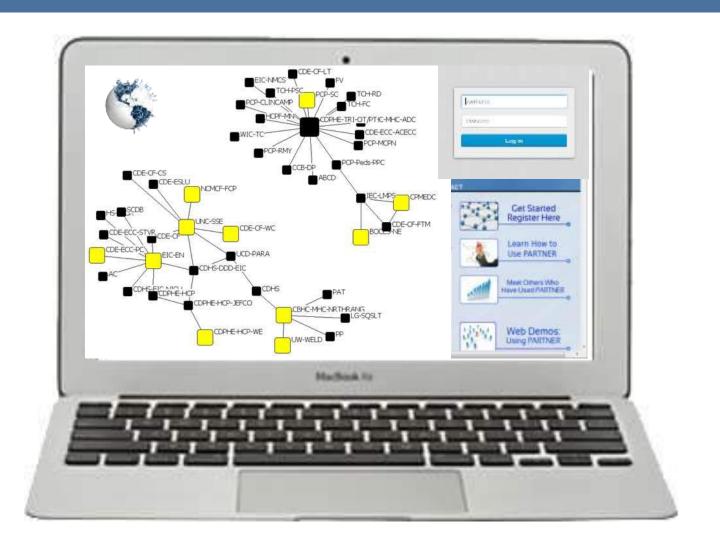
take the form of grants contracts, or other financial contributions



## PARTNER 2.0

### State Profile Data of Cross-Sector Interorganizational Networks

www.partnertool.net



# Interactive, Searchable platform

Allow people to search existing data on cross-sector interorganizational networks at the neighborhood, state, or regional levels

Register to update your organization's partnerships and profile

Example Use: Search by SDOH function (for example, food security) and see who is working with orgs providing that service; map on to geographic overlay of need in any area of the state; find gaps; build capacity strategies



# Today's Speakers

### Blythe Butler, Network Weaver, First 2000 Days Network

• First 2000 Days Network, based in Canada, an innovative 'collective impact' initiative seeking to improve both process systems and early childhood development outcomes.



# Dr. Jennifer Marshall, Assistant Professor University of South Florida

• Lead Evaluator for Florida's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program and the Early Childhood Comprehensive Systems (ECCS) impact project.



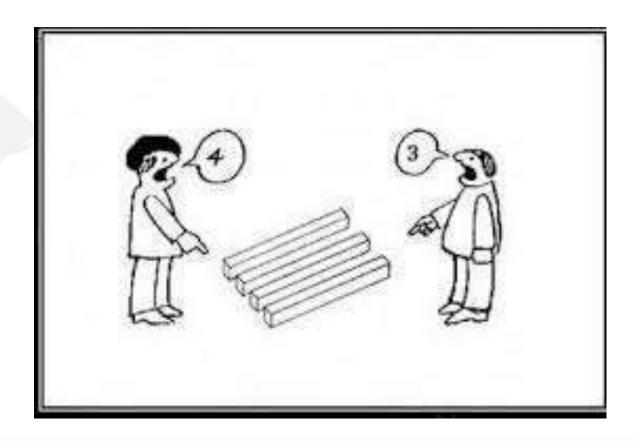
# Cross-Sector Community Network Evaluations: Stories of Success Using the PARTNER Tool



Blythe Butler: <u>info@2000days.ca</u>

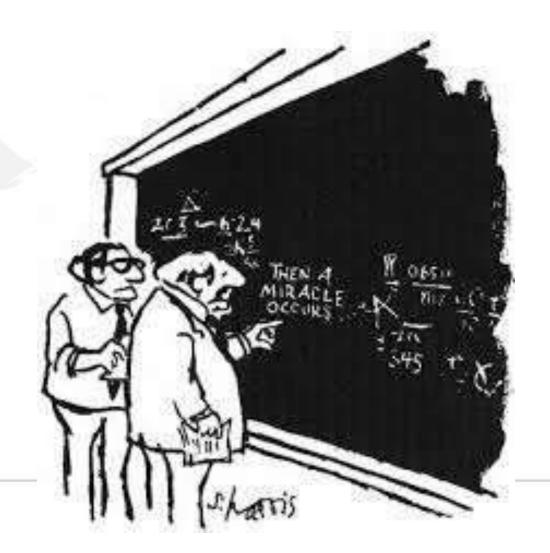
January 24, 2018

# Our perspective: From a practitioner's point of view





# "I think you need to be more explicit in Step 2"











The First 2000 Days Network acts as a catalyst for linking, aligning, and leveraging efforts in the Early Childhood Development (ECD) system to enable collective action toward improving ECD outcomes.



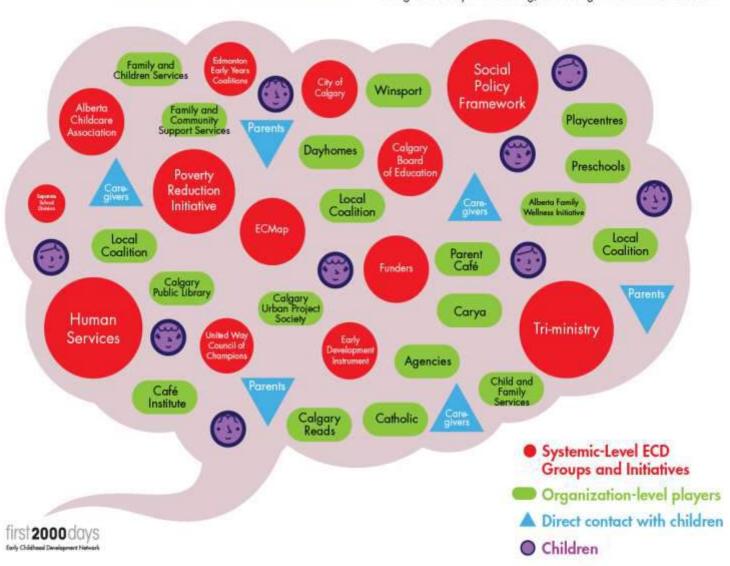
# Backbone Structure: • Shared Measurement

Network "Wisdom"

- Mutually Reinforcing Activities
- Network Mapping and Assessment

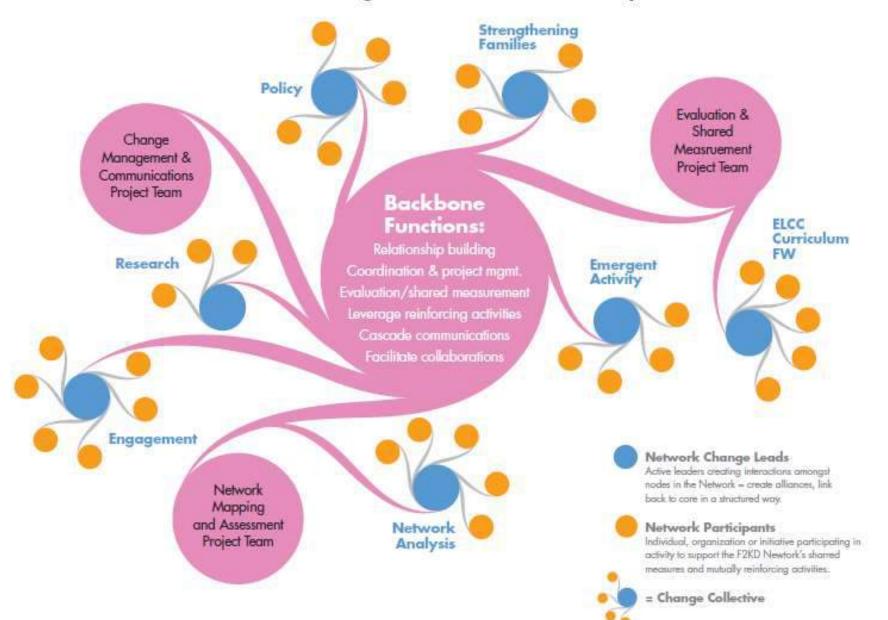
### Purpose:

To enable unique contributions from a diverse group of individuals and organizations to achieve the vision of the First2000Days Network by acting as a catalyst for learning, connecting and collaborative action.





### Network Structure: Linking Network & Collective Impact Functions





# Theory of Change:

If we are able to build on the momentum in the Early Childhood Development space in Calgary through sharing, aligning, and leveraging what is working, we will have better outcomes at the system, agency and community level, which will ultimately mean better outcomes for children.

### **Guiding Principles**

**Trusting**: a focus on building trusting relationships

Collaborative: shared responsibilities amongst the group to lead and

contribute

Participatory: many voices heard & opportunities to engage

Authentic: planning, process and implementation are in-line with

vision and purpose

**Transparent**: access to information is shared, decision-making processes are known, status of actions is visible

Adaptive: revisions are encouraged based on learning, changes in the environment and people involved.

**Innovative**: demonstration of leadership, perseverance and courage to push against conventional barriers to achieving progress.

Model the behaviours you want to create in others.



### We are a Network...

### **Traditional Mindset**

Firmly controlled and planned

Strengthening individual efforts

Procuring deliverables (e.g., programs)

Proprietary information and learning

Decision making concentrated

Insight from individual, "expert" actors

Effectiveness linked to concrete outputs (e.g., a policy win, a measurable increase in community prosperity)

### **Network Mindset**

Loosely controlled and emergent

Weaving connections and building networks

Stimulating activity (e.g., platforms)

Open information and learning

Decision making shared

Collective intelligence

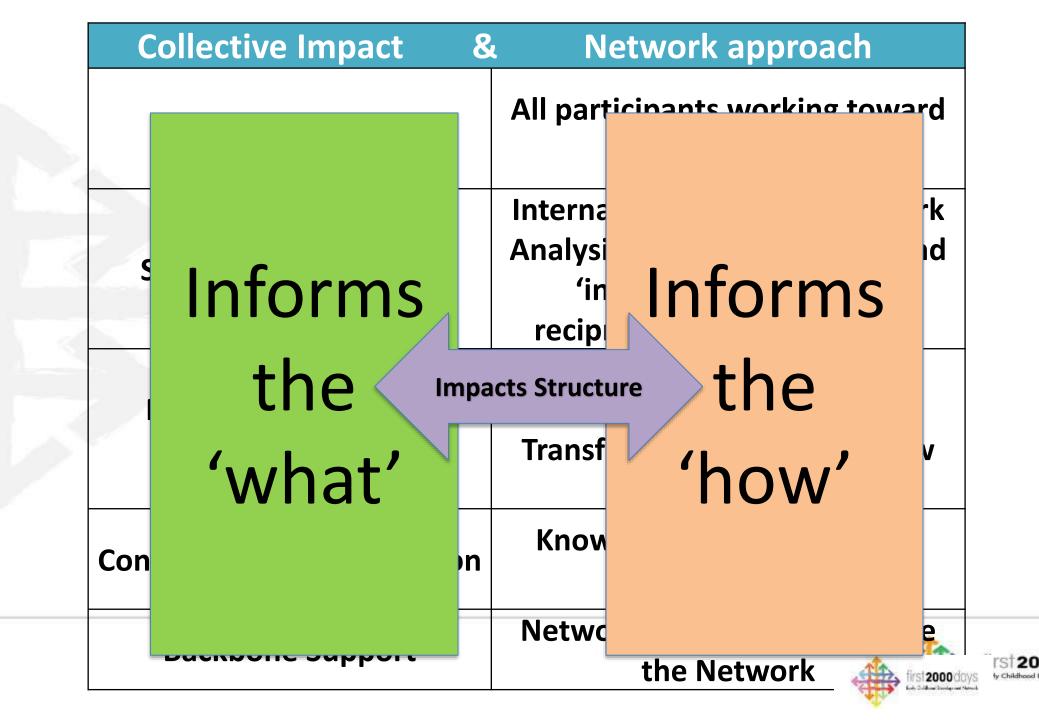
Effectiveness also linked to intangibles (e.g., trusting relationships, information flows)



| Collective Impact 8             | Network approach  |
|---------------------------------|---|
| Common Agenda                   | All participants working toward common goal.  |
| Shared Measurement              | Process Outcomes and Population Outcomes, link with capacity building & continuous improvement. |
| Mutually Reinforcing Activities | Network participants contributions are varied. Link, align and leverage                         |
| Continuous Communication        | Know the Network, Knit the<br>Network   |
| Backbone Support                | Network Leadership, Organize the Network  |

rst 2000 days ty Childhood Development Network

first2000days



# WHAT IS NETWORK LEADERSHIP?

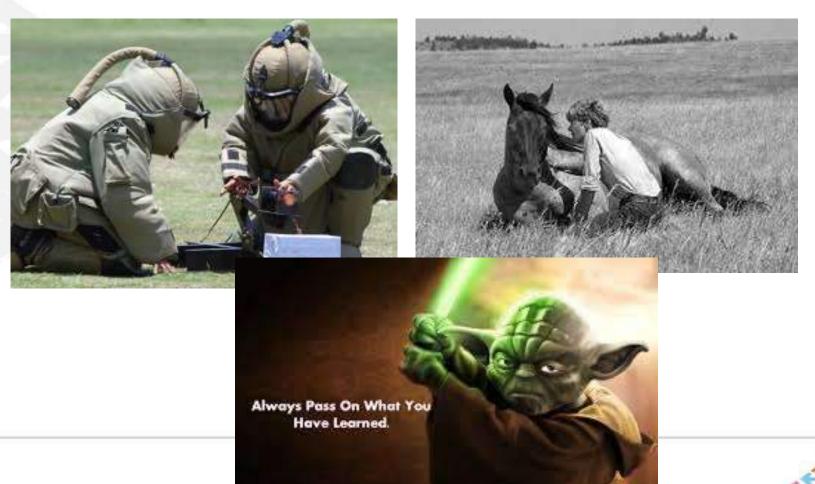
Network Leadership is a framework to help people who are part of cross-sector community efforts learn how to build, manage, and evaluate effective networks.

### Network Leadership is based on a set of seven values:





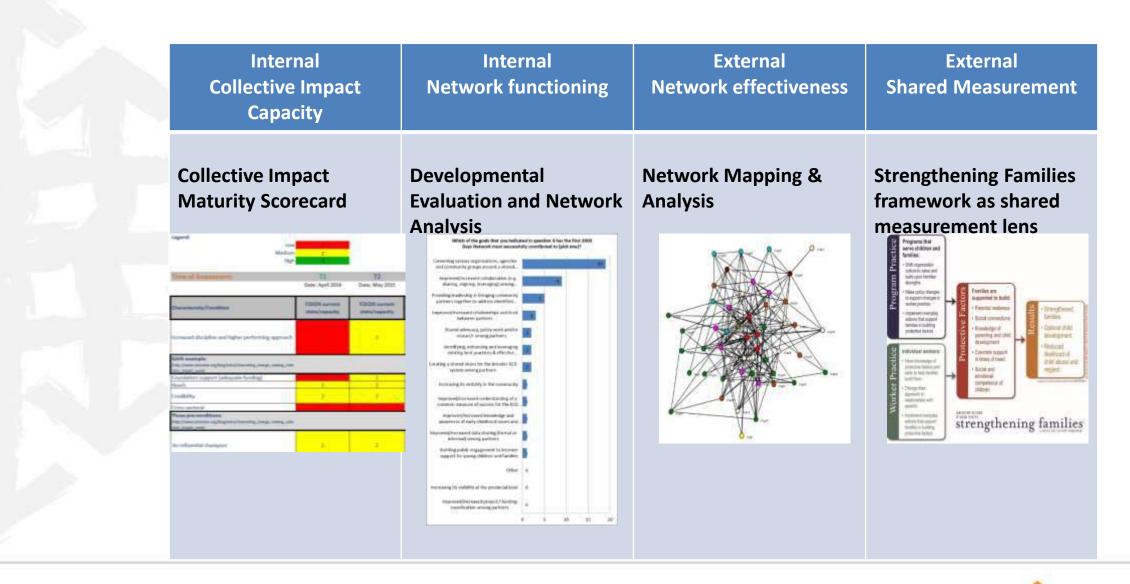
# Network Leadership is both: Bomb Disposal and Horse Whispering





# **Assess Early, Often and on Multiple Fronts**

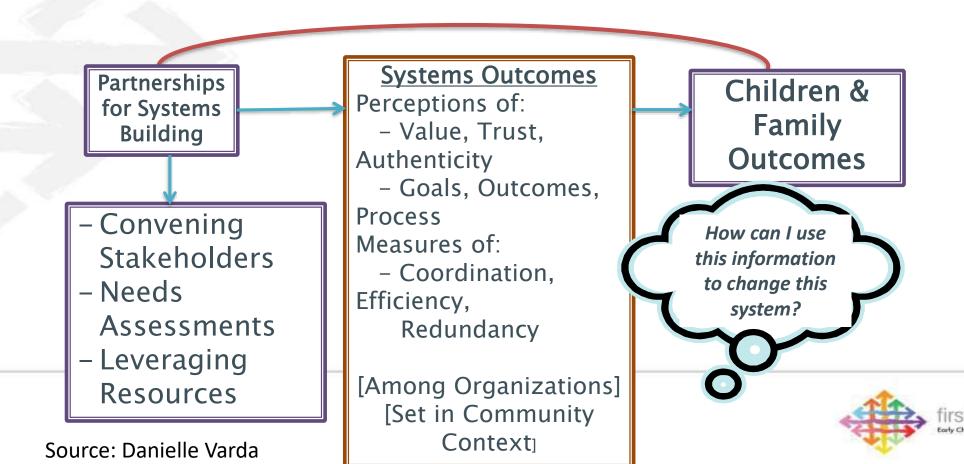






# **Measuring Systems Outcomes**

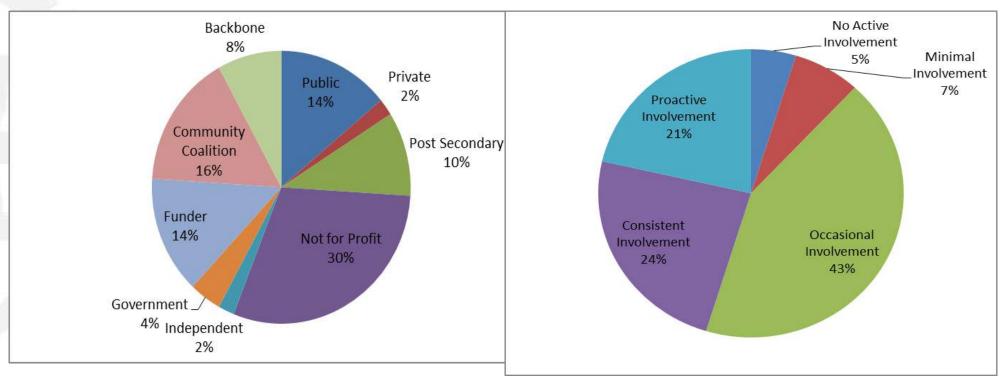
Systems outcomes are not the same as population or client outcomes. They are intermediary outcomes that reflect the way that organizations interact, share resources, and implement work (PROCESS outcomes).



# USING NETWORK ANALYSIS TO GUIDE COLLABORATIVE STRATEGY

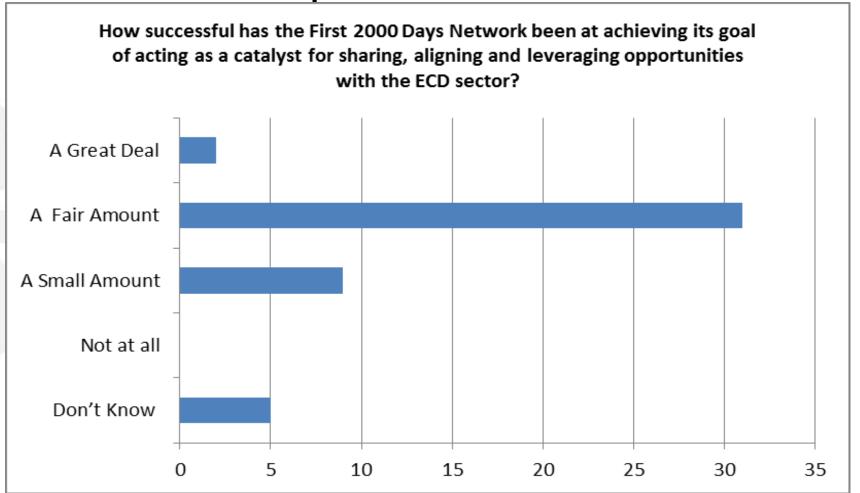


# Who's a Member, and How Often Do They Participate?



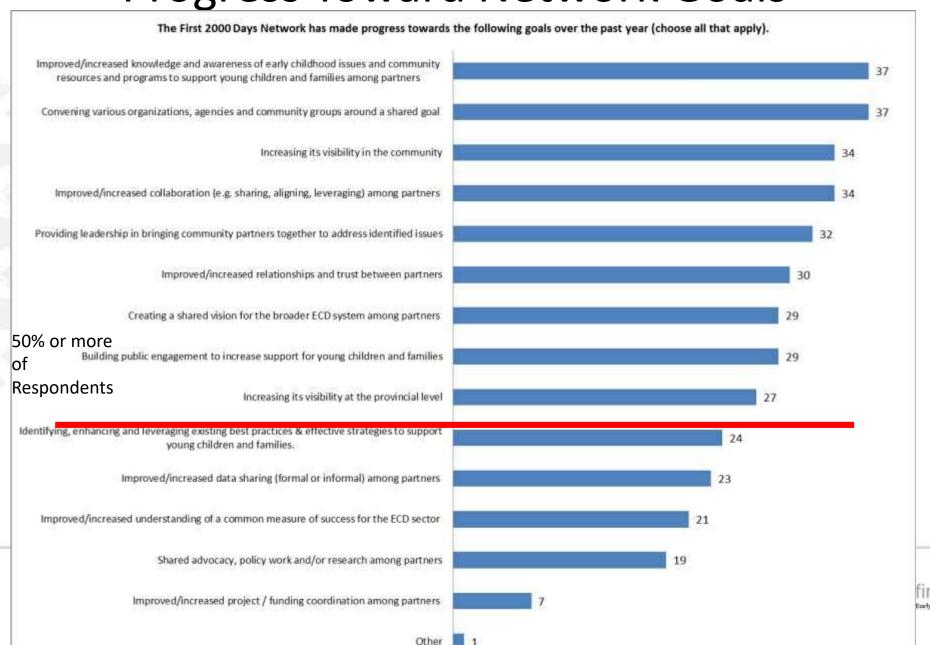


# Perceptions of Success





# **Progress Toward Network Goals**





### Key Goals Highlighted

Improved/increased knowledge and awareness of early childhood issues and community resources and programs to support young children and families among partners

Convening various organizations, agencies and community groups around a shared goal

Increasing its visibility in the community

Improved/increased collaboration (e.g. sharing, aligning, leveraging) among partners

Providing leadership in bringing community partners together to address identified issues

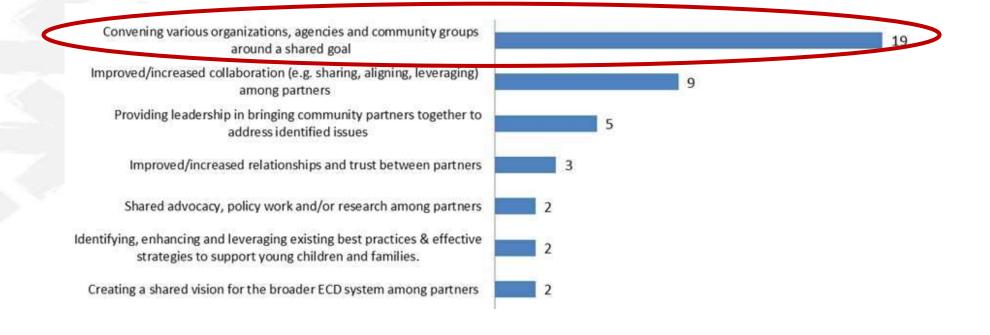
Improved/increased relationships and trust between partners

Creating a shared vision for the broader ECD system among partners

Building public engagement to increase support for young children and families

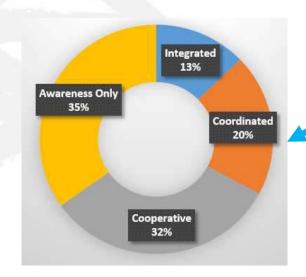


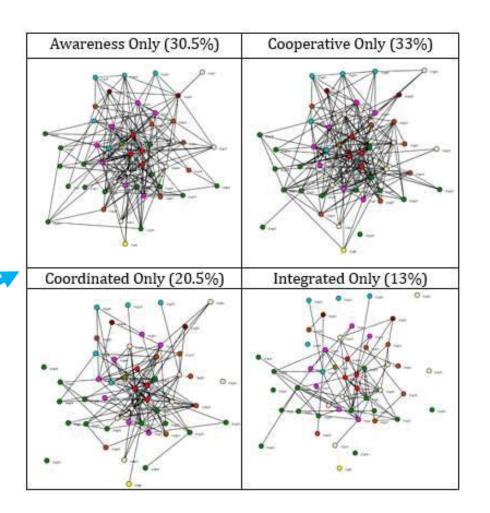
#### Most Important Progress:



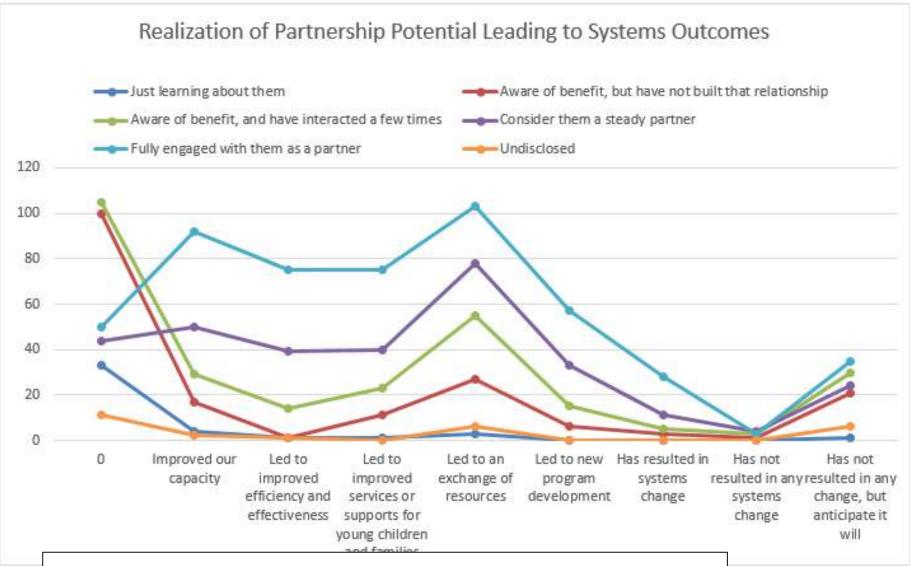


How Connected are Members of the First 2000 Days Network?





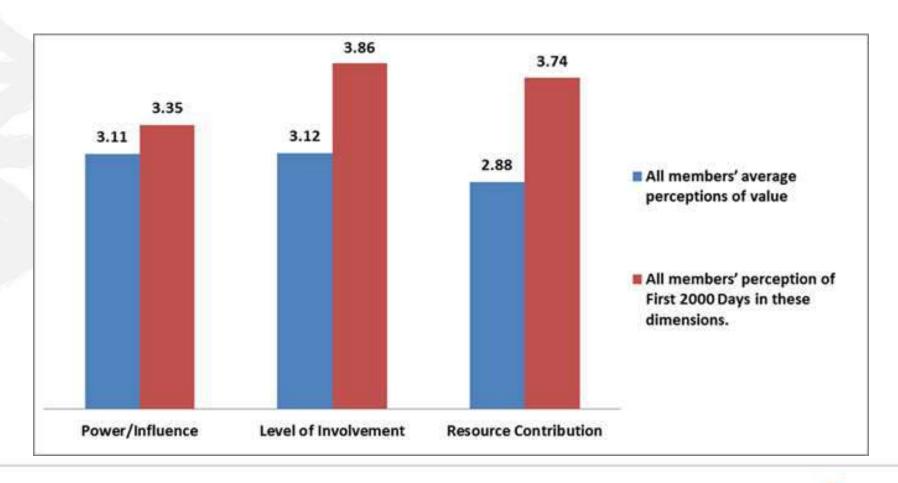




The more engaged the partnership the greater the number of outcomes reported.

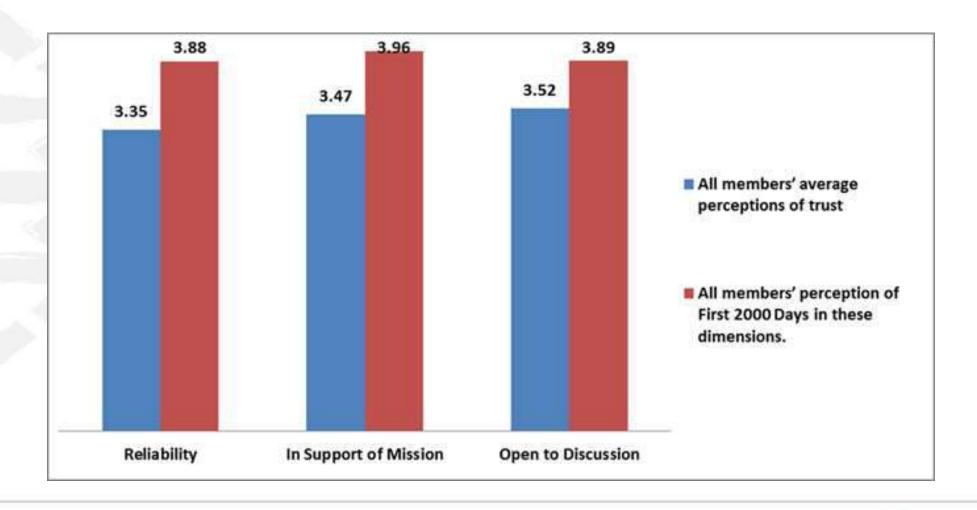


#### Value Measures





#### **Trust Measures**





## **Process Quality Scale**

|   | Process Quality Questions                     | Score |
|---|---|-------|
|   | Often decisions are made in advance and       | 3.63  |
|   | simply confirmed by the process               |       |
|   | (Authenticity)                                |       |
| 8 | In the process, some people's "merits" are    | 4.34  |
|   | taken for granted while other people are      |       |
|   | asked to justify themselves (Authenticity).   |       |
|   | In the process, strings are being pulled from | 3.50  |
|   | the outside, which influence important        |       |
|   | decisions (Authenticity).                     |       |

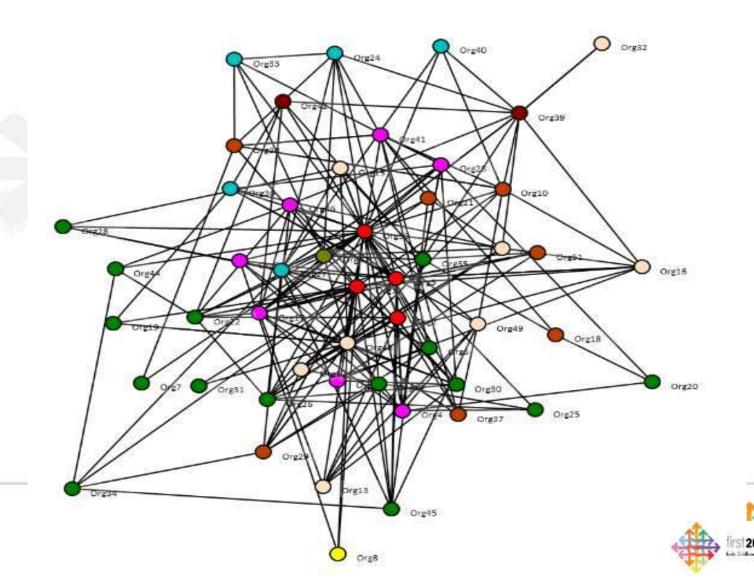


## Working Together Scale

| Working Together Scale                                    | Score |
|---|-------|
| As a result of participation in this collaboration, my    | 2.89  |
| organization, agency, or community group has adopted      |       |
| shared goals developed by the First 2000 Days Network     |       |
| (Results of the Collaboration).                           |       |
| My organization, agency, or community group has           | 2.73  |
| developed or improved programs or services it delivers as |       |
| a result of participation in the First 2000 Days Network  |       |
| (Results of the Collaboration).                           |       |
| There are clearly defined roles for the members of the    | 2.52  |
| First 2000 Days Network (Structure of the Collaboration). |       |



#### **Collaboration** ≠ **Consensus**



# The Value PARTNER has been a key factor to help us improve:

- Engagement
- Leadership
- Strategy
- Relationships
- Communication
- Systems outcomes
- Culture of learning





"You think because you understand 'one' you must also understand 'two', because one and one make two.

But you must also understand 'and'."

- Rumi







## Culture Matters: Using A Culture of Adaptive Learning to Implement Collective Impact

(Adapted from my post on Calibra-tion.ca, and an article for Engage! Magazine via Tamarack)

"We shall not cease from exploration, and the end of all our exploring will be to arrive where we started and know the place for the first time."

- T. S. Eliot

For the past three years I've had the fortune to work as the Network Weaver with the <u>First 2000 Days Network</u> leading strategy development and implementation, with a strong focus on culture development. The First 2000 Days Network is an initiative focused on improving outcomes for children in their first two thousand days of life, before they enter the formal school system. The impact of





## FIRST 2000 DAYS NETWORK CASE STUDY

Establishing the pre-conditions for systems-level change in Early Childhood Development

www.2000days.ca info@2000days.ca



The First 2000 Days Network



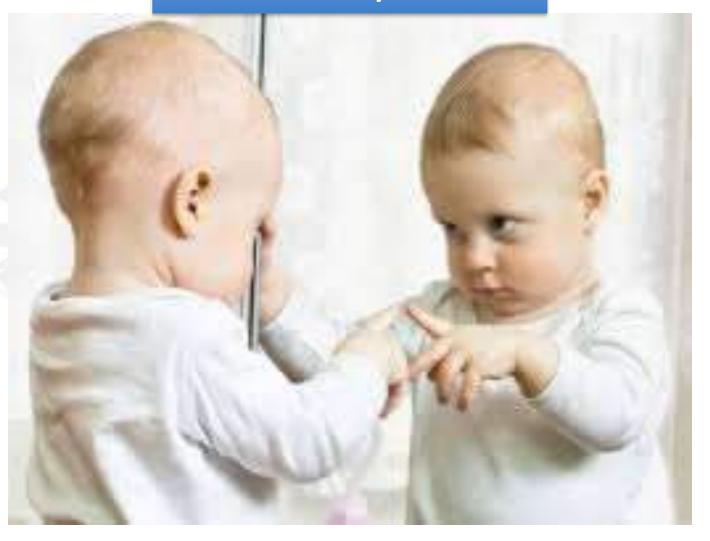
@First2000days



2000days



## Thank you!

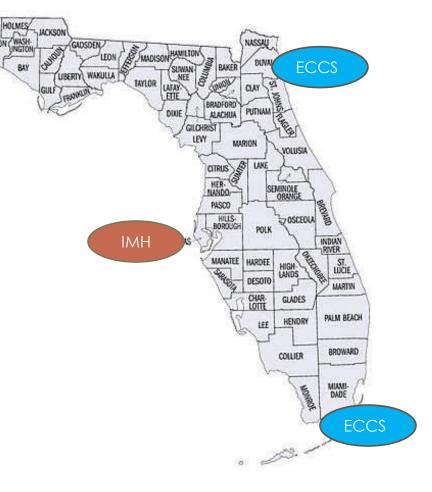






## Three Examples (2014-2018)

- MIECHV
  - Maternal, Infant, & Early Childhood Home Visiting
- ECCS
  - Early Childhood
     Comprehensive Systems
- IMH
  - Infant Mental Health



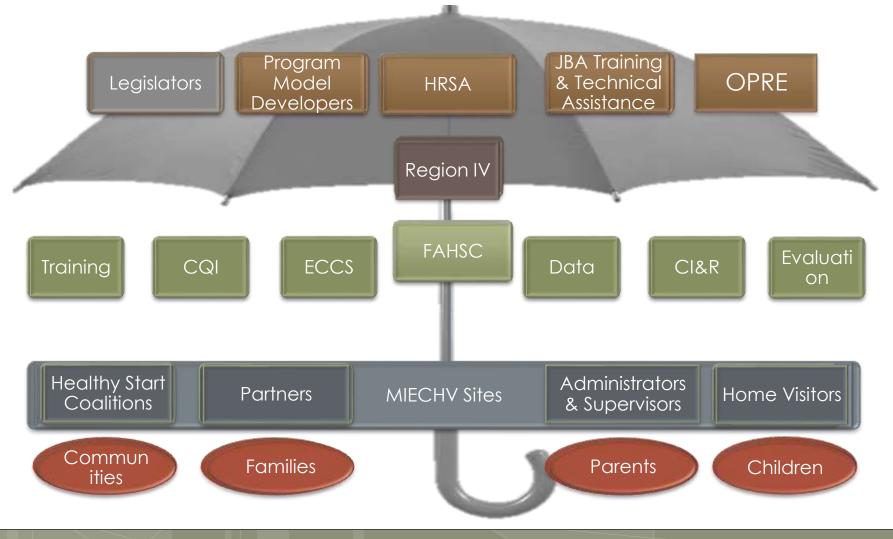
### Florida MIECHV Overview

- Implemented in 22 of 29 communities
- Three program models...
  - Nurse-Family Partnership
  - Parents as Teachers
  - Healthy Families Florida
- managed by
  - local Healthy Start Coalitions
  - Hospitals and federallyqualified health centers
  - other community-based organizations



"At Risk" communities contain higher concentrations of: • preterm birth, low-birth weight, & infant mortality • child maltreatment • poverty • crime • domestic violence • high rates of high-school dropout • substance abuse • unemployment

## Organizational Chart



#### 2017 MIECHV Benchmark Areas:

- Preterm Birth
- Well-Child Visits
- Postpartum Care
- Breastfeeding
- Safe Sleep
- Depression Screening
- Tobacco Cessation Referral
- Child Injury
- Child Maltreatment





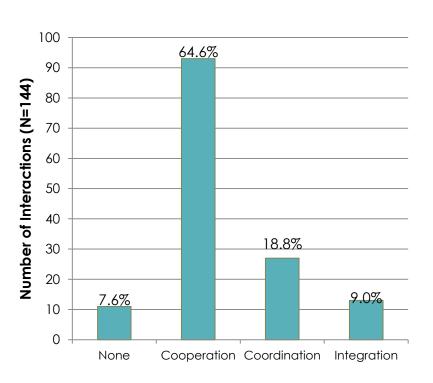
#### **Evaluation Methods**

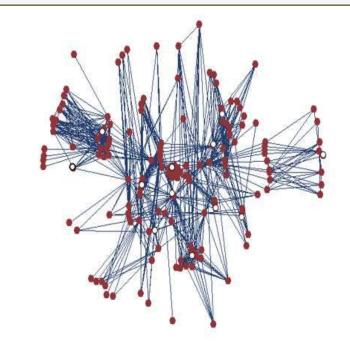
- Theory-based
- Qualitative
  - Participant interviews
  - Staff focus groups
  - Journey Mapping
  - Photovoice
- Quantitative
  - Pre-post surveys
  - FLOHVIS data analysis
  - Data linkage
- Social network analysis
  - PARTNER Survey
  - Collaboration study
- Spatial analysis
  - GIS mapping

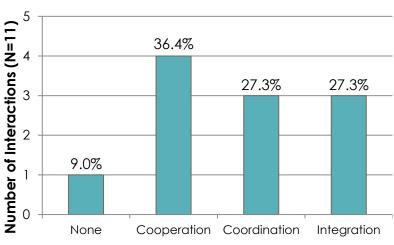


- > How do collaboration and systems development occur in MIECHV communities?
- How are Learning Collaboratives implementing CQI initiatives?
- What are the needs of programs, staff, and families served, in relation to: participant engagement and retention? community referrals? parenting?

Did Florida MIECHV contribute to collaboration and systems development at the state and community levels?







## Major findings

- Results of the state-level survey illustrate:
  - a network comprised of 32/35 state agency partners from across service sectors (education, healthcare, home visiting, government, social services)
  - number, type, and quality of relationships
  - perceptions of most effective network activities
  - assessment of contributions and roles adopted by each partner, and Florida MIECHV's progress.

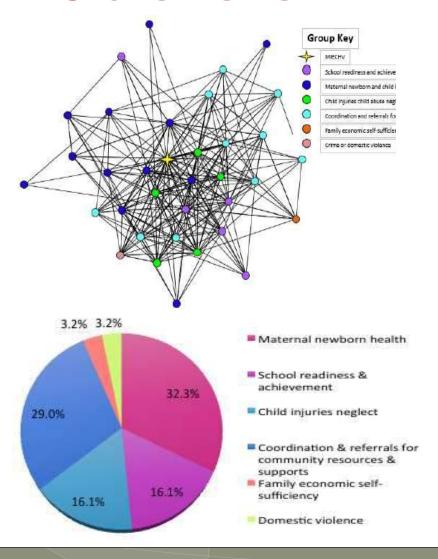
From the state-level network survey, we learned that a variety of state-level partnerships help to support the MIECHV Initiative's efforts through interagency relationships that comprise a fairly dense network with high levels of interagency trust (82.6%), knowledge/information exchange, assembly of diverse stakeholders, and shared mission/goals of improving services for children and families in high-need communities, reducing health disparities, and increasing implementation of evidence-based interventions. Most (63.4%) network partners felt that MIECHV had made progress towards its goals since it began, while one third felt it was too soon to tell.

- The 2017 site-level survey
  - distributed to stakeholders nested within 14 Florida MIECHV communities (networks range in size from 8-48 partners), two-thirds (205/325) have completed the survey (response rates range from 40-100%).

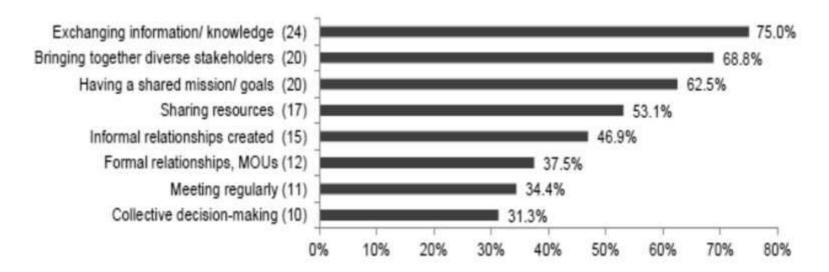
#### Site Level

#### Site C Site A Site B Density Score: 62% Density Score: 45% Density Score: 56% Trust Score: 82% Trust Score: 81% Trust Score: 79% Site D Site E Site F Density Score: 43% Density Score: 78% Density Score: 67% Trust Score: 96% Trust Score: 92% Trust Score: 76% Site G Site H Site I Density Score: 90% Density Score: 47% Density Score: 62% Trust Score: 75% Trust Score: 93% Trust Score: 76%

#### **State Level**



#### Processes







### MIECHV Experience

#### Successes

- Engagement
- Response rates
- Triangulation
- Utility

#### Challenges

- Identifying partners
- Dissemination
- Analysis and interpretation

"It's very collaborative. There's something about our agencies, and I think this is how it should be, where our focus is on our community, on the people we're serving, not necessarily on 'what's in it for me' as an organization... the organizations that aren't like that or all about, 'We're going to be the ones getting all the grants. We're going to be the ones that are only going to serve this population. We're the only ones that are going to do this.' They don't do well. They don't succeed."

#### Example 2: Florida ECCS Impact Project

- Evaluation Component 1: Community Team Structure, Organization, Systems Building
- Evaluation Component 2: Community Team CQI Capacity and Implementation
- Activities
  - Community Assessments
  - Community Tours
  - Focus Groups
  - PARTNER Tool Survey
  - Data Consultation/GIS mapping





"I think there is certainly willingness. Liberty City kind of ranks very high on that list. People know there's a great deal of need and opportunity here. People are like, 'Yes'."







## Example 3: Hillsborough Infant Mental Health Project (IMHUG)

- FL Association for IMH
- Children's Board
- Early Childhood Council
- Steering committee •
- Community Systems
  - ECE
  - Child Welfare
  - Home Visiting
  - Mental Health
- Agency Staff
  - Administrators/Supervisors
  - Staff
- Evaluation Team





#### **Outcome: Improved** Infant Mental Health

**DOI Theory:** 

- Innovators

1. Knowledge

4. Implementation

5. Confirmation

2. Persuasion

3. Decision

Steps:

Levels of readiness:

- Children

#### Levels of influence:

- System
- Providers

#### Strategies:

- Social Marketing (awareness)
- -Training (Level 1, 2, 3) (knowledge,
- effectiveness)
- Steering Committee (capacity)
- Sustainability

#### **Determinants:**

- Early Adopters - Background, - Early Majority knowledge, attitudes, Late Majority beliefs - Laggards
- Professional norms & roles
- Organizational structure/ characteristics
- Perceptions of Relative advantage, compatibility,

complexity, trialiability, observability

- Organizations
- Parents

#### Goal:

To unite the Hillsborough County community around the areas of prevention, early identification, referral and intervention for Infant Mental Health in children ages birth to three. This effort focuses on increasing awareness, knowledge, effectiveness, capacity and sustainability.

#### Process Measures

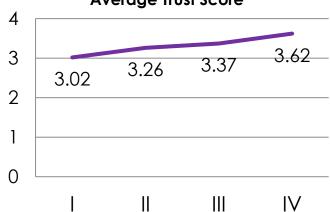
- Participants rated the relative value of each IMHUG partner agency to the effort.
  - Collectively, agencies perceived to offer the most contribution (power/Influence, level of involvement, resource contribution) to IMHUG were: the Early Childhood Council, Early Learning Coalition, Children's Board, and Eckerd.

- Interagency Trust
  - Scale of 1-4
  - Subscales include total trust, reliability, support of the IMHUG mission, and openness to discussion
- There was an increase in trust scores with each consecutive PARTNER survey.

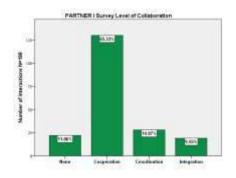
#### What aspects of collaboration contribute to project success?

| Aspects of collaboration               | PARTNER I  | PARTNER II | PARTNER III | PARTNER IV |
|--|------------|------------|-------------|------------|
|  | n (%)      | n (%)      | n (%)       | N (%)      |
| Meeting regularly                      | 13 (13.5%) | 17 (17.2%) | 17 (15.2%)  | 7 (11.5%)  |
| Exchanging info/knowledge              | 17 (17.7%) | 16 (16.2%) | 18 (16.1%)  | 11 (18.0%) |
| Having a shared mission, goals         | 15 (15.6%) | 15 (15.2%) | 13 (11.6%)  | 9 (14.8%)  |
| Bringing together diverse stakeholders | 14 (14.6%) | 15 (15.2%) | 19 (17.0%)  | 7 (11.5%)  |
| Sharing resources                      | 13 (13.5%) | 13 (13.1%) | 17 (15.2%)  | 11 (18.0%) |
| Collective decision-making             | 15 (15.6%) | 12 (12.1%) | 15 (13.4%)  | 7 (11.5%)  |
| Informal relationships created         | 9 (9.4%)   | 11 (11.1%) | 13 (11.6%)  | 9 (14.8%)  |

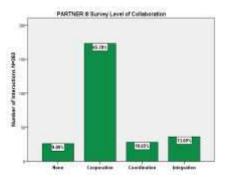
#### **Average Trust Score**



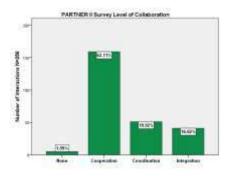
## Levels of Cooperation, Coordination, and Integration among partners.



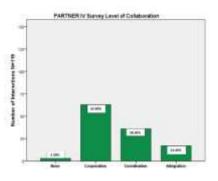
Time I



Time III



Time II

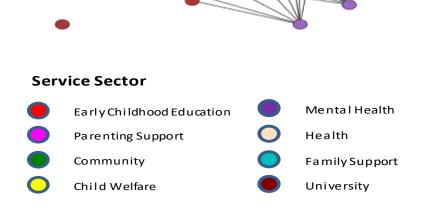


Time IV

#### What we've learned



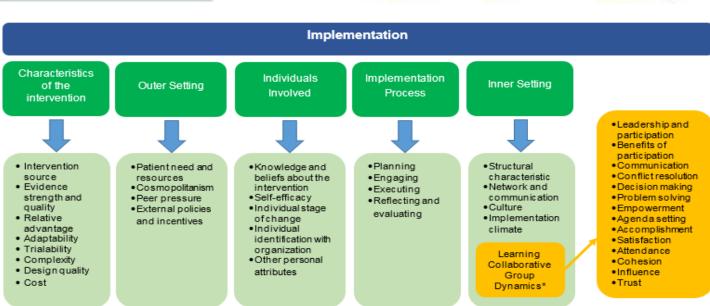
% Reporting IMHUG Very/Successful



#### Relevant Theories







## Next steps

- Coordinated Intake & Referral
- Participant/Family networks





## Thank you!

Jennifer Marshall, PhD, CPH Assistant Professor USF College of Public Health (813) 396-2672

jmarshal@health.usf.edu

Florida MIECHV Evaluation

http://miechv.health.usf.edu

Florida ECCS Evaluation

http://health.usf.edu/publichealth/chiles/eccs

Birth Defects Surveillance Program

http://health.usf.edu/publichealth/chiles/bdsp

