

Open Letter from the External Oversight Review Panel:

General Observations on the Health of Population Networks' Two-Year Formative Review

The review panel felt that the Michael Smith Foundation for Health Research was very innovative in developing this infrastructure program, and commended its alignment with other MSFHR capacity building programs. There is a major opportunity to advance the mission of the Foundation through this program.

Capacity development takes time. In the view of the panel, the Networks are all still in development, though at different stages. This review was in essence, a second formative review.

The review panel was extremely impressed by the dedication of Network leaders, who typically get little institutional support, recognition, or reward for capacity development activities, which are onerous. Given that leadership is a critical success factor, the Foundation should do everything possible to facilitate the Networks to attract, support, and retain leaders with vision, and with the ability to nurture and mobilize people and develop an impact oriented Network.

The panel has one overarching recommendation: priority should be given to developing metrics for assessing the progress of the overall Networks program, and of individual Networks. In future, funding should be awarded based on value added by the Networks in advancing the goals of the MSFHR, the Networks program, and of the individual Networks themselves.

During the first 24 months, Networks have, for the most part, reported progress in process terms (e.g., meetings, growth in membership, number of activities conducted). This is reasonable at a formative stage, but it is critical now to ensure that these processes do not become ends in themselves. It was not clear how these processes and indicators of “progress” (adding members or holding meetings, etc) necessarily add value to increasing the amount, quality or impact of the research and its application as the Networks mature.

The MSFHR might consider working with, or requiring, each Network to develop metrics (aligned with the mission of the MSFHR and the Networks program) for judging the ultimate *impact* of their capacity development. This would provide a context for developing a simple “logic model” that would show what strategies were being used to achieve impacts, how specific plans were aligned with the strategies, and how resources were being aligned with the plans and strategies to drive impact.

Team specific metrics would provide a framework for Networks to develop self – evaluation mechanisms to assess whether their activities were adding value by leading to impact on metrics, so that they would have a basis for improving their ability through reallocation of resources to the most productive forms of capacity development.

Overall program metrics, combined with Network specific metrics, would set the stage for more effective management and evaluation of the program and Teams. Planning and reporting formats that were built around impact goals and metrics would enable the MSFHR to give Networks more flexibility in strategically allocating their resources (e.g., by investing in staff, or seed grants) or developing organizational structures (e.g. single versus multiple leaders) while holding them accountable for results. Teams would not be micro-managed, but would be judged based on performance.

Such metrics would provide a context for Networks to report progress and plans against their impact referenced logic model. This would enable a more informed, constructive and rigorous internal and external review of accomplishments and plans. Without such a framework and related metrics for reporting accomplishments and plans, there is a risk that Networks will become complacent, and develop a sense of entitlement to funding based on simple growth and engagement of members, with no real added value. These metrics would also strengthen the ability of network leaders to focus resources on goal directed activity in the face of any pressures that might exist within the network to steer resources in less productive directions. Showing alignment of resources with metrics could also protect Network leaders from perceptions that they are using resources to hire staff to strengthen their own existing research activities, rather than making: it would be more transparent how these staff are adding value to the Network by freeing leaders to build the Network and by supporting implementation of value added Network activities.

The Foundation might also consider developing a mechanism that would allow for renewal of the Network program. For instance, might it be desirable to allow new Networks, in strategic areas defined by the Foundation, to apply in competition with existing Networks during the next review? Such an approach might enable MSFHR to continually improve the relevance and quality of its Network program.

Finally, it was recognized that there is international interest in capacity development. There is an opportunity for the Foundation to make a major contribution to our understanding of capacity development: the Networks may be seen as a set of “natural experiments” in capacity development. If they are given latitude in the means they use to develop capacity, yet are judged against appropriate metrics, it would be possible to conduct a formal study of capacity development using the Networks as case examples. The Foundation may wish to consider the merits of initiating such a study.

Regards,

Health of Population Networks
External Oversight Review Panel
March 28, 2007



Michael Smith Foundation for
Health Research

**INFRASTRUCTURE PROGRAMS
HEALTH OF POPULATION NETWORKS - TWO YEAR REPORT**

**EXTERNAL OVERSIGHT REVIEW PANEL COMMENTS SUMMARY
-Common Networking Themes**

March 5 & 6, 2007

INTRODUCTION

The Michael Smith Foundation for Health Research (MSFHR) convened an External Oversight Review Panel on March 5 & 6, 2007 to review the progress to date of the eight Health of Population Networks (HoPN). The Review Panel's mandate was to provide feedback on the networks' performance, and make recommendations regarding funding lifts, from the current level of \$250,000 per year per network up to a maximum of \$500,000 per year per network.

The review process was conducted in two steps: each Network's written documentation (original proposal, 15 and 24 month progress reports and budgets, response to the Formative Panel's comments [optional document], future directions and funding requests for Years 3 & 4) was reviewed by 1-2 content experts in each Network area. The content experts chosen were national experts in their fields. The experts' reviews were then sent to the External Oversight Review Panel to be included in their deliberations. Networks were reviewed individually with primary and secondary reviewers and readers providing comments. Reverse site visits with the networks were held during which the network teams were given the opportunity to present their respective networks to the Panel and to clarify any points with the Panel directly. An open Panel discussion followed with feedback to the networks and funding recommendations made.

In assessing each network, the Panel took into consideration the level of "unofficial" networking support in each health of population area prior to the launch of the HoPN program. Based on the documentation provided by each network, it was clear to the Panel that the development and strategic paths of the networks have diversified over the past two years. Networks were therefore assessed against their individual starting points and stated outcome measures rather than against each other.

The 2007 Review Panel was chaired by Dr. Roy Cameron, Panel Chair of the Formative Review of the networks in 2004. The Review Panel members were high level scientists from across Canada who brought a range of perspectives and expertise (see Attachment 1). Their experience, coupled with the reviews of the content experts and the opportunity to speak directly with the Network leaders, provided a rigorous and balanced review process.

Overall, the Panel found that the Health of Population Networks Program is clearly advancing the goals of MSFHR. The Panel noted that all HoPN were in a developmental phase during the first two years as they established their infrastructures (websites, databases, etc); the next phase should be to mobilize that infrastructure towards the achievement of key outcomes.

There were a number of common themes across networks that emerged which, if properly addressed, would raise the individual networks to the next level of development. It must be noted that not all networks may be at a stage in their current development to be able to fully address the following issues at this time.

COMMON NETWORKING THEMES

1. Governance

- a. The diversity of the networks was illustrated by their chosen models of leadership. Models included those with strategic vision versus facilitation versus management. The Panel noted strategic plans differed partially based on the philosophy of whether the network was mission-driven versus addressing research needs as they arose. The panel found that those networks with a clear vision and strategic plans that focused on a few key research areas/initiatives tended to show a greater impact on, and added value to, their research communities.
- b. The Panel was pleased to see that most networks had initiated Oversight Committees in order to strengthen their management and accountability and to provide input on future directions. The Panel recommended the use of an Oversight Committee by all networks.
- c. The number of co-leaders of a network ranged from 2 – 6. Advantages to the co-leadership model were seen by the Panel particularly when different spheres of influence were covered by different leaders. There was a concern that many of the networks' leaderships were not sustainable in terms of the number of hours some co-leaders were giving to their networks and/or there was no succession planning. The networks are strongly encouraged to put mechanisms in place to address these issues.
- d. The Panel noted that there was a general need for more consumer/family representation in most networks at the advisory level in order to ensure that the health questions of the consumers/families are being heard and addressed.
- e. Collaborations among the networks to identify shared research questions and initiatives should be encouraged in order to facilitate synergy, increase research capacity, and decrease the duplication of efforts and spent funds.

- f. Across most networks, it was difficult to determine the actual degree of involvement of network members in networking activities. Without a clear definition of what a member is, it was not possible for the Panel to determine if capacity was being built. The Panel suggested that network membership should be stratified to active or associate members.

2. Knowledge Translation

- a. In general, KT and knowledge synthesis were under represented throughout the networks and need to be defined proactively. The networks are encouraged to initiate more innovative approaches to KT that go beyond traditional approaches such as conferences and website announcements.
- b. There was limited involvement with the Health Authorities across most networks. The networks are encouraged to engage the Health Authorities and to have more impact on the health system. e.g. provide answers to HA questions; best practice.
- c. There was a clear lack of involvement with policy makers across most networks. Networks are encouraged to interact more with policy makers in order to inform them.
- d. Ethics was seen as an integral aspect of research across all networks. Networks are encouraged to work together to provide shared ethics workshops to their members.

3. Outcomes

- a. Networks are encouraged to critically evaluate their initiatives by seeking not only traditional outcome measures (such as research dollars leveraged or increased numbers of publications) but also more applied indicators of productivity such as systematically monitoring and evaluating researchers' broad network participation, or research use in policy making/best practices.
- b. A misalignment between strategies, stated outcomes and resources was noticed among some networks. The Panel recommended that critical evaluation of network initiatives through the development of metrics be implemented to inform strategic decisions regarding deliverables and aligned resources. Deliverables should be proven to add value and to advance the goals of MSFHR and the network.

4. Budget

- a. In general, budget justification was not well done across the networks. There was not always a clear linkage between strategic initiatives in Years 1 & 2 and budget items requested for in Years 3 & 4. The Panel suggested that focused capacity on proven strategic initiatives and initiatives designed to advance the goals of MSFHR and the network is needed in order to align resources in the most effective manner.
- b. Concern was raised as to the balance between the amount of funding and administrative overhead of some networks. Networks are encouraged to look at the return on investment of administrative costs and to consider possible

reallocation of some of these funds to strategic initiatives aimed at furthering the goals of the network.

- c. The Panel supported the use of mini-granting to further mission-driven rather than investigator-driven objectives. There was a clear need identified by the Panel for the networks to delineate the actual purpose of each mini-grant and what metrics should be implemented for their evaluation in order to determine their impact and value add to the goals of MSFHR and the network.

The cap of 20% of network MSFHR award funds in each year (including any carry forward MSFHR funds from the preceding year) was seen to be appropriate.

5. Other

- a. Networks are encouraged to build on their relationships with policy-makers in order to answer strategic health questions that may impact on the health system and best practices.
- b. Training and mentoring were noted as priorities by the networks but, in general, were under-funded. Increased allocation of network budgets to such initiatives was seen as being integral to increasing research capacity.
- c. The Panel raised the issue as to what extent should the networks be encouraged to set priorities and do research. All networks are doing many activities in the pursuit of research. There is some confusion around the need to build capacity to help leverage key assets in BC versus doing investigator initiated research through seed operating grants. The Panel would suggest that a balance needs to be struck between these two objectives.
- d. The Panel noted that there is a possible role for the networks to play as a catalyst incubator for research projects. In this capacity, a network would facilitate the start of a project but would not be expected to see it through to the end.
- e. It is unclear in the documentation provided to the Panel the extent of the networks' responsiveness to the diversity of the population of Canada. This is seen as an important indicator for the success of the networks in meeting the needs of their consumers and stakeholders.

The following areas were noted as issues for MSFHR

The Panel noted several issues that MSFHR may wish to consider in terms of facilitating both the development of the Networking Program as a whole as well as the development of the individual networks. Such issues were noted for consideration only rather than recommendations for enactment.

1. Governance/Leadership

- a. Encouraging collaborations among the HoPN in order to break down the silo effect.

- b. Brokering a role between the Health Authorities and the HoPN in order to leverage MSFHR funds held by both.
- c. Providing leadership guidance and facilitation. Succession planning should be part of each networks' governance and can be reasonably asked for by MSFHR.
- d. Playing a greater role in facilitating the creation of management and strategic plans in order to strengthen the networks' strategic plans.
- e. Recognizing that network leaders are primarily researchers rather than managers, MSFHR could facilitate KT/leadership and management development/teaching of program evaluation skills for leaders/development of metrics. Facilitation of such programs may assist the networks' leaders/staff in more effectively utilizing their time and energies to realize the goals of both MSFHR and the networks.
- f. The networks' quarterly meetings could include educational sessions aimed at identifying and providing core programs or skills training for interested network leaders/staff.

2. Knowledge Translation

- a. Identification of what technical assistance the networks need in order to facilitate effective KT initiatives.

3. Outcome Metrics

- a. The return on investment of network initiatives in meeting the goals of MSFHR was seen as a major outcome indicator by the Panel.
- b. The Panel questioned whether mini-grants are meeting the goals of MSFHR and the networks. It was suggested that MSFHR could develop metrics to help the networks in determining whether mini-grants actually bring in more research dollars.
- c. MSFHR might consider striking an external advisory group to help study the formative development of the Networking Program and to provide advice on projects and investments.
- d. The Panel raised the option of the possible reinvestment of MSFHR monies not allocated to the networks during this review into the HoPN Networking Program itself. Suggestions for the possible use of these funds included the development of core competencies (e.g. leadership skills, development of evaluation criteria...). It was suggested that funds could also be competed for by the networks through demonstration of progress/growth towards metrics. The final decision for the use of such funds was left to MSFHR.
- e. Addressing research ethics through the networks was seen to be an important issue and should be sought for by MSFHR from each network. Networks should therefore be encouraged to work together to provide shared ethics workshops to their members.

- f. The Panel would encourage MSFHR to find ways within their current mandate and funding restrictions that would facilitate co-leader relief from work when release time is not an option.

Attachment 1

External Oversight Review Panel

March 5 and 6, 2007

Dr. Roy Cameron (Chair), PhD

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