

An Assessment of The Clinic Leadership Institute's New Executive Transitions (nEXt) Program

Learnings from Cohort 2 (June 2013-April 2014)



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Informing Change

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Introduction

The nEXt Program

Funded by Blue Shield of California Foundation, the Clinic Leadership Institute's New Executive Transitions (nEXt) program aims to provide new community health center CEOs with knowledge, skills and networks to succeed in their positions and in the field.

Criteria for participating in the program include serving as the Chief Executive Officer/Executive Director at a California community health center and having been in that role for less than 18 months. The 2013–14 program consisted of:

- Five **in-person meetings** with participants, program organizers (i.e., Bobbie Wunsch, Ed O'Neil, Ami Ehrlich and other staff from the Center for the Health Professions at UCSF) and guest speakers
- Ongoing, informal **networking** with other participants and organizers during and between in-person meetings
- Pairing participants with one or more **mentors** (who provided broad guidance on being a health center CEO) or **advisors** (who provided guidance on a specific topic or issue) in the community health centers field and/or healthcare industry

Session 1

INTRODUCTION TO LEADERSHIP

June 17, 2013

Session 2

INFLUENCING OTHERS

September 16, 2013

Session 3

WORKING WITH TEAMS

November 12, 2013

Session 4

MANAGING CONFLICT & LEADING CHANGE

January 7, 2014

Session 5

AFFORDABLE CARE ACT & CASE STUDIES

April 7–8, 2014

This Evaluation

This evaluation follows up on Informing Change's 2013 preliminary assessment of the nEXt program's pilot cohort. It focuses on the second cohort of nEXt participants, who participated in the program from mid-2013 to mid-2014, and builds upon findings from the first evaluation, which was limited by a small sample size. To assess the effectiveness and outcomes of the nEXt program and identify recommendations for future improvements, Informing Change engaged in the following activities:

- Conducted one-on-one telephone interviews with each Cohort 2 participant
- Engaged in multiple conversations with nEXt program organizers and funders, including Bobbie Wunsch, Crispin Delgado and Ami Ehrlich
- Reviewed participants' program applications as well as their leadership development plans, completed at the start of the program

Findings: Program Components

An Overview of Cohort 2 Participants

The program's second cohort included 11 participants from health centers in various geographic locations and of varying size. Half of the participants transitioned from a role in the same organization to the CEO position. The others most recently worked at another health center or organization in the healthcare field. Years of experience in the community health centers field ranged widely, with an average of 10 years.

nEXt Cohort 2 Participant	Months as CEO Before Program	Approximate Years in Community Health Centers Field	Community Health Center	Counties Served by Health Center	Revenue from 2012 990 Form
Lisa Abdishoo	4	14	Los Angeles Christian Health Centers	Los Angeles	\$6,141,925
Felix Aguilar	3	6	UMMA Community Clinic	Los Angeles	\$4,728,475
Rex Botengan	5	21	Cleaver Family Wellness Clinic	Los Angeles	\$2,370,000
Salvador Chavarin	8	18	Foothill Health Center	Santa Clara	\$3,556,586
Rodney Grainger	11	5	Long Valley Health Center	Mendocino, Humboldt	\$2,566,133
Dawn Harbatkin	12	15	Lyon-Martin Health Services	San Francisco and other Bay Area counties	\$2,168,425
Carmen Ibarra	8	17	Pomona Community Health Center	Los Angeles, San Bernardino	\$2,000,660
Tamra King	13	1	Harbor Community Clinic	Los Angeles	\$2,596,951
Leslie McGowan	9	5	Livingston Community Health Services	Merced, Stanislaus	\$7,251,783
Greg Stone	9	3	Peach Tree Healthcare	Sutter, Yuba	\$12,753,630
Tina Tvedt	13	7	Redwoods Rural Health Center	Humboldt, Mendocino, Trinity	\$2,440,948

Initial Goals for Participation

Participants learned about the program through an email listserv (e.g., CPCA, clinic consortia), through colleagues who had prior experiences with CLI programs and/or through conversations with nEXt organizers. All but one participant had some experience with peer networks and/or mentorships before participating in nEXt, but none had the unique experience of engaging in both elements simultaneously and with a specific focus on healthcare.

Participants were interested in participating in the nEXt program because of the support and opportunities it offered around:

- Developing a peer network with other health center leaders;
- Managing healthcare reform changes effectively;
- Navigating the transition from a “hands on” position to a “big picture” role which requires more delegation;
- Improving executive team management;
- Enhancing interactions with Board members; and
- Identifying tools and practices to improve health center financial security and sustainability.

When asked what specific executive or leadership skills they wished to develop through the program, the most commonly mentioned skills included:

- Assembling and managing executive teams and effectively delegating to senior staff (seven responses);
- Strengthening communication skills, including negotiation and influence (five responses); and
- Developing, engaging and managing boards of directors (three responses).

Participants found the development of peer connections to be the most helpful aspect of the nEXt program.

Participants considered the program sessions a safe space to reflect and learn collectively.

Connections with other CEOs at the same stage of development helped to normalize the struggles they face in their health centers. Participants reflected that the cohort size (11 participants) was optimal for building meaningful relationships with peers. They also appreciated that the cohort was generally very open and non-judgmental, with a notable absence of internal politics.

Participants seemed to connect most with peers whose health centers were geographically close to them.

Northern California-based participants mentioned more frequent conversations with other Northern Californians. Southern California-based participants organized site visits to each other's centers.

The only challenge around peer networking is finding the time to do it.

One-third of participants noted that they have reached out to their peers since the program has ended. Others, particularly a few participants in rural areas, said competing priorities and heavy workloads have prevented them from doing so.

"It was helpful to reassure myself that my problems are what others are having too. I wasn't crazy and alone. I've made good friends, especially with Northern California participants. It is a good informal network."

– nEXt Participant

"Especially as a newer CEO, acknowledging vulnerability is hard. The program made it easier to reach out to others [in the health centers field.]"

– nEXt Participant

Participants provided a variety of examples of gains from peer interactions.

“It was helpful to brainstorm how to solve problems together. For example, as [my clinic] was moving towards a merger, I wanted to know what structural things to put in place to make sure our community is still served after the merger. Other participants came up with requiring a community needs assessment every three years.

“One of my staff needed to know some Medi-Cal details, so I got together with people [from my cohort] over the phone and we talked about what stuff Medi-Cal will cover.

“We have really struggled with billing issues. [Another CEO] referred me to consultants to evaluate our system and help us be more efficient.

“One of the other CEOs talked about a monthly supervisors' book club that he does, so we started a supervisors' book club at our health center. We've had five sessions, and it's been transformative.

“One [peer] participant reached out to me about pay scales to see what we were paying for various positions, and she shared what she learned from others about pay. It was helpful to see what others are compensating because, at the time, our clinic was trying to hire for an executive position.

Participants provided very positive feedback on both program organizers and guest speakers.

Participants valued the insight and experience that program organizers, particularly Bobbie Wunsch and Ed O'Neill, brought to each session.

- They appreciated Bobbie's vast network and the positive atmosphere she created at sessions.
- They reflected how Ed provided practical, actionable steps to increase their leadership skills.

Guest speakers also received high praise from program participants. The speakers were engaging and informative, and several participants followed up with them post-session for more information and resources.

- Jean Fraser's session on working with teams was specifically mentioned by one-third of participants as useful and applicable to their everyday work.
- Southern California-based participants greatly valued the session on behavioral health services, although a few participants thought this session was too regionally focused.

"I have tremendous respect for Bobbie. She is thoughtful and insightful. She gets people to think and encourages people to participate in sessions without calling them out. She seems to know everybody and connects us to solutions."

– nEXt Participant

Participants generally valued the mentor/advisor component of the nEXt program, although the quality of experiences varied.

"My mentor and I connected quickly. I visited [my mentor's] health center, which was a great opportunity. A lot of the conversation was her affirming certain things [that were common]—staff turnover, board issues. She was very encouraging and supportive. I learned a lot."

– nEXt Participant

"[My mentor] gave me some good advice about challenges I was dealing with around delegation and supervision. I see him at [other] meetings and we have continued talking in an informal mentor [capacity]."

– nEXt Participant

Participants were asked to write about their mentor/advisor needs and preferences in their leadership development plans. They then engaged in individual telephone conversations with nEXt program organizers to brainstorm an appropriate mentor/advisor match. Participants found this process efficient and effective.

Seven of the nEXt Cohort 2 participants developed helpful relationships with at least one mentor/advisor, with this relationship producing tangible benefits. These mentors, who were veterans in the field, guided nEXt participants through common CEO challenges, such as developing and maintaining an effective board, implementing large-scale changes related to the Affordable Care Act, and delegating to executive staff. A few participants noted that they found their mentor/advisor relationship to be a "two-way street" in that both mentor and mentee learned from talking with each other.

Participants usually connected with their mentors/advisors once or twice by telephone. However, five participants connected with their mentors more regularly, three of whom also met with their mentor/advisor in person.

Participants identified a number of challenges with the mentor/advisor component of the program.

About half of participants were matched to at least one mentorship/advisorship that did not materialize. This occurred because:

- Both mentors/advisors and program participants had challenging schedules, which made it difficult to set up an initial meeting.
- Participants' needs changed from the time they initially requested a mentor/advisor, resulting in being matched with someone who did not have the right expertise to meet their current needs.
- Two nEXt participants did not prioritize the mentorship component of the program and instead focused more of their effort on the peer networking component.
- One participant noted that the assigned mentor/advisor seemed uninterested and disengaged, treating the relationship as a burden. As a result, the mentorship did not continue past the first conversation.

"I got matched to someone who was out of the country, and it was scheduling that was just really difficult. We tried to contact each other and it just didn't work. I wound up calling [another nEXt participant for help]."

– nEXt Participant

Findings: Program Impact

The nEXt program substantially improved participants' leadership and networking skills and increased their knowledge of timely field issues.

Participants stated that they developed and improved a variety of leadership skills as a result of the program.

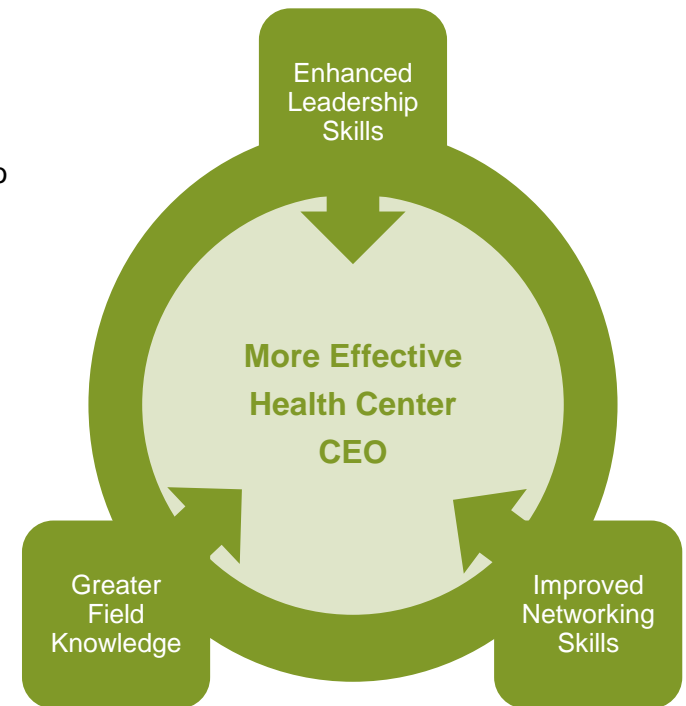
They have a better understanding of how the CEO position differs from other executive positions, and they have improved their delegation abilities in order to leverage executive teams more effectively. Participants have increased confidence to represent their health centers at Board meetings and in their communities. They are also more aware of the resources available to them when they run into challenges.

Participants value the networking skills they developed throughout the program.

Having normalized their experiences as new CEOs, the program helped participants become more confident in their roles, which has led to better communication and engagement with others in the field. The program helped them embrace the importance of prioritizing networking and setting networking goals (e.g., meeting with local elected officials).

The program enhanced participants' knowledge of timely field issues.

Participants feel better informed about changes and challenges in the health centers field that are relevant to their positions as CEOs. This exposure to issues beyond their own organization helped them feel more connected to other community health centers and the field. The program's flexibility, which allowed for impromptu discussions of important topics (e.g., implementation of the Affordable Care Act), was viewed as especially important. While the participants would have liked more of these types of discussions, they know that the nEXt program cannot be expected to meet all needs in this area.



Participants provided a variety of suggestions to strengthen the nEXt program.

Program Structure

- Offer longer sessions (a full eight-hour day for each session rather than five hours), as well as more frequent sessions throughout the program, in order to develop deeper ties with other participants and address content in greater depth. Virtually all participants offered this suggestion.
- Strive to maintain a cohort size of 8 to 12 participants (although each cohort's size depends on the current supply of new health center CEOs and their interest and ability to participate). Cohort 1 participants recommended increasing the program size, and this increase was deemed effective by Cohort 2.
- Develop a participant cohort with varying years of experience in the healthcare field so that diverse perspectives are included.
- Provide a more structured curriculum so participants know what will be covered in the program, but balance structure with open time for networking. This was also recommended by Cohort 1 participants.
- Follow up with participants several months after the end of the program to check up on their development and progress.

- Provide additional opportunities for nEXt program alumni to network with other CLI alumni. Participants value these connections.

Mentors/Advisors

- Give guidance on how to most effectively provide peer support and utilize a mentor/advisor; also provide a framework for mentors/advisors to most effectively support their mentees.
- Consider executive coaching rather than mentoring. This was also mentioned by Cohort 1 participants.

Program Content

- Invite more seasoned community health center CEOs, in addition to content experts, to serve as speakers.
- Facilitate more case study discussions based on topics identified by participants, as was done in the last Cohort 2 program session.
- Provide more content around negotiation, time management and what CEOs need to know around health center finance.

Recommendations for the Future

Based on our experience of evaluating the first two cohorts of the nEXt program as well as other similar types of programs, we provide the following recommendations for future nEXt cohorts.

- **Increase the amount of the program's in-person time.** Participants greatly valued the program and would be happy to spend more time engaging with their peers and program organizers. If resources allow, make each session a full eight-hour day, and provide a few additional sessions. Longer days will allow for more structured *and* unstructured time.
- **Revisit and clarify the amount of structure for the nEXt program.** Some participants would have liked a clearer roadmap for the program, while others preferred the flexible structure. Because of these varying opinions, program organizers should reflect on the last two cohorts, decide on the appropriate degree of structure for the program moving forward and communicate that decision to incoming participants.
- **Clarify expectations of nEXt mentorships/advisorships for both participants and the mentors/advisors.** Define the purpose and expectations of a mentor versus an advisor, and make sure both parties are genuinely interested in the process and prepared to get the most out of it. For participants who do not show interest in this piece of the program, emphasize the potential of mentorships/advisorships to build networks.
- **Incorporate nEXt alumni more fully into the CLI alumni network.** nEXt participants expressed interest in engaging with other CLI alumni to expand their networks and knowledge. Currently, nEXt alumni are invited to one CLI meeting each year, but they could also benefit from accessing other CLI program materials or auditing a relevant session from another CLI program (e.g., attending a Emerging Leaders session when it takes place in their geographical location).
- **To fully engage all participants, make sure session content is as applicable as possible to all participants, and communicate that applicability.** It is important for nEXt organizers to connect the content of each session directly to the participant so that they understand how the information could be applied in the context of their health centers.



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