



EXECUTIVE SUMMARY

Transforming the Health Care Field

*Findings from the California Health Care Foundation
Health Care Leadership Program Evaluation*

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*Prepared for
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*Prepared by
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Executive Summary

To help California clinicians acquire and effectively deploy the leadership skills needed to address the state’s complex health care challenges, the CHCF Health Care Leadership Program (the Program) was created in 2001. It is a joint venture of the California Health Care Foundation and the Healthforce Center at the University of California, San Francisco. The Program consists of a two-year fellowship—which admits 32 new Fellows each year—and an active Alumni Network that has grown to 507 graduates to date.

The Program’s purpose is to enable clinicians to serve as change agents in shaping more effective and responsive health care in their own organizations and in the broader health care field. Through the Alumni Network, it supports innovation and collaboration in addressing the state’s toughest health system challenges.

To ensure the effectiveness of the Program, it has been formally evaluated and refined several times. In 2019, CHCF engaged Informing Change to conduct a new evaluation to measure the extent to which Alumni have drawn on the skills, relationships, resources, and opportunities they acquired through the Program to effect change within their organizations and in the health care field. This Executive Summary offers highlights of the findings, which are based on interviews, focus groups, and surveys.

IMPACT ON FELLOWS’ ORGANIZATIONS

Nearly all (95%) of the surveyed Alumni reported that they have led or directly influenced one or more changes within their organizations (Figure 1). Of those Alumni, 83% said the Program was “necessary” or “influential” to that positive change. Commonly described organizational changes:

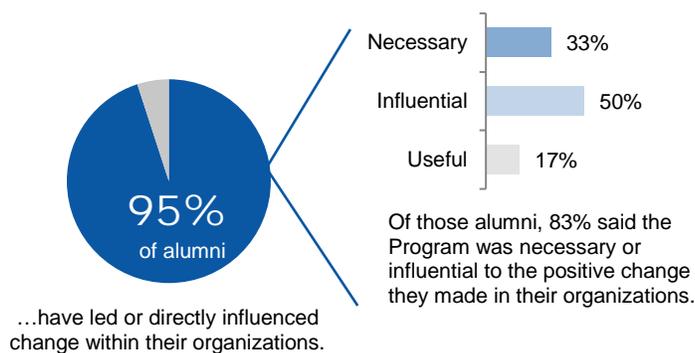
Culture and relationships: Supporting changes in mindset and approaches to problem solving, communication within teams, and organizational values and principles.

Systems and processes: Making changes to promote more efficiency and effective service delivery by enhancing data systems, addressing workflow and staffing issues, and improving quality.

Access and engagement: Improving service access and use through integrating services, finding ways to increase affordability and access, and enhancing consumer engagement and patient satisfaction.

Figure 1. The Program influences changes Alumni make within their organizations.

Alumni Survey | n=148



IMPACT ON THE HEALTH CARE FIELD

Four in five Alumni (82%) reported that they have led or directly influenced one or more changes in the broader health care sector (Figure 2). Of those Alumni, 82% said the Program was “necessary” or “influential” to the positive change. Commonly described field-level changes:

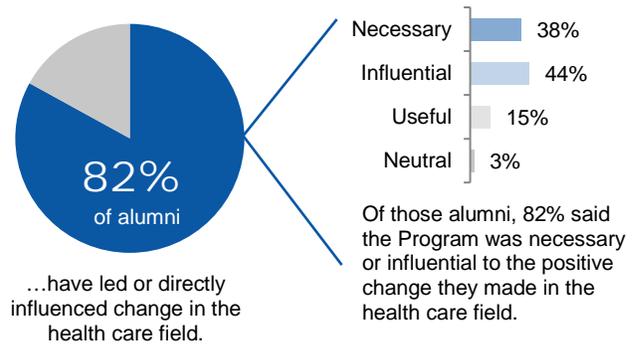
Sustaining and strengthening partnerships and coalitions: Establishing and maintaining new and effective relationships by leading coalitions; strengthening partnerships, networks, and teams; and launching collaborative programs and initiatives.

State and nationwide activism and influence: Addressing policy and advocacy dimensions of health care in health systems at all levels, leading state and nationwide campaigns, and improving knowledge sharing.

Scaling initiatives: Expanding and sustaining new initiatives and programs.

Figure 2. The Program influences changes Alumni make in the health care field.

Alumni Survey | n=147



INFLUENCE ON FELLOWS

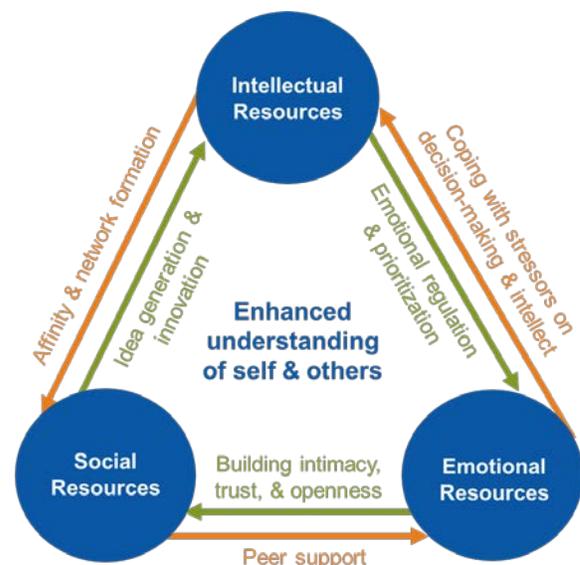
Alumni believe the Program significantly influenced changes across several domains including skill building and networking. Ninety-nine percent of Alumni said the Program “very much” or “somewhat” influenced their ability to be effective leaders. They pointed to four key areas in which they grew:

- Skills and competencies
- Confidence and motivation
- Relationships and interactions
- Career mobility and satisfaction

By simultaneously building participants’ intellectual, social, and emotional resources, the Program leaves a lasting influence on their capacities to effect change. (See Figure 3.)

A large majority of Alumni (82%) reported increases in their professional authority (e.g., working with bigger budgets or teams, having greater reach/influence in a role) via a promotion or job change since their participation in the Program. For 85% of those who experienced a promotion or job change, the Program played a “necessary” or “influential” role in their career progression.

Figure 3. The Program influences Fellows’ intellectual, social, and emotional resources.



EXPANDING THE PROGRAM'S IMPACT

In addition to understanding the Program's impact, the evaluation explored potential strategic shifts to enhance future impact, with special attention paid to the Alumni Network, participant diversity, and synergies with CHCF's broader grantmaking work. Since Healthforce has a process for monitoring and continuously improving the quality of the two-year Fellowship, the evaluation did not collect data to inform refinement of the Fellowship itself (e.g., curriculum content, curriculum sequencing, faculty selection, etc.).

Engaging in the Alumni Network

Most Alumni value access to other Alumni in the Network and believe in their collective power to transform health care. Alumni view the Network as a trusted community of peers bonded by shared values, good work, and approaches to leadership. Participants, Alumni, agency sponsors, and field influencers alike praised the Network for its role in sustaining relationships critical to addressing some of the most pressing issues facing the field. Nearly all Alumni (90%) agree that the Network plays a role in transforming health care in California. Alumni who participate more frequently in the Network are more likely to perceive its benefits.

Alumni believe there is opportunity to further improve the Alumni Network communication channels and infrastructure. About 40% of surveyed Alumni do not believe that the current Network communication channels are serving the Network well, and of those who use the Network to connect with others, only one-third are satisfied with how they are currently able to find other Alumni. The research also pointed to the opportunity to tout the Alumni Network to participants before they become Alumni. Current participants felt in the dark about how they could—or should—engage with the Alumni Network upon completion of the Program.

Program Reach

Although cohort Fellows have been predominately White (55%), Program participation among Latino (13%) and Black (8%) providers is substantially higher than their representation among California physicians overall (5% and 3%, respectively).¹ The Program team continues to explore opportunities to train clinical leaders who reflect the demographics of the state's population.

There is significant opportunity to improve geographic diversity among Program participants. Forty-eight percent of Program Fellows and Alumni reside in the Bay Area, compared to 26% of California physicians overall, and representation in the Bay Area has increased over time.

Fellows & the Foundation

A goal of this assessment was to identify additional opportunities for CHCF to draw upon Alumni expertise across the Foundation's grantmaking and broader systems change work—and for CHCF to better connect to the Alumni—to achieve greater collective impact. The research found that Alumni skills and interests strongly align with CHCF priorities and the needs of the field. The four most salient issues identified were (1) addressing payment reform and health care financing; (2) expanding equitable access to comprehensive services; (3) improving workforce diversity and retention; and (4) creating and scaling technological innovations.

¹ Given that roughly three-fourths of Program Fellows and alumni are physicians, PCPs and specialists are used as the comparison group here, though the Program also serves other providers from other sectors such as behavioral health, dentistry, pharmacy, and nursing.

Given the broad areas of alignment, there is clearly potential for the Alumni Network and CHCF to work together more closely. Eighty-five percent of the 20 CHCF staff surveyed for this evaluation agreed that CHCF should work with the Alumni Network where there is synergy with Foundation priorities and strategies. One-third (35%) of CHCF staff said they would need a better understanding of how the Alumni Network could be useful to their work, which signals there is an opportunity to educate staff on the Leadership Program and Alumni Network at regular intervals to account for staff turnover.

*Cover Photo: "Cohort 13 Participants at their Graduation Ceremony"
Photo by Healthforce at UCSF, September 2015*

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2040 Bancroft Way, Suite 400
Berkeley, CA 94704
tel 510.665.6100
fax 510.665.6129

informingchange.com