## Final Report

Independent Performance Evaluation of the Canadian Foundation for Healthcare Improvement (2014-2019)

Presentation to
CFHI's Board of Directors

June 2020



### About the Evaluation

- Requirement of CFHI's Contribution Agreement with Health Canada.
- Evaluation covers the period April 2014 to March 2019.
- Also, an opportunity to take stock, understand successes including the CFHI's contribution to these, and identify areas for improvement and opportunities moving forward.
- Core Evaluation Issues
  - 1. Relevance: The extent to which a program, policy or entity addresses and is responsive to a demonstrable need. Relevance may also consider if a program, policy or other entity is a government priority or a federal responsibility.
  - 2. Effectiveness: The impacts of a program, policy or other entity, or the extent to which it is achieving its expected outcomes.
  - Efficiency: The extent to which resources are used such that a greater level of output/outcome is produced with the same level of input or, a lower level of input is used to produce the same level of output/outcome.

### **About the Evaluation**

- The initial and final evaluation report were guided by Treasury Board of Canada Secretariat Directive and Policy on Results (2016) and the evaluation framework and work plan.
- Three phases to the evaluation:
  - Phase 1: Develop work plan and detailed evaluation framework
  - Phase 2: Conduct evaluation and draft report
  - Phase 3: Report on evaluation findings
- Document and File review over 250 documents
- Performance and Administrative Data over 60 reports and publications
- Key informant interviews 36 interviews completed
  - 9 CFHI Management (including Board members)
  - 7 Patient, Family and Citizen Engagement Projects
  - 5 Federal, Provincial and Territorial Departments
  - 9 Leaders: Provincial Health Authorities and healthcare system leaders
  - 6 Key Partners

## **Evaluation Approach**

- 8 Case Studies (19 interviews)
  - Appropriate Use of Antipsychotics, particularly the pan-Canadian spread launched in 2014 and the NB scale that followed
  - INSPIRED
  - Embedding Palliative Care Approaches to Care Spread Collaborative
  - Better Together
  - Promoting Life Together Collaborative
  - High impact EXTRA project-CISSS Laval (Implementing and Sustaining the Practice of Levels of Care)
  - Connected Medicine
  - Partnering with Patients and Families for Quality Improvement

## Relevance – Alignment with and Relevance to Stakeholders

#### **Evaluation Question:**

To what extent has CFHI programming been in alignment with or of relevance to different stakeholders in the health care system, including, for example:

- Federal government
- Provincial/Territorial governments
- Shared F/P/T government priorities
- Health service providers
   (organizations and individual providers)
- Patients/citizens

#### **Conclusions:**

- CFHI is in very good alignment with the priorities and requirements of the various stakeholder groups.
- The engagement consultations undertaken in 2014, 2017 and 2019 confirm the relevance and alignment with the various stakeholder groups in developing the new strategy.
- Interviews confirmed the necessity of CFHI to continue to identify new innovations and then provide the financial and expert support through the EXTRA program and collaboratives in implementing innovations across the healthcare system.
- This alignment is reflected in the program selection criteria supporting innovations that drive system-wide change and have the greatest impact in terms of the potential reach of innovative practices or policies through spread and scale.

#### **Recommendations:**

### Relevance – Previous Evaluation

#### **Evaluation Question:**

To what extent has CFHI addressed recommendations resulting from the previous 5-year evaluation of CFHI (April 1, 2009 – March 31, 2014)?

#### **Conclusions:**

- Previous evaluation made four recommendations.
  - Leverage key differentiators to maintain niche position and increase awareness of the CFHI brand.
  - Increasing its activities in relation to "spreading" best practice innovations.
  - Strengthening CFHI's processes to manage and monitor partnership arrangements.
  - Performance Measurement system implementation continued efforts.
- CFHI has fully responded to the recommendations from the previous evaluation, conducted by KPMG
- Additional emphasis placed on strategic communications and strengthening CFHI's processes to manage and monitor partnership arrangements.

#### **Recommendations:**

# Effectiveness – Acceleration of Healthcare Improvements

#### **Evaluation Question:**

To what extent has CFHI contributed to the acceleration of healthcare improvements in Canada in the areas of:

- Patient/Family experience and outcomes of care (better care)
- Patient/Family/Citizen engagement
- Evidence-informed healthcare improvements and delivery models
- Value for money/Efficiency
- Policy

#### **Conclusions:**

- CFHI's activities were oriented around:
  - Education and Training
  - Collaboration for Innovation and Improvement, including collaboratives and other activities
  - Patient and Citizen Engagement for Improvement
  - Northern and Indigenous Health
- CFHI greatly contributed to the acceleration of healthcare improvements in Canada.
  - The document, file and performance reviews identified several areas of improvement facilitated by CFHI covering a wide range of issues of concern in the healthcare system (Mental Health, Indigenous and Northern health, AUA, COPD etc.).
  - This also was confirmed by those interviewed who noted that CFHI is uniquely positioned to provide financial and expert support in the implementation of innovative practices and policies.

#### **Recommendations:**

# Effectiveness – Evolution of Approach and Programming

#### **Evaluation Question:**

How has CFHI evolved its approach or programming to support the delivery of outcomes or improvements in the above areas?

#### **Conclusions:**

- CFHI's new strategy and programming respond very well to achieving the results identified in the program logic model
- They have evolved and continue to evolve based on emerging trends and issues in the Canadian healthcare system (e.g. increased focus on F/P/T priorities, addition of Indigenous and Northern Health program in 2015).
- In 2018/19, CFHI continued to evolve its strategy with the launch of two initiatives, the Priority Health Challenge (which looks to increase access to mental health and addiction services) and the Momentum Challenge (which looks to grow successes and expand the reach of former and current projects from the INSPIRED COPD Scale Collaborative, the Connected Medicine Collaborative and the NB Appropriate Use of Antipsychotics Collaborative)

#### **Recommendations:**

#### CFHI PROGRAM LOGIC MODEL 2018-19 TO 2020-21

Longer Term Outcome	Proven innovative policies and practices are sustained, spread, and/or scaled within and across organizations, regions, and provinces/territories									
Intermediate Outcomes	Improvements are made to patient, resident, and family experience of care		lmprovement health of p residents			Improvements are m efficiency of ca			lmprovements are made to work life of healthcare providers	
Immediate Outcomes	Healthcare leaders are knowledgeable and skilled in carrying out healthcare improvements				Patients, residents communities and experience are eng improvement	others with lived aged in healthcare		The cultures of participating organizations have improved through changes in healthcare practices, delivery models, and related policies		
Outputs	Knowledge (e.g., improv and training	Knowledge exchange (e.g., workshops and			Collaboratives and pro		rograms	Inter-professional teams, healthcare leaders and patients reached		
Activities	Identify and broaden awareness of promising innovations	Lead partnerships to spread or scale proven innovations	Co-design, test and share/catalyz improvement		Enable patient, family, and community engagement	Be guided by First Nations, Inuit, and Métis perspectives	Advance shared FPT health priorities with other pan-Canadian organizations		Enhance capacity and readiness to implement improvements	Connect and support leaders
Inputs	Financial Resources			Human Resources				External Resources (including partnerships)		

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## Effectiveness – Contribution to Immediate Outcomes

#### **Evaluation Question:**

To what extent have CFHI activities contributed to:

- Healthcare leaders that are knowledgeable and skilled in carrying out healthcare improvements;
- Engaging patients,
   families and
   communities in
   healthcare improvement
   and co-design; and
- Improvements to healthcare practices, delivery models and related policies of organizations participating in CFHI's work?

#### **Conclusions:**

- The performance data review and interviews conducted confirm that CFHI has achieved a high degree of success in achieving its immediate outcomes.
- Health care leaders reported very high levels of knowledge and skill acquisition, as well as improvements to their healthcare practices and delivery models, resulting from their involvement with CFHI.
- Although targets were not met in terms of % of improvement teams with engagement of patients, families and communities as core members in health care improvement and co-design, this has been a significant focus within CFHI and is now a requirement for new programs and initiatives.
- It is also reflected in CFHI's 2019-21 strategy.

#### **Recommendations:**

## Effectiveness – Contribution to Intermediate Outcomes

#### **Evaluation Question:**

To what extent have CFHI activities contributed to:

- Best practices are sustained, spread, and/or scaled within and across organizations, regions, and provinces/territories
- Improvements are made to patient, resident, and family experience of care; health of patients and residents reached; value for money (efficiency and ROI); and work life of healthcare providers.

#### **Conclusions:**

- There was a marked increase in the sustainability of CFHI's programs and initiatives reported by quality improvement teams.
- There was less improvement reported on the spread and scale of projects beyond the initial implementation sites of QI projects.
- A number of projects have been scaled across jurisdictions (e.g. AUA Collaborative and the INSPIRED Collaborative) and the focus for the Momentum Challenge directly relates to the spread and scale of three successful projects:
  - INSPIRED COPD Scale Collaborative;
  - Connected Medicine Collaborative; and
  - New Brunswick Appropriate Use of Antipsychotics Collaborative.
- There were significant improvements in patient, resident and family experience of care and health outcomes resulting from involvement in CFHI's programs and initiatives.

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# Effectiveness – Contribution to Intermediate Outcomes (continued)

#### **Evaluation Question:**

To what extent have CFHI activities contributed to:

- Best practices are sustained, spread, and/or scaled within and across organizations, regions, and provinces/territories
- Improvements are made to patient, resident, and family experience of care; health of patients and residents reached; value for money (efficiency and ROI); and work life of healthcare providers.

#### Conclusions (continued from previous slide):

- More than half of projects undertaken identified improvements in efficiencies in health care delivery resulting from QI projects.
- There is little quantitative data on the returns on investment provided through CFHI programs and initiatives.

#### **Recommendation 1:**

CFHI should continue its efforts on conducting costing analysis of CFHI programming and developing a Return on Investment (ROI) framework for partners and stakeholders. Recognizing that a number of CFHI's projects and initiatives focus on other aspects of the health care system (e.g. patient quality of life, skills acquisition etc.), implementation of an ROI reporting requirement for partner and stakeholder organizations should focus on those projects and initiatives that have significant ROI potential and are materially warranted. In addition, CFHI should include the ROI framework as part of the selection process where appropriate and applicable.

## Effectiveness – Contribution to Longer-Term Outcomes

#### **Evaluation Question:**

To what extent have CFHI activities contributed to:

 Improving healthcare system performance and the health of Canadians.

#### **Conclusions:**

- CFHI does not report against the original longer-term outcome in the current PMF ("Contribute to improved healthcare system performance and the health of Canadians").
- The longer-term outcome is replaced with "Proven innovative policies and practices are sustained, spread, and/or scaled within and across organizations, regions, and provinces/territories" which was previously treated as an intermediate outcome.
- Conclusions against the revised longer-term outcome have been described under the intermediate outcomes above.

#### **Recommendation 2:**

CFHI should begin reporting against the longer-term outcome in future performance measurement reports and stabilize a core set of indicators of the logic model to allow for comparative analysis across various years.

## Efficiency - Governance

#### **Evaluation Question:**

To what extent are the appropriate governance mechanisms and policies in place at CFHI to:

- Appropriately set priorities to direct areas of activity for the organization, and
- Ensure efficient use of resources.

#### **Conclusions:**

- CFHI has well-defined governance mechanisms and policies in place at the Board level.
  - Governance review undertaken in 2017;
  - Lots of work on governance undertaken (e.g. sub-committees on Strategy, First Nations/Indigenous);
  - Have identified internal CFHI issues (e.g. diversity, retention etc.)
     and are developing appropriate policies;
  - BoD approves strategy and annual workplans;
  - Annual workplans focus and reflect priorities in strategy; and
  - Corporate Dashboards (2017-18 Q1 to 2018-19 Q4) track human resource data, financial data, and organizational risks, and are used to report to the Board.

#### **Observation 1:**

The interviews identified that CFHI may want to consider the creation of a Program Committee of the Board to be established to support the Board in taking a more strategic-level perspective in monitoring the progress of the new strategy.

## Efficiency – Leveraging of Resources

#### **Evaluation Question:**

To what extent does CFHI leverage the resources of others to achieve the intended outcomes?

#### **Conclusions:**

- CFHI's current approach of partnering with organizations in the design and implementation of projects, either through cofunding or in-kind contributions from partners, should continue to be a cornerstone of its programming.
- There is specific data on the financial contributions made by partner organizations for specific programs (e.g. Boehringer Canada with INSPIRED collaborative, Canadian Frailty Network and ACE).
- Although, there is limited quantitative data available to demonstrate the specific in-kind partnership support provided by partner organizations, it is apparent from the evidence collected through the document and file reviews and interviews that CFHI has been highly successful in leveraging the resources of 536 partner organizations (2015-16 to 2018-19) to achieve its intended outcomes.

#### **Recommendations:**

## Management Response

#### **Recommendation 1**

CFHI should continue its efforts on conducting costing analysis of CFHI programming and developing an ROI framework for partners and stakeholders. Recognizing that a number of CFHI's projects and initiatives focus on other aspects of the health care system (e.g. patient quality of life, skills acquisition etc.), implementation of an ROI reporting requirement for partner and stakeholder organizations should focus on those projects and initiatives that have significant ROI potential and are materially warranted. In addition, CFHI should include the ROI framework as part of the selection process where appropriate and applicable.

#### **Management Response**

A Benefits Evaluation (BE) Design Day was held in January 2020 to identify key elements of a BE framework that would help CFHI understand societal-level and health system benefits of investing in healthcare improvement, including how these elements align to each other and key assumptions underlying the framework. CFHI will be continuing to refine its evaluation, planning and measurement approach in 2020-21 with this benefits realization framework to inform CFHI program decisions and to better understand the value of healthcare improvements. As CFHI moves toward amalgamation with CPSI in 2020-21, this framework will be an input into future evaluation work under the new organization.

## Management Response

#### **Recommendation 2**

CFHI should begin reporting against the longer-term outcome in future performance measurement reports and stabilize a core set of indicators of the logic model to allow for comparative analysis across various years.

#### **Management Response**

As CFHI moves toward amalgamation with CPSI in 2020-21, a new performance measurement framework (PMF) will be developed to support the new organization. The new PMF will consider the longer-term outcomes for the new organization.

## Management Response

#### **Observation 1**

The interviews identified that CFHI may want to consider the creation of a Program Committee of the Board to be established to support the Board in taking a more strategic-level perspective in monitoring the progress of the new strategy.

#### **Management Response**

Following amalgamation with CPSI, the Transition Board for the new organization will have fiduciary responsibility for the new amalgamated organization's activities and decisions. Prior to amalgamation, the Transition Board guides discussions for the new organization. They will be considering which committees of the Board will best serve the mandate and mission of the new organization shortly.