

St. Paul's Hospital Foundation: A Framework for Collaboration with Third-Sector Partners

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EXECUTIVE SUMMARY

Introduction

Collaboration amongst nonprofit organizations is increasingly being viewed as a solution to some of the challenges facing the sector (Vernis, Iglesias, Sanz, & Saz-Carranza, 2006, p. 70; Blickstead et al., 2008). While collaboration holds promise, it can also be very complex, involving multiple stakeholders with varying motivations and goals (Blickstead et al., 2008, p. 24; Huxham, 1993, p. 607; Thompson & Perry, 2006, p. 25). The sector should therefore develop its capacity to develop, manage and sustain complex partnerships.

St. Paul's Hospital Foundation (the Foundation), located in Vancouver, British Columbia, is a nonprofit registered charity being affected by this trend toward increased collaboration. The goal of this report is to develop a framework the Foundation can use to facilitate future partnerships. It therefore seeks to answer the following research questions:

Primary research question: What framework can the Foundation use to assess and develop partnerships with other non-profit organizations?

Secondary and supplementary research questions:

1. What principles should the Foundation use to determine if a partnership with another non-profit organization will help it further its mission and vision?
2. What steps should the Foundation take at the outset of a collaborative effort?
3. What steps should be followed to ensure best outcomes once a commitment to proceed has been made?
4. What governance gaps might arise, and how can they be addressed?
5. How should the outcomes of the collaboration be measured or evaluated?

Methodology and Methods

The report uses a qualitative methodology and is designed as a needs assessment. Methods include a review of the literature and semi-structured interviews with key informants from the Canadian nonprofit sector. The literature review covered themes such as nonprofit or charitable sector collaboration, partnership, coordination and competition. While this report is set in the Canadian context, the literature covers North American and international jurisdictions. There were fourteen interviews conducted, primarily focused on the Foundation's current and potential partners, but also including sector experts and funders. The findings are analyzed and inform the subsequent sections of the report.

Findings and Analysis

The findings from the literature review and interviews were complementary. The literature review section covers the reasons why organizations might collaborate, explains the theory of collaborative advantage, and then considers three key phases: assessment, planning and implementation, and evaluating and reporting (Huxham, 1993). The findings from the interviews are structured into four sections: assessment of opportunities, drivers, barriers, and

process. Taken together, five key themes emerged from the findings: 1) the importance of shared vision and organizational mission and the tension that can exist between the two, 2) systemic barriers to collaboration, such as accountability structures and standard performance metrics, 3) drivers that facilitate collaboration, such as motivation, trust and leadership, 4) agreement that collaborative advantage, or a “win-win” for all parties, is critical, and 5) steps that should be taken during the collaborative process, with greatest emphasis on articulating initial agreements (Huxham, 1993).

The findings illuminated six strategic implications for the Foundation. First, the Foundation should engage in partnerships where a shared vision exists or can be developed, and where the missions of all partners are complementary. Second, the Foundation should ensure it understands the motivations of all partners, to ensure there is enough will for success. Third, the Foundation should find the “win-win” – where benefits, for all parties, outweigh the costs. Fourth, trust is absolutely critical to the success of a partnership and, if it does not already exist, should be actively built. Fifth, the Foundation should ensure the right leaders are in place for best possibility of success, both internally and externally. Finally, the earliest stages of collaboration are most crucial, and the Foundation should focus most attention to initial discussions and agreements, and also anticipate and mitigate any anticipated barriers.

Options to Consider and Recommendations

Drawing from these findings, three options were developed for the Foundation. The first was to take a reactive or exceptional approach to collaboration, engaging only when absolutely necessary. The second was a priority-driven approach, assessing opportunities as they arise and partnering when collaborative advantage is present, and the third was more assertive. It involved proactively partnering, seeking collective impact, and advocating for changes to the system (Huxham, 1993; Kania & Kramer, 2011). These options were weighed against a set of criteria that included potential for the Foundation to achieve its own vision, mission, and mandate; possibility for it to contribute to a larger vision or cause; resources required or gained; viability; organizational capacity; and practicality. These criteria suggest that option two, a priority-driven approach, is the best course of action for the Foundation at this time.

An implementation plan was then developed for option two. It is structured around the original research questions, listed above, and includes four primary tools the Foundation can employ in future partnerships, during the three phases of collaboration: assessment, planning and implementation, and evaluating and reporting. The first is an assessment tool, with principles the Foundation should consider internally before entering into a partnership. The second is a list of discussion points for partners to cover during the initial planning stages. The third is a template memorandum of understanding. The fourth is a general evaluation tool, which will need to be modified to suit each partnership.

These tools are intended to be practical and useful to the Foundation and, ideally, for its partners. They will help to ensure the Foundation enters partnerships that make sense and benefit its stakeholders: patients and families being served through St. Paul’s Hospital, the

physicians, caregivers, researchers and staff who work there, and its donors, who wish to make a meaningful difference.

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1. INTRODUCTION

St. Paul's Hospital Foundation (the Foundation) is a nonprofit registered charity whose sole purpose is to raise funds for research, teaching, care and outreach to benefit patients being served at or through St. Paul's Hospital (SPH). Over the past several years, the Foundation has noticed an increased demand to collaborate with other third sector organizations.¹ Requests have arisen in numerous ways, including from funders, grassroots community groups, and the hospital itself. This experience is not unique: collaboration has been growing across the sector (Vernis et al., 2006, p. 70; Blickstead, Shapcott & Lester, 2008). Therefore, its ability to develop and manage collaboration is becoming increasingly important.

Collaborations between nonprofit organizations are complex – they can involve multiple stakeholders with varying goals, values, and ways of operating, who differ in size, scope of work, and mandate (Blickstead et al., 2008, p. 24; Huxham, 1993, p. 607; Thompson & Perry, 2006, p. 25). The Foundation has navigated through past collaborations by adapting to stakeholder needs as best as possible while still working toward its own vision and mission. Tensions can arise through this process; for example, if roles or responsibilities are unclear or if partners are also competitors for funding. Since collaboration incurs human resource and sometimes financial investments, it also presents some risk to the organization.

In the future, therefore, the Foundation would benefit from a collaboration framework, which would likely consist of a set of principles, guiding questions, and processes, as a reference point for assessing, developing, managing, and evaluating collaborations.

The following report seeks to answer the following research questions:

Primary research question: What framework can the Foundation use to assess and develop partnerships with other non-profit organizations?

Secondary and supplementary questions to support the primary research question are:

1. What principles should the Foundation use to determine if a partnership with another non-profit organization will help it further its mission and vision?
2. What steps should the Foundation take at the outset of a collaborative effort?
3. What steps should be followed to ensure best outcomes once a commitment to proceed has been made?

¹ The "third sector" – also referred to as the "non-profit sector," "civil society," "charitable sector" or "voluntary sector" – refers to organizations that are private or institutionally separate from government, do not distribute profits, and are self-governing and voluntary (Hall et al., 2005, p. 3). In Canada, charitable and nonprofit organizations are considered separate and distinct for legal purposes: registered charities perform charitable work and issue tax receipts; and nonprofits include entities such as professional associations or sports clubs which do not to generate revenue (Carter & Prendergast, 2001). For this project charities and nonprofits will be referred to as "nonprofits" and considered members of the third sector. The term "nonprofit" is used inclusively.

4. What governance gaps might arise, and how can they be addressed?
5. How should the outcomes of the collaboration be measured or evaluated?

This project seeks to answer these questions by reviewing academic and professional literature on non-profit collaboration and related themes, and by conducting one-on-one interviews with leaders involved in the sector. It will consolidate the learning from these methods into a framework the Foundation can use when encountering the opportunity or need to collaborate.

This report is divided into eight sections. It will start by providing the reader with further background information on the Foundation and its context, and then describe, in more detail, the methodology employed. It will move on to review the literature and outline results gathered from the interviews. The findings from both methods will inform three options for the Foundation to consider moving forward. Of these, one option is selected and recommended, and an implementation plan presented. The appendices of the report offer tools the Foundation can use to construct its collaborative framework.

2. BACKGROUND²

This section provides context for the remainder of the report. It begins with a description of the Foundation and the system it operates within. This includes an overview of the Foundation organizational structure, its fundraising activities and experience with collaboration, and a short description of St. Paul's Hospital. This section then broadens in scope to provide a short analysis of changes in the Canadian nonprofit sector. It concludes with a definition of the term "collaboration" for the purpose of this report.

2.1 St. Paul's Hospital Foundation and Context

St. Paul's Hospital Foundation was incorporated in 1980 under the BC Society Act, has 25 full-time employees, and is governed by a volunteer board of directors. Its mission is captured with this phrase: "Inspired by the work of St. Paul's Hospital, we build meaningful relationships so our community can support exceptional patient care and world leading innovation" (St. Paul's Hospital Foundation, n.d.a.). In 2013-2014, it raised \$22.95 million from corporate, foundation, and individual donors, many of whom are grateful patients and their family members (St. Paul's Hospital Foundation, n.d.b.). The Foundation's key stakeholders include patients who benefit from its work, donors, as well as caregivers, physicians, researchers, and staff at the hospital.

St. Paul's Hospital is located in downtown Vancouver, British Columbia and is part of the Vancouver Coastal Health Region.³ It delivers specialized services for patients in the Region and across the province (Vancouver Coastal Health, n.d.a.). St. Paul's is operated by Providence Health Care (PHC), which receives its funding from the Province of BC. The vision of PHC is "Driven by compassion and social justice, we are at the forefront of exceptional care and innovation" (Providence Health Care, n.d.a.). PHC partners with the Vancouver Coastal Health Authority and the Provincial Health Services Authority to deliver care (Providence Health Care, n.d.b.). Its six areas of emphasis are heart and lung risks and illnesses, renal risks and illnesses, complex needs in ageing, mental health risks and illnesses, HIV/AIDS, and urban health, including homelessness, addiction and concurrent disorders (Providence Health Care, n.d.b.). SPH is a teaching hospital affiliated with a number of post-secondary institutions.

The Foundation works with the hospital to identify priorities, which often include projects that span sites, for example, medical research programs involving partner universities. It seeks to fund these priorities through multi-platform, donor-centred fundraising activities, including annual giving (or direct mail), sponsorship, planned giving (gifts in-will, registered retirement income funds, RRSP's, and life insurance), formal proposals, and strategically selected events. The Foundation's charitable registration allows it to distribute funds to Providence Health Care, Providence Health Care Research Institute, the University of British Columbia, and Simon Fraser University. All such distributions must further the Foundation's purpose as described above.⁴

² Information in this section largely based on author's professional experience as an employee of the Foundation.

³ Vancouver Coastal Health serves 25% of BC's population and stretches from Richmond through Vancouver to the Sunshine Coast, Sea-to-Sky, Coast Garibaldi, Bella Bella and Bella Coola (Vancouver Coastal Health, n.d.b.).

⁴ Information based on author's own professional experience as an employee of SPHF.

The Foundation exists within a complex system. It interacts with St. Paul's and other hospitals, with individuals who work at multiple sites, with universities and other bodies within the health care system including regional and provincial authorities. It houses care, research and teaching entities that span other sites and are accountable to other organizations. In order to meet the hospital's needs, the Foundation must be able to understand and adapt to changes in this system. Increasingly, this requires the Foundation to collaborate with other organizations.

The Foundation currently partners with two research universities, a handful of other hospital foundations, and numerous population or disease-specific charities. Requests have arisen in numerous ways, including from funders, who wish to see a health issue addressed in a holistic way. This requires the Foundation to coordinate with other non-profits toward a shared approach; with grassroots community groups, which band together to raise funds for the hospital; and with the hospital itself. Moreover, leaders in the hospital build relationships with other non-profits to advance their fields or serve their patients. The Foundation typically enters into partnerships as a response to opportunity; for example, to establish an academic Chair; or demand, for example if desired or mandated by a funder.

In the process, the Foundation and its partners must each pursue their own mission, and as Thompson & Perry (2006) note, tension can arise between individual and collective aims (p. 26). Additionally, competition can emerge, for example, over how to approach prospective donors, announce a gift, or attribute credit for outcomes. A guiding framework would be helpful, as it would enable the Foundation to anticipate and either avoid or mitigate these challenges.

The following image provides a visual of the Foundation's system, which will be revisited in the analytic framework set out in Section 4.

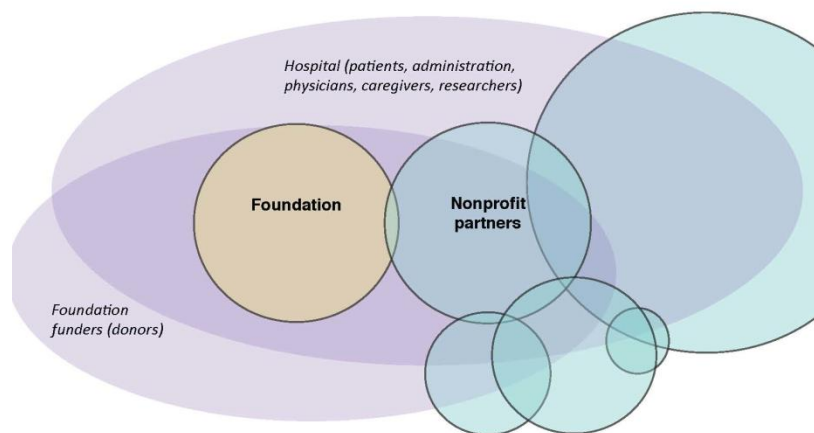


Figure 1
St. Paul's Hospital Foundation system

2.2 Non-Profit Sector in Canada: Current State Analysis

In North America and worldwide, the non-profit sector has grown exponentially over the past few decades (Blickstead et al., 2008, p. 21; Vodarek & Lasby, 2010, p. 409). Canada reflects this trend – it has one of the largest nonprofit workforces in the world representing a growing share of the national economy (Struthers, 2012, p. 265). Implications include increased access to services but also plurality and fragmentation, as multiple organizations can serve similar purposes (Vernis et al., 2006, p. 67). This can lead to competition for profile and funding (Huo, Eason & Zhang, 2014).

Meanwhile, governments are devolving services and cutting funding, and nonprofits have been pressured to “innovate” in response (Blickstead et al., 2008, p. 7; Foster & Meinhard, 2002, p. 549; Goldenberg, Komoji, Orton, & Williamson, 2009, p. v; Thompson & Perry, 2006, p. 20). In British Columbia, governments began shifting responsibility for public services to the voluntary sector in the 1980s-90s in an effort to reduce deficits (Burnley, Matthews, & McKenzie, 2005). Since then, funding restrictions, and expectations of the sector to deliver public services, have each grown (Burnley et al, 2005).

Changes elsewhere in the system – movement of public funding from program to project-based, and shifts in the role of the private sector – impact the direction and scope of nonprofit work and stretch its resources (Blickstead et al., 2008, p. 22). Increasingly, the nonprofit sector is faced with added responsibilities and more complex problems, and observers suggest that it must develop new skills and capacities in order to respond to growing needs. One such concept, an “innovation” with the potential to address larger challenges, is collaboration (Goldenberg et al., 2009, p. 19).

2.3 Collaboration: Definition

There are numerous and varied definitions for non-profit collaboration, cooperation, partnership, and alliance. Common definitions include the involvement of two or more organizations or individuals, the existence of a common purpose or need to achieve a common goal, ranges of organizational integration and intensity of relationships, and shared ownership of results (Blickstead et al., 2008, p. 3; Goldman & Kahnweiler, 2000, p. 435; Guo & Acar, 2005, p. 342-343).

Goldman & Kahnweiler (2000) focus on “well-defined” relationships, while Guo & Acar (2005) draw distinctions between eight varieties of collaboration, splitting them into two categories: formal and informal, ranging from information sharing and the least formal end of the spectrum to mergers at the most formal (p. 435; p. 343). Polonsky, LeFroy, Garma & Chia (2010) make distinctions between “strategic” (typically ongoing) and “tactical” (typically one-time) collaborations (p. 44). The Strategic Alliance Fund defines collaboration as requiring “full commitment” toward a common goal, formal enough to require the sharing of funds or documentation – and sitting somewhere in the middle of the continuum between cooperation and merger (Strategic Alliance Fund, n.d., p. 1).

3. METHODOLOGY AND METHODS

This research project uses a qualitative methodology and references documents and interviews (McDavid & Hawthorne, 2006, p. 33). It is designed as a needs assessment, with the intent to enable an in-depth exploration of the research questions including analysis of first-person experiences (Altschuld & Kumar, 2005; Patton, 2002, p. 14). Methods include a literature review and 14 semi-structured interviews with key informants to obtain their perspectives on the collaborative process and outcomes. This section provides more details on these methods. It then describes the strengths, limitations and risks involved.

3.1 Methodology

This research project is designed as a needs assessment; it identifies and analyzes gaps between the current and desired states of the Foundation's approach to partnerships (Altschuld & Kumar, 2005). The data collection informs recommendations to advance the Foundation's mission and vision (Altschuld & Kumar, 2005; Patton, 2002). The literature review offers a broad understanding of the topic and smart practices in the field; the interviews illuminate the Foundation's environment and context-specific barriers, drivers and process factors. These lines of evidence inform the project's recommendations and implementation plan (Altschuld & Kumar, 2005).

3.2 Methods - Secondary Data Collection: Literature Searches

The goal of the literature review is to develop a broad understanding of the research question and in doing so, to 1) inform the framework for collaboration developed through this report, and 2) create parameters for primary data collection.

Data sources for the literature review include academic and professional publications from reputable sources, as well as publicly accessible data obtained online through personal access to the University of Victoria Library or the Vancouver Public Library. Searches were undertaken using online platforms such as UVic's Summon, review of subject-specific journal catalogues, and by consulting with the University Librarian. Sources include books, scholarly journals, government reports, sector reports, and some newspaper articles. Focus was placed on intra-sector (non-profit with non-profit) collaboration, in keeping with the purpose of this project, though inter-sector collaboration was reviewed (non-profit with government or business) where the material seemed relevant.

Key search terms included variations on the terms collaborate, alliance, partner, merge, coordinate, fundraise and compete, combined with nonprofit, non-profit, third sector, charitable sector, NPO, and volunteer sector.

3.3 Methods - Primary Data Collection: Interviews

The goal of primary data collection is to develop a detailed understanding of the non-profit environment in which the Foundation operates. Interviews were chosen as the most appropriate method to achieve these desired outcomes because they allow for a deep exploration of the subject (Patton, 2002, p. 14). Purposeful sampling, that is, selection of

participants anticipated to have the most valuable input, was used in order to gather information from individuals able to comment specifically on the Foundation's context and needs (Patton, 2002, pp. 46, 230; Tutty & Rothery, 2001). Interview questions covered themes emerging in the literature review but, in order to best answer the research questions, focused more closely on remaining gaps.

The interviews were semi-structured in order to provide some guidance for discussion, to ensure some consistency between interviews, and to ensure key themes are addressed, while still allowing informants some room to elaborate on their experiences. The interviews included roughly 20 questions, covering a number of themes including past experiences with collaboration, perceived costs and benefits of collaboration, factors that influenced success or failure of a collaboration, roles, governance, recommendations, and potential risks (see Appendix 6). Due to time constraints and the semi-structured design, some interviewees responded to more questions than others. To ensure confidentiality and anonymity, participants' responses were kept confidential and none were identified in this report.

The sample for interviews was developed in consultation with the client. The inclusion criteria required participants to be affiliated with a non-profit organization, either as employees, funders, or board members. There were no exclusion criteria. The process for selection was based on the recommendations and needs of the client, and their objectives for this project as outlined in the research question.

Interviewees can be categorized into three groups (with some overlap among them):

- **Group one:** representatives of past and prospective non-profit sector partners (n=8). This group was included because they have lived experiences working through collaborations with the Foundation in the past and could therefore provide important insights into the process and outcomes, or they may be considering collaborating with the Foundation in future.
- **Group two:** individual funders or representatives of funding agencies who have supported or participated in collaborative efforts (n=2). This group was included because they have lived experience from the perspective of the funder, and may be able to comment on why, in their view, collaborative efforts they have funded in the past have or have not been successful, and why they require or encourage collaboration as part of their giving criteria.
- **Group three:** representatives of professional organizations or networks tasked to provide guidance or service to the non-profit sector (n=4). This group was included because they may be able to offer professional expertise related to collaboration.

Fourteen interviews took place: nine occurred face-to-face, and five over the phone.

3.4 Data Analysis

Both the literature review and interviews were analyzed using pattern, theme and content analysis using an inductive approach; that is, drawing conclusions for the client from the data collected (Patton, 2002, p. 453; Elo & Kyngas, 2007, p. 111). Data drawn from the literature was

coded, classified, and analyzed before the interviews were conducted. Data drawn from the interviews was coded, classified and analyzed separately. For each method, attention was paid to common themes and patterns, as well as data appearing to diverge from the norm. The purpose of this approach was to collect and illuminate data from disparate sources and present it in aggregate for the client (Anderson, 2007).

While there was some overlap between these two lines of evidence, the literature review was intended to inform the interviews, and the interviews to complement the findings in the literature review. Therefore each stream of evidence contained unique themes. Findings from both methods are drawn together in Section 6.

3.5 Project Strengths, Limitations and Risks

The strengths of this project include the knowledge gathered through the literature review and the depth of contextual understanding offered by the interviews. Each method centred on the Foundation's unique needs, with the goal of producing a practical and useful framework for collaboration.

This project is limited by its scope. In order to ensure it was manageable in the time frame available, it focuses on collaboration between non-profit organizations – within the sector – and not cross-sector collaboration. The time frame, together with the narrow focus, restricted the total number of interviews conducted. Additionally, the Foundation needs to honour and protect the confidentiality of its partners and funders. As such, citation of internal documents is limited and no specific case studies are discussed. Instead, experiences are generalized in discussion. This limits the possibility of articulating and building on past experiences using individual case studies.

Since the project's aim is to develop a framework for collaboration, this report assumes the Foundation will do so in future. Therefore, it does not examine whether or not collaboration is a good or bad thing for the third sector as a whole. However, it does look at pros and cons of collaboration and factors that should influence whether or not an organization should engage in individual collaborative opportunities.

The project may also be affected by the researcher's role as an employee of the Foundation. This indicates a possibility for researcher bias, and participants may have provided different data to a neutral third party. To help mitigate this limitation, interviewees were informed, as part of the consent process, that their responses were confidential and would not be shared with anyone, including the Foundation, until combined in aggregate with the responses of other participants.

The subject of risk and potential harm has been reviewed by University of Victoria's Human Research Ethics Board, which concluded that the project posed minimal risk to participants.

4. FINDINGS: LITERATURE REVIEW

This section of the report explores existing knowledge of nonprofit collaboration to inform the development of a collaborative framework. It reviews both academic and professional sources. It begins with an overview of theoretical perspectives explaining why nonprofits collaborate, provides an overview of antecedents to collaboration, and outlines process factors. It will then consolidate this learning to inform an analytic framework and the primary data collection portion of this report.

While there is substantial research into cross-sector collaboration between the public, business, and non-profit sectors and strategic alliances between businesses, less research appears focused on collaboration in the non-profit sector (Guo & Acar, 2005). Still, several rich resources are available, including Huxham's (1993) theory of collaborative advantage and Kania & Kramer's (2011) discussion of collective impact. However, few of these resources discuss role of competition in the nonprofit sector and its implications for collaboration (Huo et al., 2014).

Within the sources exploring nonprofit collaboration, relatively few are devoted to the Canadian context and even fewer to British Columbia. Very little was available regarding collaboration between hospital foundations in Canada and British Columbia and other non-profits. To help fill this gap, the literature reviewed draws from local, national, and international sources. For example, Hou et al. (2014) offer a useful discussion on the impact of competition on collaboration, drawing from data in China. However, it is important to note that in such cases, the nonprofit sector outside of Canada may be affected by different government policies and cultural norms.

While literature focused on competition and hospital foundations are scarce, there are a variety of sources explaining reasons why nonprofits might collaborate. The following section will provide an overview of key theories.

4.1 Reasons for Collaboration: Theoretical Perspectives

Before exploring the collaborative process, it is helpful to understand why nonprofits might consider collaboration in the first place. There are a variety of reasons, with several theories emerging from the literature. These theories are most commonly referred to as resource dependency theory, strategic management theory, transaction cost theory, network theory and institutional theory. An additional and more recent concept is that of "collective impact", which focuses more on the solutions collaboration can bring to a larger cause as opposed to the organizational need it can fulfill (Kania & Kramer, 2011). These theories are detailed below in order of least to greatest relevancy to the Foundation.

Resource Dependency Theory. This theory posits that collaboration can increase the resources available to an organization and reduce uncertainty in the external environment, particularly related to funding, and that 'resource dependence' creates motivation for nonprofits to collaborate (Foster & Meinhard, 2002; Guo & Acar, 2005; Bryson, Crosby, & Stone, 2006; Sowa, 2009; Maxwell, 2010, p. 249). For example, Struthers (2010) notes that the recession of 2008-2009 resulted in increased collaborative relationships amongst grantees of Ontario's Trillium

Foundation (p. 277). In contrast, Thompson & Perry (2006) note that collaboration increases the amount of turbulence in the external environment (p. 15).

The Foundation has a solid financial footing, and does not currently seek partnerships to reduce resource dependence. However, this theory may apply to some of its partners.

Strategic Management Theory. This theory posits that collaboration can enhance an organization's performance and improve its reputation in the community (Foster & Meinhard, 2002; Sowa, 2009, p. 1020; Maxwell, 2010, p. 248). An organization can increase its perceived legitimacy by attaching itself to another, well-established organization, thereby increasing its overall competitive position in the field (Sowa, 2009, p. 1018). At present, the Foundation does not seek strategic partnerships outside of those necessary to achieve its goals. However, it is possible these types of opportunities may arise in future.

Collective Impact. This is a new term that focuses more on opportunity than need, and refers to actors from different sectors banding together in order to solve complex social issues (Kania & Kramer, 2011). While 'collective impact' refers to a type of highly integrated, long-term collaboration with a common agenda and shared infrastructure, staff, and measurement, it also refers to the possibility that such an effort allows organizations to achieve something greater together than they would alone (Kania & Kramer, 2011).

The Foundation is involved in some long-term partnerships that would likely fall under the criteria of collective impact (Kania & Kramer, 2011). The hospital itself is even more involved in such efforts, and the Foundation should be conscious of this reasoning. It may even wish to proactively establish partnerships where collective impact can be achieved (Kania & Kramer, 2011).

Transaction Cost Theory. This theory argues that there are costs and benefits to collaboration, which organizations must consider in weighing whether or not to collaborate (Bryson et al., 2006, p. 46; Foster & Meinhard, 2002, p. 551). It notes that collaboration can (though not always) create cost efficiencies or in the delivery of services – the idea that organizations, and perhaps those they serve, can get more with less (Guo & Acar, 2005, p. 341; Foster & Meinhard, 2002, p. 551; Bryson et al., 2006, p. 46; Hanleybrown, Kania & Kramer, 2012).

Cost-benefit analysis is very relevant to the Foundation. The Foundation is very cautious in the expenditure of donated funds, and unlikely to partner unless there is a clear benefit to the organization and its stakeholders. However, the Foundation does not currently seek collaboration as a means to reduce organizational costs. Its experience has been the reverse – collaboration can often result in greater expenses.

Network Theory. This theory focuses on the social relationships between organizations and the trust they can engender (Guo & Acar, 2005, p. 11; Blickstead et al., 2008, p. 29; Bryson et al., 2006, p. 46). Some organizations choose to collaborate due to cooperative mindset and collaborative history, or to increase adaptability or access to expertise (Sowa, 2009, p. 1005). Indeed, social relationships can be considered necessary for the preconditions of collaboration – including a shared goal and trust – to be met (Blickstead et al., 2008, p. 16).

Institutional Theory. This theory assumes that organizations collaborate out of necessity or expectation – as a response to, or anticipation of, their environments – primarily legal and regulatory structures, but also government or moral pressure, established customs, cultural norms, and societal expectations (Guo & Acar, 2005, p. 10; Foster & Meinhard, 2002, pp. 551-552; Scott, 2008). Institutional theory adds to our understanding of the nonprofit sector as a whole, as it acknowledges its cultural and normative foundations – such as voluntary action, altruism and cooperation – instead of simply focusing on market forces (Valentinov, 2011). However, Goldenberg et al. (2009) note that such structures can inhibit innovation and new models are needed (p. 28).

Institutional theory is relevant to the Foundation and can explain some of its partnerships. Historically, stakeholders within the Foundation’s system, including funders and the hospital, have influenced the Foundation to collaborate with other nonprofits.

These theories, summarized in Table 1 below, assess the organizational fields in which nonprofits operate and offer explanations for decisions to collaborate. Each presents a useful unit of analysis though more than one perspective may apply. Resource dependency theory, strategic management theory, and transaction cost theory focus on the needs of individual organizations. Meanwhile, network theory focuses on relationships between organizations, and institutional theory on boundary-spanning environmental factors that can encourage collaboration, such as cultural norms or trust. Finally, collective impact focuses on benefits to the greater cause. An overall cost-benefit analysis that can help to weigh both organizational need, intra-organizational relationships, and potential to impact the larger cause is the concept of “collaborative advantage” (Huxham, 1993; Huxham & Vangen, 2005).

Theory	Originates from	Driver	Relevant to SPHF?
Resource dependency theory	Organization	Stability and access to resources	No, but may apply to partners
Strategic management theory	Organization	Strategic need, legitimacy, reputation	Sporadic, and possible in future
Collective impact	Environment	Maximize outcomes	Sporadic, and likely in future
Transaction cost theory	Organization	Efficiency	Yes, but unlikely to lead to collaboration
Network theory	Intra-organization	Relationships and trust	Yes, currently
Institutional theory	Environment	Environmental need, expectation, or custom	Yes, currently

Table 1
Theoretical perspectives on collaboration

4.2 Collaborative Advantage

Much of the literature presumes that collaboration is beneficial to organizations or society as a whole (perhaps this is because we have started viewing collaboration as inevitable). Vernis et al. (2006) outline the benefits organizations and society more broadly, such as efficiency, greater potential for impact, learning, and co-responsibility for a social issue (p. 73-74). Meanwhile, Blickstead et al. (2008) argue that collaboration can lead to innovation and knowledge translation, attract funds and increase the volume of services provided (p. 13). However, many authors acknowledge barriers, and express concerns about the amount of time and resources collaboration can consume – sometimes taking away from service delivery (Maxwell, 2010, p. 255; Huxham & Vangen, 2005; Thompson & Perry, 2006, p. 28; Vernis et al., 2006, p. 69; Blickstead et al., 2008, p. 9; Ferguson, 2004, p. 25; Foster, 2004, p. 15).

Huxham's (1993) theory of "collaborative advantage" offers balance to this discussion. She notes that organizations achieve collaborative advantage if 1) by working together, they accomplish something greater than they would have separately, and 2) the partnership enables each partner to better achieve their own objectives (p. 603). Partnership should be encouraged when collaborative advantage is possible, otherwise it is not worth the investment of time, effort and resources (Huxham & Vangen, 2005, p. 37). This theory complements the concept of collective impact. Kania & Kramer (2011) recommend that the activities of partner organizations be complementary, and reinforce one another for broader benefit (p. 40).

The theory of collaborative advantage provides a lens through which organizations can assess potential collaborations and determine whether or not to pursue them (Huxham, 1993). Such an assessment may involve analysis of preconditions, anticipated drivers and barriers, and process factors. The Foundation currently assesses partnership opportunities as they arise. A more structured process will be embedded in the framework developed for this report.

4.3 Phases of Collaboration

We have covered reasons for collaboration as well as possible costs and benefits. This section outlines the phases of collaboration in three parts: 1) assessing opportunities, including the external and internal preconditions that must exist or emerge before collaboration can be considered viable as well as potential barriers, 2) implementation, including initial agreements, roles and responsibilities, managing conflict, and processes, and 3) outcomes and evaluation.

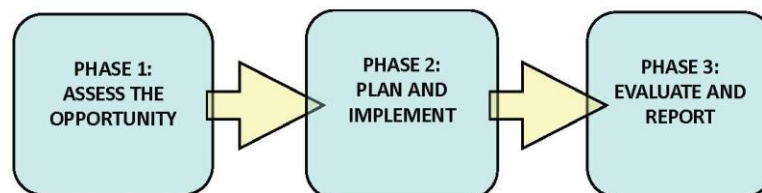


Figure 3
Phases of collaboration

Assessing the opportunities

The literature in both nonprofit and cross-sector collaboration consistently states that collaboration becomes desirable when an organization is working to address a larger, common issue that is outside the scope of its own influence (Blickstead et al., 2008, p. 15; Bryson et al., 2006, pp. 45-46; Kania & Kramer, 2011). Examples include social issues, environmental concerns, or issues specific to a geographic area or population. For the Foundation, such issues typically relate to health concerns, such as heart disease or HIV/AIDS.

Partners must develop a shared vision for how they will respond (Blickstead et al., 2008, p. 10; Thompson & Perry, 2006, p. 22; Maxwell, 2010, p. 253; Bryson et al., 2006, p. 47; Kania & Kramer, 2011). This can require subordinating organizational self-interests to focus on the best collective outcome, but this may draw resources away from particular organizational mandates (Maxwell, 2010, p. 255; Thompson & Perry, 2006, p. 20). Motivation is critical – organizations must believe that a partnership is useful (and perhaps to others), and be willing to engage (Vernis et al., 2006, p. 82).

The presence or absence of trust can advance or inhibit the collaborative process (Huxham & Vangen, 2005; Blickstead et al., 2008; Bryson et al., 2006; Thompson & Perry, 2006; Vernis et al., 2006; Kania & Kramer, 2011). Positive previous experiences and existing relationships with the same organization can help to move collaboration forward, or help ensure its longevity (Bryson et al., 2006, p. 46; Thompson & Perry, 2006, p. 21). Some authors suggested that clear roles and responsibilities can help to make up for the absence of trust (Blickstead et al., 2008, p. 29). Others suggested that trust could be purposefully built – for example, by developing individual relationships or establishing small, early wins (Vernis et al., 2006, p. 82; Huxham & Vangen, 2005, p. 37).

Shared vision and trust help drive collaboration. However, barriers and constraints might prevent it from occurring. At the organizational level, lack of time or resources is most commonly cited (Huxham & Vangen, 2005, p. 13; Vernis et al., 2006, p. 69-70; Ferguson, 2004, p. 25). Lack of organizational capacity or humility can negatively impact an organization's interest or success, as well as aversion to change, individualism, or negative past experiences (Blickstead et al., 2008, p. 26; Vernis et al., 2006, p. 69-70; Huxham, 1993, p. 604). Additionally, the number of stakeholders involved adds complexity and can inhibit success (Bryson, Crosby & Ackermann, 2004, p. 377).

In the external environment, the key factor driving change is competition. Barman (2002) analyzes the case of the United Way in the US and its changes in behaviour when competition arose – primarily, a shift toward differentiation and attempts to convince funders that they were superior in some way (p. 1214). Meanwhile, Huo et al. (2014) state that competition amongst charities can increase funds raised (p. 1015).

If acknowledged in advance, these barriers and constraints may be mitigated as part of the collaborative process. The literature consistently recommends constant communication between partners and with staff and volunteers as a way of building trust and accountability (Vernis et al., 2006, p. 82; Maxwell, 2010, p. 255; Huxham & Vangen, 2005, p. 37; Thompson &

Perry, 2006, p. 25; Blickstead et al., 2008, p. 24; Kania & Kramer, 2011). Several mechanisms were suggested: Ferguson (2004) suggests feedback loops to facilitate communications from staff through to governance, while Maxwell (2010) and Kania & Kramer (2011) suggest regular meetings and routines for reporting purposes. Maxwell (2010), based on practice and consultation with other nonprofit partners, also recommended a mechanism be created to address any faltering partners as problems arise (p. 255). Some authors suggested creating penalties to ensure organizations fulfill commitments, such as exclusivity, exit barriers, or financial incentives or disincentives (Polonsky et al., 2010, p. 46; Thompson & Perry, 2006, p. 24-25).

Drivers	Barriers
Larger, common problem	Time and resources
Shared vision	Lack of capacity
Motivation	Ego, individualism, and lack of humility
Trust and accountability	Aversion to change
Open communication	Negative past experiences
Mechanisms to address issues	High number of partners
Exclusivity and exit barriers	Competition

Table 2
Drivers and barriers at the assessment phase

Planning and implementation

Partners in collaboration should plan and implement in a very thoughtful way. This may include developing initial agreements (written or verbal), articulating roles and resources, creating mechanisms for managing communication and conflict, and agreeing on measurements and reporting of outcomes.

A common recommendation is for partners to forge agreements at the outset of collaboration in order to ensure accountability and avoid conflict (Vernis et al., 2006, p. 82; Blickstead et al., 2008, p. 29-30; Thompson & Perry, 2006, p. 24-25; Maxwell, 2010). Roles and responsibilities must be negotiated and agreed, possibly even documented, goals set and boundaries discussed (Thompson & Perry, 2006, p. 25; Strategic Alliance Fund, n.d., p. 1; Blickstead et al., 2008, p. 9). The agreements can be time-dated or ongoing (Blickstead et al., 2008, p. 9). By agreeing on roles and responsibilities, organizations can ensure goals are pursued and conflict avoided (Bryson et al., 2006, p. 47; Ferguson, 2004, p. 8; Thompson & Perry, 2006, p. 25). The literature on this topic is not, generally, prescriptive.

Power imbalances are a frequently cited concern. Often, collaborations proceed within a network structure, with horizontal coordination of work rather than a vertical hierarchy (Bryson et al., 2006, p. 49). The quality of the collaboration and its outcomes may be impacted by the nature of the relationship between the more and less powerful participants. Huxham & Vangen (2005) suggest each partner understand that “power plays” will occur, and should be aware of their own relative power and the impact it may have on others (p. 37). The literature suggests

this can be addressed by developing mitigating approaches or formalizing the relationship – establishing structures for decision-making and power-sharing (Thompson & Perry, 2006, pp. 24-25; Bryson et al., 2006, p. 47). While having a more powerful lead organization may be considered most effective, other options include self-governance or creating an overarching governance structure (Bryson et al., 2006, p. 49). Some authors also recommend that boundary-spanning networks be created to serve governance and operational purposes and that funders should invest in such entities (Thompson & Perry, 2006, pp. 24-25; Blickstead et al., 2008, p. 30; Ferguson, 2004, p. 8; Bryson et al., 2006, p. 49; Kania & Kramer, 2011, pp. 40-41).

Another consistent consideration is the amount of time collaborations can consume (Huxham & Vangen, 2005; Thompson & Perry, 2006, p. 28; Vernis et al., 2006, p. 69; Blickstead et al., 2008, p. 9; Ferguson, 2004, p. 25). The issue of time and financial commitments should be addressed during initial discussions among partners (Huxham & Vangen, 2005; Maxwell, 2010, p. 255). Some authors recommend dedicating staff with to systematically manage the collaborative processes (Maxwell, 2010, p. 255; Blickstead et al., 2008, p. 23). This may include human resource time – the investments staff are expected to make, presumably taking them away from other duties and presenting an opportunity cost to the organization, or financial commitments. Partners may also consider communicating resource needs to funders and requesting funding to support those needs (Maxwell, 2010, p. 255; Blickstead et al., pp. 7, 17).

Drivers	Barriers
Initial agreements	Power imbalances
Clear roles and responsibilities	Time
Clear goals and boundaries	Financial commitments
Leadership	Human resources
Decision-making structures	
Appropriate governance	

Table 3
Drivers and barriers at the planning and implementation phase

Evaluation and reporting

Whether intended to bring collaborative advantage or to satisfy the desire of funders, measuring, evaluating, and reporting the outcomes of collaborations is seen as a critical component of the process (Huxham, 1993). Maxwell (2010) suggests a routine be developed to assess progress, while Bryson et al. (2006) suggest developing an accountability system to guide gathering data and measuring results (p. 255; p. 51).

However, Bryson et al. (2006) and Huxham & Vangen (2005) note that organizations involved may have different interests with respect to outcomes, and Kania & Kramer (2011) recommend shared measurement systems in order to address this tension (p. 51; p. 37; p. 40). Therefore, measuring overall impact may be different depending on the perspective of partnering

organizations. In short, a complete performance management system would have the ability to routinely assess progress, ensure accountability, and handle shared measurement issues.

4.4 Analytic Framework

As outlined in the literature, there are various motivations for collaboration, drivers that move collaboration forward, and barriers that get in the way. Table 4 summarizes these for reference.

Motivation	Resources, relationships, cause, efficiency, environmental need or pressure, opportunity, custom or expectation
Drivers	<ol style="list-style-type: none"> 1. Larger, common problem, shared vision, motivation, trust and accountability, regular communication, mechanisms to address issues, exclusivity and exit barriers 2. Initial agreements, clear roles and responsibilities, clear goals and boundaries, leadership, decision-making structures, appropriate governance 3. Routine to assess progress, accountability system, shared measurement systems
Barriers	<ol style="list-style-type: none"> 1. Time and resources, lack of capacity, ego, individualism, lack of humility, aversion to change, negative past experiences, high number of partners, competition 2. Power imbalances, time, financial commitments, human resources

Table 4
Motivation, drivers and barriers in the collaborative environment

The following analytic framework (see next page) draws these themes together and overlays them with the partnership environment in which the Foundation operates. The top image in Figure 5 depicts the current state in which the Foundation is operating, and illustrates the points of tension in the collaborative process. The second image depicts the desired state, which overlays a structured framework – the goal of this report.

4.5 Summary

The literature reveals that there are many reasons why nonprofits may collaborate, whether due to external pressures, the size or scope of a problem, strategic need, or the possibility of greater efficiency. Organizations may proactively seek partnerships in order to advance organizational goals or achieve collective impact, or they may find it necessary to collaborate due to forces outside of their control (Kania & Kramer, 2011). Huxham’s (1993) theory of collaborative advantage balances the pressures for and against collaboration by offering criteria through which opportunities can be weighed – whether or not a partnership will achieve both a large vision and organizational goals.

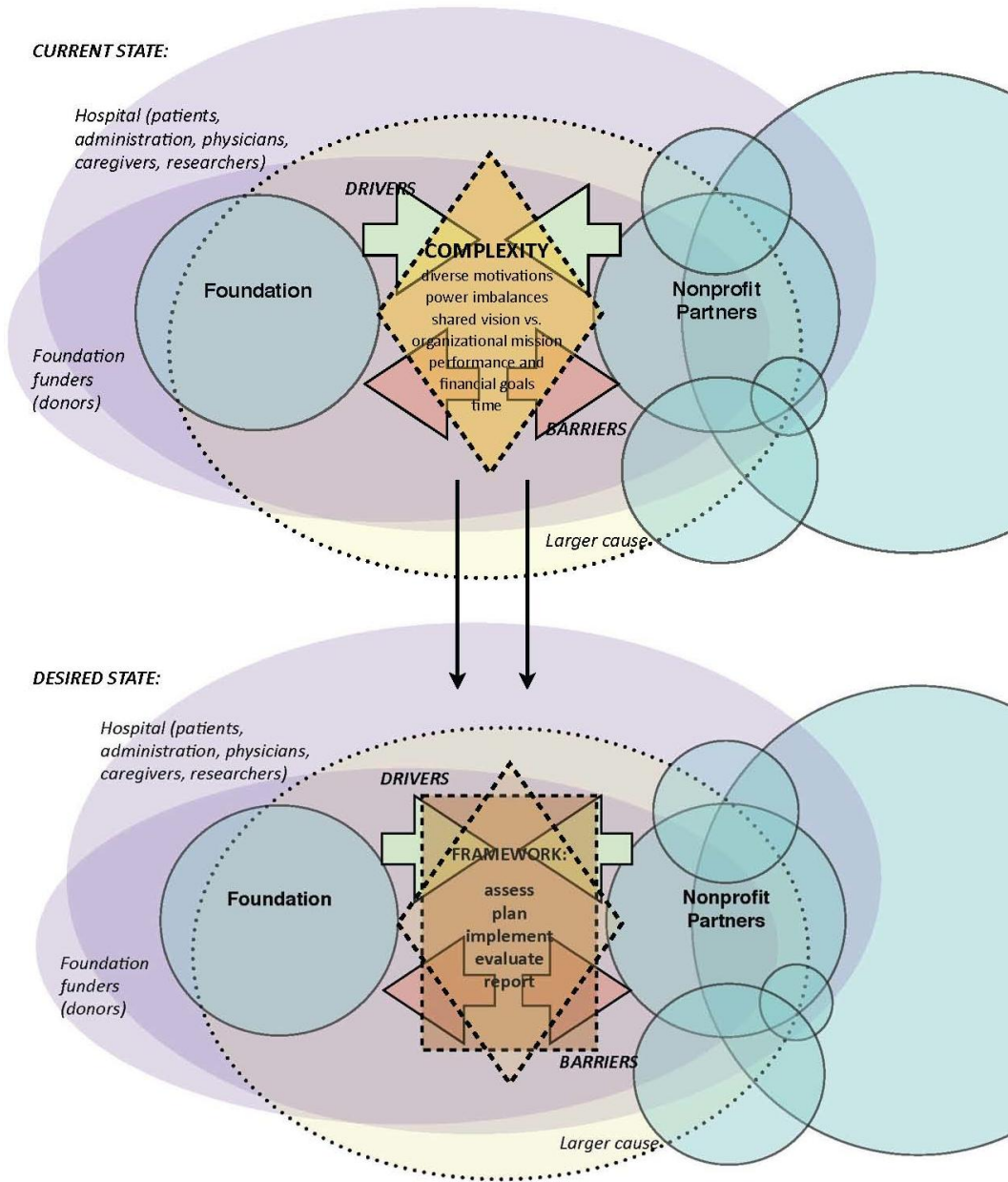


Figure 4
Analytic framework

5. FINDINGS: INTERVIEWS

This section of the report will provide an overview of key findings obtained through one-on-one interviews. A total of 14 interviews were conducted. Participants had been involved in the sector for 14 to 44 years, with an average of 26 years. Eight were leaders of their organizations (board, CEO and/or President), six were at the Director or VP level, and all had high-level leadership, industry association, or board experience. Half were female and half male. All work in Canada, with 11 in British Columbia and three from elsewhere in the country.

While the intention was to interview three groups, representing experts, funders, and current and potential nonprofit partners, some participants cut across these categories. The interviews were semi-structured, with some set questions but also allowing room for discussion of items of particular interest to the participant. The list of starting questions is in Appendix 6.

All interviewees had rich experience to share, and a few key themes emerged. These included varying degrees of optimism about collaboration, and a general agreement that collaboration *can* bring more benefits than costs if certain criteria are met. They identified drivers that can advance collaboration, such as relationships and trust, and barriers that stymie collaboration – most particularly the tension between measurement of individual and organizational performance versus the needs of the community or of donors. And finally, process factors, which generally reflected the findings from the literature review. As part of this, great emphasis was placed on taking time at the outset to develop a “roadmap” or initial agreement.

5.1 Assessment: Criteria, Opportunities and Risks

Interviewees had varied perspectives on the value of collaboration, with a handful enthusiastic about the concept, two very skeptical of its real potential, and the majority of respondents falling in between. Most participants viewed collaboration as generally desirable only if expected benefits to their organization outweighed expected costs, while a few felt it was desirable if there were benefits to the overall cause. Most felt that collaboration is necessary in order to address pressing social issues or unmet needs, and that it can lead to outcomes that are outside of one organization’s sphere of influence. One respondent commented that collaboration encourages organizations to “dream bigger” than they would alone, and that smaller organizations may benefit from attaching themselves to larger ones with more resources and profile. However, one interviewee from the expert group felt collaboration was incompatible where fundraising was involved and another from the partners group felt it was an ideal but not a realistic goal, noting, “wouldn’t it be nice?”

Most participants felt that the public – the community, as well as donors – would welcome collaboration between nonprofit organizations. Several participants commented on improved perception of organizations if they are collaborating, and one respondent commented that it is the “professional” thing to do. Several felt there was potential to reduce costs and decrease duplication in functions (for example, back-office processing), and that this would be perceived well. However, some felt it would create a need for additional investments – one participant felt that funders should be willing to invest in the collaboration itself. Several participants

commented about the proliferation of charities in Canada and the impact this may have on donor confusion or fragmentation of funding. One participant commented that this expansion of the sector is causing donors to demand collaboration when its not always appropriate.

All respondents felt that certain criteria are required in order for collaboration to be successful. These included strong rationale for getting involved, a value proposition (or collaborative advantage), alignment of organizations’ visions, values, brand and culture, improved outcomes for end beneficiaries, a “natural partner”, and a genuine and open commitment, at the leadership level, to move forward. A handful of participants noted that collaboration is more effective when partnering organizations are dissimilar, so that each brings something unique to the table and competition is reduced.

One participant felt that organizations should have a constitutional basis for collaboration, or at the very least, for collaboration to be embedded in a strategic plan. Additionally, as one participant noted, if there is going to be active expenditure of funds and staff time spent on collaboration, your board and leadership are going to ask why – and therefore, the rational needs to be particularly strong. However, few participants had a formal set of criteria their organizations used to evaluate partnership opportunities, though most had advice on what those criteria could be. Many felt a formal set of criteria would be helpful and would provide staff with a framework to follow. One respondent, however, felt it was important not to invoke too much process, but to consider opportunities as they arise. Another said they would go ahead without a set plan if they felt it was a good idea, and “apologize later” if it didn’t work.

Criteria	Opportunities	Risks
<ul style="list-style-type: none"> • Benefits outweigh costs (to organization) • Benefits outweigh costs (to cause) • Strong rationale • Win-win • Vision, mission alignment • Complementary organizations 	<ul style="list-style-type: none"> • Address pressing social issues • Greater outcomes • Reputation, legitimacy • Avoid “staying small” • Innovation • Public perception • Reduce costs, duplication • Reduce donor confusion • Learning • Refine own vision, mission, values 	<ul style="list-style-type: none"> • Incompatible with fundraising • Costs (staff time, financial) • Not always appropriate

Table 5
Criteria, opportunities and risks

When asked about the risks related to lack of collaboration, one respondent felt that organizations that do not collaborate run the risk of “staying really small”. Another commented that you might fail to improve outcomes in the “space” where you operate, and another

commented that if you keep doing the same thing and expect different outcomes, “it’s not gonna happen”. Most participants agreed that innovation is critical to organizational success and a few felt that lack of collaboration can lead to atrophy.

Finally, handful of participants emphasized the opportunity for people and organizations to learn from each other and to expand their networks. One participant, involved in bringing nonprofits together for networking purposes, commented that individuals working in the sector have a genuine enthusiasm to network and collaborate. One participant commented that the process of collaboration forces you to reflect on yourself and your organization, thereby helping you better understand yourself, your vision and values.

With such a deep understanding of the benefits of collaboration, one might expect to see more of it happening. The next two sections will discuss drivers and barriers.

5.2 Drivers: Motivation, Mission, Trust, and Leadership

In order to move collaboration forward, interviewees commented that several factors must be in place or be considered. Of particular concern were a focus on mission, community or end beneficiaries, and the role of motivation, relationships and trust. Several participants commented that motivation could come from funders who demand collaboration, and two participants commented on the need to educate their boards on the subject, its benefits and risks, and how success can be measured. There was also emphasis on the need for clarity at the outset, which is discussed further in section 5.4 as part of the collaboration process.

Of primary importance for all respondents was focus on the people benefiting or being served, including community members, donors, those receiving the work and those doing the work. Participants felt that emphasis should be always placed on achieving organizational mission, and that may require it to work outside of its own boundaries. When commenting from a fundraising perspective, participants emphasized the need to focus on donors’ wishes, which are also often broader than the influence of one organization.

Most interviewees commented on the central role that trust or “active goodwill” plays in the collaborative relationship. One respondent noted that if an organization has a good relationship and history of partnership with another, trust can grow regardless of whether or not those partnerships were successful. In fact, a strong trust relationship meant that “difficult conversations” could take place, or a partnership could “fall apart gracefully” and leave open the possibility that the organizations may work together again in future. One participant commented that trust facilitates collaboration because “when trust is high, communication is easy, but when trust is low, communication is very, very hard”, while another commented that “relationships are just how you get things done”.

There was also some openness to the idea of “paying it forward”, that is, allowing others to benefit from a situation and trusting that they will reciprocate in future. Most respondents felt that it takes time to build relationships but since trust is so important, this time is well spent. One participant linked trust, relationships, and respect, noting that, “it boils down to knowing,

and having respect for, the other party". One participant noted that without goodwill, it's easy for "active or passive resistance to torpedo the whole thing", and another noted, "isn't it wildly troubling that in the not-for-profit sector the whole fundamental pillar of why we exist is about trust, and we don't trust each other?"

Participants consistently commented on the need for strong leadership, motivation, "energy", or a "champion" or "catalyst" to move collaboration forward. One participant shared that while they thought collaboration was a good thing, "bold leadership" was required and "the impetus needs to come from somewhere", while another thought that someone brave enough had to step in first to make the initial commitment. Another participant shared an example where a catalytic individual, working at the community level (but not in a senior leadership position), was successful in bringing disparate groups together to achieve a common goal.

A handful of participants commented that collaboration became more viable when funders desired it to happen, and that funders could be the required catalyst. However, there was a difference of opinion on the funder's understanding of collaboration, its benefits and costs, and level of interest in collaboration. For example, many participants felt that a proliferation of charities in Canada led to donor confusion and an increased demand, from donors, for collaboration, while others felt that the fragmentation reflected donors' desire to target their giving in a more specific way.

In summary, the **drivers** are as follows:

- Motivation (from funders or organization);
- Focus on mission, donors or community;
- Trust or "active goodwill", respect and reciprocity; and
- Leadership, catalyst or champion.

Several participants noted that while they were personally in favour of collaboration, incentives are not embedded in their individual or organizational performance measurement systems, and they felt this was generally lacking within the sector as a whole. This brings us to our discussion on barriers to collaboration.

5.3 Barriers: Systems, Competition, and Ego

While most interviewees had a positive orientation toward collaboration and thoughtful recommendations for factors that can facilitate it, they also acknowledged significant barriers. These include limitations imposed by the broader nonprofit system, competition for resources, the role of ego or protecting one's "turf", as well as reputational risk and, to a lesser extent, the amount of time and resources it can consume.

Barriers at the systemic level of analysis include the recognition and reward systems embedded in the operations of Canadian nonprofits. A handful of interviewees commented that charity-monitoring websites use information filed with the Canada Revenue Agency to recommend which nonprofits are efficient or worthy of donations. Within this system, collaboration may in fact lead to perception of failure. For example, if two organizations work together to fundraise

for a larger project, but a major donation is directed through only one, it would only appear in the account books and tax filings of one – not both – of the partners. The other organization would show as having comparably higher expenses versus revenues, even if it was a joint effort for a shared cause. In such a case, it is difficult for organizations to justify applying resources to a shared effort. Two participants noted that if the funds could flow through both organizations, then this barrier would be removed. One of these participants, reflecting on an experience where this had happened, described it as an “ideal” partnership because the structure diffused any competition and the two organizations were able to work together smoothly.

Interviewees commented that boards of nonprofits evaluate performance primarily on efficiency and funds raised. Some felt their boards were predisposed to collaborate, and others thought felt they were more competitive. However, even when boards have a positive orientation toward collaboration, participants noted that the number and quality of collaborations are not formally included in performance evaluation. In fact, fundraisers are measured on whether or not they achieve their individual or team targets. Several participants felt that this incentivized competition, both within their own organization and with other organizations. And, as one participant commented, the goals are “ever increasing”, though they also noted that staff “feed” these expectations. A handful of participants commented that these measurements systems are inappropriate application of for-profit values to the charitable sector, and that the drive for more “market share” and higher numbers “doesn’t help the community at all”. Of additional concern is the need to align organizational budget with anticipated outcomes, and the how collaboration might skew the measurement of those outcomes and impact staffing.

Even though interviewees felt positively about collaboration, it can be challenging given the structure of the sector. One interviewee felt that this will have to change as new generations of donors demand new ways of working and explore new models of achieving social good. Another interviewee suggested that charities should not be measured on cost per dollar raised, but on how successfully each organization leverages its own resources. In this way, as one participant commented, “in the fundraising world it’s particularly ironic because mission is collaborative and fundraising is competitive, and they coexist in a single environment”.

The second most common barrier interviewees referenced was the desire for nonprofit organizations to protect their reputation or position in the field, and the role of organizational or individual “egos” or personalities in preventing this from happening. Several described situations encountering conflict over perceived “turf”, or where this perception has prevented organizations from working together. Interviewees also felt that organizations compete for profile, with one participant commenting that power imbalances can “disenfranchise” smaller organizations. Three interviewees felt this spirit of competition reflected the nature of the fields they served (education and medicine). Some interviewees felt that such competition is counterproductive; that collaboration can lead to abundance and a greater total pool of resources becoming available. Others felt there was only a certain amount of philanthropic support available, and that organizations compete in order to secure the amount of support

they need. However, one participant commented that “if what we’re really interested in is the community”, then we need to put ego aside to serve the larger goal.

Finally, some interviewees commented on competition for donors. For example if two organizations were fundraising for the same cause and wanted to approach the same prospect; the reputational risk collaboration can pose, if partners aren’t chosen carefully; and the time and effort collaboration can require, particularly if the effort falls apart.

In summary, the **barriers** are as follows.

- System (reporting requirements);
- System (performance measurement);
- Egos, protecting one’s “turf”;
- Competition for funding ;
- Competition for profile ;
- Power imbalances; and
- Fear of failure.

If collaboration moves forward, these and other barriers need to be managed as part of the collaborative process.

5.4 Process: Initial Agreements, Leadership, and Bold Conversations

The final general theme that emerged was the collaborative process. Suggestions were purposefully elicited in order to inform the collaborative framework as the intended outcome of this report. Responses varied from formal agreements to the behaviours they would expect their partners to exhibit, and are summarized in Table 6 (see next page).

All participants remarked on the importance of having clarity at the outset of any partnership, whether in a formal written agreement, a “roadmap”, or verbal understanding. Two respondents felt that for complex collaborations, a neutral third-party mediator might be useful. Several participants commented that this should take time – in fact, that “anything important takes time”, and that organizations should “go slow to go fast”. The agreement should include breakdown of roles and responsibilities, and commitments on each side of the partnership. Of particular importance is defining success and determining how and when it will be measured, outlining who has the authority to make what decisions, including channels for feedback, articulating ways to manage conflict, and ensuring organizational leadership is committed and that staff responsible for implementation are involved in these discussions.

Several participants suggested that organizations should be willing to discuss negative possibilities at the outset, so that if something went wrong, there was already a plan in place to mitigate the fallout. One likened this to having a “pre-nup”. Another commented that, from a fundraising perspective, organizations should agree on who is responsible for what monetary commitments, whether they can or will share lists of prospective donors, and how they will work together (or not) to achieve their fundraising goals. Interviewees consistently felt that lack

of this agreement at the very outset would lead to problems – conflict, mistaken assumptions on level of commitment, lack of communication, and challenges related to “negotiating halfway through”.

Participants varied in their recommendations for documenting the agreement, often stating that it would depend on what the project required. One participant commented that she lived in a small community where trust was high, and that written agreements were not necessary. Another felt that it should be documented, but it should be as simple as possible “to get the job done”, as there is such thing as too much process. Others felt more complexity is needed.

Secondly, and as referenced above under section two, participants consistently commented on the important roles played by boards, organizational leaders and staff, as well as the need for a “champion” or “catalyst” to drive collaboration forward. Additionally, a few participants felt working-level staff must be included in initial conversations. This would help to ensure implementation and follow-through. Several participants felt that such “management groups” should be in constant, regular communication, because even short lapses could lead to “drift”.

When asked what the participants’ would expect of their partners, the answers were fairly consistent. Interviewees would expect their partners to deliver what they said they would, when they said they would do it, with, as one participant said “with as much excellence as if they were only doing it for themselves”. Other expectations included transparency, honesty, enthusiasm, solutions-orientation, and a commitment to “making it work”. Finally, a respondent from the funder group expected the partners to exhibit greater efficiency.

One interviewee had been involved in the evaluation of a collaboration, but no participants had a formal process in place to do so.

Process Factors	
Initial agreement/ formal	Relationship/ informal
<ul style="list-style-type: none"> • Clear roles and responsibilities • Defining success and how it will be measured • Levels of decision-making authority • Communication: feedback channels, conflict management • Leadership commitment • Action if partnership falls apart • Fundraising commitments and process 	<ul style="list-style-type: none"> • Both leadership and staff are involved • Commitment to excellence • Transparency • Honesty • Solutions orientation • Efficiency

Table 6
Process factors, formal and informal

5.5 Summary

The literature review offered a broad understanding of collaboration in the nonprofit sector in Canada, the US, and beyond. It provided an understanding motivations for why nonprofits might wish to collaborate, outlined the concept of collaborative advantage, and illuminated important drivers, barriers, and process factors involved (Huxham, 1993). The interviews elaborated on these themes but focused more specifically on gaps in the literature and the context of the Foundation's immediate environment.

Most interview participants felt collaboration as beneficial, though they differed on how realistic it is within the structure of the sector. All had experience with collaboration, its successes and shortfalls, and easily referenced criteria they use to select which opportunities to pursue. These criteria aligned with the theory of collaborative advantage (Huxham, 1993). Participants provided insight into drivers that advance collaboration, including motivation, a focus on mission, trust and leadership. They also raised several significant barriers, with an emphasis on systemic barriers that can stifle the will to proceed. While discussions on process were not prescriptive, there was consensus on the critical importance of initial agreements.

The next section will discuss these findings in more detail and outline key themes running across these two lines of evidence.

6. DISCUSSION: FINDINGS, THEMES, STRATEGIC IMPLICATIONS

The purpose of this section is to review findings from the literature review and interviews and identify common themes as well as differences that arose between the two methods. The first part of this section summarizes the findings. The second provides an overview of common key themes that emerged from the findings, and some areas where the literature review and interviews diverge. The third part of this section will discuss strategic implications these findings have for the Foundation. This discussion will then lead into three options for the Foundation to consider implementing as it encounters new opportunities for collaboration.

6.1 Summary of Findings

The literature review offered several rich resources related to nonprofit collaboration, but also limitations in our existing knowledge in areas such as competition for funds. It revealed a general optimism about the potential collaboration can bring, and provided various explanations for why it might occur. These reasons included organizational needs, either monetary or strategic; environmental forces, including cultural norms, institutional pressure, or trust; and the potential for collective impact (Kania & Kramer, 2011). It then outlined Huxham's (1993) theory of collaborative advantage, a cost-benefit analysis through which partnership opportunities can be assessed. The remainder of the literature review section outlined phases of collaboration, including initial assessment, planning and implementation, and evaluation and reporting. It explained key drivers and barriers at each phase.

The interviews offered additional information related more closely to the Foundation's environment, and also allowed for exploration of knowledge gaps. Some of these findings mirrored the data. For example, interviewees also felt organizations need to have some alignment between their mission and values if a partnership is to succeed. While the themes aligned, certain subjects were considered more important than outlined in the literature. For example, the power of systemic barriers was a consistent concern for interviewees. Interviewees also placed a comparatively greater emphasis on the role of trust and relationships, and expressed much less of a concern over the time and resources collaboration can consume.

The table on the next page offers a summary of themes that emerged from both lines of evidence (common themes are italicized).

6.2. Themes

Analyzed together, the findings illuminated several key themes. These include vision and mission, motivation, endorsement of the concept of collaborative advantage, real concerns about relatively inflexible systemic barriers to collaboration, a desire to focus on benefits to the community or donors, the importance of leadership and trust, and consolidation of process factors (Huxham, 1993). The following paragraphs will focus on each of these themes in turn.

Vision and mission. Both lines of evidence emphasized the need for partners to have a shared vision for how they will serve the cause. The literature suggested that shared vision can be

Theme	Literature review	Interviews
Why collaborate?	<ul style="list-style-type: none"> • Larger, common problem • Greater outcomes • Reputation, legitimacy • Achieve efficiency • Gain or access resources • Past relationships • Respond to environmental need, pressure, or expectation • An opportunity exists 	<ul style="list-style-type: none"> • Larger, common problem • Greater outcomes • Reputation, legitimacy • Achieve efficiency • Innovation • Public perception is positive • Reduce donor confusion • Learning • Refine own vision, mission, values
Selecting partners/ project	<ul style="list-style-type: none"> • Collaborative advantage (Huxham, 1993) (benefits to cause and each organization outweigh costs) • Shared vision • Appropriate governance 	<ul style="list-style-type: none"> • Collaborative advantage (Huxham, 1993) (benefits to cause and each organization outweigh costs) • Vision, mission alignment • Complementary organizations • Strong rationale
Drivers	<ul style="list-style-type: none"> • Motivation • Trust and accountability • Leadership 	<ul style="list-style-type: none"> • Motivation (from funders or organization) • Trust and accountability • Leadership • Focus on mission, donors, community
Barriers and risks	<ul style="list-style-type: none"> • Competition • Time and resources • Ego, individualism, lack of humility • Power imbalances • Lack of organizational capacity • Aversion to change • Negative past experiences • Too many partners involved 	<ul style="list-style-type: none"> • Competition • Time and resources • Ego, individualism, lack of humility • Power imbalances • System (reporting requirements, performance measurement) • Fear of failure • Incompatible with fundraising
Process	<ul style="list-style-type: none"> • Initial agreements • Clear roles and responsibilities • Clear goals and boundaries • Decision-making structures • Communication: feedback channels, conflict management • Routine to assess progress, accountability system • Shared measurement systems • Exclusivity and exit barriers 	<ul style="list-style-type: none"> • Initial agreements • Clear roles and responsibilities • Clear goals/ defining success • Decision-making structures • Communication: feedback channels, conflict management • Fundraising commitments and process • Committed leadership, involved staff • Commitment to excellence • Transparency, honesty • Solutions orientation • Efficiency

Table 7
Overview of common and diverging themes

developed (Blickstead et al., 2008, p. 24). In order to do so, there must be alignment between the missions of partnering organizations. The need for shared vision was not explored in great detail during the interview process, as it was covered so thoroughly in the literature review. However, when asked about criteria for entering into collaboration, or to describe a collaboration that went well, interviewees consistently commented on the need to align organizations' missions or to ensure missions and roles were complementary.

Both the literature review and interviewees discussed the importance of to as "serving the community", whether the community was perceived as funders, the people performing the work in question, or the people benefiting from improved service. All interviewees expressed a genuine interest in benefits to the community or in assisting their donors to fulfill their philanthropic goals. Several stated they got into nonprofit work for this "altruistic" purpose and that their personal values aligned with the concept of collaboration. This suggests a will, within the sector, to achieve social good. However, systemic barriers can frustrate goodwill.

Systemic barriers. While the literature and most interviewees were optimistic about collaboration, a handful of interviewees offered criticism of collaboration, suggesting it is idealistic rather than realistic. This skepticism may have emerged more in the interviews as the primary data was intended to fill gaps left by the literature, two of those gaps being the subject of competition and conflict. Concerns centred heavily on systemic barriers and, in particular, measurement systems used by organizations, their boards, regulatory agencies, donors and the general public. Several interviewees felt that these systemic barriers were forcing them to operate with an internal orientation – that is, focusing on individual, team or organizational performance metrics, rather than external need or benefits to the community. Several interviewees found these systemic barriers frustrating or counterproductive, while others had found ways to circumvent them or developed partnerships where mitigation strategies were more possible.

This tension seems inescapable. The Foundation has experienced it, and so have its partners. This suggests that, unless there are significant changes to the system, partners should be aware of systemic barriers and discuss mitigation strategies as early as possible. Such conversations may be difficult, as they focus on the tension between goodwill and personal performance metrics.

Drivers: Motivation, leadership, and trust. While significant barriers exist, there are also many factors that can drive collaboration forward. The literature provided six theoretical perspectives explaining why nonprofits might collaborate, some more relevant to the Foundation than others. The interviews emphasized the importance of motivation and enthusiasm in order for partnerships to work. This suggests a need for organizations to understand their own reasons for collaboration, those of their partners, and the degree of motivation each has to be successful. Clarity around motivation may help organizations determine how viable a partnership is, and if the needs of all partners can be met. For example, if one partner desires to collaborate in order to achieve collective impact, and the other is seeking efficiencies in its

own operations, there may be conflict between goals and the partnership may not be viable (Kania & Kramer, 2011). Similarly, issues will arise if one partner is strongly motivated to succeed, for example, to acquire critical resources, and the other is not.

Honest discussions about barriers and motivation may only be possible if trust is present. While referenced in the literature and captured in network theory, the importance of trust was even more heavily emphasized in the interviews. Interviewees credited the presence of trust with easier communications, better conflict management, and greater outcomes. When asked if trust could be intentionally built, most interviewees responded that it could. It is possible that this emphasis and optimism are the result of most interviewees being sited in the Vancouver Lower Mainland, where the nonprofit community is still fairly close. In fact, one interviewee outlined their many links with the leaders of several other major institutions in the region, and this breadth and depth of relationships are likely fairly common amongst all participants. If we understand, as noted above, that most partners have altruistic mindsets and are willing to engage in difficult conversations, then trust should be possible, though may take some effort to build.

An additional alignment in the literature and interviews was the important role leaders play in making collaboration possible, whether the leader is a formal head of an organization or an informal “champion” or “catalyst” (Bryson et al., 2006, p. 46). The presence of such an individual may factor into whether or not an organization collaborates. In addition to moving collaboration forward, such leaders may also need to educate their boards of directors on the costs and benefits of collaboration and may ultimately be responsible for high-level decisions. The interviews added a dimension to this, suggesting that competing “egos” or “turf wars” can be counterproductive. A few interviewees wanted their organizational leadership’s guidance on whether or not their organization was in a position to pursue new collaborations.

While the role of boards of directors arose during discussions around systemic barriers, governance seemed more of a concern in the literature. Interviewees did not typically comment on governance roles unless they had had experience with mergers or were asked directly.

Collaborative advantage. Generally, findings from both the literature review and the interviews suggest that collaboration can bring value, including fulfillment of organizational mission, the potential to achieve collective impact, fulfillment of needs in the external or institutional environment, and benefits to the community or people being served (Kania & Kramer, 2011). While no interviewees referenced the term “collaborative advantage”, they did comment on the concept, using the words “win-win” and “value proposition” (Huxham, 1993). Interviewees also understood collaboration requires resources and expressed less of a concern on this than was found in the literature, though all were asked directly about costs. There seemed to be an understanding that if an organization chose to participate in collaboration that they would have to apply resources against it, and that this would be part of the initial planning – and if the costs outweighed the benefits, it wouldn’t proceed. Additionally, many interviewees felt collaboration can bring efficiency rather than costs even though there was much concern about

perceived output vs. input (i.e. who gets credit for fundraising). Rather than focusing on costs related to human resources or time spent, more interviewees were concerned about reputational risks.

The Foundation already operates using the concept of collaborative advantage; it would not enter into a partnership unless it perceived more benefits than costs (Huxham, 1993). However, it may be helpful to share knowledge of this concept with its partners. For example, if the Foundation is approached by an organization whose motivation is their own resource dependence, it could ask that organization to articulate the expected collaborative advantage for all parties before discussions progress (Huxham, 1993). This brings us to the topic of process.

Process. Both lines of evidence strongly agreed on the value of an initial agreement or “roadmap” to guide the partnership. This initial process must include clear goals and objectives for the partnership itself and for each partner. The findings were otherwise not prescriptive, both the literature and the interviewees noted that specific processes would vary depending on the nature of the collaboration. The first phase of collaboration, therefore, emerged as most critical.

The findings suggest that any initial agreement should include:

1. Clear goals and objectives (for partners and partnership);
2. Leadership and decision-making structures;
3. Organizational and individual roles and responsibilities;
4. Mechanisms for transparent, honest communication and conflict management;
5. Clear expectations of each partner;
6. Agreement on measuring outcomes and reporting;
7. Factors that may derail the effort and related contingency plans; and
8. Ways of actively building trust and relationships.

Most interviewees wanted just enough structure and process to get the job done, though their interpretations of this need fell along a spectrum from informal verbal agreements to embedding collaboration in the constitution or strategic plan of the organization(s). The structure may therefore change depending on the nature of the organization. Since there is typically some risk included in the Foundations’ partnerships, for example fundraising or reporting commitments, a short but thorough written agreement would likely serve its needs.

Summary. The literature review and interviews each provided valuable insights on the subject of nonprofit collaboration. These two lines of evidence overlapped on some subjects. Since the interviews filled gaps left by the literature, much of the interview data complemented that found in the literature. Several key themes emerged, including the importance of vision and mission; systemic barriers, drivers such as motivation, trust and leadership, collaborative advantage and process factors including initial agreements (Huxham, 1993). These themes suggest a number of strategic implications the Foundation should consider moving forward. The following section will describe them in detail.

6.3 Strategic Implications

The findings detailed above illuminate strategic implications for the Foundation as it approaches future partnerships. This section will outline those key considerations as a preface to the options and recommendations, which are presented in the following section. These strategic implications will be woven into the implementation plan that concludes this report.

Developing shared vision and assessing if missions are complementary. Prior to pursuing any collaboration, the Foundation should work with its prospective partners to determine if they share a vision for the challenge they are trying to address and if not, whether one can be developed. A critical part of this discussion will be whether the organization's missions, cultures and values align or are likely to cause conflict. While mission alignment is critical, the roles of each partner may differ considerably. Organizational roles should complement each other rather than incite competition. It may be more effective for partners to be different, rather than alike.

Selecting partners carefully. The findings suggest that nonprofit organizations and their leaders have diverse views on the value or potential of collaboration. They may view it as an opportunity or as an impossible task. Likewise, there are several different reasons why they might collaborate. Perhaps they are responding to environmental pressure or organizational need, have a desire to work with the Foundation because of past success, or see an opportunity to achieve collective impact (Kania & Kramer, 2011). The Foundation should be aware of these differing views and motivations and seek to understand them whenever a partnership opportunity arises. This understanding will enable the Foundation to better assess the opportunity and determine whether or not to proceed. It will also provide some insight on potential barriers that might emerge. All partners need to be invested in success – so must be carefully selected.

Finding the win-win. The findings suggested partnering organizations should pursue collaborative advantage, articulate the value proposition, or create a win-win for the organizations themselves and for their stakeholders (Huxham, 1993). The Foundation should seek to understand the needs and motivations of its partners and clearly communicate what it needs in order to make the effort successful for its own stakeholders. This should include benefits to the community being served as well as accountability to funders. If collaborative advantage is not present for itself its partners, it should not move forward (Huxham, 1993).

Building trust is crucial. The Foundation should pay close attention to the role of trust and relationships in any collaborative effort. The findings are clear that trust is central to the success of any collaboration, and that partners desire transparency, honesty, and communication from one another. It would be wise to assess levels of trust with potential partner organizations at the outset of collaboration, and to actively build trust where it is lacking, in order to facilitate communication and make it more possible to have difficult but important conversations. These conversations may include steps to take if the partnership derails or falls apart.

Assigning the right leaders. The Foundation should be aware that leadership, whether formal or informal, is required in order to make collaboration successful. A natural leader may emerge as part of the initial assessment phase of collaboration, or it may be necessary to specifically assign someone to the task. The leader should have some decision-making authority, and should keep process-oriented staff equipped with any relevant information they will need to make the collaboration work. The leader should be enthusiastic about the project and be skilled at establishing and developing trusting relationships. They should be able to put aside their own and their organizational ego in pursuit of the larger vision. Their performance measurement should include metrics that motivate them to succeed.

Focusing on the critical early phase and anticipating barriers. The literature review and the interviews are very clear that the beginning stages of collaboration are critical. Collaborative advantage must be present, objectives must be clear, and partners must understand roles and responsibilities, including who can make what decisions and how communications will flow (Huxham, 1993). Rather than focus solely on the ideal outcomes of collaboration, the initial assessment and planning stages should include candid conversations about any factors that may get in the way of success. Mitigation strategies should be put in place to address any anticipated barriers. This is especially important in a fundraising partnership, where agreement may be required on which organization can approach which donors, who will get credit for funds raised, how funds will flow, and how these factors will reflect on the partnering organizations.

6.4 Summary

The findings from the literature review and interviews were complex and multi-faceted. For the purposes of this report, they can be distilled into several key themes. First, it is critical for organizations to develop a shared vision and maintain focus on their own missions, and communities being served. Second, certain drivers and barriers can be particularly powerful in either advancing or constraining collaboration. Third, organizations should pursue collaborative advantage, or find a value proposition for each partner (Huxham, 1993). Finally, it is important to spend time on the collaborative process – especially at the early stages. These themes informed strategic implications the Foundation should consider moving forward. These include developing a vision and ensuring complementary mission, selecting the right partners, building trust, assigning the right leaders, focusing on the critical early phase, and overcoming barriers.

These findings suggest that key challenges for the Foundation include selecting the right partners, pursuing the right project, and, if it decides to move forward, paying attention to process and investing in success. The next section will apply the findings and strategic implications to inform three options for the Foundation's consideration in responding to this challenge.

7. OPTIONS, RECOMMENDATION, IMPLEMENTATION PLAN

This section presents three options for the Foundation to consider. They each assume that the Foundation will continue collaborate, though they differ in motivation and degree in openness to collaboration. The options are as follows:

1. **Reactive/Exceptional.** This option places priority on avoiding any risks associated with collaboration. It suggests a conservative approach to assessing collaboration and recommends proceeding only when benefits are explicit and can be measured. It focuses on benefits to the Foundation and not to the larger cause or to partner organizations. Partnership would be pursued only on an exceptional basis.
2. **Priority-Driven.** This option applies collaborative advantage to assess partnership opportunities (Huxham, 1993). It acknowledges systemic barriers but suggests mitigation strategies. It requires active development of trust. It focuses on maximizing benefits for the Foundation, the larger cause, and partner organizations. In this case, the Foundation would only pursue partnerships which align with its strategic direction.
3. **Proactive/Leadership.** This option encourages the Foundation to seek out potential partners in order to achieve collective impact (Kania & Kramer, 2011). It acknowledges the existence of systemic barriers and encourages the Foundation to remove those barriers by advocating for changes to the system. It focuses on the larger cause over benefits to the Foundation or partner organizations. In this case, the Foundation would initiate, lead and pursue multiple partnerships, and accept the risk that some will thrive but many will fail.

Following a more detailed review explanation of each option, they will be weighed against criteria derived from the findings:

- **Organizational mission:** potential to achieve or contribute to the Foundation's vision, mission and mandate;
- **Larger vision:** potential to benefit a larger vision or cause important to the Foundation and its donors;
- **Resources:** potential to gain or save resources that outweigh costs;
- **Viability:** number and degree of barriers the Foundation is likely to encounter;
- **Organizational capacity:** presence of leadership, amount of human resource time required and any other expected costs; and
- **Practicality:** whether or not the goals are realistic and likely to be achieved.

The options will be compared with each other and a recommended approach will be identified for the client to consider, along with an implementation plan and related tools.

7.1 Option 1: Reactive/Exceptional

As outlined in the literature and the interviews, collaboration offers many potential benefits but also poses risks to organizations, including monetary and human resource costs, reputation, and potential for conflict with partners. Option 1 focuses on avoidance of this risk by assessing costs and benefits to the Foundation before considering benefits to the larger cause or to partners. It assumes that collaboration itself does not hold value and pursues partnerships on an exceptional basis.

This approach would mean that, during the assessment phase, the Foundation would pay special attention to very concrete anticipated benefits to the organization and its mission, such as the potential for a large gift. The possibility of impacting a larger vision would be a secondary aim. It would also examine and consider anticipated risks and barriers. Benefits would need to be maximized and barriers removed in order for the Foundation to consider moving forward. The potential for collaborative advantage or collective impact would not be enough for the Foundation to enter into a partnership (Huxham, 1993; Kania & Kramer, 2011). The planning and implementation stage will involve careful planning with a focus on mitigating risk and documenting processes thoroughly in writing.

The advantages of Option 1 are that risk to the organization is minimized and resources conserved. The Foundation would be operating within its existing system and would not be tasked with finding creative solutions to barriers. Disadvantages may include missed opportunities to achieve a larger vision, achieve great impact, or to develop relationships with other organizations. Figure 5 below depicts Option 1.

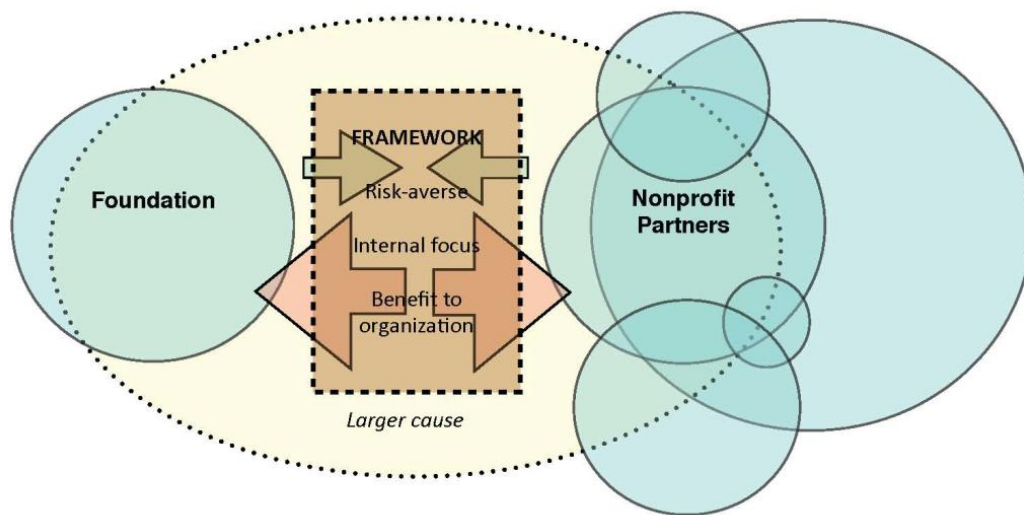


Figure 5
Option 1: Reactive/Exceptional

7.2 Option 2: Priority-Driven

This option recommends assessment of prospective partnerships using collaborative advantage; ensuring benefits to the Foundation, a larger cause, and its partners will outweigh costs (Huxham, 1993). It acknowledges that systemic barriers exist but works in a proactive way to mitigate those barriers. It emphasizes trust, careful planning and frank discussions with potential partners before any commitments are made. It involves some proactive seeking of collaboration with organizations where there is strategic alignment, but it does not suggest an aggressive approach to developing new partnerships. It does not advocate for systems change. It sees collaboration as a means to an end, and not as fulfillment of an organizational goal.

During the assessment phase, the Foundation will use a set of criteria to assess the potential for collaborative advantage and a set of considerations to be discussed between potential partners (Huxham, 1993). These considerations will include ideal outcomes and back-up strategies if things do not proceed as planned, or if one partner is unable to fulfill their commitments. Additionally, special attention will be paid to any existing barriers and how they can be mitigated, for example anticipated conflict over donors, flow of funds, or claiming of outcomes.

The planning and implementation stage will involve careful and thorough planning at the outset of a collaborative effort. Depending on the Foundation’s history with the partner organization, the process may also require active cultivation of trust. Simple written agreements will serve as a touch point for partners to ensure they are accountable to one another and stay on track. Expected outcomes will be articulated at the very beginning, and measured and reported using the terms agreed to by all parties.

The advantage of this approach is that the Foundation would participate in, and benefit from, carefully selected and well-planned collaborations that impact a greater cause. The disadvantage may be the detailed planning required. Figure 6 below depicts Option 2.

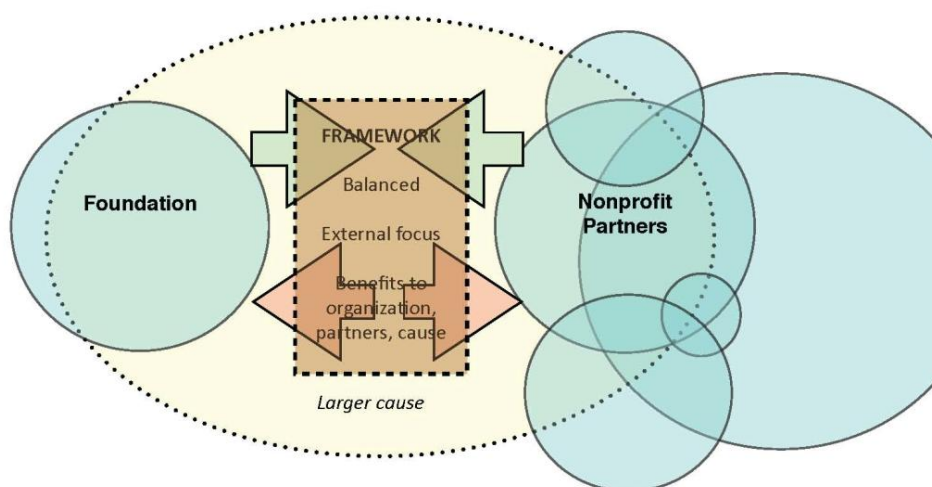


Figure 6
Option 2: Priority-Driven

7.3 Option 3: Proactive/ Leadership

Option 3 is a more assertive approach to collaboration. Instead of focusing on the risks, it begins with the assumption that collaboration, in itself, holds value. It requires the Foundation to embed collaboration in its strategic plan, to actively seek out new partners that share its mission, vision and values, and to develop collaborative projects with those partners. It may, in time, lead to discussions about mergers or sharing services or functions. It also involves active understanding of, and working toward, changes in the system, which may involve activity with professional associations and sector leaders. The focus is on collective impact, which may require setting aside individual aims to pursue a larger goal (Kania & Kramer, 2011).

This option means that the assessment phase, focus would be placed on the larger vision and not to the goals of each partner. The planning and implementation and evaluation and reporting phases would be very involved, as the partnership may require the creation of a discrete network or operating entity (Kania & Kramer, 2011). Therefore, this option requires the investment of significant time and resources to identify, approach, and develop relationships with potential partners, and even more time to pursue changes to the nonprofit system. It carries more risk than options one or two, in terms of investments required and impact on reputation. It may, in the long-term, pay dividends if it realizes more advantageous partnerships or its partnerships achieve collective impact (Kania & Kramer, 2011). Figure 7 depicts Option 3.

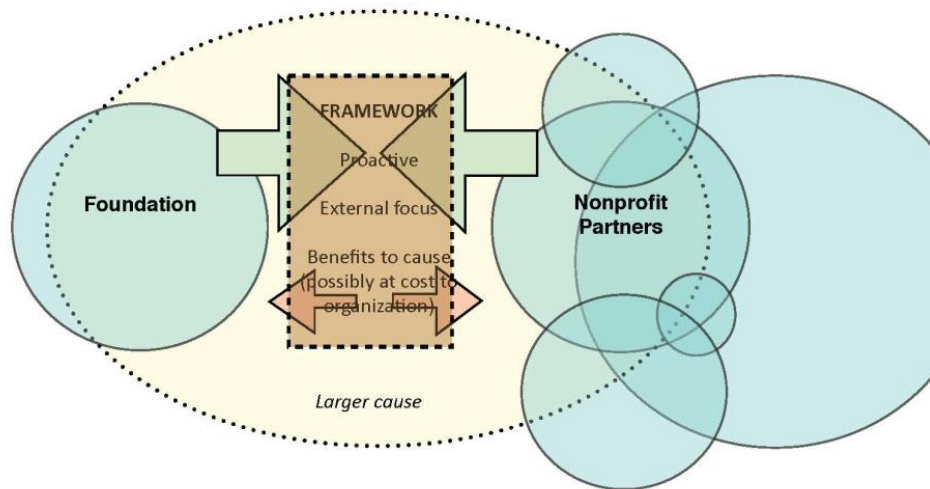


Figure 7
Option 3: Proactive Leadership

7.4 Comparing the Options and Recommended Approach

The three options presented are reactive/exceptional, priority-driven, and proactive/leadership. This section briefly summarizes the options by comparing their motivations, advantages and disadvantages. Table 8 (below) provides this summary. Each option is considered in relation to six criteria: contributions to the Foundation’s vision and mission, contributions to a larger vision, viability, resources required or gained, organizational capacity, and practicality. Table 9 (below) summarizes the options against these criteria.

	Option 1 Reactive/Exceptional	Option 2 Priority-Driven	Option 3 Proactive/Leadership
Motivations	Benefits to self: resource dependency, strategic, institutional, transaction-cost	Benefits to self, cause, partners: collective impact, network, strategic, institutional, transaction-cost	Benefits focused on cause: collective impact, network
Advantages	Little exposure to risk, fewer costs	Open to opportunity, impact a greater cause	Impact a larger cause
Disadvantages	Missed opportunities to impact larger cause	Careful planning required, more frequently	High time and resource costs, potential for mission drift

Table 8
Summary of options

Criteria	Option 1 Reactive/Exceptional	Option 2 Priority-Driven	Option 3 Proactive/Leadership
Vision, mission, mandate	Limited – may forgo benefits to avoid risks	Yes - select partnerships that advance goals	Possibly, if larger efforts do not detract
Larger vision	Unlikely – the focus is on organization’s mission, not the larger cause	Possibly – if organization’s vision, mission, mandate are met	Yes – the focus is on the larger, boundary-spanning vision
Viability	Yes – few barriers anticipated	Yes – some barriers, but mitigation strategies will be put in place	Possibly – may be restricted by barriers, resources or governance
Resources	Limited – may offer some opportunities	Possibly – depending on the case	Possibly – costs may outweigh benefits
Organizational capacity	Yes – no additional resources required, may release time	Yes – with some resource allocation	Unlikely – additional resources needed
Practicality	Yes –goals are not ambitious, are achievable	Yes – with robust early planning stage	Unlikely – systemic barriers pose a challenge

Table 9
Options and criteria

As illustrated in Tables 8 and 9, Option 2 allows the Foundation to maintain focus on its organizational field and own vision, mission and values, but leaves opportunity for it to participate in larger vision or to contribute toward collective impact (Kania & Kramer, 2011). It is viable and practical, and fits within the Foundation's current organizational capacity. While some resources may be required, additional costs are minimal. Therefore, this report recommends the Foundation adopt Option 2, a priority-driven approach. It enables the Foundation to pursue collaboration where collaborative advantage is possible, and offers the structure it is seeking with respect to assessing and implementing partnerships (Huxham, 1993). Option 2 presents the possibility for both risk and reward, but risks are mitigated through the structure provided by the tools in appendices 1-4. The implementation plan, which we turn to next, will be aligned with the original research questions for this report.

To note, while Option 2 is the current recommendation, the Foundation may decide, in future, to adopt some aspects of Option 3. As noted in Section 2, health care issues span hospital boundaries, and more consolidation is happening in the sector. This may place the Foundation in an environment where focus on the larger cause is necessary.

7.5 Implementation Plan

This section provides an implementation plan for Option 2 (see next page). It includes five phases: pre-partnership, which can begin immediately; assessment, planning and implementation, and evaluation, which can begin at the outset of the Foundation's next partnership opportunity; and ongoing maintenance. Appendices 1-4 provide tools to support the assessment, planning and implementation, and evaluation phases.

7.6 Summary

The purpose of this section was to provide the Foundation with a recommended approach to future collaborations and to offer plans for implementation. It did so by responding to each of the report's original research questions. The responses offered tools for each phase: assessment, planning and implementation, and evaluation and reporting.

These tools are intended to ensure efficiency and clarity for the Foundation as it moves forward. They will help ensure all aspects of a partnership are considered as early on in the collaborative process as possible – creating the possibility of better application of resources, and better outcomes for all involved.

Phase	Task	Timeline
Pre-partnership	<ul style="list-style-type: none"> • Present framework as laid out in Appendices 1-4 to Foundation senior leadership team, confirm adoption (at management meeting, occurring every two weeks). • Assess organizational capacity to manage partnerships, consider charging a staff person with this responsibility. • Determine when the framework will be used (e.g. for each partnership, or only those at higher levels of complexity). • Present framework to Foundation staff and discuss process for implementation. • Train staff on definition and evaluation of collaborative advantage. • Train staff on use of framework (Appendices 1-4). • Save framework in central electronic files for easy access. • Share framework and tools with interviewees and partners (if approved by the client). 	May-July 2015
Assessment	<ul style="list-style-type: none"> • Use Framework Tool 1, Assessment Checklist, to facilitate internal discussions on suitability of partnership for SPHF. • If decision is made to move forward, assign staff person to manage partnership. • Allocate enough time and resources to ensure success (may have budget or human resource implications). 	Month 1 (at outset of next partnership opportunity)
Planning and implementation	<ul style="list-style-type: none"> • Use Framework Tool 2, Discussion Questions for Planning and Implementation, to form agenda for discussion with prospective partners. • Assess anticipated barriers; discuss mitigation strategies. 	Month 2
	<ul style="list-style-type: none"> • Document outcomes of planning discussions using Framework Tool 3, Template Memorandum of Understanding. • Have MOU signed by all parties. • Monitor partnership and commitments based on MOU. 	Month 3
Evaluation	<ul style="list-style-type: none"> • Evaluate <i>partnership</i> using Framework Tool 4, Evaluation Guide. 	At partnership close (lasting 1 week)
	<ul style="list-style-type: none"> • Evaluate <i>initiative</i> using Framework Tool 4, Evaluation Guide. 	At partnership close (lasting 1 month)
Ongoing	<ul style="list-style-type: none"> • Review framework and tools and revise as needed. • Request feedback on framework and tools from partners (if applicable). 	Annually

Table 10
Implementation plan

8. CONCLUSION

The purpose of this report was to develop a framework for St. Paul's Hospital Foundation to use in assessing and developing partnerships with other nonprofit organizations. This included identifying principles to following when approaching an opportunity, the steps involved in moving it forward, and how it should be evaluated and reported. Responding to this challenge required a review of the literature to gather existing knowledge and practices in nonprofit collaboration, and one-on-one interviews with leaders in the sector to fill in any missing gaps and to set the report within the Foundation's unique context.

The findings from the literature review and the interviews were complementary, though with some differing emphases. They covered theoretical perspectives about collaboration, which illuminated the different motivations organizations may have in partnering. The findings outlined three phases: assessment, planning and implementation and evaluation and reporting. Both the literature review and the interviews identified drivers and barriers at each phase, though their emphases were slightly different, with the literature relatively more focused on time and resources and interview participants on systemic barriers and trust.

This data informed the resulting recommendation, which was for the Foundation to take a priority-driven approach to collaboration – assessing opportunities as they arise, acknowledging barriers and identifying mitigation strategies, and pursuing collaborations where benefits outweigh costs, where a shared vision can exist, and where missions align. Within this approach, emphasis is placed in early discussions: developing an initial agreement and clarifying goals and objectives. The implementation plan is accompanied by four tools to facilitate the collaborative process, from assessing opportunities, to planning and implementation, to evaluation and reporting. These tools are intended to ensure the Foundation enters partnerships that benefit its stakeholders: patients and families being served through St. Paul's Hospital, the physicians, caregivers, researchers and staff who work there, and its donors, who wish to make a meaningful difference.

While the literature on nonprofit collaboration is already quite rich, there are many subjects that would benefit from further examination. The Foundation would benefit from a better understanding of some of these issues. Three areas that would be worth examining further:

1. If the Foundation elects to pursue Option 2, the literature on horizontal management and governance may inform the planning and implementation and evaluation phases of collaboration. Horizontal governance and management involves coordination or support of work across boundaries or organizations, and is a common challenge in the public sector (Lindquist, 2012). It is particularly relevant to organizations working together to address a larger issue or vision where the decision-making structure is non-hierarchical or authoritarian, and therefore, where a traditional top-down approach is not effective (Rocan, 2009). Horizontal governance is complex and carries risk; staff involved in collaboration would benefit from a deep understanding of the systems and processes involved (Rocan, 2009).

2. There are gaps in our understanding of competition between and even within organizations in the nonprofit sector, particularly with respect to fundraising, performance metrics and systemic barriers. The Foundation, and indeed many interview participants, is subject to this challenge. The Foundation would benefit from a better understanding of how to structure individual and organizational performance metrics to achieve its goals, whether those goals are competitive or collaborative.
3. The interviewees selected for this project had decades of experience in or with the nonprofit sector. One interviewee commented that it would be interesting to hear from the next generation of leaders about their thoughts on collaboration, and another commented that the next generation of donors would expect organizations to collaborate or may choose to direct their giving elsewhere. If Foundation aims to engage younger donors and plan for staff succession, it may benefit from understanding the mindsets and values of future leaders.

In conclusion, collaboration within the third sector is increasingly viewed as a solution to challenges facing society and the sector itself (Vernis et al., 2006, p. 70; Blickstead et al., 2008). Yet, it can be extraordinarily complex, involving numerous stakeholders with different motivations and objectives (Blickstead et al., 2008, p. 24; Huxham, 1993, p. 607; Thompson & Perry, 2006, p. 25). If the Foundation aims to engage in successful partnerships, it must be conscious of these complexities and driven enough to work through barriers to achieve a greater vision. It should select partners carefully, build trust, take time to plan, and understand the costs and benefits to all involved. By employing the framework and tools developed through this report (see appendices 1-4), the Foundation will be positioned to do so. It will grow its capacity to make a difference in causes important to its stakeholders.

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APPENDICES

Appendix 1: Framework Tool 1, Internal Assessment Checklist

Subject	Strategic Guidance from Findings	Question
<i>Shared vision</i>	Shared vision needs to exist or be developed, and missions should be complementary. Organizational cultures and values should align.	Does this proposed partnership align with the Foundation's vision, mission and mandate? Do the values and cultures of the organizations align? Is there a shared vision, or will it need to be developed?
<i>Mission</i>	Maintaining focus on mission, and community or beneficiaries, is critical.	What are our goals and objectives? Our partners'?
<i>Mission</i>	Maintaining focus on mission, and community or beneficiaries, is critical.	Would the Foundation's stakeholders (donors, hospital) value/welcome this partnership?
<i>Motivation</i>	Partners should be selected carefully, and their motivations understood.	Why is the Foundation considering this partnership? What are the partners' motivations? Are there environmental pressures, organizational needs, past successes to build on, or potential for collective impact? Is each party motivated enough to be successful? Are these motivations complimentary?
<i>Motivation, mission</i>	Partners should be selected carefully. Organizations that serve complementary functions make the best partners.	Is this a partnership between like organizations (increasing the likelihood of competition) or do the partners complement each other?
<i>Collaborative advantage</i>	Partnerships should bring benefits for all partners and for the greater cause.	Would the Foundation achieve collaborative advantage/ is there a "win-win" or value proposition? What does that look like?
<i>Collaborative advantage</i>	Partnership should bring benefits for all partners and for the greater cause.	Will the collaboration lead to results that are greater than what the Foundation could do individually?
<i>Drivers</i>	Collaboration can bring opportunities to learn. Relationships engender trust.	Is there potential for the Foundation to learn from its partners or expand its network?
<i>Drivers</i>	Strong leadership is critical, the right people should be assigned.	Is there a leader or champion who will drive the collaboration forward? Is there a Foundation representative who can manage the collaboration?
<i>Drivers</i>	Trust is crucial and can be built.	What level of trust exists between the proposed partners? Can trust be actively built?
<i>Drivers</i>	Adequate governance needs to be in place, and should be confirmed at the outset.	Is there clear governance in place? If not, can this be addressed by the people involved in the partnership, or does the required authority lie outside of this

		sphere of influence?
<i>Barriers</i>	If barriers are anticipated and discussed at the outset, there is greater chance to overcome them.	What power dynamics exist, and what impact will they have? Will they put the Foundation at risk? What can the Foundation do to manage them?
<i>Barriers</i>	If barriers are anticipated and discussed at the outset, there is greater chance to overcome them.	What systemic barriers does the Foundation anticipate, and can they be overcome? What would this require? Are these mitigation strategies realistic?
<i>Roles and responsibilities</i>	Ensuring accountability to partners will engender trust and bring further opportunities.	Do we have the capacity to take on this work, now and for the duration of the partnership?
<p><i>This chart is informed by material from Huxham, 1993; Huxham & Vangen, 2005; Kania & Kramer, 2011; Blickstead et al., 2008; Bryson et al., 2006; Thompson & Perry, 2006; Maxwell, 2010; Vernis et al., 2006; Ferguson, 2004; Bryson et al., 2004; Barman, 2002; Huo et al., 2014; & Polonsky et al., 2010.</i></p>		

Appendix 2: Framework Tool 2, Discussion Questions for Planning and Implementation

Item	Findings / Strategic Implications	Discussion Point
<i>Shared vision</i>	Shared vision is critical to success. It must either be in place or be developed.	<ul style="list-style-type: none"> • What is our vision for this initiative? • Do we agree on it? If not, can we develop a shared vision?
<i>Goals and objectives</i>	Missions must be complementary. Clear goals and objectives must be discussed and agreed-upon at the outset. There must be a win-win for each partner.	<ul style="list-style-type: none"> • What does success look like, for the Foundation? For each partner? What are we trying to accomplish? • How will the goals and objectives advance our organizational vision, mission or mandate? • What are we each bringing to the table? Do we complement each other or are we creating a competitive space? • What do we each need from this in order to make it work?
<i>Roles and responsibilities</i>	Leadership is critical, the right leaders must be assigned. Power imbalances should be assessed and mitigated. Partners should agree on who can make what decisions and when.	<ul style="list-style-type: none"> • Who will be responsible for what? • Who will be the leader or champion (for each organization)? What level of authority will they have? • Who will make decisions about what, and when? • What approvals do you need to secure from your organization? What do you need to move them forward? When will the approvals be in place? • [If applicable] Who will communicate with the funder, when, and with what information? Who will see/ approve this information?
<i>Governance</i>	Adequate governance must be in place before proceeding. Partners should understand one another's governance structures and gaps must be formally addressed.	<ul style="list-style-type: none"> • What governance and oversight is in place? Is it adequate? If not, are we able to/ do we have time to establish a governance structure? Who will manage this process?
<i>Building trust</i>	Trust and relationships are critical to success. Trust can be built.	<ul style="list-style-type: none"> • What do we expect of one another (honesty, transparency, commitment, enthusiasm)? Are we each willing to commit to those expectations? • Do we trust one another? • How can we build and foster trust? Is it possible to establish small, early tests or wins?
<i>Communications</i>	Partners should establish regular communications processes and touch points.	<ul style="list-style-type: none"> • How will we ensure we are all making the expected progress? • How will we communicate with each other? When and how often?
<i>Accountability measures</i>	Partners should be transparent with and accountable to one another.	<ul style="list-style-type: none"> • How will we keep each other accountable? • Who is accountable to whom? • Can we build some routine measurements into our plans?
<i>Mitigating barriers</i>	Systemic barriers exist and	<ul style="list-style-type: none"> • What systemic barriers do we anticipate (e.g. flow of

	may constrain activity. These barriers should be discussed and mitigation strategies developed.	<p>funds, performance measurement)? How can we mitigate them?</p> <ul style="list-style-type: none"> • What organizational barriers do we anticipate (e.g. capacity, staff time)? How can we mitigate them? • Will we be competing for donors? How and when will we make decisions about this? • Where does this initiative fall within each organization’s list of priorities? Might anything get in the way? • What happens if one of us encounters an unanticipated issue, or our plans start to derail?
<i>Conflict resolution</i>	Any anticipated conflicts should be discussed at the outset, and conflict resolution strategies put in place.	<ul style="list-style-type: none"> • What problems might arise? How will we resolve disagreements? • What will we do if the partnership falls apart?
<i>Evaluation (of collaboration)</i>	Clear goals and objectives must be discussed and agreed-upon at the outset.	<ul style="list-style-type: none"> • How will we know if our partnership (itself) is successful?
<i>Evaluation (of outcomes) and reporting</i>	Clear goals and objectives must be discussed and agreed-upon at the outset. Partners must agree on what they are measuring and when.	<ul style="list-style-type: none"> • How will we know if our initiative is successful/ we achieve our goals? • How will the outcomes be reported? • Who will report to whom? • Who has the authority to approve the reporting of outcomes, and to which audiences?
<p><i>This chart is informed by material from Huxham, (1993); Huxham & Vangen, 2005; Vernis et al., 2006; Blickstead et al., 2008; Thompson & Perry, 2006; Maxwell, 2010; Strategic Alliance Fund, n.d.; Bryson et al., 2006; Ferguson, 2004; & Kania & Kramer, 2011.</i></p>		

Appendix 3: Framework Tool 3, Template Memorandum of Understanding

Memorandum of Understanding
between
St. Paul’s Hospital Foundation
and
[Insert name of partner organization]
regarding
[name of program or initiative]

This Memorandum of Understanding establishes and documents a [type of partnership] between St. Paul’s Hospital Foundation (hereafter referred to as “SPHF”) and [partner organization] (hereafter referred to as “partner organization”) (together “the Parties,” individually “the Party”).

WHEREAS

- A. The Parties agree to strive, to the best of their ability, to adhere to the commitments described herein.
- B. The Parties, operating under this Memorandum of Understanding, agree to the following terms:
 - 1. **Vision:**
 - a. The Parties agree are working to achieve the following shared vision: [describe]
 - 2. **Mission:**
 - a. The partnership will help to advance the Parties’ organizational missions.
 - i. The mission of SPHF is, “Inspired by the work of St. Paul’s Hospital, we build meaningful relationships so our community can support exceptional patient care and world leading innovation.”
 - ii. The mission of [partner organization] is [insert mission].
 - 3. **Goals:**
 - a. The goals of this partnership are as follows:
 - i. [insert – make sure to include fundraising goal, where relevant]
 - ii. [etc.]
 - 4. **Governance:**
 - a. SPHF is governed by a volunteer Board of Directors charged with legal and fiduciary duties.
 - b. [partner organization] is governed by [describe].
 - c. This partnership will be governed by [describe if different from above].
 - d. The Parties agree that they have consulted their governance bodies, as described above, to the extent required by this partnership.
 - 5. **Roles and responsibilities:**
 - a. Fundraising obligations:

- i. The Parties agree to work together to raise [amount].
 - ii. The Parties will share responsibility as follows:
 - 1. SPHF will work to raise [amount] by [date].
 - 2. [Partner organization] will work to raise [amount] by [date].
 - iii. If either or both Parties are unable to meet these fundraising obligations, they will:
 - 1. Inform the other Party as soon as they are aware of any risk.
 - 2. [add mitigation strategy].
 - b. Leadership:
 - i. The leadership structure for this initiative is [describe – shared, joint, and names of key contacts at each organization].
 - c. Decision-making structure:
 - i. Decisions will be made as follows:
 - 1. SPHF [describe authority]
 - 2. [Partner organization] [describe authority]

6. Prospect management:

- a. The Parties will coordinate activity with prospects as follows:
 - 1. [describe – soliciting individually or jointly; sharing names or not]
- b. Fund management:
 - i. The Parties will manage funds raised as follows:
 - 1. [describe who will hold the funds]
 - 2. [describe flow of funds]
- c. Donor recognition:
 - i. The Parties agree to recognize and acknowledge donors as follows:
 - 1. SPHF will recognize and acknowledge donors in accordance with its Recognition Policy (attached) and practices.
 - 2. Partner organization will [describe]:
 - 3. [describe recognition of donors to this project/ initiative, if different than above].

7. Communications and conflict resolution:

- a. The following individuals have been appointed as key contacts:
 - i. [name, title, organization]
 - ii. [name, title, organization]
- b. These individuals will [meet, discuss, call] to ensure progress [how often]. [These communications will be pre-arranged and scheduled by [organization]].
- c. If a dispute arises [describe mechanism to address].

8. Barriers and mitigation strategies:

- a. [list anticipated barriers and mitigation strategies]

9. Outcomes and reporting:

- a. The anticipated outcomes are as described under Section 3 above.
- b. The outcomes will be measured [how often] ending [when].
- c. The outcomes will be reported to:
 - i. Funders by [who] [when] [how].
 - ii. The public by [who] [when] [how].

- iii. [Other stakeholders] by [who] [when] [how].
- d. When referring to the initiative or outcomes publicly in any way, [who] will be recognized [for what] [how].

C. Term

- a. The term of this Memorandum of Understanding is in effect for a period of [months/ years] and may be extended upon mutual agreement. It will be reviewed [how often] to ensure its continued relevance.
- b. Either party may terminate this agreement with [time] notice [with no penalties/ list penalties].

D. Authorization

On behalf of St. Paul’s Hospital Foundation:

Name

Signature

Date

On behalf of [partner organization]:

Name

Signature

Date

This template MOU is informed by material from Edison Schools Inc. (n.d.); Huxham, (1993); Huxham & Vangen, 2005; Vernis et al., 2006; Blickstead et al., 2008; Thompson & Perry, 2006; Maxwell, 2010; Strategic Alliance Fund, n.d.; Bryson et al., 2006; Ferguson, 2004; & Kania & Kramer, 2011.

Appendix 4: Framework Tool 4, Evaluation Guide

Strategic implication	Question
n/a	<ul style="list-style-type: none"> • What went well?
n/a	<ul style="list-style-type: none"> • What would we do differently next time?
Shared vision and complementary mission	<ul style="list-style-type: none"> • Did this collaboration help us to achieve our vision and mission? Why or why not?
Shared vision and complementary mission	<ul style="list-style-type: none"> • Were our stakeholders (patients, hospital community, donors) pleased with the collaboration? With the results? How do we know this?
Finding the win-win	<ul style="list-style-type: none"> • Did we experience collaborative advantage?
Finding the win-win	<ul style="list-style-type: none"> • Was our organization, its leaders, and staff pleased with the collaboration? With the results? How do we know this?
Focusing on the critical early phase	<ul style="list-style-type: none"> • Did we achieve the goals and objectives set out in our initial agreement? Why or why not? What were the final measurements?
Focusing on the critical early phase	<ul style="list-style-type: none"> • Were the results reported as agreed to in the planning and implementation phase?
Building trust is crucial	<ul style="list-style-type: none"> • Were our partners pleased with the collaboration? With the results? How do we know this?
Building trust is crucial	<ul style="list-style-type: none"> • Would we partner with this/ these organization(s) again? Why or why not?
Overcoming barriers	<ul style="list-style-type: none"> • What barriers did we experience and how would we mitigate them next time?
<p><i>This chart is informed by material from Huxham, 1993; Huxham & Vangen, 2005; Maxwell, 2010; Kania & Kramer, 2011; & Bryson et al., 2006.</i></p>	

Appendix 5: Participant Consent Form.

PARTICIPANT CONSENT FORM

St. Paul's Hospital Foundation: A framework for collaboration with third sector partners

You are invited to participate in a study entitled *St. Paul's Hospital Foundation: A framework for collaboration with third sector partners* that is being conducted by Krista Gerty.

Krista Gerty is a Graduate Student in the School of Public Administration in the Faculty of Human and Social Development at the University of Victoria. She is also an employee of the project client, St. Paul's Hospital Foundation, reporting to Ivone Martins, Chief Development Officer. You may contact Krista if you have further questions by calling her at 778-908-3752 or emailing k.gerty@gmail.com.

As a Graduate Student, I am required to conduct research as part of the requirements for a masters degree in Community Development. It is being conducted under the supervision of Lynne Siemens. You may contact my supervisor at 250-721-8069 or siemensl@uvic.ca.

Purpose and Objectives

This project's purpose is to develop a framework for the St. Paul's Hospital Foundation (SPHF) to apply when encountered with the opportunity or mandate to collaborate with other non-profit organizations. This framework will assist SPHF to determine whether or not to pursue a collaboration and establish a process for developing one.

Research question: What framework can the SPHF use to assess and develop partnerships with other non-profit organizations?

- What principles should the SPHF use to determine if a partnership with another non-profit organization will help it further its mission and vision?
- What steps should the SPHF take in moving forward with a collaborative effort – what steps should be followed to ensure best outcomes?
- What governance gaps might arise, and how can they be addressed?
- How should the collaboration be measured or evaluated?

Importance of this Research

This project is important as its aim is to better facilitate partnerships between St. Paul's Hospital Foundation and other non-profit organizations, and will ideally serve as a model for other organizations.

Participants Selection

You are being asked to participate in this study because you have unique lived experience or professional or academic expertise related to non-profit collaboration. [Where applicable: Your participation was suggested by [name] of St. Paul's Hospital Foundation].

What is involved

If you consent to voluntarily participate in this research, your participation will include a 30 to 45 minute interview scheduled at a time and in a location of your convenience. With your permission, an audio recording and/or written notes will be taken.

Inconvenience

Participation in this study may cause some inconvenience to you, including personal or professional time related to scheduling and participating in the interview. No other inconvenience is anticipated.

Risks

There are no known or anticipated risks to you by participating in this research.

Benefits

The potential benefits of your participation in this research include an opportunity for you to contribute your expertise to the knowledge and practice related to non-profit collaboration. Possible benefits to society include improving the management of collaborative relationships between non-profits. The results may add to the state of knowledge and be useful for other organizations.

Voluntary Participation

Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequences or any explanation. If you do withdraw from the study your data will be destroyed and will not be used.

Anonymity

In terms of protecting your anonymity, your data will be identified through a participant code and not by your name. Any identifying information, such as name, position, or organization, will be removed from electronic and paper files of the data. The final project will not include any identifying information, including name, position, or organization.

If you provide your consent by initialing below, the client (St. Paul's Hospital Foundation) may be informed of your participation in the study. However, data will not be provided to the client; that is, your responses to the interview questions will not be shared with the client.

Confidentiality

Your confidentiality and the confidentiality of the data will be protected by storing digital files on a password-protected computer and by separating all identifying information from the data (i.e. coding the participants' responses and keeping the codes in a locked paper file separate from the computer on which the data is stored).

There may be limits to confidentiality for participants identified through referrals. Your decision whether or to participate will not be disclosed to any non-client individuals making referrals. You may decide to disclose your participation the individual making the referral. You will not be identified by name or organization in the final report. The data will be presented anonymously and in aggregate for each participant group to avoid the possibility of any participants' data being identified.

Dissemination of Results

It is anticipated that the results of this study will be shared with others in the following ways:

- Written and electronic copies provided to St. Paul's Hospital Foundation staff and the UVic School of Public Administration,
- Published online, through UVic, if permission is granted by the client (St. Paul's Hospital Foundation),
- A presentation at the students' final defense, and
- Presentations may be made at conferences or scholarly meetings.

Disposal of Data

Data from this study will be disposed of immediately following the successful defense of the project by destroying electronic files and shredding paper copies.

Contacts

Individuals that may be contacted regarding this study include the graduate student supervisor (see contact information listed at the beginning of this consent form).

In addition, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Human Research Ethics Office at the University of Victoria (250-472-4545 or ethics@uvic.ca).

Your signature below indicates that you understand the above conditions of participation in this study, that you have had the opportunity to have your questions answered by the researchers, and that you consent to participate in this research project.

Name of Participant

Signature

Date

Disclosure of participation

I consent for the client (Ivone Martins, Chief Development Officer, St. Paul's Hospital Foundation) to know that I participated in this study (data will not be provided to the client; that is, your responses to the interview questions will not be shared with the client. The purpose of this disclosure is to provide the client with an opportunity to thank you for your time): _____ (Participant to provide initials)

A copy of this consent will be provided to you, and a copy will be kept by the researcher.

Appendix 6: Interview Questions

Note: due to the semi-structured nature of the interviews, these questions served as starting points for further exploration and are not a comprehensive reflection of the discussions that took place.

Interviewee's background

- How long have you been involved in the non-profit sector? In what capacity?

State of the sector

- In your professional opinion, do you feel the non-profit sector is experiencing an increase in demand for collaboration – or is it decreasing, or staying the same? Why?
- Are there any other related trends you sense or anticipate?

Interviewee's experience with collaboration

Please think of a collaboration you were involved with.

- What lessons/ recommendations would you draw from this experience?
- What would you do differently next time?

[if applicable:]

- What criteria does your organization use, if any, to enter into a collaborative relationship with another non-profit organization?
- What tools does your organization use, if any, to evaluate or measure the success of those partnerships?

Benefits, costs and risks

- In your experience and/or in the examples we just discussed, what benefits do you feel the collaboration brought to your organization and/or to the larger cause?
- In your experience and/or in the examples we just discussed, what costs do you feel the collaboration brought to your organization and/ or to the larger cause? (What about human resources, time, monetary investments?)
- What risks might lack of collaboration pose?

[Partners only] Conflict and competition

- Have you had an experience where there was conflict over funds, donors, public profile or reporting/ claiming of outcomes?
- What recommendations do you have for managing conflict or competition?
- Some suggestions have been made about putting mission ahead of any personal or organizational goals or egos. Have you had an experience where this kind of strategy has been successful?

Process

- What elements do you feel need to be addressed (generally or specific to your organization) in order for a collaboration to go well? (e.g. MOU, shared vision between parties communication, flexibility, application of resources)

Policy

- What management or governance practices do you think would make it more effective for non-profits to collaborate?
- What policy or procedural changes do you think would make it more effective for non-profits to collaborate?
- How can issues around competition (profile, funding) be managed most effectively? [if not already covered, above]

Governance

- In your experience, have you encountered a situation where a collaboration led to an issue of governance – for example, ownership/ accountability for a new entity? How was this addressed? What worked/ what didn't?
- How can partners ensure they're accountable to one another?

Roles

- When would you be willing to put resources against a collaboration?
- Are you willing to bring in other partners?
- What are you or your org willing to formally commit to in a partnership?
- What would you expect from SPHF (or other partners) in a collaboration?

Framework

- In addition to any comments above, are there any suggestions you would like to make for the development of a collaboration framework for SPHF?
- Are there any specific elements that could be included that would make the framework useful for your organization/ the organizations or communities you represent?

Wrap-up:

- Do you feel I've missed anything significant that should be addressed or would be helpful for SPHF or the sector?