Current State Analysis – Final Report
Executive Summary
Acknowledgements

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Executive Summary

Unison Health and Community Services (Unison) is a non-profit, community-based organization that provides health and community services. With four locations, Unison offers core services including primary health care, counselling, health promotion, legal services, housing assistance and adult protective services as well as programs like Pathways to Education and Diabetes Education and Prevention.1

In 2015, Unison will be engaging in strategic planning. In order to ground the planning process, Unison determined that it needed a current state analysis (CSA) of the organization. Nayar Consulting was engaged in September, 2014 to develop the CSA. This report provides an analysis of the data gathered for the CSA. The main audiences for this document include Unison’s Strategic Planning Committee (SPC), staff and Board of Directors.

CSA Goals, Framework & Methodology

The goals of the Unison CSA are to conduct:

1. A detailed analysis of current internal operations for primary health care, health promotion, and community services/development;
2. An external review of services provided in Unison’s catchment area;
3. An analysis of services needs in Unison’s catchment area.

The realization of these three goals will result in recommendations for next steps to define Unison’s future state, and how to achieve it. The CSA assesses organizational performance and capacity against five key areas:

- Adaptive capacity (the organization’s ability to respond to internal/external changes);
- Management capacity (how policies and practices ensure effective and efficient use of organizational resources);
- Technical capacity (ability to deliver on programs and services);
- Leadership capacity (strategic and decision-making capabilities);
- The external environment as an area of inquiry.

The consulting team and SPC developed key questions to support data gathering against these areas, resulting in a CSA Framework used to guide the work.

1 Taken from www.unisonhcs.org
Data gathering for the CSA was carried out from November 2014 – February 2015. The CSA used a mixed methods approach in order to ensure accuracy/validity of data through triangulation analysis. In-depth reviews of over 60 internal and almost 15 external documents were conducted, supplementing qualitative data gathered as follows:

- Key informant interviews with the Senior Leadership Team (five interviews in total);
- Ten focus group with staff (88 participants in total);
- Opportunity for staff to provide confidential, one-one feedback (received from five staff in total);
- Five focus groups with clients and community members (60 participants in total);
- External key informant interviews with partners, funders and community leaders (12 interviews in total).

A scan of available services in Unison’s catchment relative to Unison’s priority populations of interest was also conducted.

**Key Findings**

**Adaptive Capacity**

Unison has been adapting since its inception. It has successfully developed an organizational identity post-merger, achieved accreditation with exemplary standing with Accreditation Canada, and implemented a new medical electronic records system (NOD). Unison has strong adaptive capacity, backed by its funding base, and evidenced by its collaboration across a range of sectors. Supporting the ability to be adaptive are multiple reporting and accountability tools such as a performance scorecard, client risk management data and a public Quality Improvement Plan.

Unison can be described as a learning organization. Partners, clients and community members stated that Unison has a strong ability to respond to the emerging needs of communities it serves. External key informants expressed a desire for Unison to continue to mobilize its resources toward a strong leadership role in community scanning and system-level advocacy.

Planning remains a regular activity at team, program and organizational levels. In general, however, both team-level planning and reporting are practices are inconsistent, making measurement of success across the organization challenging. Key factors in this challenge are different funder reporting requirements and variable middle management capacity. This context can make it difficult to plan and evaluate programs and services within a standard, organization-wide framework.

Key strategic tensions for Unison in terms of its adaptive capacity are:

- Integrating internal planning, evaluation and data management processes versus meeting different funder reporting requirements;
- Mobilizing resources to address community and environmental needs/shifts versus maintaining strong alignment with organizational mission and vision.
Management Capacity

Unison has successfully consolidated its operations across its sites. The organization is ready to consider further integration and standardization, both in terms of internal operations and client care. Staff described accessing information and services across the organization for clients as a challenge. And, while there is some fairly informal collaboration occurring at sites, stronger collaboration between and across sites is desired, tied to integrated care, client outcomes and knowledge-sharing.

Staff described Unison as a committed and caring employer. Staff also expressed a desire for more transparency on how programming and resource allocations decisions are made.

Key strategic tensions for Unison in terms of its management capacity include:

- Creating cross-organization collaboration and alignment of program, services and information versus responding to site- and team-specific context versus managing accountabilities to funders/partners around catchment areas, service provision, etc.;
- Managing scarce/decreasing resources versus delivering high quality services.

Technical Capacity

Internal and external stakeholders perceive the staff at Unison to be highly skilled. An identified area for growth is middle management capacity. This is due to the importance of middle management roles in fostering collaboration, building teams and bridging front line services to broader organizational strategic goals.

Perhaps one of the most significant challenges for the organization at the present time is management of data. Again, multiple reporting and accountability systems play an important role here. Unison does have a solid understanding of primary care clients and how they reflect the demographics of its catchment. As well, client satisfaction is consistently strong for primary care overall. However, what is not known for Unison at present is the typical client “journey” through the organization, in other words:

- What happens if clients come to the organization and could use more than one service? Do they get all of the services that they need? How does that happen? What happens for clients if they don’t get those services from Unison?
- Who is typically coming for services? What do they need? Do they discover other services that they could benefit from once here? How do they discover that? How is that communicated between staff? Sites?

Unison has an opportunity to consider data management strategies in a more strategic context. There is a desire for a more in-depth conversation about exploring ways for data gathering to help tell Unison’s story as it relates to outcomes, health equity, cost effectiveness and funder performance criteria. Relevant staff and leadership suggested that a strong data management strategy may support start-stop-continue decisions about core services and programming, as well as partnership opportunities with other organizations. More importantly, it may allow Unison to develop new and accessible ways for staff to define and gather data that allows for meaningful comparison and integrated analysis. While this may not mean the development of a single, unified data collection system, it could assist in determining what data management
practices could better facilitate integration or connectivity. It could also create more institutional support for current evaluation initiatives. It was strongly felt that any data strategy must be supported by training for managers and relevant staff including continuing to train more staff to do quality improvement, and having staff who can serve as quality improvement leaders.

The key strategic tension for Unison in terms of technical capacity is:

- Multiple accountabilities versus technological challenges versus organizational structure/integration.

Leadership Capacity

Unison’s senior leaders are considered highly effective. They have been successful in navigating the organization down its path after merging, and are poised to harness their ability to demonstrate organizational impact given the right tools and supports. Middle managers are ready to benefit from capacity building that helps front-line staff be the best they can be.

The previous Strategic Plan has seen successful implementation. In particular, staff saw Unison Links as a major success coming out of the Strategic Plan. Unison’s desire and ability to transfer knowledge is highly valued by both internal and external stakeholders. Many staff did not see strong connections to or examples of system change work in their own job experience, and attributed that to the fact that they work on the ground, providing programs and services.

A key theme regarding Unison’s leadership capacity is a desire to better understand from a strategy point of view what the organization is doing and if those activities are the right ones:

“It sounds] as if we know when we’re doing things right, but not sure if we’re doing the right things.” (Unison staff member)

Important elements of this theme include developing a broader understanding of Unison’s organizational outcomes using an equity frame, ensuring effective data gathering to support program evaluation and resource allocation and tailoring services in response to community needs.

Key strategic tensions for Unison in terms of its leadership capacity include:

- Pressure from primary care funders for certain outcomes versus the need to address broad determinants of health;
- Driving strategic and programmatic decision-making based on indicators tied to equity and the social determinants of health versus funder-based health indicators.

External Snapshot

While Unison has a strong understanding of the communities it serves, staff and other participants identified emerging needs and trends that require attention and investment. One of the top needs coming out of the CSA is supports for youth, who make up nearly ¼ of Unison’s current client base. Priorities for youth include mental health supports, sexual health programming, employment supports and general health education:
“Sexual health programming, mental health support [for youth] too – they’re big taboos in our culture.” (Community resident)

This data aligns with Unison’s 2013 Flash Survey which indicated that employment was the 4th highest need (out of the top 10) and youth services was 7th (6th in LH). Mental health supports for youth were also cited as priority needs as part of accreditation (2014). The other top need emerging through the CSA is mental health and addictions services for the adult population.

A number of sector trends are also of note. There are growing requirements to see more clients in shorter periods of time, with an emphasis by the TCLHIN on youth and families facing service barriers, as well as movement towards coordinated care to address clients with complex health needs (which could include people with mental health issues). Strong leadership in HealthLinks is very clearly seen as a critical part of staying strategic in the current LHIN environment. United Way Toronto has prioritized youth in its new Strategic Plan, and the City of Toronto has recast its priority neighbourhoods (now called Neighbourhood Improvement Areas), six of which fall in Unison’s catchment and three that partially fall within the catchment. Given Unison’s reputation and influence, there is an opportunity to position the organization as a leader in providing services against these priorities, as well as provide support to funders to learn about how to measure success and how to support community and system planning.

One of the tools most often used in strategic planning is a SWOR, where data gathered can help point to strengths weaknesses, opportunities and risks to an organization. The data presented in the CSA can be summarized in a SWOR format as seen below:

**Unison’s Strengths:**

- Solid reputation with community groups, partners, funders, and other CHCs as a high-performing organization.
- Demonstrated leadership at a system level – HealthLinks and response to serving people without OHIP or equivalent health coverage.
- Staff satisfaction, ownership of programming and skill level high; senior leaders seen as strategic thinkers.
- Sufficient resources and capacity to generate rich data to inform strategic decision-making, program planning, responses to community needs, and system planning.
- Client satisfaction levels are high; clients and community members trust and value Unison’s presence in the community and view it as responsive to emerging needs (e.g. crisis response).
- Proven success in change management (through merger) and in learning as an organization.
Unison’s Weaknesses/Areas for Growth:

- Major challenges with using data to support client navigation/case management; results in limited data mobilization towards consistent service planning, evaluation and strategic thinking (“out of everything we could be doing – are we focused on doing what we do the best?”).
- Integrated client care needs to be strengthened. Desire for internal dialogue on articulating organization-wide client outcomes and ways to track client’s trajectory through the organization (using an equity frame).
- Lack of framework for internal collaboration; happens inconsistently and informally.
- Perceived lack of transparency in decision-making within organization; partly relates to variability in middle management capacity and style in terms of team building, staff support, approach to collaboration, etc.

Unison’s Opportunities:

- Biggest service provider in the catchment (resources, size and knowledge). Partners, funders and the community look to Unison as an influential leader in terms of collaboration and system change.
- Can build on established reputation by leading/supporting community scanning and development of evidence-informed practice.
- Clearly identified community assets (multicultural makeup of communities) and community needs (youth services, mental health supports, poverty reduction/supports, programs for women, community safety).
- As a consolidated, multi-site organization, Unison is at a point where it can consider a more integrated, standardized approach to program planning and evaluation across sites and teams.
- Significant opportunity to show knowledge and leadership as LHINs and City of Toronto continue to explore ways to frame investment strategies and to create accountability measures that support robust evaluation of community services and health promotion programs.

Unison’s Risks:

- Unison needs to clarify its priority populations/service priorities to maintain its reputation and strength; will risk mission drift otherwise.
- Over time, unless there is more deliberate focus to the organization, the ability to be responsive to community needs and to be strategic will weaken; the ability to tell a cohesive story and show impact will be more difficult.
- Without more integrated planning and evaluation processes, Unison may not be able to meet the increasing demand from funders for outcome-based accountability.

The CSA provides a snapshot of Unison at this point in time. It seeks to assess internal operations, and to review services both provided and needed in Unison’s catchment area. It seeks to provide data in the CSA’s key areas of inquiry (as defined in the CSA Framework) to support Unison to move from where it is today to where it wants to go in the future. The CSA lays the foundation for a robust and exciting strategic planning process for Unison going forward.