Collaboration among nonprofit organizations is an opportunity to share information and resources, reach larger populations, expand programs and services, leverage the comparative strengths of partners and create change more effectively. Particularly in times when needs are growing while available funding dwindles, collaboration can be an innovative approach to building programs with limited resources, one that is increasingly encouraged by funders. However, without a common goal, trusting relationships, and structures for shared decision-making as well as processes for exploring differences between partners, collaboration could hinder effective action and deter participants from pursuing future collaborations.

The Center for Nursing Excellence (CNE)

Issues surrounding healthcare have been at the forefront of national debate, and the lack of quality nursing services is an underlying cause of many problems in the current healthcare system. The nursing workforce is dwindling and aging. The average age of registered nurses in Wisconsin is 47.6 years old and 44% are over the age of 40. This reality comes at a time when health care providers are treating a growing caseload of older adults and patients with chronic illness, groups who are particularly in need of well-trained nurses. One out of eight Wisconsin residents is currently 65 years of age or older, with 2020 estimates increasing to one out of six residents. Additionally, educating the next generation of nursing professionals has become a costly imperative that singular health and education facilities have difficulty bearing individually. It was with these overarching issues in mind that the CNE was developed.

The CNE was created through collaboration between Meriter Hospital (Meriter), a 448 bed community hospital, Edgewood College School of Nursing (Edgewood), a private institution that enrolls over 250 undergraduate and graduate nursing students each year, and St. Mary’s Hospital (St. Mary’s), a 440 bed hospital sponsored by the Franciscan Sisters of Mary.

The program integrates innovative technology to improve the professional development of future, new and experienced nurses. At the CNE, students participate in simulation labs set up as functioning hospital rooms using life-like mannequins programmed to enable students to observe, diagnose and treat.
multiple patient conditions. Students are coached by professionals who facilitate one-on-one and group hands-on education. The lab ensures that students are able to exercise critical thinking skills and practice for a variety of situations without jeopardizing patient safety.

From an Idea to Action

The Emergence of Collaboration

In addition to the initiative of the partner organizations, collaboration on the CNE was made possible by a foundation of dialogue among local nursing programs as well as the help of key supporters. Here are some of the factors that catalyzed collaborative action on the CNE project:

   In 2007, a local philanthropic foundation hosted and facilitated regular discussions among leaders of area nursing programs, leading to the creation of the Madison Nursing Collaborative and strengthening the foundation for collaboration between Meriter Hospital and Edgewood College.

2. Funding at Critical Points.
   In 2008 Edgewood was provided the first grant for the project, a $155,138 grant by the Henry J. Predolin Foundation to purchase three of the mannequins described above. This led to a matching investment of space by Meriter and became a catalyst to jump start the idea into action. The Meriter Foundation also played a catalyzing role with Foundation senior leadership recognizing the potential of the collaboration early on. The fact that the Meriter Foundation staff had never pursued a federal grant didn’t intimidate their willingness to try and try again. After their first unsuccessful application, they succeeded in obtaining two federal grants totaling $587,000. This helped raise awareness system wide for the need for technology-advanced nursing education. The Meriter Foundation also brought in a private donor who gifted $250,000 to St. Mary’s, scaling St. Mary’s position as the third partner of the CNE.

3. Authentic Need for Collaboration.
   The three collaborating organizations shared a common goal which none of the organizations had the resources to achieve individually. St. Mary’s participation is a clear illustration of this need. Having purchased the mannequins, Meriter and Edgewood still lacked resources to build-out a facility. St. Mary’s operated a similarly robust nurse education program and could contribute much needed resources to the collaboration. St. Mary’s was invited as a partner, decided to join the group in 2009 and signed formal collaboration agreements in January 2010.

4. Effective Advocates.
   The Oscar Rennebohm Foundation President, Steve Skolaski, played a key role as a “connector” for the CNE. As a donor who had previously funded all three partner organizations, Skolaski could testify to their track records and was able to engage other funders. This was valuable for advancing the collaboration, particularly during the early months of development. Skolaski also regularly stoked the energy of the collaborative partner organizations during periods when momentum seemed to wane. As a religious organization, St. Mary’s needed to seek different levels of leadership input before finalizing their decision to join the project, which took over a year. During this time, Skolaski continued to call all parties together and encourage updates among them, which kept the collaborative partners engaged with one another in ways that might otherwise have been difficult.

Collaborative Project Planning and Implementation

Once the partners committed to collaboration, the project progressed at an impressive speed. A project manager was hired in April 2009. The next month, the project was awarded a $415,000 federal grant, which required the project to begin in July. Customization of the lab space began in July and was completed in six weeks. By September, the first employees were hired to manage the lab and the first nursing students began classes at the CNE. The partnership was able to achieve this momentum in part because all three partners shared equal representation in the governance structure and invested important resources, including participation of executives and staff, in all aspects of project implementation. Here is a description of how the partners cooperated in key project areas:

Governance. The board of directors elects the CEO and sets the agenda for the work of the corporation as well as functions of the CNE. Two members from each of the
partner organizations are assigned to the board and each organization has one vote.

**Project Management.** The project partners hired a full time project manager before funding had been secured for the position. She worked as a consultant for six months and saw planning through until the first cohort of instructors and students began their training at the CNE. She organized and often chaired subcommittee meetings, served as liaison for facilities development between the project partners and the construction crew, and provided regular project updates to the senior planning team.

**Planning Subcommittees.** Subcommittees were developed to drive planning for key areas. They were each led by the Project Manager or executives and managers of the three partner organizations.

**Curriculum Development.** Each partner devoted time and expertise of faculty and staff to integrate simulation technology into existing curricula.

**Funding.** In addition to providing key staff, including several senior managers from each organization, each partner organization provided a minimum investment of $250,000 in 2009. The partnership also raised about $1.25 million in government, foundation and private funding to start up the project. Direct financial investments will be provided annually by each collaborative partner in the future.

**Project Outcomes**

Some of the outcomes achieved by CNE in the first eight months of operation:

- Employs 1.5 FTEs and has the capacity to serve up to 10 students in each 4-hour session.
- Trained 25 instructors during the first three months of operation, compared to 4-5 instructors trained during the first year as reported by nursing schools with similar programs.
- Hosted 89 lab sessions for 449 nursing students, 280 experienced nurses and 23 newly employed nurses. In evaluations of their experience in the CNE/NSSL, 72% of students rated the experience an “A”, 27% a “B” and 2% a “C”.
- Hosted 150 high school students for tours and discussions on health careers.

**Lessons Learned about Community Collaborations**

**Clearly delegate direct responsibility for advancing key aspects of the project.**

In collaborative projects, it often becomes difficult to identify who has direct responsibility for advancing key deliverables. The CNE team avoided any question about who was driving results by making a temporary yet critical investment in a full time project manager to accomplish this. The project manager was very effective in her role because (1) she had access to and support from all project partners, (2) she made plans to transition her responsibilities back to the project partners to maintain continuity and confidence in the project, and (3) she enjoyed the cooperation of executives and senior managers of the partner organizations, who invested significant time in the project.

**Participating organizational leaders should demonstrate commitment to the project.**

While a deeper volume of staff was involved in advancing the CNE, administrative leaders of all three organizations participated in integral aspects to keep the commitment focused. Some senior managers involved in the effort estimated that between 25-30% of their time was spent on CNE related work during the six months preceding launch of the lab.

**Recognize the importance of catalysts.**

In the case of the CNE, several catalyzing factors worked together to make the collaboration happen, including a foundation of community dialogue, funding at critical moments, an authentic need for collaboration and effective advocates. These were not fortuitous events, but strategic actions taken by individuals who recognized the potential of collaborative action. It is important to create environments, cultivate relationships and make critical investments that can foster collaborations.

**Build and leverage relationships with key advocates of the collaboration.**

The CNE was not only a collaboration among three healthcare organizations. Funders were particularly instrumental partners in this case. In addition to directly providing funding, agents of the Meriter Foundation and
Establish trust among partners.

The hallmark of fully functional collaborative projects lies in the trust that exists between the partners. The three partners in the CNE project established trust in several ways:

- Participating partners described their working dynamic as “agile” and “cooperative”. Even though some of the partner organizations may have been slower to respond to specific decisions, it was recognized by all that it had more to do with the culture of different organizations rather than hesitation in the partnership.
- The partner organizations made firm commitments at critical times, which translated into signing necessary legal documents and bringing resources to the table.
- The history of dialogue among the partners allowed them to build on an existing foundation of trust. Meriter and Edgewood had started discussions around nurse education in 2004. The partner organizations were also engaged in the Madison Nursing Collaborative together. By starting the conversation, even with small projects or informal discussions on common issues of concern, the opportunity to leverage collective assets becomes much more possible.

Further Resources and Reading on Nonprofit Collaboration

- The Foundation Center offers a wealth of resources on nonprofit collaborations, including a database with examples of different collaboration models. [http://foundationcenter.org/gainknowledge/collaboration/](http://foundationcenter.org/gainknowledge/collaboration/)
- This article by Francie Ostrower candidly outlines not only the potentials, but also the pitfalls of partnerships, including lessons learned. [http://www.ssireview.org/articles/entry/the_reality_underneath_the_buzz_of_partnerships](http://www.ssireview.org/articles/entry/the_reality_underneath_the_buzz_of_partnerships)
- This case study by Julie White and Gary Wehlage explains the disparity between theory and practice in community collaboration by analyzing issues that plagued a collaboration around the issues of at-risk youth. [http://www.eric.ed.gov/PDFS/ED364992.pdf](http://www.eric.ed.gov/PDFS/ED364992.pdf)
- Strategic Dynamics by Janice Hirota is a case study of the dynamics of developing, practicing, and refining a collaborative effort between nonprofits to initiate a new program. [http://www.chapinhall.org/research/report/strategic-dynamics](http://www.chapinhall.org/research/report/strategic-dynamics)
- The Collaboration Forum website includes resources for collaboration such as articles, presentations and collaboration stories. [http://www.collaborationslo.org](http://www.collaborationslo.org)
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