



Dear \_\_\_\_\_,

You have been listed as the Institutional/Organizational referee for a 2019-20 Harkness Fellowship Applicant, \_\_\_\_\_. We value tremendously your input in the application process and appreciate your time in writing a letter of reference.

The Commonwealth Fund's Harkness Fellowships in Health Care Policy and Practice provide a unique opportunity for outstanding health services researchers and practitioners from Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, and the United Kingdom to spend up to 12 months in the United States, conducting original research on an issue that is high on the health policy agenda in the U.S. and their home country, working with leading U.S. health policy experts, sharing lessons learned from their home countries, and developing an international network of contacts for policy exchange and collaboration that continues beyond the fellowship experience.

The Fellowship is open to mid-career health professionals committed to improving health policy and practice through research, policy analysis, health services, or clinical leadership and at a stage of professional development where the fellowship experience could have a significant impact on career trajectory.

For more information on the Harkness Fellowships, please see the description below or the 2019-20 Harkness Brochure:

[http://www.commonwealthfund.org/~media/files/fellowships/harkness/harkness\\_fellowship-brochure\\_201920\\_v4.pdf?la=en](http://www.commonwealthfund.org/~media/files/fellowships/harkness/harkness_fellowship-brochure_201920_v4.pdf?la=en)

Please follow the link below to provide an Institutional/Organizational reference for the applicant. You will be asked to upload your letter of reference on stationery with your institutional letterhead. The applicant will not have access to the content of your letter when submitted online. Once submitted, you will not be able to edit the letter of reference.

**All letters must be submitted by the application deadline:**

**Australia and New Zealand: September 4, 2018**

**Canada, France, Germany, the Netherlands, Norway, and the United Kingdom: November 12, 2018**

*Please note, it is allowable to provide a letter of reference for more than one candidate in an application cycle.*

We would appreciate if you would comment on each of the following in your institutional/organizational letter of reference:

1. Please comment on the qualifications of the applicant, their major accomplishments, and the caliber of their work.
2. What do you see as his/her strengths and weaknesses?
3. How would you assess the applicant's ability to undertake the proposed research project?
4. What is the relevance of the applicant's proposed research project to health policy in your country?
5. Please describe the applicant's current appointment and your expectations for his/her career advancement in the next three to five years? In 10 years?
6. How would you evaluate the applicant's potential to be a leader in health care and to influence change? What contribution would you expect that he/she would be capable of making to health care policy and practice?
7. Please describe how you expect the applicant's experiences from participating in the Harkness Fellowship program will benefit your organization. How will you support him/her to do this after returning from the fellowship?

Explain any particular qualifications, experiences or reasons why the applicant should be selected to be a Harkness Fellow in Health Care Policy and Practice. Feel free to provide any other information you believe would be of assistance in evaluating the applicant's qualifications for this fellowship award, his/her potential to be a leader in health care policy and practice, and the potential value of the Harkness Fellowship in Health Care Policy and Practice to his/her career development.

Again, all letters of recommendation must be submitted by the application deadlines.

Many thanks for your time and thoughtful input,

Robin Osborn

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## THE HARKNESS FELLOWSHIPS IN HEALTH CARE POLICY AND PRACTICE

Established by The Commonwealth Fund in 1925, the Harkness Fellowships were modeled after the Rhodes Scholarships, and aim to produce the next generation of health policy leaders in participating countries.

The Harkness Fellowships provide a unique opportunity for mid-career professionals—academic researchers, government policymakers, clinical leaders, hospital and insurance managers, and journalists—from Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, and the United Kingdom, to spend up to 12 months in the United States studying a critical issue on the health policy agenda, working with leading U.S. health policy experts, and gaining in-depth knowledge of not only the U.S. health care system, but also those of Fellows' home countries. The Commonwealth Fund also brings together the full class of Fellows throughout the year to participate in a series of high level policy briefings and leadership seminars with U.S. health care leaders drawn from government, politics, health care organizations, and academia.

The Fund hopes to enrich health policy thinking as Harkness Fellows study how the United States approaches health policy issues, share lessons learned from their home countries, and develop a multinational perspective and network of contacts to facilitate policy exchange and collaboration that continues beyond the fellowship experience.

Once selected, the Fund will provide extensive support to successful Fellows to help them develop and shape their research proposals to better fit the context of the U.S. health system. Through its network of contacts, the Fund will help identify and place Fellows with mentors who are experts in the policy areas to be studied, e.g., at Harvard University, Columbia University, University of California at San Francisco, Johns Hopkins University, Kaiser Permanente, Institute for Healthcare Improvement (IHI), National Institute for Mental Health, and Group Health Cooperative at Puget Sound.

A peer-reviewed journal article or policy report for Health Ministers and other high-level policy audiences is the anticipated product of the fellowship. Harkness Fellows have published their findings in leading journals, including: *Health Affairs*, *Journal of the American Medical Association*, *New England Journal of Medicine*, *Milbank Quarterly*, *BMJ*, *Health Policy*, and *International Journal for Quality in Health Care*.

Building on their fellowship experiences, Harkness Fellows have moved into senior positions within academia, government, and health care delivery organizations, making valuable contributions to health policy and practice in their home countries and in the United States. In addition, Harkness Fellows become part of a strong international network, with opportunities for ongoing cross-national collaborations and research.

Each fellowship provides up to US \$130,000, which covers round-trip airfare to the United States, a living allowance, funds for project-related travel, research, conferences, travel to attend The Commonwealth Fund program of fellowship seminars, health insurance, and U.S. federal and state taxes. A family supplement (i.e., approximately \$60,000 for a partner and two children up to age 18) is also provided to cover airfare, living allowance, and health insurance.

The Harkness Fellowships are co-sponsored and supported by: The French Ministry of Solidarity and Health and Caisse Nationale de 'Assurance Maladie des Travailleurs Salaries (CNAMTS) in France; B. Braun-Stiftung in Germany; The Health Foundation and National Institute for Health Research in the United Kingdom; the Research Council of Norway; and the Canadian Foundation for Healthcare Improvement (CFHI).

The Commonwealth Fund, a private foundation based in New York City, was established in 1918 with the broad charge to enhance the common good. The mission of The Commonwealth Fund is to promote a high performing health care system that achieves better access, improved quality, and greater efficiency, particularly for society's most vulnerable, including low income people, the uninsured, minority Americans, young children, and elderly adults.