

Sydney Children's Hospitals Foundation

Tripling paediatric research funding by changing who decides what gets funded

The organisation

Sydney Children's Hospitals Foundation is one of Australia's largest paediatric research funders, working alongside the Sydney Children's Hospitals Network to direct philanthropic funding into research that shapes the future of children's health. The Foundation operates in an increasingly competitive funding landscape, where the same small group of established researchers tend to win the same kinds of grants through the same kinds of decision processes.

The decision problem

The Foundation's leadership recognised a structural issue. Traditional paediatric research funding decisions are made by expert panels evaluating researcher-led applications against established criteria. The process is rigorous, but the selection patterns are predictable. The researchers who know how to write grant applications win. The research areas that already have momentum get more momentum. Innovative early-stage ideas, especially from researchers who don't fit the standard funding profile, rarely surface at all.

The Foundation wanted to test a fundamentally different approach. Engage donors earlier in the funding decision. Surface ideas that would never reach a traditional panel. Train researchers to pitch their work to non-specialist audiences. And do all of this through a process that was transparent, defensible, and aligned with the Foundation's strategic priorities.

This is a governance design problem before it is a funding problem. The question is not "which projects should we fund." It is "who should be in the room when we decide."

What Wizer did

The Foundation used the Wizer process to redesign how paediatric research funding decisions get made. Researchers pitched their projects through a structured platform where the wider donor and stakeholder community could engage with the ideas — voting, commenting, surfacing the projects that resonated and the ones that didn't. The Wizer process applied the cognitive diversity research of Dr Juliet Bourke and Scott Page in practical form: structurally widen the decision-making group, surface what a small expert panel alone would miss, and use the broader signal as one input into a final, defensible funding decision.

The methodology rests on a specific finding from decision science. When the cognitive composition of a decision-making group is wider than the people making the decision today, the

quality of the decision improves. Not because expertise is unimportant, but because expertise alone produces predictable blind spots. The Wizer process is the operational answer to that finding.

What changed

Tripled the paediatric research funding raised. This was the pilot. Proof of the need.

— The headline outcome

Beyond the headline, the independent evaluation captured stakeholder outcomes that matter for any organisation considering a similar approach to governance redesign.

- 82%** · of researchers said learning how to pitch to donors was the greatest benefit
- 82%** · agreed the program enhanced their ability to communicate with a range of audiences
- 79%** · reported a better understanding of how philanthropy works
- 68%** · agreed the process stimulated innovation in paediatric research
- 94%** · were supportive of the approach
- 65%** · were likely to recommend the program to a peer

The Foundation surfaced research projects that would not have come forward through traditional funding pathways. Researchers who had never pitched to donors learned to do it well. Donors who had never been involved in funding decisions found themselves engaged earlier in the process, with a clearer view of the work they were backing.

Why this matters for health system governance

The Foundation's experience demonstrates a principle that applies across health system governance. When the people making the decision are structurally narrower than the problem the decision is governing, the outcomes are predictable — and predictable in a direction that excludes innovation, dissent, and the perspectives that would have surfaced the missed options.

EHR transformation programs, board funding decisions, executive committees governing multi-year health initiatives — all face the same structural question. Who is in the room. Who is missing. What does that mean for the decisions about to be made.

Decision science gives leaders a way to see this. The Wizer process gives them a way to act on it.

What stakeholders said

It's revolutionising all of our research communication.

— Nicola Stokes, Chief Executive Officer, Sydney Children's Hospitals Foundation

The Wizer process opened our minds to new ways of attracting funding; learning how to pitch ideas; an introduction to how philanthropy works. The benefits to researchers, philanthropists and above all, children's health is something to be proud of and aspire to.

— Research participant

To me, this seems like a more democratic process.

— Foundation board member

I had a wonderful experience and was very impressed by the depth of expertise and the cheerful professionalism of all involved.

— Program participant

wizer.business · Decision Science Platform · Decision Profile Mapping · Communication Intelligence · Live Decision Platform

Built on the research of Dr Juliet Bourke and Scott Page · kylee@wizer.business