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Meeting needs, making changes, improving outcomes

The Tallaght West Childhood Development Initiative (CDI) Process Evaluation Thematic Report No. 2:

Interagency Working and Service Integration in Tallaght West

2014
CHILDHOOD DEVELOPMENT INITIATIVE

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The Tallaght West Childhood Development Initiative (CDI) Process Evaluation Thematic Report No. 2:

Interagency Working and Service Integration in Tallaght West

This report has been authored by the CDI Process Evaluation Team
Child and Family Research Centre,
School of Political Science and Sociology,
NUI Galway

The team comprises
Dr. John Canavan, Mr. Liam Coen, Ms. Jessica Ozan and Prof. Chris Curtin.

The team also owes its gratitude to the project's Expert Advisor,
Prof. Rob Chaskin,
Chapin Hall,
University of Chicago.

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The team comprises:

Dr. John Canavan, Mr. Liam Coen, Ms. Jessica Ozan and Professor Chris Curtin

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Professor Rob Chaskin, Chapin Hall, University of Chicago.

The authors are responsible for the choice and presentation of views expressed in this report and for opinions expressed herein, which are not necessarily those of UNESCO and do not commit the Organisation.

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Childhood Development Initiative Ltd.
St. Mark's Youth and Family Centre
Cookstown Lane
Fettercairn
Tallaght
Dublin 24
Tel: +353 (0)1 494 0030
Fax: +353 (0)1 462 7329
Email: info@twcdi.ie
Web: www.twcdi.ie

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Chapter 1: Introduction

1.1 Introduction

Children are now firmly at the centre of a variety of legislative initiatives, and statutory and voluntary services working for families. Legislation in recent years has spoken about the 'paramountcy' of the child, emphasising participation, and highlighting the need to work in collaboration towards the achievement of better outcomes for children and young people. Indeed, this collaborative spirit has witnessed new partnerships between the Irish State and philanthropic bodies in developing and promoting new responses and services to the needs of children and families. One such collaboration, between the Office of the Minister for Children and Youth Affairs (OMCYA) and the Atlantic Philanthropies Ireland (AP) has witnessed the development of three specific programmes of work under the Prevention and Primary Intervention Programme (PEIP). These programmes are the Tallaght West Childhood Development Initiative (CDI); Young Ballymun; and Preparing for Life. This report is the second of five thematic-based, process evaluation reports of the first of these programmes - The Tallaght West Childhood Development Initiative.

1.2 Background to Tallaght West Childhood Development Initiative

In 2003 a number of people were brought together in Tallaght West with a view to developing a strategy to improve outcomes for children and young people in the locality. Eventually known as the Tallaght West Childhood Development Initiative (CDI), and with initial seed funding from the AP Ireland and the Katherine Howard Foundation, the group undertook a process of consultation to inform the development of the strategy. Alongside this, a series of research papers were published throughout 2005 to inform the strategising process. In October 2005, the 10 year strategy for CDI entitled *A Place for Children: Tallaght West* was launched. It is aimed at improving the health, safety, learning and overall wellbeing of children in the area and increase their sense of belonging to the locality.

A specific programme of work was developed subsequent to the launch of the strategy, and currently CDI is offering (through its staff working with commissioned organisations and community representatives) a number of services to the people of Tallaght West. These are:

- The Early Childhood Care and Education (ECCE) service;
- The after-school service to promote literacy ('Doodle Den');
- The after-school service to promote pro-social behaviour ('Mate-Tricks');
- The 'Healthy Schools' programme;
- The Community Safety Initiative;
- Quality Enhancement Programme (QEP).

In addition, the strategy and subsequent activities by CDI emphasise the importance of evaluation and shared learning about its services. As part of its work it has launched an expansive evaluation programme of all its services and the Initiative itself.

1.3 Background to the Evaluation

In Winter 2008 the Child and Family Research Centre (CFRC) was contracted for a three year period to undertake the Process Evaluation of CDI. The full details of the evaluation have been outlined in the first report. This report is the second in a series of five thematic reports relating to the evaluation. The complete list of thematic reports is as follows:

1. Review of the Origins and Strategy Development of CDI;
2. Working Together and Service Integration aspects of CDI;
3. CDI as a Community-Led Initiative;
4. CDI Experience Impacting on Training and Support of Managers and Practitioners;
5. CDI, Sustainability, and Informing Government Thinking and Policy Making.

1.4 Report Two: Working Together and Service Integration

This second report begins the documentation and evaluation process regarding CDI's work to stimulate, enhance and strengthen relationships between organisations and service integration in the area of Tallaght West and, indeed where appropriate, beyond. As outlined in the original tender application and agreed evaluation plan, the main questions to be addressed by the evaluation are as follows:

1. What inter-agency model best describes the relationship between CDI and other organisations in the locality?
2. What model underpinned the integration of services in the locality?
3. What are the views of interagency managers regarding their experience of working together and integrating services?
4. What is the level of change regarding the integration of services and organisations working together?
5. What are the experience of children and families in the area accessing services?

The CDI strategy seeks to undertake a number of activities in relation to 'working together' and integrating service provision. The first report's literature review highlights that, by their nature, strategies are living things (as the CDI strategy itself identifies) and thus are subject to change dependent on a number of factors, including the environment they are to be implemented in. The evaluation team appreciates that situations may have altered since the development of strategy. With this in mind, this report is guided by the first three questions of the evaluation outlined above. Hence, the purpose of this initial work is as follows:

1. To ascertain the extent to which working together and service integration are features of the work of organisations in Tallaght West so as to provide baseline data with which changes in interagency collaboration and service integration can be assessed in the second and third phases work relating to this theme;
2. To characterise what CDI does to promote organisations working together and service integration in Tallaght West, and to begin developing a framework which CDI can utilise to define its own work and remit in fostering further organisational interaction and service integration.

1.5 Methodology for Report Two

As with all reports of this evaluation, the research team adopted a mixed-methods approach. Numerous definitions of mixed method approaches abound (Johnson et al 2007). For this report, we take Creswell and Clark's (2007, p5) definition that mixed-methods as a method "focuses on collecting, analyzing and mixing both quantitative and qualitative data in a single study or series of studies. Its central premise is that the use of quantitative and qualitative approaches in combination provides a better understanding of research problems than either approach alone." We address each particular method below:

Literature Review

A wide ranging literature review was undertaken on the themes of interagency working and service integration. Both phrases have come to prominence, generally in terms of the way governments seek both statutory organisations to interact with each other, and with third sector or community and voluntary organisations. Both terms have particular resonance in the area of child and family services with the advance of perspectives of the 'whole child' approach and the 'new governance' of health, education and social care services. The literature review serves two purposes: to provide important contextual data by which the activities of individuals and organisations on the ground can be assessed against, offering a framework by which the primary data generated for this work can be analysed; and to assist CDI in framing its activities towards working together and service integration.

Questionnaire

Drawing on the literature, and the CFRC's experience in developing frameworks for joint planning processes, a questionnaire was developed. The team decided to use the questionnaire to ascertain the extent of interagency working at the strategic level. This questionnaire was developed and then piloted with MA Family Support students (N = 26) in NUI Galway. These students come from a variety of different organisations working with children and families and occupy managerial or semi-managerial roles in their organisations. Once refined, the evaluation team adopted a three strand, purposive sampling approach to identifying suitable candidates to send the survey to:

- Any individual identified in the CDI database as being a manager, director, coordinator, principal, chairperson or other similar position was included in the email shot for the survey. This approach yielded 106 potential respondents. However, on each occasion the survey or a reminder was sent (four in total), nine addresses bounced the email back as undeliverable, leaving a potential response number of 97.
- Secondly, organisations that were familiar to the CFRC but not on the mailing list were included in the mail shot;
- Finally, organisations were identified through the online site of the Tallaght Drugs Task Force were included. In the latter two cases the emails were directed towards managers or equivalent persons in each organisation. In total, these latter two approaches yielded 27 new contacts.

In total, **133** individuals were emailed with a cover letter and link to the survey. The survey was hosted via a professional account on the online survey hosting site, SurveyMonkey (www.surveymonkey.com). In the cover letter participants were informed about the study, the survey specifically – its aims and content – and informed that their participation was voluntary. All respondents were sent a reminder every week and the survey was closed after one month. The response rate for the survey was 22.55% (30 respondents). However, it should be noted that some respondents did not complete the entire survey.

The evaluation team is disappointed with the response rate received for the survey. Despite the energy used to persuade potential respondents to participate, the response rate was small, even considering the relatively small number in the sample. Although published literature on response rates for online surveys indicate that 22.55% is not an 'outlier' (see Shih and Fan 2008; Braun Hamilton 2009) it is nevertheless disappointing. The evaluation team recognises that ascertaining the extent of interagency working and service integration is key to the work and future planning of CDI. Thus, it will discuss and identify, with CDI staff, alternative methodologies to generate information relating to this theme for both the evaluation and CDI's future use.

Findings from the survey form the basis of chapter five.

Documentary analysis

Documentary analysis was undertaken of a range of CDI documents. This was undertaken in two phases

- Phase one involved examining minutes of meetings of certain CDI structures – the Implementation Support Group, the CDI Board, CDI team meetings - as well as other internal CDI documents (individual action/work plans), and publicly available documents. In examining these documents for this work, thematic analysis was involved. Terms relating to the themes of interorganisational working and service integration were identified as important markers to be noted. Thus, the evaluation team paid particular attention to terms such as collaboration, partnership working, working together, leadership, organisations, attendance, agreement, decision and action;
- Upon discussion with CDI in March 2010, it was decided to examine the CDI services in greater detail. This involved examining a new, second set of documents which were provided to the evaluation team. This set amounted to over 4,000 documents (ranging in size from one to forty pages) in various folders and sub-folders. The process team consulted with CDI regarding the use of a hierarchy on these documents so as to identify and include the most significant documents for the process evaluation. In agreement with CDI, the following categories of documents were examined:
    - CEO Board reports;
    - Team Meeting minutes
    - Documents pertaining to Governance mechanisms – ISG and Board meeting minutes;
    - Funders' Reports;
    - Service – related documentation. A sub-hierarchy was imposed here. Governance documents (e.g. minutes of steering committees, managers meetings, those documents outlining the service aims, description, operation, key components). In the case of one service (CSI) the process team was advised to contact the CSI evaluation team directly to get the best guidance on which documents to examine. Furthermore, the process team met with the CSI evaluation Principal Investigator and researcher to discuss

the CSI programme in its entirety so as to aid the identification of interorganisational relationships in the governance and operation of the service.

Documentary analysis forms the basis of much of the content of chapters three and four.

Interviews

Interviews were conducted in two phases. The first phase involved a wide ranging semi-structured interview with CDI staff on its work relating to working together and service integration. Three further groups of potential interviewees were identified for the research:

- Members of the Implementation Support Group. Email invitations were sent to all sixteen members of the ISG for whom email addresses were provided to the evaluation team. In order to overcome any potential for burden, those who participated in the first phase of research (strategy development and the origins of CDI) were asked not to respond to the email. This left a potential sample of thirteen. Three ISG members responded to the email invitation, despite two reminders being sent. Semi-structured interviews were conducted with these three ISG respondents;
- Those who completed the online survey were invited to self-select for follow up interview. Out of 30 respondents, three self-selected for follow up interview;
- As a method of gathering process data from each of the service evaluations in lieu of the process data template[1] being completed by each outcome evaluation team, each principal investigator was requested to identify one key informant from each of the services who would provide the process team with an opportunity to begin exploring each of the services individually. Each outcome evaluation team supplied one name and contact details, whom the process team interviewed. In the case of the ECCE evaluation, five names were identified. The process team randomly picked one name and requested an interview with them. There were five service interviews in total.

After discussions with CDI in March 2010, and as a way of gathering more specific information relating to the services, the process team agreed to hold a focus group with CDI staff and follow up semi-structured interviews with five CDI staff pertaining to the operation of the services, and specifically the interagency and service integration aspects thereof, and the training and support elements of their work.

Findings from interviews form the basis of chapters three and four. Specifically, findings from the interviews with CDI, ISG members and those who self-selected for interview form the basis of chapter three. Findings from interviews with CDI pertaining to the services and the five service respondents form the basis of chapter four.

Observations

An ethnographic approach was taken to observations of CDI meetings and events. Initially, unstructured observation of a variety of meetings was undertaken as part of the overall work schedule for the evaluation for the first year. The team was of the view that unstructured observation would provide the most flexible approach to familiarising itself with the numerous workings of the Initiative and allow it to begin to identify particular themes in the second and third years of the evaluation. The evaluation team attended the meetings, sometimes in pairs, and other times singularly. The researchers were overtly present in all settings, and mostly took a participant – as – observer role (Bryman 2009). Observation was continuous, with jotted notes being made during observations. After each meeting where members of the evaluation team attended together, each would reflect on their observations and notes, and discuss key occurrences. Where a team member attended on their own, more detailed notes were written up immediately afterwards, and discussed with another team member at a later date.

[1] The process evaluation team, in conjunction with CDI and the other evaluation teams, developed a template to aid the furnishing of process data from the outcome evaluations to the process evaluation. Initially, this template covered three of the themes of the process evaluation – working together and service integration, training and support, and community engagement – as well as the three domains concerning the evaluation – utilisation, organisation and fidelity. After some discussions, the three themes were dropped and the outcomes teams agreed to provide data on the three domains. At time of writing, data from this template has yet to be provided to the process team.

Data Analysis

Data analysis was undertaken in a number of different ways. The survey data was managed and analysed using SPSS, while qualitative data was analysed using the qualitative data management and analysis package Nvivo. Nvivo permits the development of nodes and sub-nodes as data is entered, managed and analysed, thus creating a comprehensive list of key themes emerging.

Unstructured reading of documents was initially undertaken to so as to allow the team to familiarise themselves with the breadth and content of them. Following this, each document was re-read to identify a number of themes, in addition to those themes pertaining to the report itself (working together and service integration). These themes include diversity (of organisations), governance, delivery, wider involvement (of other organisations), CDI's role, and staff involvement. Observation notes were subjected to the schedule emerging from documentary analysis. Regarding interviews, a number of questions specifically relating to working together and service integration were asked in each interview. The interviews were semi-structured and thus it was more straightforward to thematically group the data emerging from them. Nevertheless, the transcripts were initially sifted to identify common themes across all interviews before they were coded to ensure systematic analysis.

Data Sources

Method	Numbers
Observation	54 meetings, events.
Documentary Analysis	417 documents
Survey	30/133 potential respondents
Interviews	ISG: 3/13 sought Services: 5/5 sought Self-Selected respondents: 3/30 potential interviewees. CDI 6/6 sought

1.6 Layout of the Report

Following this introduction, Chapter Two contains a detailed literature review on working together and service integration and highlights the key themes emerging from it. Chapter Three details CDI's structure and external activities as they relate to working together and service integration Specifically, this involves the range of activities CDI undertakes in the broadest sense which promotes working together and service integration, as well as its governance mechanisms. Interview data regarding these two levels of CDI activity is presented here also. Chapter Four details the CDI services. Interview data relating to the services is presented here also. Chapter Five presents the findings of the survey. Chapter Six contains a discussion of the findings. Chapter Seven concludes the report.

Chapter 2:
Literature Review

2.1 Introduction

The strategy *A Place for Children: Tallaght West* outlines ten outcomes for children which CDI aims to achieve over the course of existence. In so doing it identifies a number of activities which, when implemented, will aid in the achievement of these outcomes. Two particular activities are important here: working together to improve quality of existing provision; and integrating services in child and family centres. The significance of organisations working together is evident in the document, as well as in the work which preceded its publication. The preparation of an interagency briefing paper, highlighting instances of working together in Ireland, issues to be considered when establishing structures to foster working together and elements which foster good working together, is reflective of its central place in the envisaged implementation process for the strategy.

However, the literature on working together is challenging. It suggests different ways in which working together can be conceptualised, identifies a multiplicity of arrangements which could be termed as working together, deploys a range of terms in an attempt to distinguish between different forms of working together, and proposes both similar and competing methods of how to undertake working together. What is notable in the literature is the way in which particular terms are used to imply both similar and different working together enterprises. One author's 'collaboration' is another's 'coordination,' one's 'partnership' is another's 'integration.' Where there is more convergence is in the identification of the benefits and challenges which can accrue from working together, and in the factors which contribute to the process of working together.

The focus of this chapter, therefore, is to provide an overview of the literature on working together. The second section of this chapter addresses the issue of terminology, outlining what this study's working definitions are and imply. The chapter then proceeds to discuss the emergence of working together as an approach to combating social problems. The fourth section introduces a number of common characteristics extant in the literature on working together before referring to the characteristics of different models detailed in the academic, practice and grey literature. These models are expanded on in the appendix one. Following from this, the chapter progresses to identify the benefits and challenges identified in the literature on working together and proposes a set of factors necessary to facilitate it. The next section specifically discusses the concept of service integration as a distinct form of working together, and identifies the more limited competing definitions of it in the literature. A summary of the key elements of working together – including facilitators, barriers and reasons for undertaking it – is then presented in tabular form. Finally, the chapter concludes by drawing together elements of a number of different models identified in the literature so as to develop synthesised continua against which the work of CDI in promoting working together, and the extent of that work, can be preliminarily assessed.

2.2 Terminology and Working Definition of this Study

Much of the literature on working together and related terms can serve to obfuscate rather than illuminate. Various terms are used which can mean similar or different scenarios: coordination, collaboration, cooperation, joint ventures, joint planning, integrated planning and partnership are just a few of the different terms found. The issue of the level at which such activity occurs is also important. While some authors do not make any distinction between levels of activity, others (notably Frost 2005; Percy-Smith 2005; Atkinson 2002) are clear regarding the utility of differentiating between strategic level activities involving decision making by middle and senior managers of organisations, and those activities 'on the ground' which are undertaken with and for service users.

Using this strategic-service distinction, and building on the objectives of the CDI strategy of fostering 'working together' and 'integrating services in child and family centres and schools,' this study adopts the term Working Together to cover the entire range of activities which are covered in the literature. Emanating from this literature, the study distinguishes between strategic level and service-level instances of organisations working together. Thus, the term Interagency Working is used to denote all those forms of working together which do not occur at the service level, but rather involve strategic or high-level activities. The use of such a term is not to oversimplify the wide range of scenarios in the literature which could be characterised as some form of interagency working, but rather to provide some clarity for the reader regarding what is being referred to and implied. The study uses the term Service Integration to denote all those activities which occur between organisations at the frontline in working directly with service users. Thus, we envisage service integration as something which interagency working leads to, it is an outcome of strategic level activity.

2.3 Origins of Working Together as relating to Children and Young People

Contemporary child welfare is increasingly moving towards two major trends which are intimately connected: integrated, multi-professional working and outcome-focused services for children (Frost and Parton, 2009, cited in Frost and Stein, 2009). The first projects, such as the War on Poverty and Model Cities, appeared in the United States in the 1960s. These pilot projects sought to improve services for children and families by coordinating service delivery (Page, 2003). Clark (2002, cited in Gray, 2002) refers to initiatives in Britain dating back to 1968. Nevertheless, concerns about co-ordination and co-operation appear to go back to the origins of British child welfare. The death of seven year old Maria Colwell in 1973 effectively introduced the modern era of working together in the British child protection practice. The report into her death led to a focus on how front-line professionals failed to work together effectively. The reforms that followed developed the early forms of local managerial co-ordination, area review committees and the child protection register. A form of partnership working mandated by law or regulation was introduced through the Children Act 1989 (Frost, 2005).

Organisations, including child welfare organisations, had to change towards the end of the twentieth century in response to the challenges of globalisation, the expansion of the information society and the emphasis on risk and risk management. Services were criticised for poor responsiveness, duplication and fragmentation (Milbourne, 2005). Organisations had to become simultaneously more flexible, more responsive, more accountable and more efficient. One of the results is the shift towards integrated or "joined-up" working (Frost and Parton, 2009, cited in Frost and Stein, 2009).

Increasingly governments and states were recognizing the interrelated nature of child welfare issues and advocating "joined-up" policies that would produce a more coherent response from public services (Milbourne, 2005). The term "joined up" thinking is clearly associated in the UK with the New Labour government elected in 1997. "Joined-up" work refers to services that are streamlined and co-ordinated so as to address and eradicate gaps and overlaps in service provision (Frost, 2005; Milbourne, 2005).

On an international level, various documents support organisations 'working together' and integrating services. For example, in England the Green Paper *Every Child Matters* (2003, cited in Horwath and Morrison, 2007) and in Scotland, *For Scotland's Children* (Scottish Executive, 2001, cited in Horwath and Morrison, 2007) both support service integration as a way of promoting better outcomes for children. In the USA formal collaboration, often politically mandated, has influenced the development of child welfare programmes for the past ten years. In Australia, the state of Victoria has the *Strengthening Families* programme which advocates network coordination (Horwath and Morrison, 2007). In Ireland, north and south, policy documents contain concrete expressions of support for integrated planning in policy development and service delivery. In Northern Ireland, the current document governing policy and service integration in relation to children is *Our Children and Young People – Our pledge: a Ten Year Strategy for Children and Young People in Northern Ireland 2006-2016*. The Children's Services Planning process carries out the integrated planning of services for children and young people and aims to promote high level interagency strategic planning of services.

In the Republic of Ireland, the latest partnership agreement, *Towards 2016*, emphasises the role of the Office of the Minister for Children in overseeing a cross-departmental team which will seek to develop models of best practice for service integration. At local level, the state has committed to the achievement of co-ordinated and integrated services for children by establishing Children's Services Committee's as part of the existing local authority structures. The National Children's Strategy (2000) also expresses a commitment to coordinate services for children while the *Agenda for Children's Services: A policy handbook* (2007, 2) "sets out the strategic direction and key goals of public policy in relation to children's health and social services in Ireland" (CFRC/CAWT, 2008). These developments seek to build on the experience of interagency and intersectoral arrangements of the past, particularly at the local level, where a variety of initiatives have sought to improve both local social and economic development and promote and improve greater coordination in service provision. Examples of the latter of these include the third EU Poverty Programme, the Community Development Programmes and the Integrated Services Initiative (ISI) (Keyes 2003). This latter programme was an initiative set up in the mid-1990s through the Combat Poverty Agency to foster the development of locally-based networks to formulate an integrated response to educational disadvantage in four areas, including Killinarden in Tallaght. The ISI network in each location included representatives from education and youth sectors, area partnerships, community groups and other statutory organisations (Cullen, 1997). Indeed, the adoption of 'social partnership' more generally at a local level through

the 1990s led to calls by some for its extension to the area of children's services, almost ten years before the establishment of the Children's Services Committees (Cullen 1998).

While the vast majority of policy-makers, service managers and practitioners may recognise at least some degree of integrated working as contributing to positive outcomes for children (Canavan et al, 2009), some researchers argue that the shift towards increasing co-ordination of services is not to be supported as it increases the surveillance and control over families (Frost, 2005). Some researchers argue that co-ordination has a negative effect on service quality and no effect on outcomes (Glisson and Hemmelgarn, 1998, cited in Frost, 2005).

2.4 Working Together at the Strategic Level - Models of Interagency Working

Despite the growth in terminology relating to interagency working there has been little by way of clarity regarding what each means and, perhaps more importantly, about what distinguishes them from each other. Percy-Smith, in writing about strategic level activity (2005, p24-5), has attempted to provide some definitional clarity regarding the various terms associated with the phrase 'partnership.' In doing so, however, she potentially adds to the confusion by adopting the term 'partnership' as the broad umbrella term under which all others come, with partnership itself possibly coming under a broader church of 'holistic governance.' Furthermore, the context which is ascribed to each term is not so clearly delineated. Percy-Smith is clearer about the numerous models and instances of 'partnership' working which abound in the academic, practice and 'grey' literature. She identifies a number of common characteristics (2006, p316):

- The way of working involves two or more organisations;
- These organisations retain their own separate identities (i.e. this is not integration);
- The relationship between the organisations is not that of contractor to provider;
- There is some kind of agreement between the organisations to work together in pursuit of some common aim;
- This aim could not be achieved, or is unlikely to be achieved, by any one organisation working alone;
- Relationships are formalised and are expressed through an organisational structure and the planning, implementation and review of an agreed programme of work.

Robinson et al (2008) outline that interagency working can be mapped along a variety of dimensions, such as the extent of engagement and integration of organisations (either separately or together), the extent of communication, the extent of joint planning and the extent of sustainability. A number of models which align with both the extent of engagement and the extent of integration are presented in appendix one. Descriptors of the various forms of interagency working refer to these two dimensions primarily, but as many authors do not use this typology, descriptors associated with other types are included in the narrative also. The models featured are developed by various authors from observations of interagency working in a variety of settings, including children and family services, local government, community planning and broader state-third sector relationships.

In reviewing the literature on this theme, and specifically the models which are outlined in the appendix, there is as much which unites different authors regarding the thrust and extent of interagency working as divides them. Many describe broadly similar characteristics of what could be termed the less integrative forms of interagency working. Meeting other professionals from within one's own agency and elsewhere, networking and sharing expertise tend to dominate these less integrative forms. Many authors describe accounts of 'closer collaboration' or a greater degree of organisational integration (usually measured by loss or encroachment of organisational autonomy) as they progress up the levels. Yet, they diverge in their use of terms. As can be seen in the appendix, different terms are used interchangeably to describe similar and completely different situations. In developing our own continuum of interagency working for this study, we return towards the end of this chapter to a discussion of some of these models and terms.

2.5 Service Integration - Working Together on the Ground for Service Users

Waldfogel (1997), in a seminal article on the new wave of service integration in the United States, highlights that its practice is only twenty five years old, but its origins, like interagency working, can be dated to the 19th century and in this case the settlements of the US. While service integration is often described as the highest level of interagency work in the literature, O'Looney (1997, cited in Gray, 2002) highlights the distinction between collaboration and service integration. The confusion over terminology sometimes masks confusion in the rationale behind the impetus for change. As O'Looney (1997, cited in Gray, 2002:8) explains: "Although in common usage there is considerable overlap in these terms, analytically speaking, collaboration refers to partnership formation that is believed to bring about change, while service integration refers to specific changes believed to make the system more efficient, effective, and comprehensive."

While not quite as multifaceted as interagency working (and acknowledging that some contributors view it as part of one large continuum of interagency working) service integration is not exactly a clear cut phenomenon. Brown and White (2005) underline the difficulties in the language around integration. Just like terms associated with interagency working, integration means different things to different people. Percy-Smith (2005) defines integration as "agencies working together within a single, often new, organisational structure". The Integrated Care Network's (2004, cited in Brown and White, 2005) definition emphasises the legal independency of agencies: "a single system of service planning and/or provision put in place and managed together by partners who nevertheless remain legally independent". Integration is differentiated from partnership but a partnership is needed to create an integrated system (Brown and White, 2005). Brown and White (2005) highlight the use of a continuum in the literature from organisations being autonomous in their work to integrated working, with coordination somewhere in the middle. This point is somewhat echoed by Agranoff (1991), who argues that while there are activities which happen at the strategic level which will impact at the operational level, the need of clients should be ultimately met at the ground level, with continuua of services being developed through the creation of various systemic linkages between service providers.

Ultimately, service integration is about what clients experience and receive on the ground. It is "streamlined and simplified client access to a wide range of benefits and services that bridge traditional program (sic) domains" (Hagan, 2003, p6). Park and Turnbull (2003, p50) regard service integration as "a systemic effort to provide appropriate and harmonised services to young children and their families and collaborative partnership between families and professionals, among professionals, and among agencies that are formed in the process of enhancing child and family outcomes". Service integration is also perceived as a response to parents that are often confused about what support they can draw on (Milbourne, 2005).

For the OECD, service integration refers to ways of organising the delivery of services to people at local level. It is a process aimed at developing an integrated framework within which ongoing programmes can be rationalised and enriched to do a better job of making services available within existing commitments and resources (OECD, 1996). The goal or outcome of service integration efforts are towards providing coordinated care: the client's experience of services as easy to access, seamless with respect to the interfaces between different services, and tailored to their needs (King and Meyer, 2005). Hagan et al (1995) argue that service integration serves a number of functions:

- Primarily, to connect previously unconnected services;
- To overturn past practice, policy and bureaucracy;
- To create mechanisms which work to promote and sustain integrative strategies
- And to change relationships for and between people and institutions.

Approaches to integrating services can be client-focussed, programme-focussed, policy-focussed and organisationally focussed (Hagan et al, 1995). Alternatively, Miller and McNicholl (2003) identify that service integration can occur at the level of the individual service user, at the service network level, and at the whole system level. Integrated services are characterised by a unified management system, pooled funds, common governance, whole systems approach to training, information and finance, single assessments and shared targets (Hogan and Murphy, 2002; Miller and McNicholl, 2003; Roaf, 2002; Waldfogel, 1997, cited in Horwath and Morrison, 2007). Integrated services have an array of perspectives that range from integration of electronic services to integration for better policy co-ordination, integration for better meet

client demand and integration to cut costs by sharing corporate services (State Services Commission, 1999, cited in Gray, 2002). Knitzer (1997) identifies five value orientations repeatedly identified in the literature on service integration: a strong emphasis on the family, a call for cross-system collaboration, a commitment to services grounded in a community-based context, a commitment to "cultural competence" (i.e. delivering services in a way that is respectful of the cultural values and traditions that families bring with them), and the commitment to link service integration efforts to concrete outcomes and positive change in the lives of children and families.

Models of service integration are relative few in comparison to strategic level interagency working. Keast et al (2007) highlight that much of the literature has been focussed on 'interorganisational coordination' (and variants thereof) rather than the experiences of service users. As highlighted above, service integration and service coordination are often used interchangeably (King and Meyer, 2005; Park and Turnbull, 2003). Service coordination has been viewed as a systematic process for assisting family members in obtaining services and resources they need (Weil and Karls, 1989, cited in Park and Turnbull, 2003). Over time, a more sophisticated, intense, and formal partnership – service integration – emerges. Service integration is defined as "a process by which two or more entities establish linkages for the purpose of improving outcomes for people" (Konrad, 1996, p6, cited in Park and Turnbull, 2003). This process takes place through solving problems of service fragmentation as well as the lack of an exact match between needs of children and families and intervention services (Kahn and Kamerman, 1992, cited in Park and Turnbull, 2003).

Park and Turnbull (2003) outline the more frequent use of the term service coordination in the literature on early intervention although service integration is the more recently introduced term. King and Meyer (2005, p478) explain that "service coordination" has become an all-encompassing term, which may be part of its appeal, and has been used to refer to a variety of philosophical, structural and procedural aspects of service provision. They propose that the provision of coordinated care needs to be conceptualised in terms of the "functions and activities involved in the service delivery process". In fact, many definitions consider service coordination to be a process rather than a structure or outcome (Austin, 1983, Fields et al., 1991, Smith, 1994, cited in King and Meyer, 2005). King and Meyer suggest that it is fundamental to distinguish between what many clients want (coordination as a support enabling them to obtain the services needed) and what organisations, services sectors, and systems work hard to provide (comprehensive and integrated sets of easily accessible services).

Miller and McNicholl (2003) identify different degrees of service integration:

- Degree 1: – Signposting and Coordination – each service is aware of what other services in a particular locality do and are able to signpost them effectively to potential service users. Plans are aligned to make use of synergies where possible;
- Degree 2: Managed Processes – services are formally coordinated through arrangements such as integrated assessment and case management;
- Degree 3: Integrated Organisations – integrated teams provide services which are commissioned or managed through integrated organisations.

Miller and McNicholl's (2003) Degrees of Integration

King and Meyer (2006) describe three common types of approaches to the delivery of coordinated care:

1. The system/sector-based service integration approach consists of functions and activities focused on integrating services provided by a number or agencies in a geographical area for a particular client group. In this approach, the emphasis is on system-level planning and on administration involving gate-keeping functions and fiduciary responsibilities, although client-specific service delivery activities may be involved;
2. The agency-based service integration approach consists of functions and activities focused on integrating the delivery across programmes offered by an agency for families in a particular catchment area;
3. The client/family-based service coordination approach consists of functions and activities focused on assisting specific families to obtain appropriate and needed services from agencies in a geographical area. This approach involves assisting the family to locate and access services, resources and supports, and providing them with the information, advice, support and skills that they require to obtain the services, resources, and supports.

Warmington et al. (2004) put forward a participatory model of organisations working together at the service level developed through their examination of education services for children with special needs: co-configuration. The authors argue that co-configuration might characterise the form of work currently emerging in complex, multi-professional settings. They define co-configuration as "a form of work orientated towards the production of intelligent, adaptive services, wherein ongoing customisation of services is achieved through dynamic, reciprocal relationships between providers and clients" (ibid, p4). It is a participatory model as relationships between organisations include clients as well as professionals. Co-configuration is characterised by distributed expertise: professionals may not share a common professional background or values, or share a common physical location and may meet quite fleetingly in a variety of configurations. This distributed form of work has encouraged a shift away from team working to "knotworking": a rapidly changing, partially improvised collaborations of performance between otherwise loosely connected professionals. Warmington et al., (2004) suggest that many agencies within UK social provision are operating on the cusp between the new co-configuration and the longer established work forms.

2.5.1 Communities of Practice as Service Integration

1) The community of practice is presented as a mechanism through which working together at the service level can be facilitated. Lathlean and le May (2002) argue that communities of practice may be a useful way to gain insights into the practices of other agencies and therefore have the potential to break down barriers and boundaries between organisations and professionals. The concept of "community of practice" was first been discussed by Lave and Wenger (1991, cited in Lathlean and le May, 2002) in relation to group learning, knowledge, and the ways in which knowledge was used by a particular group to undertake an activity or solve a problem.

In conceptualising communities of practice, Wenger (1998, cited Lathlean and le May, 2002; Frost 2005) utilises four main organising concepts:

- Meaning, which refers to how we interpret and understand the social world;
- Practice, which refers to how we act in the social world utilising shared resources;
- Community, which is the setting that gives a context and value to our practice;
- Identity, which is how new learning changes who we are in the context of our communities of practice.

Wenger's model also defines two complementary processes:

- Participation involves the daily, situated interactions and shared experiences of members of the community working towards a common goal. It refers to the active role of participants in building their world and their forms of practice;
- Reification refers to how knowledge and practice are turned into solid representations that can take the form of procedures, policies and other artefacts.

Finally, for Wenger, communities of practice involve three key elements: mutual engagement, joint enterprise and shared repertories:

- Mutual engagement involves relationship and people doing things together. For Wenger, the notion of location is not central, mutual engagement can happen whether or not people are co-located. Mutual engagement involves elements of participation and reification so that "in order to be a full participant, it may be just as important to know and understand the latest gossip as it is to know and understand the latest memo" (Wenger, 1998, cited in Frost, 2005);
- Joint enterprise refers to communities of practice involving a collective process of negotiation, a definition by the participants in the very process of pursuing it, and mutual accountability among participants' relationships that become an integral part of practice. Furthermore, as Wenger highlights it, communities of practice cannot be fully defined by an external mandate. They have to be understood in the context of their position within a broader system and the influence of the institutions that employs them;
- Shared repertoire refers to the shared approaches such as tools, language, styles and actions, that helps to practice and share understandings. Over time, communities of practice develop a shared set of resources that form a repertoire.

These key elements need to be supported by identified leadership, appropriate membership that suits the need of the work being done and is flexible, events which bring the community together and a high degree of networking (Lathlean and Le May, 2002).

Lathlean and Le May (2002) suggested that the success of the community of practice concept relies on the existence and sharing of a common goal; the existence and use of knowledge in order to achieve that goal; the nature and importance of relationships formed between people in the community; the relationships between the community and those outside it; and the relationship between the work of the community and the value of the activity. The authors identify key factors that influence the development, functioning and maintenance of communities of practice:

- Membership, in terms of who is chosen initially and throughout the life of the community of practice to be involved, the extent (passive or active) of their involvement, and its importance to achieving the goal and shape of services to be developed. Indeed, membership often changes over time;
- Commitment from within and outside the community to the desired goals in order to develop the required service alteration;
- Relevance to local communities and the existing services to enable acceptance of the change;
- Enthusiasm related to the extent to which members felt that progress is being made;
- Infrastructure to support the work of the community of practice in terms of ease of access to knowledge or evidence;
- Skills in accessing and appraising a variety of sources of knowledge and in bringing evidence together into a coherent plan for action;
- Resources that go beyond the time needed to meet, seek information or canvas support (eg: pump-priming money for pilot work in relation to the desired service change or funds for evaluating the effects of change).

2.6 Benefits and Challenges

2.6.1 Benefits

Working together is often treated as unproblematic, represented in idealistic fashion as resting upon "an implicit ideology of neutral, benevolent expertise in the service of consensual, self-evident values" (Challis et al., 1998, cited in Warmington, 2004). Some researchers caution against the assumption that it is "a good thing" without detailing a robust evidence base to justify such thinking (Sloper, 2004; Stewart et al., 2003, cited in Brown and White, 2005). Nevertheless, some studies describe a range of benefits resulting from such collective enterprises.

The rationale for integrated policy and service delivery argues that working together allows for "comprehensive interventions" for children and young people (Brown et al, 2004) which are more flexible and serve to "reduce the

frustration, the delay, the inefficiency, and the gaps that frequently exist in care systems" (Woods, 2001, cited in CFRC/CAWT, 2008, p18). Socially, it encourages a greater focus on children and families, enables a degree of continuity of care, and permits the addressing of previously unmet needs. It allows for services to incorporate a "whole child model" of service delivery and both universal and targeted intervention can be delivered which results in improved outcomes for children. (Valentine et al., 2006; McTernan and Godfrey, 2006, cited in CFRC/CAWT, 2008, p18).

However, it has been highlighted that while much of the rhetoric around interagency working perceives it as an inherently good thing, with a subsequent 'assumed inevitability' of good outcomes being achieved, there are those who argue that there is not sufficient empirical data regarding the efficacy of the approach to warrant its wholesale recommendation. Frost (2005, p20-1) highlights that in one case in the US, an evaluation found that there was no effect on outcomes for children and a decrease in the quality of the service being delivered. Similarly, Cameron et al (cited in Sloper, 2004) refers to the little evidence on the impact of interagency working on service users. Gray (2002) also points out the lack of high quality research and evaluation as an impediment to its development and refining, while Milbourne and colleagues (2003) observed "micro-political conflicts" over the time allocated for evaluation of interagency efforts.

Yet, some studies have evidenced some positive findings for service users. A series of studies examining the effects of collaboration across professions in schools revealed that student support and teacher assistance teams had a positive impact on student academic performance (student' achievement tests, grades, dropout rates and attendance) through an increased ability to thoroughly understand student difficulties and generate creative, appropriate interventions, assisted teachers in mainstreaming students who were receiving "pull-out" services, and helped reduce the number of inappropriate referrals to special education (Walsh et al., 1999). Webb and Vuilliamy's (2001) study of interagency working similarly reported a reduction in exclusions from schools of young people with challenging behaviours.

Other benefits cited in the literature include a positive impact on the quality of service being provided and information sharing between agencies. Interagency working also has an impact on the practitioners. Golan and Williamson (1994, cited in Walsh et al., 1999) examined the involvement of teachers in school linked services in California and found out that these efforts resulted in increases in the contact with parents and agency professionals, the feeling that they could successfully help students, and the understanding of and appreciation for programme services. Rushmer and Pallis (2002, cited in Brown and White, 2005) comment that the connections with professionals as a result of interagency working can result in increased knowledge, skills, and opportunities to contribute to other initiatives. It can also serve to reduce duplication of work and improve communication. Brown and White (2005) also note an improved job satisfaction from working collaboratively.

If the rationale for integrating services is to improve outcomes for children and families, there may also be financial benefits to such policies (Brown and White, 2006). Economically, interagency work and service integration allow for improved access, greater levels of efficiency, and enhanced outcomes, while "giving people what they need results in reducing use of other services" (Browne et al, 2004). Likewise, the reduction of duplication and overlap of services, and the increase of their efficiency, lead to cost saving and a greater "cost-benefit" balance (Gray, 2002).

Brown and White (2006) demonstrate that integrated services for children whose needs were not met at an early stage can prevent future costs associated with social exclusion in their adulthood. There can also be financial implications such as savings over time as a result of improved communication, technological advancement, better practices and better use of staff time. Brown and White also note the possible cost of service integration. While the direct cost, such as personnel or new processes, are straightforward to identify, the indirect costs, such as the cost of redirecting resources to integrate services, providing integrated services to all children rather than focussing integration for more vulnerable groups, are more difficult to capture.

2.6.2 Challenges

Problems regarding interagency working are well documented (Horwath and Morrison, 2007, Johnson et al., 2003; Valentine et al., 2006; Park and Turnbull, 2003; Erhardt, 2000; Neighbourhood Renewal Unit, 2002; Stokes and Tyler, 1997, cited in Gray, 2002). They include structural challenges inherent to agencies working together. Indeed, agencies can have differing protocols, structures, and systems. Furthermore, government partners can find it difficult to adapt to the

need of community partners. Struggles can also be encountered in reconciling the government partners' need for formal accountability with the need to share power with the community partners (Gray, 2002). Previous "history" of conflict between individuals and organisations can hinder collaboration (Worrall-Davies and Cottrell, 2009).

Milbourne (2005) emphasises that inflexible organisations and performance pressure also hinder collaborative work. A continuing stream of new initiatives can result in an overload of work. Besides, tight timeframes contribute to the impediment of interagency work and service integration. The lack of time is a common excuse for agencies to avoid participation in this type of work, although actual reasons may be different (Atkinson et al., 2002). Changes in organisational remits and structures can impact on their ability to communicate with other organisations (Maychell and Bradley, 1991, cited in Atkinson et al., 2002). Furthermore, a lack of management understanding of what a change process constitutes in interagency working can reinforce these impediments. The exclusion of any significant stakeholder from the collaborative process will also be a major obstacle to efficient collaboration (Gray, 2002).

Information sharing and confidentiality policies are often seen as factors hindering interagency work. While the need for confidentiality for client groups is respected, Atkinson et al (2002) highlight concerns that this was being reinforced specially to protect agency responsibilities and defend boundaries.

Financial challenges include lack of budget control, competition for funding, little solid evidence to predict cost of collaboration, and lack of initial and continued resources for services to develop. The concerns over cost shifting can impede interagency working. (Johnson et al., 2003; Atkinson et al., 2003, Brown and White, 2005). Some researchers (Capey, 1997 ; Scriven, 1995, cited in Atkinson et al., 2002) suggest that agencies may use inflexibility of funding as an excuse for protecting their own funding.

The literature also stresses a number of challenges inherent to individual personality. Milbourne (2005) highlights the lack of recognition of the skills, time and energy necessary for collaborative interagency work. Challenges include issues regarding lack of a shared agenda and understanding (Gray, 2002; Johnson et al, 2003; Percy-Smith, 2005; Brown and White, 2005). Milbourne and colleagues (2003) underline that tensions created by the frequent personnel changes exacerbate difficulties in constructing shared aims across agencies. Similarly, changes in agency leadership hinder collaboration (Friedman et al., 2007; Milbourne, 2005).

A poor understanding of roles and responsibilities and mistrust amongst professionals constitutes a major challenge. Milbourne (2005) notes that insular tendencies and competitiveness of large statutory agencies constitute a particular barrier to building trust and collaboration. Ambiguity can also result from collaboration. For instance, ambiguity around the purpose of a partnership and the purpose of meetings and plans are common (Percy-Smith, 2005; Brown and White, 2005). Furthermore, differences can appear in status and perceived power among agencies and hinder relationships. Milbourne (2005) also identifies "internal" team differences among practitioners that include knowledge, professional discipline and local status but also differences of class and race. Individuals' and agencies' expectations and priorities can also form barriers to interagency work (Atkinson et al., 2002).

Lack of ownership amongst senior managers can have a negative impact on the professionals' relationship. Professionals can fear that working in partnership with others and sharing decision making power will reduce their individual value and importance (Walsh et al., 1999). Interagency working can also be hindered by an insufficient commitment from services and staff to work together (Martinson, 1982, cited in Park and Turnbull, 2003; Valentine et al., 2006). This can be intensified by the fact that collaboration is most of the time mandated which is often resented, and is likely to be only partially observed (Gray, 2002; Horwath and Morrison, 2007).

Another issue faced by professionals is the use of a different mode of understanding and intervening in the world (Frost, 2005). Conflicting professional ideologies can occur due to subtle but significant differences in the cultures of various professions, linguistic conventions and ethical practices (Horwath and Morrison, 2007; Walsh et al., 1999; Johnson et al., 2003; Brown and White, 2005) and lead to a lack of trust with personnel from other disciplines (Martinson, 1982, cited in Park and Turnbull, 2003). Negative attitudes towards interagency networking can appear and individuals can show resistance to change (Martinson,1982, cited in Park and Turnbull, 2003).All of these factors contribute to communication

problems that can occur between professionals within services, between different services, and between local, regional and national agencies (Horwath and Morrison, 2007; Valentine et al., 2006; Government of Ireland, 2006, cited in CFRC/CAWT, 2008).

Park and Turnbull (2003) distinguish factors determining service integration in terms of whether they occur at the interpersonal level (i.e. relationships between individuals) or at the structural level (i.e. relationships between agencies or systems). Most of the structural level barriers are relative to collaboration difficulties such as definition of goals, roles and responsibilities, lack of involvement and communication as have been discussed previously. Still, some structural barriers appear more specifically in the service integration literature. They include large caseloads, limited service offerings, lack of complete information, unawareness of overlapping services, gaps in screening and diagnostic services among agencies, little consideration of political bases (Stegelin and Jones, 1991; Wesley et al., 1997; Roberts et al., 1996; Dinnebeil et al., 1996; Harrison et al, 1990, cited in Park and Turnbull, 2003). Disillusionment among communities if expectations are raised and not met, and government limiting community input to service delivery rather than extending community input to broader policy issues, have also been identified as challenges occurring in service delivery settings (Gray, 2002).

Some researchers suggest that when time, energy and support are very limited, collaborative working may not be the best option (McCulloch et al., 2004, cited in Brown and White, 2005). Glisson and Hemmelgarn's (1998, cited in Charles and Horwath, 2009) study found that increased service coordination actually had a negative impact on outcomes for children and families. Examining the effects of both organisational characteristics and inter-agency coordination on children's psychological functioning led the researchers to recommend that further attention should be given to improving the organisational climate of the agencies rather than increasing organisational coordination. Organisations where staff reported greater job satisfaction, role clarity and fair organisational practices were found to deliver significantly better outcomes for children and families than organisations with poor climates.

Other studies have shown that the short-term nature of some projects allows insufficient time to overcome professional or agency inflexibilities in a school setting (Milbourne, 2005). Moreover, Milbourne (2005) notes that the withdrawal of support in short-term initiatives affects both children and parents. To be effective, support needs to be permanently embedded in school structures. However, mainstreaming initiatives may make it harder for agency workers to negotiate organisational space for flexible work that has been highly valued by families in the study. The author concludes that the structures and organisation of partnership work in public services run counter to the flexibility that effective work in settings accessible to disadvantaged families often requires.

2.7 Facilitators

A large number of factors contribute to inter-agency work and service integration. In addition to possessing a belief that interagency work is a good thing and a positive – sum enterprise, a number of other specific facilitators are identified in the literature (Hardy et al., 1992; Wistow & Barnes, 1995, cited in Johnson et al., 2003; Williams Torres and Margolin, 2003):

- A shared vision and understanding;
- Resources;
- Clarification of roles and responsibilities;
- Presence of a steering group;
- Plans and processes;
- Good relationships amongst partners;
- Strong communication;
- Effective leadership and political support;
- Strong interpersonal skills;
- Participation;
- Training;
- Research.

Each of these is now discussed in turn.

2.7.1 A Shared Vision and Understanding

The literature emphasises the need for a shared vision of common outcomes, a shared understanding of the purpose of partnership (including its goals and objectives which are well articulated), and a shared definition of problems and opportunities (Percy-Smith, 2005; Brown and White, 2005; Gray, 2002). Objectives must be clear, realistic and well articulated (Sloper, 2004; Johnson et al., 2003). A shared vision is a means of unifying partners (Williams Torres and Margolin, 2003) and is also required so that all organisations "buy-into" the strategies being developed. They need to be flexible and willing to reshape their understanding of issues (Kelleher and Kelleher, 2005). The identification and ascribing to a shared vision also aids the process of sharing accountability.

2.7.2 Resources

A condition for efficient interagency work is that the financial needs of the partnership are known and addressed (William Torres and Margolin, 2003). While some advocate a single source of funds and preferably a pooled budget (Johnson et al., 2003, Park and Turnbull, 2003) others emphasise the need for flexible and innovative funding mechanisms (Tomlinson, 2003). In both cases, interagency work and service integration require assured long-term funding so that infrastructures are built and projects have time to work (Gray, 2002).

Time is an essential contributor to success of a interagency work. Partners need to have enough time to participate (Gray, 2002). This can be enhanced by protecting time for staff to undertake joint activities (Sloper, 2004). The service integration literature additionally highlights the need for flexibility and consistency in staff hours and schedules as well as admitting flexible working hours to accommodate family schedules (Wesley et al., 1997; Cormany, 1993; Dinnebeil et al., 1996; Roberts et al., 1996, cited in Park and Turnbull, 2003). Furthermore, some authors advocate for co-location of services (Park and Turnbull, 2003; Gray, 2002). Studies emphasise the need for an adequate venue to bring partners together to communicate with one another (Friedman et al., 2007). Sloper (2004) and Worrall-Davies and Cottrell (2009) suggest that sharing offices or being located in the same building increases opportunities for communication between staff, promoting understanding and information sharing. On the service integration level, researchers recommend co-location for service providers (Friedman et al., 2007; Park and Turnbull, 2003). Adequate resources also include appropriate administrative support and supervision for staff as well as the recruitment of professionals with the right experience, knowledge, and approach (Sloper, 2004; Tomlinson, 2003).

2.7.3 Clarification of Roles and Responsibilities

The literature stresses the need for partners to be aware of what is expected of them. Roles and responsibilities have to be clearly identified (Sloper, 2004; Brown and White, 2005; Williams Torres and Margolin, 2003; Tomlinson, 2003; Ehrle et al., 2004; Duggan and Corrigan, 2009; Worrall-Davies and Cottrell, 2009). Gray (2002) specifies that clarity should be made around the roles of participants in regard to service design, funding, implementation, quality control and risk management. Furthermore, people to do the work have to be identified and made accountable (William Torres and Margolin, 2003).

2.7.4 Multiagency Steering or Management Group

Interagency working and service integration require a multi-agency steering or management group (Sloper, 2004). Having appropriate corporate governance systems is described as a good practice feature (Duggan and Corrigan, 2009). Johnson and colleagues (2003) suggest that a single management entity should direct multidisciplinary teams.

2.7.5 Plans and Processes

Researchers advocate that interagency working should have a communication and outreach plan (Williams Torres and Margolin, 2003). In the context of service integration, Gray (2002) emphasises the following facilitators relating to plans and resources: agreed actions are planned and implemented, strategies and actions are agreed and put in writing, a manageable number of activities are undertaken as work goes on to build community and organisational structures. Other researchers also highlight the need for timetables for implementation of changes to be agreed and linking projects into other planning and decision-making processes to be available (Sloper, 2004; Worrall-Davies and Cottrell, 2009).

Effective interagency working also requires ensuring good systems of communication at all levels, with information sharing and (adequate) IT systems (Sloper, 2004; Tomlinson, 2003). Confidentiality and information sharing protocols can differ in agencies. Therefore, in planning the exchange of information, codes of practice generally need to be developed (Kelleher and Kelleher, 2005). Ehrle and colleagues (2004) underline the necessity of clear policies regarding what information can be shared and with whom. Furthermore, systems should also be available for documentation as well as collecting and analysing data (Tomlinson, 2003; Park and Turnbull, 2003). In the context of service integration, Park and Turnbull (2003) suggest the development of a centralised information system. Good relationship among partners.

2.7.6 Good Relationships

Good relationships among partners are facilitated and enhanced when relationships enabling action are defined and developed. Good working relationships implies trust and respect between partners, a culture of inclusiveness, representativeness, accessibility, fairness and integrity, as well as a system in place to enable relationships to be reviewed regularly and renegotiated if necessary (Gray, 2002; Duggan and Corrigan, 2009; Worrall-Davies and Cottrell, 2009). The creation of an interagency culture and the addressing of cultural barriers will enhance good relationships (Duggan and Corrigan, 2009). Territory issues should be neutralised, for instance, by providing shared ownership including other agencies in planning (Harrison et al., 1990, cited in Park and Turnbull, 2003).

2.7.7 Strong Communication

Strong communication characteristics relate to the speed, clarity, and accuracy of information provided and the manner in which it is communicated. Being receptive and responsible to other agencies are additional indicators of strong communication (Harrison et al., 1990, cited in Park and Turnbull, 2003). Communication is enhanced by the development of information sharing systems (Ehrle et al., 2004). Researchers highlight the need to assess and address the status of barriers to communication (Friedman et al., 2007). Past history between agencies impacts the quality of communication, may it be in a positive or negative way (Horwath and Morrison, 2007).

2.7.8 Effective Leadership

Numerous authors appoint strong leadership as a facilitating factor (Hudson et al., 1999; Sloper, 2004; Browne et al., 2004, Friedman et al., 2007; Horwath and Morrison, 2007; Brown and White, 2005). The literature provides various indicators of a quality leadership. Hallett and Birchall (1992, cited in Sloper, 2004) describe a "collaborative champion" as committed, energised individuals who have high levels of credibility, influence, charisma and integrity, acknowledged both internally and externally by other agencies. They possess high quality interpersonal and networking skills which enable them to negotiate the interfaces, ambiguities, tensions and turf issues which exist between and within agencies. The "collaborative champion" provides the confidence and reassurance that is required for the kinds of innovation and risk-taking without which collaboration may add little or no value. Gray (2002) highlights the need for strong leadership from senior members of partners' organisations to carry out through planned initiatives towards service integration. Support should also exist in the wider community, including having a high level of political support, and an appropriate legislative environment (Gray, 2002; Browne et al., 2004). Furthermore, Park and Turnbull (2003) suggest that the State's technical assistance in examining available community resources for local agencies would enhance service integration.

2.7.9 Practitioners with Strong Interpersonal Skills

O'Connor (1995, cited in Park and Turnbull, 2003) highlights that a number of skills at the practitioner/professional level can contribute to an environment facilitating interagency working. These include displaying openness and self disclosure; sharing information and responsibility; showing empathy; solving problems together; being trusting and trustworthy; having reasonable expectations about the partner's time and effort; and displaying equal respect for each partner. Lowenthal (1994, cited in Park and Turnbull 2003) suggests a number of interpersonal qualities that would also assist at the service level: self-confidence, personal maturity, persistence, diplomacy, sensitivity, tolerance of diversity, a high threshold of frustration and a sense of humour.

2.7.10 Participation

A high level of participation from a range of actors, fostered by inclusive practices, committed resources and sustained over time, is another factor contributing to interagency working (Valentine et al., 2006; William Torres and Margolin, 2003).

High level of participation supposes wide-spread support among all levels of staff (Gray, 2002). The commitment of both senior and frontline staff can be aided by the involvement of frontline staff in the development of policies (Sloper, 2004; Tomlinson, 2003). Furthermore, it appears that where there is enthusiasm and motivation people can work effectively together (Frost 2005). Participation also requires structure to allow for local agencies to be involved in the delivery and devising of policy and services (Valentine et al., 2006; Woods, 2001, cited in CFRC/CAWT, 2008). The involvement of all relevant people often includes children and their parents (Tomlinson, 2003). Policies have identified the need to involve them in the devising of policy and services (Department of Health and Children, 2006; Government of Ireland, 2006; Chief Secretary to the Treasury, 2003, cited in CFRC/CAWT, 2008; Park and Turnbull, 2003). Park and Turnbull (2003) suggest including parents in staff training. Gray (2002) emphasises the necessity to involve existing community organisations and seek representation form the target population. William-Torres and Margolin (2003) argue that the partnership has to actively recruit new members. They identify the need for a community organiser in the interagency arrangement that participates in ongoing recruitment, welcoming, and sustaining of participation by community-based, neighbourhood-based, and constituency-based organisations and individuals (William Torres and Margolin, 2003).

2.7.11 Training

Bringing interagency participants together provides opportunities to strengthen interagency working. Specifically, such opportunities can:

- Breakdown stereotypes;
- Clarify aims and values;
- Build mutual knowledge and understanding;
- Develop a common language, learn to appreciate each others role;
- Consider how to work with differences across organisational and professional boundaries;
- Build formal and informal interagency communication channels;
- and encourage team commitment beyond the personal interest of key individuals (Charles and Horwath, 2009; Johnson et al., 2003; Atkinson et al., 2002; Sloper, 2004; Tomlinson, 2003, Friedman et al., 2007).

Team building is also recommended in the literature (Sloper, 2004; Percy-Smith, 2005; Kelleher and Kelleher, 2005). However, bringing people together is difficult when placed in the context of rapid staff turnover, vacancies and heavy workloads and where feeing staff to attend training is a significant problem (Charles and Horwath, 2009).

2.7.12 Research

Research is required at different times of the interagency arrangement. At the beginning, local community needs and circumstances should be matched with accurate inventories of local supply (Johnson et al., 2003). It is also important that "best practices" have been researched and shared in the partnership. Assets residing within the partnership also have to be mapped. The partnership's work needs to be monitored, evaluated, and revised on a regular basis. This allows the partners to know what challenges they face (Gray, 2002; Brown et al., 2004; Valentine et al, 2006; William Torres and Margolin, 2003). It also allow policies and procedures to be reviewed regularly in the light of changing circumstances and new knowledge (Sloper, 2004; Duggan and Corrigan, 2009; Worrall-Davies and Cottrell, 2009). Lowenthal (1994, cited in Park and Turnbull) also suggests the need for families to have a role in the evaluation of the effectiveness of service integration Initiatives.

2.8 Key Points Identified in the Literature relating to Interagency Working

The following table outlines the key aspects identified in the literature relating to interagency work

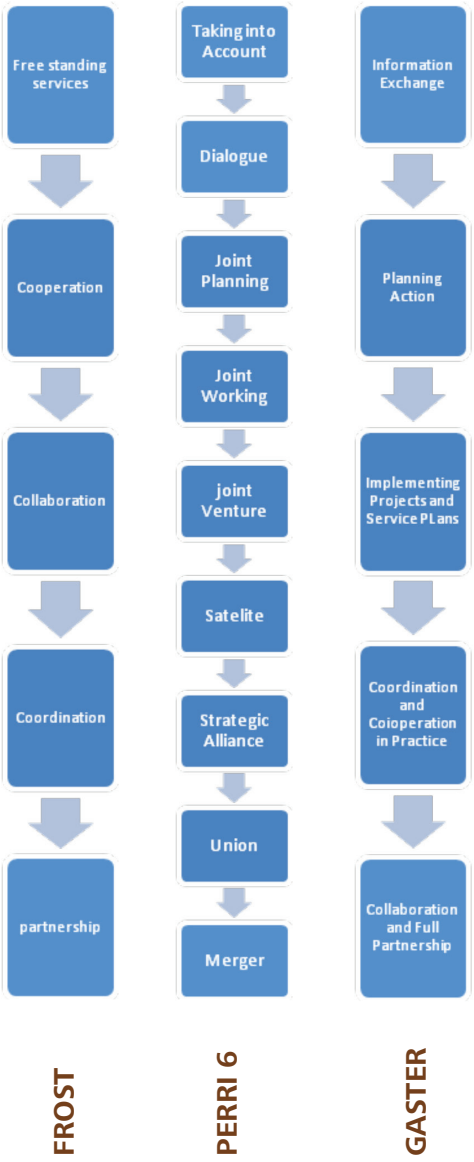
Interagency work can involve: • Information sharing • Formal and informal exchanges • Changes to procedures and practices • Referrals • Communities of practice • Joint planning • Joint implementing • Joint training and team building • Pooled resources	**Reasons to take part in interagency work:** • Mandate • Common belief it is "a good thing" • Expertise pooling • Financial opportunity (pooled funding, reduction of cost) • Better identification of needs • Better targeting groups • Better outcomes
Factors impacting: • Work / agency history • Inflexibility of structures, agency boundaries • Agency culture, power balance and representation • Resources (location, budget, time) • Work load • Staff qualification and frequent turnover	**Interagency work and service integration require:** • A shared vision and understanding; • Resources; • Clarification of roles and responsibilities; • Presence of a steering group; • Plans and processes; • Good relationships amongst partners; • Strong communication; • Effective leadership; • Strong interpersonal skills; • Political support; • Training; • research

2.9 Developing a Framework of Analysis: Towards Continua of Interagency Working and Service Integration.

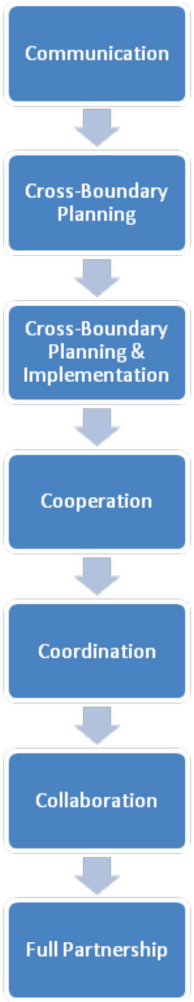
This literature review highlights a number of issues when it comes to identifying and clarifying exactly what working together is. Firstly, there is much confusion about the use of different terms, such as partnership, collaboration, coordination, joint planning, joint commissioning and integration. Secondly, even if a set term is agreed, there are differences of opinion about what sets of activities constitute engaging a particular term, and undertaking those activities. However, amid the various models, conceptualisations and views of working together, it is possible to identify useful points to consider towards the synthesis of a continuum.

The CDI strategy refers to both working together and integrating services, with preparatory documents highlighting the past experience of organisations working together in Ireland underpinning the development of the strategy. For the purposes of this study, we have defined working together as a term which covers the entire range of activities covered in the literature. We have also adopted the literature's distinction between strategic level and service level activity, with interagency working representing strategic level activities and service integration being characterised as the outcome of such activity, occurring on the ground for service users. It is important to note that service integration is a process which occurs over time. It is not all or nothing, and cannot be achieved immediately. Therefore, it is viewed as having different dimensions - service coordination, managing processes, and leading to full service integration. The continua which are presented below are synthesised from the numerous different models of both strategic level interagency working and service level integration activities. Influencing both is the desire to be as encompassing as possible in capturing the full range of activities which are construed as characterising both interagency working and service integration. This is particularly the case with the former, where there is a lack of consensus or clarity regarding conceptualisations, definitions, meanings and activities. While there is less divergence in the arena of service integration, conceptual consensus remains elusive.

In relation to interagency working our proposed continuum borrows from three particular authors outlined in the literature: Frost (2005), 6 (2004) and Gaster et al (1999). The reason for choosing these three is straightforward: they best capture the full range of activities referred to across all other models identified and discussed for this review. In addition, Frost's continuum was devised from analysis of services in relation to children and families specifically. 6's spectrum was developed from a comparative analysis of a review of 'working together' arrangements in different countries. Gaster et al's continuum is based on an analysis of local government – voluntary sector activity in the UK, an interface where the needs of families are often defined and met. Our continuum is outlined below:



Terminology	Activity
1. Communication	Information exchange, knowledge exchange. Mutual learning. Networking. Informal activities. Voluntary engagement. Not working towards goals
2a. Cross-Boundary Planning	Debate and identification of local needs and priorities; planning actions; organisational contributions agreed but separate actions pursued;
2b. Cross Boundary Planning and Implementation	Jointly or separately taken action on an agreed plan. Identifying monitoring methods; review processes; mutual feedback on success or failure.
3a. Cooperation	Working together towards consistent goals and complementary services, yet maintaining independence. Relatively informal arrangement
3b. Coordination	Organisations working together in a planned and systematic manner. Organisations maintain independence, but contribute to shared and agreed goals
4a. Collaboration	Separate and distinct roles, shared values and agenda, pooled resources, blurred boundaries, weaker partners supported to play a full role. Always voluntary.
4b. Full Partnership	Formalised agreement (often for the delivery of a service). Also termed Coalition, joint structures sacrificing autonomy



Interagency Working Continuum

At the service level, our continuum is developed from synthesising two different conceptualisations of service integration: that of King and Meyer (2005) and Miller and McNicholl (2003). It identifies a three degree continuum of service integration and is outlined below:

Service Integration Continuum

2.10 Conclusion

This chapter has set out the literature pertaining to working together in its various interpretations and understandings. What is clear is the huge variety of interpretations, regarding not just the locus of analysis, but the various terms which can imply identical and indeed different scenarios. This is less so when service integration is examined, yet there are some subtle differences here. Where there is much more common ground, however, are findings regarding the benefits of doing interagency work, the facilitators necessary to do it, and the challenges to overcome in striving to achieve the variety of benefits outlined. In synthesising the literature, the subsequent continuum was developed so as to be wide enough to capture any and all scenarios and instances of interagency working at both the strategic and delivery levels which CDI undertakes. It is to the accounts of CDI work that we now turn.

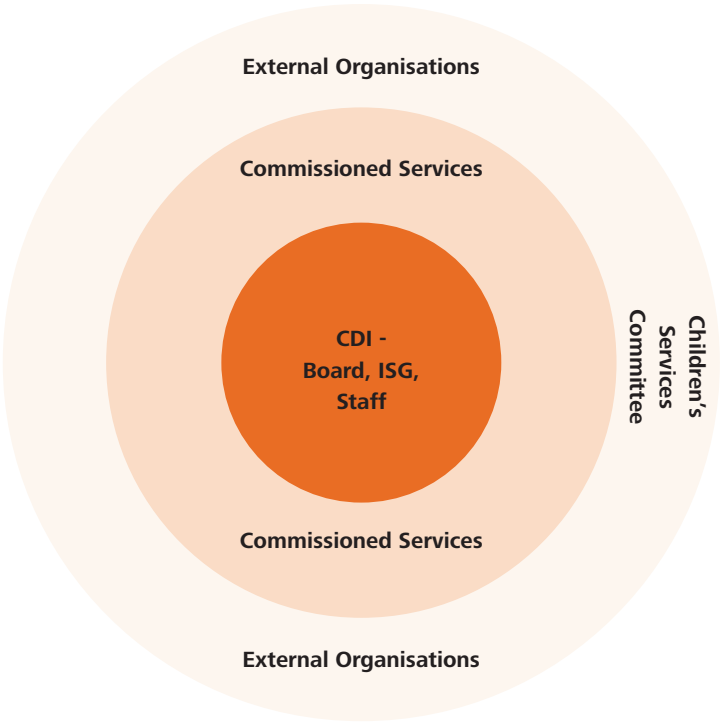
Chapter 3:
Findings Relating to CDI's Internal Structures and External Activities

3.1 Introduction

This chapter presents the findings from documentary analysis and interviews held with a number of different individuals, as outlined in the methodology in chapter one. This chapter is the first of two, the purpose of which is to document the interagency aspects relating to the work of CDI. In so doing, the chapters encompass a number of different spheres of activity in which CDI engages in various degrees of interagency working:

- CDI's governance structures: there are a number of CDI governance structures which are important to examine in the context of interagency working. The CDI Board is significant here, as is the Expert Advisory Committee. However, the Implementation Support Group is to the fore in this regard. The role of CDI on the South Dublin Children's Services Committee (SDCSC) is also important to note here;
- CDI and its commissioned services: CDI has commissioned a number of organisations to deliver its services. Many of these services have interagency aspects to them. These relationships differ greatly, from services integrating external staff into their organisation, to services having a friendly or 'cordial' relationship with others, for example where children are collected from school and transported to another venue to access or receive a service;
- CDI and the wider organisational community of Tallaght West through the semi-public and public activities which CDI undertakes, such as the lunchtime seminars, training initiatives, newsletters, public events and other 'awareness raising' activities.

Figure 1: Layers of CDI's activity



This chapter will concentrate on the first and third tiers of activity – namely CDI's governance mechanisms and the relationship between CDI and non-commissioned organisations in Tallaght West (the relationship between CDI and those organisations contracted to provide its services will be outlined and discussed in chapter four). The chapter will outline the internal structures and internal and external activities which CDI undertakes to promote and foster interagency working and service integration in the area. It will also feature the views of key informants (dependent on their role) on particular aspects of CDI's interagency work.

3.2 Interagency working in CDI's agenda

CDI's work encompasses the following vision statements:

- CDI, in partnership with the community, will promote needs based services using an evidence based approach;
- CDI will establish and build on what works;
- CDI will recognise and value the contribution made by, and the commitment of, those living and working in the community;
- CDI will support the children and families of Tallaght West by promoting and enhancing quality, innovative services;
- CDI will encourage collaboration and shared learning amongst all stakeholders; raise awareness of roles and responsibilities; share information; challenge how it works and find solutions together, in order to deliver more effective services and influence policy.

Five areas of activities are identified:

- Providing early childhood care and education for all;
- Integrating services in schools and child and family services;
- Developing new services targeted at the identified needs of children;
- Working together to improve quality of existing service provision;
- Advocating to reduce major stresses on children and families.

3.3 Implementing the CDI Strategy

3.3.1 General Overview

A number of governance structures aid the implementation of the CDI strategy, and specifically, the working together arrangements which underpin it. The most prominent of these structures are:

- The CDI Board;
- The Expert Advisory Committee;
- The Implementation Support Group.

The function and operation of these are now outlined below.

3.3.1.1 The CDI Board

CDI is overseen by a board comprised of a range of actors from the community, community organisations, academia, the private sector and a philanthropic organisation. As set out on the CDI website the functions of the board are:

- To provide leadership and responsibility for the strategy's implementation, overall governance and accountability;
- To be responsible for staffing, finance, programmes, learning and evaluation;
- To have a reporting relationship to the Office for the Minister for Children and Youth Affairs (OMCYA) and Atlantic Philanthropies (AP);
- To report on strategy implementation, spending, the attainment of targets and learning.

It should be noted that in addition to the reporting requirements outlined in the last point, the OMCYA and AP also provide an advisory and support relationship to CDI, and vice versa (CDI Governance chart). A number of committees and fora meet under the board, incorporating board members and other actors from the locality. The functions of these are outlined in the first process study report.

The Board meets on a monthly basis. The CEO outlines the completed board report, which provides detail on a number of issues including:

- Governance and Management;
- Design and delivery of services;
- Improving the neighbourhood for all children;

- Enhancing quality through integration and training;
- Evaluation.

The Board discusses reports furnished from the Finance and Risk subcommittee, reviews achievements and challenges to date, governance mechanisms and CDI's activities pertaining to mainstreaming and sustainability.

The Board also feeds into the local South Dublin Children's Services Committee (SDCSC). Established in 2007, the SDCSC is drawn from a wide range of key statutory, community and voluntary organisations with a remit for young people in the administrative area of South Dublin County Council (SDCSC's website). The main objectives of the SDCSC are:

- To develop strong cross-agency working relationships;
- Secure support for the joint implementation of policy initiatives;
- Maximize integration of service delivery at local level.

3.3.1.2 Expert Advisory Committee

The Expert Advisory Committee is made up of a number of national and international academics whose main function is to support the evaluation and research strand of the set of activities of CDI. The group is also free to make observations on other aspects of CDI's work programme, including the adoption of standards in the development and implementation of services.

Specifically, the role of the EAC is to:

- Provide advice and support in the design, commissioning and implementation of the evaluation strand of the programme;
- Support oversight of the research/evaluation programme;
- Review emerging results from the research and evaluation programme;
- Advise on changes to, or augmentation of, the research and evaluation programme if the need arises;
- And provide observations on the design and review of services as it sees fit.

The EAC met on a quarterly basis from 2007 to February 2009, when it began meeting on a biannual basis. At first, the meetings focused on the review of CDI services, CDI research questions and methodology (RCT, ethnography, samples, measures, scoring criteria, outstanding research components), the annual survey, the selection of evaluation teams and tender documents.

An update on evaluations and feedback from the quarterly meetings with the evaluation teams are provided to the EAC. The committee discusses issues relative to evaluations (e.g. matching services, tools to measure, risk of contamination, sharing and integrating database, information required in interim reports, use of information, information sharing, ownership of data/ intellectual property, referral process for children). The committee members also provide feedback and recommendations on the evaluation reports.

3.3.1.3 The Implementation Support Group (ISG)

The ISG is comprised of a number of representatives from the statutory and voluntary sector. Its main functions are to:

- Promote the implementation and development of the CDI strategy;
- Provide advice and support to the Board and team of CDI in the delivery of the CDI strategy;
- Identify blocks to the implementation of the CDI strategy within individual agencies locally and nationally and propose strategies to address them;
- Ensure a two-way flow of information between CDI and the member organisations in relation to service delivery;
- Create a shared vision of service delivery and the models and understandings which underpin these;
- Maintain an overview of the implementation of the CDI strategy;
- Co-operate and integrate its work with the Children's Services Committee and have learning from Tallaght West applied across South County Dublin;
- And actively support the work of CDI in promoting integrated service delivery.

The ISG is comprised of a number of representatives from the statutory and voluntary sector: HSE, Tallaght Partnership, National Educational Psychological Service, An Cosán, South Dublin County Council, National Education Welfare Board, Tallaght Gardai, Barnardos, South Dublin Children's Services Committee, Lucena Child and Family Services, VEC, and the South Dublin County Childcare Committee.

The ISG has met every six weeks since July 2007. The CEO provides the ISG with an update of the different activities undertaken by CDI. Issues relative to the implementation of the services are discussed (e.g.: participation and community engagement, staff attendance at training, number of children enrolled, timeframe, referral process, manualised approach, fees), as well as funding issues, mainstreaming, the community survey, needs assessment, communication strategy, and evaluations. The ISG provides consultation on issues and suggests solutions and strategies to overcome difficulties.

The ISG allows members from various organisations to share information relative to services. The group identifies blocks and possible duplication, and suggests potential collaborations that facilitate the implementation / delivery of services.

3.3.2 CDI Perspectives on Working Together

In identifying the day-to-day work of the organisation in interviews CDI highlighted that interagency working ('collaboration') is essential to what it does, that it underpins its activities. The organisation took a strategic decision not to directly provide services but to instead commission them with a view to enabling them to become sustainable into the future:

> *Well interagency collaboration just underpins everything because we don't deliver services […] therefore that requires us to have a good working relationship with a number of agencies. Eh, the fact that most of our services require school involvement at some level, whether its referral of children or provision of classrooms or whatever requires that we have some level of positive engagement with those schools […]. Could we do some of that differently? Yeah we could've done, we could be employing everybody [……but] obviously that would have been very destructive, very undermining of existing services, it would have been a very short term solution, it wouldn't have been sustainable, it wouldn't have been about developing capacity in the community*
>
> (CDI interview)

CDI describes interagency working as doing things together which can occur at different levels. Service integration is described as being about "connections between services, services fitting better, about seeing a transition, a movement within and across services for children and families" (CDI interview). CDI was given relatively "free rein" in how it went about implementing the elements of the strategy relating to interagency working and service integration, within the confines of the organisation's governance, and particularly the direction of the board. However, the absence of any particular model of collaboration was identified as an issue in beginning the process. CDI noted that there was no map as such, no proffered model of doing interagency working, but rather the process emerged out of learning from experience of what worked and what did not. In this sense, CDI's staff engaged in reflection about what it had tried, what rationales it had adopted in seeking to implement particular services, especially when new relationships are being established:

> *"We had a rationale, it turns out it wasn't the right one, that's ok , at least we had a rationale. […] There is a skill and it takes reflection and a strategic approach and space to work stuff out for us to know when we need to move in and out of those relationships"*
>
> (CDI interview)

Many instances of interagency work were cited in interviews with CDI, from the CDI structures to the specific services and related issues [such as supplementing services, and clarifying employment terms of particular staff] which may require one-off or short term interagency work. Within all these situations, the nature of relationships is important for CDI. In some cases, the position of independent or honest broker needed to be adopted between organisations involved in service delivery, or supporting aspects of the service integration process. In particular, the importance of interpersonal relationships, as well as organisational ones, is not lost on CDI. In relation to some statutory organisations, functionality tends to characterise relationships, although individuals are important. Yet in other situations, personalities drive interagency work, irrespective of the level of managerial involvement:

"With [one large statutory organisation] it's very much about the individuals, I mean we're very fortunate at the moment, we've a couple of guys that we work with that are very good, very supportive, they really get the work [we're trying to do]"

(CDI interview)

Governing these relationships, whether organisational or personal, is the necessity for trust and capacity to engage. Instances were recounted of difficulties between statutory providers and CDI in the beginning around particular pieces of work where a lack of transparency hampered the process, where organisations undertook work in opposition to the spirit of the collective piece of work planned. However, such instances have since reduced. Implicit in this is a recognition of the power bases which each organisation brings to the table and how that influences interagency working:

"It's about their power. Sometimes it's about the individual heading it up. In one organisation [X] is very powerful, very well regarded, not just amongst [their sector] but also [their profession], and also has a very particular way of working. And so that has to be very carefully managed […..] So there's a thing about the individual heading it up, it is about the people leading the organisation, it's about their working style and how they exercise their authority. It's also about the kind of personal power, authority, credence that they have"

(CDI interview)

In certain circumstances, examples of working together have been perceived as not being as successful as they could have been. For example, training provided by CDI was viewed as being an example of working together, yet professional ethos and culture has hampered the sharing of learning and making of contacts. Indeed, such professional attitudes have presented the Initiative with implementation challenges for some of its programmes (CDI interview).

3.3.3 Perspectives on the Implementation Support Group (ISG)

In interviews with both CDI and members of the Implementation Support Group, a number of topics emerged which prove noteworthy to the theme of working together and service integration. These are:

- Establishing the ISG and its role in promoting working together and service integration;
- Process issues pertaining to the operation of the ISG;
- The ISG and the SDCSC;
- Perspectives on factors promoting and inhibiting working together.

3.3.3.1 Establishing the ISG and its Role in Promoting Interagency Working and Service Integration

The emergence of the ISG occurred as a result of creating space for individuals and organisations which wanted to be involved in the governance of CDI (CDI interview). The CDI board decided its organisational composition as a result of identifying existing structures at the time in the area and organisations which could contribute to implementing its agenda (ISG interview 3).

Upon inquiring about the function of the ISG, all ISG respondents identified the core of the work as being in relation to sharing information, supporting service development and aiding in overcoming barriers which may arise in the delivery of CDI services. It is the on the ground knowledge which ISG members bring which is key, as identified by CDI and the ISG members directly:

"where it has been particularly useful has been where there has been joint problem solving[…] I mean it's where we collectively get our heads together, brainstorm a bit, try to be a bit creative, draw on people's experience, People know the other individuals in the community, and some of the histories you know. [….] That kind of stuff's really important, it can be very helpful. So drawing on people's experience, expertise, knowledge, and doing some collective problem solving, I think the ISG has done all of those"

(CDI interview)

"The main thing is to provide advice, on the ground information to CDI. Often decisions are taken, but [ISG] members can provide on the ground information, sometimes which CDI has, sometimes it doesn't. Sometimes they'll roll with it. Yeah, to provide information. CDI know what they are doing, they have an idea of what's coming ahead, we provide an input into how it might be implemented."

(ISG interview 1)

Another respondent identified the key role CDI plays in bringing ISG members together and the importance of membership:

"The ISG is an enabler for CDI. CDI creates the forum, it creates the platform and I think that when you pull the right people around the table at that level you can make things happen. Rather than one agency having an idea of how some of their workings relate to an area, you can agree workings collectively

(ISG interview 2)

Given its central remit in aiding the implementation of working together and service integration, ISG respondents were asked to identify what it, as a structure, has done to further these aims. Notably, all respondents spoke of different examples and situations where the ISG has been influential. Regarding the Community Safety Initiative, one respondent highlighted that ISG members aided in the identification of community leaders and "pushed the project" as much as it could. Organisations were asked to identify individuals who they could get involved (ISG interview 2). Another spoke of the process around the employment of a speech and language therapist. Given the public sector embargo and HSE moratorium, it was proving difficult employ the SLT. However, through "discussion, openness and creativity we managed to overcome the issue. Employment by one organisation, funding by another, and supervision by a third" (ISG interview 3). Indeed one ISG member identified the employment of the SLT as a very good example of how CDI can respond to local needs as they are identified, of contributing on an ongoing basis to the changing needs of the children of the area (ISG interview 1).

Finally, the ISG respondents referred to the positioning of Healthy Schools Coordinators within schools in the area as a key indicator of the progression of the service integration remit for both the ISG and CDI. All ISG respondents identified the prolonged process involved, and the difficulties experienced in trying to get the service operational. Respondents felt that the membership of the ISG, and particularly that of a Department of Education representative, was important in the process. One ISG member identified that, while they may not have played a direct role all the time, the knowledge, skills and "awareness of culture" which was brought to bear on the process was "vital." The use of local knowledge, expertise, and organisational expertise to help CDI break down the barrier was viewed as important in this example (ISG interview 3).

An ISG respondent identified that, while the ISG may not play a direct role in promoting working together amongst organisations and service integration outside of the services referred to above, it is still a crucial part of the process:

"Directly, maybe not. Maybe indirectly, yes […]. [members] update themselves particularly on the CDI strategy but also we adopted this round table kind of slot on the agenda, so if there's any ISG agency that wanted to give a significant piece of information to the other ISG members we did it at that slot. So that was a recent development over the last number of meetings and that was very useful. So maybe kind of that's also a way of fostering [working together] as well"

(ISG Interview 3)

The role of schools in the implementation of the strategy was identified by CDI as a salient point to be considered. CDI is aware of the importance of schools in its overall implementation process, with most of their services requiring school involvement "at some level" and the belief that the schools at the outset were critical to the successful implementation of the Initiative (CDI interview). Difficulties in getting the schools on board were recounted by the organisation, particularly as it (CDI)was perceived by some to be parachuted into the area with a large budget and no mandate. Challenges in getting schools to take ownership of services they were commissioned to deliver (Healthy Schools), as well as more

general engagement issues, were recounted (CDI interview). The challenge of changing mindsets amongst some schools, and indeed other agencies in the area, were important barriers to overcome, ones which the ISG assisted in:

> *"[The ISG] has been so important actually, I mean much more important and helpful than I would have anticipated when we were establishing it. When we were struggling to find early years settings or when we were struggling to get schools on board, you know people sort of being able to say 'well have you talked to this person', or 'that might help' or 'what worked for us was'... you know that kind of thing"*

(CDI interview)

Other ISG members identified a number of things which CDI was doing to foster working together in the broader sense. The services directly in operation in the area were cited as good examples of working together, as were the specific events which emerged from some of them (ISG interview 2). Additionally, the work undertaken in providing training and seminars were viewed as important, particularly given the view that CDI "didn't need to do that, but they have taken it on." Such instances provide for:

> *"Networking. And building up relationships and trust. I mean trust is vital as well, particularly when, you know, the work can be difficult. So I think if people build up those relationships, and trust each other, and know more about each other then that will help any service"*

(ISG interview 3)

However, while other ISG respondents did identify the role training and seminars play in bringing people together, their impact beyond this was viewed as a less positive:

> *"I mean, that's brought definitely people together. It has allowed people to chat informally but I don't think it's really made much difference practically speaking"*

(ISG interview 1)

3.3.3.2 Process Issues affecting the ISG

One ISG respondent identified that attendance has not always been full or complete at their meetings (ISG interview 2), something which CDI has also been conscious of (CDI interview). In the main however, ISG respondents spoke positively about their experience on the group. Process issues, particularly about the preparation of reports, circulation of minutes, and good leadership from CDI in aiding the work of the ISG, were all highlighted as important (ISG interview 3). This is something CDI is aware of, and feels is an important prerequisite to fostering interagency work. Also important is having a goal to work towards, not something that is in the abstract:

> *"Something specific so that it's not something very abstract that you know, that people see no end to, that helps […] working through the individuals that are receptive, that are allies, that you know, you have a good working relationship with, that is critical. I think having meetings that are well run helps, you know people are more inclined to come back if they know it will start and end on time, that there's an agenda. There's a bit about just sort of logistical things, minutes getting out to people soon after, agenda going out the week before with a reminder, dates being in the diary well in advance, that stuff helps. This adhockery of things being (re)moved"*

(CDI)

In the long term, the responsibility for interagency working should be shared by all within CDI, but also by all organisations in the area (CDI interview). While CDI can attempt to lead and take a strong role in doing that, there is a balancing act to be performed:

"So somebody has to drive it, so I suppose I'd have a concern that with CDI being seen as the organisation that will drive the interagency elements, that it nearly does let other people off the hook. That they don't need to actually sort of think about that"

(CDI interview)

This balancing act comes into sharper relief for the organisation when its position vis-a-vis the Children's Services Committee is outlined. Given its local role in promoting interagency work, CDI has thus a reporting requirement to the National Implementation Group of the Children's Services Committee. Such a requirement has resulted in certain tasks being requested of CDI which are not reasonably within their remit, while also exercising influence over what CDI cannot do (such as the delivery of interagency induction training) (CDI interview).

3.3.3.3 CDI, the ISG and the South Dublin Children's Services Committee (SDCSC)

The functions of the ISG, as stated previously in this chapter, demonstrate the inter- dependency existing between it and the SDCSC. The relationship between the ISG and the SDCSC has been highlighted and discussed at ISG meetings. There is a very close relationship between the ISG and the CSC, with only two organisations represented on the ISG not on SDCSC. Therefore, the ISG provides an opportunity for members to follow up on issues raised at the SDCSC. Additionally, CDI newsletters often detail developments regarding the work of the SDCSC, written by the Children's Services Coordinator (a member of the South Dublin County Council).

CDI is aware that the SDCSC offers an opportunity to support their integration agenda for the planning of phase two of its life. It is recognised that the involvement with CDI, and the work of the SDCSC more generally, has a significant impact on how organisations work, and offers opportunities to work together, network and identify specific areas of common interest. Furthermore, the SDCSC provides the opportunity to expand actions such as interagency referrals to the wider area of South Dublin rather than keep them to Tallaght West.

The ISG has shown an awareness relating to the possible overlap of work with the SDCSC, particularly in relation to the development of a directory and interagency induction training. The relationship between the ISG and the SDCSC has also caused instances of confusion. For instance, a member of the ISG had to ask for clarity regarding where "Safe and Healthy Place" work sits in the overall programme of work of the SDCSC (SHP is a piece of work which was agreed by the SDCSC subsequent to a proposal being submitted by CDI, following discussions at the ISG). Questions also emerged in regards to the possible role that the SDCSC could have in driving CDI's strategic thinking. It was agreed to raise the discussion at the SDCSC and consider how it can provide a forum for strategic thinking.

Over and above their participation in, and experience of, the ISG specifically, all ISG members interviewed have participated in other collaborative fora in the past and are currently part of a number of interagency structures, both within the Tallaght West area and beyond. Specifically, all referred to the Children's Services Committee (CSC) as being a key instrument in the locality in fostering interagency working and moving individual services towards integration. This example was returned to regularly when asked to comment on their experience of interagency working. All ISG respondents' organisations are represented on the CSC, with respondents playing a direct role in the main committee or its sub-groups.

In particular, the ISG respondents identified the work being undertaken by the CSC in developing a critical incident protocol interagency case working sub-group to inform the development of protocols around the sharing of information regarding cases and clients as being potentially useful for CDI's work, as well as other initiatives. One ISG member views this as being key in the move towards service integration:

"there are two problems for families: who to access and how to pick one rather than the other. I suppose it's within all our remit and the work we're doing on service integration is to provide that awareness and to help provide the awareness and the advice that goes with it and then at a professional level to decide what service is best […] I think the Children's Services Committee will have a big role in this, particularly around now that [it has] developed a protocol for data sharing and I think it will progress and develop the work that's being done a bit more. It'll bring it down to that sort of case management level"

(ISG interview 2)

ISG members were asked about the relationship between the CSC and CDI. All remarked that they complimented each other, with the CSC offering an opportunity, where appropriate, for CDI to update local and indeed regional agencies on the progress of their work, and any issues which may have arisen in the course of that work. Yet all were aware that the CSC is about South Dublin, and not just Tallaght West. Another ISG member remarked that it is extremely useful to have CDI as a member of the CSC, although it had been difficult at the beginning where misinformation and jealousy had guided many partners' perceptions of the Initiative and those related to it. However,

> *"that's where the ISG supported CDI – indirectly at the [CSC] meeting. Trying to break down the misinformation that other people had about CDI: 'listen, if it's going to work in Tallaght West then of course it will work in other areas. There will be benefit to those children'"*

(ISG interview 3)

Another ISG member highlighted that in relation to service integration and interagency working (in addition to the activity and role of the ISG directly), while CDI does a certain amount "such as bringing people together to talk about different perspectives and different ideas", it is the CSC which really drives interagency working:

> *"The CSC, it's the one that's really doing that sort of work [interagency working]. That's really where I see a lot of interagency collaboration taking place because they are really breaking it down into really practical things [.....]. Making changes to how practitioners work on the ground, I don't think it's so much CDI but the CSC."*

(ISG interview 1)

3.3.3.4 Perspectives on Factors Promoting and Inhibiting Working Together

ISG members were asked to draw on their experiences of working together at different points in their career and identify challenges and benefits of undertaking such work.

ISG respondents converged on the same sets of factors regarding what promote working together. The importance of clear leadership of the process, as well as participating individuals who can 'deliver' their organisation's activities to the collective, were identified as important factors (ISG interviews 1, 2, 3). Related to this was this issue of clarity around roles and responsibilities of each participant member (ISG interviews 1, 2). The notion of active members, rather than organisations who simply sit there, was also cited as a significant factor promoting working together (ISG interviews 1, 3). A good understanding of what each participant organisation does, and can do for the collective process, was also cited as important, as was the need to have a shared vision with realistic, tangible objectives (ISG interview 3). Familiarity with each other was highlighted as contributing positively to the process, as was a history or working collaboratively (ISG interviews 1, 3). This familiarity can lead to trust which in turn makes it easier to pool a variety of different resources (ISG interview 2). Across all three interviews, communication was referred to as the single most important factor. Communication around the table was perceived as important, but also communication which imbues the process away from the table –preparation of documents, email notification, circulation of agendas and reports.

All respondents identified that the barriers to promoting good working together were in many ways the opposites of what was outlined above. Resources, particularly in the context of staff embargos and reduced budgets were highlighted as barriers to promoting working together, especially where commitments had already been made (ISG interview 1, 2). Organisational and individual blocks were also cited as being challenges. The manifestation of such challenges can often be seen in poor or non-attendance of members at meetings, with the underlying cause often being a lack of vision regarding the potential to benefit from a collective process and the absence of buy-in at the managerial level (ISG interview 3).

When asked about what facilitated working together, self-selected respondents and CDI staff identified a number of common factors. The interpersonal nature of this type of work, and the importance of developing good relations with individuals in organisations, was referred to by a number of respondents, both in discussing their own experiences currently or reflecting on past experiences. Closely related is an organisational willingness to undertake interagency work, but personality is firstly important:

"I think its [personality] vital. From our point of view part of it is a culture within the team whereby it is seen as an important thing to do. If you've got an interest in developing interagency relationships and you're not allowed do it, it's not considered important by your team then it's harder to do. But if you have that permission but don't have the interest, the personality to do it, it doesn't tend to take off. If you don't have it it's a fairly superficial relationship."

(self-selected interview 3)

Clarity was also viewed as an important factor, clarity about what was to be achieved, as well as an appreciation of different resource dependencies and expertise of organisations. Finance was viewed as important, but other resources also had resonance like recognising the strengths of others.

CDI interviews revealed that the benefits of doing interagency working are numerous. Credibility is viewed as a key benefit to the Initiative of interagency working, as is the perceived improvement in the quality of services. However, the opportunity that the Initiative itself offers at "modelling a different approach" and leading the sustainability of the services more generally are viewed as key:

"we're not obviously here for the long haul, irrespective of us being here for another five years or not, we're not necessarily here for the long haul so sustainability […] of everything we do for our programme to get it running and also for the services out there that they can maintain those kind of relationships and models after we've gone"

(CDI Interview)

However, there is an awareness also that there are a number of significant challenges in undertaking interagency work. These challenges included getting organisations to follow through on commitment made around the interagency table, putting systems in place to 'do' interagency work, and openness and recognition regarding the need of agencies to do interagency work to fulfil their remit. Most significantly, perhaps, though was the amount of time required to foster and develop interagency working:

"I think one of the biggest challenges for me is time so you can say we're going to have these lovely integrated services but that all takes a lot of time"

(CDI Interview)

3.3.4 Respondents' Perspectives of Interagency Working and Service Integration in Tallaght West Generally

Within the ISG cohort, in addition to comments outlined above indicating the extent of CDI tasks to promote interagency working and service integration, respondents agreed that service integration in particular in Tallaght West had a long way to go:

"I think we're on that journey. [….] I think people are beginning to understand that more and more - service integration...I see that under the inter-agency work. I see it [as] more specific. […] I think people are understanding what we mean by outcomes because I don't think...most services and agencies haven't really focused on outcomes for children but obviously under the OMCYA policy and the Children's Services Committee and with CDI helping as well we are understanding what we mean by outcomes and therefore we understand a bit more about service integration to achieve those outcomes"

(ISG Interview 3)

"I think that's happening slowly. I think there's been changes and it's much better than it was. I don't think though, at least in my role, that it's at the level where it should be in West Tallaght at all. I think a lot of agencies are short-staffed and because of that need to protect their particular area. I do think though that it's open communication. I think it's looking at policies and how we can actually work better together and I do think that that's coming around, I just...and it's no fault of CDI, I think it's just the actual individual agencies have been kind of working as lone soldiers for a long time and now the idea of coming together, it just takes a longer time than maybe was anticipated originally"

(ISG interview 1)

Self-selected interview respondents were asked about their perceptions of interagency working and service integration generally. Each respondent was asked to draw on their experiences of working in their organisations, and working in the Tallaght West area. All viewed it as an important enterprise, as something worthwhile pursuing. For example:

"If we're trying to provide a coherent, cohesive service to families in this area I think the only way is collaboration of the services. Otherwise it's...I think it can be really confusing for families if they're involved in two or three services that have different approaches for one; two, I think sometimes...and it becomes evident, you know, it has become evident over the years, you'll have some families who are going to five and six services in a week. It's almost impossible for them to get to all the services they're engaged with and with a bit of coherent, cohesive inter-agency collaboration that can be overcome and a more cohesive care package or plan can be put in place that's doable for families"

(self-selected interview 1)

All self selected respondents recounted their experiences of engaging in various interagency enterprises. One respondent, working in the health sector and providing services to children and young people, identified a number of organisations with which they readily and regularly work with, including a number of youth organisations, the Gardai, social workers and other services in the HSE, schools, and in some cases the probation service. The nature of such working together centres on awareness of other organisations' activities, with contact being made based on (a) providing information and (b) prospective referrals. Generally, working together is viewed as informal:

"It's an informal 'they know us and we know them' agreement. We may go to different meetings […]. Many organisations with a role in our area [of expertise] meet up once a month. We get to know people through those kinds of networks, but no formal agreement, informal contact, a face with a name

(self-selected interview 3)

However, for this respondent, in three particular situations, there is an agreed formal process for some form of working together between this organisation and other organisations, with agreed protocols for referral and case management. Another respondent highlighted that their organisation is part of a formalised arrangement with a number of statutory and voluntary organisations in Tallaght West centred on the delivery of a programme. These organisations are both statutory and voluntary in nature. This respondent identified that through the programme, there is both interagency working and service integration, with many different organisations operating the programme using the "same approach, the same language" (self-selected interview 1). This initiative has both a formal agreement underpinning its operation and specific staff to support the initiative. Interestingly, this respondent noted that while some participants have withdrawn from the collaborative aspect at the strategic level, they still work to integrate their service with those of the other organisations by using the same programme. This respondent's organisation is reportedly viewed as having a "name for being collaborative" and actively seeks out strategic partners who can together "provide families with a more comprehensive and holistic service" (SSI 1).

A self-selected respondent also identified that their organisation regularly engages with a number of organisations in a collaborative manner. Indeed, this respondent was quite specific about what constitutes collaboration:

"Working hand-in-hand with another organisation or a particular goal. It's different than networking, which is much more informal. Collaboration is much more formal, that's how I would see it

(self-selected interview 2)

Thus, this respondent identified a number of specific instances where their organisation has collaborated for particular purposes, be it training or looking for particular service support for a client and client's family. In particular, this respondent identified the potentially key role that large organisations in the locality can play in instigating interagency working. The knowledge such larger organisations can bring in setting up communication processes, developing agendas and rationales, and carrying forward the process towards its goals, was viewed as very important and facilitative (self-selected interview 2). However, on a number of occasions this respondent's organisation has sought to work with other agencies but with no success. In these instances, the respondent identified that it was largely down to "not finding the right person to speak to" which caused the potential for interagency work to stall.

3.4 Wider CDI – Promoted Interagency Activity

This section details the activities identified in CDI documents which relate to promoting interagency working and service integration at the wider level within Tallaght West. The main methods identified in documents are the training opportunities, events and seminars which CDI provide to professionals in the locality, as well as the CDI newsletter. These activities are outlined before data from interviews relevant to these activities is presented.

3.4.1 Information sharing

CDI's structures such as the Board and the ISG allow members to meet and share information relative to CDI's work, the members' agency work, and general knowledge about activities in Tallaght West. Members are also informed of collaboration taking place outside of CDI, such as between Barnardos and An Cosán holding a meeting with all service providers with a role in the McUilliam area to consider what is available and anticipate needs. The capacity to have meaningful discussions with stakeholders on fundamental issues was noted during a Board meeting.

CDI also supports information exchange between local programmes and the SDCSC. For instance, the library was asked to do an input on their family literacy programme. A team meeting with South Dublin County Council was organised to present each other's work and identify areas where there could be more synergy. The practicalities of undertaking interagency work are also relevant and discussed. Concerns appear in relation to data protection in the context of sharing information between organisations – what information can be shared, with which organisations, and what process is to be put in place to do it.

CDI's monthly newsletters are also a mechanism of sharing information. They provide readers with an update of each of CDI's services as well as the ongoing research and evaluation. It also provides information relative to:

- training opportunities and conferences, may they be provided or coordinated by CDI or just advertised for;
- New curriculum framework (i.e. Aistear in November);
- The Children's Services Committee;
- Available funding;
- Jobs opportunities in CDI.

The Newsletters are electronically sent to CDI's contact list every month (with 31 published up to June 2010). They are also available via the CDI website.

3.4.2 Seminars

Information is not only shared during meetings. CDI also organises an extensive range of seminars and conferences covering a variety of themes. These events also permit information sharing between frontline staff, and provide an opportunity to network. CDI also provide a range of training events in conjunction with other organisations, as well as providing training associated specifically with its programmes. These events are viewed as being part of a training infrastructure for those organisations not large enough to provide their own training. A full list of the training events, workshops, seminars and speakers is provided in the appendix.

3.4.3 Perspectives regarding CDI's Wider Activities.

CDI staff were asked to comment on other activities which CDI does to support interagency working in the locality. A number of different examples were cited and their impact on interagency relationships:

> *"The monthly lunchtime seminars, it's not necessarily promoting integration but I suppose it's an opportunity, it's more a networking opportunity, perhaps that might in some indirect way support interagency working […] well the Christmas party, the annual general meeting and stuff like that. These are just things I know about but all the agencies are invited, all the heads are invited and it's both, I mean it works for both, it works as PR for us but it works as a networking opportunities for them as well*
>
> (CDI Interview)

This was echoed in another CDI interview:

> *"[in addition to service supports like communities of practice] well the lunchtime seminars and the interagency training, I mean they're always promoting interagency collaboration in some way, so I mean the coaching training where you had Garda, HSE, local authority and residents training together was probably quite unique, you know, eh and very powerful I think, you know I think the participants would feel that"*
>
> (CDI Interview)

Some ISG respondents also highlighted that the training opportunities and seminars offered by CDI foster interagency work at a basic level. In particular, one respondent identified the added value CDI was bringing to the locality by undertaking this work:

> *"I certainly think the joint training - those kind of lunchtime presentations or seminars - have been very useful, particularly for frontline workers to get to know each other in the local areas. So I think that has been very vital. CDI didn't need to do that, I suppose, but they have taken that on. They've seen it as a need for individual staff under each of the programmes but I think they've broadened it out much more than that to kind of broader issues for staff in the local areas. I like the idea [that] they've also provided accredited training like the mentoring programme which has been vital as well. I think that's been a really good example of inter-agency collaboration. And they've obviously, you know, been very involved in funding that and supporting that and guiding that and promoting it. And the awards ceremonies are also an important way of fostering kind of good relationships and people getting to know each other. [……] It's Networking. It's building up relationships and trust, I mean trust is vital as well, particularly when the work can be difficult so I think if people get...you know, build up those relationships and trust each other and know more about each other then, that will help [working together]."*
>
> (ISG Interview 3)

However, some were more sceptical than others regarding the impact such opportunities have on interagency relationships:

> *"I mean some of the lectures that CDI have given, I think that's brought people together but I don't think it's... I think it's giving them information, I just don't think it's really resulted in much change on the ground. […] I mean, that's brought definitely people together. It has allowed people to chat informally but I don't think it's really made much difference practically speaking"*
>
> (ISG interview 1)

Amongst self-selected respondents, there was varying degrees of knowledge and views about the role CDI has played in fostering interagency working and service integration. One respondent believed that it has played a strong role in sectors which it is strong, such as childcare:

> *"There would have been very little collaboration between, for example, the early years services and the primary schools. You might have been lucky if you got one kind of person who was willing to listen to you and...but generally speaking there was absolutely no integration there. I think what CDI have done has facilitated that and they've done that through...one, through basic introductions, saying this is the services that are actually in your area and two then, by...you know, by holding kind of meetings and...whereby you've had people come in and say 'Well this is what we do' and somebody else will say 'Well this is what we do and this is the service that we offer'"*

(self-selected interview 1)

Another respondent remarked that, although they are appraised of what CDI does through newsletters and email shots, it has not impacted directly on their organisation's tendency to work with other agencies or integrate services. While it may have provided the introductions and allowed individuals to put names with faces, the respondent is "not convinced that CDI has caused us to work with others. "It may have helped with it but I think we would've been doing it anyway" (SSI 3). Yet this respondent did single out the role of training and seminars in particular, as providing opportunities to meet people:

> *"Well the one [seminar] I went to was an opportunity to get to know some of the local services which was useful for me, to get to meet them. So that's the main thing and sometimes, and there's another one coming up soon and it will be a similar thing, it will be an opportunity to get to know people from different services that obviously probably share clients with me. Or at lease ought to"*

(self-selected interview 3)

Another respondent felt that, while information is important, given the strong education focus which CDI adopts, it does not thus impact in their organisation's tendency to work with other agencies (self-selected interview 2).

3.5 Conclusion

The purpose of this chapter has been to outline documentary and interview findings of the experiences of key informants regarding interagency working and service integration at two levels of CDI activity – namely CDI's internal structures and its interaction with those organisations not contracted by CDI to deliver services. Findings from the CDI interviews reveal a strong emphasis in principle and practice to fostering working with and between different organisations in the locality. This emphasis manifests itself in both the CDI structures, particularly the ISG, and in other activities and events put on by CDI for the wider service community in Tallaght West. It reveals that CDI is a learning organisation in this regard, attempting to identify what has worked and not worked in the context of promoting inter-organisational relationships at the strategic and service levels. The role of the ISG – collectively and individually – is important in supporting CDI's work. It also offers the opportunity for ISG members to share news and information between themselves. The role of CDI activities such as training and lunchtime seminars also serves to enhance the connections between organisations.

Chapter 4:
CDI Services, Interagency Working and Service Integration

4.1 Introduction

This chapter details the second tier of activity alluded to at the beginning of chapter three – that of CDI and its commissioned services.[2] Similar to what was presented in the previous chapter, the aim here is to outline each of the services which CDI has commissioned or is delivering in conjunction with other organisations in the locality before presenting data from a series of interviews held with service respondents and CDI staff with responsibility for the services. The aim is to chart the extent of interagency working and service integration in each of the services before proceeding to assess it in the discussion chapter which follows. Following this introduction, the chapter proceed to discuss each of the services in turn, detailing their development, aims, actions and the structures which underpin their operation. It then presents data from documents and interviews with CDI staff and service respondents regarding the interagency aspects of each service.

4.2 Early Childhood Care and Education (ECCE) Service

4.2.1 Development

From documentary analysis, it is evident that CDI undertook a significant process of consultation and working together with other organisations regarding the development of the ECCE services. In February 2007, CDI initiated a set of meetings with Barnardos, Preparing for Life and Young Ballymun in order to discuss common issues relating to the development of Early Years services. Those meetings were used to share information relative to the services, identify potential areas where organisations could work together (training, research forum), give an update on implementation and raise evaluation issues. Four meetings took place in 2007 (February, April, May, and September).[3] In September 2007, CDI also met with the South Dublin County Childcare Committee (SDCCC) to discuss the issue of premises for the programme, and how to increase capacity of provision. In November 2007, CDI undertook a consultation with the HSE, South Dublin County Council (SDCC) and SDCCC regarding the levels of unmet need and implications for the service roll-out. They also met with a number of pre-school service providers in the area (Naionra, An Cosán, Barnardos, Enable Ireland, Loreto Playgroup, Head Start, Busy Bees, SDCCC, St Anne's Preschool, HSCL, Brookfield, Fettercairn Little Ones, Partas) to provide an overview of the CDI strategy and its individual services, and discuss the number of childcare places available, fees, location and premises. Two working groups emerged from this meeting to discuss fees (CDI, Loreto Playgroup/Head Start, Barnardos) and locations (CDI, An Cosán, SDCCC, Barnardos). The services providers met again in December 2007 to update members on the outcomes from the working group meetings, and discuss the audit of training needs. Furthermore, an open forum was held in December 2007 to discuss what a CDI-supported ECCE service entails, in relation to what CDI are required to do as part of their commitment to OMCYA and AP, and to discuss the rationale for a manualised approach and what elements the manual contains. In January 2008, CDI met with the Department of Education and Science to give an overview of CDI progress and discuss issues identified. Parents Plus was commissioned to develop the manual and provide the training in September 2008.

4.2.2 Aims and Programme Description

The ECCE programme is a two-year prevention service that seeks to strengthen children's (aged 3-4 years) positive dispositions to learning so that they will be ready for the transition to school. The programme uses an approach called High/Scope, which enables children to learn through play. Each child is assigned a key worker (child care worker/facilitator) who provides continuity between home and service, and who has a special responsibility for the child's learning. The key worker undertakes pre-arranged home visits. Specialist primary health care in the areas of speech and language, dental and nutritional care are also features of the programme. The programme's overarching aim is to address a number of difficulties which are perceived to emerge which affect a child's preparedness for school, including the social, emotional and cognitive skills required for full participation in school.

[2] While the Community Safety Initiative is not a service as such, the term service will be used to refer to all five of CDI's services.

[3] These meetings occur on a bi-annual basis since.

The core components of the programme are threefold:

1. The Child Component – the provision of a broad-based curriculum to improve a variety of competencies, including early literacy and numeracy skills. Additionally, nutritious food is provided, along with opportunities for physical play and recreation. The service also provides health care support, as well as support from a speech and language therapist (SLT). This component also involves the development of child-specific follow-up work plans to be implemented with parents through home visits;
2. The Parent/Carer Component – through a parent-carer facilitator (PCF), parents are supported to address specific needs based on family values and desires. Parents are also supported to access further education, training or employment where appropriate. Parents' groups and personal development work also form part of this component. These involve building parents' confidence, and identifying positive behaviour episodes and building on them;
3. The Parent/ Child/Broader Community Component – involving addressing the needs of parents and children together through communication of child development principles. Additionally, it is anticipated that the programme will, through the collective benefits of its various activities, contribute to a reduction in antisocial behaviour, as well as providing an opportunity to link families into other aspects of CDI activities.

4.2.3 Operation

The ECCE programme operates across nine sites (originally seven up to September 2009[4]) on weekdays from 9am-1.15pm during the primary calendar year. The number of childcare workers per site is dependent on the number of children in each site (the programme provides for a staff:child ratio of 1:5, with each site also having one senior childcare practitioner and a parent/carer facilitator). Partas provides an ongoing financial forecasting support to ECCE service providers. Service integration is a core aspect of the ECCE service, realised through the role of the position of the Speech and Language Therapist (SLT). A senior speech and language therapist position is funded by CDI and employed by An Cosán. The SLT also works as part of the Health Service Executive (HSE) Community Speech and Language Therapy Team in Dublin South West and receives role supervision from the HSE Speech and Language Therapy Manager. The SLT reports to CDI's Early Years Quality Officer, An Cosán and the Speech and Language Therapy Manager and provides quarterly progress reports for review meetings, which are attended by both SLTs and CDI.

In addition to the provision of an SLT service, part of the senior SLT role is to liaise with other professionals and agencies including attending case conferences, individual education plan meetings and other progress management meetings as required. Time is allocated on each site for regular SLT/ECCE staff discussion. The SLT also allocates time once a week in each site for parents to come and talk as needed. She provided training to all ECCE staff (May 2009) and facilitated parental sessions in speech and language development. The SLT also liaises with the Parent/Carer Facilitators (PCF) regarding supporting parents in promoting their children's language development. She supports the PCF in running parent story times.

4.2.4 Structures

There is no steering committee or similar structure which guides the operation of the programme. However, CDI quality specialists support each site with monthly managers' meetings, as well as monthly communities of practice with all facilitators. CDI also undertakes on-site visits to discuss implementation and fidelity issues with each operator. PCFs meet on a monthly basis with CDI staff to provide an update on training and course delivery (High Scope, Parents Plus Community Course), identify subsequent training needs, share information about programmes and other developments (such as Acorn Parent Coaching Programme or the Primary Care Team (PCT)), discuss parental engagement, summer programmes, and evaluations. Themes such as the training, school transitions, home visits and referrals to the HSE are also discussed. The meetings are attended by the PPCC facilitator since February 2009.

[4] In April 2009, a meeting took place with Partas (a local enterprise and social economy company), SDCCC, HSE, SDCC, and Partnership regarding expansion for September 2009. Premises and potential managers/services were identified. As the number of children were low for the second cohort for the RCT study, the CDI Board agreed to the possibility of moving outside the Tallaght West area, but remaining within Tallaght, and a meeting was held with SDCCC regarding the inclusion of services from the wider Tallaght area (May 2009). The SDCCC supported CDI in engaging with providers from wider Tallaght (July 2009).

The ECCE service mirrors the aspirations of DEIS (Delivering Equality of Opportunity in Schools programme operated by the Department of Education and Science) by delivering an integrated, collaborative and focused service, and adheres to Síolta, the National Quality Framework for Early Childhood Education. Since September 2009, CDI in collaboration with the National Children's Nursery Association (NCNA), has a Síolta coordinator in place to work with ten early year's centres and junior national schools. The Síolta coordinator is funded by CDI. Training needs identified by the Síolta co-ordinator are discussed with the service manager and also forwarded to the CDI quality officer, who in turn work with the SDCCC and CSC (if appropriate) in exploring ways of addressing training needs. Cross sites meetings are held twice a year between CDI, Young Ballymun, Preparing for Life, the Early Years Policy Unit, and the NCNA to give an update on Síolta's implementation for each site and its evaluation and support the coordinator. Furthermore, a proposal is being developed with the Síolta Coordinator on improving the interface between Síolta, Aistear (the Framework for Early Learning) and the HSE inspector. The Síolta programme is not restricted to the ECCE programme. It comes under the Quality Enhancement Programme of CDI and is offered to all providers in Tallaght West and those outside of Tallaght West in receipt of CDI funding. Since November 2009, CDI holds regular meetings with a number of agencies (HSE, RAPID, SDCC, Barnardos, Partnership, Partas etc.) to discuss options available to support services post CDI funding.

Since September 2008, Community of Practice (CoP) meetings take place with the ECCE staff and the SLT. During those meetings, one centre presents activities they have undertaken (e.g.: greetings, coffee mornings, play therapy etc.) and discuss the strengths and weaknesses of their approaches. The CoP allows the staff to exchange information on courses, share ideas for activities, discuss a section of the manual each month, give an update on the Speech and Language training, High Scope Training, the Parent Plus Programme and the implementation of Siolta. CDI's Evaluation Officer gave a presentation on fidelity during one of those meetings. At the end of the year, an overall feedback is provided on the topics mentioned previously. In September 2009, it was decided to have CoP meetings every six weeks and to divide the group in two as nine centres meeting together was perceived to be too many. The topic of reflective practice was introduced in October 2009.

Between February and July 2009, ECCE managers met on a monthly basis (now meeting every six weeks). During those meetings, managers discussed training and seminars, the fees of the programme, shared ideas relative to the individual planning of family days, issues and positive outcomes relative to the delivery of High Scope and PPCC, discussed ways to support the PCFs, manual fidelity, and solutions for challenges encountered in the schools (e.g.: domestic violence, food preferences for cultural reasons, parental engagement). The service respondent indicated that the manager's meetings, alongside other aspects of the ECCE service such as the CoPs and seminars, provide useful opportunities to establish contacts and discuss common issues. One particular situation cited was the contact made to the psychology services regarding children's behaviour, with subsequent information being passed onto parents and staff for their information and practice (Service Respondent interview).

4.2.5 Perspectives on Programme Implementation, Working Together and Service Integration

Focus group and individual interviews with CDI staff inquired into the nature and extent of working together and service integration in the ECCE service. Staff were asked to describe the interagency aspects of the core operation of the ECCE service. Staff describe a situation where interagency working is not core to the delivery of the programme per se, but rather it was an aspect of the wider governance of the programme. So, for example, the position of the Speech and Language Therapist (SLT) was remarked upon as being interagency in nature while also fitting a service integration perspective, as were other health related services linking in with the organisation and service (CDI interview). However, the operation of the programme itself is stand-alone, with individual organisations providing the service. It differs from other CDI services where two or more organisations come together to implement a programme jointly. Individual commissioned organisations implement the ECCE programme on their own on a day-to-day basis (CDI). A similar depiction was set out by the service respondent. While CDI works to provide interagency opportunities and encourage links between organisations, and ECCE service providers in particular, the service itself is not co-delivered (ECCE service respondent interview).

The individual interviews with CDI staff revealed that in the ECCE service some working together occurs. As with many of the services discussed in the interviews, interviewees mentioned the research, discussion and planning phases for

the development of CDI which took place prior to 2007 as being the main catalyst for the establishment of the service. Regarding the operation of the service, communication as a form of working together, featured strongly in the description of the service, yet with some characteristics of other forms also existed:

> *"Well the Early Years programme would do all of the above [communication characteristics], I mean I definitely think it works towards goals, I can't see how it's not working towards a goal. But information exchange, through various means, I have monthly managers meetings, I have a monthly meeting with the parent co-facilitators, we've monthly community practice so that's an opportunity for all staff and all practitioners to get together to share information, we do a bit of reflective practice, all that kind of stuff, just looking at the programme and it's implementation. Then you have the regular lunch time seminars or any training, sometimes I get notification of a training that's coming up and I'll forward it on to the service managers to see if they want to take it up. So anything that's coming down the line, maybe be it funding from the government, be it information on some South Dublin County Council committee, like I'm quite linked in with all of those agencies so anything that I get I would pass it on to the Early Years "*

(CDI interview)

At the operational level, each service is characterised as working largely on its own, with CDI aiding and supporting at particular junctures, but the implementation is viewed as "probably mostly done through CDI and each service" (CDI interview). However, CDI does use its links and contacts with other organisations, such as the HSE, to support the work of the ECCE services generally, and also in relation to meeting particular needs or requests. This is also the case where organisations refer into the ECCE service. CDI spoke of undertaking support work with each service, including for example when there was some confusion about referrals (in the initial stages of the service operating). Such issues are addressed formally in the context of a one-to-one discussion or informally in the context of a Community of Practice meeting or at a managers' meeting (CDI interview).[5]

When the extent of service integration is considered, it appears there are characteristics of both service coordination and service integration occurring. At the coordination level, the process of assisting families to access services through the provision of information occurs. Individual service staff link with other ECCE services, and are encouraged to do so by CDI through the provision of contact lists and details (service respondent interview, CDI interview). Service staff also link with parents both formally and informally to discuss the progression of children and any issues which may arise. The PCFs' role includes interacting with children and parents, completing parent forms, doing home visits (where they hear the thoughts of parents and issues affecting them) and delivering High Scope and the Parents Plus Community Courses (PPCC) to parents.

The integration of the SLT service into ECCE was deemed very straightforward by CDI (CDI Interview), while the service respondent also viewed the SLT as positive aspect of the service:

> *"Within the service, we have access to a speech therapist which is integrated into the service. Parents don't experience that as something additional which they have to go and attend somewhere else, or go on a waiting list somewhere [.....]. Possibly they didn't at the beginning [view it as integrated], but when they realised that the person, the therapist, would come into the room, be in the room with the children even when they're not specifically working with one child. So they [parents] would be used to their face, so where people might have been a bit reluctant at the beginning, maybe not acknowledging that their child had a speech problem, it became easier to work with them because it was a face they knew. It wasn't like another situation where somebody would be encouraging them to go and make appointments, through different avenues. It was there in front of them, so it was much easier to engage them [parents] in it [....] It is much easier to say 'yes' to that rather than go to another service"*

(ECCE service respondent interview)

[5] The support aspect of CDI's work will be explored in greater detail in the next process evaluation report.

ECCE services also have links with other organisations in the area through the referral processes. While the role of the SLT in the provision of the service is viewed as key, with the SLT being integrated into the operation of the ECCE service in different sites, there are characteristics of service integration elsewhere on a needs basis:

> *"So there's always that tool, communication between be it social work department or be it with –[….] visiting teachers for the hearing impaired or visually impaired, they're probably the two prominent ones where they come out quite a lot to the preschool and work with the staff. They work together in delivering a service to the child. So I suppose it's there if it's needed and it works very well, so if a service needs, ok, 'we need this expertise, we need to link in,' it works great […] Every service has made referrals. So it works when it's needed, it's kind of a needs basis"*

(CDI interview)

CDI worked in the early phase of the ECCE service to establish links with potential referrers. Once the ECCE manual was drafted a form was developed which permitted the service to contact the public health nurse so as to get children into the service. A similar form was developed for referrals to the SLT service (CDI interview). More generally, CDI provides support for referrals to other agencies, providing information (particularly at the beginning when some services were not fully aware of other services in the area or where information returning to the referring organisation/individual was not forthcoming) and in some cases being used as leverage:

> *"I mean some services struggle trying to make referrals to agencies, maybe in terms of referrals getting communication back from the referral agency, sometimes it's a bit unclear and I might get a call saying look, you know, who is the best person I can get to? I suppose sometimes I'm used as a leverage for some services if you like to see or sometimes people just run things past me just to see what's the best way to go about things"*

(CDI interview)

This aspect of the service was also referred to by the ECCE service respondent:

> *"It's (contact with primary care services) been largely facilitated by the CDI programme. […we would have] been given contact details for them and been encouraged to use that contact, even for advice[…] we have access to speak to her and we have used that and it's been great. So, 'this is a situation with a child and what do you think,' and we've been given a bit of a task to do with the child then see if the problem progress or resolves or whatever, so that's good."*

The ECCE service respondent was asked to identify and comment on other activities (outside the operation of Doodle Den) which CDI undertakes to promote working together amongst organisations. Similar to other respondents, the ECCE respondent identified a number of activities, such as training and other similar events, which permit organisations and individuals to come together:

> *"Then the training that CDI provided is for all of the projects that they work with so […] as any trainee you're meeting a varied mix of staff who work in all other projects. So, not only for me but for the staff that work here, the other projects there they would know […] the community of practice also, where you're bringing people together and staff can have a link and get support and there's an opportunity for discussion. [….] [Previously] it was down to yourself to make the links, whereas CDI made the links easier I suppose, for me"*

(ECCE service respondent interview)

4.3 Doodle Den

4.3.1 Development

In the process of planning Doodle Den, CDI met with a representative of the VEC (Vocational Education Committee) to discuss the procedures for linking parents who would like to develop their own literacy skills, learn about what the adult literacy services the VEC provide and discuss approaches to engaging parents in supporting their children's literacy development. It was suggested that CDI could link with the VEC for training facilitators around adult literacy or using facilitators with experience working with parents on literacy courses. CDI also met with a representative of NALA (National Adult Literacy Agency) to discuss CDI's parent component of the proposed Doodle Den programme. The focus here included the issues of training and awareness raising amongst parents about their children's literacy, to identify methods of engaging parents in their child's literacy and to discuss family literacy more generally. Interviews with CDI reveal that, like many of its other commissioned services, Doodle Den was developed through the needs analysis and strategy development undertaken from 2003 onwards as part of developing CDI. CDI also worked with SDCC's library service in Tallaght in January 2008 to discuss how the library could support the programme. Information was shared about the content of the programme and it was agreed that CDI and the library would work together on the parents' component and the children's opening of the library. It was also suggested that the library could order books for the programme, using the 20% discount, and invoice CDI. Additionally, family sessions have taken place in the library.

4.3.2 Aims and Programme Description

Doodle Den is a one year after-school programme aiming at making moderate improvements to children's literacy (children aged 5-6 years), contributing to more frequent school attendance, more learning outside of school and enhancing relationships with family and peers. The programme is aimed at pupils who have commenced senior infants class in Tallaght West and who have been identified as having difficulties with one of a number of issues, including letter identification, writing vocabulary, phonemic awarenesss and text comprehension. Children can be referred by agencies or parents to the programme.

There are three components in Doodle Den:

- The Child Component – which focuses on combining fun activities with developing literacy skills through learning about sounds, families of words and vocabulary words;
- The Parent Component – comprising six sessions per year involving a mixture of active learning, best practice, active interaction and discussion;
- The Family Component – comprising of opportunities for parents to observe child sessions, share reading activities as well as an organised family activity.

4.3.3 Operation

In 2008, CDI commissioned Citywise Education (five groups) and An Cosán (two groups) to deliver the programme across five schools. The delivery of the programme commenced in September 2008. The programme is delivered three times a week for one and a half hours after school for the duration of the primary calendar year. However, it is delivered in an environment different to that of the classroom, with two co-facilitators – a teacher and a youth or community worker. The programme is delivered through a network of schools in the locality. These schools are Scoil Caitlin Maude, Scoil Cnoc Mhuire in Killanarden, St. Brigids in Brookfield, St Thomas, Jobstown, St Maelruain's in Jobstown, Sacred Heart Junior School and St. Anne's National School. The Citywise programmes are held in both their own premises (2 groups), Scoil Cnoc Mhuire (2 groups) and St. Brigids Junior school (1 group). An Cosán deliver their two programmes in Sacred Heart Junior School and St. Anne's National School.

4.3.4 Structures

Doodle Den is supported in its implementation through monthly manager meetings between commissioned organisations, quarterly meetings with schools. A monthly Community of Practice (CoP) has been established for the facilitators. Those meetings allow service facilitators to meet and share information. A range of themes are discussed during the CoP meetings: identify challenges and successes; develop an understanding of what influences children's behaviour; identify processes which support children participate in the programme; reflect on the programme's implementation (duration,

attendance, programme elements); review work with children, parents and at family sessions; review target outcomes; identify means to improve co-facilitation; identify training needs; and share tips and ideas for activities. In February 2010, a self monitoring tool and videoing of sessions were introduced.

4.3.5 Perspectives on Programme Implementation, Working Together and Service Integration

Doodle Den is delivered by two sets of staff, each drawn from a different organisation (school and youth work centre), so immediately there is some interagency working at play. The programme is implemented by a teacher and a youth worker co-delivering the programme (CDI interview). When asked about the working together continuum presented at the end of the literature review, CDI interviewees felt the service, and its operation in particular, is not clear cut, but rather there are different aspects of interagency working on the continuum present. For example, aspects of full partnership are present, in the form of a formalised agreement to deliver a service, i.e. organisations are contracted to deliver the service. Collaboration occurs in that the organisations work together in a planned and systematic manner. Each term is planned carefully with the organisations delivering the programme. Cross boundary planning and implementation (which is characterised as jointly or separately taking action on an agreed plan, identifying monitoring methods, review processes, mutual feedback) resonates with the operation of Doodle Den also:

> *"Yes, so I would say very much from a point of view of our service providers we do that regularly. We do have a mechanism with the schools where we meet them on a termly basis to get, not so much the actions because really their actions are maybe give us a room, it's not like they're, now obviously they're giving us a teacher as well, so there's some agreed actions but, we do review how the programme is going, are there any issues and so on"*
>
> (CDI interview)

To support the delivery of the programme, representatives of Citywise and An Cosán meet with CDI on a monthly basis to support the programme's implementation. Those meetings allow them to:

- Share information relative to the programme's implementation (number of sessions delivered, duration and attendance);
- Identify training requirements, costs and timeframes;
- Plan parent and family sessions, summer programme, and end of the year events;
- Identify resources (books, laptops distributed to An Cosán and Citywise);
- Discuss parental engagement, the programme's content, and evaluations;
- Plan referrals' timetables and discuss criteria;
- Raise issues raised by the facilitators such as those in relation to the manual, the amount of time required to prepare and attend meetings, or the dosage of the delivery. In March 2008, CDI, in consultation with schools, service providers, NEPS, and other professionals, adjusted the dosage of the programme to 1.5hrs three times a week.
- Provide some feedback on the Community of Practice meetings.

CDI also works closely with schools in the implementation of Doodle Den. While not directly commissioned to provide the service, the schools are instrumental to its delivery. CDI have an agreement with each school to release teachers to co-deliver the programme, with CDI also paying these teachers through the contracted organisations. The role of the schools is, however, more than simply providing teachers, and a level of cooperation is perceived to occur:

> *"we meet, we share information, obviously there are certain things that we need their support in to deliver certain elements of the programme - the parent session in the school, the room at that time - , so there's […] definitely is cooperation. [It's a] relatively informal arrangement […] doesn't have maybe the same formality of a contracted service but I suppose it's clear because we kind of go back."*
>
> (CDI interview)

CDI links with schools involved in the programme also to aid and contribute to the assessment of children who are undertaking the programme. This has involved liaising with teachers around particular needs of pupils – for example whether they need a special needs assistant for the programme – while also making teachers aware of what children are learning in the programme so as to aid positive reinforcement of what is being learned on the programme (CDI interview). While the schools are not directly contracted for Doodle Den, CDI meets with schools and teachers to review the delivery of the programme and address particular issues which require the school's support, such as the use of facilities for the delivery of the programme. In this regard, CDI expends energy in working directly with the schools – one half of the delivery mechanism for Doodle Den – as well as meeting with the contracted organisations, Citywise and An Cosán, individually and together.

Each of the service providers also holds two meetings per term with the school teachers and principals to discuss the programme's implementation. In the first meetings, in which CDI also participated, CDI clarified how the test site and roll out would operate, specifically around the role of the school as a service provider and CDI's role in commissioning services. It also underlined that the partnership approach between agencies and schools was fundamental to the deliverability and sustainability of the service. The importance of these meetings is to be found in the desire of CDI to promote sustainability of services in the locality into the future. Such interagency structures and processes serve to underpin the implementation of the programme:

> *"I think for An Cosán and Citywise the structures that were put in place were that with each other that we had these joint meetings because we found they were mutual learning [….].then also at a school level we went with the facilitated, kind of reaching agreements with principals about teachers being released, about if they had a role, you know, as it evolves I suppose our role needs to reduce and their role needs to increase, they're doing a lot of more of that negotiation where in the beginning we would have helped them to do that and use the memorandum of understanding as a template where they got a written agreement between the school and then to sign, 'look I'll agree to do this, you agree to do that'*
>
> (CDI interview).

The service respondent also commented on the nature of the relationship between the schools and their organisation. From their perspective, the ongoing relationship with the schools is rather informal, with contact being made on a needs – basis. Otherwise, information and contact is managed through the teacher and youth facilitator:

> *"We would have youth facilitators going on to school sites three times a week so they would see them and one of their staff would be working very closely with the facilitators so they [the principals] would say 'look don't worry, the teacher's keeping me informed, don't worry if I'm having a problem I'll let you know.' It tends to be that, which is understandable because they're busy and they certainly had initial meetings and we'd meet them maybe once a quarter or thereabouts and they are interested, they just, they don't want a lot of detail."*
>
> (Doodle Den service respondent interview)

However, respondent did also indicate that, in a more general sense where there were relationships between their organisation and schools in the past, Doodle Den has improved these relationships while also aiding the development of new ones.

The extent of service coordination/integration in Doodle Den was also discussed with CDI staff and the Doodle Den service respondent. The service respondent indicated that service integration in Doodle Den is perceived to occur, with "the different services integrating [youth work and education] with one having a spin off benefit to the other." However, the absence of a follow-on programme emanating from Doodle Den was cited as a challenge to any integration agenda:

> *"But from the young person's point of view, the families', the parents' point of view, at the end of the year of the intense literacy development, there' s nothing you know what I mean […] there's no kind of step down program or there's nothing else to be referred into really"*
>
> (Doodle Den service respondent)

CDI Staff mentioned that while it did not have similar features to other services such as ECCE (with the integration of an SLT into the service), Doodle Den addresses the additional needs of children and parents if needed:

> *"It's not a casework programme, we're not caseworkers, it's an after school service. So assisting family members, this would happen so say if we knew one of the parents maybe had literacy difficulties and maybe that came out at a parent's meeting, we don't provide that service but we would [….]. I know what we would seek to do is work to look at well what do we need to support their participation. This kind of process of, we do have a policy obviously if the child has an identified need that we can't support that we would look to refer them to the appropriate or the parent but that's rare in when it happens because a lot of the time if it's an educational psychology assessment the child needs the school has already requested it. So we would maybe be aware say from a referral form that a child has difficulty with certain things. We may then go back to the school and say look, what's happening? They may say well actually they're getting assessed, they have a special needs assistant in class maybe that's something you need to consider for your programme, you know, that kind of thing"*

(CDI interview)

In this regard, CDI are working with both commissioned organisations and schools to develop a framework around sharing information and also to develop procedures to so as to improve the ability of children to participate in the programme based on their needs. On ensuring timely and adequate referrals to other services:
"We're not the primary professional working with these children or the families but obviously we have a responsibility to ensure that they can actively participate in our programme and also if there's an identified need we support them to get it. So what we're trying to do for both programmes is draw this line where we'll know well this is what you need to do, so that starts with the referral process, if you get a referral and it has an identified need but also what you do through the year so, I mean it has been happening and staff liaise with their manager about it but I just would like it to be a little bit more clear" (CDI interview).

Regarding the wider aspects of CDI work, such as training and seminar events, the service respondent identified that CDI is playing a role in fostering organisations in the locality working together:

> *"CDI is certainly not preventing it, I mean there is sort of typical CDI training sessions or interagency meetings or whatever function which are sort of an opportunity for networking more than anything else. It wouldn't be widely different from attending something in South Dublin County Council where you have a number of different people in different agencies there. There are opportunities there I suppose, it certainly hasn't not made things easier. And then the training opportunities too for some of the facilitators would certainly have helped that, again, because you're meeting people on the training programmes from different agencies, now again you may say that even if you weren't in the training with CDI some of the staff who are doing the CDI training would probably end up somewhere like Tallaght Youth Services or one of the other agencies so they'd make some of the same contacts in any case"*

(Doodle Den service respondent interview).

4.4 Mate-Tricks

4.4.1 Development

As outlined with other programmes so far, Mate-Tricks arose out of the broad planning process which occurred in relation to establishing CDI as an entity. In addition, In September 2008, Archways was commissioned to develop the manual and provide training. Foróige was commissioned to deliver the seven groups. Archways was also contracted to support CDI in the implementation of the Mate-Trick programme in its first year. The organisation's role was to work with CDI's Quality Specialist to support the programme delivery. This involved:

- Group planning and facilitating through participation in the Foróige team planning meetings;
- Co-planning and co-facilitation of the communities of practice with CDI;
- Support of programme delivery and identification of supports required for implementation;
- Supporting a working relationship with authors of Strengthening Families and Coping Power and coordination of training of facilitators;
- Building local capacity. Working together with CDI and Foróige, Archways coordinated a two-day training programme for Mate-Tricks facilitators in Coping Power rationale and techniques.

Archways updated CDI on the support it provided in developing the manual and associated training through quarterly reports and follow up meetings. A final review meeting was held with Archways in relation to the manual in October 2009.

4.4.2 Aims and Programme Description

Mate-Tricks is a one-year prevention and early intervention service that aims to make moderate improvements in children's (aged 8-9 years) pro-social behaviour through addressing issues of self regulation, perspective taking and problem solving. The programme blends elements of two programmes – Strengthening Families Programme (SFP) and Lochman's Coping Power Programme (LCPP). As with some of CDI's other programmes, Mate-Tricks has three components:

- A Child Component – underpinned by both SFP and LCPP, which provides a curriculum for children to develop skills such as awareness of feeling, problem solving and perspective taking;
- A Parent Component – which comprises six sessions a year, which are a mixture of active learning, modelling best practice and discussion so as to explore ways in which parents can support their children's learning;
- A Family Component – which provides opportunities for parents to observe child sessions, parent child activity suggestions and an organised family activity per term.

4.4.3 Operation

The programme is delivered by Foróige to children from five schools: St Anne's, St Aidan's, Sacred Heart, Scoil Cnoc Mhuire and Scoil Caitlin Maude and is delivered in both school sites and community settings. It is delivered by two youth work facilitators from Foróige on all sites except one, where a CDI staff member is also part of the delivery team. It operates twice a week for one and a half hours after school in line with the primary calendar year.

4.4.4 Structures

The operation of Mate-Tricks is supported by monthly manager's meetings between CDI and Foróige to prepare and oversee programme implementation. These meetings serve to underpin the reporting structure between the two organisations, whereby Foróige submit formal reports to CDI on an bi-annual basis. These reports cover a range of issues such as referrals, attendance, implementation of the manual and fidelity, and financial issues. Quarterly meetings with schools also occur. Foróige also meets with schools individually to discuss issues pertaining to the programme, including for example referrals, promoting the programme and highlighting ways in which teachers can support it.

Communities of Practice were initiated as part of the Mate -Tricks programme in December 2008. Themes discussed in early meetings included standardisation of processes across the delivery sites, sharing information and ideas between staff, and clarifying issues which staff had at that particular juncture. One early COP meeting also provided an opportunity for attendees to meet Archways staff (February 2009). More generally, COPs provide an opportunity to discuss a range of issues affecting the implementation of the programme, or arising out of its operation. These include manual fidelity, the RCT evaluation study, implementation challenges encountered, and families with more than one child in a CDI service. In recent months, a reflective tool for quality and fidelity of implementation was introduced via the COPs (January 2010), as was the introduction of video sessions to highlight examples of good practice (February 2010).

4.4.5 Perspectives on Programme Implementation, Working Together and Service Integration

Foróige implements the Mate-Tricks programme in conjunction with schools. However, the relationship is somewhat different to Doodle Den or Healthy Schools in that the content of the programme is delivered solely by Foróige staff:

> *"No, it's two youth workers delivering it. So they go from the same profession. As I said we link in with the school around that kind of stuff but there's no other [involvement]"*
>
> (CDI interview)

The nature of working together and service integration in the operation of the Mate-Tricks programme is complex. While the programme is delivered by one organisation with CDI support in elements of the delivery, there are a number of organisational linkages as a result of the programme. Schools, being the main conduit through which children enter the Mate-Tricks programme, are key in terms of wider governance of the programme and relationships between organisations. There are certain activities where school staff get involved, for example providing feedback on their perspective on the children's learning and behaviour. In addition, teachers are encouraged to assist the children set goals for themselves in the classroom, as well as supporting parents in aiding the setting of goals in the home (CDI Interview). Moreover, CDI plays a role in encouraging teachers to extend the learning from the intervention group to wider classroom settings and work with Foróige to identify follow-on programmes for children through their [Foróige 's] regular programmes:

> *"We meet with teachers every term, we tell them the skills, we do a lot of interagency work [work] in terms of, we ask teachers to set goals for the children, so to help transfer the skills outside the group. We do a group with parents; we also do teacher interviews for perspective, taking that kind of stuff. Foróige has services but there is a year gap but what they have tried to do is that at the last session of our kind of Mate-Tricks we give the children information about the different groups and some children actually have been able to join, they slightly changed their rules to let some children join but it's not, that's kind of on a group by group basis"*
>
> (CDI interview)

Hence, communication is key. However, other characteristics of the programme's operation and wider environment appear to ascribe more closely to higher level elements of interagency working as set out in the continuum from chapter two:

> *"Yeah, so that's [coordination – organisations working together in a planned and systematic manner, maintaining independence but contributing to shared and agreed goals] definitely the service providers, for Foróige that we work together in a planned systematic way for sure. They are obviously independent, they'll refer it back to their board about particular decisions, [we'll] refer back to [our] CEO, board, about certain decisions but we have an agreed agenda and plan"*
>
> (CDI interview)

Yet, CDI are also conscious that Foróige is a commissioned organisation, so there are elements of full partnership present, in that there is a contractual obligation on Foróige to deliver the programme (CDI interview).

Although the service is different to Doodle Den, in that it is solely delivered by the youth workers, Foróige works closely with schools and other organisations for particular reasons related to the operation of the programme. This linking with schools is not new for Foróige. However, the Mate-Tricks programme has resulted in the organisation connecting with children of a younger age and thus working with schools of children which they may not have worked with before:

> *"I suppose that very active partnership with local National Schools, that very close relationship would be kind of a newer aspect that would have come about[as a result of the programme]. In terms then, definitely in terms of negotiating space and the use of space. It's been kind of working with a number of resource centres and the committees there and a number of venues."*
>
> (Mate-Tricks service respondent interview)

Links with organisations would largely be on a needs basis, or through answering queries about referrals to the programme (Mate-Tricks service respondent interview).

In June 2009, it was agreed that Foróige would establish links with schools in terms of giving information on the programme once per term, and link in with the teachers to share information. CDI support Foróige to provide information to schools which sells the programme and highlights ways the teachers can in turn support it:

> *"we review it, we'll go back now and review how you think the year went, what can we do to support more collaboration? So last year we did that, they said they'd like more information about the programme so we did these information packs, you know. So that's developing in terms of cooperation but it isn't, you know, it's very early days in terms of programme delivery"*

(CDI interview)

The service respondent also remarked that, in relation to the delivery of the programme, the links with the participating schools can be both formal and informal, and this is very dependent on the personalities involved. Principals would always be informed if certain things associated with the implementation of the programme were to happen in this school (service respondent interview):

> *"It's [relationship with schools] very much personality driven. We don't have a format that we stick to. In some schools […] nearly all of the information will go through the Principal if that's their preference. If they prefer to go through a senior class teacher that's also kind of accomodated, or the Home-School Liaison. But yeah, there would still always be a formal aspect to it in that the Principal would be informed if we were hoping to hold meetings for example, that they give their go ahead that if something is to happen within the school or if we're to approach teachers to engage them in something, that the Principals have given their go ahead to that. That they're happy with that"*

(Mate-Tricks service respondent interview)

CDI has supported the implementation of the programme in a wider sense through participating in the monitoring of the programme, and with the participation of one of its staff members in the delivery of the programme. These meetings allow brainstorming on particular issues, such as the challenges of getting children into the programmeand of implementation, while also fostering an ethos of interagency working:

> *"I suppose at the moment while interagency collaboration, whatever, wasn't necessarily identified by An Cosán or Citywise or Foróige formally saying we need to do more work on this, it was something we would have said, we're doing some work, we need to do more on it. So I suppose that's a big part of how we put it, is that we keep it on the agenda"*

(CDI interview)

CDI and Mate-Tricks managers are currently building a document outlining how facilitators will work with other statutory and non statutory organisations.

Elements of service coordination/ integration also appear to be present in the operation of the programme. Foróige seeks to refer children to its own programmes once Mate-Tricks concludes (for example Big Brother Big Sister)(service respondent interview). CDI and Foróige support the referral of children and parents to other services when needed (CDI interview, service respondent interview).. However, regarding full service integration, while there are links between the delivering organisation and the schools, there is "very little service integration" in the sense of seamless services at the moment (CDI interview). The service respondent also indicated that they can have a role in referring children and families on to other services should the need arise. However, given that most children are referred from schools into the service or the organisation more generally at a later stage, school staff have a role in such referral processes, and thus the service integration potential is limited, albeit not absent:

"The school tends to be very aware of what's going on and will fill us in as to this child is involved in this and this or a parent might say that 'my child is going to counselling'. So we might be aware of that from the start. I suppose if a child presents with something that we feel we need to refer them we will, yeah"

(Mate-Tricks service respondent interview)

4.5 Healthy Schools

4.5.1 Development

The origin of the Healthy Schools Programme is to be found in the widespread consultation exercise with the community and agencies in 2003 leading up to the development of CDI's strategy. Initially, a working group was established to develop the manual for the Healthy Schools Programme. This group was composed of members representing CDI, the HSE, SDCC sports, Tallaght Partnership, and St Aidan's National School. Meetings were held throughout 2007. CDI worked in relation with HSE to agree on the expertise available and the practicalities of implementing the 'specialist primary health care' aspects of the Healthy School services.

4.5.2 Aims and Programme Description

The Healthy Schools Programme works towards identifying where improvements in the current healthcare referral pathways can be made. The aim is to support a seamless access and improved uptake of services thus ensuring appropriate and effective engagement with services. The programme emphasises the importance of the school as a location for improving health outcomes for children. To this end the programme has a number of core components:

- To develop a database and network of child and family service providers;
- To coordinate what is already happening in selected schools through health promotion activities, school completion programmes and the work of the Home-School-Liaison Officers;
- To develop and agree protocols with service providers, principals and families regarding sharing information on referrals and appointments with health and social services;
- To identify barriers to engagement with and access to services and identify and action appropriate responses;
- To engage parents and other family members through activities;
- To liaise and negotiate with external agencies regarding the implementation of the programme so as to achieve its objectives.

4.5.3 Operation

The Healthy Schools Programme is a whole-school approach to improving children's health. As such it is delivered on a continual basis throughout the school year in five schools across two campuses- namely Scoil Cnoc Mhuire junior and senior schools, Croi Ro Naofa junior and senior schools and Scoil Chaitlin Maude. The implementation of the programme involves the integration of Healthy Schools Coordinator (HSC) into each school campus. Each HSC is employed by the school, works with the school principals, teachers (as teachers and other roles e.g. home school liaison), families and community services. The HSC role is full-time working both during and outside the school year. In May 2009, CDI met with each of the school principals to discuss principal's views and expectations on Healthy Schools Programme, and clarify roles. The coordinators have organised a number of activities in the schools, including a skipping competition, weekly dance classes, sensory play and Tae Kwon Do classes.

4.5.4 Structures

Like other CDI programmes, the Healthy Schools programme is supported by CDI staff who have regular contact with HSCs and principals. In addition, a Healthy Schools Steering Committee (HSCC) meets monthly to review progress of the programme and highlight issues to be addressed. The committee is composed of five School Principals, CDI, two SDCC (Social Inclusion) representatives, two HSE representatives, the Healthy School Coordinators, parents, and two Home School Community Liaison Coordinators. The meetings started in November 2008.

The HSSC is the decision making body which oversees the development and delivery of the HS programme, and oversees the work of the Healthy Schools Coordinators. It guides and drives the work of the Coordinators to ensure that the objectives as outlined in the Healthy Schools Manual are achieved. The Healthy Schools Coordinators report to the committee on progress to date, actions undertaken and issues identified. In December 2009, it was agreed to undertake a needs analysis with teachers, parents, and health personnel in the area. The committee also devised plans to include collective pieces of work and community focused activities. During those meetings, information is also shared on referral process, training requirements, and issues arising in schools. In June 2010, a Lucena clinic (a local child and adolescent mental health service) representative came to the meeting and clarified their organisation's referrals process. The steering committee provides CDI with quarterly reports.

4.5.5 Perspectives on Programme Implementation, Working Together and Service Integration

On examining the workings of the Healthy Schools programme, interviews with CDI reveal that there is a range of working together activities in the implementation and wider governance of the programme. At the heart of it is collaboration:

> *"Collaboration I suppose definitely, I'm just thinking of the steering committee and where they're at […] they each have a distinct role and I suppose the principals are quite particular in what they want for their school and what they want for the programme and they're different to a different principal. So the external agencies for example would probably have a fair idea of more of a common idea of how the programme should be going but the actual implementation of it can be a little bit different. So that's probably why […] the boundaries are blurred definitely. And the weaker partner is supported, absolutely. That would certainly be. Everything is voluntary anyway, well the coordinators obviously are salaried, they're paid but I mean the external agencies are all voluntary"*

(CDI interview)

Yet there are other aspects of the operation of the steering committee which reflect different forms of working together. Collaboration was cited as being present, particularly in relation to the implementation of one-off sporting events organised by agencies involved in the HSSC, or by external agencies who liaise with the school and coordinator (CDI interview). The instance of a golfing outing for children and the pooling resources to deliver the outing through the use of contacts to gain the provision of a bus, were cited as an instance of collaboration.

The service respondent indicated that the effectiveness of this committee - and the programme in its initial stages - had been curtailed by a lack of clarity and understanding about what exactly the programme was to be about:

> *"So you've got like maybe two or three people in CDI and then you've got Principals who are effectively your boss and then there's me. So we've got a number of people who all have a different view and an understanding of what the project should be about and what's my role and what's someone else's role and they don't all match [……]. We'd have steering committee meetings, say, every month or six weeks and all of the principals and CDI staff then would attend that and myself and the other Healthy Schools person and we'd give a report on our work and then maybe kind of advise on the side for the next couple of weeks' work as well. So it has been quite challenging because everybody's kind of understanding of the role is different. And kind of still is to an extent as well. It has made a dent somewhat but still a little bit, things that I would have seen as very important pieces of work that I have done and would have been really kind of stood behind, someone else might think that that was a waste of time and that I shouldn't have done that"*

(Healthy Schools service respondent interview)

The two healthy school coordinators (HSCs) are the main conduits through which much of the programme is implemented. Each coordinator is employed and line managed by the school, with the post funded by CDI. However, CDI does also contribute in role support for each coordinator (Healthy Schools service respondent interview).

The coordinators started working in the schools in October 2008. The service respondent indicated their two main roles:

> *"The main kind of role is support. Support families in attending health appointments locally. So it'd be like Speech and Language, dietician, dental appointments because it was found through CDI's research that there was low uptake of all of those services in Tallaght. So even though there was long waiting lists and a lack of services, often when the children's appointments came up they weren't making them [….] I suppose, and that was where we were going to come in and support families to get there. The other part of our role as well is to organise health promotion - activities and talks for parents - to improve the health and well-being really of families in our school"*

(Healthy Schools service respondent interview)

They work with the School Principal, teachers, families and community based services and initiatives to improve children's health and access to primary care services. A HSE role support is provided by a HSE Community Work Team Leader. The role support person meets with the Healthy Schools Coordinators every six weeks, rotated between meeting collectively and individually. Reports on the frequency of meetings, general content and future plans are provided to the Steering Committee annually. In September 2009, it was noted during a Healthy School Steering Committee (HSSC) that the HSC role fits well with the school teams and processes.

The incorporation of the coordinators into the schools was also a difficulty in the early stages:

> *"You have the whole, just having a non educational person in the school and trying to get them fitting in with the team and not seen as somebody different, I mean that was huge. The coordinators weren't allowed attend team meetings, staff meetings in the schools [….] They were seen as someone coming in to do a programme, whatever, just weren't seen as members of staff or they were given a slot, you can come in at five past ten, you have till quarter past ten, ten minute slots. I remember seeing one schedule where you come in at five past ten, you leave at quarter past ten, you come in at ten to eleven, you leave at eleven. So they were in and out of one day, this kind of stuff. But it's progressed; I mean the coordinators are attending the team meetings now, the staff meetings"*

(CDI Interview)

The service respondent also indicated that their integration into the school setting and working with school staff was difficult. At the time of the interview this issue was beginning to be resolved through individual negotiation:

> *"It actually differs in different schools. In the schools we have different Home-School Liaison officers and the relationship is different with [each of them]. I would find with [one school] that we would liaise a lot more and we have a much clearer understanding of what our roles were. [In] the planning stages I think that they didn't really take in to account properly what that Home-School Liaison Person was already doing and so a lot of my job description was already being done by the Home-School Liaison. So we've had to kind of come to our own agreement almost with where the line is. Do you know? So I find with one person that that's very clear and we both got a really kind of good, kind of...understanding between ourselves but with the other Home-School Liaison it's kind of a little bit more...that that person wouldn't like me contact her families or doing home visits or anything because they would see that as their role."*

(Healthy Schools service respondent interview)

Change eventually occurred in this situation through the persistence of CDI and the Healthy Schools Coordinators (CDI interview). Although there were challenges in the implementation of the programme, schools have acted creatively in trying to track and maintain a focus on particular children who require follow up services and keep information on them. The development or formalisation (where their existence pre-dated the Healthy Schools programme) of Care Committees in schools as a result of Healthy Schools is viewed as a positive development in this regard and aiding the referral process:

"what's been positive and what's come out of that is that some schools have set up care committees so the Healthy Schools coordinator would sit on the care committee, usually it's made up of the home-school liaison, maybe school completion and maybe the principal or the deputy principal and they would discuss any referrals that want to be made or have been made and through that process at least it's kept active, it's kept on the table. I mean it's slow but at least there's something coming out of it, but even just understanding where the gaps are is good"

(CDI Interview)

Central to the implementation of the Healthy Schools Programme is the positioning of a Healthy Schools Coordinator into the staffing structure of a school/set of schools. It appears that service coordination [defined in the literature review as the provision of information to families to aid them to access services] is more to the fore:

"That's [service coordination] probably the main crux to a certain extent of the coordinators role. They would, I mean sometimes they do activities directly with the kids so it might be like a skipping thing or physical thing or nutritional things, so they'll have maybe stands about nutritional, two pamphlets also they might made smoothies or fruit snacks, provide healthy snacks, they get a nutritionist to come in to talk with the kids but in a child friendly manner obviously. That certainly happens. That also happens with the families, I mean the coordinators would coordinate a morning with parents and invite parents in so they might have a speaker that comes in, maybe talking about dental health or coming in talking about nutrition or come in talking about something else."

(CDI Interview)

The HSCs also work with each other around coordinating specific initiatives, events and broader aspects of the programme (Healthy Schools service respondent interview).

Yet, service integration as defined in the literature review is also an aspect of the programme – at a basic level is the incorporation of a health worker into an educational setting. However, this has not been without its challenges. While not seamless, the work of the HSCs linking in with other services is in some ways core to the programme, but also is challenging:

"Multiagency case management, […] one of the aims of this programme was to look at referrals to external agencies and to kind of maybe improve the early detection of issues and the appropriate referral and the uptake of referral, so referrals in general is the idea. We struggle a little bit with that. I mean the general stuff we refer to a public health nurse or we'd maybe refer speech and language is generally ok or maybe be referring a child to the NEPS, national education psychological service, no problems with that. What schools are experiencing [….] difficulties with would be the psychological services in terms of the communication, schools are finding it very difficult"

(CDI Interview)

The service respondent also highlighted instances where they would liaise with other organisations and professionals on the needs of individual children, such as writing letters to particular services (e.g. SLT before one became formally involved in the programme, letters of referral to a dietician, family support services etc). It was envisaged initially by the respondent that there would be a greater connection between them and health professionals on particular cases. However, an inability to share information on individual cases has been a challenge (service respondent interview). For the most part the respondent identified that the coordinator would simply refer on, but in one or two instances they have stayed with the family through the referral process.

HSCs also work with a number of other individuals in implementing the programme or elements thereof. In schools, they work with HSCL officers and School Completion workers, school counsellors, and Special Needs Assistants. Outside the school, individuals and organisations worked with include SLTs, local NGOs and health services, as well as a range of

other individuals who provide classes and events for children in school and organisations in the locality (examples such as individuals providing various sporting classes were cited, and discussing with the GAA and FAI on organising events for the schools and community).

Recently, a Speech and Language therapist - separate to the SLT which operates as part of ECCE - has also been incorporated into the programme and is another aspect of service integration. While not envisaged as part of the original programme, it is meeting a particular need. The planning, funding and management of the position is a joint CDI-HSE initiative:

> *"It was a new addition - not separate but I suppose it wasn't something that we planned initially but I suppose it's coming up again. As I said all the schools are based in Killinarden and unfortunately the HSE, they have a half time speech and language therapist there and that post has been vacant for quite a long time so for all intents and purposes there was no SLT service in the Killinarden area so CDI decided right, we'll put a part time service in the school, funded by CDI but with support from the HSE in terms of as I said, role support or training - that kind of thing"*
>
> (CDI Interview)

Regarding the wider aspects of CDI's work which promotes working together, the service respondent highlighted that the strength of their approach is providing introductions to other organisations and individuals, and informing individuals of what is going on both within the area and elsewhere:

> *"The one thing I would say CDI are very good at doing is keeping us informed of things that are happening in the area […]. They always tell us about things that are happening in other places. Every other day you get an email off them saying there's such and such a conference here or there, such and such a training thing happening and they send us the active link. Website information they update every Monday. You get all kinds of things about volunteers, if you want to get volunteers organised on your programme So I find them really good with that and at keeping us informed of what's going on in the community. Definitely very good at that. CDI would have always been telling us about somebody we could link in with or introducing us to somebody at a meeting who could be of some use to us - stuff like that. So they definitely would be really good at that […] they would have put us in touch with a lot of people that we never would have heard about"*
>
> (Healthy Schools service respondent interview)

4.6 Community Safety Initiative

4.6.1 Development

As with the other programmes, the widespread consultation process which occurred in 2003 provided the foundation to the Community Safety Initiative. Further to this, consultation took place from October 2006 to April 2008 to inform the implementation of a community agreement. Community groups (An Cosán Young Mother's Group, An Cosán Men's group, An Cosán Senior Citizens Group, Jobstown Estate Management, Killinarden Estate Management, Brookfield Senior Citizens, Tallaght Youth Service youth group, Brookfield Community residents/neighbours, St Anne's Parent Group, St Maelruain's Parent Group, Local Youth Committee, Children, Ethnic Minority families, Travellers) and service providers (Local businesses, Community Gardaí, Inspector of Community Policing, Mediation Bureau, South Dublin County Council, Cluid Housing, Tallaght Youth Service, RAPID, Tallaght Partnership, Juvenile Liaison Officer, Teen Counselling, Home School Liaison Officer's Cluster Group, Sophia Housing, Community Welfare Officer (HSE), Jobstown Assisting Drug Dependency, National Education Welfare Board) were consulted on their opinions and views on living and working in Tallaght West. This process informed a report that identified several agreed areas for actions. Three key action themes emerged from the report:

- Young People;
- Physical Environment; and
- Community Engagement.

4.6.2 Aims and Programme Description

The Community Safety Initiative (CSI) aims at implementing a new approach to building community safety through community residents, Gardaí, the local authority and other stakeholders developing and implementing a community safety agreement and activities that identify and address the factors that negatively impact on the community's experience of safety. Using a collaborative approach, its core aims are to improve safety in the home, school and wider environment, and specifically to develop a community safety agreement, to develop local capacity and awareness so as to implement the CSI, and to improve pro-social behaviour and reduce crime across Tallaght West. The initial plan was to roll out the CSI across four pilot sites in Tallaght West. However, this has been reduced to two sites – Jobstown and Brookview.

The Safe and Healthy Place (SHP) activity is also an integral part of the CSI. The Initiative is designed to improve the physical fabric of the area in order to reduce the negative impact on children's health and well being, as well as their sense of attachment to their community that results from poor neighbourhood and living conditions. It aims at improving the neighbourhood and physical environment of McUilliam Estate and demonstrate how the integration between key stakeholders could have a positive impact within the community and produce better outcomes for children living in the environment (CDI, 2008, p2). SHP was designed by CDI in agreement with South Dublin County Council (SDCC). The initiative has a multi-layer approach that aims at regenerating a child-centred family friendly environment through a novel approach to urban planning, re-focusing current Council resources and community facilities to support the implementation of the CDI strategy, and continuing to deliver a Common Quality Standard to support outcomes for children.

Currently, CDI is working on the development of restorative practice training in Tallaght West. It is proposed to develop the skills among stakeholders of the CSI by bringing Hull Restorative Practice training agency to Tallaght West. This approach is about people learning to be explicit about their work, to take responsibility for their practices, and to challenge and support each other to implement best practices. The aim of this training is to introduce a methodology that will enable stakeholders of the CSI to agree and implement the community safety agreement in Jobstown and Brookview, and over time, in Tallaght West in general. The method provides techniques to build relationships and solve problems, prepares participants to run restorative justice conferences and/or use restorative practice in their everyday role. It also involves training practitioners to facilitate the training themselves.

4.6.3 Structures and Resources

In September 2008, CDI started the three year process of CSI implementation. A Steering Committee (CSISC) was established to guide the implementation of the CSI. Membership is drawn from community representatives from the four target communities, local service providers and the CDI. The CSISC held its inaugural meeting on November the 8th 2008. Subsequently, other structures were formed to also support CSI's implementation and to further progress the CDI goal of improving "the health, safety and learning of the children of the area and to increase their sense of belonging to their community" (CDI, 2005, p3). These structures include a Safe and Healthy Place Committee, a CSI Community Forum, a CSI Youth Forum and most recently, a Restorative Practice Committee.

From September 2008 until December 2009, a fulltime CDI Community Engagement Coordinator led the CSI implementation process. In January 2010, the post became a job-sharing position with responsibilities divided as follows: one Community Engagement Coordinator is tasked with guiding the CSI Community Forum and implementation of the CSI on the two active pilot sites in the Brookfield and Jobstown areas; the second Community Engagement Coordinator is charged with driving the SHP activity on the McUilliam estate, guiding the development of the CSI Youth Forum and in the identification of pilot sites and subsequent implementation of the CSI in the Fettercairn and Killinarden areas of Tallaght West. Both project workers assist the work of the CSI SC and collaborate on other CSI activities including the Tallaght West Good Behaviour Awards and the CSI Restorative Practice Training programme.

The CSI Steering Committee (CSISC)

The CSISC supports the implementation of the initiative. Established in October 2008, the CSISC's proposed membership includes community representatives from each of the four target communities in Tallaght West;[6] CDI staff, representatives from South Dublin County Council, An Garda Síochána, Tallaght Youth Service and The Probation Service and representatives from ethnic and minority families.[7] To ensure accountability for CSISC actions and agreements among members and to support relationship building with residents, statutory and community organisations, and voluntary service providers, an independent chairperson nominated by the CDI Board facilitates all Committee meetings.

In terms of governance, the CSISC is sub-committee of the CDI Board, formally reports to the CDI Board and also informally – through its SDCC representative – to the Children's Services Committee (SDCSC). The primary role of the CSISC, according to its Terms of Reference (TOR), is to "advise and support the development" of the CSI. In accordance with its TOR the CSISC will:

- Facilitate the accountability of key stakeholders to the community; each member will be held accountable for their commitment and participation in the group.
- Agree current needs as identified through the community safety survey and support the implementation of appropriate actions;
- Identify pilot sites in each of the four communities where the Community Safety Agreement will be implemented;
- Provide advice and support in the development and implementation of a Community Safety Agreement;
- Advise on changes to the CSI as the need arises.

(CSI TOR, November, 2008)

From September 2008 to September 2009 the CSI held two resident introductory meetings, one full-day workshop, one introductory meeting between the CSISC and the Youth Forum, and seven CSISC monthly organising meetings. In addition, members engaged in various actions outside of formal CSISC meetings to further the aims and general development of the CSI. These activities included; publicising the CSI locally (with neighbours and friends), and with locally based organisations and agencies, gathering information and support from within participating agencies required to plan and roll out the initiative locally. Since September 2009, the CSISC has adopted a more supervisory orientation in the CSI implementation process and currently meets quarterly to fulfil this role.

To date, the CSISC has identified two sites of approximately 100 houses in two of the four communities (Jobstown and Brookfield) of Tallaght West for piloting the safety agreement and other CSI activities. This piloting work involved discussion and negotiation between partners including the CDI, service providers (SDCC, the Gardaí, Tallaght Youth Services (TYS) and The Probation Service) and community representatives on the CSISC. Activating the sites to pilot the CSI has involved setting up core groups of residents on each site to implement the CSI. It entailed organising various events and activities supporting community interaction, awareness raising and service engagement around safety and environmental issues

In further developing the initiative, the CSISC employs a range community engagement processes with a variety of stakeholders. This has included meetings with the TYS-coordinated Youth Forum, front line staff from the SDCC's Housing, Social and Community Development Department and the Tallaght Community Garda Unit. This engagement activity resulted in the formation of a CSI Youth Forum in March 2010 specifically focusing on youth safety issues in Tallaght West. In addition, local Community Gardaí have been involved in CSI community engagement activities and events on the Jobstown and Brookfield pilot sites. A performance by the Garda Band at a CSI sponsored sports event and SDCC Estate Management staff assistance in a number of clean-up days on the pilots sites over the summer of 2009 are other examples of the CSISC's overarching role regarding CSI community engagement activity.

[6] Since September 2009, representation on the CSISC by residents reduced to two community representatives from Jobstown and Brookfield areas of Tallaght West.

[7] Since June 2009 there has been no ethnic representation on the CSISC.

A Safe and Healthy Place Committee

As a part of the CDI/CSI agenda to improve the physical fabric of the area, the CDI alongside South Dublin County Council established in 2008 'A Safe and Healthy Place' (SHP) activity. The activity, which concentrates on the McUlliam Estate, Fortunestown, Tallaght West, seeks to improve physical fabric of the Estate and to engage in activities that promote "a coordinated approach future planning and service delivery" locally (CDI 2008, p3).[8]

The SHP Committee emerged from the identification of the need to undertake an analysis of the planning to date in the new McUillium estate in Tallaght West, and to ensure a coordinated approach to future planning and service delivery by the Children's Services Committee. CDI lead this process through establishing in February 2009 a working committee composed of representatives of the HSE, SDCC, Barnardos, CDI (Chair), the National Educational Welfare Board (NEWB), An Garda Siochana, the Dodder Valley Partnership, Oakley Housing Association, County Dublin Vocational Education Committee, the National Educational Psychological Service (NEPS), Tallaght Youth Service, and a Home/School Liaison teacher. Since March 2009, two community representatives drawn from the two active resident associations in the area, the Mac Uilliam Residents Association and the Oakley Residents Association, have joined the SHP Committee. The SHP's aims are to:

- Identify current needs in McUilliam and coordinate appropriate responses;
- Establish and promote effective inter agency communication within the area, and an integrated, child friendly planning process;
- Review the planning process to date in McUilliam and identify and apply key learning in order to enable an integrated, and holistic planning process;
- Consider best practice in other SDCC locations and more widely; and
- Develop and test guidelines based on key principles for child and family proofed planning.

(SHP TOR, February 2009)

In term of governance, the SHP Committee is led by the CDI and reports informally to the South Dublin Children's Services Committee (SDCSC). The work is undertaken within the context of, and with commitment to complementing, the SDCSC, the RAPID Area Implementation Team, and the review of pre-tenancy training underway within SDCC. Its main activity has been the identification of current needs on the McUilliam Estate through consultation with local service providers and government agencies.

In March 2010, CDI published a McUilliam Needs Assessment Report cataloguing the issues requiring attention in the SHP's effort to create a child-centred family-friendly neighbourhood in the area. Conducted during November and December of 2009 by a number of SHP members including the SDCC, CDI and Barnardos, the survey provides a picture of issues that are common across the estate among residents and the service providers working with families. Overall, the report is aimed at influencing local service provision, for example, pre- and post-tenancy support undertaken by SDCC, and with providing residents and service agencies with a useful resource in lobbying for local improvements to the estate and its surrounding environment. Currently there are a number of SHP committee-inspired initiatives operating locally including:

- The provision of ESL training to residents by SDCC at Brookfield Community Centre;
- A youth work programme involving Tallaght Youth Services, CDI, the Gardaí, Barnardos, SDCC, Residents Committees, and the FAI;
- The retention of a local horse project led by the Dodder Valley Partnership;
- Development of Community Integration Strategy led by CDI and the two McUilliam residents Associations; and
- The provision of ongoing support to residents by CDI and SDCC.

Future planned SHP interagency working in the area includes the provision of a McUilliam Playground, the installation of a MUGA (Multi-Use Games Area), a pedestrian crossing, a local directory of services, cultural competency training, a seminar on best practice in urban planning, a McUilliam community celebration and the continued maintenance of the Barnardos service on the McUilliam estate.

[8] The McUilliam Estate, Fortunestown, Tallaght West which has being identified as a particularly vulnerable area for young families, new communities, lone parents and Travellers in terms of social and economic disadvantage.

The CSI Community Forum

Established in late 2008 with its first official meeting on January the 13th 2009, a CDI Community Forum is another structure aimed at influencing the implementation phase of the CSI and CDI more generally. The purpose of this CDI sub-committee is to provide a channel to inform and influence the implementation of the CSI based on their "experience of the delivery of the initiative". To facilitate this objective two members, nominated by the members, have joined the CDI Board. The Forum comprises community representatives on the CSI Steering Committee and other community members drawn from the CSI pilot sites in Jobstown and Brookfield area of Tallaght West

The main activities of the CSI Community Forum are to introduce and promote the CSI on the Jobstown and Brookfield pilot sites. The implementation of the CSI on the two sites established began in March 2009. This involved setting up core groups of residents on each site to implement the CSI. It entailed organising various events and activities supporting community interaction and service engagement around safety and environmental issues. Specific organisational activities by local residents and the CDI include:

- Weekly group meetings on each site between March and August 2009 and following the CSI restructuring in September 2009 both groups were merged into the CSI Community Forum. These regular meetings began again in March 2010;
- Both pilot site groups and the subsequent CSI community Forum have both worked with local SDCC management, local SDCC Estate Housing Management officials and Community Gardaí in the organisation of onsite CSI events and activities;
- CSI community representatives on the pilot sites developed and administered an 'engagement form' door to door to support CSI involvement in these areas. The document offers options on the different levels of engagement sought;
- The CSI Steering Committee coordinated service agency support for events and activities on the sites between April and August 2009. This included funding pilot sites events and help with materials (e.g. plants, grass cutting);
- Meetings with community development consultant June Meehan in 2010 focusing on the introduction and implementation of the Community Safety Agreement.

The CSI Youth Forum

The CSI Youth Forum began in meeting in March 2010. The emergence of the Forum is traced to CSI engagement with the Tallaght Youth Services and their established local Youth Forum which began in January 2009. Two information sessions relating to the CSI strategy between CDI's Community Engagement Coordinator and the TYS Youth Forum resulted in the decision by Forum to request a meeting with the CSI Steering Committee. The meeting on the 2nd of April led to an agreement between the CSI and the Youth Forum to work together on youth safety issues.

The CSI Youth Forum comprises three young people representing the TYS Youth Forum, two TYS Youth Workers, a CDI Community Engagement Coordinator, a SDCC representative and a sergeant from the Tallaght Community Policing Unit. To-date, this forum has resulted in the organisation and delivery of a youth event 'the Funky Seomera' at the Red Rua Theatre in Tallaght on the 25th of June 2010. The CSI Youth Forum also intends to make a submission on new SDCC 2010 Anti-Social Behaviour Policy currently being drafted.

Restorative Practice Management Committee

The Restorative Practice Management Committee is an emerging structure aimed at supporting the introduction and delivery of the training programme across all statutory and community organisations working with children and families in Tallaght West. CDI is working towards training 1000 people (800 service provider staff, 200 residents including 20 young people).

As identified in the Terms of Reference (ToR), the role of the Management Committee is:

- To plan and oversee the implementation of the training programme;
- To promote the potential benefits of the training programme within member agencies organisations and the general public; and
- To work to maximise the potential benefits of this training programme for agencies and residents of Tallaght West.

The proposed membership of the Restorative Practice Management Committee comprises residents, Gardaí, HSE, Youth Service, SDCC, Dooder Valley Partnership / RAPID, and An Cosán. The committee's first meeting took place in June 2010.

4.6.4 Activities

In addition to structures outlined above, the CSI operates through the development and implementation of a number of inter-agency supported initiatives. Examples of these recently include the Children's Good Behaviour Award, Big Breakfast community engagement activity, and a volleyball league with teams from the Gardaí, SDCC, the CDI, residents, local councillors and TDs participating. Elements associated with the programme, such as the events alluded to above, are being implemented across Tallaght West. However, the core aspects of the CSI are being implemented across two pilot sites, as referred to above (Brookfield and Jobstown).

4.6.5 Perspectives on Programme Implementation, Working Together and Service Integration

The CSISC originally met on a monthly basis but has, since September 2009, met quarterly. The role of the CSISC is to guide the implementation of activities, and to ensure widespread communication about the work. Its membership is important, in that in attempting to support the implementation of the CSI, the ability of members to 'deliver' their organisations is important. As the CSI service respondent indicated:

> *"You know on the steering committee we have people who can make decisions, the senior executives of the council who support the people on the ground who work for example."*

Similar to other CDI services, there is a range of interagency working evident in the CSISC. The lowest level – communication – is apparent, however, it was cited is largely dependent on the individuals from organisations that are worked with (service respondent interview). A sense of collegiality is reported as being present on the committee also – individuals identify whether they and their organisations would be useful or helpful for particular events. Members are informed of what CDI is planning with the community and pilot sites for the CSI, and contribute where they can:

> *"The CSI steering committee - everyone would know what's going on, and they'd all say you know, 'this is what I can do, I'm no good to you here,' so in that way they would help and often pilot groups would go to the steering committee looking for advice"*

(CDI Interview)

There is also a view within CDI that cross-boundary planning occurs, again within the CSISC, where particular community needs are identified and discussed. However, implementing this (cross-boundary planning and implementation) is identified as occurring sporadically and is dependent on the issue at hand.

Cooperation is perceived as occurring in the operation of CSI. Organisations to work together towards consistent goals, although not complimentary services (CSI is not a service as such), while they maintain their independence. However, coordination does not occur, there is no planned or systematic working together, but rather it is perceived to be more ad-hoc:

> *"They all maintain their independence, they all contribute to shared and agreed goals. But not in all cases, I mean I wouldn't be putting goals down that one I can tell you. We do work together, I'm not sure if it's a planned or systematic manner. It's more ad hoc"*

(CDI Interview)

Weekly meetings provide an opportunity to reflect on the ongoing experience of trying to implement CSI, and draw learning from the process to inform the development of the manual. Furthermore, particular events were highlighted as providing an important fillip or boost to the community, and the participating organisations, in response to the challenges of

implementing the programme. A politicians-community volleyball match was cited as contributing to building community spirit; as was a street party in the area. This latter event was significant in that it was the output of interagency working but also served a service purpose as well:

> *"with the street party, the Guards all appeared, now they were there for security but they played with the children, they mingled with people and it's really about building relationships [.....]. The Council were always supportive, they'd come along and help do the clean up, the set up and again it's knowing faces and saying 'this is what we can offer.' Now there's huge confusion between the community and the service providers as to what's possible […]. The reality is we've also got a lot of services together to inform the community of the services that are available but also to inform them of what they can actually deliver, what's realistic."*

The extent to which CSI is governed by service integration/coordination is also interesting. Through its range of activities CSI still appears to operate to some extent on the service integration landscape, although it appears that much of the work in this regard is around service coordination:

> *"I mean we do it to a degree, anything we find out we send information by text, we have the webtext service and we have eight hundred numbers on it, so anything we find out we do. And the community forum held a seminar last year, an information seminar where they invited service providers to come and display their wares kind of thing. Where they had an opportunity to give a presentation on this is what we do, this is how you access it, this is what it's for. And then they had stalls where people could approach them afterwards and find out exactly how and you know I'm interested or whatever. It was very very interesting and it was very well attended. But you'd need lots of that, there's too many things going on that nobody knows about. And you usually stumble upon the information by accident […]any information we receive it's open to everybody, our webtext service, like if you discover something in your area, you text me and I pass the message on. And the same with agencies if they're running anything in particular they can contact me and I'll pass on the message"*

(CDI interview)

However, there is a plan to seek to integrate the workings of two major organisations – the SDCC and the Gardai – on a monthly basis through the holding of a joint clinic under the auspices of Safe and Healthy Place. Additionally, other aspects of the Safe and Healthy Place have promoted interagency working, such as the tri-facilitated (CDI, SDCC Community worker and An Cosán) Committee Skills Training. Indeed, the needs analysis work which underpins the operation of the Safe and Healthy Place in McUllium Estate was undertaken through an interagency approach with all key organisations involved (CDI interview).

4.7 Conclusion

The aim of this chapter has been to outline each of the five services which CDI provides. In particular, through describing their structures, identifying participant organisations both core to the operation, its broader governance and outlining their operation, it provides an opportunity for each service to be assessed against the continua of working together and service coordination/integration which were outlined in chapter two. The characteristics of each service are outlined in the summary table below.

SERVICE/INITIATIVE	ECCE	DOODLE DEN	MATE-TRICKS	HEALTHY SCHOOLS	CSI
DELIVERY	Stand alone delivery by individual childcare centres	Co-delivery between Citywise and schools, and An Cosán and schools. Teacher and youth worker or child care worker co-deliver to each group	Delivered by Foróige – youth workers. In one group it is co-delivered with CDI	HS Coordinator integrated into school structure. Works with other orgs [e.g. FAI, GAA] on an event-by event basis	Not delivery as such, not a service. Elements of safe and healthy place possibly.
OTHER ORGANISATIONS INVOLVED AS AN ASPECT OF CORE SERVICE DELIVERY	No	Schools provide teachers to deliver the programme. In five groups they also provide the room to deliver the programme	Yes, liaising with schools where children are collected. Teachers also provide support for elements of the programme, such as goal setting and facilitate feedback on progress of attendees through interview.	Schools as core delivery mechanism	Steering committee, membership (CDI, SDCC, Gardai, Probation service, Tallaght Youth Service). Also, Community forum, youth forum, proposed environmental group.
MANAGEMENT AND MONITORING WITH CDI INVOLVEMENT	Monthly management meetings with CDI; Monthly PCF meeting with CDI; monthly communities of practice with all facilitators; On site meetings to discuss programme fidelity and implementation	CDI meet schools on a termly basis; monthly meetings with commissioned organisations; communities of practice	CDI meet with schools on a quarterly basis. Monthly meetings with Foróige; communities of practice.	Steering committee as governance driver for healthy schools. CDI also providing role support for healthy schools coordinator	CSI steering committee SHP Steering Committee Youth Forum Community Forum Restorative Practice Committee
WIDER INTERAGENCY ASPECTS	Referrals from LHNs, PHNs.; CDI providing lists of other ecce centres to each other. Cops Seminars Training Information dissemination from CDI	Seminars Training Information dissemination from CDI	Seminars Training Information dissemination from CDI	Yes, on an event by event basis. Also, depending on referrals. CDI working with HSE, An Cosán on SLT post Information dissemination from CDI	As above Information dissemination from CDI

SERVICE/INITIATIVE	ECCE	DOODLE DEN	MATE-TRICKS	HEALTHY SCHOOLS	CSI
SERVICE COORDINATION	Parent/carer facilitator – can provide information on local services to families, as can childcare centre staff. PCFs and facilitators are also involved in referring children into programme	Yes, children and parents referred on to other services based on identified needs. Development of a referral process underway and an overall interagency approach to entire programme currently being developed.	Yes, if a child has a need they will be referred on. An overall interagency approach to entire programme currently being developed.	Yes, Coordinators would have lists for local health facilities, services. Provision of advice, information	Yes, texting service on notification of particular events, information
SERVICE INTEGRATION	Yes – SLT integrated into service. Other integration on a needs basis [e.g. teachers for visually impaired].	Integration of two services as thrust of programme - youth work and education.	Possibly, integration of children on Mate-Tricks progressing through to other Foróige programmes, initiatives.	Yes, integrating quasi-health professional into school. Challenges in trying to fully integrate health and education. More service coordination. SLT has also recently started working on HS programme	Potential with joint clinics in McUllium proposed but not as of yet.

Chapter 5:
Questionnaire Findings

5.1 Introduction

The aim of this chapter is to detail the findings from the questionnaire assessing the extent of interagency working and service integration amongst organisations in Tallaght West. For the purposes of this questionnaire, interagency collaboration was defined to the respondents as "a wide variety of different ways for agencies to work together to pursue a common goal while pursuing their own organisational goals" (Percy-Smith, 2005). Service integration was defined as "the merger of previously separate organisational and professional systems to work together towards better outcomes for children. The highest degree of integration occurs when whole systems collaborate with regard to the planning, commissioning and management of services" (Horwarth and Morrison, 2007: p. 56).

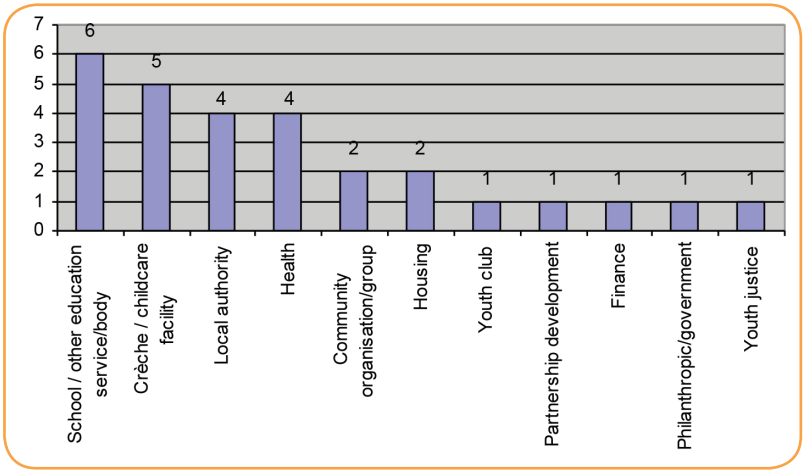
Drawing on the literature, and the CFRC's experience in developing frameworks for joint planning processes, a questionnaire was developed. This questionnaire was piloted with MA Family Support students in NUI Galway. These students come from a variety of different organisations working with children and families and are in managerial or semi-managerial roles in their organisations. Once refined, the evaluation team adopted a three strand approach to identifying suitable candidates to send the interagency collaboration survey to. First, the team decided to use the survey to ascertain the extent of interagency working at the strategic level. As a result, it adopted a purposive sampling approach to selecting potential participants from the CDI database. Any individual identified as being of manager, director, coordinator, principal, chairperson or other similar position was included in the email shot for the survey. This approach yielded 106 potential respondents. However, on each occasion the survey or a reminder was sent (three reminders), nine addresses bounced the email back as undeliverable, leaving a potential response number of 97. Secondly, organisations which were familiar to the CFRC but not on the mailing list were included. Finally, organisations not included through these two methods were identified through online resources such as the Tallaght Drugs Task Force. In the latter two cases the emails were directed towards managers or equivalent persons in each organisation. In total, these latter two approaches yielded 27 new contacts. In total, 133 individuals were emailed with the survey.

Over a period of four weeks, potential respondents were emailed regarding the survey and provided with a link. They were sent 3 reminders in the following weeks to increase the chance of completion. In total, 30 individuals completed the survey. Therefore, the survey's response rate is 23%. A recent analysis of online surveys shows that 26% is the median response rate (Braun Hamilton, 2009). However, seven respondents did not complete the survey thoroughly. Among them, the majority (i.e. five respondents) completed half of the survey. Therefore, the response rates vary throughout the survey and will be indicated when lower than expected.

5.2 Respondents' profile

The survey was completed by 30 respondents coming from a range of different agencies. The majority of respondents (78%, i.e. 22 respondents out of 28 that answered the question) are managers. The remaining respondents have mixed roles: coordinators and front-line workers. As figure one illustrates, six respondents (21%) work for education bodies (schools and other education service / body) and five respondents (18%) work in crèches. The survey was also completed by four representatives from both local authority and Health sector. Other sectors include community organisation, housing, youth club, youth justice, partnership development, finance and philanthropic / government.

Figure 2: Nature of organisations employing respondents



The majority of respondents (41%, i.e. 11 respondents) belong to statutory organisations, while community organisations represent 30% of respondents (i.e. eight respondents) and voluntary organisations 22% (i.e. six respondents).

Figure 3: Universal and targeted services

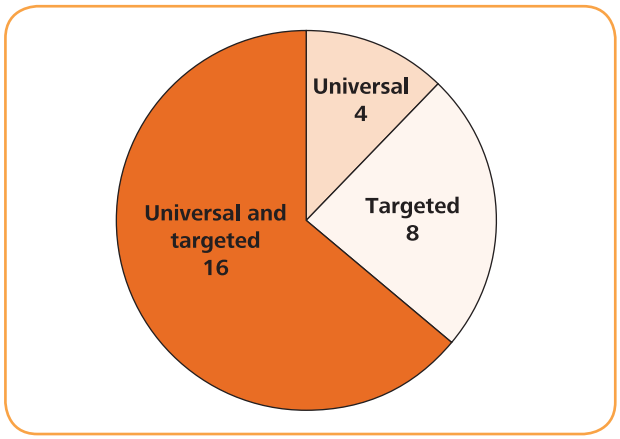
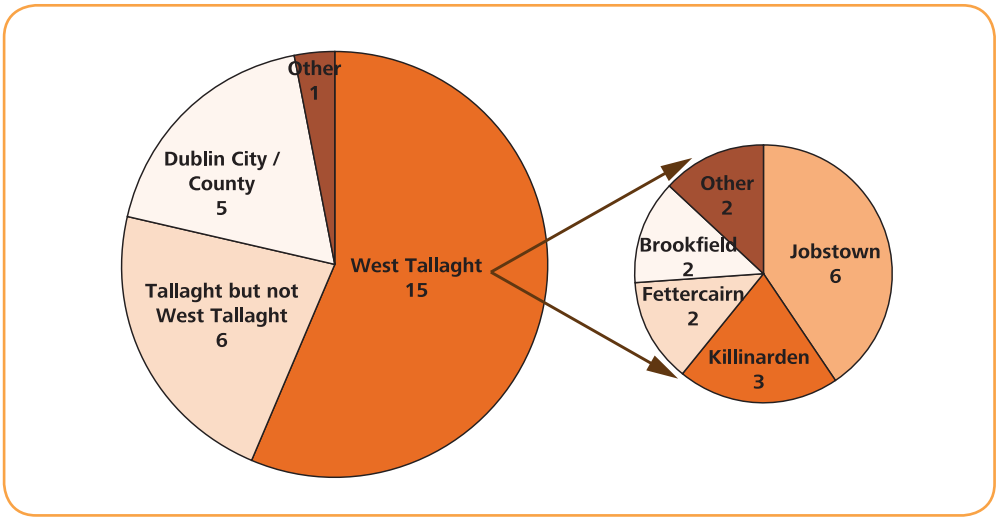


Figure two shows that the majority of the organisations (57%, i.e. 16 respondents) provide both universal and targeted services, while 29% (i.e. eight respondents) provide exclusively targeted services and 14% (i.e. four respondents) universal services.

As figure three illustrates, most of the respondents (55%, i.e. 15 respondents) work in organisations based in Tallaght West, while 22% (i.e. six respondents) work in organisations based in the wider Tallaght area. The remaining respondents work for organisations based in Dublin city / county (18%, i.e. five respondents) or country based (4%, i.e. one respondent).

Within Tallaght West, respondents are based in Jobstown (six respondents), Brookfield (two respondents), Fettercairn (two respondents) and Killinarden (three respondents). Two respondents did not belong to areas of Tallaght West in which CDI intervenes.

Figure 4: Location of respondents' organisation



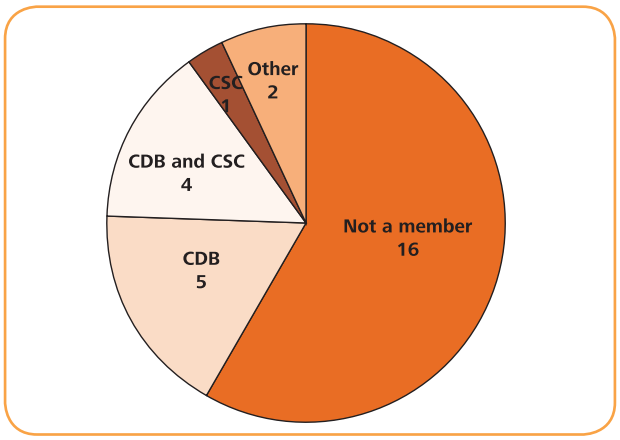
Most of the respondents' organisations are relatively well established with a median age of 11 years. On average, the participants have been working in their organisation for seven years. Nevertheless, one fifth of the respondents (22%, i.e. five respondents) are in their first year in the organisation. It is interesting to note that 43% (i.e. 10 respondents) of the respondents joined the organisation the same year it was established.

The respondents' organisations are usually (48%, i.e. 11 respondents) small structures with only one manager. The respondents were asked to indicate the number of children / young people and the number of families enrolled / worked with in the organisation on an annual basis if applicable. Only 14 respondents indicated the number of children / young people and 10 indicated the number of families. The respondents that answered the question work in organisations with a median number of 39 children and 35 families.

5.3 Respondents' involvement in interagency work

On average, the respondents work for agencies that are engaged in interagency "work" for 10 years. The majority of the respondents (76%, i.e. 19 respondents) work for organisations that are engaged in interagency "work" since they were established. Respondents were asked to indicate if they are part of collaborative structures such as the City/County Development Board (CDB) or Children's Services Committee (CSC).

Figure 5: Respondents' membership to collaborative structures



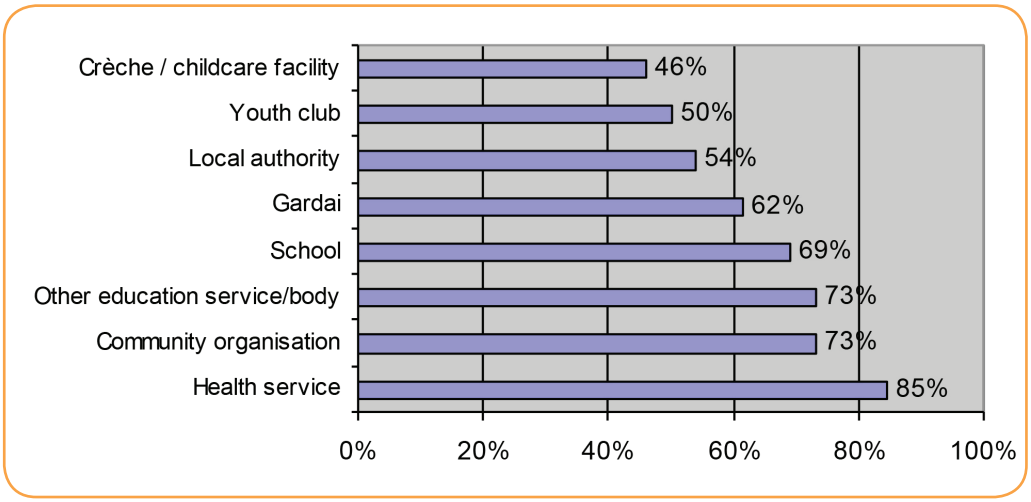
CDB: City/County Development Board
CSC: Children's Services Committee

As depicted in figure four, most of the respondents (57%, i.e. 16 respondents) indicate that they are not part of these collaborative structures. Yet, a third of the respondents (36%, i.e. 10 respondents) take part in collaborative structures, nine respondents take part in the CDB, four take part in both the CDB and the CSC, and one respondent is exclusively part of the CSC. According to respondents, the number of meetings with the collaborative structure per year fluctuates between one and 120 with a median number of 12 meetings per year.

More generally, respondents were asked if their organisation links with other organisations as described in the introduction paragraph referring to interagency collaboration. The majority of respondents (96%, i.e. 27 respondents) indicate that their organisations do link with others. When asked how they started linking with other organisations, 36% of the respondents (i.e. eight respondents) respond that they or their agency made the link and were also contacted by other agencies to link, 32% (i.e. seven respondents) that either they or their agency contacted other organisations, and 23% (i.e. five respondents) that their organisation was contacted by other organisations.

The extent to which agencies collaborate with different types of organisations varies. Figure five shows that respondents are less likely to work with crèche and childcare facilities than other types of agencies, yet 46% of the respondents (i.e. 12 respondents) report working with them. Health services are dominant among the agencies worked with - 85% of respondents (i.e. 22 respondents) report working with them. Respondents also report working with community organisations (73%, i.e. 19 respondents), other education service/bodies (73%, i.e. 19 respondents), schools specifically (69%, i.e. 16 respondents), Gardai (62%, i.e. 16 respondents), local authorities (54%, i.e. 14 respondents) and youth clubs (50%, i.e. 13 respondents).

Figure 6: Type of organisation respondents collaborate with



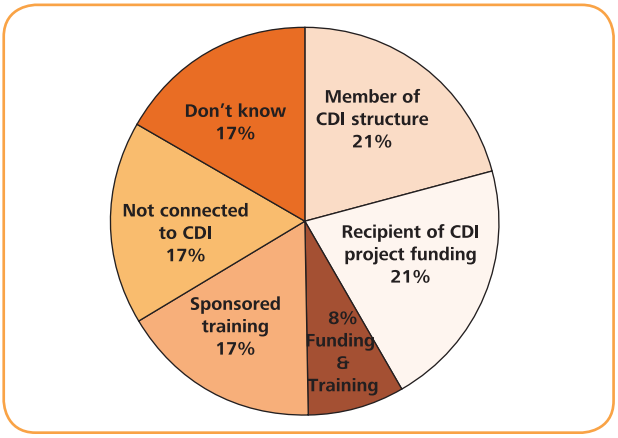
The majority of respondents (63%, i.e. 17 respondents) indicate that a contact person is identified in every agency they work with. While 18% of the respondents (i.e. five respondents) indicate that there is no contact person identified, the same proportion of respondents (18%, i.e. five respondents) report that they do not know.
Respondents were asked if they are aware of a model or framework which their and other organisations use to interact with each other. Thirty six percent of the respondents (i.e. 10 respondents) indicate that they are aware of a model. However, when asked to specify, the respondents show a lack of clarity about the framework supposedly used.

The majority of respondents (87%, i.e. 21 respondents out of the 24 that answered the question) indicate that they did not receive any interagency training. Among the three respondents who received interagency training, two had their training provided by their organisation, while one had its training provided by another organisation. The majority of the respondents (83%, i.e. five respondents out of the six that answered the question) reporting interagency training indicate that they received interagency training after they started linking with other organisations.
More generally, the majority of respondents (56%, i.e. 14 respondents out of the 25 that answered the question) report that new staff in their organisation are provided with training for working within the organisation, 28% (i.e. 7 respondents) indicate that the training provided is for working within the organisation and with other organisations, and one respondent reports that no training is provided to new staff.

5.4 Respondents' link to CDI

Respondents were asked to indicate if their organisation is a member of a CDI structure, a recipient of CDI project funding, a recipient of CDI sponsored training, or not connected to CDI. Four respondents state that they are not connected to CDI, four indicate that they do not know if they are linked or not, and six respondents did not answer the question. Among the 16 organisations that have a link to CDI, 21% are members of CDI's structure (i.e. five respondents) and 46% are recipients of funding or training (i.e. 11 respondents). Within the organisations that are members of CDI structure, four are part of the Implementation Support Group and one is part of the Board.

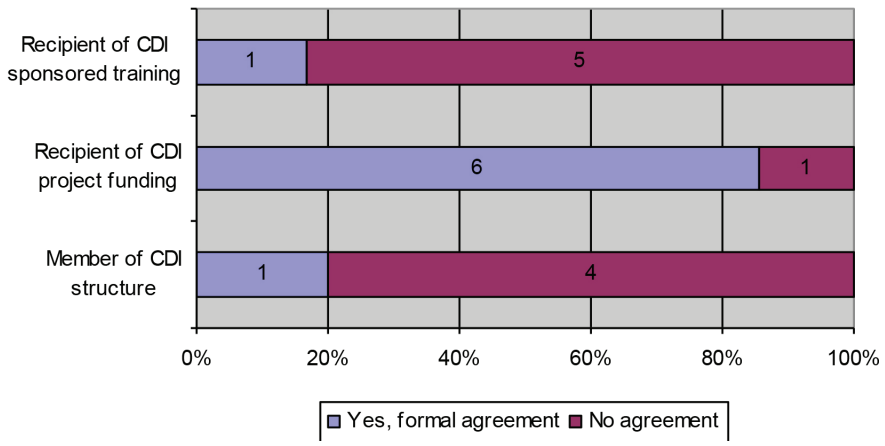
Figure 7: Respondents' organisation's relation to CDI



As depicted in figure six, among the respondents' organisation that receive funding or training, 21% are recipients of CDI project funding (i.e. five respondents), 17% are recipients of CDI sponsored training (i.e. four respondents) and eight percent are recipients of both (i.e. two respondents). Most of the respondents that work for an organisation connected to CDI (71%, i.e. 12 respondents) have contact with CDI on a monthly basis, 23% (i.e. four respondents) report a weekly contact, and six percent (i.e. one respondent) report a daily contact.

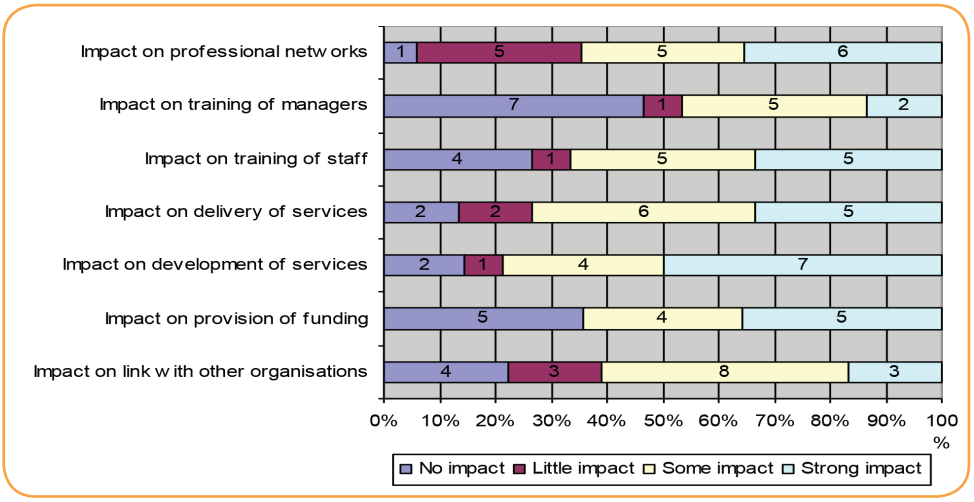
Among the respondents whose organisation has a link to CDI, 62% (i.e. 10 respondents) indicate that there is no formal agreement in place regarding interaction with CDI. Figure seven shows that formal agreements pertain to the participants receiving funding while the majority of recipients of training (83%, i.e. five respondents) or members of CDI's structure (80%, i.e. 4 respondents) indicate there is no formal agreement.

Figure 8: Agreements regarding interaction with CDI



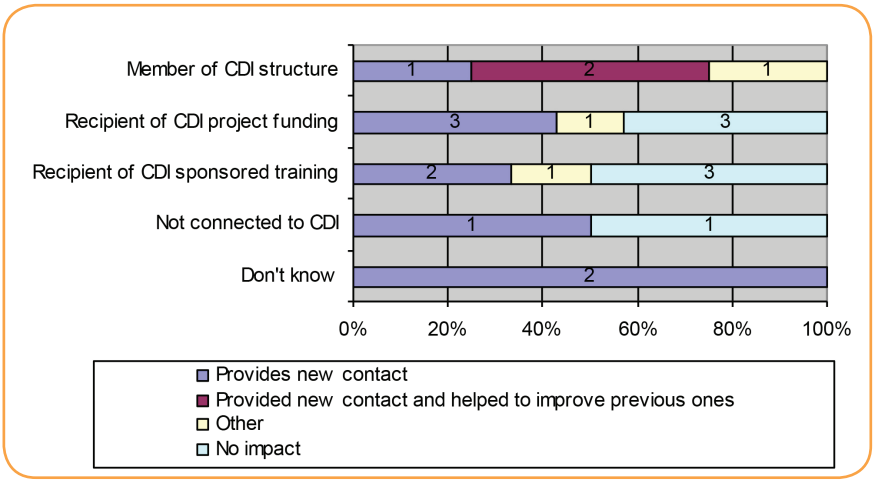
Respondents were asked to rate the impact CDI has on their organisation's work. Among the 17 respondents that answered the question, none indicate that there is no impact. 47% of the respondents (i.e. eight respondents) report some impact, 41% (i.e. seven respondents) a strong impact, and 12% (i.e. two respondents) little impact.
Figure eight illustrates the type of activities / areas which CDI impacts on: 78% of respondents (i.e. 11 respondents) report that CDI has either some or a strong impact on the development of services, 73% (i.e. 11 respondents) on the delivery of services, 67% (i.e. 10 respondents) on the training of staff, 65% (i.e. 11 respondents) on professional networks, and 61% (i.e. 11 respondents) on the link with other organisations. Yet, 47% of respondents (i.e. seven respondents) indicate that CDI has no impact on the training of managers and 36% (i.e. five respondents) report no impact on the provision of funding.

Figure 9: CDI's impact on respondents' organisation's activities



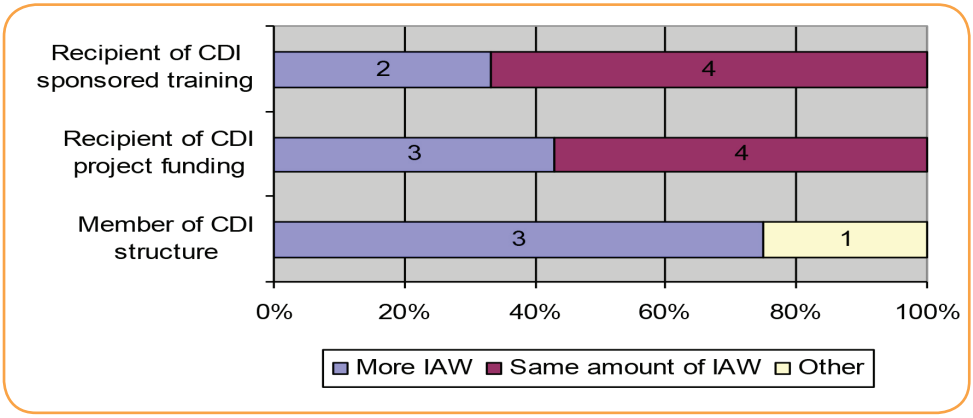
The majority of the respondents (60%, i.e. nine respondents) that identified some impact indicate that CDI provided new contacts. While two respondents report that CDI provided new contacts and helped to improve previous relationships, only one respondent indicate that CDI exclusively helped to improve previous relationship. Figure nine shows that the two respondents reporting that CDI provided new contacts and helped to improve previous relationships, are members of CDI's structure. The recipients of CDI's project funding or training are divided between those who indicate that CDI provided new contacts and those who report no impact.

Figure 10: CDI's impact on the work with other agencies according to the respondents' relation to CDI



Respondents were asked to indicate if they are more or less engaged in interagency "work" since their work with CDI began. 45% of respondents (i.e. 10 respondents) report that they are involved in the same amount of interagency "work", 41% (i.e. nine respondents) that they are engaged in more interagency "work" and none of the respondents report being less engaged in interagency "work". Figure 10 shows that almost all members of CDI's structure (75%, i.e. three respondents) report more interagency "work" since they started working with CDI.

Figure 11: Level of interagency "work" since respondents' organisation started working with CDI



5.5 Respondents' views of interagency "work"

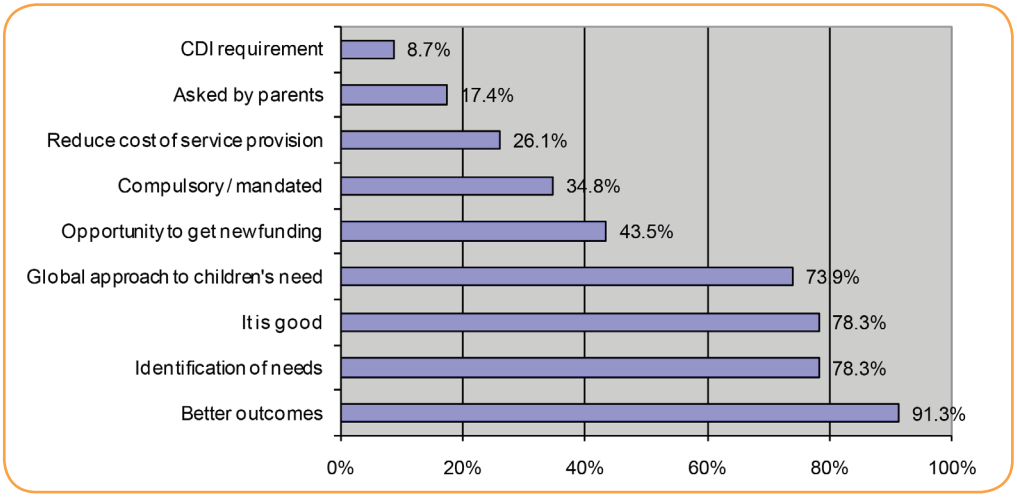
5.5.1 Nature of interagency "work"

Respondents were asked to rate their relationship with other agencies from non-existent to excellent. Twenty three respondents answered the question. As illustrated in figure 11, the majority of respondents describe good or excellent relations with healthcare organisations (59%, i.e. 13 respondents) and community development organisations (56%, i.e. 13 respondents). Forty five percent of respondents (i.e. 10 respondents) also describe good or excellent relations with training organisations, and 43% (i.e. 10 respondents) with education organisations. Nevertheless, approximately 20% of the respondents yet indicate that their relation with the organisations is either poor or non existent.

Figure 12: Quality of respondents' relationships with other agencies

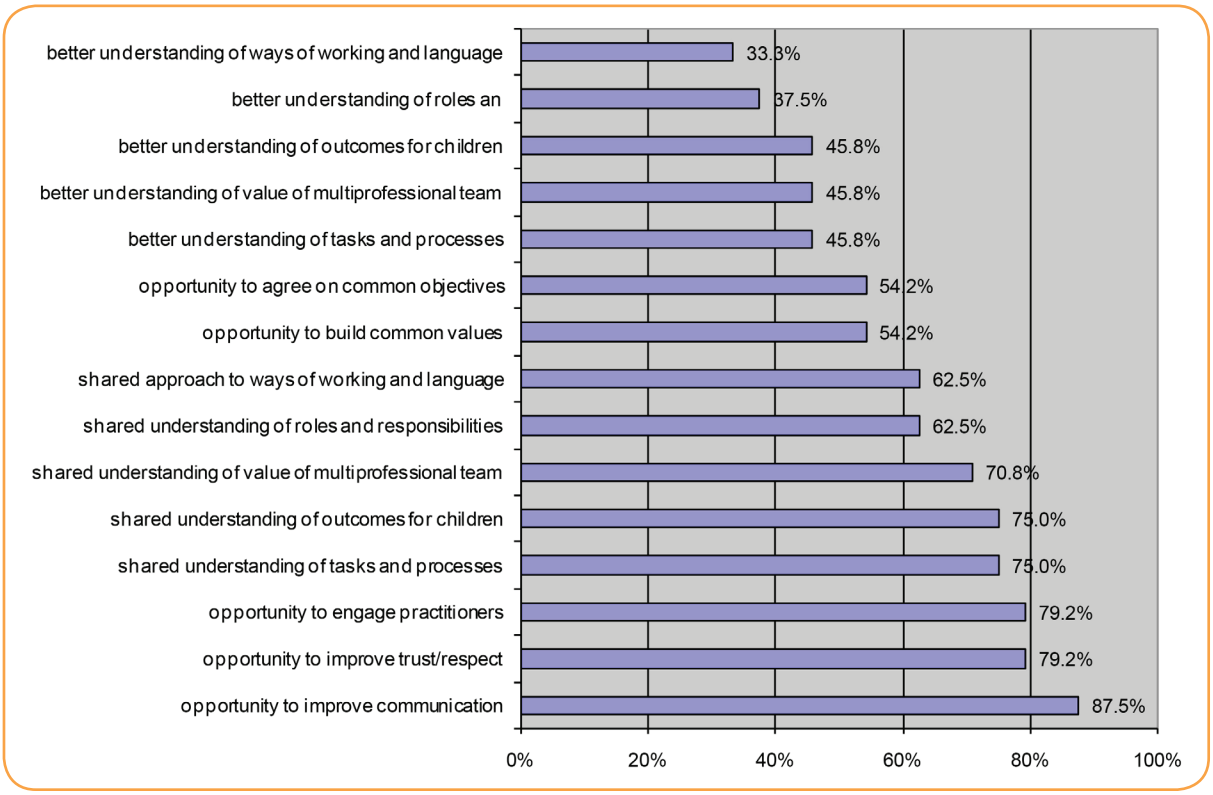
Respondents were asked to indicate, from a list of suggestions, the reasons for which they link with other agencies. 23 respondents answered the question. Figure 12 illustrates that a large majority of respondents link with other agencies because it leads to better outcomes (91% of respondents, i.e. 21 respondents), because it allows the identification of children's needs / services' needs to be identified (78%, i.e. 18 respondents), because it is good to link with other agencies (78%, i.e. 18 respondents), and because it allows a global approach to children's need (74%, i.e. 17 respondents). A strong gap (a drop from 74% to 43%) appears between the proportion of respondents stating that they link with other agencies for the reasons previously mentioned and the other reasons: 43% of respondents (i.e. 10 respondents) indicate it is an opportunity to get new funding, 35% (i.e. eight respondents) that is compulsory / organisation mandated, 26% (i.e. six respondents) that it reduces costs of service provision, 17% (i.e. four respondents) that parents were asking for it, and 9% (i.e. two respondents) that it is a CDI requirement. The results show that the respondents' reasons to link with other agencies evolve around concerns for children (needs and outcomes) rather than finance (cost reduction and funding). It is interesting to note that a majority of respondents (78%, i.e. 18 respondents) adhere to the belief that interagency "work" "is a good thing".

Figure 13: Respondents' reasons to link with other agencies



Respondents were asked to indicate what interagency "work" involves in their opinion. The survey proposed a distinction between "shared understanding" and "better understanding" of various components. Figure 13 shows that respondents favour the term "shared understanding" rather than "better understanding" when it comes to describing the work involved in interagency collaboration. The results reveal that respondents perceive interagency "work" as means to improve relationships between professionals: 87% of the respondents (i.e. 21 respondents out of the 24 that answered the question) indicate that interagency "work" constitutes an opportunity to improve communication, 79% (i.e. 19 respondents) an opportunity to improve trust/respect between professionals and 79% (i.e. 19 respondents) state that it was an opportunity to engage practitioners. A high proportion of them also indicate that interagency involves a shared understanding of outcomes for children (75%, i.e. 18 respondents), of tasks and processes (75%, i.e. 18 respondents), and of the value of a multiprofessional team (71%, i.e. 17 respondents). Furthermore, over half of the participants (62%, i.e. 15 respondents) report that it involves a shared understanding of roles and responsibilities and a shared approach to ways of working and language, and about half of the respondents (54%, i.e. 13 respondents) consider interagency "work" as an opportunity to agree on common objectives and build common values.

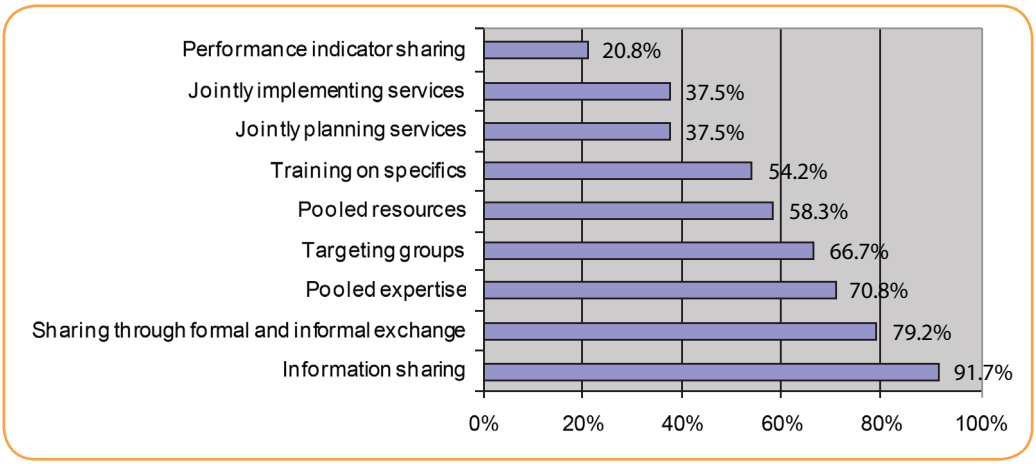
Figure 14: Respondents' perception of interagency "work"



As illustrated in figure 14, a large majority of respondents (92%, i.e. 22 respondents out of the 24 that answered the question) engage in information sharing. Various means are used: respondents communicate through face to face meetings (87%, i.e. 14 respondents), emails (69%, i.e. 11 respondents), and telephone (31%, i.e. five respondents). A large majority of respondents (79%, i.e. 19 respondents) also engage in information sharing through formal and informal exchange. Indeed, since they started working with other agencies, the majority of respondents are more likely to network within both formal and informal networks (91%, i.e. 20 respondents) and consider informal networks as resourceful and useful (96%, i.e. 22 respondents).

Figure 14 also shows that a majority of respondents are involved in pooling expertise (71%, i.e. 17 respondents), targeting groups (67%, i.e. 16 respondents), and pooled resources (58%, i.e. 14 respondents). Approximately half of the respondents (54%, i.e. 13 respondents) engage in training on specifics. Among them, 31% have their training provided by CDI (four participants out of 13 receive training on specifics). Respondents appear to be less engaged in jointly implementing and planning services (37%, i.e. nine respondents) and sharing performance indicators (21%, i.e. five respondents).

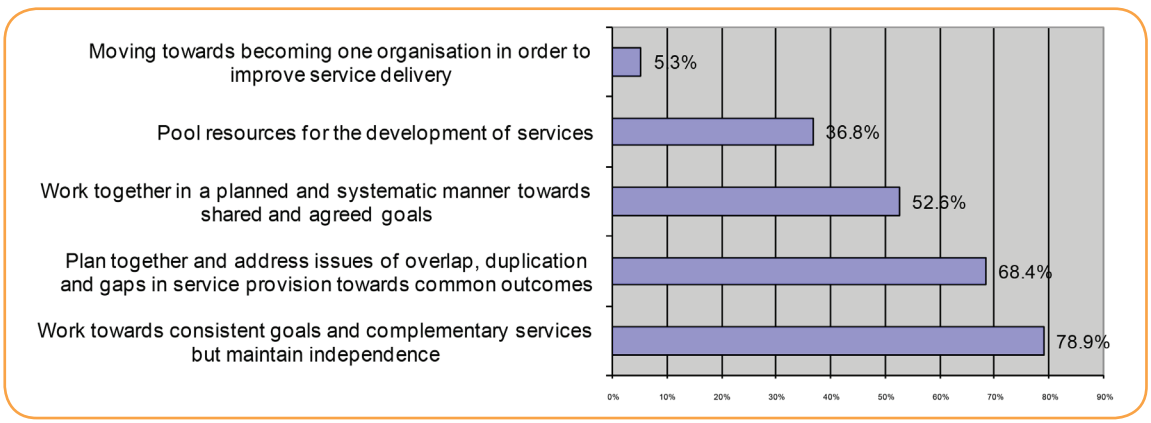
Figure 15: Nature of respondents' involvement in interagency "work"



5.5.2 Extent of interagency working

Respondents were asked to indicate which level of interagency "work" best describes their engagement. The survey proposed components of interagency "work" placed on a continuum, from working together towards consistent goals but maintaining independence to service integration. Figure 15 shows that 79% of the respondents (i.e. 15 respondents out of the 19 that answered the question) report working towards consistent goals and complementary services but maintaining their independence. The proportion of respondents falls to 68% (i.e. 13 respondents) when it comes to planning together and addressing issues of overlap, duplication and gaps in service provision towards common outcomes. Around half of the respondents (53%, i.e. 10 respondents) report working together in a planned and systematic manner towards shared and agreed goals, 37% (i.e. seven respondents) report pooled resources for the development of services, and 5% (i.e. one respondent) reports moving towards becoming one organisation in order to improve service delivery.

Figure 16: Respondents level of engagement in interagency "work"



Interagency "work" requires participation from the children, parents and community. In regards to parents' involvement, 33% of the respondents (i.e. seven respondents out of the 21 that answered the question) indicate that parents either participate in interagency groups and work or are informed on regular basis, 29% (i.e. six respondents) report that parents are informed at the beginning of the year about interagency aspects of the organisation's work and 5% (i.e. one respondent) state that parents were not informed.

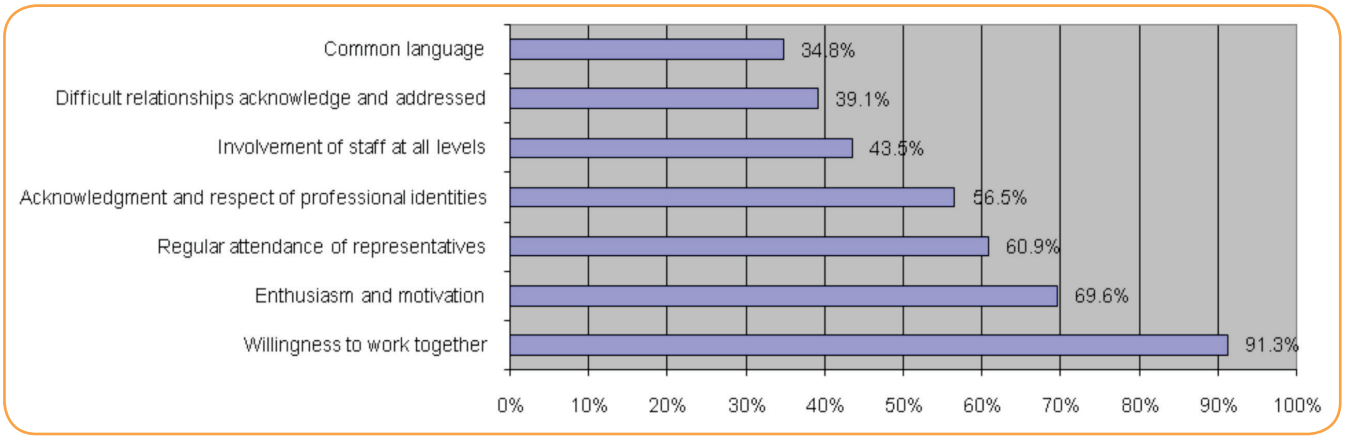
Less participants answered the question relative to children's involvement in interagency "work" (11 respondents compare to 21 for parent's involvement). Among respondents, the majority (54.5%, i.e. six respondents) reports that children participate in interagency groups, 36% (i.e. four respondents) indicate they are informed on a regular basis, and 9% (i.e. one respondent) report that they are not involved. The question relative to community involvement received a better response rate than the one on children's involvement: 23 respondents answered the question. A majority of respondents (56%, i.e. 13 respondents) report that community other than parents and children are not involved in their interagency work.

5.6 Facilitators and barriers

5.6.1 Facilitators

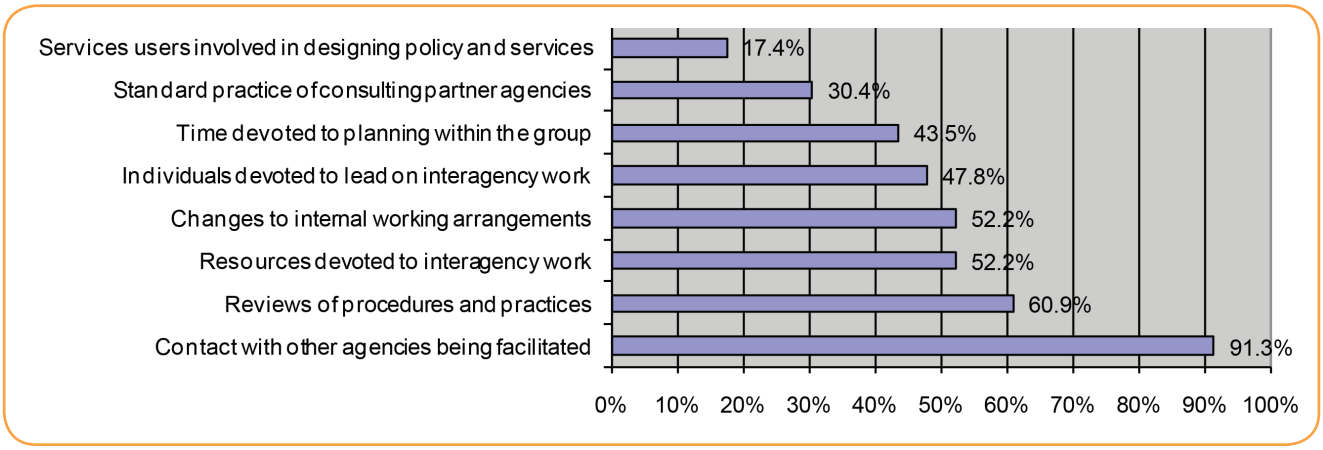
Almost all the respondents (91%, i.e. 21 respondents of the 23 that have answered the question) report willingness by others to work together. Figure 16 shows that the majority of respondents also indicate that they have experienced enthusiasm and motivation in relation to interagency "work" (70%, i.e. 16 respondents), regular attendance of agency representatives (61%, i.e. 14 respondents), and the acknowledgment and respect of professional identities (56%, i.e. 13 respondents). Less than half of the respondents report an involvement of staff at all levels and service users in interagency "work" (43%, i.e. 10 respondents) or difficult relationships being acknowledge and addressed (39%, i.e. nine respondents). The use of a common language accessible to everyone is reported by 35% of respondents (i.e. eight respondents).

Figure 17: Respondents' experience of interagency "work"



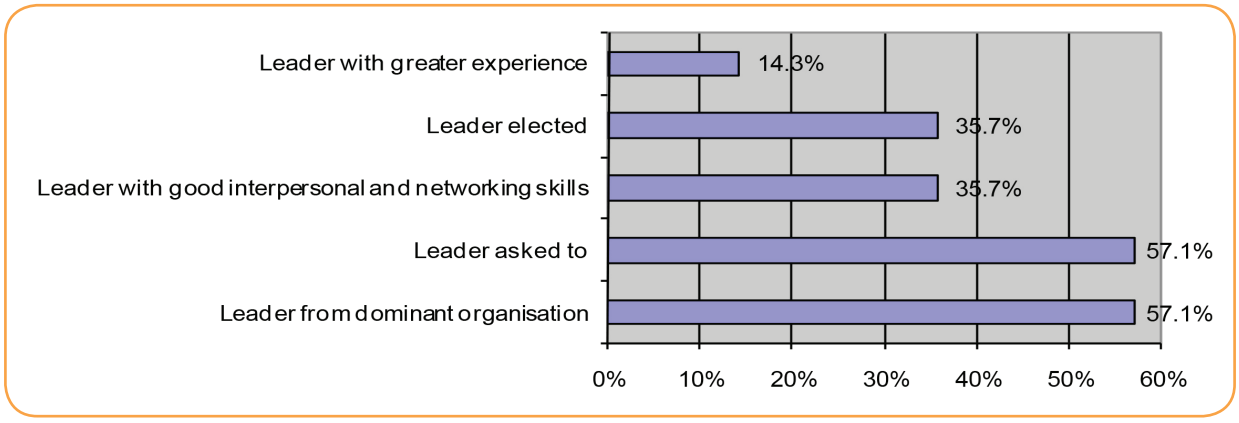
As illustrated in figure 17, a majority of respondents (91%, i.e. 21 respondents out of the 23 that answered the question) indicate that they have experienced contact with other agencies being facilitated within the process of interagency "work". Respondents also report that the process involves reviews of procedures and practices (61%, i.e. 14 respondents). Approximately half of the respondents (52%, i.e. 12 respondents) state that they have experienced resources devoted to interagency "work" and report changes to internal working arrangements. This proportion falls to 48% (i.e. 11 respondents) when it comes to individuals devoted to lead on interagency "work" and to 43% (i.e. 10 respondents) for time devoted to planning within the group. A third of respondents (30%, i.e. 7 respondents) indicate that they have experienced standard practice of consulting partner agencies. Furthermore, 17% of respondents (i.e. 4 respondents) report services users being involved in designing policy and services.

Figure 18: Respondents' experience of interagency process



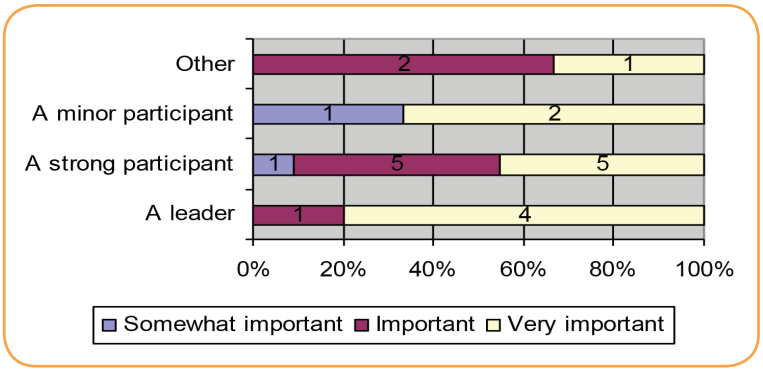
The literature review stressed the importance of leadership in interagency "work". Among the respondents, 52 % (i.e. 12 of the 23 participants that answered the question) report a designated leader in their interagency group. Among the other respondents, 26% (i.e. six respondents) indicate there was no designated leader while 13% (i.e. three respondents) answer they do not know and 9% (i.e. three respondents) specify it depended on the groups/ contexts. Respondents were asked, if a leader is present, the reasons for which that person took a leading role in the group. The question was answered by 14 respondents. Figure 18 shows that the majority of the respondents (57%, i.e. eight respondents) indicate that the leader is from a dominant organisation and that he/she was asked to become the leader, 36% (i.e. five respondents) report that the leader was elected and has good interpersonal and networking skills, and 14% (i.e. 2 respondents) answer that it was because of a greater experience than others.

Figure 19: Reasons to take the leading role



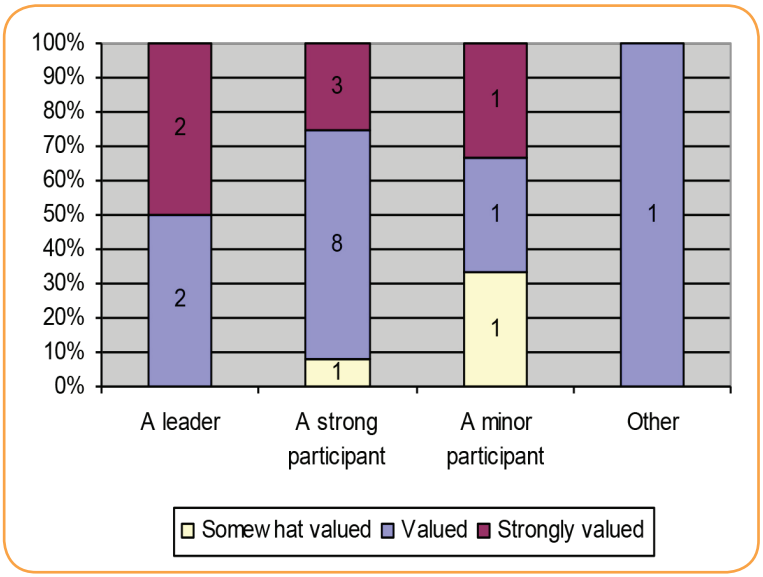
The majority of respondents (52%, i.e. 12 respondents out of the 23 that answered the question) perceive their role within the group as being a strong participant, 22% (i.e. five respondents) consider themselves as leaders, and 13% (i.e. three respondents) as minor participants. When the respondents were asked how they perceived the importance of their organisation to interagency "work", none of them answered "not important at all". The majority (54.5%, i.e. 12 respondents out of the 22 that answered the question) perceive their organisation as being very important, 36% (i.e. eight respondents) as important, and 9% (i.e. two respondents) as somewhat important. Figure 19 illustrates that 80% (i.e. four respondents) of those seeing themselves as leaders also perceive their organisation to be very important.

Figure 20: The respondents' organisation's importance according to their role in the group



Respondents were asked to indicate the extent to which participants' views are valued within the group depending on their role as strong participant or minor participant. 38% of the respondents (i.e. eight respondents out of the 21 that answered the question) indicate that the major participants' views are strongly valued against 30% (i.e. six respondents out of the 20 that answered the question) for the minor participants' views. Ten percent of respondents (i.e. two respondents) indicate that minor participants' views are somewhat valued, this level not occurring in relation to major participants.

Figure 21: Value of minor participants' views



The respondent's own position in the group can influence its perception of the extent to which participants' views are valued. Indeed, as illustrated in figure 20, none of the leaders indicate that the minor participants' views are "somewhat valued".

Having major participants and minor participants in a group can involve issues around power balance. Yet, 30% of respondents (i.e. seven respondents out of the 23 that answered the question) indicate that the power is very well balanced in their group, 43% (i.e. 10 respondents) report that power is fairly well balanced, and 13% (i.e. three respondents) that it was not balanced.

Figure 22: Power balance according to respondents' role in the group

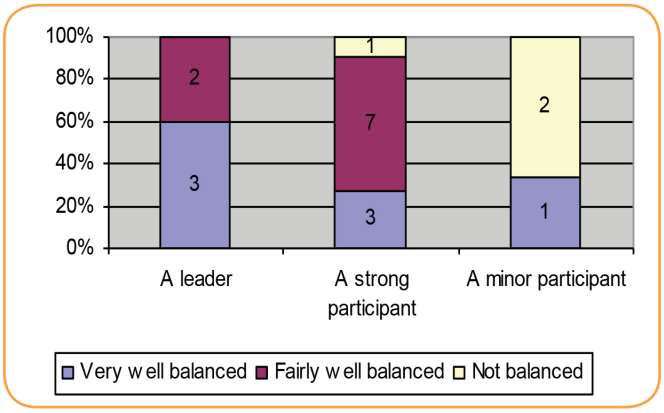
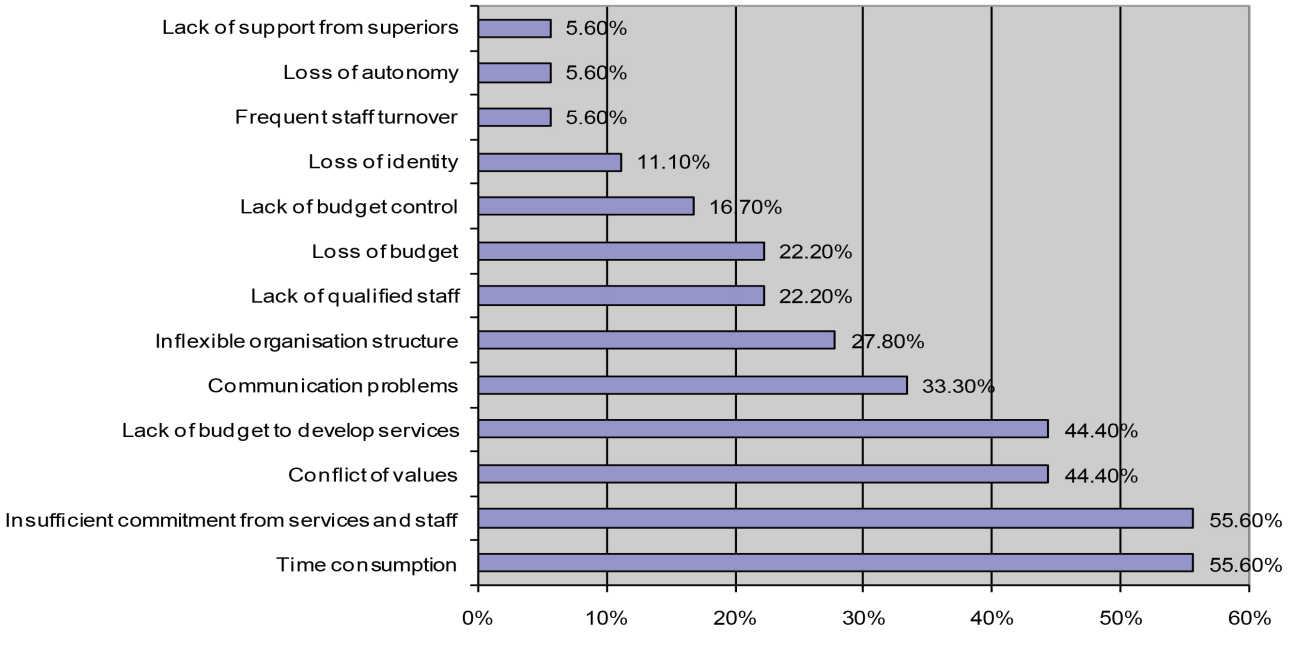


Figure 21 shows that the perception of power balance also depends on the role of the respondent. Indeed, none of the leaders indicate that power is not balanced while two third of the minor participants do.

5.6.2 Barriers

Various barriers have been identified in the literature review. Respondents were asked to identify the different barriers that would constitute a reason not to take part in interagency "work". The proportion of participants differs strongly according to the type of barrier. The majority of respondents (56%, i.e. 10 respondents out of the 18 that answered the question) indicate that time consumption and insufficient commitment from services and staff are reasons not to take part in interagency "work". Other barriers identified by respondents are the lack of budget to develop services and conflict of values (44%, i.e. eight respondents), communication problems (33%, i.e. six respondents), the inflexibility of structures (28%, i.e. five respondents), the lack of qualified staff and the loss of budget (22%, i.e. four respondents), the lack of budget control (17%, i.e. three respondents), and the loss of identity (11%, i.e. two respondents). One respondent indicated the lack of support from superiors, the loss of autonomy, and the frequent staff turnover as reasons not to take part in interagency "work". Furthermore, 28 % of respondents (i.e. five respondents) indicate that there is no reason not to take part in interagency working.

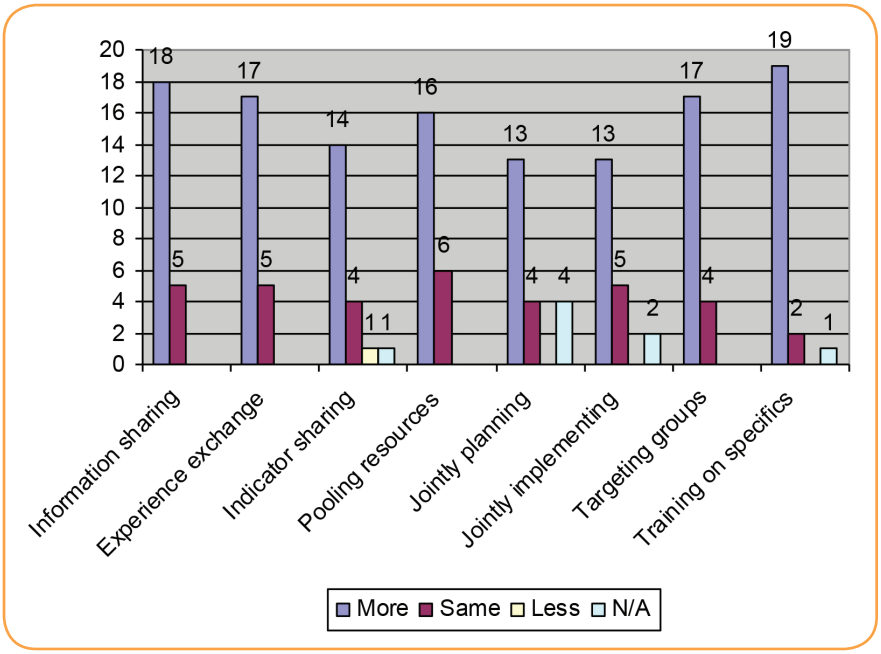
Figure 23: Reasons not to take part in interagency working



5.7 Sustainability of interagency working

Respondents were asked to indicate if they would get more or less involved in interagency "work" activities if they could. Figure 23 shows that the respondents would rather get more involved in activities relative to interagency "work" than less involved: 19 respondents[9] would get more involved in training on specifics, 18 in information sharing, 17 in experience exchange and targeting groups, 16 in pooling resources, 14 in indicator sharing, and 13 in jointly planning and jointly implementing. Some respondents also indicate they would keep the same level of involvement in some activities: jointly planning (four respondents), jointly implementing (two respondents), training on specifics and indicator sharing (one respondent).

Figure 24: Prospective level of involvement in interagency activities

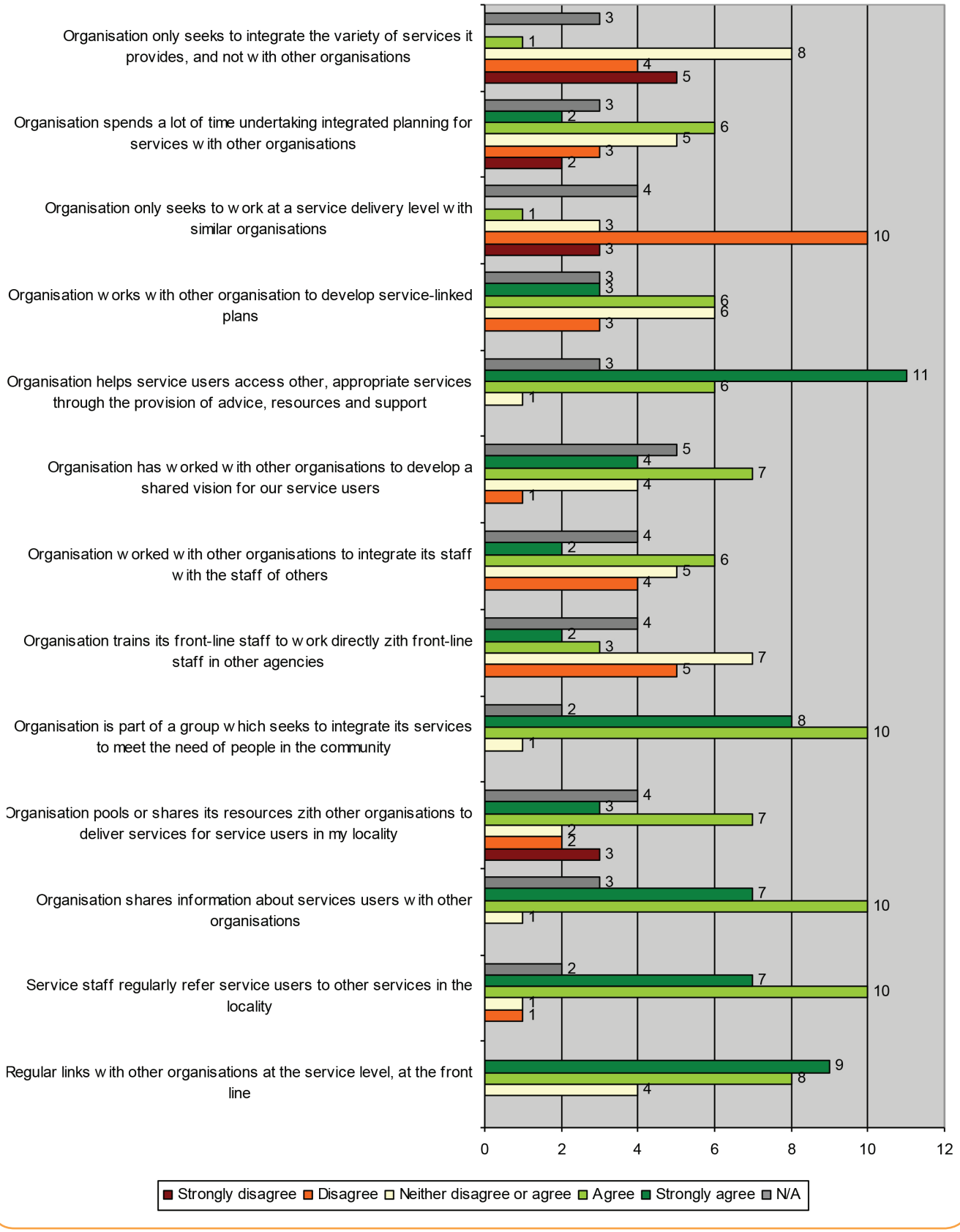


5.8 Service integration

Respondents were asked to indicate if whether they agree or disagree with a number of statements relative to service integration. The statement with which the highest number of respondents (11 respondents) strongly agree is that their organisation helps service users access other, appropriate services through the provision of advices, resources and support. A high number of respondents either strongly agree (eight respondents) or at least agree (10 respondents) that their organisation is part of a group which seeks to integrate its services to meet the needs of people in the community. A similar proportion of respondents indicate that their organisation shares information about service users with other organisations with the service user's permission, and that the service staff in their organisation regularly refer service users to other services in the locality (seven strongly agree, 10 agree). Nine respondents strongly agree and eight agree that their organisation has regular links with other organisations at the service level and the front line level. None of the respondents disagree with the latter statement. The results show that there is contact and information sharing between agencies. Other statements receive more heterogeneous answers. For instance, three respondents strongly agree that their organisation pools or shares its resources, and seven respondents agree. Yet, two respondents disagree and three strongly disagree with that statement. The statement that received the strongest disagreement from respondents (10 disagree, three strongly disagree) is relative to organisations only seeking to work at a service delivery level with similar organisations.

[9] Respondents were asked if they wanted to be more or less involved for each of the activities mentioned. The number of respondent differing from an activity to another, the percentage is not relevant here.

Figure 25: Respondents' agreeing towards statements relative to service integration



5.9 Supporting Interagency Working and Service Integration

Respondents were asked to list three things which could be done to support interagency working and service integration in their area. Nineteen respondents answered the question. The categories and specific actions identified by respondents can be found in the appendix.

5.10 Conclusion

This chapter has outlined the findings from the survey on interagency working and service integration in Tallaght West. In summarising the main points of note the low response rate needs to be acknowledged. Bearing in mind this fact, the survey nevertheless suggests a number of interesting things to be considered. The perception of the majority of respondents is that interagency working and service integration are inherently good things to pursue, resulting in good outcomes for children and families. However, there is a perceived lack of service integration in Tallaght West specifically. The majority of respondents to the survey are connected in some way to CDI, either through being a member of one of its structures, being in receipt of funding or attending its events. The vast majority of respondents indicate that CDI has had some or a strong impact on their organisation, with an impact on the development and delivery of services, training, links with other organisations and professional network development being cited. These are important things to note as they can provide an indicator to the extent and rationale and 'how' of interaction amongst organisations facilitated through CDI activities. However, their real value needs to be considered and discussed in light of other findings. It is to the discussion that we now turn.

Chapter 6:
Discussion of Findings

6.1 Introduction

The purpose of this report is to document and begin evaluating the extent to which CDI works to foster working together amongst organisations and service integration in Tallaght West, as set out both in the CDI strategy A Place for Children: Tallaght West and in the CFRC's process evaluation plan. As detailed in the introduction to this report, this aspect of the evaluation involves answering a number of questions:

1. What inter-agency model best describes the relationship between CDI and other organisations in the locality?
2. What model underpinned the integration of services in the locality?
3. What are the views of interagency managers regarding their experience of working together and integrating services?

In light of these three questions, the aim of this chapter is to integrate the different strands of data which have been generated in the course of this work to begin to answer them. It is important to note that, while this evaluation is interested in the process elements of each of the CDI services, this report discusses them only in the context of the theme being examined – working together and service integration. Therefore, drawing on documentary analysis, the survey and interview findings, the chapter will discuss the extent to which working together and service integration occurs in Tallaght West. Part of this section will involve the views of the participants on working together and their experience of service integration. This is important data which provides a baseline by which future changes in working together and integration can be assessed. Secondly, the chapter will seek to locate CDI's work in fostering working together and service integration within the practice and academic literature, and specifically within the continua of interagency working and service integration developed in Chapter Two. The preparatory work for the development and establishment of CDI involved the development of a briefing paper on Inter-agency Collaboration by Kelleher and Associates (2005). As highlighted in the interview findings from CDI, there was no explicit model adopted or suggested to guide the activities of CDI in promoting working together and service integration. Yet it is a critical factor to the Initiative's overall aim. Thus, the evaluation team views this as an opportunity to assist CDI in identifying what it actually does and how far or 'deep' it could go in promoting organisations working together and integrating services.

Following from this introduction, the discussion chapter proceeds to briefly remind the reader of the continua of working together and service integration developed in Chapter Two. The activities of CDI at three levels are then discussed in relation to these continua, namely:

- The activities CDI pursues to foster working together within CDI;
- The activities CDI pursues in fostering working together in commissioned organisations;
- The activities CDI pursues to foster working together with and between external organisations.

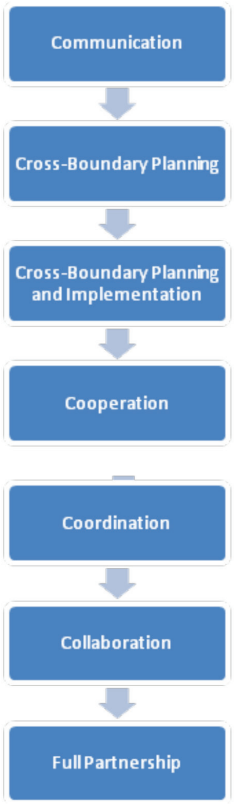
Finally, the extent of interagency working and service level activity at this point in Tallaght West more generally is discussed.

6.2 Interagency Working and Service Integration Continua

As outlined in Chapter Two, this report adopts terms to denote particular levels of activity pertaining to organisations interacting with each other. Taking its lead from the CDI strategy, Working Together is used to denote the entire range of inter-organisational activities which can occur between organisations. Interagency Working is used to denote those inter-organisational activities which occur at the strategic level. Service Integration is used to denote those activities which occur 'on the ground' in providing services directly to children and families. After reviewing the literature, two continua were synthesised – one for interagency working and one for service integration. For convenience, both are presented again below:

Service Integration Continuum

Interagency Working Continuum



Terminology	Activity
Communication	Information exchange, knowledge exchange. Mutual learning. Networking. Informal activities. Voluntary engagement. Not working towards goals
Cross-Boundary Planning	Debate and identification of local needs and priorities; planning actions; organisational contributions agreed but separate actions pursued;
Cross Boundary Planning and Implementation	Jointly or separately taken action on an agreed plan. Identifying monitoring methods; review processes; mutual feedback on success or failure.
Cooperation	Working together towards consistent goals and complementary services, yet maintaining independence. Relatively informal arrangement
Coordination	Organisations working together in a planned and systematic manner. Organisations maintain independence, but contribute to shared and agreed goals
Collaboration	Separate and distinct roles, shared values and agenda, pooled resources, blurred boundaries, weaker partners supported to play a full role. Always voluntary.
Full Partnership	Formalised agreement (often for the delivery of a service). Also termed Coalition, joint structures sacrificing autonomy

As outlined in Chapter Three, three different levels of activity regarding CDI's work to foster interagency working and service integration have been identified from research undertaken for this theme specifically, and the evaluation more generally. These three levels are:

1. CDI's governance structures;
2. CDI and its commissioned services;
3. CDI and the wider organisational community of Tallaght West.

Both the continua and the levels of activity serve to help structure the data presented in chapters three and four.

It is to an analysis of this data on the context of the continua and levels of activity that we now turn. It is important to emphasise that, at this stage of the evaluation in the overall context of the period under examination, preliminary findings give rise to early stage assessments regarding the degree of working together. What is presented here is a 'point-in-time' analysis of the extent of working together as a result of CDI's governance, commissioned services and wider activities.

6.3 Fostering 'Working Together' within CDI

6.3.1 Interagency Working

There are a number of activities that CDI undertakes which foster some form of interagency working. As detailed, the CDI board which governs the activities of CDI, is a body made up of participants from different organisations. At the same time, each is present and active in an individual capacity, bringing individual expertise and skills rather than representing a particular organisation as such. Therefore, while it is an important structure, its relevance as a mechanism and activity of interagency working is limited.

Of far more relevance to this section is the role and remit of the Implementation Support Group (ISG). As set out in chapter three, the ISG plays a significant role in advising CDI on the implementation of its strategy, and specifically on overcoming barriers to implementing its services. Each member is perceived to bring a particular relevance and expertise to the table, and knowledge of cultures and values pertinent to the health and education sectors. Amongst ISG interview respondents there was clarity around the role of the group, and the plan which they were supporting. CDI planning meetings were influenced by advice provided at the ISG, and such a role is facilitated through the strong reporting mechanisms which the CEO fulfils at ISG meetings. Progress on the overall implementation of the CDI strategy, individual pieces of work and issues raised at ISG meetings are all features of the CEO's report to the ISG at each meeting. Interagency working is furthered also by recent combined ISG-Board roundtables held in May and November 2009

A clear example of the role and power of the ISG is the arrangement whereby a speech and language therapist was incorporated into the service profile of CDI by way of an inter-organisational arrangement across the statutory-voluntary divide – namely funded by CDI, employed by An Cosán and line managed by the HSE. Another example ISG interview respondents felt was important was the role information provided around the table played in breaking down the barriers with some schools in the locality about the nature of CDI and its work, and the desire to integrate services in schools. As highlighted in the findings, it should also be pointed out that work of the CEO and the CDI team also contributed to enhancing this set of relationships.

ISG members also felt that their meetings provided a real opportunity to engage with each other, to highlight issues which may be arising in their own organisations for the benefit of other partners and to meet and discuss issues relevant to services for children and families. While the frequency of meetings has reduced, this was seen as indicative of a settling down of the implementation process. The high level of respect for partners around the ISG table, as well as the efficient management of the lead-in process and the meetings themselves, in addition to other factors highlighted, reveals that, against the pre-requisites of good interagency working the ISG is a successful enterprise. Within the confines of its remit, it would appear at this stage to be doing well.

When we examine the activities of the ISG against the continuum of interagency working, it appears at this stage that its work most closely aligns with those features of the category Coordination. The ISG is a structure where organisations work together to in a relatively planned and systematic manner while maintaining their independence. All the organisations contribute to shared and agreed goals. This is most apparent in the ISG's role as advisors on the implementation of the CDI strategy. Relevant also is the role many of the ISG organisations had in the development of CDI and its strategy. Therefore, some of the characteristics of other forms of interagency working are also apparent in the work of the ISG, for example the monitoring and review processes inherent to its remit (cross boundary planning and implementation) debate and identification of local needs and priorities (cross-boundary planning) and information exchange (communication). In the main, however, Coordination best describes the nature of interagency working in the ISG.

6.3.2 Service Coordination/Integration

Given the examples outlined above, and the role of the ISG in advising CDI on the implementation of the strategy, it appears that it does have an impact at the service level, albeit indirectly. However, that is not to say that the ISG is itself an example of where services are coordinated, managed and/or integrated. Instead, through undertaking its work, it causes some elements of the service landscape in Tallaght West to be more coordinated, and with the example of the speech and language therapist, indeed to integrate. Yet, as service level continua outlined above, it is not an example of

service level activity either providing information to families directly or services working seamlessly, whether in a unified structure or not.

6.4 Fostering 'Working Together' in CDI Commissioned Services

As outlined earlier in the report, CDI has commissioned a number of organisations to deliver services on its behalf. Understandably, all the organisations have a particular relationship with CDI in that they are contracted to deliver a service. This is an area where relationships are expected to develop and interagency working viewed as the norm – in the language of the continuum there are elements of Full Partnership – a formalised agreement (often for the delivery of the service). Thus, the evaluation team has concentrated on where these services are creating opportunities for contracted organisations to connect and work together with third parties as part of the core work of the service. From the initial research undertaken with the services as part of the process evaluation, some services display a greater degree of working together with organisations than others. Examining more closely these relationships, there are examples of where both interagency working and service coordination/integration occur, where strategic-level and service-level interactions are happening. Where two or more organisations are working together, the assumption is that a specific form of interagency working is occurring: cross-boundary planning and implementation of a defined plan, (i.e. the programme and its manual, with monitoring methods identified, review processes clarified and mutual feedback on success or failure). However, as was depicted in chapter four, no one form of interagency working alone is sufficient to describe the interagency working processes which underpin each service. Rather, the characteristics of each service are fluid, with different forms of interagency working appearing to apply at different times.

6.4.1 Early Childhood Care and Education (ECCE) Service

6.4.1.1 Interagency Working

From documentary analysis and the interviews undertaken with CDI staff and an ECCE provider, interagency working is a strong element of the ECCE service, although not core to its delivery. Evidence highlighted in chapter four indicates that a significant amount of planning was undertaken in regards to the development of the ECCE service. In addition to the broad consultation and planning exercise which underpinned the development of CDI generally, Communication was a feature of the early stages of preparing an early years service (information sharing with other PEIP sites and Barnardos, meetings with the HSE and the Department of Education), as was Cross-Boundary Planning (working with a variety of organisations on debating and identifying local needs and priorities).

Although the service itself is stand alone, in the sense that the service provider is contracted by CDI to provide it without any other organisation involved, the links the service provider fosters with other ECCE providers via CDI would appear to reflect communication. Characteristics of other forms of interagency working do exist, such as working towards goals. However, these goals are those laid out in the manual and by CDI, rather than goals jointly developed by organisations participating in some form of interagency working. ECCE managers come together through CDI-convened managers' meetings to liaise on common issues relating to the provision of the service. In addition, the Community of Practice is an opportunity to share information on issues of common concern relating to the provision of ECCE specifically. CDI-organised training provides an opportunity for staff of all services and organisations to come together. However, accounts of these reported to the team highlight that they also appear to be introductory in nature, providing links and contacts to other organisations in the area. At this stage it would appear that the ECCE service predominantly displays characteristics of communication. Information and knowledge are exchanged, with mutual learning and networking being strong features. Yet, as referred to above, elements of other forms of interagency working do feature from time to time.

6.4.1.2 Service Coordination/Integration

The ECCE service displays a strong adherence to the characteristics of both service coordination and integration. The accounts provided to the evaluation team illustrate that, particularly in relation to the speech and language therapist (SLT), this service is integrated to the point that parents now view it as a coherent part of the ECCE. The integration of the SLT in the ECCE service – it would appear at this stage - is a clear example of two services working together seamlessly, both in the eyes of the service provider and reportedly parents (by way of the service provider), and also against the criteria of the service integration continua. While there is no unified management structure, such a characteristic is not essential to have

service integration. There are other examples of service integration cited in the evidence also, such as the example cited of teachers for the visually impaired becoming involved in ECCE services on a needs basis. While there are no managed processes of integrated assessment or case management, there is service integration other than that which occurs with the SLT.

The ECCE service also displays elements of service coordination. Accounts reported in chapter four of ECCE staff readily contacting health services seeking information, both for their own practice and to pass on to parents, comply with the description of service coordination in the continuum. CDI has played a role in fostering this also, with the provision of contact lists for staff of services in the area.

6.4.2 Doodle Den

6.4.2.1 Interagency Working

Similar to other programmes, Doodle Den is implemented between schools and local service providers, in this case Citywise Education and An Cosán. The service operates both on school grounds and off-site and is delivered by a team comprising of a youth facilitator and a primary school teacher. As with the other services, the entire Doodle Den programme is characterised as an example of cross-boundary working and implementation, particularly between CDI and the commissioned service providers. Evidence in chapter four indicates that a significant amount of interagency working occurred at the beginning in developing particular aspects of the service. CDI worked with various agencies on sharing expertise and knowledge on a number of issues, such as engaging parents in literacy programmes (communication), training facilitators, and supporting the implementation of aspects of the programme (the library's involvement in purchasing books on behalf of CDI and hosting the parent component of the programme – elements of both cooperation and collaboration).

In addition, the tendering process for the service required prospective service deliverers to engage with schools prior to submitting an expression of interest for the contract. This is an interesting occurrence as the tendering process caused organisations to come together prior to securing the tender. Thus, outside the scope of implementing the manual and the programme, the level of interagency working has been in parts strong, with coordination being a feature.

As reported in the findings, the operation of the programme is based on a teacher and youth worker co-delivering the programme. This co-delivery has caused an increase in interagency working between the commissioned organisation and the junior schools. School principals and service providers interact to varying degrees, with personality-dependent interactions being a strong factor in forging relationships. Those involved in the services meet on average quarterly on a formal basis to review implementation, yet this is also interspersed with informal meetings, conversations and information sharing. Principals are also reported as working positively with teachers and youth workers involved in the delivery of the programme. Once the service was up and running, communication seems to best describe the nature of interagency relationships between schools and service providers. CDI also meets with schools, and this is characterised by them in interviews as being cooperation due to the relatively informal arrangement which underpins it. However, agreements are in place to use facilities and release teachers for the purpose of the programme, so it would not be unreasonable at this stage to characterise it as coordination either. Similar to other services, Doodle Den staff access training and seminars provided by CDI which provide an opportunity for information exchange and mutual learning, features of communication.

6.4.2.2 Service Coordination/Integration

Doodle Den is a case of service integration. Irrespective of the location of operation, youth and education services are integrated within one programme in a seamless manner. Service coordination is also a feature Findings highlighted that, if requested, service providers can provide information to families about other services in the community. While the absence of a follow-on programme for Doodle Den was highlighted, evidence outlined in chapter four indicates that service coordination does occur, both for facilitating participation in the programme and also so as to meet identified needs. The development of a protocol for organisations on sharing information should assist in promoting greater service coordination and may lead to service integration.

6.4.3 Mate-Tricks

6.4.3.1 Interagency Working

Like the Doodle Den Programme, the Mate-Tricks programme operates in conjunction with local schools. Immediately, therefore, some form of interagency working occurs. CDI has commissioned Foróige to deliver the programme in partnership with local schools, with the programme being delivered in schools and non-school venues. However, it is important to note that the programme is solely delivered by Foróige staff.

Findings reveal that the development process for Mate-Tricks involved CDI working with another organisation, namely Archways, on a contracted basis to develop the manual and deliver training for it. Archways also provided logistical and practical support to the implementation of the programme in the first year. In addition to the cross-boundary planning and implementation characterises the process, this relationship also is characterised by coordination.

The governance of Mate-Tricks is not underpinned by a committee as such. As with other programmes, CDI works closely with the Foróige in planning and delivering the service. While cross-boundary planning and implementation occurs, coordination is also deemed to be a feature. This is understandably more so the case as CDI play an active role in the implementation of the programme, with a staff member delivering it alongside Foróige staff.

At this stage interaction between the youth organisation and schools is formal for the most part, with information being shared with schools through principals in some cases, and through teachers and Home School Liaison Officers in other cases. This information sharing is a two way process, with schools informing Foróige, and Mate-Tricks staff in particular, of particular issues relating to children involved in the service. Overall, relationships between the school and Foróige staff were described as personality-dependent more than anything else. The level of engagement depended on individuals worked with. However, at this stage, as reported to the evaluation team, there is not much engagement of agencies beyond those involved in the programme directly (i.e. Foróige and participating schools). It would appear at this stage that cross-planning and implementation occurs in the implementation of the programme and its manual where it is delivered on school grounds, with communication between Foróige and the schools also a feature of the service more generally. There had been some contact with community organisations regarding the use of premises for the operation of the programme and in the sense of interagency working, this could be best characterised as cross-boundary planning – organisational contributions are agreed, but separate actions are pursued.

6.4.3.2 Service Coordination/Integration

Where the service is located on school grounds there would appear, understandably, to be more integrating of school and youth organisational activities than where it is delivered 'off-site,' which may be more a case of service coordination. However, this relatively new role for Foroige needs to be examined in context. Mate-Tricks is a new programme for the organisation, requiring them to interact with an age group traditionally below their threshold. Such a development could be viewed as positive, in that it introduces the organisation to a new cohort of children, allowing for onward referral at a later stage into other services provided by the organisation for older children. Mate-Tricks staff liaise with other organisations when operating the programme, but largely in the sense of sourcing information for parents and children. The staff attempt to link children finishing programmes into other organisations or activities, but as highlighted, this would normally be the base for Foroige. Additionally, it was reported that service staff also seek referrals into the programme from other organisations. These activities are more closely related to service coordination rather than service integration.

6.4.4 The Healthy Schools Programme

6.4.4.1 Interagency Working

The Healthy Schools Programme, like the other services, displays characteristics of specific forms of interagency working at different times. An interagency process underpinned the development of the Healthy Schools manual, with many different organisations coming together to write it. The governance of the programme is underpinned by a Healthy Schools Steering Committee (HSSC) comprised of the principals of the participating schools, representatives from the HSE and SDCC, CDI, the Home School Community Liaison, and for part of the meeting the Healthy School Coordinators.

An agreed plan, namely the manual for the programme outlines that the role of the steering committee is to guide the work of the coordinator, advise on particular issues arising, build on organisational links which are in place and establish new ones. Given these roles, it would appear that at this stage this is an example of interagency working, and in particular, cross-boundary planning and implementation. The manual is implemented under the guidance and review of the committee and CDI. Action is taken on a joint or independent basis to implement the plan.

Interviews with CDI identify that the committee fulfils the characteristics of collaboration, but there would also be instances of coordination (where organisations systematically planned particular events) and cooperation (where there were one-off events worked on). Other work of the HSSC could be characterised by cross-boundary planning, such as the needs analysis work undertaken with teachers, parents and health professionals in the area in December 2009. Communication is also a feature, with organisations presenting to the committee on aspects of their services.

There are also features of other forms of interagency working, such as communication between coordinators and schools, and coordinators themselves. While initial communication lapses were identified in the interview with the service respondent, such lapses have now been overcome. In addition, where an absence of leadership was also identified amongst some organisations involved in the service, these too appear to have been resolved. Staff attend CDI training and seminars, as well as receiving regular updates from CDI staff on a range of issues. The reported experience is similar to those reported by other services' staff who partook in interviews for this report. They present a good opportunity to network and share learning.

6.4.4.2 Service Coordination/Integration

The interviews from CDI, the Healthy Schools service respondent, and those from the ISG highlighted that this programme should be a clear example of service integration, with education and health services working together to provide a more coherent approach to the health needs of children in the participating schools. Service integration underpins the intention of the Healthy Schools Programme. The reported view on the intended working of the programme was to integrate health service access and referral into the schools so as to improve client attendance at medical appointments, dentist and others, as well as undertaking a number of health-related activities. However, there have been early challenges in achieving all the intentions of the programme. As reported in the findings, an inability by health professionals to share information about clients has affected the implementation of some aspects of the programme. In the future, the coordinators will seek to integrate other services from the community into the schools, such as sporting activities, with a view to sustaining the programme beyond the length of CDI involvement. In the main then, service integration does not occur, but rather service coordination is the main feature of the service. The coordinators' key role (in addition to organising activities and events in conjunction with the school and other organisations) is to provide information to parents, teachers and children about services, and in some cases arranging referrals, locating services and clarifying health needs of children where parents so desire. The recent introduction of a speech and language therapist into the Healthy Schools programme is a positive regarding the integration of a health and education service, and lends itself more towards the characterising of Healthy Schools as an example of service integration.

6.4.5 Community Safety Initiative

6.4.5.1 Interagency Working

Underpinned by a steering committee and other committees comprised of representatives from a range of organisations, the Community Safety Initiative is unique in the sense that it is not a service. It represents an attempt by CDI to promote a greater sense of belonging, safety and well-being amongst the four communities in which it operates. As there is no service or throughput to speak of (rather a series of activities), the interactions of these committees serve to provide a focal point for this work.

The composition of this committee is, similar to CDI's Implementation Support Group, underpinned by interagency principles. As reported in the findings, trust is a strong factor which informs the operation of the committee, and has become increasingly a feature of the Initiative's implementation and its effect in the community. The development of the initiative is a work in progress. Despite the absence of a manual, this has paradoxically offered an opportunity to all organisations, and indeed members of the wider Tallaght West community, to shape the CSI. Thus, in line with the

other services, cross boundary planning and implementation is a feature of the Initiative. Yet, when particular events are examined in relation to the CSI, there would appear to be examples of cooperation, in the identification of consistent goals and complimentary services while maintaining independence. The street party event, spoken about in interviews by both the CSI key informant and ISG members in passing, highlighted the cooperative efforts by a number of organisations in creating a convivial atmosphere, with organisations contributing resources and personnel to the event. Yet, some of the more basic elements of interagency working, such as good communication between organisations, have been challenging to the operation of CSI, although this issue has reportedly eased with the above cited increase in trust and familiarity.

6.4.5.2 Service Coordination/Integration

Despite not being a service, the CSI does, through the auspices of CDI, promote service coordination. Newsletters and other information services serve to highlight particular issues pertaining to the CSI, as well as to generic services provided by other member organisations. Examples of County Council service clarifications being circulated by way of the CDI's texting service is a case in point. Another component of the CSI, the Safe and Healthy Place programme being operated in McUllium Estate, aims to integrate a service and strategic response to the challenges which are occurring in that area. The proposed joint clinic between the Gardai and the SDCC is an encouraging development towards integration.

6.5 Activities of CDI to Foster and Promote Working Together External to Commissioned Services and Governance Structures.

6.5.1 Interagency Working

It is clear from the findings that CDI undertakes a wide range of activities pursuant to promoting working together in some form or another. One of the key activities in building relationships with external organisations at the strategic level is CDI's role on the Children's Services Committee. Established on a pilot basis in four areas in the Republic of Ireland, the CSCs are examples of prospective innovative approaches to meeting the needs of children and families through inter-agency working and the development of particular projects. CDI has representation on a number of the SDCSC's sub-committees and contributes to the overall committee's reporting system for the National Implementation Group. While one ISG member felt that the CSC and the ISG has a reciprocal relationship, the other two put forward the view that the CSC is the more dominant structure which takes precedent. However, as has been highlighted, CDI has sought to develop interagency induction training but has been delayed in undertaking this activity due to requests from the CSC to await the publication of a county-wide directory. This is important: CDI has sought to develop its external relationships and foster interagency working through its own initiatives, yet as part of a wider interagency structure has sought to be a full partner and worked with other organisations in the spirit and practice of interagency working. From the limited data available to us, it would appear at this stage that collaboration characterises CDI's involvement in the SDCSC.

Despite the relatively small number of survey respondents, the majority indicated that they have some connection with CDI. Of this, 25% are in receipt of funding and training activities provided by the Initiative. Given that 62% of those indicating a response to interaction with CDI highlighted that they have no formal agreement with CDI, this represents a relatively high number of non-mandated interaction, i.e. they are not contracted to CDI as a commissioned service provider, but rather their interaction is voluntary. This is important in that it gives some insight into the wider influence CDI is having on organisations in the locality. However, again, this must be set within the context of an overall low response rate.

More noteworthy is the finding that all survey respondents highlighted some form of impact which CDI had on their organisation, with 88% reporting 'some' or a 'strong' impact. When the type of impact is examined, strong impacts were reported on professional networks and the training of staff, with lesser values for 'strong impact' linking with other organisations and training of managers. Regarding the continuum of interagency working, Communication best describes this form of relationship at this stage.[10] Interestingly, 11 survey respondents highlighted that CDI has some or strong impact on the delivery of services, with the same value reporting the same impact on the development of services. This is particularly noteworthy when one considers that only five survey respondents indicated that they were in receipt of funding; however, training could plausibly have an impact on the development and delivery of services also.

[10] The next process report on training and support provided by organisations will permit a deeper analysis of this aspect of CDI's work and its impact on interagency working.

When interactions are examined, it is interesting to note that the impact CDI has had on relationships between organisations is mixed. While the majority of survey respondents who indicated being a member of a CDI structure report that new contacts were made and existing ones improved, half of those who receive training report reported no new contacts being made. Furthermore, when members of CDI's structures are excluded, the majority of survey respondents indicated no increase or decrease in interagency working, but rather report the same level.

These survey findings are largely corroborated by those from the interviews. Taken together, it is clear that CDI provides a local role in raising awareness of other services through providing introductions, holding seminars where people can meet and network, introduce their service, as well as opportunities for training. A picture emerges of CDI's activities to promote organisations working together in the Tallaght West area. For the most part, it is appears at this stage that there is a relatively low level of interagency working as a result of CDI's external activities. Information is being exchanged, often electronically. There is mutual learning occurring but the enterprise is voluntary. Communication, as defined in the continua, appears to best describe the type of interagency working apparent from CDI activities at the moment.

6.5.2 Service Coordination/Integration

As reported particularly in the interviews, but also reflected in the survey findings, there is a perceived lack of full integration of services in Tallaght West. Interview findings from both the ISG and the self-selected interview respondents reveal that the integration of services is a process very much beginning in the locality. The findings from the survey indicated a more heterogeneous set of opinions regarding service activity, with the most homogeneous sets of responses revolving around contact for referrals and information, and in some cases, information sharing with other organisations. Survey findings highlighted the high take up of CDI opportunities for training and seminars, which can be reasonably assessed as increasing service familiarity and facilitating service coordination in the locality. Interview findings across all groups of respondents indicate that where work towards integration of services occur, it is largely currently focused on service coordination. Organisations remain separate, and largely provide information to families or clarify roles and services of other organisations for them. At this stage of the evaluation, service integration in a seamless manner does not appear to be a feature of the wider landscape of child and family services in Tallaght West. Rather, service coordination, through the exchange of contacts and information between professionals, is supported through CDI's work.

6.6 The Extent of Inter-Agency Working and Service Integration in Tallaght West

6.6.1 Interagency Working in Tallaght West

Part of the evaluation brief for the process evaluation is to assess the extent of interagency working and service integration in Tallaght West, so changes can be assessed over the remainder of the evaluation. Notwithstanding the small numbers participating in the research for this report, it is clear from both the survey and the range of interviews undertaken that working together of some form occurs, and from the interviews, has been occurring for some time and to different degrees. While there was a lack of clarity around what exactly constituted interagency working, and uncertainty about any particular model which underpins it, the vast majority of survey respondents were of the opinion that it was an inherently good, if not vital, thing to pursue. Both the survey and the interviews reveal an enthusiasm and willingness to work together. This is also highlighted when reasons to be involved in interagency working in the future are examined, with all prospective situations receiving high scores for more involvement. Yet, the highest are training on specific activities, information sharing, experience exchange, targeting groups and pooling resources. There are also high values for joint planning, joint implementation, and sharing indicators of progress.

That organisations pursue interagency working for the achievement of better outcomes for the children and families they work with, and the identification of service needs predominantly, is also a strong positive factor for CDI. As outlined in the first evaluation report, and the interviews with CDI for this report, the strategy and the work towards achieving the outcomes outlined in it are very much in line with those outcomes in national policy documents such as the Agenda for Children's Services (OMCYA 2007) and the National Children's Strategy (Government of Ireland 2000). Again, the strong values for providing a global or holistic approach to meeting children's needs, and that it is good to link with other agencies, are also congruent with national policy in this regard.

Understandably, given the key role it plays in a variety of areas, the HSE is identified as the organisation which is worked with the most, however within this figure it should be appreciated that it is a large organisation with a number of different facets to it affecting children and families. Indeed, in the interviews a number of respondents indicated that the Health Services either seek to work with organisations or are easier than other organisations to work with, although this does depend on which aspects of the health service are worked with. Nevertheless, this is important for CDI. The HSE is intrinsically linked into its governance, through the ISG and its own participation on the Children's Services Committee. It offers CDI a useful opportunity to plug in to the HSE's practices and networks to further progress its aim of enhancing interagency working in the area.

It is clear from both the survey and the interviews that respondents' perceptions of interagency work largely centres around opportunities to improve communication, establish or improve trust, engage practitioners, and create a shared understanding of tasks, processes, and outcomes for children. These perceptions are equally played out when the activities of doing interagency work are examined: sharing information formally and informally, participating in formal and informal networks and pooling expertise. Indeed, the reported experience of interagency-working process is dominated by contact with other agencies being facilitated. In this regard, many of these factors or perceptions could continue to be facilitated through CDI's activities, both in relation to commissioned services, and the wider circle of organisations in Tallaght West.

When the interagency work reported in both the surveys and interviews is assessed against the continuum, it is clear that no one specific form operates at this stage. Instead a variety of interactions are apparent, ranging from communication level activities to coordination. No interview respondent reported a full partnership underpinned by a formalised agreement with a sacrificing of autonomy. However, some organisations do report to work together in a systematic manner in contributing to shared and agreed goals.

6.6.2 Service Coordination/Integration

The findings on the extent of service integration are a little less clear. A majority of survey respondents report that their organisation seeks to integrate its services with those of other organisations in the locality, a majority report that their organisation pools or shares its resources with other organisations to deliver services, and a high degree of service coordination activity and sharing of information is reported in the surveys. Yet, the majority of interview respondents report that service integration, while beginning, has a long way to go. This is corroborated in the interviews where, when CDI is taken out of the picture, service integration does not appear to occur. There are no examples cited of seamless services in operation.

6.7 Summary

Two things are apparent in this discussion. One, in the context of the evaluation it is clear CDI is undertaking a huge range and number of activities which foster interagency working and service coordination/integration. Its commissioned services are the clearest example of both concepts in a direct sense. Yet, there is much to be highlighted in the wider sense, its activities bringing organisations together, sharing expertise, enhancing the learning of individuals in organisations and creating links within and external to Tallaght West. Second, interagency working is a strong reported feature of the work of organisations in the wider organisational landscape. While the degree to which it happens varies greatly, it does occur. However, the nature of this interagency working appears to converge towards the lower end of the continuum. It concerns information sharing and awareness-raising of other organisations and what they do for the most part, with some examples of organisations engaged in more formal activities with specific organisations. For families, while the survey findings offer a picture of services being more integrated, the interview findings tend to illustrate more service coordination rather than seamless integration.

The CDI strategy speaks of causing agencies to work closer together, and to integrate services in schools and child and family centres. Data generated for this report highlights that implementing these activities of the strategy was undertaken in an organic manner, with learning being incorporated into decisions about future activities. Nevertheless, the development of CDI services, and the governance structures which it has established, appear at this stage to have initiated the process of enhancing interagency working and the coordination of some services, if not the full integration of all. Yet, in its commissioned services it is happening. In this sense, CDI can be said to be fulfilling its brief to some extent at this stage. The issue is to what degree CDI desires to have organisations working together, and how it moves all its commissioned services from coordinating services with other organisations to integrating services with other organisations.

Chapter 7: Conclusion

The purpose of this report has been to answer a series of questions about CDI's activities which aim to foster interagency working and service integration. In undertaking research to answer this set of questions, establishing the extent of interagency working and service integration in Tallaght West was also an important goal of the project. What is presented in this report is a first picture of interagency working and service integration. However, there is more research to be undertaken by the process team for this particular theme. Additionally, very useful data may still come to the process team by way of a data sharing procedure once service evaluation reports are available to CDI.

The CDI strategy speaks of promoting 'working together' and the integration of services in the locality. Additionally, its vision statements include that which says "CDI will encourage collaboration and shared learning amongst all stakeholders; raise awareness of roles and responsibilities; share information; challenge how we work and find solutions together, in order to deliver more effective services and influence policy." A number of preliminary conclusions can be made at this stage. Firstly, it is quite clear that CDI is undertaking a significant amount of work to foster working together, to promote and facilitate interagency working at the strategic level and service coordination and integration at the frontline. Secondly, there are different forms of interagency working, and service coordination and integration occurring across the three levels of activity identified – within CDI's internal governance structures, the CDI-commissioned services and in the activities CDI undertakes to promote working together in the wider organisational community. Thirdly, CDI's role and related activities to promote interagency working and service integration are perceived positively by those who have participated in this research.

However, a challenge exists for the evaluation team and CDI. In attempting to make any conclusive judgement regarding the value of CDI's activities in promoting working together, a more specific set of criteria regarding the extent and depth of interagency working is required.

The evaluation team believes that, in light of this report – the picture it paints at this point – and the changing service environment in which CDI, its services and governance mechanisms operate, now may present an opportune time to envision with specificity how it can impact on interagency working and service integration in Tallaght West.

The Evaluation team recommends that the CDI team, in conjunction with the ISG, Board commissioned stakeholders and key organisations in the locality, work towards the clarification of what specifically it desires regarding interagency working at the strategic level and service integration at the frontline.

To initiate and aid this process, a number of reflective questions could be considered as a starting point:

1. What does CDI want to achieve specifically regarding interagency work and service integration as a process? Is Full Partnership the desired end point of all its work which promotes interagency working? Are there different forms of interagency working which might be most suitable for particular levels of activity?
2. What impact does it want to have on the strategic and service environment in Tallaght West once its work has been finalised? Does it want to leave an interagency infrastructure in place? Is sustainability a key driver in this regard?
3. What will that environment look like for organisations and services, but also for families?
4. Is there an outcome or outcomes relating to interagency working which can be pursued by all in the locality under the leadership of CDI?
5. Are outputs or indicators of progress to be achieved possible to identify?

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APPENDIX ONE

MODELS OF INTERAGENCY WORKING AND SERVICE INTEGRATION

Frost (2005), in writing about professionals and 'partnership,' conceives the variety of connections which occur between a range of professionals and organisations as a continuum. Conceiving interorganisational and inter-professional connections as such serves to delineate them from each other. In undertaking a literature review he (2005, p13) attempts to clear some of the 'conceptual undergrowth' which has proliferated around the topic. His continuum begins (2005, pp13-16), reasonably, with the absence of any form of partnership before moving through four other stages of the continuum:

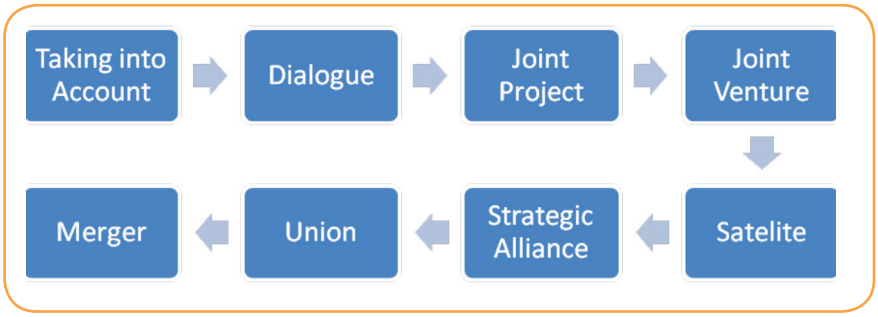
Frost's Continuum of Partnership

- Level 0 – no partnership. Uncoordinated, free standing services;
- Level 1 – Cooperation. This is conceived as communication between organisations, but is more than merely communicating. It is occasional and sporadic, not systematic, not planned;
- Level 2 – Collaboration. This is conceived of as being 'more coordinated' than cooperation, with services being planned together towards the achievement of a shared goal. Again, borrowing from other authors, Frost views a key element of this being the potential to achieve something which individual agencies or organisations could not achieve alone. Hence, 'adding value' through engaging with other agencies becomes a potential benefit of the process. Collaboration serves to address issues of overlap, duplication and gaps in service provision;
- Level 3 – Co-ordination. Believing it to be a stronger concept than either of those which have gone before (and borrowing heavily from Hallett and Birchall), coordination is envisaged as involving higher ranking personnel, involving decision making rules, a greater degree of formalisation, a commitment towards joint goals and involving more of a threat to organisational autonomy;
- Level 4 – Partnership. The complete merger/integration of organisations into new ones. Different services become one in order to enhance service delivery.

In addressing the theme of partnership with regard to frontline professionals, Frost's continuum incorporates levels of activity which can be characterised as either strategic or operational (i.e. service delivery-focussed). Indeed he argues that many of his partnership constructs outlined above relate to those which are largely "managerial/policy level" orientated. Percy-Smith and others (see below) also distinguish between these two broad levels, and important point which will be considered further on in this chapter.

6 (1997) and colleagues at the Demos Foundation and elsewhere (1999) anticipated that the watchwords for government in the UK over the next decade would include outcomes-orientated government, holistic government and preventive government. Achieving this is possible, they argue, by the adoption of some simple lessons, including the implementation of integrative initiatives across the country – in other words, 'doing; holistic government; coordinating and integrating at all levels of policy – formulation, regulation, provision and monitoring (6 et al, 2002). In reviewing some of the early examples of holistic government, they identified a range of potential relationships, again taking the form of a (somewhat loser) continuum, spanning what could be described as being cognisant of other organisations in an environment to full merger. These are:

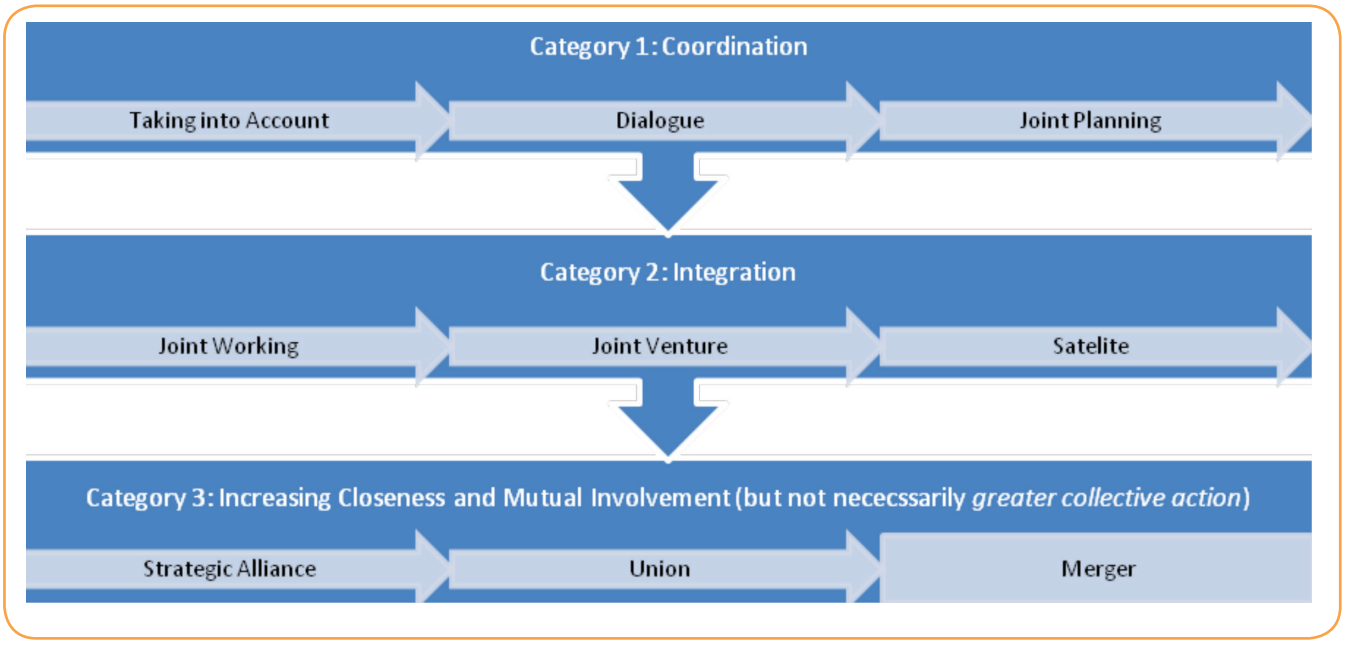
6 et al's Initial Spectrum of Relationships (2002)



- Taking into account: strategy development considers the impact of/on other entities;
- Dialogue: exchange of information between entities;
- Joint project: temporary joint planning or joint working between entities;
- Joint venture: long-term joint planning or joint working between entities;
- Satellite: separate entity created to serve as an integrative mechanism between existing entities;
- Strategic alliance: long-term joint planning and working between entities on issues core to the mission of at least one of them;
- Union: formal administrative unification of entities maintaining some distinct identities;
- Merger: fusion of entities to create a new structure with a single new identity.

It is interesting to note that Percy-Smith (2005, p24) estimates that 'partnership working would probably fit somewhere between 'joint project' and 'union' but fall short of outright 'merge.'" However, in undertaking a comparative review of 'joined-up government' 6 (2004) further comments on the spectrum of relationships above, highlighting that there are alternative ways to classify interorganisational relationships, including focusing on policy formulation, programme coordination, integration of service relationships and integration of services to individual clients. Regarding what is outlined above, his terminology has been altered slightly and reclassified to represent taxonomy of types of relationships:

6's (2004) Taxonomy of Relationship



Here, the terminology is the same except in two cases: joint project has the same meaning in 2002 as joint planning has in 2004; and joint working, a new term, implies 'temporary collaboration.'

Hodges et al (1998), in identifying and discussing promising examples of collaboration in systems of care in children's mental health services in the United States, envisage a rather limited list of interagency working arrangements which does not distinguish between service-level and strategic level activity. As a first step, they describe collaboration as a process "of bringing people together [….] for problem solving […where] participants join forces, pool information, knock heads, construct alternative solutions and forge an agreement" (1998, p24). Borrowing heavily from other renowned authors, notably Himmelman (1992), Gray (1989) and Bruner (1991), Hodges et al argue that collaboration is distinguishable from other forms of interagency working in that it implies an interdependence between participants where risks, resources, responsibilities and rewards are all shared. In a sense, collaboration is a "formal framework for problem solving" (ibid). Coordination and partnership are not the same as they do not have an interdependent system with roles and responsibilities. Collaboration is also different from temporary coalition in that the latter is construed as being largely problem-driven whereas the former is vision-driven, "implies a structure with by-laws and procedures, a style of work and a sense of community among its members who compliment and support one another's efforts" (Hodges et al, 1998, p24).

Other variants or types of collaboration are briefly discussed, such as (original authors cited in Hodges et al 1998, pp26-28):

- Four-tiered collaboration, involving Interagency administrative collaboration (with the function of coordinating services); interagency service collaboration (with the function of creating the network to carry out these services); intra-agency collaboration (with the function of ensuring participation of all levels of a single agency); and worker-family collaboration (which "creates a partnership with families to create individualized service plans") (Bruner 1991);
- Interagency collaboration which is case-centred (addressing the needs of individual cases through case management and coordination); programme-centred (which aims to coordinate previously fragmented services into a comprehensive service system); and policy-centred (which involves meetings between agency and organisation representatives at local or national level to advise, plan or recommend policy changes) (Gans and Horton 1975; Skiba et al 1996)
- Collaboration dependent on the level of decision-making involved or structural characteristics, such as ad-hoc committees, informal or formal agreements, communication (National Assembly of National Voluntary Health and Social Welfare Organisations 1991).

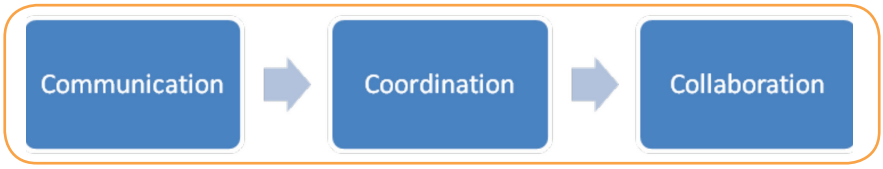
However, despite their attempt to describe the various ways in which other authors describe collaboration, Hodges et al make no attempt to synthesise their own model of collaboration, but rather highlight that more research is required to identify common elements at each level of collaboration (1998, p28).

One author that does appear frequently in Hodges et al's review is Charles Bruner. Initially published in 1991, his guide for those involved in children's services in the United States, Thinking Collaboratively, envisages a rather truncated series of interorganisational arrangements. Focusing specifically on Collaboration, he describes it as a "process to reach goals that cannot be achieved singly (or, at a minimum, cannot be reached as efficiently) [which is] a means to an end, [with the end being] more comprehensive and appropriate services for families that improve family outcomes" (Bruner, 1991, p6). Bruner highlights that in his conceptualisation, collaboration involves jointly developing and agreeing to a set of common goals and directions, sharing responsibility for obtaining those goals and working together to achieve those goals through using the experience of each collaborator. It is something which is underpinned by consensus-building, and is thus voluntary. It cannot be imposed hierarchically. Two other 'Cs' are mentioned and defined by Bruner in contrast to Collaboration:

- Communication – and enterprise which can help people do their jobs better by providing more complete information, but which does not require any joint activity;
- And Coordination – which involves joint activity, but allows individuals to maintain their own sets of goals, expectations and responsibilities.

Thus, for Bruner, we have a three-part continuum:

Bruner's Continuum (1991)



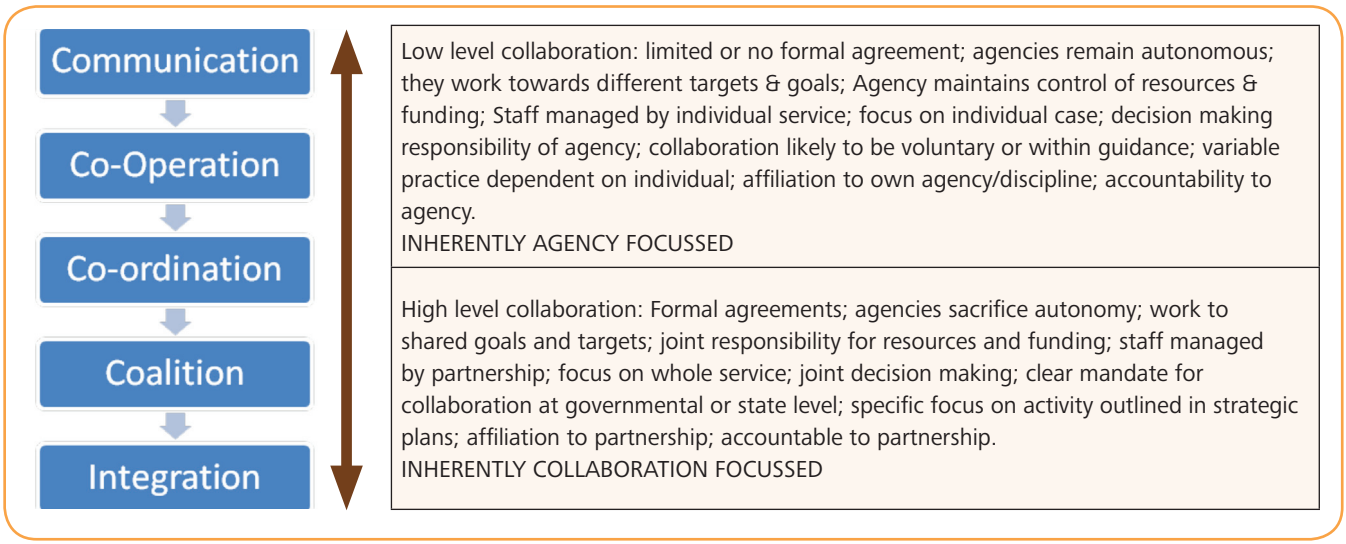
From their synthesis of the literature, Horwath and Morrison (2007) offer the term collaboration as an all-encompassing term which describes a range of working together arrangements. In the review, they highlight that distinctions between different forms of collaboration can be made on the basis of individual clients, the extent to which professionals are working together, and the extent to which collaboration encompasses these and other activities such as planning, commissioning and managing services. However, they argue that, irrespective of jurisdiction, there is a move towards strategic and higher level forms of interagency collaboration in children's services, a move which in many cases involves the integration of previously separate organisations and the development of integrated service delivery systems (2007, p56).

In reviewing a range of literature from a variety of areas including business studies, organisational studies and public policy and administration, they developed a five-level continuum of 'collaborative endeavour:'

- Communication – individuals from different disciplines talking together;
- Co-operation – low key joint working on a case-by-case basis;
- Co-ordination – more formalised joint working, but no sanctions for non-compliance;
- Coalition – Joint structures sacrificing some autonomy;
- Integration – Organisations merge to create a new joint identity.

These categories are set within a broader continuum of low to high level collaboration, with descriptors of each end of continuum being outlined:

Horwath and Morrison's (2007) Continuum of Collaborative Endeavour



Himmelman (2002) has written on the theme of collaboration for agencies and community planners in the United States and elsewhere. Describing coalitions as the organisation of organisations working together for a common purpose, he outlines a number of different strategies for forming coalitions dependent on circumstance and context. Again, the notion of a developmental continuum is used here, with each step building slowly and incrementally on the previous one. Yet, as Himmelman argues, the zenith of these strategies – collaboration – is not always desirable. Barriers to collaborating as well as context may dictate the extent to which the various stages are deployed.

Himmelman's Continuum (2002, p2-3) is as follows:

Himmelman's Continuum of Coalition

- Networking is described as "exchanging information for mutual benefit. It is the most informal of the interorganisational linkages and often reflects an initial level of trust, limited time availability and a reluctance to share turf;"
- Coordinating is defined as "exchanging information and altering activities for mutual benefit to achieve a common purpose." It is viewed as formal, requiring more than networking, involves more time, higher levels of trust, yet little access to each other's "turf;"
- Cooperating is defined as a process in which organisations "exchange information, alter activities, and share resources and enhance each other's capacity for mutual benefit and to achieve a common purpose by sharing risks, responsibilities and rewards." This requires a greater degree of formality, more commitment than either coordination or networking, and could potentially involve written, often legal agreements. Resources being shared could be human, financial, technical, knowledge, staff, physical property, access to people, money and others. This requires a substantial amount of time, high levels of trust and significant access to each organisation's turf.
- Collaborating is defined as "exchanging information, altering activities, sharing resources, and enhancing the capacity of another for mutual benefit and to achieve a common purpose." The desire to help each other is key here.

Atkinson et al (2002), in undertaking a detailed review of interagency working in British local government, distinguishes between strategic and operational/delivery levels of analysis when identifying different types of interagency working. Where decision-making was the main purpose of interagency working, activity tended to be strategic, not operational. Where consultation and training was the focus of the enterprise - which largely involved frontline professionals - activities understandably occurred at the delivery level. This was also the case with centre-based delivery (locating professionals from different organisations in one base for more coordinated delivery, not integrated delivery) and operational team delivery (multi-team integrated service delivery), with only coordinated delivery straddling the strategic-operational divide (here services are coordinated by a coordinator who links the strategic and delivery spheres but services are not co-located/coterminous).

These different types of interagency working are located within a framework drawn heavily from the UK Audit Commission's (1998) conceptualisation of partnerships. The Audit Commission identifies four different types of 'partnerships' based on evidence drawn from experiences of those involved in over fourteen partnerships over a number of years. While the spectrum of arrangements are not described as being sequential, it is possible to construe them as such:

- Steering group without dedicated staff or other resources – simpliest and least formal partnership arrangement. Outputs implemented through mainstream delivery by participant organisations. Shorter in lifespan, it largely focuses on coordinating services across organisational boundaries, so long as membership of steering group have the authority to effect necessary change in their own organisation;
- Virtual Organisation – less legalistic, no formal legal establishment. Less formal, while it may have its own identity, one member takes responsibility for employment and management issues pertaining to staff, resources and other issues. Has the advantage of being an easier arrangement to establish, but could lead to 'partnership capture' by organisation responsible for staffing issues and resources;
- Co-location of staff from partner organisations – less formal again, but where staff from different organisations work towards a common agenda in one location, usually under the aegis of a steering group. Staff are managed by their original organisation, with other resources sometimes being pooled. However, staff identity is viewed as being part of the partnership, rather than the original organisation;

- Separate Organisation – partners establish a distinct organisation with a separate legal status. Tends to suit large arrangements with medium to long-term lifespan with the need to implement a large programme of activity with its own staff. It is viewed as highly formal, legalistic, and potentially having a 'life of its own.'

Audit Commission's (1998) Typology of Partnerships

Griffith (cited in Atkinson 2007, p17) has developed a continuum of interagency working similar to some of those outlined above, beginning with

- Networking, an informal enterprise where information is exchanged;
- Cooperation – a more formal relationship where there is agreement to cooperate with each other. Organisations may view themselves as having a shared future, with some planning and division of roles clarified, however, goals remain individual;
- Coordination – agreement to carry out pieces of work together, representing collective goals. Member organisations allow their activity to be influenced by contributions of other members, with the aim of delivering preset common objectives.
- Integration – all actions are developed, implemented and owned by the group. There is a shared purpose, for which new initiatives may be co-designed. Organisations are brought into a new structure with commitment to a common mission.

Gaster et al (cited in Percy-Smith, 2005, p28-9), in reviewing the relationship between local government and the voluntary sector in the UK, have devised a five rung 'ladder' of partnership which aided them to map the extent of partnership between the two sectors:

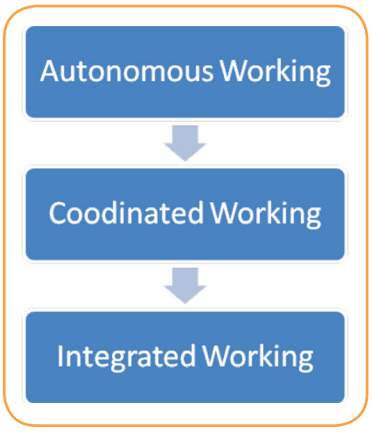
- Information Exchange – which involves mutual learning, knowledge of what each other partner does and could do. Openness about decision making processes, with new methods of accessing information;
- Planning Action - which involves identifying local and service needs where cross-boundary working is needed and could be effective; debating local needs and priorities; and agreeing different partners' contributions, decide actions and processes, and identifying (if needed) new partners;
- Implementing Projects and Service Plans - which involves jointly or separately taken action on an agreed plan; identifying monitoring methods and review processes; and engaging in mutual feedback on "success/failure".
- Co-ordination and Co-operation in Practice - which involves an active co-ordination process, a co-ordinator who knows what's going on, drawing on each partner as appropriate, helping to nurture a developmental and co-operative culture and involving and supporting new partners;
- Collaboration and Full Partnership – which involves separate and distinct roles but shared values and agenda. Pooled Resources, blurred boundaries, continuously developing to meet changing needs. Less powerful partners supported to play a full role.

Gaster et al's (1999) Ladder of Partnership

Townsley et al (2004, cited in Atkinson et al 2007) in critiquing multi-agency practice in meeting the needs of children with disabilities, outline a three stage form of interagency working:

- Autonomous Working – services are separate, but professionals from different organisations will work together to achieve specific goals. Professionals may offer training and support to staff from other organisations, but the focus and funding of service delivery remained single-organisation-focussed, services being separate with little obvious coordination;
- Coordinated Working – professionals from different agencies assess separately the needs of children and families but meet together to discuss their findings and set goals. Service delivery will be multiagency, with a multiagency panel/task group serving to coordinate services. Funding may be single or multi-agency;
- Integrated Working – Services are coordinated and synthesised. The approach is holistic, with a focus on service delivery for the user. Funding is multiagency with professionals operating as a team, role will be blurred and expanded. A key person coordinates services for families and liaises with other professionals and agencies on their behalf.

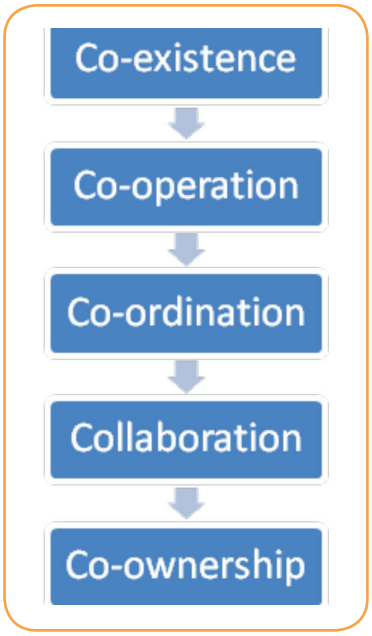
Townsley et al (2004) Three Levels of Interagency Working



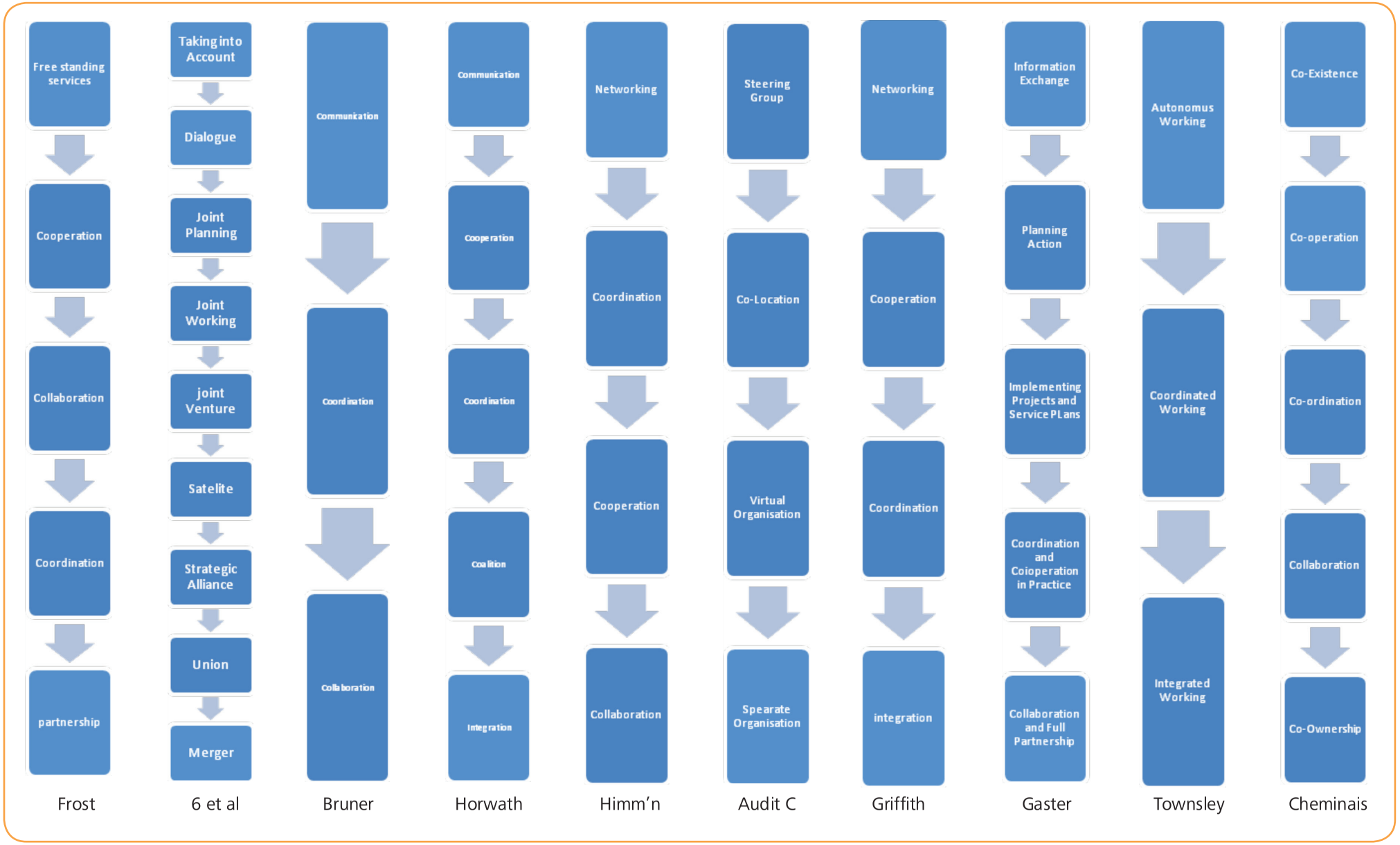
Cheminais (2009, p5-6), in exploring effective multi-agency partnerships in the context of Every Child Matters and Education (UK), identifies five different levels of interaction and engagement which provide a template for practitioners (hence, this is largely focussed at the operational/service level with some impact at the strategic level):

- Co-Existence – Clarity between practitioners from different agencies as to who does what and with whom;
- Co-operation – practitioners from different agencies sharing information and recognising the mutual benefit and value of partnership working, that is pooling the collective knowledge, skills and achievements available;
- Co-ordination – partners planning together; sharing some roles, responsibilities, resources and risks; accepting the need to adjust and make some changes to improve services, thus avoiding overlap;
- Collaboration – longer term commitments between partners, with organisational changes that bring shared leadership, control, resources and risk taking. Partners from different agencies agree to work together on strategies or projects, each contributing to achieving shared goals;
- Co-ownership – practitioners from different agencies commit themselves to achieving a common vision, making significant changes in what they do and how they do it.

Cheminais (2009)



As outlined in the opening pages of this chapter, there are many different models of interagency working in the literature, many different ways of cutting it, and many different ways of conceptualising it. What has been presented above is ten different models of 'doing interagency work' based on the dimensions of extent of engagement and integration. A visual representation of each of the models is presented side-by-side below.


Free standing services
Cooperation
Collaboration
Coordination
partnership
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Taking into Account
Dialogue
Joint Planning
Joint Working
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Communication
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Griffith
Information Exchange
Planning Action
Implementing Projects and Service PLans
Coordination and Coioperation in Practice
Collaboration and Full Partnership
Gaster
Autonomus Working
Coordinated Working
Integrated Working
Townsley
Co-Existence
Co-operation
Co-ordination
Collaboration
Co-Ownership
Cheminais

APPENDIX TWO – Training, Workshops and Seminars

Seminar / Conference		
Title	**Speaker**	**Date**
RCT Seminar	Marjorie Smith	Feb-08
John Lonegan: Governor of Mountjoy Prison	John Lonegan	Jun-08
More from the Joy	John Lonegan	Jan-09
Supporting children in transition into and out of primary school	Pr. Tom Collins, Jim Mulkerrins, Mary O'Kane, Sr Liz Smith	Mar-09
Strategic Planning for Children's Services in Challenging Times	Brian Harvey (Social Researcher) John Sweeney (NESC Secretariat)	May-09
Developing Allegiances to improve Community Saftey	PSNI and DPP	May-09
From Research to Reality: Session One: Taking evidence based programmes to the real world: The American experience and lessons for Tallaght West	Dr. John Lochman	Oct-09
Session Two: Effective interventions for children with externalising behaviours: Implementation in the real world	Dr. John Lochman	Oct-09

Lunchtime seminars		
Title	**Speaker**	**Date**
Helping Children Cope with Loss and Bereavement	Val Mullaly	Jan-08
Children Living with Adult Mental Health Difficulties	Dr. Cara Prior, Lucena Clinic	Feb-08
Diversity and Equality for ECCE Services	Collette Murray, Pavee Point	Mar-08
The 40 Developmental Assets, Building on strengths a community approach	Reuben McCormack, YMCA, PACT	Apr-08
Siolta, Quality Assurance Scheme for Children from Birth to age 6 Years	Maresa Duigan, Early Childhood Development and Education	May-08
What the Research Tells us about Children's Services	Dr. Danny Perkins, Penn State University	Jun-08
All about Parents and Children: Fostering a sense of self in Parents and Children	Tony Humphries	Jul-08
Insights into Bullying Behaviour and Practical Strategies on How to Manage It	Maria Ruane, Barnardo's	Sep-08
Promoting Positive Behaviour in Young Children	Olive Ring, Barnardo's	Oct-08
Child Art Psychotherapy	Maureen Mc Cormac	Nov-08
Stress Management	Margaret Roach	Dec-08
Promoting Positive Behaviour in Young Children	Maria Ruane, Barnardo's	Jan-09
Supporting the Role of Fathers in Services	John Mc Evoy, YMCA	Mar-09
Acorn Parent Coaching Programme	Acorn Parent Coach	Apr-09
The Children's Services Committee: Government Strategy for Integrating Children's Services	Maria Donohoe, CSC	May-09
Mediating Disputes in Community and Family	Maire Ni Mhaolmhichil, Mediation Bureau	Jun-09
Young Mothers Antenatal Course for Parents-to-be in Tallaght	Gavin Mulhall, HSE and Jean O'Gorman, TYS	Sep-09

Workshops	
Title	**Date**
High / Scope Training	Nov-07
Training audit workshop for all service providers	Dec-07
Mentoring Training Information Sessions	Mar-08
Mentoring Training with follow up sessions	Apr-08
Coping On Training	May, Nov-08
Developing Children's Literacy Training	Apr, May-08
Coaching Training	Aug 08, Jan 09
Training of Trainers Conference: Asset Building with Young People	Sep-08
Training for the Parent Plus Community Course	Oct-08
Promoting Positive Behaviour in Young Children	Nov-08
Parent Plus consultation day	Feb-09
Coping Power Training	Feb-09
Management and Personal Leadership Training Programme	Mar-09
Teacher Talk Training Series	Mar-09
The Child Safety Awareness Programme Training	
Parents Plus Children's Programme	May-09
Parents Plus Early Years Programme	Jun-09
Training for fielworkers	Jun-09
Roundtable discussion on research in disadvantaged communities	Jun-09
Parents Plus Adolescent Programme	Sep-09
Working Effectively with Young Children who have Special Needs in Early Years Settings	Nov-09

APPENDIX THREE – List of Categories and Specific Items Survey Respondents Identified to Promote Interagency Working and Service Integration

The following is a list of answers provided by survey respondents to the question List three things which could be done to support interagency working and service integration in your area.

Communication:

- Openness and willingness to work together
- Willingness to relinquish control
- Respect for each other
- Greater understanding of each other's roles
- One simple means of communication
- Better communication

Sharing:

- Information sharing (4 respondents)
- Data sharing

Networking:

- More personal contacts (2 respondents)
- Encourage generic local groups to network
- Networking
- Calls to service in person
- Newsletter about what is going on in the area

Participation:

- More participation from local professionals
- More interaction with the Gardai
- More community events
- Recognise the value of consulting the community you are working in

Integration:

- Pay more attention to unfunded local groups
- Identify the different groups and agencies in the area
- Strengthen integrated planning

Meetings:

- Identify mechanisms to support interagency "work" that does not require additional meetings
- Formal meetings annually
- Ask managers for times that suit them
- Evening meetings
- Open houses / information evenings per service

Status:

- Less voluntary / statutory divide
- Ensure that organisation charged with particular statutory obligation are facilitated / challenged to meet them

Duplication:

- Identify resources to avoid duplication
- Develop a single funding stream for services in a county to decrease duplication of services

Training:

- Training for frontline staff (2 respondents)
- Make training available to all services, not just to individuals/organisations engaged with CDI funded services
- Joint training opportunities

Funding:

- Link interagency working with funding allocation
- Fund resources for interagency "work" and service integration

Strategy:

- Strong promotion of interagency "work" as a requirement, lead at National level, then at county level
- Greater awareness and support by government for an integrated approach to child services
- Development of a single strategy for Children's Services across the county
- Specifically list interagency working in the agency's plan

Targeting:

- Targeted groups
- Assess community needs to effectively target any efforts
- Avoid generalities and focus on specifics, identifiable needs

New position:

- Appointment of Children Services co-ordinator
- Employment of volunteer support staff

Evaluation:

- Joint actions to test interagency working

APPENDIX FOUR – Healthy Schools Interagency Information

APPENDIX - HEALTHY SCHOOLS ORGANISATIONS AND ACTIVITIES

The HSC organise a number of activities (e.g.: monthly skipping competition, weekly dancing classes, cardio kids programme, children's yoga, parents and child yoga, golf lessons, tae kwon do, sensory play, therapeutic movement workshop etc), campaigns (e.g.: Bug Busting campaign) and events (e.g.: Walk to School Week, Football Against Racism in collaboration with F.A.I. and G.A.A, Healthy Breakfast etc). They also participated in and coordinated the summer programmes. They also liaise with a number of different organisations, including Barnardos, Acorn Parent Coaching Programme, EWO, HSE, Family Resource Centre Tallaght Village, Citywise Education, Education& Welfare Officer, Belgard Fire Station (education officer), Tallaght Drug's Task Force, Tallaght Art's Centre, The National Federation of Services for Unmarried Parents and their Children (NFSUPC), Bodywhys, Killinarden Health Centre (PHNs; S/L therapist), Community Development Worker in Brookfield Health Centre, Kilinarden Drug Primary Prevention Group, St Vincent de Paul (SVP), Killinarden Family Resource Centre, Irish Society for the Prevention of Cruelty to Children (ISPCC), Mediation Bureau, Tallaght Travellers Health Project, Parents and Kids Together (PAKT), Jobstown Family Centre, Community Addiction and Rehabilitation Project (CARP), Fettercairn Health Project, Lucena Clinic (social worker), F.A.I. and G.A.A.

Their role involves liaising with a number of stakeholders:

Health services:

- HSC make ongoing links to discuss children's referral and protocols. They distributed letters and encourage *G.P.s* to inform parents of their role where suitable.
- They agreed a working protocol with the *dental team* for referrals.
- They meet with the *nutritionist* to plan dates and agenda for meeting the parents and nutrition sessions for the children.
- They organise events such as the Bug Busting campaign or information sessions with parents in collaboration with the *Primary Care Health Nurse (PCHN)*, *Primary Care Community Worker, Dental Health Educator, Contacted School Nurse, and Nutritionist*.
- They also link with PCHN, *HSE*, a private Occupational Therapist, to support individual families.
- They liaise with *Lucena* clinic in relation to relation to the suitability of linking child in to other supports while attending. Both HSC and school principals have raised the issue of communication with Lucena clinic.
- And talked to the *Local Assessment Office* in Crooksling to enquire about the process that will follow for the parents who are waiting for referrals since there is alack of Local Assessment Officer. This allowed them to inform the schools about the new procedures in place.
- The HSC have regular contact with the *Art therapist*. They can facilitate parents meetings with the therapist in relation to children's progress.

School Principals

- The HSC meet the school principals on a monthly basis (sometimes twice a month). They plan activities together, discuss policy documents and plans for the following year. Work plans are agreed between the school principals and the HSC before being taken to the steering committee.
- The HSC provides an update on the activities taking place in the school.
- When the HSC was introduced in the school, informal meetings took place on a regular basis to discuss children's progress and the progression of the HSC's role.

Teachers

- The HSC support the teachers in dealing with health situations within their classes. They liaise in relation to individual cases.
- They attend staff meetings during which they share information about campaigns or competitions taking place in schools. They also attend the weekly Care Team meeting.
- They met with visiting teacher for travellers and agreed to stay in regular contact.
- There is also some informal liaison with teachers around identified children.
- They planned with the PE coordinator and teachers the best way to facilitate the skipping day. They meet with the teachers in relation to planning events such as the Summer Programme or the Fruit tasting and Healthy Eating talks. They also planned the input for the Sports Day together.
- One of the HSC volunteered to be part of a committee working with teachers around developing a sensory room for children in one of the schools.
- They met with school staff to develop a SPHE Plan (Social, Personal and Health Education) and also updating the existing SPHE Policy.

Home School Community Liaison

- The HSC meet once a month with the Home School Community Liaison (HSCL) representative to plan and co-facilitate various events and campaigns (e.g.: End of the year sessions, Parenting seminar, Healthy Breakfast, Healthy Cookery Sessions for parent's, Coffee mornings, Pampers day, intervention of a beautician organised by the HSC, Maths for fun etc.).
- They also meet with the HSCL in relation to cases. Those meetings take place on a more frequent basis, sometimes up to twice a week.
- They attend a cluster meeting with all the schools to plan activities for the parents and to present their activities for the rest of the term.
- They co-facilitate the After School Club on a weekly basis.
- They support HSCL staff in organising Parents seminar.

Speech and Language Therapist

- The HSC send monthly reports to the *Speech and Language Therapist*. They also meet to follow up on referrals from schools and discharges from service. It was agreed with Speech and Language service that letters regarding a child's appointments would be carbon copied to the HSC so that she can remind parents of the appointment times each week.
- The SLT started in November 2009 and part of her time contributes to the ECCE programme.

School counsellor

- The HSC hold meetings with the school counsellor and HSLC to support parents from the schools and provide a whole school approach on individual support (e.g: supporting a parent to write a letter to Lucena). Those meetings also allow to identify children who are having difficulties and find the best ways to support them

Special Needs Assistants

- The HSC have sporadic meetings with the Special Needs Assistant Coordinator to support families in accessing a special needs health service.

Parents:

- HSC have an ongoing contact with parents. They welcome children and parents at the gates in the morning, and meet them again at collection time. These opportunities are used to provide parents with information on the activities or future seminars/information sessions. They also have the opportunity to meet with parents while attending social events such as the school's trip to the National Museum of Ireland or the Christmas party.
- They plan and organise on a monthly basis healthy breakfast sessions for parents with invited guest speakers (dietician, Primary Health Nurse, Carambola Nutritionist, Meningitis Trust, Barnardo's etc.).
- The HSC also attend the monthly Local Committee meetings which are composed of parents and HSLs from schools in Killinarden. They organised and co facilitated with the HSCLs Healthy Food sessions and Pamper Morning for parents on the Local Committee.
- They meet with individual parents to support with administrative tasks such as applications or letters. They provide them with information about services available in the area, and their rights and entitlements in Ireland. Parents are given information and advice on healthy living. The HSC link the parents with various local organisations and have a Health Information and leaflets stand in the front hall every Wednesday morning. Leaftlets are also available in their office. The HSC also do home visits.
- They attend the parent-teacher meetings and met with parents to discuss the Healthy Schools Forum and identify needs.

Children

- The HSC introduced themselves to the children at the beginning of the year. They meet with the children in the yard during breaks.
- They attend breakfast sessions to identify children who need support. They also attend cookery sessions, morning clubs, homework clubs, and dyslexia club.
- They co facilitating a Booster Health and Hygiene Session to 5th Class girls in Senior school.

Healthy School Coordinator

- The two coordinators meet on a monthly basis to plan activities together. To plan the summer programme they visited the Youth Centre in Tallaght Village, Killinarden Community Centre, Kilnamanagh Community Centre, Astro Park and Tallaght Sports Centre in Tymon Park. This allowed them to gather the information for their list of summer activities for children and parents.

HSE Role support

- The HSE representative meets with each HSC on regular basis. At first, those meetings took place every three weeks. The frequency of the meetings diminished to every six weeks.

CDI

- The HSC provide monthly reports to CDI to provide an update on the activities undertaken. They also attend monthly planning meetings with CDI.

Green School Committee

- The HSC attend the Green School Committee on a monthly basis to support the schools in getting the Green School Flag.

Local NGOs and health services

- The HSC meet with various organisations to exchange information on their roles. The following organisations were identified from the progress reports: Barnardo's Acorn Parent Coaching Programme, EWO, HSE, Family Resource Centre Tallaght Village, Citywise Education, Education& Welfare Officer, Belgard Fire Station (education officer), Tallaght Drug's Task Force, Tallaght Art's Centre, The National Federation of Services for Unmarried Parents and their Children (NFSUPC), Bodywhy's, Killinarden Health Centre (PHNs; S/L therapist), Community Development Worker in Brookfield Health Centre, Kilinarden Drug Primary Prevention Group, St Vincent de Paul (SVP), Killinarden Family Resource Centre, Irish Society for the Prevention of Cruelty to Children (ISPCC), Mediation Bureau, Tallaght Travellers Health Project, Parents and Kids Together (PAKT), Jobstown Family Centre, Community Addiction and Rehabilitation Project (CARP), Fettercairn Health Project, Lucena Clinic (social worker), F.A.I. and G.A.A.

The Childhood Development Initiative
St. Mark's Youth and Family Centre
Cookstown Lane
Fettercairn
Tallaght, Dublin 24

Tel: (01) 494 0030
Fax: (01) 462 7329
E-mail: info@twcdi.ie
Web: www.twcdi.ie

An Roinn Leanaí agus Gnóthaí Óige
Department of Children and Youth Affairs

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