A Guide to Collaborative Practice: Informing Performance Assessment & Enhancement

1 Introduction

For some time there has been an increased reliance on collaboration and collaborative practices by the government and community sectors and the personnel delivering their services as the best way to address the complexity of many of the social problems confronting their clients. The rationale for working in a collaborative manner is well established. Through collaboration members are able to address intractable and emergent issues, the complexity of problems facing the most vulnerable clients, overcome growing fiscal restraints, reduce duplication and overlap, promote innovation and deliver increased productivity.

The trend toward inter-organisational collaboration is paralleled by a long-standing appreciation of the value of a real partnership, or collaboration, between service providers/professional staff and their clients in achieving better outcomes. Increased engagement by clients in the treatment/intervention task is widely associated with successful outcomes across a range of therapeutic modalities (see for example, Gomes-Schwartz, 1978; Tryon and Winograd, 2002). As Bachelor et al. (2007: 175) expand:

> *Working collaboratively with the therapist is regarded as an integral component of the therapeutic alliance, a major integrative concept and robust indicator of outcome.*

Such a collaborative approach is sympathetic with the person-centred attitudes that are becoming more embedded in practice and service expectations. Related elements of the person-centred approach include, for example, a working partnership between clients and workers, acknowledgment of expertise of clients and enabling structures and relationships (Ellis et al., 2011).

The Queensland Child Protection Commission of Inquiry (the Commission) of 2012 reviewed the child protection system in its entirety. The Commission's subsequent report presented 121 recommendations for systemic reform. Central to the implementation of these reforms was the development of strong collaborative partnerships between the government and the non-government sector, as well as enhanced collaboration between the system and its recipients (Carmody Report, 2012).

In order for these inter-personal and interorganisational relationships and their related behaviours to be successfully applied, performance enhancements assessed and impacts measured a working knowledge of collaboration, including its definitions, theories and dimensions, is necessary.

2 Defining Collaboration

As economic, environmental and particularly social problems become increasing common and complex, the call for collaboration has increased (Gray, 1989; Cigler, 2001; Bryson, Crosby and Middleston Stone, 2006; Thompson and Perry, 2006). As a consequence of its wide application, numerous definitions have emerged to shape its meaning. Drawing from an extensive cross-disciplinary review of the available literature the following definition has been isolated as best encapsulating the intent and core elements of collaboration and has relevance at all levels of application:

> *Collaboration is about a different way of thinking and behaving. It is based in stronger interpersonal relationships, supported by processes and mechanisms to facilitate transformational change. In a collaboration members give up some part of themselves so that something new can be created.* (Schrage, 1990)

This definition highlights the strong relational aspect and process orientation of collaboration; that is, collaboration is not just a result or outcomes to be achieved. Rather, it is 'a way of thinking, behaving and working, with different expectations and strengths of relationships. Unpacking collaboration further reveals that it involves members acknowledging an interdependent relationship with others, that is, they are not able to resolve this problem working alone, and require the expertise, support and resources of other people and organisations. Collaboration relies on strong inter-personal relationships of trust (personal/organisational), reciprocity and reputation as the glue that binds people and their efforts together. Such relationships are forged and supported by investing time in relationship building and dialogue to better understand and appreciate 'positions'. Collaboration involves shared authority and responsibility for planning, implementation and evaluation of joint effort (Hord, 1986). Collaboration is fundamentally about systems change, creating new ways of thinking, behaving and working, for example, new service models (Keast et al., 2004; Innes and Booher, 2010; Schrage, 1990). While the rewards of working through a collaboration are often higher, it is also a risky endeavour as it requires authentic sharing of resources, power and knowledge, and can produce outcomes not always aligned with predetermined goals and expectations. Thus echoing the views of other authors (Gray, 1989; Himmelman, 1994; Mattessich, Murray-Close and Monesey, 2001, Keast et al., 2004; Bryson et al., 2006), Thompson and Perry (2006: 23) argue that collaboration is a 'higher-order level' of working together, while Gray (1989) adds that collaboration is a longer-term form of integration (see also Keast, 2011, Annie Casey Foundation, 1993).

Despite the widespread agreement the term collaboration continues to be interchanged with related terms of cooperation and coordination. On the surface the confounding of these terms is understandable, as they all represent 'ways of working together', with step-changes in intensity of connection. However, closer examination reveals that these are quite distinct terms with different goals sought from the working relationship. Figure 1 provides the full range of inter-organisational arrangements currently available for use, showcasing the graduating differences between the three most commonly used and, therefore, confused terms for working together.
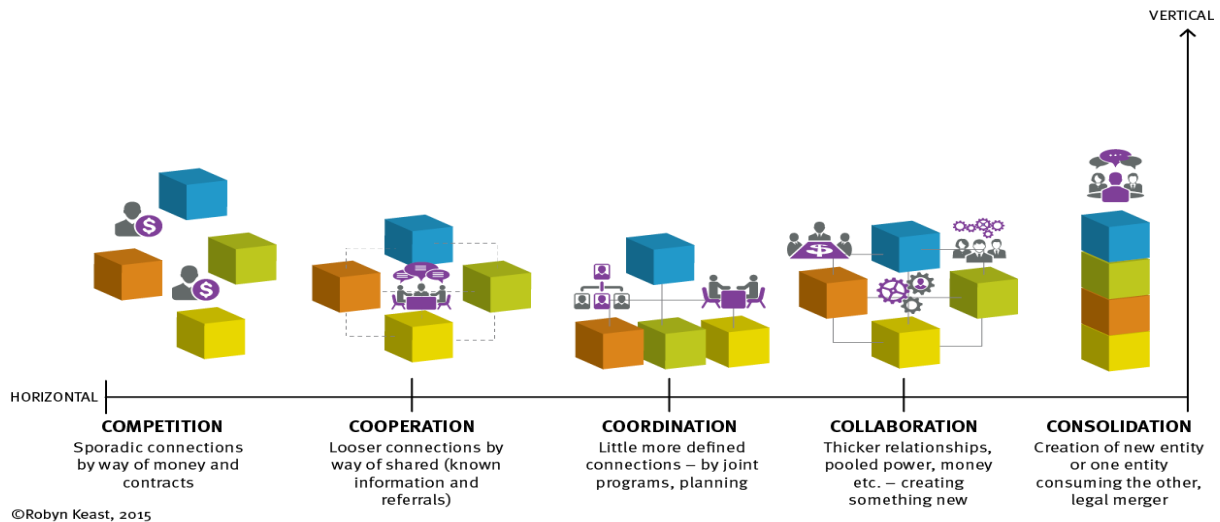
COMPETITION
Sporadic connections by way of money and contracts

COOPERATION
Looser connections by way of shared (known information and referrals)

COORDINATION
Little more defined connections – by joint programs, planning

COLLABORATION
Thicker relationships, pooled power, money etc. – creating something new

CONSOLIDATION
Creation of new entity or one entity consuming the other, legal merger

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Figure 1. Interorganisational working arrangements

The following expands the differentiation of two of these terms, providing deeper clarity in informing the creation of practice benchmarks and/or performance measures for collaboration.

Cooperation is an informal agreement between people and/or organisations to take some kind of unified action to make their autonomous actions or programs more successful. Each cooperating body remains independent, mutually adjusts actions, does not share in any risk, and retains total authority (Mattessch et al., 2001).

Coordination is a slightly more formal arrangement because coordinating parties determine that their individual missions are compatible and that they can work together to advance their separate, yet compatible missions. Coordination involves a low level of joint planning, sharing of resources, defining of compatible roles and interdependent communication. Some risk is expected as the parties align their efforts that may or may not be successful for both. Each organisation retains their autonomy and individual authority.

In summary, all forms of working together have merit and application. The challenge is to match the form to the purpose sought. Whereas cooperation and coordination are largely focused on doing the same things, albeit more efficiently, collaboration is fundamentally about systems change (Cigler, 2001; Keast et al., 2004), creating something new (Schrage, 1990; Himmelman, 1996) being creative and forming a 'new whole' (Innes and Booher, 2010). [1]

2.2 Collaboration Dimensions and Behaviours

Ongoing analyses of the wide and multi-disciplinary literature sets on collaboration have led to generalised agreement on core dimensions and associated behaviours. Given the research and practice attention on collaboration, and the different levels of operation, there is necessarily an array of dimensions available for consideration. The following illuminates the collaboration dimensions at the: (a) client/practitioner level and (b) inter-disciplinary and (c) the inter-organisational level.

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[1] For more readings on this point from Australian context, see Keast, 2004; Keast, Brown, Mandell and Woolcott, 2004, Keast, O'Flynn, 2009 – provided in reference list.

2.2.1 Client/Practitioner Collaboration

Acknowledgment of the interdependence between clients and their therapeutic workers and the need for stronger, collaborative relationships as conditions for successful outcomes became prominent in the 1960s (Bronsteine, 2002; Bachelor et al., 2007; Stonehouse, 2012). Since then, while there has been significant attention devoted to the practice principles of therapeutic collaboration, there has been limited advancement on determining agreed variables or measures for this practice. In their search for definitive characteristics of client/worker collaboration, Bachelor et al. (2007) scanned the available literature identifying joint goals or joint work efforts, patient contribution and joint commitment as key characteristics or dimensions for measurement. They noted that a client's perception of the collaborative relationship was not a feature of extant studies and argued for its inclusion as a core item, although this item delivered only moderate association in the subsequent study.

Stonehouse (2012) in the early education arena also identified the conditions of effective partnerships between workers and their clients. The key requirements of workers include:

- Being open to families 'priorities and requests.
- Being clear about areas where compromise, or negotiation is possible and where there are conflicts (e.g. regulations etc. explain these clearly).
- Encouraging families to express their concerns, question practices and policies and ask for what they want.
- When their requests cannot be granted educators explain this respectfully and without any implication that it was inappropriate to ask.

These dimensions (and related behaviours) are affirmed in several best practice frameworks. Against The National Quality Standard Professional Learning Program (Collaborative Partnerships with Families) is one such document. Reflecting the extant literature on this topic, it starts with the proposition that "… the best experiences for children happen when there is a strong relationship between you (workers) and the child's family that is evident in your daily practice". The Early Years Learning Framework, especially Principle 2: Partnerships which requires educators to "go beyond traditional parent involvement activities" to form "respectful supportive relationships with families" (NQS Standard 6.1). Together these standards go on to articulate a set of key practice elements, which ideally are to be included in any intervention with children and/or their families.

Key collaborative practice elements:

- Mutual trust
- Open, respectful communication
- Empathy
- Openness to others' views, values and perspectives
- Shared decision making
- Clarity about roles and responsibilities
- Appreciation of each other's knowledge and experience
- Willingness to negotiate and compromise
- Commitment to resolving tensions and conflicts
- Shared aims or goals

Similar quality frameworks are also used by several Queensland Government departments as mechanisms to both shape and assess their practices and interactions with client groups at various levels of interaction. For example, the Queensland Department of Health draws upon the National Safety Quality Health Care Standards – Standard 2: Consumer and the Community Services Client Satisfaction Survey as a service performance assessment tool and reporting mechanism.

Together these sources provide the foundations of a set of dimensions against which collaborative relationships, practices and behaviours between practitioners and their clients (and families/carers) can be benchmarked for performance reflection and assessment. These behaviours and their measures are provided in detail later.

2.2.2 Inter-disciplinary Collaboration

In the social and human services arena there has been a long-standing practice of inter-disciplinary or collaborative working, especially in service areas where there are a number of professions and sectors involved. In this situation collaboration is seen as an effective inter-personal process that facilitates the achievements of goals that cannot be reached when individuals act on their own (Bruner, 1991; Bachelor et al., 2007).

In developing her Index of Inter-Disciplinary Collaboration (IDC) Bronsteine (2002) drew on academic, professional and practice literature, to identify the following components or dimensions: interdependence, newly created professional activities (e.g. programs, services etc.), ownership, and process reflection so as to effectively collaborate at this level. Alongside these she added four other supporting factors: professional roles (clarity), structural and personal characteristics, as well as history of prior interdisciplinary collaboration.

In developing the IDC Bronsteine's (2002) study offers the most useful set of dimensions for inter-disciplinary collaboration at the direct worker level as it draws from research and has a close alignment with the collaboration characteristics identified through the QFCC Forum (see documents). Bronsteine's (2002) dimensions are summarised below:

Interdependence: the reliance of interactions among professionals where all are dependent on others to accomplish their goals and tasks. *Behaviours* that characterise interdependence include spending formal and informal time together, more intense and frequent communication flows, and a valuing and respect for colleagues' professional opinions/opinions of clients (family, children) as input that is necessary to achieve enhanced and joint outcomes.

Mutuality refers to the 'new whole' (Innes and Booher, 2010) or bigger than sum of the parts outcomes (win/win) that arise from working together, such as newly created activities, programs and structures (Kagan, 1992; Gray, 1989, Melaville and Bank, 1991).

Flexibility is related to, but goes beyond, interdependence, and refers to the situation where workers are able to reach productive compromise, negotiate win/win outcomes such as a changed role or goal, that, while not always meeting their preferred outcomes are agreed as best for the client. The ability to negotiate and deal constructively with conflict are core behaviours demonstrating flexibility (Mattessich and Monsey 1992).

Collective ownership of goals refers to the act of accepting shared responsibility and accountability for progressing the collaboration process, including joint design, definition, development and achievement of goals. Collective ownership therefore demands that each professional take responsibility for his or her part in the success or failure and exhibition of behaviours that support collaboration, including constructive disagreement and deliberation among colleagues and clients

(Abramson and Mizahi 1996; Billups, 1987; Bruner, 1991). Significantly, collective ownership should demonstrate commitment to client-centred care, and the active engagement of clients (families) and core stakeholders in goal attainment.

Reflection refers to collaborators' attention to their process of working together. This includes behaviours whereby collaborators think about and talk about their working relationships and processes and where collaborators incorporate feedback about their process to strengthen collaborative relationships and effectiveness (Abramson and Mizahi, 1996; Billups, 1987).

In addition to the above dimensions Bronsteine's (2002) study identified several supporting factors:

- **Role Clarity:** clarity of expectations for each other's roles, what can be contributed and what are the limitations of participation (e.g. legislative, policy or economic). Discussion to come to some alignment on inter-disciplinary values and ethics, agreement on holistic service models.
- **Structural Characteristics:** such as smaller caseloads enabling relationship building and deliberate actions, an agency culture supporting interdisciplinary and/or inter-organisational collaboration, and administrative support for this different way of working, including providing the time and space for collaboration to unfold and reflective practice to occur. Leadership skills and practices that both enact collaboration and enable/support collaboration are an associated requirement.
- **Personal characteristics,** including for example the mind-set to be able to work in collaborative mode and a willingness to make bridges across disciplinary and organisational boundaries. Related to this those working in collaborations or drawing upon collaborative practices require skills working in intensive relational modes. This is sometimes called second person skills (McGuire, Palus and Torbert, 2001), group-ware (Agranoff and McGuire, 2001) or collaborative skills (O'Leary, Choi and Gerrard, 2012; Keast and Mandell, 2014).
- **Previous working relationships and/or a history of successful inter-disciplinary/inter-organisational collaboration** provide a solid and positive foundation on which to leverage ongoing collaborative effort. Starting from scratch, or from a position of negative relationships will either require more time and effort upfront for relationship building or limit the potential of achieving outcomes.[2]

2.2.3 Inter-organisational Collaboration

The literature set available for inter-organisational collaboration is much more extensive and has been drawn from a number of disciplines, including negotiation (Gray 1989; Suchmanm Himmelman 1994), inter-organisational relations (Alexander 1995; Van de Ven 1994), networks (Cigler 2001; Alter and Hage , 1993), negotiation (Fisher, Ury and Parker, 1991; Lax and Sebenius, 1996) stakeholder engagement (Susskind and McMahon 1985) and collective action (Ostrom 1990; Innes and Booher, 2010) and public/community sector management (Huxham, 1996; Huxham and Vangen, 2005; Keast, et al., 2004, 2007, 2011; O'Flynn, 2009).

In their review of numerous cases over many years Huxham and Vangen (2005) outlined five fundamental characteristics of collaborative situations: goals, trust, management, leadership and teamwork. Other scholars distil related elements of collaboration, for example, Gray (1989) in her seminal work described collaboration as an emergent process involving interdependence, dealing constructively with differences to arrive at agreed solutions, joint ownership of decisions and collective responsibility. Roberts and Bradley (1991) highlighted transmutational purpose, explicit

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[2] For more detail on these dimensions see Bronstein (2002).

and voluntary membership, organisation, an interactive process, and a temporal property as their key elements.

Bryson, Crosby and Middleton-Stone (2006) developed a general framework for collaboration assessment based on a set of propositions. Their framework model set out the following conditions and elements as foundational for successful inter-organisational collaboration: initial conditions, structure and governance, processes, contingencies and constraints and outcomes and accountabilities.

Along a similar line, Mattessich, Murray-close and Monsey (2001) identified six key collaboration success factors and one emergent factor: environment, member characteristics, communication, purpose, process and resources. Thompson (2001) and Thompson and Perry's (2006) ongoing review of the inter-organisational literature narrowed the core of collaboration down into five dimensions, of which two are relational (mutuality and norms), two are structural (governing and administration), with the last an agency autonomy factor.

The breadth of research and practice on inter-organisational collaboration notwithstanding, as the review above demonstrates there is consensus as to the common set of dimensions and more particularly the behaviours that together constitute or point to collaborative action and practice. For the purpose of this work, at the inter-organisational level, Thompson and Perry's (2006) five dimensions have been selected as the basis for this project, as the full set of behaviours is largely encapsulated within the dimensions. Thompson and Perry's five inter-organisational dimensions are described and expanded upon below:

Governance Dimension: Setting the agenda and environment for collaboration. Central to collaboration is the development of joint goals. Arriving at this outcome necessitates that members understand and be able to jointly make decisions about the rules or terms of agreement and mechanisms by which these joint decision and goals are achieved, particularly the rules governing their behaviour toward each other. Governance modes that enable and facilitate joint or inclusive decision-making and action, accommodate shared power and the reaching of agreement are required. Underpinning and supporting this are stronger, more intensive relationships (trust, reciprocity and reputation); also linked to norms.

Administrative Dimension: Despite the rhetoric, collaboration is not a self-organising endeavour, it requires what Provan and Milward (1995) speaking on networks more generally but equally applicable to collaboration, call an administrative core. Others (see Huxham and Vangen, 2005; Keast et al., 2004) have also stressed the need for dedicated personnel to manage and 'drive' the relationships and interactions to achieve outcomes. Moving from governance – setting of direction – to action, requires effort directed to management, as well as clarification of roles, responsibilities and accountabilities, as well as clearly articulated and agreed-to goals. The monitoring of these outcomes and the behaviours required to reach them is a further administrative task. The dual leader/manager function is critical in this administrative realm; however, other leadership styles are also called for within and across the collaboration arrangements, including integrative leadership (bringing together people up, down and across the system to a collective focus, as well as micro-level collaborative leadership focused on minding the process and leveraging relationships for outcomes (Mandell and Keast, 2009, 2014).

Reconciling Individual and Collective Interests: Collaboration occurs when members understand that they are interdependent; that is, working alone no one body has the full set of

knowledge, resources or expertise and needs to work with other to secure joint outcomes. At the same time there is recognition that people and organisations enter collaborations to meet individual as well as collective goals and have different missions and goals which first must be reconciled. As Huxham (1996) notes, when partners dual identity autonomy an accountability dilemma arises. This requires dexterity in roles and responsibilities, and can cause problems for parent organisations. The sharing of input, agreement and outcomes demands new ways of looking at and managing resources and accountabilities. Drawing from the negotiation literature (Fisher, Ury and Parker, 1991), having secured new collective outcomes, individual gains must also be claimed to demonstrate value to participating organisations.

Forging Mutually Beneficial Relationships: Collaboration is more than sharing information, although this is necessary. Mutuality is related to interdependency in that partners become involved when they see the benefits of shared working outstrip those of working alone. A sense of mutuality provides the foundation for shifting common views and interests along to common action.

Building Social Norms: relationships are the most defining of all collaboration dimensions. The most essential collaborative relationships are trust (personal and/or organisational), reputation, reciprocity and respect. Through repeated interactions, stronger relationships are forged between members which help to smooth over issues, take the leap to work in collaborative forms and not engage in rent-seeking or fence-sitting behaviours (i.e. enjoy the benefit of collaboration without contributing). The process of building relationships and establishing norms of behaviour takes time and effort.

Some personal characteristics also apply here as these allow people with relational competencies to be effective, and can include notions of fair play and a willingness to go the extra mile (see section 2.2.2 on inter-disciplinary collaboration).

2.2.4 Supplementary Dimensions and Indicators

Similar to other levels of operation, these core dimensions are supplemented by factors that continually appear as positive influences on collaborations (and the absence of which present as barriers to achieving collaboration). These include, but are not restricted to, existence and establishment of a contextual environment (political, social and economic, and problem type) that support, enable and legitimise collaboration working. Related to this is the provision of sufficient funding and resources for collaboration to be enacted, as well as allowing sufficient time for collaboration to take place, changes to occur and new process/outcomes to be developed.

As evidenced above collaboration is multi-dimensional, with each occurring in a synergistic relationship such that it is often difficult to separate which is the most dominant dimension. Furthermore, different mixes of contexts, problems and participants will call for different mixes of dimensions, disallowing generalisation or spread of collaboration forms; that is, each needs to be built fit-for-purpose (Mattessich and Monsey, 1992).

The key message it that those involved in the practice of collaboration, and those responsible for the design, policy, and monitoring of collaboration, need to be aware of the variable and interdependent characteristics of collaboration to deliver optional outcomes. The same considerations apply for performance improvement process and assessment.

3. Collaboration as a Process

Common across all domains in which collaboration is practiced and the literature is the view that collaboration should be considered and practiced as a process rather than an outcome. That is, the emphasis is on movement toward more intensive relationships and interactive behaviours (Thompson and Perry, 2006). On this Wood and Gray (1991: 146) note that collaboration is a process that "… occurs when a group of autonomous stakeholders of a problem domain engage in an interactive process, using shared rules, norms and structures, to act or decide on issues related to that domain".

Such a processual perspective has several implications for practice and assessment, as noted below.

3.1 Stages of Collaboration

Collaboration does not occur overnight or without effort. As a process it requires strategic intent and deliberative action, particularly around its design, relationship nurturing and leveraging. Most theorists agree that collaboration occurs or is shaped in stages. Gray (1989) identified three stages of collaboration as including: (a) the pre-condition stage where collaborators come together to form the relationship, (b) the process stage where collaborators interact to make decisions, and (c) outcomes stage where collaborators assess their efforts and adapt to change (Gray, 1989). Such a perspective implies synergistic processes rather than stepwise movement from one phase to another (Brinkerhoff 2002; Huxham and Vangen, 2005).

3.2 Process and Reflective Practice

It is important to note that attention to process is considered to be a central feature in successful collaborations (Gray, 1989; Bryson et al., 2006; Thompson and Perry, 2006; Innes and Booher, 2010). Process factors to be addressed include: nurturing new and building on existing relationships, establishing trusting relationships, forging agreements on what to work onto together and how to work together, building new leadership capacities, and identifying and managing conflicts. How task and relational (process) issues and actions are handled is considered core in achieving effectiveness. Therefore it is essential that time and effort be directed to following these stages as well as capturing developments of these step-changes as key performance indicators (see for example, Church et al., 2002).

This has important implications for the way in which collaboration and collaborative practice is measured assessed/evaluated. By focusing on strengthening relationships, understanding and appreciating clients and colleagues, making things better without finding blame, actions emerge that look to reduce or overcome shortcomings, and behaviours and activities that offer limited value can be removed. In this way collaboration lends itself well to continuous/continual improvement performance assessment approaches. Continual improvement is an ongoing effort to improve products, services or processes, which seeks to facilitate and monitor either/or incremental improvement overtime or bring about breakthrough changes in practice and actions (see Fryer, Jiju and Douglas (2007) for more detail with respect continual improvement and the public sector).

Focusing on processes re-enforces the behaviours sought from collaboration and calls for reflective practice (previously identified as a supporting dimension). Table 1 provides some examples of the types of questions that could guide personal and service level reflection for collaboration.

Table 1: Example Foci for Reflection and Continual Improvement

Quality of collaborative processes	- With regard to participation, how well does the collaboration reflect a genuine partnership between members (at all relevant levels including child/young person/family, community, departmental members) - Has time been spent (upfront) investing learning more about each other, limitation and expertise, securing agreement on real problems to be addressed, joint solutions and who to work together to achieve these joint goals.
Reflective processes	- Is the collaboration process governed by a constant and iterative reflection? - Is there an agreed process of interpreting events, articulating meaning and generating understanding a collaborative process between relevant members - Is this information fed back to inform practice and organisational systems & processes
Workable outcomes	- Is the work program based on agreed solutions and actions? - Does the collaborative/collaboration engage in significant work and sustainable change? - Are all members in agreement and contributing, working toward that outcome?

Participation, respect and involvement were key themes mentioned at the QFCC Workshop (7 & 8 July) when insights were sought on how best to undertake evaluation of the reforms. Given this participatory context, it is essential that evaluation and performance improvement processes reach out and be broadly inclusive of recipients and stakeholders relevant to the Reforms sought. Evaluation approaches that reflect these values and facilitate and capture participation need to be canvassed, although some have been presented within this document.

3.3. Terminology

Finally, focusing on collaboration as a process or a step change is helpful for another reason, as it helps to overcome some of the confusion around the synonymous use of the 3Cs—with cooperation, coordination and collaboration. In order not to get lost in this 'terminological tangle' (Creeche, Laurie, Pass and Parry, 2012), attention should be directed to: (a) discussing and securing agreement on what is meant by collaboration, and then (b) on identifying and developing the key attributes that are most important to working in collaborative ways and assessing movements toward this ideal.

4. Levels of Operation and Analysis

At its most basic collaboration is a form of integration; that is, the bringing together of entities into tighter connection. As such collaboration can take place at a number of levels of operation. Drawing from the integration literature there are three main levels of operation: macro or systemic, meso or middle and micro or service level. Each has a particular focus and uses different levels and types of linkage mechanisms. Provan and Milward (2001) provide a useful framework which encapsulates these three levels of operation (and analysis), describes core purposes and functions as well as points to the types of integration outcomes sought. Table 2 sets out these multi-level characteristics.

Table 2: Integration Levels (levels of Analysis)

Level of Operation/Analysis Type of Collaboration	Focus/purpose and instruments
Systemic – Senior Executives responsible for policy, governance	At the system or macro level of operation the purpose is to establish an overall infrastructure, providing the direction and support for collaboration—supporting policies, legislations, competent workforce, governance frameworks, leadership, and culture to legitimate and enable intra- and inter-organisational and collaborative practice to occur.
Middle Management intra/inter-organisational collaboration	At the middle or meso level of operation focus is on: ■ Operationalising or implementation of policies etc., providing enabling environment for collaboration and collaborative practice (e.g. HR, budgetary, resource support and supervision). ■ Developing integrating processes and mechanisms to link up within and across sectors.
Service delivery/network level Inter-disciplinary and intra/inter-organisational collaboration	At the network level of service delivery the focus is on ■ Developing integrating processes & mechanisms to meet local connection needs ■ Use of inter-disciplinary collaboration to linking up individual services within and across sectors.
Client/Practitioner level Inter-personal collaboration	At the client/practitioner level the focus is on delivering client outcomes through a person-centred approach (e.g. wrapping services around the client).

Source: Composite adapted from Provan and Milward (2001) and de Bruijin and ten Heuvelhof (1997)

4.1 Shaping the Review Questions

Drawing from a thorough literature review of inter-disciplinary, intra/inter-organisational theory, research and practice a set of core questions reflecting collaboration and collaborative practice were constructed to align with each level of operation outlined above.

Also informing their construction was information collected from: (a) Stronger Families Reform: Evaluation Leaders Forum 15 June, 2015 and (b) the subsequent Cultural Exchange Expert Workshop both conducted by the Queensland Family and Children's Commission 7-8 July 2015.[3] This workshop used a World Café format to elicit best practice indicators and behaviours of inter-personal, intra and inter-organisational collaboration (as well as the other Reform enablers of Cultural Practice and Organisational Change).

Each of the question sets are set out below, including a summary of the core behaviours sought as well as possible locations or venues for their administration.

4.1.1 Client /Practitioner Level: 1. Children and Young people

Behaviours sought: Mutual trust, open respectful communication, empathy, openness to others' views, values and perspectives, shared decision-making, clarity about roles and responsibilities, appreciation of each other's knowledge and experience, willingness to negotiate and compromise.

Venues: case meetings, interventions, home visits, therapeutic sessions residential care centre.

Questions

- My worker respects me by being on-time, prepared, attentive and non-judgemental in our meetings

- My worker has explained his/her role and responsibilities to me (and my roles and responsibilities)

- My worker encourages me to work with him/her by explaining how I feel and sharing my concerns and situations

- My worker is committed to helping me and really cares about my concerns, adapts plans to help me meet my needs/goals

- My worker recognises that I (and my family/carers) I have special and unique knowledge and experiences that should be taken into account

- My worker takes time to explain things to me in a way I can understand

- My worker keeps promises; that is, does what he/she said would do

- I feel included in deciding how best my needs can be met

- My worker works with me (and my family) to meet goals we set together

- My worker arranges things (refers) with other providers so that I don't have to tell my story over again

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[3] Queensland Family and Child Commission Cultural Change Workshop 7 & 8 July, *Day 1 & 2 Responses* Document

4.1.2 Client /Practitioner Level: 2 Parents /Carers

Behaviours sought: Mutual trust, open respectful communication, empathy, openness to others' views, values and perspectives, shared decision making, clarity about roles and responsibilities, appreciation of each other's knowledge and experience, willingness to negotiate and compromise.

Possible Venues for interaction: case meetings, interventions, home visits, residential care centre.

Questions
▪ My child's worker has clearly explained his/her role and responsibilities to me
▪ I am actively supported to participate in decisions and actions for my child
▪ My child's worker collaborates (works) with other key stakeholders to meet my child's needs
▪ My child's worker takes into account my special and unique knowledge and experiences when making decisions for my child
▪ My child's worker takes time to explain things to me in a way I can understand (including culturally appropriate)
▪ My child's worker keeps promises; that is, does what he/she said would do
▪ My child's worker works with me to meet the goals we set together
▪ My child's worker is willing to negotiate/comprise on decisions/actions
▪ My child's worker shares information related to decisions made for my child
▪ Referrals to other providers are coordinated so that we don't have to repeat story, or navigate access to other agencies.

4.1.3 Client/Practitioner Level: 3 Practitioner Reflection

Behaviours: where workers reflect on and critical review their practices/processes and talk about their working relationships, incorporate feedback/check back process into practice to strengthen working relationships

Questions
▪ I demonstrate my commitment to helping my client/ family, for example by actively listening and taking on board their concerns and acting as advocate
▪ I keep an open mind /don't judge others' ideas, views or goals
▪ I draw on the special and unique knowledge and experiences of my client/family/stakeholders to make informed decisions
▪ I take time to explain things to my client in a way they can understand
▪ I keep promises to my clients; that is, I do what I say would do
▪ I involve my client/family in deciding how their needs can be best met
▪ I work with my client (and their family) to meet the goals we set together
▪ I negotiate/comprise on decisions/actions with my client and adjust plans accordingly

- I take pride in delivering high quality and relevant outcomes for clients/families, an demonstrate this by reviewing the outcomes and checking to see that clients' are satisfied, make adjustments, work to remove barriers

- I coordinate referrals to other providers so that my client doesn't have to repeat their story/navigate other agencies.

4.1.4 Service Delivery Network Level:

Venues: Venues: Interagency meeting, case/review planning meetings

Questions

- Relevant information is shared between members to facilitate optimal referral processes

- There is joint agreement to work differently to meet client/centred (multi-service) outcomes

- Agencies with a shared responsibility/necessary resources are invited to participate in this collaboration

- Insights from other key stakeholders (e.g. parents, Elders, other agencies) are actively sought to support optimal outcomes

- Everyone knows their role(s) and responsibility(ies) in meeting joint goals, and meets their obligations

- On the whole, there is regular, open communication between members to support joint working

- We maintain a client-centred approach (i.e. child and family have genuine opportunity for input)

- We modify our own services and activities as a result of mutual consultation, new information and/or advice

- There is a culture of working together, underpinned by common values, trust, reciprocity

- As participants in this initiative we co-lead (sharing leadership functions such as establishing rules, forming joint agreements and monitoring actions/outcomes)

4.1.5 Service Delivery-Level: Practitioner Reflection

Questions

- In this collaboration, other members can trust me to meet my obligations
- I (and other members) are respectful in our dealings with each other, clients and other stakeholders
- I (and team members) am committed to an inclusive and client-centred care approach
- I (and other members) work through any differences openly and respectfully, with better outcomes for children as the main goal
- I (and other members) prioritise joint working over professional or disciplinary loyalty
- My organisation supports me to work differently through collaborative relationships (time to be involved, legitimacy to act, culture)
- I (and other members) in this collaboration allocate time to think and reflect on our interactions to strengthen personal/working relationships, as well as the use of processes and outcomes
- I manage the expectations of members and stakeholders by being clear about how much I (my organisation) can contribute. I (and other members) are upfront about (transparent) about the limits to our participation (legal requirements, funding or resource contributions)
- I am open and honest with my team members about our collective work
- I actively share in the leadership of this collaboration by taking on administrative and other supporting roles
- I am sensitive to conflict and use non-threatening ways to approach others about sensitive issues or reach agreement

4.1.6 Middle Management-Level Questions

Questions

- We actively support work practices that are outside the norm i.e. taking calculated risks, working differently, as this is seen as legitimate work activity /role, by embedding these in HR duty statements, operational policy statements that establish clear goals and boundaries, and the provision of supervision feedback
- We value collaboration skills and competencies (appropriate skills for working with other people and organisations), through direct recruitment principles, provision of relevant training and training opportunities, and appropriate incentives as well as recognition and rewards
- We understand that to accomplish goals requires the resources (knowledge, expertise, materials, services, support) of other organisations/stakeholders and (a) support staff to make connections and (b) use our own connections to build peer based networks to support service level personnel collaboration working (i.e. overcome tensions, release resources)

- Managerial personnel re-enforce and support a culture of working together by modelling collaborative behaviour, nurturing /fostering collaboration between employees within/across boundaries, providing and engaging in forums for cross-department /sector relationship building and exchanges, express pride in and celebrate collective achievements

- Managerial personnel demonstrate their commitment to making collaboration work by ensuring adequate finds are available to accomplish goals, the organisation is 'ready' to effectively participate in collaborative endeavours, appointing the right people to the positions (and empower them), is flexible in application of rules (depending on situation)

- Managerial personnel stay informed about what goes on in the collaboration by way of communication and reporting mechanisms and use this information to inform decision-making

- Managerial personnel take decisions made in collaborations seriously and support their implementation, involve personnel in identifying and defining ways to achieve desired results

- Managerial personnel actively support/facilitate those working in collaborative activities by managing organisational and stakeholder expectations, brokering resources and buffering related concerns

- Managerial personnel expect and support leadership responsibility for collaboration to be shared at all levels , within and across teams, networks and organisations/sectors, by for example, providing leadership opportunities, reframing mistakes as learning mechanisms

- Managerial personnel regularly monitor and report on the costs/benefits of collaborative efforts by reviewing the outcomes and data for (a) client, (b) organisational, and collective outcomes, and arranging meetings to discuss results

4.1.7 Managerial-Level Reflection Questions

Questions

- I am open and actively apply the new mind set required for authentic collaboration, and do this by reviewing our practices, and considering alternative ways we can deliver services

- I am comfortable with the need to the requirements in authentic collaboration to let go of power/control and provide the space/time for collaboration to occur

- I use mistakes as opportunity for individual, team and organisational learning

- I view leadership as a collective activity and facilitate mutual enquiry, learning and practice through training, team meetings and supervision sessions

- I allocate appropriate time for workers to reflect on their collaborative involvements

- I work with or facilitate team members (individually and as group) to develop their readiness for leading collaboration, and nurture/foster relationship building between personnel

- I regularly review my management/support practice focused on collaboration

- I am able to balance the need to meet both organisational and collaboration expectations/needs, openly address conflicts as they arise and look for alternative win/win solutions to meeting our commitments

- I engage with partner organisations to develop solutions to mission/systems-based problems facing the collaboration

- I have a strategic approach to collaboration, and plan ahead to identify opportunities and/or problems and take appropriate action to leverage or mitigate these

4.1.8 Senior Executive-Level Questions

Questions

- The value and practice of collaboration as a way of working is embedded as a key principle in formal organisational documents e.g. organisational vision, policy statements and strategic plan

- Appropriate governance arrangements to support collaboration have been designed and implemented at all levels of operation, to enable shared decision-making within and across departments and sectors

- Procedures and rules have been created and enacted to enable collaboration to occur, these are regularly reviewed and adjusted as new knowledge and practices emerge

- Organisational leaders are actively encouraged to engage in and support collaborative endeavours; this is demonstrated by including collaboration as a criterion in position descriptions, performance indicators.

- Collaboration is valued as a specialist skill, with HR policies and practices are in place that support and facilitate collaboration and collaborative practice, including recruitment policies, performance review criteria.

- Collaboration is recognised as a different skill set, with specialist training provided to ensure that that (a) people in leadership positions all have good skills for working with people and other organisations and (b) the general personnel are exposed to and understand the challenges of collaborative working

- Appropriate funding is allocated to support collaborative endeavours and working, including project operating costs, training and engagement activities

- SEOs work with peers/stakeholders to promote/sponsor joint whole-of-organisational /sectoral solutions, resolve differences, overcome obstacles, and generally champion collaboration practice

- Set and maintain clear direction and performance goals for collaboration that support the organisation's purpose, vision and strategic agenda

- Mechanisms are in place to monitor and assess the success of collaborative endeavours, including their cost/benefits, this information is reported down through the organisation, across departments and upwards to government officials providing an evidence base for informed decision-making

4.2 System/Organisational Level: Organisational Readiness

4.2.1 Organisational Readiness for Collaboration

Questions

- This organisation values collaboration and collaborative working: it regularly participates in cross-departmental and sectoral exchanges, acts as a sponsor and champion for collaboration and collaborative practices within the organisation, across departments and sectors, as well as at higher levels of operation

- This organisation is open to the changes in the way we work, deliver services brought about by collaboration, and takes the necessary steps to accommodate changed circumstances (e.g. adjusting vision, procedures and practices)

- This organisation has established the organisational capacity (requisite governance, structures, management commitment and resources) needed to commit to long-term collaborative action

- This organisation actively addresses the challenges and risks of collaboration (time investment, risks associated with shared accountabilities, uncertain outcomes and delegated decision-making) by pre-assessments, considering alternative approaches, cost benefit analyses, thinking laterally and staying focused on the bigger picture

- This organisation has personnel capable of working well in collaborations; it recruits, trains for, and values collaborative competencies and collaborative working as legitimate and important, and has supporting HR policies.

- This organisation's senior leadership is committed to collaboration and shows this through their authentic involvement and support, including attending and being involved in key events, sharing knowledge and resources and encouraging same of others

- Leaders actively support and facilitate collaboration and collaborative practice; they lead by example, provide opportunity to work in collaborative endeavours as well as the time and space for reflection of collaborative practice/learning

- This organisation is transparent in its involvement in collaborations; it is clear about its role, responsibilities, contributions and limitations, engages in frank exchanges of views and opinions, is open to scrutiny of its practices as way to enhance services

- This organisation encourages a sense of mutual accountability in collaborative endeavours, by motivating and supporting people to work together and meet collective as well as individual goals, and holding itself accountable to collaborative agreements (and demanding others do also)

- This organisation regularly monitors and evaluates the cost/benefits of working in collaborative arrangements for (a) clients, (b) organisation and (c) broader community and shares this information within and across departments and sectors as well as to government officials

4.2.2 Leadership Considerations for Collaboration

A number of organizational changes are needed to facilitate collaboration. The first challenge is setting the stage in the organization and facilitating both a new language of work and a new approach to working together. Leaders at all levels must work to create this new environment to encourage personnel within and across sectors to share aspirations and interests with each other in a variety of new ways. This sharing creates not only a vision but also a subsequent approach to implement that vision. This creation/invention results from the group's collective and diverse aspirations, experience, expertise, and perspectives. The second challenge is how to draw upon the new technologies into the vision, processes, decisions, and outcomes of the new type(s) of collaborative organisations. These new, collaborative organizations are needed in what many authors have called a new knowledge economy, or an economy based on the spread and networking of information by technology in the new global environment. Specific approaches to both setting the stage and shaping the implementation are presented below.

4.3 Existing Questionnaires/Surveys

As highlighted in the literature review many of the prominent studies on collaboration, both at the organisations/inter-organisational or client level, have relied on highly structured questionnaires and surveys as the tools to measure collaboration. Several of these instruments are available as free resources for general use. The most relevant of these instruments are set out below, with a summary of their foci, benefits and limitations.

The **Wilder Collaboration Factors Inventory** is an instrument developed by Mattessich, Murray-Close and Monsey, 2001 for Wilder Foundation. The instrument has been designed to measure group-level collaboration. Administration of the Inventory takes about 15 minutes and it can be distributed at point of contact or via email/online. The inventory has an additional Children's Services' sub-scale. Organisations are able to freely use the inventory for non-commercial use with the following citation: Mattessich, P., Murray-Close, M., & Monsey, B. (2001). Wilder Collaboration Factors Inventory. St. Paul, MN: Wilder Research. The link to the inventory is: https://www.wilder.org/Wilder-Research/Research-Services/Pages/Wilder-Collaboration-Factors-Inventory.aspx

Thompson, A.M. and Perry, J. Structural Equation Model of Collaboration, In Thompson and Perry (2006) Conceptualizing and Measuring Collaboration, Journal of Public Administration Research and Theory 19 (1)23-56

Bronsteien L. 2002. Index of Inter-disciplinary Collaboration: Appendix A, Sociology and Social Work 26 (2) National Association of Social Workers

Oliver, DP, Wittenberg-Lyles, EM, Day, M (2007). Measuring interdisciplinary perspectives of collaboration on hospice teams. *American Journal of Palliative Care, 24*, 49-53. The 42-item five-point scale **Index of Interdisciplinary Collaboration (IIC)** tool is a modified version of the 2002 IIC created to assess inter-professional collaboration in an organisation. The tool has four subscales: interdependence and flexibility, newly created professional activities, collective ownership of goals, and reflection on process (Parker Oliver et al., 2007). See more at: https://nexusipe.org/resource-exchange/iic-index-interdisciplinary-collaboration#sthash.yKdw2Hxl.dpuf

O'Leary, R. and Gerrard, K. Centre for Conflict and Collaboration, Maxwell School of Public Administration Syracuse University, USA, have developed a set of questions focused at the organisational level of analysis targeted at senior level public servants within the US Federal Government.

Cummings and Bromiley's (1996) **Organisational Trust Index** is a cost benefit questionnaire on partnering developed through the Minnesota Centre for Evaluation Research (1996)

Keast, R. 2004. Integrated Human Services: The Role of Networked Arrangements, PhD Dissertation, Queensland University of Technology, on-line QUT e-prints: http://eprints.qut.edu.au/view/person/Keast,_Robyn.html

In their 2002 manuscript on international networks Church and her colleagues (Bitel, Armstrong, Ferando, Gould, Joss, Marwaha-Diedrich, de la Torre and Vouhe, R) set out a suite of **participative and end user-focused evaluation tools and approaches**. Many of these have direct relevance and application for collaboration (and could be adapted according to the purpose/focus of the evaluation and the level of analysis).

4.4 Ethical Considerations for Evaluation and Benchmarking

When working with vulnerable people, particularly for research or review purposes, it is essential to be mindful of the particular ethical requirements for this group, as well as consider and plan for how the collected information will be protected and handled. Ethical guidelines have been instituted to protect those individuals, communities and organisations involved in the evaluation process against any form of harm, manipulation or malpractice (Israel and Hay, 2006). In essence evaluation and research ethics cover three key principles of informed consent, confidentiality and avoiding harm.

1. **Informed consent:** ensure that all those participating in the assessment/evaluation are informed (in culturally, age and ability appropriate manner) of the purpose for the evaluation, what is expected/required of them and you as the evaluator (and the evaluation process) and based on this agree to participate and contribute. Informed consent should also be secured from the parents and carers/guardian of children and /or vulnerable young people.
2. **Confidentiality:** Consideration needs to be given to how the respondent's responses will be kept confidential and how the data will be managed, stored and reported. Ensuring that their input remains private and is not disclosed.
3. **Do no harm:** Fundamentally the purpose of the evaluation is to enhance outcomes for vulnerable children and young people and their families. Therefore a moral imperative exists that research/evaluation should not harm the respondent or place in worse off position due to participation.

To these three ethical cannons, a fourth requirement for collaborative practice and assessment is added: acknowledging and respecting the knowledge and experiences of those involved as clients or recipients of collaborative efforts, as well as that of other workers and stakeholders.

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