

Reporting on Best Practice in Cross-departmental Working Practices for Children and Young People

Dr Bronagh Byrne, Dr Lisa Maguire and Professor Laura Lundy

Centre for Children's Rights, Queens University Belfast.

July 2015

Foreword



As Northern Ireland Commissioner for Children and Young People my primary aim is to safeguard and promote the rights and best interests of children and young people. The United Nations Convention on the Rights of the Child (UNCRC), upon which I base my work, is a comprehensive, international human rights treaty which enshrines specific rights for children, and defines universal principles and standards for the treatment and status of children around the world. It

requires government to protect children's rights across all areas of their lives, in a coherent and integrated manner. The vision of the Convention is not simply that government meets minimum children's rights standards, but that the full implementation of the UNCRC enables children and young people to live in communities and societies where they can flourish and where their individual dignity is safeguarded and respected.

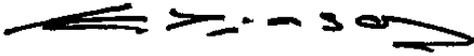
Like UNCRC rights, areas of children's lives are interdependent and indivisible, and their lives are not confined to the remit of one department or body. The UN Committee on the Rights of the Child's General Comment emphasises the importance of coordination in ensuring effective delivery for children: *'effective implementation of the Convention requires visible cross-sectoral coordination to recognise and realise children's rights across Government, between different levels of government and civil society – including in particular children and young people themselves.'* (para 27)

Problems in the co-ordination of services for children and young people is a recurrent theme in our casework and our conversations with children and their families/carers. This is reflected in research and debate on improving outcomes for children and families. It is a persistent issue because, while there are good examples of joined up working and broad support for cooperation and collaboration, this is not embedded in the planning and delivery of Northern Ireland's children's services.

We commissioned this report to explore views and experiences concerning joint working across agencies and departments involved in services for children, including health, social care, education, justice and social development, in Northern Ireland and Great Britain. The work is intended to inform and support ongoing initiatives to further develop and embed joined up working in Northern Ireland, particularly through the current Children's Services

Cooperation Bill introduced by Steven Agnew MLA. As this report is released, the Bill continues its legislative passage through the Assembly, and I hope it will be passed without delay.

The challenge will then be in ensuring the new legislation is implemented in such a way to make a real difference in the way children's services are planned and delivered. I hope that the information contained in this report will support this endeavour.



Koulla Yiasouma
NI Commissioner for Children and Young People

Contents

Executive Summary	6
1. Introduction	10
2. Children’s Rights and Joint Working	15
3. Methodology	19
4. The Children’s Services Co-operation Bill in Northern Ireland	23
5. Lessons from Elsewhere?	39
6. Challenges and Facilitators of Joint Working	61
7. Conclusion	72
References	75

Executive Summary

The concept of joint working has gained increasing momentum in recent years in the bid to address persistent or difficult policy issues. What makes these underlined issues ‘difficult’ is that they cut across more than one policy area or departmental remit, and, as such, cannot be considered in isolation. Children and young people, and their families, are one population group for whom lived experiences and emergent issues can be understood as cross-cutting and resistant to neat categorisation. The Children’s Services Co-operation Bill, formally introduced to the Northern Ireland Assembly by Mr Steven Agnew MLA on 8 December 2014 and currently subject to debate and amendment, has come to the fore with these considerations in mind. The overall objective of the Bill is to require Northern Ireland (NI) departments to co-operate with one another in order to contribute to the achievement of specified outcomes for children and young people relating to well-being. The Bill also proposes an enabling power for Departments to establish and maintain pooled funds. It is within this broader context that this current research study has emerged.

The importance of adopting a holistic approach to children and young people’s lives can be firmly situated within a children’s rights context. As is the case with all human rights, the rights set out by the United Nations Convention on the Rights of the Child are considered to be inter-related, indivisible and interdependent (UN Vienna Declaration 2003). As part of this, the Committee has consistently encouraged co-ordination and joined up working between central government departments, between central and other levels of government and between Government and civil society (UNCommCR 2003a).

This report into best practice in cross-departmental working for children and young people has been conducted on behalf of the Northern Ireland Commissioner for Children and Young People (NICCY). The remit of the project was to compile information about, and evidence of, effective interagency and cross-departmental working, which supports the effective planning, delivery and monitoring of services for children and young people. The project examined specific facets of collaborative working including: approaches to developing, co-ordinating and monitoring interagency/departmental strategies; co-operative methods employed in the planning, commissioning and delivery of children’s services and provisions; approaches employed in the planning and management of ‘pooled’ budgets; and reporting structures and procedures. The project consisted of: a comprehensive literature review; interviews with key stakeholders in Northern Ireland; and interviews with key stakeholders in other jurisdictions within the UK.

The interviews sought to obtain stakeholder perspectives and insight on: what constitutes 'good practice' with respect to cross-departmental and interagency working; key perceived barriers to cross-departmental and interagency working; and potential means of overcoming identified barriers. These issues were explored specifically in the context of the Children's Services Co-operation Bill and more generally in the context of developments in other regions.

A range of approaches to cross-departmental and interagency working can be identified across the UK. Some of these have a statutory basis in legislation while others have taken the form of policy initiatives. The findings of the study indicate that there are a number of benefits to be accrued from joint working, including facilitating a more coherent and holistic approach to services for children and young people; reducing unnecessary duplication of policy actions or service provisions; enabling more efficient use of resources; and ultimately in improving outcomes for children and young people and their families. The potential for more efficient use of resources has taken on particular emphasis given the recent challenging economic context and associated requirement for efficiency savings both nationally and internationally.

Joint working is not problem-free and a range of barriers and challenges can be identified. These, along with ways of overcoming such challenges are set out in the table below.

Table 1: Joint Working: Barriers and Facilitators

Barriers	Facilitators
<p><i>Macro level factors</i> Political leadership/engagement/mandate Fragmented government Political value/conflict Top down approaches to policy making difficult External pressure to implement changes and show results quickly</p>	<p><i>Macro level factors</i> Strong leadership style Facilitate informal face-to-face conversations Size and scale of government Investment in infrastructure Adequate remuneration Appointing cross-cutting ministers</p>
<p><i>Meso structures</i> Budgets Gate keeping Competing agendas Monitoring Lack of communication Accountability Weak leadership Time pressures</p>	<p><i>Meso structures</i> Developing and maintaining relationships Strong governance and leadership Having a clear shared vision Interagency training Interdisciplinary workers Informal communication structures Formal agreements</p>
<p><i>Micro level factors</i> Staff recruitment and retention Lack of sharing information, intelligence and resources Communication issues Role dilemmas Cultural clashes Increased admin and/or bureaucracy Professional identity concerns Staff buy-in and morale issues Resistance to change</p>	<p><i>Micro level factors</i> Build effective teams Maintain communication Allow flexible/informal workarounds Encourage effective integration Services accessibility</p>

The study suggests that a statutory duty to co-operate can be a powerful tool if underpinned by a supportive architecture. Indeed, commentators have suggested that a formal agreement or basis for collaboration is important, but seldom sufficient unless accompanied by cultural change. Specifically, there is a need for:

- A **clear mandate** and **leadership**.
- A **shared vision** and a sense of **shared ownership** among all involved in the development and outworkings of the legislation.
- The development of systematic and shared **training** on the adopted legislation and its implications for policy, service delivery and practice for all those upon whom anticipated duties will fall.
- The development of **guidance** to accompany legislation; both in the context of joint working generally and pooled budgets specifically. This could include examples of best practice.
- Clear and effective **communication** structures.
- Clarity on the kinds of **information/data** that need to be collected to allow effective monitoring to take place.
- A common means of **information sharing**.
- The development of a concise **reporting template**.
- Clearly defined **monitoring** and **accountability lines**.
- **Outcomes based monitoring** and ongoing evidence-based **impact evaluation**; that is, measuring not just the kinds of and extent of joint working that is taking place, but the impact of such joint working on outcomes for children and young people and their families.

In summary, the Children's Services Co-operation Bill is an important opportunity to consider how stakeholders across Northern Ireland at all levels can work together to improve outcomes for children and young people. This report provides an evidence base to guide that discussion.

Chapter 1: Introduction

1.1 Overview

Joint working¹ has been described as the ‘holy grail for policymakers’ (Gulland 2012: 2); an ongoing quest characterised by complexities and challenges but ultimately offset by its potential gains. Collaboration at cross-departmental and interagency levels is not new but has emerged in a range of different contexts; for example, as a desired means of improving health outcomes (Knowles 2013, Hayes et al 2012), addressing the social determinants of health for the population generally (Carey, Crammond and Keast 2014), and environmental issues (Howes et al 2015). The concept of joint working also underpins a range of recent policy and legislative developments. It has been pertinent with respect to children and young people, most notably children ‘in need’, including looked after children (Harker et al 2004), disabled children and young people (Abbott, Watson and Townsley 2005), children in the early years, and children at risk of trafficking (Harvey, Horsby and Sattar 2015). Joint working in the context of children and young people has however tended to focus primarily on collaboration at interagency level rather than at cross-departmental level and there has been little reference to children and young people in the debate surrounding ‘joined up government’ more generally.

This report into effective interagency and cross-departmental working has been conducted on behalf of the Northern Ireland Commissioner for Children and Young People (NICCY). It begins by looking at the approach adopted by the Children’s Services Co-operation Bill in Northern Ireland and related perspectives before looking at approaches to cross-departmental and interagency working developed elsewhere, bearing in mind the obligations of the UN Convention on the Rights of the Child (‘the CRC’) and the observations made by the UN Committee on the Rights of the Child (‘the Committee’) in this regard. These facets are also considered in relation to pooled budgets. The final part of the report highlights the key requirements for effective and rights-based interagency and cross-departmental working to support children and young people.

¹ The term ‘joint working’ is used here to describe both cross-departmental and interagency working unless otherwise stated.

1.2 Cross-departmental and Interagency Working: the Rationale

Coined by the Blair government with its focus on a 'Third Way' and a desire to address social exclusion, the push towards joint working is grounded in the assumption that social problems are interconnected, and, require 'interconnected decision making' to most effectively address these issues (Carey, Crammond and Keast 2014). Christensen et al (2014) suggest that the concept of 'joined up government' describes a set of responses to the problem of increased fragmentation of public sector governance and public services and an overarching desire to increase co-ordination; that is, of finding joined up solutions to joined up problems.

The need for joint working reflects the reality that children's lives and issues impacting on children and young people do not fall neatly into the realms of single government departments or thematic areas, but are inextricably related, cut across departmental jurisdictions and require different types of expertise (Howes et al 2015, Pollitt 2003). More generally, joint working is said to have the potential to improve outcomes, reduce tensions between different policies, ensure better use of resources, and reduce duplication (Howes et al 2015, Pollitt 2003). The more recent challenging economic context and associated requirement for efficiency savings both nationally and internationally has accelerated this shift, 'stimulating a policy discourse of collaboration, alliances and partnership' (Black 2012: 23) and adding renewed urgency to ongoing debates surrounding integration and joint working (MacCarthaigh and Boyle 2011). A comprehensive definition of joined up government has been put forward by Pollitt:

'Joined up government' is a phrase which denotes the aspiration to achieve horizontally and vertically co-ordinated thinking and action. Through this co-ordination it is hoped that a number of benefits can be achieved. First, situations in which different policies undermine each other can be eliminated. Second, better use can be made of scarce resources. Third, synergies may be created through the bringing together of different key stakeholders in a particular policy field or network. Fourth, it becomes possible to offer citizens seamless rather than fragmented access to a set of related services' (Pollitt 2003: 35).

To this end, joint working can be understood as long term since those involved may need to acquire new skills, different professional practices may need to be aligned and mutual trust developed (Pollitt 2003). Effectively, it may take time for all the relevant pieces of the

puzzle to come together. Pollitt also notes that those who are the subjects of joint working must have the opportunity to express their views on this development. It is important to recognise that joint working may not be appropriate in all circumstances, and therefore should be directed at solving 'specific and significant problems' (Pollitt 2003: 36).

The precise form that joint government takes depends on 'the characteristics of the government, its political imperatives and the nature of the problem being addressed' (Carey, Crammond and Keast 2014: 1088). Thus, approaches to cross-departmental working or joined up government can vary. Howes et al (2015: 758) distinguish between transformational and incremental approaches to joint working. Transformational approaches focus on change of the whole system, with particular emphasis on establishing a new set of public sector institutions. In contrast, incremental approaches seek to achieve a more effective use of existing institutions via enhanced collaboration and communication both between and within the public sector combined with improved engagement of the community. They suggest that such incremental approaches are more 'strategically pragmatic' because they require 'less structural change, allow decisions to be made more quickly and enable responses to be deployed more rapidly'.

The concrete move towards interagency working in the context of children and young people's services has been triggered by the consequences of recorded shortcomings of distinct service provisions; that is, by the deaths of children such as Denis O'Neill as highlighted in the Monckton Report (1945), Maria Colwell in 1973, Victoria Climbié in 2000, and Peter Connelly in 2007. A report following the death of Maria Colwell at the hands of her stepfather noted that there had been '*a failure of system compounded of several factors of which the greatest and most obvious must be that of the lack of, or ineffectiveness of, communication and liaison*' (DHSS 1974: 86, cited in Charles and Horwarth 2009). More recently, the Government's Green Paper following the Laming report noted that:

'From past inquiries... there are striking problems which show the problems are long standing. The common threads that led in each case to a failure to intervene early enough were poor co-ordination; a failure to share information; the absence of anyone with a strong sense of accountability; and frontline workers trying to cope with staff vacancies, poor management and a lack of effective training.' (Chief Secretary to the Treasury 2003: 5, cited in Marinetto 2010).

This is an example of the extreme circumstances that can occur in the context of child protection. Other examples of children and young people falling between the ‘stools’ of, for example, health, social care and education have also been noted (see for example Children’s Law Centre 2014 regarding children and young people with special educational needs; Lundy, Byrne and McKeown 2012 in the context of young people with learning disabilities). Bachmann and Reading et al (2006) suggest that at the level of children’s services, integrated multi-agency or interagency working can take two key forms. Integration of *service delivery* for example, might involve professionals from different organisations working together in networks formed to assess and meet the needs of individual children, such as a ‘core group’ formed around the needs of a child whose name is on a child protection register. Service integration could also refer to the joint provision of services by multidisciplinary teams of professionals working from the same base and under the same management structure. For example, social workers, teachers, and health professionals working out of a child centre. Conversely, integration of *management and commissioning arrangements* can range from co-ordination and commissioning of services from different agencies for an individual child or family by a co-ordinator or key worker, through to a jointly financed, multi-agency body to commission services to meet a particular type of need based on pooled budgets (Bachmann and Reading et al 2006).

Horwarth and Morrison (2007) develop a typology along similar lines. They note that at the simplest level, the focus is on collaboration around individual service users. The next level refers to staff working together to deliver local services while the highest degree of integration occurs when whole systems collaborate with regard to the planning, commissioning and management of services. More recent concepts of ‘systems of care’ and ‘wraparound care’ represent attempts to bring together both formal and informal supports within the community to work with families in a co-ordinated and collaborative manner (Karetekin 2014, Painter 2012). In Ireland, Owens (2010) drawing on the Children Acts Advisory Board (CAAB (2009)) highlight that interagency working can be:

- Formal or informal: informal including interpersonal contacts and informal channels of communication, e.g. ad hoc meetings, correspondence and phone calls, or formal including organisational structures, job definitions and instruments, e.g. plans, agreements, contracts.
- Vertical or horizontal: vertical can involve joint actions of agencies from different government levels or horizontal involving the joint action of agencies from different sectors.

- Policy, operational or front-line: interagency working between agencies can take place in relation to strategic or public policy, organisational/operational, or front-line delivery issues.

Approaches to joint working can thus take myriad forms depending on local circumstances, existing systems of governance, and the issue at hand.

Chapter 2: Children's rights and joint working

2.1 Overview

The CRC is one of the most comprehensive of all international human rights treaties. It covers many aspects of children's lives including their health, education, social care as well as their family lives and play and leisure. As is the case with all human rights, the rights it sets out are considered to be inter-related, indivisible and interdependent (UN Vienna Declaration 2003). In practice, this means that the enjoyment of one right is often impacted by the fulfilment or denial of another. So, for example, a failure to provide an education which meets the standards of the CRC can have adverse consequences for the child's right to be safe, to express their views and to be able to access health-care. In view of this the Committee on the Rights of the Child often emphasises the need for the child's rights to be considered holistically. For example, in a recent General Comment on the best interests principle, the Committee commented that:

'The full application of the concept of the child's best interests requires the development of a rights-based approach, engaging all actors, to secure the holistic physical, psychological, moral and spiritual integrity of the child and promote his or her human dignity'. (UNCommCR 2013: para. 2)

In its efforts to implement the CRC across all aspects of children's lives and to do so holistically, States Parties are required under Article 4 of the CRC to undertake...

'all appropriate legislative, administrative, and other measures for the implementation of the rights recognized in the present Convention'.

As part of this, the Committee has consistently encouraged co-ordination and joined up working between central government departments, between central and other levels of government and between Government and civil society (UNCommCR 2003a). It has said that:

'effective implementation of the Convention requires visible cross-sectoral co-ordination to recognize and realize children's rights across Government, between different levels of government and between Government and civil society - including in particular children and young people themselves. Invariably, many different government departments and other governmental or quasi-governmental bodies affect

children's lives and children's enjoyment of their rights. Few, if any, government departments have no effect on children's lives, direct or indirect'. (Para. 27)

While the Committee has not been prescriptive about the arrangements it considers appropriate for very different systems of government across States parties, it has recommended that States parties should review the machinery of government from the perspective of implementation of the Convention in order to secure enhanced co-ordination. In particular it has suggested that a special unit, given high-level authority 'can contribute both to the overall purpose of making children more visible in Government and to co-ordination to ensure respect for children's rights across Government and at all levels of Government' (2003a: para. 37). In its most recent set of concluding observations in relation to the UK in 2008, the Committee expressed concern at the lack of a body mandated to co-ordinate and evaluate a comprehensive and effective implementation of the Convention throughout the State party, including at local level (UNCommCR 2008: para. 12). It also reiterated its previous recommendation that the State party ensure 'effective co-ordination of the implementation of the Convention throughout the State party, including locally, especially where local authorities have significant powers to determine their priorities and allocate budgets' (para. 12).

2.2 The Need for Joint Working in Different Contexts

The purpose of co-ordination is to ensure respect for all of the Convention's principles and standards for all children within the State jurisdiction. The Committee has advised that this applies not only to those 'large departments which have a substantial impact on children - education, health or welfare and so on - but right across Government, including for example departments concerned with finance, planning, employment and defence, and at all levels' (para. 37). The Committee has repeatedly drawn attention to the need for joint working in particular contexts in its General Comments, which advise on the interpretation and implementation of the Convention. For example, in relation to provision for **children with disabilities**, it has observed:

'Services for children with disabilities are often delivered by various governmental and non-governmental institutions, and more often than not, these services are fragmented and not co-ordinated which result in overlapping of functions and gaps in provisions'. (Para. 21)

It often recommends the adoption of multi-sectoral approaches to address issues facing

children. For example, in its General Comment on **adolescent health**, it recommended that:

‘States parties should, where feasible, adopt a multi-sectoral approach to the promotion and protection of adolescent health and development by facilitating effective and sustainable linkages and partnerships among all relevant actors. At the national level, such an approach calls for close and systematic collaboration and co-ordination within Government, so as to ensure the necessary involvement of all relevant government entities. Public health and other services utilized by adolescents should also be encouraged and assisted in seeking collaboration with, inter alia, private and/or traditional practitioners, professional associations, pharmacies and organizations that provide services to vulnerable groups of adolescents’. (UNCommCR 2003b: para. 42)

It made a similar recommendation in relation to children in the **early years**, where it commented as follows:

‘States parties are urged to develop rights-based, coordinated, multi-sectoral strategies in order to ensure that children’s best interests are always the starting point for service planning and provision. These should be based around a systematic and integrated approach to law and policy development in relation to all children up to 8 years old. A comprehensive framework for early childhood services, provisions and facilities is required, backed up by information and monitoring systems’. (UNCommCR 2005: para. 22)

Finally, in the area of **juvenile justice**, the Committee has suggested that:

‘... specialized services such as probation, counselling or supervision should be established together with specialized facilities including for example day treatment centres and, where necessary, facilities for residential care and treatment of child offenders. In this juvenile justice system, an effective co-ordination of the activities of all these specialized units, services and facilities should be promoted in an ongoing manner’. (UNCommCR 2007: para. 94)

In all cases, the key message is the same: the successful implementation of children’s rights under the CRC requires co-operation and co-ordination across the agencies impacting on/involved in the child’s life.

2.3 Requirements for the Implementation of Successful Joint Working

In all decisions affecting individual children, the Committee has recommended that, as far as possible, ‘a multidisciplinary team of professionals should be involved in assessing the child's best interests’ (2013: para. 94). Moreover, there are several other implementation strategies that are considered to be necessary in order to support effective co-ordination across government services for children. For example, it is recognised that co-ordination is challenging unless there are good systems of disaggregated data collection and that these are shared among the professionals working with children. The Committee has said that data collection on children:

‘... needs to be co-ordinated throughout the jurisdiction, ensuring nationally applicable indicators... It is essential not merely to establish effective systems for data collection, but to ensure that the data collected are evaluated and used to assess progress in implementation, to identify problems and to inform all policy development for children’.
(2003: para. 48)

Another important aspect of effective joint working is the need for sufficient, transparent and accountable public budgets and expenditure to realise children's rights (UNCommCR 2003). Co-ordination is considered necessary to ensure efficient decision making and in particular to avoid duplication and waste. The Committee is in the process of developing a new General Comment on the issue of investment in children in order to realise their rights which will provide further guidance on this issue. In advance of that, the UN Human Rights Council has adopted a resolution on investment in children to strengthen public financial systems and address the mismanagement of public funds as part of wider strategy of using public funding effectively to further the implementation of children's rights (UN Human Rights Council 2015).

Chapter 3: Methodology

3.1 Overview

The overall purpose of the project was to compile information about, and evidence of, effective interagency and cross-departmental working, which supports the effective planning, delivery and monitoring of services for children and young people. The project examined specific facets of collaborative working including:

- Approaches to developing, co-ordinating and monitoring interagency/departmental strategies;
- Co-operative methods employed in the planning, commissioning and delivery of children's services and provisions;
- Approaches employed in the planning and management of 'pooled' budgets; and
- Reporting structures and procedures.

The study comprised of three key strands as follows:

1. Review of literature;
2. Interviews with key stakeholders in Northern Ireland; and
3. Interviews with key stakeholders in other jurisdictions.

Each of these strands are elaborated upon below. Ethical approval for the study was obtained from the Research Ethics Committee of the School of Sociology, Social Policy and Social Work at Queen's University Belfast and from the NICCY ethics panel. Data collection was carried out between February 2015 and May 2015.

3.2 Review of Literature

The research team conducted a thorough literature review to identify the key characteristics of effective cross-departmental and interagency working (a 'rapid review'). The review has drawn upon academic, government and NGO literature and sought to identify the specific facets of joint working identified above. Using keywords such as 'Joined up working', 'Joined up government', 'Collaborative', 'Duty' and 'Interagency', the following databases were searched:

- Campbell Collaboration Library;
- Cochrane library;

- Educational Resources Information Service (ERIC);
- Scopus;
- Sociological Abstracts;
- Web of Science;
- PubMed; and
- PsychInfo.

As the searches produced thousands of hits, we narrowed down the search to English-language articles published post-2010. The resultant hits were initially screened and approximately 150 publications selected for review. All of the identified publications were thematically coded and analysed using a 'data extraction form'.

3.3 Interviews with Key Stakeholders in Northern Ireland

Semi-structured interviews were carried out with representatives from a small number of voluntary and statutory agencies and government departments in Northern Ireland. The interviews sought to obtain stakeholder perspectives and insight on: what constitutes 'good practice' with respect to cross-departmental and interagency working; key perceived barriers to cross-departmental and interagency working; and potential means of overcoming identified barriers. These issues were explored specifically in the context of the Children's Services Co-operation Bill.

A purposive sampling strategy was adopted. Participants were identified in conjunction with NICCY on the basis of their role in (i) taking forward cross-departmental and interagency working in relation to children and young people, and upon whom the proposed duties under the Children's Services Co-operation Bill are likely to fall (ii) lobbying government on cross-departmental working in relation to children and young people generally as well as specifically in the context of the Children's Services Co-operation Bill. A letter outlining the aims of the study, research methods, dissemination and uses of the research data and ways in which anonymity and confidentiality would be respected was sent to all identified representatives. It was stressed that participation was voluntary, that there would be no adverse consequences of a decision not to take part and that participants could withdraw at any time. Participants were asked to give their active consent to participate by completing an individual consent letter. Research was only conducted with those individuals who had given their consent to proceed. In total, 8 semi-structured interviews, each lasting 40 minutes on average, were carried out in Northern

Ireland. All interviews were audio recorded. A breakdown of Northern Ireland interviewees can be seen in Table 2.

Table 2: Northern Ireland Interviewees

Sector	Number of interviewees
Representatives from Government departments or statutory agencies	4
Representatives from NGOs	2
Political Representatives	2
Total	8

3.4 Interviews with Key Stakeholders in Other Jurisdictions

The research team conducted a small number of semi-structured interviews to gain further information on how existing statutory duties to co-operate have operated in England, Scotland and Wales. The aims of these interviews were to ascertain stakeholder perspectives on: how these duties have operated in practice, challenges that have arisen and how these have been overcome. Issues around perceived bureaucracy and cost implications were also explored.

This stage of the research was more problematic due to the comparative ‘cold calling’ that needed to take place in order to obtain contacts. Due to an initial lack of response, we developed a sampling frame to pinpoint potential areas of ‘good practice’ in England. Using 2013 and 2014 Ofsted inspection reports we identified Local Authorities who were given an overall ‘outstanding’ or ‘very good’ report grading in their ‘joint area reviews’ of children’s services.² In total, Directors of Children’s Services in 40 Local Authority areas

² Following the Children Act 2004, Ofsted introduced a three year programme of joint area reviews (JARs) of children’s services for all single tier and county councils (2005-2008). Ten inspectorates contributed to joint area reviews including the Audit Commission. These are based on star ratings of between 1 and 4 (where 4 is ‘very good’). In 2008 (the last time the JARs were carried out), there were 26 councils that were 4 star and ‘improving strongly’. While JARs are no longer carried out, this data has been supplemented by current Ofsted data on a new single inspection framework of children’s services which provides an ‘overall judgement grading’ for each local authority. This covers inspections of local authority services for children in need of help and protection, looked after children and care leavers, and ‘leadership, management and governance’. At the same time as these inspections, Ofsted also undertakes a review of the effectiveness of

were contacted via email. Seven Directors responded indicating that they were willing to take part in the study whilst one expressed willingness to complete a short questionnaire. By the end of the study, interviews were carried out with five Directors. Two others cancelled the interview and were not able to reschedule. The Great Britain (GB) interviews centred solely on Directors of Children’s Services given that they are the key stakeholders upon whom the duty to co-operate fall. A breakdown of GB interviewees can be seen in Table 3.

Table 3: England and Scotland Interviewees

Sector	Number of interviewees
Directors of Children’s Services in local authorities, England	5
Scottish Government representative	1
Local authority representatives, Scotland	2
Total	8

Of the interviews carried out in England, two were Directors of Children’s Services in the Greater London area; two were in the North West region; and one in the North East region.³ Interviewees with GB participants were carried out by telephone and lasted approximately 30 minutes. These were audio recorded where possible. In two cases it was not possible to record due to technological difficulties and in these cases detailed notes were taken. All interview data was transcribed before being coded using a thematic inductive analytical strategy.

the Local Safeguarding Children Board (LSCB).

³ There were no responses to invitations to participate from stakeholders in Wales.

Chapter 4: The Children's Services Co-operation Bill in Northern Ireland

4.1 Overview

A key approach to developing, co-ordinating and monitoring interagency/departmental strategies, children's services and provisions, and pooled budgets, is to place these on a statutory footing through legislation. This chapter explores perspectives on the Children's Services Co-operation Bill, its perceived benefits and challenges. It ends by exploring pooled budgets as envisaged by the Bill.

The Children's Services Co-operation Bill was formally introduced to the Northern Ireland Assembly on 8 December 2014 by the Bill Sponsor Mr Steven Agnew MLA, and passed its Second Stage on 26 January 2015. The Bill has been referred to the Committee for OFMDFM which has responsibility for the Committee Stage of the Bill. The development of the legislation is currently ongoing.

The Bill makes proposals in respect of two levels of government at: (i) departmental level, and (ii) interagency level. The overall objective of the Bill is to require NI departments to co-operate with one another in order to contribute to the achievement of specified outcomes for children and young people relating to well-being. The specified 'outcomes' are the six high level outcomes originally developed under the Children's Strategy.⁴ The draft Bill allows the Office of the First Minister and Deputy First Minister (OFMDFM) (by subordinate legislation approved by Assembly) to make modifications to the Bill as 'it considers appropriate' (thus in the event that the outcomes under the Children's Strategy should change in the future).

Section two of the Bill sets out monitoring arrangements and requires OFMDFM to prepare and publish a report within three years of the adoption of the Act and every three years thereafter. The report should set out how each NI department has discharged its functions and how they have co-operated with each other. The report must also set out:

⁴ These outcome areas are that children are: Healthy; Enjoying, learning and achieving; Living in safety and with stability; Experiencing economic and environmental well-being; Contributing positively to community and society; and Living in a society which respects their rights (OFMDFM 2006).

- Details of any increased efficiency or effectiveness that has resulted from the co-operation;
- Any further opportunities for co-operation which could help achieve the specified outcomes; and
- Any other ways this could be better achieved.

Departments are required to co-operate with OFMDFM in the preparation and publication of the report. The Bill further states that departments may provide staff, goods, services, accommodation or other resources, and establish and maintain a pooled fund. As the explanatory memorandum points out, this is an enabling power rather than a requirement. The pooled fund is here defined as a fund ‘made up of contributions by the NI departments; and out of which payments may be made towards expenditure incurred, or to be incurred, in the discharge of their functions under the Act’.

Section four focuses on children’s services planning. The Regional Health and Social Care Board is required to review services, and to prepare and publish a children and young people’s services plan. Paragraph two requires the plan to set out how the relevant public bodies will co-operate with the Board and with one another in planning, commissioning and delivering children’s services, what actions, programmes and services will be taken on a shared basis and a requirement to set targets to assess the effectiveness of co-operation. This sub-paragraph also links the plan to the specified outcomes. The plan must be reviewed or modified at least every three years. In carrying out any review, preparing a plan or modifying a plan, the Board is required to consult relevant public bodies and ‘take account of any views they express’. The Bill lists these ‘relevant public bodies’ (section 4(7)). These bodies are required to co-operate with the Board and each other in relation to the preparation, review and implementation of, and reporting on, the plan. The Board is required to monitor the implementation of the plan and provide information on its implementation when requested. Sub-paragraphs (13) and (14) require the Board to prepare a report on the implementation of the plan and how the plan and co-operation can be improved.

4.2 Perspectives on the Children’s Services Co-operation Bill

Northern Ireland interviewees were, on the whole, supportive of the Bill, its aims and its provisions. In particular, it was suggested that a statutory duty to co-operate would address some of the barriers to effective government delivery for children and young

people. Byrne and Lundy's (2011) observation that while there was some evidence of good practice of collaboration at intra-agency level through the work of Children's Services Planning, this was not always replicated at central government level, was reaffirmed throughout the study.

Unless there's a statutory requirement... they can choose to do it or not to do it. So I think it's an enabling piece of legislation. We've had Children's Service planning for maybe twelve years now, and while that has gone a long way in terms of helping agencies at... the level underneath the Departments that good behaviour has not occurred at Departmental level and I think that's the weakness, that's the gap of the Children's Strategy. So really this legislation was aimed at helping Departments think and reflect on how they can work better together, and, you know, why not? They have a statutory duty in the safeguarding legislation, there's a statutory duty under public health, so why not a statutory duty for children in need, which is really essentially what you're talking about. (NGO Representative, NI)

While goodwill was important and had resulted in some progress, this had not been consistent. The reasons given for the importance of placing co-ordination and co-operation on a statutory footing were threefold: that it would provide additional protections for children and young people; allow more time to be spent on substantive issues; and that it would enable good practice around existing co-operation to become the 'norm'.

Firstly, it was suggested that a statutory basis for co-ordination and co-operation was particularly critical in the context of austerity and the current economic climate; specifically that the Bill would provide some protection or possibly greater protection for children and young people in the context of budget cuts:

[A]s we go into austerity, particularly in terms of children in poverty, statutory authorities will retreat into what their statutory responsibilities are, and if it's not, there's no duty to co-operate, if there's no requirement on them to work together, they're actually not going to do it. (NGO Representative, NI)

If for whatever reason that goodwill goes, and largely people will talk about, you know, resource, lack of resource, that something that at the minute is a good thing to do but isn't a core duty, some of that work could be pulled away from some of the agencies, whereas if co-operation became a core duty they would be required and continue that work. (Political Representative, NI)

Secondly, that a statutory duty would support lobbying efforts and allow more time to be spent on substantive ‘bread and butter’ issues relating to children and young people rather than on processes of encouraging statutory agencies to work together. And thirdly, that such a duty would, in effect ‘cement’ existing good practice, including the work of the Children and Young People’s Strategic Partnership (CYPSP).

Ultimately, as one interviewee noted, a statutory duty would enable people to ‘really genuinely start to work out how they can work together and, in terms of making a difference to children’s lives’. Interestingly, it was highlighted that the Bill was an opportunity to do things differently and that there was also an opportunity to take account of other broader developments in this context in the outworkings of the Bill. For example, the reduction and renaming of government departments announced in March 2015 was perceived by a number of interviewees to provide an opportunity ‘for Departments to think about how to deliver their business differently’. As was the new statutory duty on departments, statutory bodies and other relevant agencies and sectors to work together on community planning established by the Local Government Reform Act (Northern Ireland) (2014). It was also an opportune time to look at developments elsewhere:

We’re going through transitions anyway let’s, you know, transition to doing things right. I mean the Scottish did it when they set up the Scottish Parliament, said ‘well let’s not set up departmental silos to begin with’..., the Welsh Assembly said ‘let’s not have gender inequality and let’s tackle that from the start’... I think if we’re having new Departments we can take that kind of progressive approach, saying ‘well right, okay, if we’re going to change things anyway we might as well change the other problems’ and, you know, so looking at how Departments can co-operate but also how they can share resources I think would make a lot of sense. (Political Representative, NI)

Overall, a legislative basis for co-ordination and co-operation was perceived to be a powerful tool. Interviewees were however, also clear that a statutory basis was not necessarily enough on its own and that there also had to be ‘an agreement among agencies that they want to do this as well’ (NGO Representative, NI). Effectively, a change of mindset and culture is also required in order to effect subsequent change on the ground:

[Y]ou can statutorily change things and people will comply with that, but... we have to ensure that there’s change on the ground for children and young people, you know, and

not just a change of approach that actually doesn't deliver anything more. Because statute in law is a very powerful tool so we have to be sure that that's the right way to do it, first of all, and then that it's used correctly. (Government Representative, NI)

The people who want to co-operate will continue to co-operate, legislation or no legislation, the people who don't want to co-operate will find ways round it. So what's the point?' and our view is well, when you combine a very clear expectation that it is a legitimate use of your time in a statutory organisation to be working alongside, closely alongside others with a desire, I think it means the best examples get better and I think some of the more difficult scenarios potentially improve. I think it makes good practice the norm, and I just think in the current financial climate, I just think it's the minimum requirement for us, that we look at how we work better together to deliver better outcomes. I mean families don't divide their lives into 'my Justice bit', 'my Health bit,' 'my Education bit'... (Statutory Agency Representative, NI)

The Bill was viewed as presenting more of a potential challenge to Departments than to agencies. Overall, however, it was suggested that some kind of guidance accompanying the Bill would be useful in clarifying what would be expected and/or what could be achieved in practice.

4.3 Children's Services Co-operation Bill: Benefits

Northern Ireland interviewees identified a number of potential benefits which could be achieved through a statutory duty to co-operate at departmental or interagency level. One key benefit to be accrued is the ability to reduce duplication of services and provisions for similar groups of children across Departmental areas; for example, across justice, education and health and social care. It was suggested that the Bill could encourage a more holistic approach to addressing children and young people's needs and that it could 'cut out that obsession with continually assessing children all the time' (NGO Representative, NI). Secondly, it was anticipated that the Bill could lead to better outcomes for children and young people with a range of Departments and agencies taking better 'responsibility' for children and young people, thus facilitating a more coherent government response. As one interviewee highlighted:

I suppose it's the quote that we came across from a parent who said, you know, "integrated working is not having to repeat myself thirty times to thirty different professionals", you know, I want that kind of wraparound the child and the family,

meeting their needs rather than families having to go along to different professionals within different Departments separately. (Political Representative, NI)

A number of particular benefits were identified with respect to the enabling power around pooled budgets. This was seen as being central in the context of limited budgets and the understanding that there would be no extra money to do new things and therefore ‘we have to use the money, we have to do more’. For example:

So is it possible that some of our services can be delivered from the one place? Is it possible, instead of the Health Board commissioning family support, the PHA commissioning family support, the DSD commissioning some family support services, the Trusts commissioning family support services, would it not be better if we were to sit down together as one group of people and say “we all have an interest in commissioning family support so we will all agree on the outcomes we want and we’ll all put our money into this pot, and we’ll have one commissioning pot”? So we definitely see that as being a kind of major potential change for us. (Statutory Agency Representative, NI)

Pooled budgets were seen as having a knock on benefit for all Departments and agencies in both the short and long term:

[S]upporting families to do the best they can (through pooled budgets) will have a benefit for all of our departments. You know, it’s less young people in trouble with the police, it’s less anti-social behaviour, you know, it’s better achievement in schools, less young people becoming NEET, all of those benefits. Whereas otherwise all we’re doing is we’re arguing over who’s responsible for early levels of intervention. (Statutory Agency Representative, NI)

4.4 Children’s Services Co-operation Bill: Concerns and Challenges

Whilst the benefits of the Bill were, to some, extent taken for granted, there were some concerns about how the Bill would work in practice. The debate stage of the Bill (26 January 2015) indicated some key concerns around potential financial implications and increased bureaucracy as well as effective monitoring and reporting.

One interviewee was concerned that the Bill would increase workload levels; primarily as a

result of the perceived additional reporting measures and that this would introduce additional 'layers of **bureaucracy**'. The interviewee suggested that if this were to be the case that it was crucial that reporting had a clear purpose and that delivery of reports would have added value; in other words that it would have a clear role in demonstrating impact of co-operation on outcomes for children and young people as opposed to simply reporting on ways in which co-operation was being achieved. The majority of interviewees however, felt that the Bill would not significantly lead to increased bureaucracy, but that it was 'incorporating what they already do' and was an issue of transparency. One interviewee stated that it would simply formalise what they were already doing and would not lead to a substantive increase in workload. Instead the benefit was seen to be one of enabling a much more consistent and focused approach at all levels of government:

From our point of view the Bill asks us to produce a plan, well we already do that; the Bill asks us to co-operate with a wide range of agencies in the production of that plan, we already do that; the Bill asks us to review that plan on an annual basis, we already do that; the Bill asks us to do a significant review every three years and produce a new plan, we already do that. So from where I sit if the Bill came in tomorrow I'm not going to have any more work than I currently have today. (Statutory Agency Representative, NI)

If anything, it was suggested that the Bill and the proposed reporting mechanism offered an opportunity to 'tidy up' and streamline existing reporting lines:

[I]f you look at the reporting that's happening at the moment [Departments] have to report every quarter on the programme for government targets, so adding an extra question into that is not going to be onerous. So they need to be challenged on ways that they can incorporate it into their current work, rather than reinventing the wheel, which is what they normally do. (NGO Representative, NI)

You know, because the idea seems to be, if you bring in this legislation that's more reporting. Well it might be less; it might be some of the ways we currently report are no longer relevant'. (Statutory Agency Representative, NI)

Costs and potential financial implications were perceived as a potential 'sticking point' around the Bill as highlighted during the debate in the second stage of the Bill. Northern Ireland interviewees in this study however suggested that the Bill's outworkings would not have significant cost implications. Any cost implications was perceived by interviewees to

be short term and a natural outcome of any transition or change. This cost was viewed as being one of human resources and logistical in terms of information gathering rather than financial; the costs associated of:

rethinking how to do things, people getting in a room and having to have those initial meetings, going “well what does it mean to co-operate? How do we co-operate?”
(Political Representative, NI)

These initial implications were perceived as being central to long term savings:

[I]t is spend to save, you know, both in terms of people and financial resources, and ultimately to improve outcomes. So it’s saving resources but more importantly improving outcomes, or more efficient use in resources. (Political Representative, NI)

Organisational identity and how this played out in collaboration was raised as a potential barrier. One interviewee expressed concern that there was a ‘preoccupation of branding’ and the need for organisations to demonstrate that they were leading on something:

Everyone has to see their brand and, because either that means that they can demonstrate that they’re either important or that they’re actually leading on something, and I think that ... gets in the way sometimes, particularly in terms of collaboration.
(Statutory Agency Representative, NI)

It was suggested that something such as ensuring that the logos of all organisations involved in collaboration on documents emerging from that would be helpful in overcoming this potential barrier and facilitating commitment.

It was noted that the Local Government Reform Act (Northern Ireland) (2014) had already introduced a statutory duty on community planning. Concern was expressed that those involved in this process would already be developing work relating to children and young people separately from those involved in children’s services planning and that this could risk a degree of disjointedness. It was suggested that more account needed to be taken of the duty around Community Planning in the development and implementation of the Children’s Services Co-operation Bill and how the two processes could complement each other.

Monitoring and accountability attracted significant attention across Northern Ireland interviewees in the study and was perceived as arguably the biggest challenge to be

considered and as key to facilitating the success of implementing the duty. As one interviewee argued, it is important to produce ‘*sensible reports that show the actual activity and what the difference is [otherwise] it’s meaningless*’. (NGO Representative, NI)

Measuring progress effectively and providing the right kind of information were viewed as important components of the monitoring and accountability process. This meant being clear on how co-operation could be best measured, as well as recognition that deep-seated change will take some time to manifest:

[H]ow do you measure, almost success of cooperative working?... you’ve a couple of issues. You’re talking about generational changes, you know, changes that’ll take a generation to really see their impact, or at least, you know, ten, fifteen years... So you’ve that timeline issue. (Political Representative, NI)

[T]here’s no point in just measuring it and reporting on it without knowing what your goal is... I could be telling you about all the good ways that Departments co-operate, because that’s what they’ll tell me, but it’s about co-operation in terms of delivery of children’s services. (Government Representative, NI)

There was some concern that the Bill, in its current form, did not do that successfully and that it focused too much on linking reporting on co-operation to delivery of the Children’s Services Plan, which is one element of the Children and Young People’s Strategy. Thus, it was suggested that:

[W]e need a mechanism that reports effectively on the delivery of the Children and Young People’s Strategy, not just one element of it. (Government Representative, NI)

Outcomes based reporting was highlighted as critical in assessing the extent of impact:

Northern Ireland is better at reporting on how much we’ve done; it’s not so good at reporting on whether or not it’s making any difference and that’s the bit we need to get better at. (Statutory Agency Representative, NI)

Indeed it was suggested that reporting on outcomes should be the starting point. Measuring outcomes was also perceived as helpful in assessing ‘value for money’. Facilitating positive outcomes for as many people as possible in a way that also ensures value for money was identified as a critical balancing act. An example was posed of what was considered not to be good practice:

We asked a while ago about the 0-5 strategy that Education was leading on and... a rather confusing reply came back: 'yes we are meeting and liaising'. Well they might have been going to the meetings, they weren't agreeing anything.... So you've got to have something that properly measures the level of co-operation. (NGO Representative, NI)

It was also suggested that the structure of current accountability arrangements were not necessarily conducive to the objectives of the Bill. There was concern that at the moment, each organisation had its own 'mission' and set of objectives that they are required to deliver on which could create pressure on new ways or unfamiliar ways of working:

I think sometimes that makes it difficult to take a risk, if you like, or to find a little bit of space in order to say "well I wonder could I do this differently if I worked more closely with another organisation". And yet everything we do bumps into everything that everybody else does, so that can be a challenge. (Statutory Agency Representative, NI)

The consequences of not working together, or lack thereof, were also raised as an issue:

If an organisation decides it doesn't want to work with everybody else, in our system there's no sanction or no, there's no expectation that anyone will be held to account. Provided they deliver the objectives of their own organisation no one's going to say to anyone "well look you didn't co-operate with anybody" or "you could've done that better if you'd done". (Statutory Agency Representative, NI)

Overall it was hoped that there would be some clarity or guidance provided on the reporting process and monitoring arrangements once the Bill became law, and anticipated that this would help to add focus on what needed to be done. Part of this was about information sharing so that effective and evidence based monitoring could take place. The Children and Young People's Strategic Partnership was an example of best practice in this regard that could be developed more broadly:

The CYPSP has actually moved to a fairly sophisticated database, a lot of work has gone into that... you can go into the CYPSP website and you'll see all of the information that's collated in terms of the indicators and outcomes, and I think that should be a very good foundation... The sign-up to the provision of information has been excellent.... People have just worked together... and sort of said "If you provide

us with x we can give you y". (Statutory Agency Representative, NI)

The interviewee highlights the importance of good relationships, 'buy-in' and the mutual benefits that can result. It was also noted however that there was a danger of becoming overwhelmed with too much information. Providing clarity and guidance, as to which types of information was most needed and would make the most difference, was key; for example, as one interviewee highlighted, providing a two page summary in terms of what the key messages were in respect of critical areas, and using this as a means of measuring outcomes and monitoring progress.

4.5 Pooled Budgets

Section three of the Children's Services Co-operation Bill states that departments may provide staff, goods, services, accommodation or other resources and establish and maintain a pooled fund. Not all Northern Ireland interviewees had experience of pooled budgets, however there was a general perception that pooled budgets in relation to children and young people's services and/or policy initiatives were the way forward. Placing an enabling power in legislation was viewed as a necessary component of this process. One interviewee noted that including the requirement to pool budgets and share resources was important as it:

Makes it clear to everybody that there is no governance or accountability reason why budgets can't be pooled. So we kind of remove any lingering or misunderstanding about, you know, whether or not budgets can be pooled, because you will still meet people who would say "well they can't be because it messes up the accountability". (Statutory Agency Representative, NI)

A number of benefits to facilitating pooled budgets were identified. For example, it was suggested that enabling financial partnerships to take place also helped to embed further collaboration on a range of levels. It reduced the risk of duplication; spending money in separate ways towards shared aims or outcomes, was viewed as being both more cost-effective, and more conducive to achieving better outcomes for children and young people. Pooled budgets were also an opportunity to be more creative by working across departmental – and financial – boundaries.

[I]f we just said "here's the money for children's services in Northern Ireland regardless of who's involved in either putting the money into the pot or who thinks they're most important" and then we were saying "now what is it that we want to try?" Now I know

some of this is pie in the sky “what is it that we want to do for children?” and then we’d start to, really based on need and based on our understanding of what works best for children. I’m not sure that the portfolio and envelope of services and how we engage families and children and communities would be as it is now. I sense that it would be different. (Statutory Agency Representative, NI)

I don’t think we’ll ever get the early intervention bit right unless we get pooled budgets, multi-agency collaboration, because the sort of things we need, no one agency can afford to deliver them. (Statutory Agency Representative, NI)

Concern was however expressed at the potential questions the enabling power also raised. It was perceived as positive that the Bill encouraged the act of pooling resources rather than being prescriptive about how this should be done. On the other hand, there is also a need to:

Ensure that the correct audit is there on funds, that if Departments put money into a central pot, who makes the decision and how that pot is carried out. So there’s a lot of process elements there that would need to be accurate when you’re dealing with public funds. (Government Representative, NI)

There’s systems in place around accounting and pooled budgets don’t seem to fit into that... Pooled budgets are really ..., agreeing the objectives, having one accountability line, one funding stream in which to apply to. To me, that’s the ultimate goal. (Political Representative, NI)

Accountability lines appeared to be the key barrier and concern surrounding pooling budgets and resources:

[T]here’s resistance, “oh we have accounting lines”, et cetera, et cetera, “we have to be responsible for our own pot of money”. (Political Representative, NI)

If we put fifty thousand into a project... then there has to be a very explicit monitoring template and reporting mechanism and so forth. It goes back to that bit about balance and proportionality... I don’t know whether or not the Bill helps us with things like that but I think that it has some potential to do that. (Statutory Agency Representative, NI)

The development of guidance was viewed as an important way of addressing some of

these concerns and of fleshing out how this could operate in practice. Guidance on pooled funding issued by the Department of Communities and Local Government in England in 2010 was highlighted as an example of good practice that could be replicated by the Department of Finance and Personnel in Northern Ireland:

I think we do need DFP to come in and give clear guidance on it, and clear direction, and say “this isn’t a problem because here are the systems”, you know, “and we approve these systems”. I think without that Departments aren’t going to go out on a limb, you know? (Political Representative, NI)

It was also suggested that the Bill was not an appropriate place for this type of information and/or prescriptiveness:

So it’s really then them (DFP) stepping up and saying “well actually we see the benefit of this so, you know, we’re going to make it clear to Departments you can do it and here’s how you do it”. (Political Representative, NI)

It was acknowledged that pooling budgets was something that was already happening, albeit largely on an ad hoc basis and on a relatively small scale and/or in relation to single project issues. For example, two interviewees described a project for eight to twelve year olds for children at risk of offending whereby services were established and delivered by NIACRO, Extern and Action for Children. The CAPS project included contributions from the Department of Justice, Health and Social Care Board, and the community and voluntary sector.

Another example included a project between the Health and Social Care Board and the Youth Justice Agency to develop a forensic psychology service for children and young people. As one statutory agency interviewee highlighted:

They’re providing the accommodation; both of us have provided a bit of money, the Trust is providing the leadership... There’s a good and effective, hopefully, it’s early days at this stage, but just another small example of a pooled budget to try and make things happen.

It was suggested that pooling resources would be easier to facilitate on some issues compared to others, however this should not undermine its importance. On the whole, facilitating pooled budgets was viewed as being about compromise and negotiation between different parties, with overarching organisational aims and objectives in mind. The

more complex the issue, or the more parties involved, the more difficult enabling pooled budgets could be:

I think it's easier with a single project because in a single project you and I can sit down and say "I know what I'm getting out of this and you know what you're getting out of it", And I think that, on that basis I think it's relatively easy to work out, well we both have a very clear interest. When it comes to some more intangible things, you know, like earlier intervention,... there's more of a negotiation around the shared interest, because we're all paying attention, we're all constantly going back to saying "is that my core business? Is that what I do?" (Statutory Agency Representative, NI)

4.5.1 Pooled Budgets Example: The Early Intervention Transformation Programme

The majority of Northern Ireland interviewees highlighted the Early Intervention Transformation Programme (EITP) as a model of good practice with respect to pooled budgets. This section therefore highlights processes surrounding EITP as it relates to the operationalisation of pooled budgets. The EITP is a collaborative initiative under the Delivering Social Change banner between five government departments, OFMDFM and Atlantic Philanthropies. The departments involved are: Department of Justice, Department of Education; Department of Employment and Learning; Department of Health, Social Services and Public Safety; and the Department for Social Development. The EITP aims to improve outcomes for children and young people across Northern Ireland through embedding early intervention approaches. Ultimately it seeks to 'improve outcomes for children through investing in transformative practice' (Government Representative NI). It is based on three overarching workstreams. Workstream one aims to equip all parents with the skills needed to give their child the best start in life; Workstream two aims to support families when problems arise before they need statutory involvement; while Workstream three aims to positively address the impact of adversity on children (EITP website). Each workstream is taken forward and implemented by arms-length bodies such as Education and Library Boards, PSNI, Youth Justice Agency, Housing Executive and so on, with much of the actual service provision through the community and voluntary sector.

The EITP is funded through a pooled budget of twenty five million pounds in total; five million from the Departments, ten million from central government funds through Delivering Social Change, and ten million from Atlantic Philanthropies. The EITP is managed overall by a Programme Board which consists of Deputy Permanent Secretaries from each of the funding departments and a representative from Atlantic Philanthropies – seven members

in total. One interviewee described how this worked in practice:

[Each contribution] comes in through a monitoring round.... Which is basically a mechanism whereby departments can move money between each other. So that comes in, as will the Atlantic [contribution], OFMDFM.... All the money goes into a central pot within DHSS and then the Programme Board jointly administers that money, so nothing's spent from that unless the Programme Board agrees it. (Government Representative, NI)

A payment schedule over a three year period was agreed at the outset. Two key underpinning criteria for EITP are sustainability and transformation:

What we didn't want to do was just fund a whole range of services, and like happened in the past maybe, the money stops.... If we can change how those services are delivered in a way which is sustainable we will have better outcomes not just for the three years for funding but for, you know, five, ten, fifteen years after the funding stops, because you've changed that, core services. (Government Representative, NI)

The issue of short term transitional funding in the context of pooled budgets was raised as an ongoing concern by other interviewees; that where pooled budgets had been in effect, these were usually a 'one off' that ended after a certain period of time and with little long term impact. Measuring impact and gathering evidence is central to EITP. One Government Representative described how 'Outcomes based Accountability' was being used as the overarching framework for determining what each project under the three workstreams are trying to achieve and how successful they are on a quarterly basis. The interviewee described how at the beginning of any project, all key stakeholders come together to identify key population and service indicators which will be used to monitor overall success. It was suggested that this was more effective than the types of monitoring and evaluations that had previously been emphasised:

Often what happened is you'd have projects or services, they would have a line in their funding which said '20k for evaluation'... somebody comes in, does a few interviews at the end and says "oh this sounds like it's doing good things" as opposed to making sure the data and outcomes was there from the very beginning and then capturing that information, so you've got graphs which you can see... if we do this and this we should see this changing over time. (Government Representative, NI)

This was viewed as a more effective means of being able to identify causation and

relationships. At times this could mean moving beyond existing datasets, but doing so would enable more effective monitoring of how well a project, and ultimately, pooled budget was operating:

We have things like birth weight or time in care because we have those systems, but... we want to capture things like school attendance but no one captures that centrally so we're investing in, okay phone up the school, find out, can they get that information and then we'll bring it together across all the clients and then we can get a view in terms of whether this intervention improves school attendance for instance.
(Government Representative, NI)

Each project updates the Programme Board on a quarterly basis which includes the use of 'report cards' and data demonstrating the extent to which outcomes were being achieved. The Programme Board then reports to the Delivering Social Change/Atlantic Philanthropies Board made up of officials from the key departments, OFMDFM and special advisors. This then feeds into the Delivering Social Change ministerial sub-group.

Effective operation of the pooled budget was seen to emerge, in part, through ensuring that everyone had a part to play and a sense of ownership. For example, by ensuring that all funders were represented on the Programme Board; *'the structures were put in place which gave them an equal voice...'* (Government Representative, NI). Having a focused Programme Board with the key players, whilst relatively small in number, allowed honest conversations to take place which would not necessarily happen in large groups. Beyond this, involving other stakeholders who may not be making a direct financial contribution but are involved in some level, was also viewed as important. For example, involving agencies such as Education and Library Boards, Trusts, etc., in the development of tendering processes and indicators was viewed as 'powerful' in inducing a feeling of some level of ownership. Overall, it was suggested that in developing pooled budgets, close attention needed to be paid to governance and accountability mechanisms:

I guess if people think of pooling funds, they just need to be quite careful in terms of who's got control there, ... the mechanisms, the governance around that, because there's different ways you can do that, and you can create a system, different systems, but those different systems will lead to different dynamics in how's that's done'.
(Government Representative, NI).

Chapter 5: Lessons from elsewhere? Approaches and benefits to joint working in other jurisdictions.

5.1 Overview

A range of approaches to cross-departmental and interagency working can be identified across other jurisdictions. Some of these are given statutory basis in legislation, while others are not. This section highlights those approaches which featured most prominently in interviews with GB participants and the literature. It begins by discussing the identified rationale for placing joint working on a statutory basis before highlighting specific examples. A number of approaches to joint working, at both cross-departmental and interagency level have been identified in the literature. These include:

- Dedicated Ministries for children and young people (MacCarthaigh and Boyle 2011);
- Cross-departmental or interagency advisory groups or taskforces (Grace et al 2012);
- Cross-departmental policy units (MacCarthaigh and Boyle 2011);
- Interdepartmental working groups (Carey et al 2014);
- Statutory duty to co-operate (Bachmann et al 2006, 2009; Ham 2004);
- Integrated children's services (Black 2012, Charles and Horwarth 2009, Easton 2012, Bachmann et al 2006 and 2009);
- Integrated community schools (Forbes 2009); and
- Integrative case management (Karetin 2014).

Not all of these approaches are underpinned by legislation. Some have taken the form of a policy initiative such as integrated community schools in Scotland (see below for discussion). Joint working can thus be governed formally by legislative duties, contracts, framework agreements (Fimreite et al 2013), memoranda of understanding (Callaly et al 2011), or informally on the basis of consultation or unwritten mutual agreement (Fimreite et al 2013, NAO 2001). Carey et al (2014) note that interdepartmental working groups have become a common feature of joined up working generally, perceived as a means of breaking down organisational silos and overcoming obstacles in existing structures. However the authors also note that these types of committees and taskforces have been found to limit rather than facilitate collaboration where such groups have no formal authority or clear accountability mechanisms. In instances where co-ordination and

collaboration are underpinned by legislation, there is also a risk that they can be perceived as a ‘forced marriage’ on those involved and can, at times, potentially become ‘combative’ or subject to resistance (Eden and Ackermann 2014). Eden and Ackermann do note however that a ‘healthy tension’ is inevitable. The suggestion that some kind of formal requirement or ‘duty’ is important, or even necessary, has been reaffirmed by others such as Pollitt (2003) who argues that a formal agreement is necessary, but seldom sufficient unless accompanied by cultural change.

5.2 Approaches to Joint Working in Scotland

The Rights of Children and Young People Act (Scotland) (2014)

The Children and Young People (Scotland) Act (2014) received Royal Assent on 27 March 2014. The Act makes provision in relation to various aspects of children’s services reform and places a duty on Scottish Ministers to promote children’s rights. The Act enshrines elements of Getting it Right for Every Child (GIRFEC)⁵ approach in law, by ensuring there is a single planning approach for children who need additional support from services, providing a single point of contact for every child (Named Person) and providing a holistic understanding of well-being. Part 3 of the Act places duties on public bodies to co-ordinate the planning, design and delivery of services for children and young people with a focus on improving well-being outcomes, and report collectively on how they are improving those outcomes.

Section 8 of the Act (Part 3) requires each local authority and relevant health board to jointly prepare a children’s services plan (‘Child’s Plan’) for the area of the local authority every three years. The children’s services plan should be prepared with a view to achieving the aims of providing children’s services in the area in a way which: best safeguards, supports or promotes the well-being of children; is most integrated from the point of view of the recipients; and constitutes the most efficient use of available resources (Part 3, Section 9(2)). In preparing a children’s services plan, the local authority and relevant health board are required to give other service providers an ‘effective opportunity to participate in or contribute to the preparation of the plan’. The local authority and relevant health board must also consult with organisations

The Act requires the local authority and relevant health board to publish each year, ‘in a

⁵ [Getting it right for every child](#) is Scotland’s national programme that aims to improve outcomes for all children and young people in Scotland.

way they consider appropriate', a joint report on how the provision of children's services and related services in that area during that period have been provided in accordance with the children's services plan and the extent to which the aims, specified in section 9(2) have been achieved, and such outcomes in relation to the well-being of the children in the area as prescribed by the Scottish Ministers.

The proposed outline of the statutory guidance (April 2014) highlights the relationship between the 'Child's Plan' and the 'Named Person'. It notes where the child's main needs lie within the Named Person's agency (health for pre-school children or education after starting school) the Named Person is expected to initiate a single agency Child's Plan and co-ordinate delivery of support where additional targeted help is needed (a 'targeted intervention'), unless this requires a level of co-ordination outside the scope or capacity of the Named Person. For example, for a young child where concerns are highlighted at the 27-30 month review, the Health Visitor may seek support from other specialist health professionals and co-ordinate that support through a Child's Plan. For a child who is receiving support from a number of different agencies, the Child's Plan will be multi-agency but will be discussed and reviewed in a single forum: the Child's Plan meeting. In these circumstances, the role of the Lead Professional is key to ensuring that support is co-ordinated across agencies, the child, young person and family are kept informed and are actively involved in the process, and the agreed support is being taken forward in line with the plan.

The guidance also notes that, as a key principle of GIRFEC, the child and the parents should be actively involved in the process of development and review of the plan and their views will be considered and recorded within the plan. Only in exceptional circumstances will professionals have to make the decision that it is not possible, or appropriate, to seek views and involve the parent and/or child in aspects of the assessment and planning process. Children's Services Plans for the period 2017-20, meeting the requirements of Part 3 are expected to be in place from April 2017 while Part 1, (Section 2 and 3) will commence in April 2017, with 2020 as the date of first reporting.

The Act was welcomed by the Scottish representatives who participated in this study. One interviewee noted that the ideas underpinning the legislation had a 'long history':

They kind of transcend changes in political administration. They originally came out about twelve years ago through a consensus at national level about the kind of

principles that people wanted to see in terms of improving the well-being of children and young people, and one of these was to improve the co-operation that went on among professionals. (Government Representative, Scotland)

The interviewee also described the process that took place towards placing co-operation and co-ordination on a statutory basis:

So these principles became a pilot project that was originally tested in Highland. Highland did a lot of the kind of working through about what this might look like in practice. What are the specific changes that needed to take place for the workforce to make that kind of co-operation and early intervention a reality for children, and that became the model which was then kind of shared with other local areas... they were encouraged to take it up but... over the years more and more areas have taken them up. And then it reached a point where there was a recognition that it probably made sense to make this a national standard, a statutory requirement rather than just a kind of voluntary arrangement. So then it went, became part of the Children and Young People's Bill, and then went to statute last year. Now it's been driven as part of a national implementation programme, so I guess it's kind of an example about how there was a consensus around certain things at national level, it was then taken through kind of local working, local co-operation, to find solutions to it. When that was worked out in one part of Scotland it was shared with other parts of Scotland, and then it's gone back to becoming I guess a national priority again, through legislation. (Government Representative, Scotland)

Thus there had been an element of 'buy in' and a sense of working towards an approach that could be rolled out across the region. Placing these principles on a statutory footing was perceived as 'focusing the mind'. The interviewee also notes that the legislation was aimed at reducing levels of bureaucracy rather than increasing it. It is too early however to gauge impact.

Does having a statutory duty increase bureaucracy?

“Putting something on the statute book tends to focus the mind, because it becomes something that people have to do rather than people sign up for, so it places a timescale on things, gets people to focus on things, and what have you, and the kind of duties we’re putting in place were designed, are ultimately designed to reduce bureaucracy. So hopefully over time it’ll have that impact, but by focusing people on a timetable for change it will get people to focus very clearly on solutions and the need to implement things in a way that reduces the amount of bureaucracy, that compels people to work together, to find common solutions to things, because it’s just, in a sense it just kind of puts a fire under these people”. (Government Representative, Scotland)

In terms of monitoring the new duties, the Children and Families Directorate had a key role to play. There appeared to be less clarity on how this would work in practice. The interviewee highlighted that ‘*We have our own rules in the Scottish government*’ and that a key way of monitoring would be to work closely with partners ‘*to see at what stages they are at in terms of their readiness and preparation.*’ The inspection agencies were felt to also have a key role in assessing the quality of services and monitoring outcomes across services for children and young people:

I guess we’ve invested specific agencies with a rigorous methodology to go in and provide that kind of inspection, providing, or on the basis of a common performance framework across the whole of Scotland, and they give us the insight into how things are doing and the assurance that there are certain minimum standards that are being met. (Government Representative, Scotland)

Community Planning Scotland

A statutory basis for Community Planning in Scotland is provided by the Local Government in Scotland Act 2003. Through Single Outcome Agreements, Scottish local government and Community Planning partners are to set out the outcomes which they seek to achieve within the council area. The outcomes should reflect local needs and priorities which will eventually support progress at national level (Scottish Government et al 2008). In return, local authorities are promised greater flexibility and responsibility to deliver the agreed outcomes through streamlined bureaucracy and reporting requirements, increased levels of available funding, and reductions in the ring-fencing of government grant. Significantly, the children’s part of the Community Plan is written by the Children’s Services Planning Partnership which allows for further collaboration across initiatives. This was identified as critical by a Statutory Agency Representative in Northern Ireland.

Community Schools Initiative

The Integrated Community Schools (ICS) Initiative (Scottish Office 1998) sought to raise young people's achievements and improve social inclusion in Scotland. It was based on recognition of the relationship between educational achievement, attainment, health and socio-economic factors, and the consequent need for the more integrated delivery of associated services (HM Inspectorate of Education 2004). The ICS initiative aimed to expand and integrate the range of educational, health, social work and other services offered to children and young people and families, including those offered by the voluntary sector. The initiative was launched in 1998 and was piloted over three phases from 1999 to 2003. A key objective of the pilots was to encourage local authorities and their schools to develop common objectives and more integrated ways of delivering services with other partner agencies that were also providing services to children and families. Essentially, the 'Integrated Community School' was to be the hub for an integrated approach to the delivery of education and other children's services. The framework for the initiative called for:

- Integrated provision of school education, informal as well as formal education, social work and health education and promotion services;
- Integrated management;
- Arrangements for the delivery of these services according to a set of integrated objective and measureable outcomes;
- Commitment and leadership; and
- Multi-disciplinary training and staff development (Scottish Office 1998: 4-5, cited in Forbes 2009).

A 2004 report by the HM Inspectorate of Education identified a number of difficulties in achieving the objectives of the initiative, concluding that 'the ICS initiative has not been fully successful in its aim of establishing a new over-arching vision and framework for the delivery of education and other children's services, using schools as the hub. (28, cited in Forbes 2009). These difficulties related primarily to implementation. The initiative has since been superseded by *GIRFEC*.

5.3 Approaches to Joint Working in England and Wales

The Children Act (2004)

Following the Victoria Climbié inquiry and the recommendations from the Laming Report (2003), legislative developments around multi-agency working accelerated (Black 2012). The Government's response to the Laming Inquiry among others, in the form of Every Child Matters, placed clear emphasis on achieving specific outcomes for all children and young people. Section 10 of the Children Act (2004), England and Wales established a duty on Local Authorities to make arrangements to promote co-operation between agencies in order to improve children's well-being, defined by reference to five outcomes and a duty on key partners to take part in those arrangements. The five outcomes relate to:

- Physical and mental health and emotional well-being;
- Protection from harm and neglect;
- Education, training and recreation;
- The contribution made by them to society; and
- Social and economic well-being.

It also provided a power to allow pooling of resources in support of these arrangements.

The duty effectively provided the basis for integrated planning and commissioning of children's services through local partnerships. The Apprenticeships, Skills, Children and Learning Act 2009 amended section 10 by bringing schools, colleges and Jobcentre Plus under the duty to co-operate and requiring all local areas to have a children's trust board. The duty to establish a Children's Trust Board came into force on 1 April 2010.

Children's services authorities are obliged to promote co-operation both within the authority and with statutory partners who are, in turn, required to co-operate with the authority to improve well-being. Under section 12A(3) of the Act, the Children's Trust Board may also include any other persons or bodies that the local authority, after consulting its relevant partners, think appropriate. Other elements of the Act which are of note include the duty on children's services authorities to produce a plan covering those partners with a duty to co-operate (Section 17). Children's services authorities are also required to appoint a Director of Children's Services to be accountable for all local authority children's education and social services (Sections 18 and 19). Sections 20 and

24 of the Act set out the framework for Joint Area Reviews to evaluate the extent to which children's services improve the well-being of children in the area. Inspecting bodies have a duty of co-operation for the purpose of inspection and reviews.

The Children's Trust Board (Children and Young People's Plan) (England) Regulations 2010 ("the 2010 Regulations") set out the essential steps that every Children's Trust Board must take to prepare and publish a Children and Young People's Plan by 1 April 2011 along with detailed requirements for the content of the plan itself. The first plan sought to set out the Board partners' strategy for co-operating with each other with a view to improving the well-being of local children and young people. Ham (2004) described the establishment of children's trusts as the 'biggest reorganisation in children's services for 30 years' while Aynsley-Green (2004, cited in Bachmann et al 2009), wrote that the pilot children's trusts, known as 'pathfinders' were an 'exciting opportunity to evaluate new ways of service delivery'.

A 2006 study examining initial structures of children's trusts found that all of the 35 trusts who took part had a board or structure that included health, education and social services representatives. Other organisations represented included Connexions (in 16 trusts), voluntary or community organisations (15) parents or carers (7), youth offending teams (6), police (6) and child and adolescent mental health services (5) (Bachmann et al 2006). Two thirds of the children's trusts reported joint commissioning of at least some services. Fifteen reported widespread joint commissioning of multiple services across two or three of the health, education and social services sectors. Two thirds of the trusts reported user participation in their development. Fourteen had developed 'substantial' levels of parent or carer involvement and 10 had 'substantial' involvement of children and young people (Bachmann et al 2006).

An evaluation of the children's trusts carried out by Bachmann et al (2009) however highlighted the 'uneven effects' of the new policy which, they argue, resulted in only the minimum compulsory requirements being met in some areas, but 'impressive changes' in others (p.262). Respondents from 31 children's trusts in their study reported that 450 services were newly provided through interagency arrangements. The most common service area in this regard were children and adolescent mental health services, child development centres and youth justice teams, often provided by co-located teams in multidisciplinary settings. New multi-agency services included children's centres, teenage pregnancy services, services for disabled children, for looked after children and drug and alcohol action programmes. Bachmann et al (2009) suggest that it was difficult to identify

improvements in children's outcomes that were directly attributable to children's trusts, however examples were provided of initiatives that were believed to have improved outcomes.

The current state of play around this has somewhat changed. The Coalition Government, in 2010, announced its intention to reverse legislation requiring Local Authorities to establish Children's Trust arrangements and to prepare and publish a joint Children's and Young People's Plan. On 22 July 2010, Michael Gove announced plans to reform Children's Trusts. This included proposals to:

- Remove the duty on schools to co-operate through Children's Trusts via the 2011 Education Bill;
- Remove the requirement on local authorities to set up a Children's Trust Board and the requirement on those Boards to prepare and publish a joint Children and Young People's Plan, at the first available legislative opportunity; and
- Revoke the regulations underpinning the Children and Young People's Plan and withdraw the statutory guidance on Children's Trusts, in the autumn.

The Coalition Government have revoked the 2010 regulations through The Children's Trust Board (Children and Young People's Plan) (England) (Revocation) Regulations 2010, 2010 No.2129 on 24 August 2010. The Explanatory Memorandum to the revocation states that the policy aim is to 'reduce bureaucratic burdens on local authorities and their partners and allow them to take responsibility for and develop their own innovative solutions to local problems' (para. 7.4). However, they would still have the option to produce a non-statutory plan setting out their joint strategy to improve children's and young people's well-being if they considered it appropriate for their local area (Explanatory Memorandum to Revocation of 2010 Regulations: para. 8.1). This means that Children's Trust Boards are no longer required to prepare, consult upon, publish and review a Children and Young People's Plan. While the Education Bill (2011) included a clause which proposed to remove the duty on schools to co-operate, this was taken out. The requirement for local authorities to have a Children's Trust Board however, and the wider duty to co-operate to improve children's well-being remains in force.

The make-up of the Children's Trust Board was highlighted by one interviewee in the study:

We still have [Children's Trust Board] and it's chaired by one of our cabinet members,

a senior politician, and the broad membership of that includes most of the public service agencies... from the NHS, both commissioners and provider organisations, the police, the fire service, schools, voluntary sector, and that's both local organisations and some of the bigger charities. (Director of Children's Services, England)

This interviewee emphasised that whilst a statutory basis for co-operation was important, it was, on its own, not enough. Rather, in the context of their local area, they focused more on what he described as 'the softer side of partnership working'; of identifying issues early, getting the right people around the table who needed to be involved and addressing those as early as possible and '*not rely on a statutory process or a duty or an obligation, and then try and deal with it more formally down the line.*' Thus a general desire or willingness to work together was crucial whilst the statutory process could act as a 'back up' and supportive mechanism. Placing a duty to co-operate on a statutory footing was also viewed as important in the current economic climate; a finding which was also highlighted by Northern Ireland interviewees:

There's a general worry that because of austerity and budget reductions, there's a tendency for most agencies to become quite internally focused on how they're going to respond to that, and also to almost resort to just delivering very statutory services, so they absolutely must do the legal requirements... (Director of Children's Services, England)

A study by Easton et al (2012) indicated that interviewees in their study, including with Directors of Children's Services, did not report that these changes had led to a reduction in bureaucracy. It had, however, provided an opportunity for local authorities to review their structures. All seven local authorities involved in the research had amended their Children's Trusts arrangements to different degrees. For example, some county councils kept their Children's Trust/partnership boards. Some had adapted their board to a different but similar body. Where this was the case, the name was sometimes changed; for example to the Children and Young People's Executive (CYPE); Children and Families Partnership; or Children, Young People and Family Partnership Board (Easton et al 2012). Interviewees, Easton et al report, considered regular meetings of the Children's Trusts/partnership structures to be important to its success. One local authority had, for example moved from quarterly to bi-monthly meetings.

Rationale behind joined up working

“The idea of multiagency working has been around forever. Everybody wants it for two reasons. First is about the quality of services – so the same user doesn’t have to deal with 20 different people. The second is efficiency. It costs less.” (Director of Children’s Services, England)

“...there’s two things in the main. One is a moral purpose, you know, it’s the right thing to do in terms of achieving better outcomes for children. So it’s that moral purpose around safeguarding children, protection of children. And then in addition to that there’s a kind of financial imperative, because we spend an enormous amount of money kind of dealing with the consequences of failing children”. (Director of Children’s Services, England)

Directors of Children’s Services (DCS) who participated in the present study reaffirmed some of these issues. What was common was the range of interagency partnerships that had been developed and which the DCS were involved in:

[The Director of Children’s Services] has got a leadership role around other agencies and other departments... understanding what they contribute to provide positive outcomes for children. So I chair a number of multi-agency partnerships, yeah, and contribute towards local Safeguarding Children’s Boards,... the Early Life Forum of the Health and Well-being Board, and in the main kind of advocate for kind of good outcomes for children. (Director of Children’s Services, England)

This interviewee also referred to the perceived effectiveness of ‘multi-agency safeguarding hubs’ or ‘MASH’.

I’ve got a very obvious example that would be that we have, right at the front door... where people would contact us with regards to concerns for their children we’ve got a multi-agency safeguarding hub. So it’s a single team, a single service, that has got police, health, voluntary sector, social care, early help services, all sitting round with access to their own computers and management information systems, yet they can actually kind of share intelligence about children, households, families,...parents et cetera. (Director of Children’s Services, England)

This was an area of work where there had been growing emphasis and an expectation that every local area would have a ‘MASH’ ‘and if they don’t they have to have an explanation as to what they have as an alternative to that.’ One Director of Children’s Services offered a very interesting ‘ladder’ of the types of multi-agency working that takes

place:

- Multi agency teams are established;
- Share governance arrangements;
- Share appointments;
- Knit services;
- Align action plans;
- Share staff;
- Pool budgets; and
- Merge services. (Director of Children's Services, England)

The same interviewee noted that whilst multiagency or interagency had been around for a long time, it had 'never really been cracked'. In terms of monitoring the duty to co-operate, one interviewee stated:

[T]here is internal monitoring... in terms of the kind of governance arrangements that you've got, because as well as having a statutory Director of Children's Services there's a requirement to have a lead member, so an elected member that has got some requirements.... , and that elected member's role is to hold me to account. I then report to the local Safeguarding Children's Board which is independently chaired, and then there's the usual quality assurance performance management arrangements and the kind of local indicators as well as key performance indicators at a national level, and then we have of course the joys of Ofsted. (Director of Children's Services, England)

He continued:

Ofsted judges every local area or local authority on a graded judgement from one to four, four being outstanding, three being good, two being requires improvement to be good, and one being inadequate... Of the forty-three local authorities that they've inspected to date using the current framework, that's forty-three out of a hundred and fifty-two. Forty-three that they've inspected to date, three out of four, seventy-five per cent of them, get a less than good... So against their own standards only one out of four local authorities inspected to date is good enough. (Director of Children's Services, England)

Childcare Act 2006

The Childcare Act 2006 imposed duties on local authorities to improve the well-being of young children in their area and reduce inequalities between them. It makes arrangements to ensure that early childhood services are provided in an integrated way in order to improve access and maximise the benefits of those services to young children and their parents through Children's Centres. It also placed duties on Primary Care Trusts, Strategic Health Authorities, and Jobcentre Plus (as statutory 'relevant partners' as defined in the Childcare Act) to work together with local authorities in their arrangements for securing integrated early childhood services. *The Apprenticeships, Skills, Children and Learning Act 2009* inserted new provisions into the Childcare Act 2006 so that the Act now defines Sure Start Children's Centres in law.

5.4 Approaches to Pooling Budgets

A 'pooled budget' means that different agencies contribute funds, but one host agency accounts for the money. Less formally, budgets can be aligned. This occurs when different agencies effectively keep their money in their own accounts but align the money toward agreed joint outcomes (Lorgelley et al 2009). A number of legislative examples of pooled funding are in existence in England. Section 28a of the NHS Act 1977 and Section 31 Partnership Arrangements of the Health Act 1999 enabled local authorities and NHS trusts to pool finances through legal agreements. Section 75 of the NHS Act 2006 allows the pooling of funds where payments may be made towards expenditure incurred in the exercise of any NHS or 'health-related' local authority functions. Section 75 also allows for one partner to take the lead in commissioning services on behalf of the other (lead commissioning) and for partners to combine resources, staff and management structures to help integrate service provision (integrated management or provision), commonly known as 'Health Act flexibilities'. Staff can be seconded/transferred and managed by another organisation's personnel. The Act also makes provision for the functions (statutory powers or duties) to be delivered on a daily basis by another partner, subject to the agreed terms of delegation. This legislation only applies to local authority and health partners.

Elsewhere, Section 10 of the Children Act (2004) provided additional powers allowing any of the named 'relevant partners' to pool funding. The 'relevant partners' able to pool using this power include the local authority, Primary Care Trust, Strategic Health Authority, police, probation and youth offending teams, schools and colleges and Jobcentre Plus (Lorgelley et al 2009).

Lorgelly et al (2009) highlight that in 2006, 13 out of 35 children's trust pathfinders reported having pooled budgets between children's trust partners, and 17 reported that there were plans to have additional pooled budgets in the next financial year. Fifteen pathfinders had Section 31 (Health Act 1999) partnership agreements in place, or intended to have them in place, while 23 pathfinders also had other written agreements or contracts in place. The most common policy areas where pooled budgets were in place are as follows:

Table 4: Types of Children's Services Funded through Pooled Budgets

Main type of service	Proportion of services (%)	Examples of services
Health	51	Child and adolescent mental health Substance misuse Disabled children High and complex needs Teenage pregnancy
Social care	13	Looked after children High care needs Safeguarding Children's workforce development Transition
Cross-sector initiatives	7	Integrated processes such as Common Assessment Framework Participation Joint commissioning unit
Education	6	Special educational needs Behaviour support Education psychology
Youth offending services	6	Youth offending teams/services
Early years	6	Services Multi-agency team Children's centre Sure start centre

All services for children	5	All services for children and young people
Children's fund	3	Children's fund
Connexions service	2	Connexions services

(Source: Lorgelly et al 2009)

Swindon Borough Council

The Department of Communities and Local Government 2010 (p.12) guidance highlights an example of a Section 75 agreement. Here, Swindon Borough Council and Swindon PCT entered into a formal section 75 agreement for the commissioning of services with a pooled fund for integrated services for children and young people and services for disabled children. The local authority contributed £20 million *per annum* and the PCT contributed £8 million *per annum*. The pooled budget covers the commissioning of all local authority services outside the dedicated schools grant, and community health services, child adolescent mental health services, sexual health and contraceptive services, maternity and community paediatric services. A second partnership agreement for the provision of integrated services was also entered into in April 2008. Under the partnership agreement for the provision of services, 200 members of staff from NHS Swindon have been seconded to the Council as part of integrated locality teams and an integrated service for disabled children. The guidance notes that without a comparative national study it is not possible to link pooled budgets to improved outcomes but that in Swindon there are promising signs including improved educational attainment at Key Stage 4, reduction in teenage conception rates and obesity rates.

Brighton and Hove

A second Section 31 case study identified in the literature is that of Brighton and Hove City Council. Discussions on setting up Section 31 Partnership Agreement began in 2004 and arrangements were agreed in 2006. The joint funding arrangement for staffing commenced on 1 October 2006 while a full agreement covering almost £90 million in joint funding commenced on 1 April 2007. The partners in the arrangement were: Brighton and Hove City Council, Brighton and Hove Primary Care Trust (PCT); and South Downs NHS Trust.

Services covered by the Section 31 arrangement included: fostering and adoption; child placements; SEN pupil support; school admissions and transport; school capital programme; youth and connexions; children's social care; education welfare; education psychology; community mental health; learning support; early years and childcare; play; and schools advisory service. The financial contributions to the joint funding arrangement were:

Brighton and Hove City Council: £78,976,961
Brighton and Hove PCT: £818,215
South Downs Health NHS Trust: £8,119,658

The budget setting process was managed by the Director of Children's Services. Whilst long term data on outcomes was not available, savings in management costs of £255,000 were identified in 2006 across the whole budget for integrated children's services as a result of integrated working.

Decisions were made by the Children and Young People's Trust Board and the Chief Officers Group. This group met approximately every six weeks. The purpose of this group was to provide the forum for Chief Officers from the partner organisations and key statutory stakeholders to meet and discuss strategic commissioning and strategic integrated provision issues that relate to children and their families. The Children and Young People's Plan was effectively the 'business plan' for the Children and Young People's Trust, against which performance was monitored. Decisions on partner contributions were reached through an incremental process of information sharing as each partner gradually built trust with one another at monthly meetings. Any changes in the level of contributions have to be agreed by the Chief Officers Group.

In March 2010, the Department of Communities and Local Government developed non-statutory guidance for local partners in England across sectors 'seeking better ways of working together to deliver improved outcomes for local people' (DCLG 2010).⁶ This was referred to by one NI interviewee as 'good practice'.

⁶ A number of other guidance documents have also been produced on this issue. These include: Audit Commission (October 2009) [Means to an end: Joint financing across health and social care](#). CIPFA (2009) [Pooled budgets: A practical guide for councils and the NHS](#). Audit Commission (December 2008) [Clarifying joint financing arrangements: A briefing paper for health bodies and local authorities](#). Department of Children Schools and Families (August 2007) [Better Outcomes for children's services through joint funding: A best practice guide](#).

The Department for Children, Schools and Families 'Better Outcomes' (2007) best practice guide highlights other examples of pooled budgets in local authorities in England:

- Brighton and Hove: £90 million pooled budget for all children's services with a health dimension.
- Redbridge: £47 million pooled budget for a raft of children's services, including: Special Educational Needs (SEN); pre-school home-visiting; Children's Centres; out of borough residential placements; parent partnerships and community nurses.
- Newcastle: £2 million pooled budget for residential placements outside the local authority.

Community budgeting has been a key part of the Coalition's government's decentralisation agenda. By pooling and removing ring-fences on certain funding streams, the government has aimed to allow councils and their partners the freedom to develop 'local solutions to local problems', and in turn to be held accountable locally for those solutions. Community Budgets were launched in the 2010 Comprehensive Spending Review when it was announced that sixteen pilot areas would be given direct control over local spending in their area to tackle social problems around families with complex needs. In 2011, the Department of Communities and Local Government invited expressions of interest in becoming a pilot area that would "thoroughly test out how Community Budgets comprising all funding on local public services can be implemented in two areas to test the efficacy of the approach". In December 2011, following a competitive process and discussions with local areas, the Department chose to work with four areas as local pilots: West Cheshire; Whole Essex; Greater Manchester; and the West London Tri-borough area (NAO 2013). These original pilots have since been followed by more bespoke 'Whole Place' (now 'Our Place') and neighbourhood level community budgets in thirty-three areas (Institute for Government 2015).

Early Support Programme, West Cheshire

One example of a community budget is the integrated approach to early support developed in West Cheshire. The 'Early Support' project is a five year programme which aims to deliver more co-ordinated, cost effective and tailored support to young people aged 0-19 on levels two and three on the continuum of need. The business case for the programme estimates that this project will cost £2.5 million to implement but expects to return benefits of £4 million over a four year period (Altogether Better West Cheshire 2015).

A 2013 report by the National Audit Office noted that, prior to 2011, there was limited evidence of the contribution of joint working and resource alignment to improving the impact of public services. Underpinning this was the lack of robust and evidence based evaluation available to assess the impact of the projects suggesting that clear monitoring and accountability mechanisms underpinned by good data are critical to overseeing the impact of pooled budgets (NAO 2013).

GB based interviewees in this study indicated that while they had some pooled budgets, for example with respect to some services for disabled children and young people delivered by the NHS in co-operation with the local authority, there seemed to be more 'aligning' of budgets. One Director highlighted that whilst there had been a big push around the value of pooling budgets five or six years ago, they had focused more on the alignment of budgets, describing the more formal approach of pooling budgets as being 'a bit of a sledgehammer to crack a nut'. The interviewee suggested that whilst pooling budgets may be appropriate in some areas or may lead to more innovative thinking in other areas, in this particular local authority, it was not needed as they had a clear understanding of shared outcomes, vision and strategic commissioning intentions. Working together informally and aligning budgets across agencies through existing partnership working was viewed as more beneficial:

It's always felt to us like if you were having to go down that route of formally creating a pooled budget it's more of a sign of failure of partnership working rather than a good thing.... there are a couple of examples of pooled budgets around adult services and I'm not sure, at the end of the day, it creates more flexibility or improves partnership working or outcomes..., it's just a legality about pooling a budget. If you can't achieve that by aligning things and saying "what are you spending on this?" then you're kind of falling back into the formal elements of partnership working which, as I say, we would see as a bit of a sign of failure. (Director of Children's Services, England)

Examples of pooled budgets highlighted by other interviewees included the areas of safeguarding and youth offending:

One of the pooled budgets would be the budget for the LSCB - for the local Safeguarding Children's Board, where the partnership makes contributions towards that partnership. Another one would be the youth offending service. So the...youth offending service, the multi-agency safeguarding hub and the LSCB would be three examples where we've all put money in the pot to get a shared service. (Director of

Children's Services, England)

More generally when asked about pooled budgets, some interviewees felt that this was something that was largely taken for granted in some respects and rarely thought of formally as a 'pooled budget'. For example, one interviewee stated:

I suspect that in our heads we don't really see those as pooled budgets because it's what we've always done, but actually in anyone's definition a number of agencies including the police, health, probation... fire, local authority, all stick money in the pot, and for that they get a partnership service... Probably in our psyche we don't think of it as a pooled budget, but it is. (Director of Children's Services, England)

As can be seen from this chapter, a range of approaches to cross-departmental and interagency working have been taken forward for a variety of reasons.

5.5 Benefits of Joint Working

Abbott et al (2005) report that there has been an assumption that interagency working will inevitably be a 'good thing' for families. Percy-Smith (2006) supports this view that there is a tacit or explicit assumption that partnership working will be a good thing. It would appear that there is a lot of anecdotal evidence that supports the rationale for joined up working. However, researchers have struggled with finding evidence to support improvement in outcomes. Hayes et al (2013) conducted a Cochrane systematic review to determine if collaboration leads to health improvement. Whilst arguing that collaboration between local health and local government is commonly considered best practice, the review did not identify any reliable evidence that interagency collaboration leads to health improvement. Hayes thus concluded that the evidence base was weak and more robust evaluation of these partnerships would be required. This is not to say that joint working is not effective, rather that effective measuring mechanisms need to be put in place so that this can be clearly ascertained. A number of benefits were identified from both the literature and interview findings as follows.

5.5.1 Positive outcomes

Improving outcomes came across in our interviews as the strongest reason for entering into joined up working partnerships. As one Director of Children's Services, England stated, '*[U]ltimately this is about better outcomes...*' Various articles in the literature also cited improved outcomes for patients/service users as a key benefit of joined up working

(for example, Milbourne 2003, Harris and Allen 2011, Gulland 2012, Myors 2013, Stobbe-blossey 2013).

Improving outcomes by working in partnership

“... we have group work where we’ve got parents who might be struggling because out of the blue they’ve found out that their child has got a special educational need and they don’t even understand what that means, let alone the complexity and the range of professionals that are then going to get involved in their lives over the next few years. That’s a terrifying prospect for a lot of parents, and so we’ve invested quite a bit in just very informal groups of kind of ‘meet the professionals’. So they’ll come and they’ll meet an educational psychologist, they’ll meet a health visitor, they might meet a specialist teacher in a school, and they will just understand what those roles are and what those individuals will bring to the process, and just become much more confident that if you can generate that and bring those professionals together and just demystify it, that’s the way in which the group of professionals are then working with a family, and that can get you so far, so much further forward, if you’re working jointly with the family about an issue”. (Director of Children’s Services, England)

“There was a boy aged 14/15, kicked out of house, sofa-surfing, drugs, arrested for shop lifting... prosecution would mean a six month sentence at a cost to the state of £100,000. He was expelled from school and the key worker got involved, found out he wanted to be a landscape gardener; negotiated a deal where he went to school part-time and part-time to local agricultural college. He ended up on the local Youth Forum and, in fact, was on a panel for the appointment of the director of children’s services”. (Director of Children’s Services, England)

“...the named person is basically just a professional who children will be familiar with from their everyday lives, whose job it is to, I guess to have oversight of their, of any wellbeing concerns, any issues that may come up in their lives, and make sure that the family and the child are supported in getting the right kind of, in gaining the access to the right kind of support. It’s also a way of ensuring that if there’s a number of concerns that are coming up around particular children and particular families that oversight will enable them to maybe spot if there are any child protection issues and what have you. So it’s a role that will be performed by, for the most part by health visitors, for children up to the age of five, and by teachers and kind of professionals in schools for children over the age of five. (Government Representative, Scotland)

5.5.2 Cost reduction

Many of our interviewees argued that joint working saves money:

[T]hen in the last, certainly four or five years, the motivating factor about cost reductions and making savings, and driving out inefficiencies. (Director of Children's Services, England)

Collaboration saves money

They worked out that over 4-5 years, adult social care and children's social services would exceed the council's entire budget. They got all the key services in a room and asked everyone to identify their most expensive families... They decided to pick off a few of these families (around 17) and give them each a multi-disciplinary key worker. One family in particular who were receiving 16/17 services... it was estimated that the total annual cost of this family in services was £600 000. The children had been expelled from school, involved in crime, multiple evictions. They allocated this family a key worker who got them a cooker; cleaned the garden up and resolved disputes with the neighbours; got the children back to school on a part-time time-table; enrolled the mother in a sugar craft class. The number of services went down to one or two and they estimated the savings at £500 000. One example of the saving was that there had been around 250 police call outs to the home in the previous 6 months, each involving two police officers. After the key worker got involved there were none. (Director of Children's Services, England)

For example, I heard of one case in which a child discharged from hospital required a plastic feeding tube, which cost around £2.50. The responsibility for funding this tube was disputed by health and social care organisations. By the time the case was finally settled out of court, it had cost around £20,000. (Kennedy 2010: 39)

Christensen et al (2014) makes reference to a benefit of joined up working as the maximisation of resources to improve cost-effectiveness. Pollitt (2003) argues that joint working is a better use of resources that are deemed to be scarce. Reference was made in interviews to the importance of being able to save money in the current financial climate, and thus the 'financial imperative' of joint working:

It encourages financial resilience. The oversight and commissioning processes enable budgets to be aligned even where they cannot be pooled. This is particularly important

at times of financial austerity. (Director of Children's Services, England)

5.5.3 Decision-making

There is some evidence that the diversity of manpower in joint working will improve and strength decision-making. Christensen et al (2014) explains that this diverse mix of professions, experiences and backgrounds can actually promote innovation within the partnership. Three of our interviewees specifically referred to this as a benefit of joint working in their own experience:

The multi-disciplinarity brings a clarity to the decision-making. (Director of Children's Services, England)

I think the key benefits of joined up working are different perspectives on the same sets of challenges and different perspectives means it's more likely to get a solution to particularly difficult challenges... the solutions may require different agencies, different partners, to pull together, and sometimes by pulling together you can achieve much more than if you just did things on your own in an unco-ordinated way. (Government Representative, Scotland)

[W]e rethink things by having a different group of people sat around a table trying to resolve an issue and thinking more innovatively about it. (Director of Children's Services, England)

5.5.4 Other benefits

Other benefits include the reduction of duplication of tasks (i.e. utilising a shared assessment) and improved inter-agency and staff-patient communication (Christiansen and Roberts, 2005). One of the interviewed Director of Children's Services felt that an important benefit of joined up working was time:

It saves time. Although time is spent in meetings and building relationships, more time would be spent chasing up the independent services looking for answers to questions. (Director of Children's Services, England).

Chapter 6: Challenges and facilitators of joint working

6.1 Overview

The concept of joint working has been criticised as something that is, at times, lacking in ‘joined up thinking’ (MacCarthaigh and Boyle 2011). Working in collaboration with others can often present a particular set of concerns and challenges that must be navigated successfully in order to achieve effective practice. As such there are numerous challenges involved with setting up and maintaining joined up working practices. Researchers have been writing papers to share theoretical and practical advice which aim to prevent other collaborations from failing. This chapter will summarise the key challenges cited in the literature. Also reflected upon are the reported challenges around joint working given by interviewees in other jurisdictions. This chapter will also explore strategies devised to overcome potential barriers and examine best practices to aid effective working. These challenges and facilitators will be discussed in terms of three contextual structures: *macro level factors*, *meso structures* and *micro level barriers*.

6.2 Macro level factors

A macro level factor has been described by Stuart (2014) as the practice frameworks, policy documents and structures that mandate and govern service provision.

6.2.1 Macro level barriers to joint working

Specific challenges have been raised around macro level factors such as political leadership, fragmented government, political conflict, top-down approaches and external pressure to implement change quickly. Each of these macro level factors can represent significant challenges to successful implementation of joint working. Collaboration between, for example, local health and local government is commonly considered best practice (Hayes et al 2013). **Political leadership** can pose a real threat to the success of any collaboration as:

Effectively, its success is about building relationships and good leadership and that can be a challenge if politicians (in local authorities) and those in leadership change and those coming in want to renegotiate. (Director of Children’s Services, England)

Indeed, as the political landscape is constantly evolving and leadership regularly changes, frustration sets in that can negatively impact on collaboration as the interviewee below

explains:

That kind of constant flux and change around all that and then understanding who you're talking to and what kind of, what they're sphere of influence is quite frustrating, because it almost feels like you're kind of coming back to the starting point every time. (Director of Children's Services, England)

An important side effect of leadership change is that it can bring with it a change in priorities which can be difficult for some partnerships to see the benefit of doing this. However a policy change will mean that new standards must be adhered to even if it is against their will.

And again I think some of that is inevitable, that's policy change, there's just, some of them are forced to do that when they even don't really want to do that because it's a political imperative, the academy programme. (Director of Children's Services, England)

This can create tensions when organisations have to implement a framework that they do not understand (Darlington et al 2005) or perhaps do not even want.

Political leadership has major ramifications in Northern Ireland as it has been recognised that a devolved government accentuates the potential for **fragmentation** in service delivery which is further hampered by societal divisions (Knox 2015). Knox (2015) also notes that Northern Ireland currently has a disjointed approach which is hindered by a large number of councils and departments, along with a five party coalition. In this setting, cross departmental groups have often had difficulties in maintaining group membership which leads to situations whereby the group are not empowered to provide commitments on behalf of their departments (Knox 2015). Indeed, it is a recognised difficulty that collaborating successfully when working with different cultures, tasks and professions can be challenging (Christensen et al 2014) even without the difficulty of societal divisions.

Bringing in policies using a **top down approach** was another challenge highlighted by the literature and in our interviews. This type of 'externally directed change' has been interpreted as unhelpful as adapting work and practice is a complicated task, and if there is a perception that past experience suggests that the policy will change, staff may become frustrated and 'distrustful' of policies devised in this way (Carey et al 2015). One of our interviewees discussed the challenge of working with top-down policies:

[T]here are times when it makes sense for the national government and for local government, or for local stakeholders, if you will, to work together to find national solutions. It's kind of easier when you can put all the local stakeholders in a room together and you can speak to them to find a kind of common solution. It's much more difficult when there are so many different regions, so many different stakeholders that it becomes difficult for the national level and the regional, the local level if you will, to work together so easily. (Director of Children's Services, England)

Researchers have noted that top-down approaches find it difficult to filter down to and gain constructive co-operation in lower levels of networks to generate change (Carey et al 2015). Stuart (2014) interviewed practitioners and reported that:

The real work is to connect leaders with the ground, their strategy needs to be rooted in the reality of the front line, or nothing will ever work. (Stuart 2014: 5)

It is for this reason that purely top-down approaches are not recommended (Keast 2011). Carey et al (2015) also notes that this approach can cause staff to suffer from reform fatigue which can negatively impact not only that particular policy but also future reform efforts. Indeed, top-down approaches could actually prohibit integration at local level by reducing flexibility in how resources and funding could be used (Moran 2011).

Davies (2009) and Flinders (2002) argue that **political value conflicts** can negatively impact collaboration by promoting 'silos'. These silos can block or prevent necessary legislative change.

When changes have been deemed necessary there can often be a great amount of **external pressure** for agencies to implement the changes and show results as quickly as possible. Callaly et al (2011) writing about the Australian headspace initiative reported this as being a major challenge that they faced in service integration. It is clear from the literature that deep-seated change takes time to achieve and that the longitudinal nature of such change should be respected and recognised.

6.2.2 Macro level facilitators and strategies to enable effective joint working

Carey et al (2014) visualise a fruitful joined up government to have adequate high level political support or **mandate**, and **strong leadership style** as a vital component. This should create a supportive environment whereby the purpose and the context would be

compatible, ensuring that all actors understand, believe in and support the idea (Milbourne et al 2003, Fimreite et al 2013). Strong leadership should recognise and expect that conflict will occur and devise ways to effectively manage (Callaly et al 2011). This style of leadership should encourage a supportive architecture wherein success can be achieved (Carey et al 2014) and be concerned with *‘diplomacy rather than command and control’* (Director of Children’s Services, England).

One of our interviewees felt that the best way to avoid the challenges associated with top-down approaches was to **facilitate informal face-to-face conversations** with the partners to address potential issues as early as possible:

But the way we work in [local authority] is that we very rarely enact a kind of ‘thou shalt co-operate with us because we’re doing this’. [T]he basis of co-operation and working together is because there’s a general desire to work together and there’s a willingness, and we place quite a bit of emphasis in [local authority] on some of the softer side of partnership working. So let’s identify something early, let’s get around a table with people who need to be involved, because there might be some conflicts or different views about it, and let’s try and address those as early as possible in the process and, you know, not rely on a statutory process or a duty or an obligation, and then try and deal with it more formally down the line.... So early planning, early conversations, the value of those relationships, to hit on those things quite early. (Director of Children’s Services, England)

Indeed the interviewee felt that this informal process was the key to succeeding in collaborative methods:

Getting around the table, working out whether it is an issue, can it be solved informally, does it need to be escalated through the more formal structures? That’s the genuine value of multi-agency and cross-party working. If you can get to that and people are willing to share their concerns without being defensive about it, that’s the real value about creating multi-agency working and accountability, because you’re holding each other to account then rather than relying on a structure. (Director of Children’s Services, England)

Two of the interviewees pointed out that the **size and scale of government** could be a facilitator as the smaller size of the Northern Ireland government could help to ease the burden of joined up working:

In Scotland we have thirty-two local authorities, something like fourteen health boards, one police force. It's a lot easier to pull all these folks into a room to sit down ... and then you can get that good national, local co-operation going. In a place like, for example, England where, you know, the number of local authorities is much greater, police forces et cetera, it's much more difficult to develop those kind of common nationwide solutions in co-operation. (Government Representative, Scotland)

I think you've got a real benefit in terms of your, the size of your country.... kind of the size that will get most bang for your buck, and I think Northern Ireland has got that potential in terms of kind of the culture of the country, the size of the country, the locality of the country, a shared past. And I know you've got your challenges but I do think there is some real benefits from that, that community and identity. (Director of Children's Services, England)

Other facilitators, as suggested by McHugh et al (2013), include **investment in infrastructure, adequate remuneration** to allow for development and implementation, and the **appointment of cross-cutting ministers** who would take responsibility for key cross-cutting objectives (Gash et al 2008).

6.3 Meso structures

Meso structures are the organisational and policy structures that can be overt and/or covert (Stuart 2014).

6.3.1 Meso structural barriers to joint working

The most common barrier reported in the literature and discussed in interviews was **budgets**. Funding has been identified as a major barrier, particularly during the early stages of collaboration (Clarke and Dahl 2005). Insufficient budgets and silos and restrictions on how it is being spent can also create difficulties (Bachmann 2006, Campbell 2013). Harvey et al (2015) acknowledge that resources are a particular issue in times of fiscal austerity. This was something that our interviewees agreed with:

And in a time when people really feel the pressure for, you know, particularly on budgets and resources, it becomes a lot -, the temptation to focus just on managing your own individual sets of responsibilities and not to think about partnership, not to think in co-operation, becomes very strong, and therefore one of the challenges is to

be able to rise above that, to see, if you will, the common good that needs to be addressed, rather than just what, you know, your own particular agency needs to focus on. That's probably one of the biggest ones. (Government Representative, Scotland)

...the key challenge is that all agencies are facing kind of austerity measures and therefore kind of, you know, with some of the things that one might see as bringing added value to partnership, like joint training and stuff, and early help services, are often the first things that would take a cut. (Director of Children's Services, England)

The time and effort that it takes to establish the positive working relationships necessary for collaboration can represent a challenge when there are unrealistic **time pressures** to adhere to (Milbourne et al 2003). Callaly et al (2011) argue that **gate-keeping** is a significant barrier as agencies conserve scarce resources and resist work that would be likely to place high demands on staff. Gate-keeping is also likely to affect agency communication. **Lack of communication between agencies** is another barrier at the meso structure level that affects joint working (MacCarthaigh and Boyle 2011, Stuart 2014). Stuart (2014) notes that dialogue is key and works best when everyone has a voice. When organisations and agencies collaborate they must ensure that they do not have **competing agendas**. Competing agendas were reported as a barrier in the Australian headspace programme (Callaly et al 2011).

The above barriers can be magnified when a collaboration has **weak leadership**. Karre et al (2013) believes that this is one of the main reasons why joint working often fails. Weak leadership includes issues such as lack of ownership among managers; inflexible structures and poor understanding of professional roles and responsibilities (Horwarth and Morrison 2007).

Finally **accountability** and **monitoring** have been noted in the literature as potential barriers. Working across boundaries can lead to blurred accountability (Karre et al 2013) and these blurred lines of accountability can create greater difficulty when measuring effectiveness and impact as more sophisticated performance measurement systems will need to be created (Pollitt 2003, Miller and Cameron 2011). The Scottish government representative that we interviewed agreed that monitoring and accountability was a challenge:

So there are challenges in terms of when you're doing something new and there isn't an existing performance framework ... level and there isn't existing data systems for

measuring how things are going you need to put that sort of thing in place, and that's stuff that comes with time. (Government Representative, Scotland)

6.3.2 Meso structure facilitators and strategies to enable effective joint working

A **strong leadership** is required to facilitate agencies and organisations moving forward in partnership (Callaly et al 2011). One Director of Children's Services discussed the need for strong and strategic leaders:

Yeah I think if everyone is agreed, well strategic leadership's important. So if you're going to get, if you're going to drive change between different agencies and services then that's the essential bit there. The heads of those agencies and services are, recognise this as a priority and put their weight behind kind of joint working and co-operation. While it's good that it can maybe happen at operational level it's essential that there's a shared vision and a shared commitment to making it happen at senior level. So that's important. (Government Representative, Scotland)

Also important is having a **clear shared vision** (Rose 2011, Black 2012) whereby the principles and strategies for collaborative work are to be agreed by those working together (Rose 2011). But it was noted that '*a lot of work needs to be invested in getting people to buy into a common vision*' (Government Representative, Scotland).

Developing and maintaining relationships across the partnership seem to be a very important key facilitator (Callaly et al 2011). After all, '*Partnership is like a skill; the more you do it the better at it you are*' (Government Representative, Scotland). **Interagency training** can facilitate the development of these relationships and planned collaborators should provide this training to allow their staff to succeed. Investing in this training is an essential ingredient for effective relationships (Charles and Howarth 2009). A Director of Children's Services in England explained their approach to training in breaking down professional barriers:

...we have focused quite a lot on cross-agency training programmes rather than single-agency training programmes. So we will bring together, and offer as a collective piece ... around child safeguarding or healthy eating or healthy weight or whatever, and then you get the health professionals to come in and train and educate education professionals and vice versa, and the more you can, so we, and we use kind of individuals rather than buying it in from a specific training provider. Use the expert from

the health sector to come in but specifically ask them to go in and do some work for education professionals and in schools, and vice versa. And if you can get some of that activity going, not only are you breaking down the barriers between professionals but you're also kind of generating those connections all the way down those organisations, that, that's where the ideas come from really, about the kind of, you know, the informal discussions about "what do you do, what do I do, how do we work together a bit more?" and, you know, just knowing, seeing those people, seeing them on the ground, seeing that they are professionals but they're also human and they're always trying to do. (Director of Children's Services, England)

One of our interviewees, a Director of Children's Services in England believed that the key to success in joined up working was developing a new role that was dedicated to interdisciplinary working:

What is needed are 'interdisciplinary workers'. These could be drawn from many professions (social workers, youth workers, police, and teachers). They need to be 'forceful, people-skilled and tenacious'. They also need a degree of authority to get things lined up. (Director of Children's Services, England)

When problems do occur, it was felt that the best way of resolving matters was through the utilisation of **informal communication structures**:

But the best way to resolve most things is to sit around a table and discuss it as mature partners in the system. Yeah, definitely I would say that it's about the relationships more than the structures. (Director of Children's Services, England)

And that one way to resolve matters would be to always remember what you are trying to achieve:

I think for me it's always, if you can remind yourself about that outcome, 'is this the right thing for those children and young people?' and just test yourself on that, and if everybody holds themselves to account on that in a very informal way, you avoid some of the difficulties that then might need to be escalated through more formal governance arrangements. (Director of Children's Services, England)

6.4 Micro level factors

Micro level factors refer to the day-to-day practical issues that can represent a challenge to successful implementation.

6.4.1 Micro level barriers to joint working

A variety of micro level barriers were reported in the interviews and discussed in the literature. A number of authors raised the concern that a major barrier to collaboration was the failure to recruit and retain staff (for example, Bachmann et al 2006, Forbes 2009, Scharf et al 2013). Working in collaboration, for some, can be an entirely new way of working and there can be issues around lack of information, intelligence and resource sharing (Richardson and Asthana 2006, Akinson et al 2007). This can lead to cases whereby professionals do not know what to do due to this lack of information sharing. Harvey et al (2015) cites an example of a 'teacher facing a situation of a child being removed from the country for a forced marriage not knowing who to contact and this was quite obviously outside their remit' as an example of what can happen when there is a failure to share information and knowledge.

Communication, or lack thereof can be a major barrier particularly where professionals and agencies working in different areas have to learn new jargon (Bachmann et al 2009) and understanding the professional processes and time constraints that others may be working under (Myors et al 2013, Stuart 2014). In the workplace where professionals are joining together from different organisational cultures, it is somewhat inevitable that **clashes** can occur (Clarke and Dahl 2005) particularly where there is a culture of distrust between organisations (Howes et al 2015). **Role dilemmas** arise where professionals feel that their expertise and knowledge is not valued (Rose 2011) and can be equally damaging. Another challenge occurs when areas of responsibility are not clear (Clarke and Dahl 2005, Harvey et al 2015). The **increase of administration and bureaucracy** can present a large challenge to staff. Stuart (2014) found that staff reported increased administration as an issue that only added to the time pressures and workload that they faced, however a statutory duty to co-operate was not perceived as a significant issue in this context by interviewees in the study.

Another barrier faced by staff working in collaboration with other agencies is the fear of losing their **professional identity**, responsibility or skills (Bachmann et al 2009). One of the interviewees agreed this was a barrier stating:

*..they just kind of fester ... [views such as] ‘they’re not as **professional** as us, they’re not as qualified as us’, all of those kinds of things tend to come to the fore. ‘They don’t know anything about education’, ‘they don’t know anything about health’, whatever.
(Director of Children’s Services, England)*

Other issues cited in the literature include **staff buy-in, morale issues** and **resistance to change** (Callaly et al 2011).

6.4.2 Micro level facilitators and strategies to enable effective joint working

There were a few strategies at the micro level that were thought to enable joined up working. These included building effective teams; maintaining communication; allowing flexible/informal workarounds; encouraging effective integration and making services accessible to partner organisations. **Maintaining communication** and **building effective teams** was something that Gulland (2012) acknowledged to be a challenge but not an insurmountable one “We had a common purpose, but how do we work together? It took a while for us to bond as a team. But we have a team day every week and we have lunch—I try to make sure it’s fun”. Maintaining that level of communication throughout the course of the partnership will help to achieve success (Myors et al 2013). Brewah (2013) felt that making services accessible ‘24/7’ would facilitate a successful collaboration. Several papers mentioned the need to maintain informal workarounds to allow for ad-hoc meetings of various frequencies, alongside formal agenda meetings and using telephone calls and emails to disseminate knowledge and to discuss issues (Campbell 2013, Farrington et al 2015, Knowles et al 2013). One of the Directors of Children’s Services who was interviewed felt that:

The structures are there if things go really badly wrong and you are then kind of publically accountable for how you deal with things. But things do go wrong and the best way to resolve them is to deal with it informally through the networks and the arrangement and the relationships that you build with partners. (Government Representative, Scotland)

Key points to consider when planning service integration

It is important that health and local government leaders are clear about:

- What they are trying to achieve for local people;
- What partnership options exist to help achieve this;
- Why the partnership arrangements that they adopt are the best way of achieving desired outcomes; and
- Whether the proposed partnership is worth it (given the potential for a temporary reduction in staff morale, the amount of management time it will consume etc).

(Glasby 2012)

Chapter 7: Conclusion

7.1 Overview

This final section provides an overview of the key findings and messages that emerged across the study. The report provides evidence of a range of approaches to cross-departmental and interagency working which have been adopted with respect to children and young people, with a particular focus on the UK context. It is an overview of some of the key approaches which have developed and which have featured heavily both in the literature and in the broader policy arena via those who participated in the study.

7.2 Key Messages

Effective implementation of the CRC requires government to review existing structures and adopt effective ways of co-ordinating and co-operating to improve outcomes for children. This has been consistently reaffirmed by the Committee throughout its observations. The Children's Services Co-operation Bill in the Northern Ireland Assembly is therefore a timely opportunity to consider such endeavours and to address a key obstacle to effective government delivery for children and young people. A statutory duty to co-operate is perceived to be a positive way forward by many professionals here for a variety of reasons. For example, in facilitating consistency of approach and a more coherent and holistic approach to services for children and young people; allowing a more timely identification of, and response to, support needs; reducing unnecessary duplication of policy actions or service provisions; enabling more efficient use of resources; and ultimately in improving outcomes for children and young people and their families. Indeed the evidence highlighted in this report suggests that a statutory requirement to co-operate is important in enabling the benefits to be accrued from joint working to become encompassing of more children and young people. Significantly, it can enable existing pockets of good practice to become the 'norm' for children and young people and their families across interagency and cross-departmental strategies, in the planning, commissioning and delivery of children's services and provisions, and in the planning and management of pooled budgets. Ultimately, a statutory requirement to co-operate shifts the primary focus from '**whether**' or not joint working should take place, to '**how**' it should operate, and, ultimately, to '**assessing the impact**' of such working on outcomes for children and young people and their families.

Nonetheless, there are several concerns going forward which need to be taken into consideration so that identified benefits can be practically accrued. These include: the risk of excessive reporting mechanisms; competing agendas; difficulties in effectively monitoring and measuring outcomes; and the logistical challenges associated with developing co-operation; as well as concern that the Bill would be considered in isolation from other policy development such as the emergence of community planning in Northern Ireland and the reduction in the number of government departments. However, experience elsewhere indicates that these issues are not insurmountable and there is much to be gained from consistent and robust attempts at joint working. These include an identified reduction in duplication of tasks; reduction in costs; the development of innovative solutions; and more effective and tailored support provisions for children and young people and their families with perceived associated positive outcomes.

However, for joint working to be developed and adopted effectively via a legislative duty, a number of issues need to be considered carefully and explicitly addressed. These can be understood as constitutive of ‘**scaffolding**’ or ‘**supportive architecture**’. Specifically, there is a need for:

- A **clear mandate** and **leadership**.
- A **shared vision** and a sense of **shared ownership** among all involved in the development and outworkings of the legislation.
- The development of systematic and shared **training** on the adopted legislation and its implications for policy, service delivery and practice for all those upon whom anticipated duties will fall.
- The development of **guidance** to accompany legislation, both in the context of joint working generally and pooled budgets specifically. This could include examples of best practice.
- Clear and effective **communication** structures.
- Clarity on the kinds of **information/data** that need to be collected to allow effective monitoring to take place.
- A common means of **information sharing**.
- The development of a concise **reporting template**.
- Clearly defined **monitoring** and **accountability lines**.

- **Outcomes based monitoring** and ongoing evidence-based **impact evaluation**; that is, measuring not just the kinds of and extent of joint working that is taking place, but the impact of such joint working on outcomes for children and young people and their families.

A time and space for enabling conversations to take place and relationships to develop is crucial in developing the sense of shared ownership required. There are many existing pockets of good practice which can be built upon. Having a close eye to not only the ways in which joint working is taking place and being achieved but, crucially, on how identified outcomes can be robustly measured must be carefully considered. Finally, it is important to recognise that achieving a positive causation between co-operation and impact on outcomes is not an overnight task, but one that necessitates sustained and considered action if children and young people are to experience long term gain.

In summary, the Children's Services Co-operation Bill is an important opportunity to consider how stakeholders across Northern Ireland at all levels can work together to improve outcomes for children and young people. This report provides an evidence base to guide that discussion.

References

- Abbott, D., Watson, D. and Townsley, R. 2005, The proof of the pudding: What difference does multi-agency working make to families with disabled children with complex health care needs?, *Child and Family Social Work*, vol. 10, no. 3, pp. 229-238.
- Bachmann, M.O., O'Brien, M.F., Husbands, C.F., Shreeve, A.F., Jones, N.F., Watson, J.F., Reading, R.F., Thoburn, J.F. and Mugford, M. 2006, *Integrating children's services in England: national evaluation of children's trusts*.
- Bachmann, M.O., Reading, R.F., Husbands, C.F., O'Brien, M.F., Thoburn, J.F., Shemilt, I.F., Watson, J.F., Jones, N.F., Haynes, R.F. and Mugford, M. 2009, *What are children's trusts? Early findings from a national survey*.
- Basingstoke, UK. Harker, R.M., Dobel-Ober, D., Berridge, D. and Sinclair, R. 2004, More than the sum of its parts? inter-professional working in the education of looked after children, *Children and Society*, vol. 18, no. 3, pp. 179-193.
- Black, K. 2012, *Building new knowing? The case of multi-agency working within Children's Services in England. Working paper submitted to the 'Organisational learning in HRD in 2020' conference stream at 13th International Conference on Human Resource Development Research and Practice across Europe*, Universidade Lusíada de Famalicão, Europe.
- Brewah, H. 2013, *Integrated health care for patients with motor neurone disease*. British Journal of Nursing, Vol 22, No 20.
- Callaly, T., von Treuer K FAU,- van Hamond, van Hamond, T.F. and Windle, K. 2011, *Forming and sustaining partnerships to provide integrated services for young people: an overview based on the headspace Geelong experience*. *Early Intervention in Psychiatry* 2011; 5 (Suppl. 1): 28–33.
- Campbell, D., 2012, Public Managers in Integrated Services Collaboratives: What Works Is Workarounds, *Public administration review*, vol. 72, no. 5, pp. 721-730.
- Carey, G., Crammond, B. and Keast, R. 2014, Creating change in government to address the social determinants of health: how can efforts be improved?, *BMC Public Health*, vol. 14, no. 1, pp. 1087.
- Carey, G., Crammond, B. and Riley, T. 2015, Top-Down Approaches to Joined up Government: Examining the Unintended Consequences of Weak Implementation,

International Journal of Public Administration, vol. 38, no. 3, pp. 167-178.

Charles, M. and Horwath, J. 2009, Investing in Interagency Training to Safeguard Children: An Act of Faith or an Act of Reason?, *Children and Society*, vol. 23, no. 5, pp. 364-376.

Christensen, T., Fimreite, A. and P. Læg Reid, P. 2013, *Joined up Government: Reform Challenges, Experiences and Accountability Relations*, COCOPS Working Paper No. 9, Norway.

Christensen, T., Fimreite, A. and Læg Reid, P. 2014, Joined up Government for Welfare Administration Reform in Norway, *Public Organization Review*, vol. 14, no. 4, pp. 439-456.

Christiansen, A. and Roberts, K. 2005, Integrating health and social care assessment and care management: Findings from a pilot project evaluation. *Primary Health Care Research and Development*, vol. 6, no. 3, pp. 269-277.

Clarke, L. and Dahl, S. 2005, *Multi-agency Working in Sure Start Coventry North (Foleshill)*, University of Warwick, UK.

Darlington, Y., FAU, F.J. and Rixon, K. 2005, *Interagency collaboration between child protection and mental health services: practices, attitudes and barriers*. *Child Abuse and Neglect* 29 (2005) pp. 1085–1098.

Davies, J. 2009, The limits of joined up government: Towards a political analysis. *Public Administration*, vol. 87, no. 1, pp. 80-96.

Easton, C., Hetherington, M., Smith, R., Wade, P., Aston, H. and Gee, G. 2012, *Local Authorities' Approaches to Children's Trust Arrangements (LGA Research Report)*, NFER, Slough.

Eden, C. and Ackermann, F. 2014, 'Joined up' Policy-Making: Group Decision and Negotiation Practice, *Group Decision and Negotiation*, vol. 23, no. 6, pp. 1385-1401.

Farrington, C., Clare, I.C.H., Holland, A.J., Barrett, M. and Oborn, E. 2015, Knowledge exchange and integrated services: experiences from an integrated community intellectual (learning) disability service for adults, *Journal of Intellectual Disability Research*, vol. 59, no. 3, pp. 238-247.

Flinders, M. 2002, Governance in Whitehall, *Public Administration*, vol. 80, no. 1, pp. 51-75.

Forbes, J. 2009, Redesigning children's services: mapping interprofessional social capital, *Journal of Research in Special Educational Needs*, vol. 9, no. 2, pp. 122-132.

- Gash, T., Hallsworth, M., Ismail, S. and Paun, A. 2008, *Performance art: Enabling better management of public services*, Institute for Government, London.
- Glasby, J., Dickinson, H. and Miller, R. 2011, Partnership working in England-where we are now and where we've come from, *International journal of integrated care*, vol. 11 Spec Ed, pp. e002.
- Grace, M., Coventry, L.F. and Batterham, D. 2012, *The role of interagency collaboration in joined up case management*. *Journal of Interprofessional Care*, 26: 141–149
- Gulland, A. 2012, Joined up working: introducing the best teams of the year, *BMJ (Clinical research ed.)*, vol. 344, pp. e2328.
- Ham, C. 2004, *Health Policy in Britain*, 5th edn. Palgrave Macmillan.
- Harris, A. and Allen, T. 2011, Young people's views of multi-agency working, *British Educational Research Journal*, vol. 37, no. 3, pp. 405-419.
- Harvey, J.H., Hornsby, R.A. and Sattar, Z. 2015, Disjointed Service: An English Case Study of Multi-agency Provision in Tackling Child Trafficking, *British Journal of Criminology*, vol. 55, no. 3, pp. 494-513.
- Hayes, S.L., Mann, M.K., Morgan, F.M., Kelly, M.J. and Weightman, A.L. 2012, Collaboration between local health and local government agencies for health improvement, *The Cochrane database of systematic reviews*, vol. 10, pp. CD007825.
- HM Inspectorate of Education (2004) The sum of its parts? The development of integrated community schools in Scotland. Edinburgh: HMIe.
- Horwath, J. and Morrison, T. 2007, Collaboration, integration and change in children's services: critical issues and key ingredients, *Child abuse and neglect*, vol. 31, no. 1, pp. 55-69.
- Howes, M., Tangney, P., Reis, K., Grant-Smith, D., Heazle, M., Bosomworth, K. and Burton, P. 2015, Towards networked governance: improving interagency communication and collaboration for disaster risk management and climate change adaptation in Australia, *Journal of Environmental Planning and Management*, vol. 58, no. 5, pp. 757-776.
- Karatekin, C., Hong, S., Piescher, K., Uecker, J. and McDonald, J. 2014, An evaluation of the effects of an integrated services program for multi-service use families on child welfare and educational outcomes of children, *Children and Youth Services Review*, vol. 41, no. 0, pp. 16-26.

- Karré, P.M., Van, d.S. and Van Twist, M. 2013, Joined up Government in The Netherlands: Experiences with Program Ministries, *International Journal of Public Administration*, vol. 36, no. 1, pp. 63-73.
- Keast, R. 2011, Joined up Governance in Australia: How the Past Can Inform the Future, *International Journal of Public Administration*, vol. 34, no. 4, pp. 221-231.
- Kennedy, I. 2010, *Getting It Right for Children and Young People—Overcoming Cultural Barriers in the NHS so as to Meet Their Needs*, Department of Health, London.
- Knowles, S.E., Chew-Graham, C., Coupe, N., Adeyemi, I., Keyworth, C., Thampy, H. and Coventry, P.A. 2013, Better together? a naturalistic qualitative study of inter-professional working in collaborative care for co-morbid depression and physical health problems, *Implementation science : IS*, vol. 8, pp. 110-5908-8-110.
- Knox, C. 2015, Sharing power and fragmenting public services: complex government in Northern Ireland, *Public Money and Management*, vol. 35, no. 1, pp. 23-30.
- Lorgelly, P., Bachmann, M., Shreeve, A., Reading, R., Thorburn, J., Mugford, M., O'Brien, M. and Husbands, C. 2009, Is it feasible to pool funds for local children's services in England? Evidence from the national evaluation of children's trust pathfinders, *Journal of Health Services Research and Policy*, vol. 14. no.1 pp. 27–34.
- Lundy, L., Byrne, B. and McKeown, P. 2012, *Transitions to Adult Services for Young People with Learning Disabilities in Northern Ireland; Transitions to Adult Services for Young People with Learning Disabilities in Northern Ireland*, Northern Ireland Commissioner for Children and Young People.
- MacCarthaigh, M., Boyle, R. 2011, Joined up government in Ireland, *International Journal of Public Administration*, vol. 34, no. 4, pp. 213-220.
- Marinetto, M. 2011, A Lipskian analysis of child protection failures from Victoria Climbié to Baby P: a street-level re-evaluation of joined up governance, *Public administration*, vol. 89, no. 3, pp. 1164-1181.
- Mc Hugh, S., O'Mullane, M., Perry, I.J. and Bradley, C. 2013, Barriers to, and facilitators in, introducing integrated diabetes care in Ireland: a qualitative study of views in general practice, *BMJ Open*, vol. 3, no. 8.
- Milbourne, L., Macrae, S. and Maguire, M. 2003, Collaborative solutions or new policy problems: exploring multi-agency partnerships in education and health work, *Journal of Education Policy*, vol. 18, no. 1, pp. 19-35.

Miller, E. and Cameron, K. 2011, Challenges and benefits in implementing shared inter-agency assessment across the UK: a literature review, *Journal of interprofessional care*, vol. 25, no. 1, pp. 39-45.

Moran, N., Glendinning, C. and Stevens, M., Manthorpe, J., Jacobs, S., Wilberforce, M., Knapp, M., Challis, D., Fernandez, J-L., Jones, K. and Netten, A. 2011, Joining up government by integrating funding streams? The experiences of the Individual Budget pilot projects for older and disabled people in England, *International Journal of Public Administration*, vol. 34, no. 4, pp. 232-243.

Myors, K.A., Schmied, V., Johnson, M. and Cleary, M. 2013, Collaboration and integrated services for perinatal mental health: an integrative review, *Child and Adolescent Mental Health*, vol. 18, no. 1, pp. 1-10.

NAO, 2013. *Case study on integration: Measuring the costs and benefits of Whole-Place Community Budgets*, DCSF, London: The Stationery Office.

NAO. 2001. *Joining Up to Improve Public Services*. Report by the Controller and Auditor General. London: The Stationary Office.

Owen, S. 2010, *An introductory guide to the key terms and interagency initiatives in use in the Children's Services Committees in Ireland*, CES Ireland.

Painter, K. 2012, Outcomes for youth with severe emotional disturbance: A repeated measures longitudinal study of a wraparound approach of service delivery in systems of care, *Child and Youth Care Forum*, 41 pp. 407-425.

Percy-Smith, J. 2006, What Works in Strategic Partnerships for Children: a Research Review, *Children and Society*, vol. 20, pp. 313-323.

Pollitt, C. 2003, Joined up Government: a Survey, *Political Studies Review*, vol. 1, no. 1, pp. 34-49.

Richardson, S. and Asthana, S. 2006, Inter-agency Information Sharing in Health and Social Care Services: The Role of Professional Culture, *British Journal of Social Work*, vol. 36, no. 4, pp. 657-669.

Rose, J. 2011, Dilemmas of Inter-Professional Collaboration: Can they be Resolved?, *Children and Society*, , pp. 151-163.

Scharf, D.M., Eberhart, N.K., Schmidt, N., Vaughan, C.A., Dutta, T., Pincus, H.A. and Burnam, M.A. 2013, Integrating primary care into community behavioral health settings: programs and early implementation experiences, *Psychiatric services (Washington, D.C.)*,

vol. 64, no. 7, pp. 660-665.

Scottish Office (1998) *New Community Schools: The Prospectus*.

Stöbe-Blossey, S. 2013, Implementation of integrated services – the example of family centres in North Rhine-Westphalia, *Early Years*, vol. 33, no. 4, pp. 354-366.

Stuart, K. 2014, Collaborative agency to support integrated care for children, young people and families: an action research study, *International journal of integrated care*, vol. 14, pp. e006.

United Nations, (2003) *Vienna Declaration and Programme of Action*.

United Nations Committee on the Rights of the Child (2008) *Concluding Observations of the Committee on the Rights of the Child: United Kingdom of Great Britain and Northern Ireland/* (UN Doc. CRC/GBR/C0/4), Geneva: United Nations.

United Nations Committee on the Rights of the Child, (2003a), *General Comment No. 5 (2003) Implementation* UN/CRC/GC/2003/1. (Geneva: United Nations, 2003).

United Nations Committee on the Rights of the Child, (2003b), *General Comment No. 4 (2003) Adolescent Health* UN/CRC/GC/2003/4. (Geneva: United Nations, 2003).

United Nations Committee on the Rights of the Child, (2006), *General Comment No. 7 (2006) Rights of Children in the Early Years* UN/CRC/GC/7. (Geneva: United Nations, 2006).

United Nations Committee on the Rights of the Child, (2006), *General Comment No. 9 (2006) The Rights of Children with Disabilities* UN/CRC/GC/9. (Geneva: United Nations, 2006).

United Nations Committee on the Rights of the Child, (2007), *General Comment No. 10 (2007) Children's Rights in Juvenile Justice* UN/CRC/GC/10. (Geneva: United Nations, 2007).

United Nations Committee on the Rights of the Child, (2013), *General Comment No. 14 (2013) Best interests of the Child* UN/CRC/GC/14. (Geneva: United Nations, 2013).

UN Human Rights Council, (2015) *Resolution: "Towards better investment in the rights of the child"*. Geneva, United Nations.

