Implementing Services Integration and Interagency Collaboration: Experiences in Seven Counties

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This study discusses how human service agencies implemented systems to improve service coordination through structural integration or interagency collaborative service delivery systems. Findings identified integration and change leadership principles, including clear processes to implement a powerful vision, a strongly committed executive team, stakeholder involvement, and aggressive marketing of the goals.

Keywords: change leadership, collaboration, organizational change, services integration, structural integration

INTRODUCTION

In recent years, human service organizations have come under increasing pressure from policy makers, funders, community members, and other stakeholders to improve the quality and cost-effectiveness of services and the management systems that support them. This has been sparked by the increase in budget shortfalls and multi-problem clients, who often receive services from workers in different organizations (e.g., child protection, income maintenance, and behavioral health). One approach to these concerns has been to achieve more coherent and effective human service systems through services integration and coordination (Austin, 1997; Jones, Crook, & Webb, 2007). Goals have included finding ways to reduce fragmentation and service gaps to improve access and continuity of care, minimize duplication and redundancy in order to lower costs (e.g., time and inconvenience) for clients, utilize scarce resources more effectively, and achieve greater accountability. One common solution has been to structurally integrate programs serving common clients under...
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one administrative umbrella. A more recent idea has been to develop collaborative systems in which autonomous programs develop formal arrangements to facilitate better service delivery.

The research described here addresses these challenges. This project was commissioned by a group of eight directors of county human service agencies (Patti, Packard, Daly, Tucker-Tatlow, & Prosek, 2003) who were considering various ways to integrate services to enhance service outcomes, efficiency, and cost effectiveness. The purpose here is to share findings regarding success factors in structural integration and collaboration in these counties. After a review of the literature, the setting and research methods will be described. Findings will then be presented, followed by study limitations, ending with a discussion of implications for practice and research.

DEFINITIONS

Selden, Sowa, and Sandfort (2006) summarized a continuum of collaborative service arrangements, including cooperation, coordination, collaboration, and service integration. Only the latter two will be addressed here. Not included here, but available elsewhere, is a conceptual framework for a design process to be used when planning integration or collaboration (Patti et al., 2003). Another consideration, change management processes to be used during implementation, will be addressed in the findings below, with additional detail available in Packard, Patti, Daly, and Tucker-Tatlow (2012).

Service integration refers to a formal arrangement in which service providers from two or more programs or agencies serving a common clientele agree to service goals and to find ways of sharing resources and coordinating activities in order to realize these goals. Service integration is manifested at the level of service delivery. Two common approaches used to achieve service integration are structural integration and voluntary collaboration. Structural integration is defined here as the merging of two or more previously freestanding organizations under a single administrative authority. The reorganization of several county human service departments, e.g. mental health, health, income assistance, and child welfare, into a single county human service agency is an example.

Collaboration is a broad concept that encompasses relationships, formal and informal, between programs in an agency or across agencies in which the parties share or exchange resources in order to achieve common goals (Sandfort, 1999; Sowa, 2008). Interagency collaboration will be the focus here. Collaboration can involve such varied projects as joint contracts, referrals from one agency to another, designing new programs, or shared funding. Although there are many common change strategies for structural integration and interagency collaboration, we address them separately here since there are distinct literatures relating to each.

STRUCTURAL INTEGRATION

Structural integration has resulted in some reports of increased efficiencies related to centralized administrative functions (Ezell and Patti, 1990; Bardach, 1998). Improvements in service coordination have been noted (Glisson, 1994; Ezell and Patti, 1990; Luginbill, 2000; and Rosenheck et. al., 1998). However, Glisson and Hemmelgarn (1998) asserted that there had been “little or no evidence that interorganizational services coordination or other innovative organizational configurations significantly improve service outcomes for children” (p. 402). O’Looney (1997) listed five possible explanations for failure: lack of time, lack of clear definitions and an identifiable starting point, lack of state and local leadership, lack of a positive cost-benefit ratio, and threats to security (e.g., undermining power and status of staff or programs). In a study of 10 counties, Carnochan and Austin (2002) reported that separate external reporting requirements caused many problems with data management.
Ragan (2003) studied efforts to integrate services and identified successful strategies at both the administrative and operational levels. Factors that had a significant impact on successful implementation included strong leadership, sound management, community involvement, political support, adequate resources, a willingness to take risks, open communication, and teamwork (p. 3).

Ezell and Patti (1990), after a study of six states, suggested that it is not a question of what structure is “best,” but rather “what performance tradeoffs are inherent in choice of structure” (p. 38). They identified nine performance indicators reflecting different kinds of expectations agencies and/or their publics may have for structural reforms. These indicators are helpful in analyzing strengths and weaknesses of various structures. Some organizational structures are more responsive to certain performance indicators than to others.

In one study of the effects of welfare reform in 10 counties (Carnochan & Austin, 2002), the directors interviewed reported, “substantial organizational restructuring” (p. 64). Cultural change (e.g., to an increased customer service orientation) and staff resistance to such change were major themes. Researchers studying a merger in one California county concluded that it is important to understand cultural differences to gain staff commitment (Corsello, Brandt, & Murtaza, 2001, p. 74). In another county, Prince and Austin (2004) found challenges in the integration of workforce investment and social service departments. In summarizing their interviews with 10 directors regarding welfare reform implementation, Carnochan and Austin (2002) highlighted several lessons learned. First, massive change such as this cannot be fully planned and takes a long time, so patience is necessary. Leaders should be able to show successes in incremental steps and continue to communicate the value of the change. Leadership styles should be more participatory and less controlling, but leaders should articulate and model core values. A combination of internal and external demands, including political factors, requires perseverance and the cautious use of power.

Regardless of the structural model chosen, the literature on structural change suggests that ongoing and thorough communication between all involved, particularly among members of an interdisciplinary team or any staff working together, is essential to success. Consistent with principles of employee empowerment and learning organizations, staff autonomy should be maximized within broad policy guidelines, and adaptiveness to changing conditions should be built in (O’Looney, 1996). Roles for all involved and decision-making and communication processes should be clear to all and mutually agreed upon.

INTERAGENCY COLLABORATION

In a comprehensive study of interagency collaborations, Bardach (1998) discovered a series of common barriers and suggested methods to address them, including self-managing teams, networks among administrative staff of the participating agencies, using disagreement to improve dialogue, discovering a common identity, co-location, well-focused training (e.g., on interpersonal skills), and a clear focus on results. He added that just having people work together over time could increase trust and understanding.

Strategies for helping ensure collaboration success include executive willingness to collaborate (Mulroy & Shea, 1998), visionary and collaborative leadership (Yessian, 1995) and leadership training (Polend, 2002), shared values and compatible service philosophies (Mulroy & Shea, 1998), team building (Luginbill, 2000), identifying relevant performance measures (Yessian, 1995), adequate funding and staffing (Luginbill, 2000), establishing policies and procedures for meetings, and ensuring county agency support (Libby & Austin, 2002). Several writers encouraged recognizing that implementing collaboration takes time and is an ongoing process (Libby & Austin, 2002; Gardner, 1998).

In one extensive study of successful collaborations, Mattessich and Monsey (1992) identified 19 factors grouped into the following six categories that influence the success of collaborations:
environmental factors, membership characteristics, process/structure, communication links and processes, purpose, and resources.

Selden, Sowa, and Sandfort (2006) found positive outcomes of collaboration in early childcare and education. Spath, Werrbach, and Pine (2008) noted facilitating and hindering factors in a public-private collaboration in child welfare, which is similar to some of the agencies studied here. After studying a child protection and mental health collaboration, Darlington, Feeney, and Rixon (2005) noted a “lack of supportive structures and practices at the organizational level” (1086), including inadequate resources, confidentiality issues, lack of information about and confidence in the other collaborating agency, unclear processes, and unrealistic expectations. In a similar vein, studying criminal justice and drug abuse treatment agencies, Lehman, Fletcher, Wexler, and Melnick (2009) noted organizational characteristics as key factors in cross-agency collaboration.

Finally, whether structural integration or collaboration is used to achieve service integration, the client’s perspective should be clearly in mind when designing the system. For example, Cohen (2002) suggested that the system should be designed to minimize the number of “handoffs” from one unit to another, and to manage these transitions when necessary through joint staff training, regular cross-unit meetings, and protocols to govern the handoff process.

ORGANIZATIONAL CHANGE

Because this study was concerned with not only structural integration and interagency collaboration but also with success factors discovered as part of the organizational change processes to implement service improvements, the literature on organizational change will be very briefly reviewed.

In HSOs, seminal writing on organizational change began over 30 years ago (Resnick and Patti, 1980) and has been addressed sporadically in the human services literature. In recent years, it has received increasing attention (Glisson, 2008; Packard, 2008; Perlmutter, 2000; Schmid, 2010). In a special issue of Administration in Social Work, Bargal and Schmid (1992) summarized other work in this area.

Austin (2004) and others described over 20 cases of changing public human service agencies, with many based on the new expectations of the federal welfare reform legislation of 1996. Kerman et al. (2012) presented a case of organizational change and organizational learning in the design of a new service delivery system, highlighting 12 strategies, including setting a course and revising as needed, getting input from all levels of staff, training and coaching staff on new practices, and sharing data on progress.

In recent years, two models for organizational change designed for use specifically in human service organizations (Proehl, 2001; Lewis, Packard, & Lewis, 2012) have been articulated. These two HSO models suggest steps to be taken in the process, while acknowledging that tactics and principles are applied at different points based on the uniqueness of a situation.

Fernandez and Rainey (2006), in a comprehensive review of the literature on organizational change in both business and government settings, identified eight factors associated with successful change, including ensuring the need, providing a plan, building support, and institutionalizing the change.

There are still notable limitations in this literature, however, with much of it based on only authors’ experiences as consultants or on profiles of allegedly successful change leaders, with little or no empirical support. While there is a large and growing literature in implementation science (Aarons et al., 2012), especially regarding implementing evidence-based practices (Aarons, Hurlburt, & Horwitz, 2011), there is still a great need for more empirically based practice guidelines for implementing large-scale organizational change. The study summarized here will include notations of ways in which these cases supported and elaborated upon existing knowledge of organizational change, with detail on specific change activities.
STUDY BACKGROUND AND OBJECTIVES

In the study reported here, a team of researchers studied seven county human service organizations that had all engaged in significant organizational change in order to better integrate the services provided to their common clients. In some counties this was done through structural integration of previously freestanding agencies into one umbrella organization, and in others it was done by developing voluntary interagency collaborative service delivery systems. This study was part of a larger research project commissioned by a group of human service executives (Patti et al., 2003) who were interested in learning about results and success factors of structural and services integration initiatives. Because of the complexity of the subject, a comparative case study method, with seven counties as cases, was used. The objectives of this study were to learn stakeholders’ perceptions of the extent to which their county had implemented collaborative practices associated with service integration, and to identify common change strategies and conditions across the several sites. Findings here primarily address the second objective, which offers the opportunity to discover and present new knowledge. To augment the value of the findings, brief mention will be made regarding outcomes based on data gathered to describe the extent of success of these initiatives.

METHODS

Two sets of agencies were studied: four structurally integrated county agencies and three freestanding departments that had engaged in extensive interagency collaboration. The selection process used reputational sampling based on input from expert informants from human service organizations in the state. These county directors and members of their executive and program staffs meet regularly to address policy and program issues. The directors are members of a statewide association of county welfare directors, and through these various contacts over the years they have become familiar with the major changes and functioning in each other’s counties. Counties chosen were known for having implemented extensive structural or collaborative approaches to services integration. All these agencies were considered by other county directors familiar with their functioning to have successfully implemented, to varying degrees, major changes that led to demonstrable improvements in agency and program functioning.

For structurally integrated agencies, a purposive sample of four agencies was selected: two large urban counties with populations of 1.9 and 2.9 million, and two smaller counties with populations of less than 500,000 at the time of the study. For these agencies, the objective was to determine what strategies had been used to pull previously independent agencies into one organization and to assess the results of structural integration as perceived by key stakeholders.

The three non-structurally integrated counties selected were ones in which the agency director believed that a high degree of service integration and collaboration had occurred between his/her department and two more other county departments. The populations of these counties ranged from nearly 3 million to under 150,000. These departments all had long-standing directors who had given a great deal of time and energy to the development of interagency collaboration and had developed extensive interagency networks. In this sense, these county agencies may not be representative of others in the state. The issue in this aspect of the study was how a freestanding agency could realize some of the presumed benefits of structural integration (e.g., economies of scale, shared funding, increased coordination among different programs, improved access for consumers, etc.) without structural integration.

This project used a case study design using multiple data sources (Yin, 2009) as described below. A cross-case search was used to identify common factors across the seven cases. The data obtained from the seven counties in the study included interviews with selected agency staff, county officials,
and consumer representatives; and agency archival documents such as organizational charts, budget information, strategic plans, historical information, and newsletters.

Interviews were held with a vertical slice of key stakeholders in each county (executive staff, program directors/middle managers, supervisors, frontline workers, and consumer group representatives). Executive staff and consumer representatives were interviewed individually, while middle managers, supervisors, and frontline workers were interviewed in focus groups. In a few counties, individual interviews were conducted with members of the board of supervisors and/or the county administrative officer (CAO).

Each director or his/her designate was asked to select persons for interviews from an array of program areas in the department who had been in or related to the agency for at least five years. In each county there were 7 to 10 interviews with executive level staff and two to three focus groups representing middle-level managers or frontline supervisors and workers, with 8–12 participants each. While sampling bias could be a concern here, researchers relied upon directors selecting participants based only upon their knowledge of the recent history of the organization.

Four researchers conducted intensive interviews in one or two counties each and compiled findings into one case analysis for each county. All interviews were in-person, with notes taken by the researchers. Interviews ranged in duration from 30 to 90 minutes, typically averaging approximately 60 minutes. The senior researcher, who had conducted similar research projects on collaboration (Ezell & Patti, 1990; Patti & Einbinder, 1997), analyzed all cases and identified common themes and differences. All researchers reviewed this summary analysis, and adjustments were made to ensure accuracy and completeness. Full instrumentation and case narratives are available from the senior author.

Across the four structurally integrated counties, 41 interviews and 11 focus groups (with 113 total participants) were conducted. For the non-integrated counties, 21 interviews and 8 focus groups (with 82 total participants) were conducted. Therefore, the findings presented in this report reflect the perspectives of more than 250 individuals in seven counties. It is important to note that for each of the focus groups, participants’ responses were grouped and counted as one interview due to the fact that the “group’s” perspective, rather than the perspective of each individual in the group, was obtained via this means of data collection. As a result, data collected via individual interviews are more heavily weighted throughout the findings section of this report.

While qualitative data were primarily used for this analysis, some quantitative data were compiled. First, the content analysis of the interviews resulted in quantification of response frequencies within major themes. These themes included:

- Goals for newly integrated agencies
- Prospects for success when integration started
- Concerns not attributed to any particular group
- Strategies for addressing concerns/building support
- Major barriers to implementation of integrated agency
- Processes used to promote collaboration and teamwork
- Advice for others attempting integration
- Environmental factors facilitating collaboration
- Environmental factors hindering collaboration
- Factors contributing to successful collaboration
- Major barriers to collaboration

Second, a Collaborative Practices Questionnaire was administered to all respondents to assess the extent to which 16 collaboration practices were seen as implemented. Program-level factors included co-location of services, case plans developed jointly by all service providers working with a client, a common understanding of workers’ roles, and consumer ease of access to all services.
Administrative factors included integrated information systems, routine sharing of resources, cross-program training to improve teamwork and coordination, and reduced redundancies and gaps in services and functions. The instrument was adapted slightly from an instrument developed by O’Looney (1997) who, based on his research with human service collaboratives, proposed a number of markers to gauge the extent to which collaboration and service integration have occurred. The wording of some items and the response scales varied slightly on the versions for structurally integrated and non-integrated counties. A pilot test of the questionnaire was conducted with executive staff from one of the county agencies, and changes were made to improve wording and eliminate redundancy.

FINDINGS

The summary of results presented here is drawn primarily from the interviews and focus groups. Before these findings are summarized, results of the Collaborative Practices Questionnaire will be mentioned to provide a sense of respondents’ views of success of these change efforts. Further detail is available in Patti et al. (2003) and Packard et al. (2012).

Measuring success in initiatives such as these is inherently challenging. As noted above, these counties were selected because a range of county executives considered them to have completed successful restructuring or integrating of services. Success was also documented through the interviews and focus groups summarized below, a review of agency documents, and the Collaborative Practices Questionnaire. The questionnaire allowed respondents to rate the extent to which each collaboration practice had been implemented, on a five-point scale, from “Little or no implementation” to “Full implementation.” Scores clustered around the midpoint: implementation in some to many aspects of programs with plans to implement more broadly.

The data analysis described above led to the discovery of nine themes that represented commonalities across the counties. Findings are grouped below according to these themes.

As with most kinds of significant organizational change, building successful collaborative systems results from purposeful, strategic actions and deliberate relationships pursued in the context of national and state policy, local history, political dynamics, and interpersonal circumstances. All these factors were at work in the cases described here. Purposeful action is essential: leaders and followers at all levels, in and across human service agencies, must promulgate and implement policies and procedures, build relationships, and allocate resources in ways that facilitate collaborative processes. Despite the unique experiences of the seven counties, some distinct commonalities emerged. These are summarized next.

External Drivers of Change

Changes of the magnitude attempted in these counties are not undertaken without compelling reasons. Several motivating or driving factors were external in origin. First, and perhaps most compelling, is that collaboration has come to enjoy broad acceptance in political and professional circles as a way to address a variety of problems in the human service system. In spite of this broad trend, it should be noted that there was not a specific mandate in this state to adopt integrated or collaborative systems. The subject agencies initiated these changes based on their assessments of local conditions. Second, the policy environment is replete with exhortations, mandates, and other incentives for public agencies to work across agency boundaries. Third, all the agencies studied here were interested in improving their credibility with important governmental and community constituencies. Integration and/or collaboration provide visible means for improving public perceptions by promising, and sometimes delivering, better client access, enhanced service and planning coordination, economies of scale, and more creative financing.
In nearly every county the prime movers of agency change included elected officials and/or the
director(s) of one or more agencies that were to be reorganized or moved into closer collaboration.
Proposals appear to have been initiated largely because they were seen as important ways to improve
county government.

Mobilizing the Executive Team

A priority in the more successful change projects was building an executive-level core action system
committed to the changes sought and willing to spend personal energy and professional capital to
achieve them. In some cases this involved bringing into the team new persons with energy and commit-
ment, but it also involved seeking the participation of the team in planning and implementation
and, in most cases, the building of trust and mutual understanding between executive team members
if these were not already present.

In non-integrated counties, the counterpart to building the executive team was forging alliances
with other agency executives. A similar process of building trust and mutual understanding is nec-
essary in these kinds of collaborations. Successful collaboration seemed very dependent on the
mutual perception that the interests of all the agencies were being served, that none would exploit
the collaborative to achieve unfair advantage, and that all partners understood the limitations and
vulnerabilities of the others.

Leadership: Articulating the Vision

There is considerable agreement in the literature regarding the central role of leadership in articulat-
ing a clear and attractive vision for key stakeholders that focuses on outcomes rather than structural
change as an end it itself (Yessian, 1995; Carnochan and Austin, 2002).

In each of these counties there was a small set of “prime movers,” or persons who initially
projected a vision and expectation of improved interagency or inter-program coordination. These
visions centered around a few central ideas, including easing access for clients, improving ser-
vice through coordination, greater attention to consumer needs, performance enhancement and
assessment, achieving savings through the reduction of duplication and economies of scale in
administrative operations, and improving the extent and quality of partnership with the community
(CBOs, civic groups, etc.).

The visions, usually stated as principles or guiding values, were often formally promulgated
early on in the process of change and positioned prominently in board resolutions, agency business
or strategic plans, and newsletters and other media. Common examples of guiding values included
efficient government, improved services for poor and vulnerable clients, and increased accountabil-
ity to the community. These values served as mantras in most change projects, though the extent to
which they were communicated did vary.

Marketing Change Goals

Successfully marketing of change goals required a committed executive team. In most counties,
a committed executive staff made it possible for the director to convey a constant and consistent
message out to community and inward to staff and to receive feedback that could be helpful in
implementing plans.

Where marketing with staff and community was not effectively done, it was at least partly due
to the director’s inability or failure to mobilize the executive team around the ideas and strategies.
This, in turn, undermined efforts to build agency-wide consensus, slowed implementation of the
reorganization and may have, in one or two cases, jeopardized the entire change effort.

Successful marketing efforts were broadly based and used multiple media. Newsletters,
conferences and retreats, videos, speeches and presentations, and communication liaisons were

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among the tactics used with varying degrees of success. What seemed important was that these
communication efforts were persistent and prolonged. The importance of communication cannot be
overstated. In one county, it was noted that department heads needed to send out regular messages
regarding their expectations. According to one respondent, “people need to hear the leaders talk
about this.”

In several of the counties that were building collaboration, the credibility of the goals articulated
to staff and other agency directors seemed closely tied to the perception that the agency director was
a trustworthy, knowledgeable, and effective leader.

Involving Stakeholders: Community, Middle Management, and Frontline Staff

Explaining the rationale for change and projecting the benefits that might accrue were used to
involve community constituents and internal staff in planning for implementation. Staff and key
community groups usually understood that reorganization or collaboration was a fait accompli, but
their acceptance of the change and enthusiasm for implementation depended on their involvement
in real-time planning.

The counties that moved quickly toward integration and/or collaboration mobilized a wide vari-
ety of constituents in a number of workgroups, committees, task forces, “charter teams,” and the
like to work on organization redesign technologies and processes to facilitate the change goals. For
the most part, these work groups were charged with important responsibilities and relied upon to
find solutions that could be implemented. In some cases, a central staff that oversaw and facilitated
the entire change project supported these work groups.

One county had a very elaborate implementation plan. Change project staff initially formed
15 work groups (with more added later) to undertake some two dozen change projects over three
years. The work groups or teams were composed of members of the core project staff, a group leader
(usually from top management), volunteer staff from various parts of the new agency, and usually
some community representatives. The work groups were given goals, tasks, and timelines to guide
their work. In each case, staff assisted in the management of the projects by organizing meetings,
tracking progress, report writing, and so on. Within the first year, 125 staff members and others had
worked on these teams.

The work groups typically involved middle and frontline staff and representatives of top man-
agement. In some instances, external consultants were available to assist work groups, but staff was
not uniformly satisfied with the kind or quality of help they received.

In another county, respondents suggested that staff actually “doing the work” needed to be
involved and given the opportunity to share ideas and to learn what is going to occur. They added
that lower level staff should be clearly told what their role will be in the new organization and how
their job will change, to help them to “buy-in” to the benefits of integration. A manager in another
county asserted, “Without buy-in at the front line, collaboration can’t work.”

Long-Term Vision and Incremental Change

It was generally agreed by middle and frontline staff that while it was necessary for them to under-
stand the values and vision of change, this was not sufficient. In most cases, staff at these levels
continued to have professional and personal reservations about the change projects well after they
were underway. Marketing efforts, information dissemination, and involvement in planning were
important ways to address these concerns, but in the end “consideration”—the belief by middle-
and lower-level staff that the agency executive team understood that the additional responsibilities
associated with the change effort were heaped upon ongoing responsibilities that did not abate while
new policies, rules, and procedures were being put in place—emerged as a central issue. The nearly
universal advice from line staff was that changes should be introduced incrementally, at a pace that
permitted staff to absorb new policies and practices into their work and with careful planning about how to deal with the staff reactions. Even in counties where change was effectively implemented, many staff expressed initial resentment and even resistance to change proposals because of the perception that management did not appreciate the impact of these changes on them personally and professionally. Some thought their concerns were simply not heard; others felt that changes were sometimes implemented without a careful consideration of human costs such as confusion, conflict, and loss. In combination, these perceptions often created discontent, which in turn slowed or undermined the change project itself.

A key issue for leaders was how to balance the pace of implementation to maintain momentum when introducing change without overwhelming staff. Many mid-level and frontline staff thought that greater preplanning and more sensitivity to staff concerns would have increased their buy in and lessened some of the turnover that was attributed to these changes. (Turnover was not seen as significant, and may have been in some cases a positive outcome, if staff left for other jobs because they saw that their own style did not fit the new model.)

The pace of implementation may be a dilemma for executives. From a managerial perspective, slowing implementation may risk losing momentum. Focusing on staff concerns could be perceived as providing an opportunity for opposition to consolidate. In some cases where timelines had been determined by external policy bodies, there was little discretion on the speed of implementation. Still, all things being equal, findings here point to the benefits of incremental change and careful planning to address the personal and professional concerns that inevitably emerge in far-reaching organizational change.

Co-location and Regionalization

Co-location and regionalization emerged as important design considerations in the counties studied. In the counties that pursued a strategy of interagency collaboration, co-location was widely seen as a desirable approach to fostering improved understanding and communication. The non-structurally integrated counties all relied heavily on co-location to implement large-scale interagency collaboration. Regional co-located facilities provided one-stop-shopping and coordinated services built around the needs of residents in particular areas. At the same time they provide the physical proximity that affords staff opportunities for face-to-face interaction and relationship building over time. These relationships, also reported in other studies (Sandfort, 1999), are vitally important to the success of collaboration. In interviews, co-location was one of the most frequently mentioned success factors.

Co-location provides the opportunity for relationship building and interagency understanding, but in the several counties with co-located programs these kinds of outcomes occurred only when executives and mid-level managers encouraged and supported staff in this mode of operation. In these cases, staff teams were allowed some discretion to work out local and case-specific solutions. Where this did not occur co-located facilities became collections of silos, with agencies working alone toward their own objectives.

In several of the structurally integrated counties, regionalization was used to build more collaborative service systems. Regionalization, as used here, refers to several programs (e.g., public assistance, child welfare, mental health) in a region, all of which report ultimately to a regional general manager who has the line authority to orchestrate programs toward regional and department objectives. There are a number of barriers to implementing regionalized management structures (e.g., concerns about loss of program identity, lack of program expertise at the regional management level), and some counties chose not to go in this direction. Where regionalization was implemented, it appears to have fostered integrated services and improved collaboration across program lines, suggesting that regionalization, while difficult to implement, may provide a good long-term approach to service integration in umbrella agencies.
Developing Teamwork Across Professional and Program Cultures

Structural changes such as staff co-location and regionalization appeared to facilitate interaction and joint problem solving at the program level, but these structural strategies needed to be supplemented with training and team development to help build understanding and trust across program and professional cultures.

All counties struggled, more or less successfully, with the challenge of building teams across professional and program cultures. There had been resistance to change projects among middle management and frontline workers in certain program areas such as mental health, child welfare, aging, and drugs and alcohol. The resistance to change was manifested in a variety of ways, such as fears that expertise would be diluted, that service standards would be compromised, that information shared with others would be used inappropriately, that workers in other programs with less professional preparation could not be entrusted to perform competently, and that general managers would not have the expertise needed to effectively manage programs. These matters continued to serve as barriers in some counties, either slowing or preventing the full development of cross-agency (in voluntary collaborations) or cross-program coordination (in structurally integrated agencies).

As significant as these issues can be, there is considerable evidence that progress toward teamwork can be made if it is understood at the outset that professional and program loyalties are highly salient to human service workers and reflect commitments to craft and to the needs of client populations. In several of the more successful projects, change leaders understood the importance of not dismissing the legitimate concerns of program and professional specialists and committed instead to supporting the standards and protecting the special expertise that is found in these groups. Such groups were not exempted from involvement in collaborative undertakings, but rather were encouraged to put the interests of common clients above parochial concerns.

In one county, having people from different programs working together on projects was seen as moving integration beyond what team building activities accomplished: regular contact through joint work (e.g., team service planning) expedited staff getting comfortable working with each other. In another county, there was considerable agreement in the middle management group with the statement: “Team building activities did not take the integration effort as far as having people work together on projects.” In several counties, pilot projects in selected geographic areas were useful in showing quick successes and examples of the ultimate vision.

As teamwork began to occur in regional and co-located structures and in joint planning and service arrangements, it was fostered through team building exercises, executive staff modeling, staff development, and cross training where stereotypes and distrust were addressed and relationships built. Where interagency collaboration occurred, these supports were an integral part of the planning, with time and resources allocated for this purpose. In several counties, after improving communication skills, workers in different program areas often developed mutual respect and enthusiastically embraced the opportunities to utilize one another’s expertise to further interests of their common clients. In one focus group, the process was described in the following way: “It’s a little bit like marriage. You don’t know each other’s habits, but you don’t really know until you get in there and then you start to learn things.” Another participant commented, “And divorce is not an option.”

Regarding the importance of creating a collaborative culture among leaders, one respondent said, “Moving chairs around is not as important as having the right people in the chairs.” The philosophy and attitude of individual workers and managers were seen as key variables—more important than structural arrangements.

Unresolved Issues in Integration and Collaboration

Despite the considerable progress toward integration and collaboration observed in the seven counties studied, there are several barriers/issues that remain largely unresolved. Across the counties
there was widespread frustration with the inflexibility of most funding streams that limit the ability of counties to “braid” sources together to finance interagency/inter-program initiatives. Though progress has been made, local officials will need to advocate for further flexibly in state and federal categorical funding if collaboration is to be fully implemented. For example, Schmidt and Austin (2004) reported on a California county that was able to successfully blend three federal funding sources.

The building of truly collaborative services requires information exchange across programs and between agencies. This was an area of continuing concern in all the counties studied. Basically, information systems imposed by state and federal authorities continue to focus primarily on program accountability rather than client outcomes. Counties must comply with the information requirements of these systems, and do not have the resources necessary to create county-level systems that allow for real-time exchange about cases served in several programs or agencies. Here and there progress was made in creating local information technology to support collaboration, but much remains to be done to develop information bridges. Several agency directors emphasized that it will be important for federal and state authorities to assist in the development of local interactive systems (e.g., MOUs) that allow for information exchange between service providers if collaborative systems are to be sustained.

Also important to the exchange of information in collaborative programs is the matter of confidentiality. Respondents noted considerable frustration with the unwillingness and/or inability of frontline workers to share client information across programs. However, progress was made in separating legal and ethical constraints on information sharing from those that grow out of preferences or traditional practices of professionals. These issues were often resolved when they received the persistent attention of managers and workers. Team-building efforts, mentioned earlier, helped to move along the debate on what is essential to protecting confidentiality. Some counties developed protocols based on a “need-to-know” basis that seemed to facilitate information exchange. Workers were also helped to be clear about what constituted legal liability and what did not.

STUDY LIMITATIONS

A limitation in this research is a common one in case studies: findings from a sample of seven cases, while rich in detail, cannot be directly generalized to other agencies. Nevertheless, strategies, outcomes, and lessons learned here can be of value to other researchers and agencies interested in the options regarding integration and collaboration. Also, retrospective accounts of what was done are subject to distortion arising from selective memory and recall. The researchers sought to correct for this by interviewing persons who viewed the history from different perspectives and who had different interests. This and the reliance on agency documents gave researchers confidence that at least some of the salient aspects of these change projects had been captured.

IMPLICATIONS FOR PRACTICE AND RESEARCH

Implications for Practice

Most of the findings above are actionable practice principles that agency and community change leaders could adapt for their own uses in developing new integration or collaboration systems and processes. These implications for practice largely focus on the change management processes used to implement new systems. Some reinforce existing theory or research, adding weight to existing prescriptions for practice. Others offer new insights that show promise for advancing practice. Key points will be summarized here, including some feedback on lessons learned from the changes studied in these seven counties.
Regarding the change process, the findings suggest the need for strong external pressure, or at least the strong support of powerful external constituents, which in these cases often came from local elected officials or county chief executives. Human service administrators can also be proactive in this regard, mobilizing local political support. Using outcome data can help reinforce the need for collaborative practices as well as increase political support. Within the involved agencies, an executive leader needs to be the champion and articulate vision for change, and the executive team members should demonstrate support as well. Involving as many people as possible in implementation planning, training, and actual experience with collaboration is essential for staff acceptance.

External marketing to and partnering with the community (e.g., community-based organizations) should also facilitate implementation. Change leaders cannot over communicate about the benefits, costs, progress, and consequences of the change effort. Ongoing face-to-face meetings between collaborative partners were seen as important here. These should also explicitly address the merging of professional cultures through cross training, staff development, and team building. One example of such cross-training was a five-day training program on inter-agency collaboration (Jones, Packard, and Nahrstedt, 2002) that included team building (Packard, Jones, and Nahrstedt, 2006).

In these agencies, respondents suggested developing a long-term vision and then implementing incrementally to increase staff buy-in and avoid burnout. Leaders should also communicate concern for staff, understanding their day-to-day demands. In the non-structurally integrated agencies, positive personal and professional relationships between department executives and program managers made a difference.

Regarding the content of services integration, this research suggests that co-location of services should be promoted wherever possible to enhance collaboration. Change leaders should anticipate confidentiality barriers and focus on resolvable issues. Incompatible state and federal regulations and databases will also need to be addressed. Local leaders will have to invest in information systems that bridge local programs. Using blended or shared funding when possible can be an incentive for collaboration.

Several themes emerged regarding lessons learned. More planning would have helped ensure that all stakeholders were clear about both the change goal and the processes for getting there. More information exchange at all staff levels would have been helpful in promoting collaboration. In addition, more cross-training between collaborative partners and development of a shared vision would have helped. The findings also suggested that some managers might never develop a full commitment to the new ways of working, which may lead to the retirement or transfer of management staff.

Finally, respondents in the non-structurally integrated agencies believed that collaboration is possible without structural integration.

Implications for Research

After an extensive review of the literature on collaboration, Jones, Crook, and Webb (2007) suggested that

More research is needed on the training that is necessary for staff and members of organizations to obtain the skills for effective participation in the collaborative process (i.e., how do organizations best prepare their human capital for participation in the collaborative process?). Another need in the literature involves the use of different management models and practices (i.e., top-down, democratic, quality circles, etc.) to determine which forms of governance system achieve the best results (p. 66).

The findings here provided, for example, detail on change leadership, participative decision making, marketing, and team-building activities that enhanced prospects for success. While Jones, Crook,
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and Webb focused on community collaborations specifically, the findings here, which were primarily from public sector organizations, seem to be generalizable to other organizations attempting enhanced collaboration and other organizational changes.

In terms of research methods, this study, which gathered data from over 250 respondents in seven agencies, can be seen as a transition step between earlier studies, which were often based upon single case studies or consultant experiences, and more systematic research such as that suggested by Jones, Crook, and Webb (2007). As conceptual models are further refined, more precise outcome data are developed, and success factors are more definitively identified (e.g., Fernandez and Rainey, 2006), future research can be more precisely based upon this prior work, helping to unify this growing body of knowledge.

SUMMARY AND CONCLUSIONS

Forging improved interagency and inter-program coordination is a complex and demanding task. Such changes can alter fundamental ways of doing business, introduce real uncertainty, entail additional work, and challenge professional and personal interests. Addressing the inertial forces against collaboration requires some combination of favorable contextual circumstances, especially the presence of perceived incentives, leadership that projects a clear vision that is compelling to the stakeholders within and outside the agency, an involved and committed executive team, and a painstaking process of involving middle and frontline staff in the decision processes that directly affect their work.

Data from the seven cases presented above enrich and enlarge the knowledge base on services integration, collaboration, and organizational change. Agency and community leaders can use these findings to improve prospects for success as they engage in organizational change to improve collaborative systems and service outcomes. These results can also help enhance prospects for more structured quantitative, application-oriented research to assess the presence and absence of factors that can contribute to successful services integration and collaboration.

REFERENCES


