Fostering Inter-Agency Collaboration for the Delivery of Community-Based Services for Older Adults

Catherine E. Tong[1,]*, Thea Franke[1], Karen Larcombe[2] and and Joanie Sims Gould[1]

[1]*University of British Columbia, Center for Hip Health and Mobility, Vancouver, BC V5Z 1M9, Canada*
[2]*South Vancouver Neighbourhood House, Vancouver, BC V5P 3X7, Canada*

Correspondence to Catherine Tong, University of British Columbia, Center for Hip Health and Mobility, 2635 Laurel Street, Vancouver, BC V5Z 1M9, Canada. E-mail: Catherine.Tong@hiphealth.ca

Abstract

Organisations promoting health and social outcomes are grappling with two concurrent realities: dwindling budgets and declining state support; and a rapidly ageing population. This is true for all levels of government, non-governmental organisations and non-profits. This study assessed the process and extent to which four non-profit organisations collaborated to meet service objectives related to older adults in a local area. A collaboration survey and semi-structured interviews with nine stakeholders from four community-based public-sector organisations were conducted annually for three years. Interviews were transcribed and data were analysed using topic and analytic coding. Successful inter-agency collaborations involved: (i) shared vision; (ii) effective communication; (iii) time to build relationships; (iv) shared expertise and resources; and (v) strong leadership. Factors that jeopardised inter-agency collaboration included: (i) misinformed understanding of goals; (ii) meetings seen as a waste of time; (iii) not sharing resources; and (iv) lack of organisational resources. This paper makes two distinct contributions. We highlight that successful collaborations are about a process that includes relationship building, sharing of resources and establishing a shared vision; and we offer a method for those involved in the establishment and assessment of collaborations to provide appropriate, accessible and timely assessments of collaborative efforts.

Keywords: Collaboration, voluntary and non-profit organisations (VNPOs), qualitative methods, older adults, community-based social work

Introduction

Organisations that work to promote health and social outcomes are grappling with two concurrent realities: a climate of austerity (Cottarelli, 2012) and, in many countries, a rapidly ageing population (United Nations, 2013). This is true for all levels of government, non-governmental organisations (NGOs), and voluntary and non-profit organisations (VNPOs). Within the context of dwindling budgets and declining state support, community-based health promotion is increasingly coming under the purview of NGOs and VNPOs. These organisations are expected to do more with less. As the population ages, older adults are increasingly remaining in their own homes and community environments (Office of Policy Development and Research, 2013). As they age, older adults often have increased health and social care needs (International Federation of Social Workers, 2012). No one single agency has the staff or resources to meet all the needs of the ageing population within the community. The purpose of this study is to assess the process and extent to which nine stakeholders from four community-based public-sector organisations collaborated to meet broad service objectives related to older adults in the local area.

Inter-agency collaboration: background

Many organisations, both public and private, have developed inter-agency collaborations as a result of deficiences existing in service systems. Deficiences such as shortage of funds or resources, lack of qualified or trained personnel, governmental priorities or mandates, duplicated services or the need for additional services (Grubbs, 2000) have been reduced because of inter-agency collaborations. Inter-agency collaborations are recognised as an effective way to: reduce costs (Gulzar and Henry, 2005); create a means for managers to share their responsibilities, and reduce organisational stress (Van Eyk and Baum, 2002); increase ability to reach under-served communities and improve community health (Teufel *et al.*, 2009); and align to advocacy work and sustain funding (Osborne and Murray, 2000).

Inter-agency collaboration has been defined in many ways (Frey *et al.*, 2006). Inter-agency collaboration can occur at the governmental and local organisation level, and may involve public, private and/or faith-based sectors as partners. We employ the following definition: inter-agency collaboration is 'a mutually beneficial relationship between two

or more parties who work towards common goals by sharing responsibilities, authority, and accountability for achieving results' (Chrislip and Larson, 1994, p. 5). This definition delineates not only a shared goal and a mutually beneficial relationship, but also a shared responsibility for the process in establishing the collaboration and the work of the collaboration.

Inter-agency collaboration: success

There is extensive literature on inter-agency collaboration (Van Eyk and Baum, 2002) that identifies the elements necessary for success. Known factors include: mutual goals and mutual trust (Osborne and Murray, 2000); shared decision making (Van Eyk and Baum, 2002); high-quality inter-personal relationships (Gulzar and Henry, 2005; Cross *et al.*, 2009); and clearly defined governance, roles and leadership (Weiss *et al.*, 2010). Studies have demonstrated that the following processes are needed to implement a successful collaboration: developing a powerful vision, a strongly committed team, trustworthy relationships and stakeholder involvement (Kubisch *et al.*, 2010; Packard *et al.*, 2013).

Inter-agency collaboration: challenges

Often, many collaborations do not generate efficiencies (e.g. cost savings, increase ability to reach, reduce organisational stress and align to advocacy work) as they are 'complicated and difficult to manage' (Cheadle *et al.*, 2005, p. 639) and face a myriad of challenges (Grubbs, 2000). Cited challenges include: a lack of time and resources (Gulzar and Henry, 2005); funding issues; lack of knowledge and poor information flow; lack of personal links and trust; and staff turnover and organisational changes (Van Eyk and Baum, 2002; Weiss *et al.*, 2010).

Additionally, outcomes extend beyond the overall efficiency goal for collaborating (e.g. reduce costs, reduce organisational stress). They can be more proximal outcomes (e.g. cognitions, motivations, affect and values), such as staff satisfaction (Gulzar and Henry, 2005) and trust (Salas *et al.*, 2005) and other affective and cognitive processes that are the result of the collaborative process. Collaboration efforts are also hindered by process-oriented challenges such as not recognising the need to accommodate culture, values and goals of existing facilities (Weil, 2010). Differences in organisational culture can act as a significant barrier to bringing organisations together (Fulop *et al.*, 2002). Rather than restricting collaborations to a particular outcome, more focus needs to be placed instead on the process of creating successful collaborations.

Seikkula and Arnkil demonstrate the need for a movement beyond a focus on efficiencies. A collaboration:

> ... is not merely a cognitive process but is, instead, an embodied emotional experience. It is not only 'seeing' or 'understanding,' but also becoming touched as a human being. The new understanding is generated in a shared emotional experience, which means that people become connected with each other in a new, active way (Seikkula and Arnkil, 2006, p. 92).

Inter-agency collaboration: serving the needs of older adults

Only a handful of studies have examined inter-agency collaboration amongst older adult service providers (e.g. Alkema *et al.*, 2003; Vogel *et al.*, 2007; Ford *et al.*, 2010). While these articles provide descriptions of inter-agency collaborations, none of them provides any sort of data, quantitative or qualitative, from those individuals involved in the partnerships and the processes behind inter-agency collaborations. Ongoing evaluations and data collection at multiple time points, from the perspectives of the individuals involved in the collaboration, may provide greater insights into the processes that make or break collaborative initiatives.

Funding for the development of partnerships and collaborative actions is finite, but the efficiency rationale is that well-established collaborations will outlive their funding streams (Frey *et al.*, 2006). While many authors have explored the behaviours and conditions that help to explain why collaborations succeed or fail, there is a need to better understand the processes by which individuals representing various organisations work in concert (Phillips *et al.*, 2000) and, in particular, solutions to challenges for those servicing the ageing population. With the ageing of the population and the growing demand and expectation that organisations should and will collaborate, effort must be made to examine and report on not only the outcomes, but also the processes which allow collaborations to flourish, hence the focus of this study.

Methods

Setting and context: South Vancouver Neighbourhood House

South Vancouver Neighbourhood House (SVNH) acknowledges the need to cultivate strategic collaborations in order to meet its broad community service objectives. SVNH is also aware that other organisations working in their area of Vancouver, British Columbia, have aligned advocacy and community service objectives. Their programmes are

diverse, ranging from immigrant settlement support to day-care services and Tai Chi classes; programmes are run by volunteers and staff, including community-based social workers. In an effort to better serve the needs of older adults in the South Vancouver area, SVNH was awarded three years of pilot funding, from a group of private and public funders, to develop a Hub. A Hub is a 'consortium' of local partners who coordinate their seniors' programmes and resources, and work collaboratively on key programming and advocacy issues.

SVNH partnered with our university-based research team to design and implement an evaluation of the Seniors' Hub (www.theseniorshub. org), herein referred to as the 'Hub'. Collectively, we worked with SVNH, older adult volunteers and the Hub's community partners to develop and implement a mixed-methods evaluation plan. The three-year evaluation plan covered the duration of the pilot funding (2011–14). A core component of the evaluation plan is tracking the progress and process of inter-agency collaborations.

Evaluation approach

The ongoing evaluation of the Hub takes a post-positivist, 'Fourth Generation' evaluation approach (Guba and Lincoln, 1989), in which the stakeholders and evaluators work in concert to develop and implement an evaluation of a given programme. The evaluation team consists of scientists from the University of British Columbia, Centre for Hip Health and Mobility, older adult volunteers from the Hub, SVNH staff and representatives from the funders. The team meets monthly. Evaluation results are shared through monthly and annual reports, plain-language summaries for older adult volunteers and community presentations.

Measurement/assessment of collaboration

Collaboration has been examined many ways, including: network analyses, focus groups, interviews, document analysis and survey instruments. For the evaluation of the inter-agency collaboration outcomes, we draw on two tools: annual in-depth interviews with the Hub partners and the 'Levels of Collaboration Survey' (Frey *et al.*, 2006), also completed by the partners. We selected the Frey tool, in consultation with the Hub partners, because it is easy and quick to administer, provides concrete definitions and has been thoroughly tested, with published protocols.

Partner participation

Staff members who represent the partner agencies and SVNH were eligible to participate in the interviews and complete the survey.

Recruitment procedures

At a monthly inter-agency partner meeting, the Hub coordinator introduced the interview and survey component of the evaluation and provided attendees with a one-page summary. Upon receipt of ethics approval from the University of British Columbia, introduction letters and consent forms were circulated to each inter-agency staff representative. All of the Hub partners agreed to participate. The partners include Southside Community Centre (CC), Union CC and Winston CC. Per our ethics application, the names of the partner organisation and participants have been anonymised. The name of the lead agency, SVNH, has not been blinded. The nine staff members interviewed had an average of sixteen years' experience in the community development sector (range: four to 'more than forty' years) and speak many of the languages used in their ethnically diverse neighbourhood. Their job titles included: volunteer coordinator, seniors outreach worker, recreation/fitness programmer, programme manager/assistant and community development coordinator.

This present paper draws on the in-depth, qualitative interviews conducted with the inter-agency partners in the formative years of the organisation (Years 1–3). We conducted seventeen in-depth, semi-structured interviews with nine staff members employed by the Hub partners. We completed interviews at three time points (January 2012, 2013 and 2014), speaking with the same staff members annually. In cases of leave or staff turnover ($n = 4$), the interim or new employee in the same role was interviewed.

Data generation and procedures: interviews

In-depth semi-structured interviews ranged from forty-five to ninety minutes each. Interviews were completed by the lead author and conducted at a private location and time of the participant's choosing. The interview guide asked questions about the development and evolution of the Hub, successes and challenges.

Data generation and procedures: 'Levels of Collaboration Survey'

To track the development of the collaborations, we also used the 'Levels of Collaboration Survey' (Frey *et al.*, 2006)—a brief survey that asks partners to rate their perceived level of collaboration on a scale of 0 to 5. Each of the ratings (1–5) is named and defined on the survey instrument (see Table 1). We then used the survey results to develop 'collaboration maps'—a visual representation of the partners and their perceived relationships between one another. Partners completed the

Table 1 Sample Levels of Collaboration Survey

Please review the descriptions of the different levels of collaborations. Using the 0-5 scale provided, please indicate what 'level' you are currently at with each partner of the HUB. All HUB partners should fill this out independently.

NAME: _____ ORGANIZATION _____ DATE _____

Relationship Characteristics	No interaction 0	Networking 1	Cooperation 2	Coordination 3	Coalition 4	Collaboration 5
	• no interaction, but identified as a potential partner	• Aware of organization • Loosely defined roles • Little communication • All decisions made independently	• Provide information to each other • Somewhat defined roles • Formal communication • All decisions are made independently	• Share information and resources • Defined roles • Frequent communication • Some shared decision making	• Share ideas • Share resources • Frequent and prioritized communication • All members have a vote in decision making	• Members belong to one system • Frequent communication is characterized by mutual trust • Consensus is reached on all decisions

Five Levels of Collaboration

Partner Organization
e.g. Union CC

survey at an inter-agency interview meeting shortly after the round of annual interviews. The survey instrument asks the participants to identify all of their perceived partners, which may include both formal partners and other local organisations.

Data analysis: interviews

Interview audio files were transcribed verbatim by a professional agency, and spot-checked for quality and completeness. Transcripts were blinded and uploaded into NVivo 10 (qualitative data analysis software). Each transcript was read twice and a preliminary coding structure was developed in team meetings to facilitate the composition of a two-page summary report for participants. Inductive topic coding (Richards and Morse, 2012) was used to organise the data. Transcripts were coded each year, with new nodes to reflect new themes and topics. Transcripts were coded for themes constant across all three time points (e.g. node: examples of working collaboratively) and themes unique to a given year (e.g. node: barrier: troubles with meetings and time-keeping: Years 1 and 2). A final round of coding and analysis was conducted after all three rounds of data collection, collapsing nodes and refining themes.

Data analysis: 'Levels of Collaboration Survey'

The development of the 'collaboration maps' followed the protocol outlined by Frey and colleagues (2006). Partners are represented with circles and the lines of varying widths represent the levels of collaboration, with a thicker line indicating a higher level of collaboration. Arrows indicate the direction of the relationship. For example, if SVNH rates Southside CC as a 3 (Coordination), a line with the appropriate width would originate from the SVNH circle, with the arrow pointing towards the Southside circle. Relationships with a rating of zero (no relationship) or 1 (networking) are not represented in the map. In the instances where partners identify collaboration with organisations that are not formal partners, and therefore would not have been provided with a survey in which to respond, we use a circle with dashed lines. Collaboration maps were shared with stakeholders annually. Figure 1 provides the baseline 'collaboration map' for the Hub.

Strategies for rigour

The validity of a qualitative study cannot be ensured through the application of post-hoc strategies (Morse *et al.*, 2008), but rather researchers must employ a number of procedures throughout the research study.
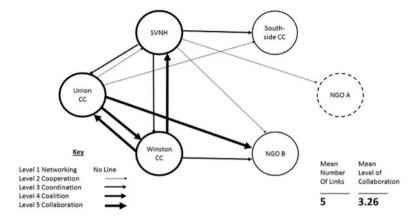
Figure 1 Collaboration map: Baseline

Validity is defined as 'how accurately the account represents participants' realities of the social phenomena and is credible to them' (Creswell and Miller, 2000, p. 125). Validity refers not to the data, but to the inferences drawn from them. Strategies to reinforce the validity of this study included: cross-checking the full transcripts against the original audio files; reflexive memoing; and the identification and thoughtful examination of outliers. We also maintained an audit trail (Koch and Kralik, 2006). Through a three-year engagement with participants, we ensured the validity of this study by providing annual summary reports, revising the interview guide and maintaining communication with the participants. Participants provided feedback on the preliminary analysis and one staff member from SVNH reviewed several drafts of this manuscript.

Findings

Through three rounds of annual interviews, participants provide reflection about the progress and factors related to the specific successes and problems that are part of cultivating a high level of inter-agency collaboration. Successful inter-agency collaborations were found to involve: (i) shared vision; (ii) effective communication; (iii) time to build relationships; (iv) shared expertise, ideas and resources; and (v) a strong leadership role. Factors that jeopardised inter-agency collaboration and areas each group would change in future collaborative efforts included: (i) misinformed understanding of collaboration goals; (ii) meetings seen as a waste of time; (iii) not sharing resources; and (iv) lack of organisational resources. Solutions that the participants implemented are discussed throughout.
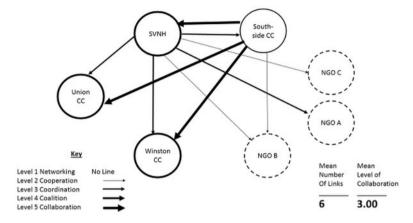
Figure 2 Collaboration map: Year 1

Successful factors

Shared vision

Establishing a shared vision and understanding for the Hub was a key factor in setting the foundation for success. Participants were asked during their initial interviews what attracted them to participating in the Hub (Figure 2), and they all noted a shared understanding that more had to be done to coordinate efforts and support local seniors:

> I think that a lot of our facilities we would love to do more .... We're limited in terms of resources we can offer. But the idea of creating hubs of opportunities and recreation and programs in the South Vancouver area, really set in my mind, that at least it would create a greater, broad-based resource for older adults to access (Bob, Year 1).

The Hub partners demonstrated a shared vision to making their local area a better place for seniors by sharing resources and providing greater opportunities: Jennifer explained the importance and benefits of working together in order to better serve local seniors:

> ... [before we started meeting as a Hub]... we didn't really know what was happening in those communities. So now that we know that was happening, what the resources that we have in place, we can bring all that information back to the committees and we can work from that (Jennifer, Year 1).

Challenges (misinformed understanding of collaboration goals): Without establishing a shared vision and understanding of the goals of the Hub, efforts to maintain the inter-agency collaboration could be jeopardised.

Susan shares her difficulties in joining the Hub and understanding its definition and purpose:

> I had no idea what the Hub was for the first three months. I think it's actually conceptually very hard to understand. And I think it's a weakness of the Hub.... But I do see, even in the six months that I've been here, that there's been more actual partnership between the community centres and the Neighbourhood House (Year 2).

Solution: Developing a shared definition of the Hub and governance structures that focus on visioning, strategic planning and practice changes takes time and effort. This process can often be perceived as confusing or 'conceptually hard to understand', in particular for individuals who are keen to see tangible results immediately. This is especially true when annual reports focus on outcomes, and not necessarily the processes that need to take place allowing such outcomes to be achieved. The collaboration process requires participants to accept a level of uncertainty as the discussion of the process and establishment of structures develop.

Effective communication

Central to the success of the Hub was the process of establishing strategies for effective communication to minimise confusion and to ensure that all partners could provide answers to questions such as: Who we are? What are we trying to do? How are we going to do it? Participants spoke at length about the importance of establishing effective communication in the initial phases so that all partners continue to remain enthusiastic about the collaboration. Participants highlighted the importance of strategies such as 'face-to-face meetings' that bring partners together to learn from one another and enhance each individuals' role:

> I've gained a lot of knowledge towards programming, towards collaborating, ... working with other groups. If you surround yourself with people of so many different skills, different knowledge, just think what you could collaborate with that. Susan has been programming for many more years than I have and she's got a great wealth of information behind her (Lynn, Year 2).

More experienced staff discussed learning about one another's working and communication styles. Similarly, junior staff appreciated the opportunity to learn from the more experienced partners. Jennifer explained:

> If you know that there is something that involves, I don't know, let's say Union Community Centre, and we know Susan already and we can talk to her, and she is the one working with seniors ... she will for sure know how I can do that better. She will guide me. So you feel more confident and you feel more like you are not alone in the community anymore (Year 1).

Dialogue and communication can be the star agents of transformation in collaborative efforts (Seikkula and Arnkil, 2006).

Challenges (meetings seen as a waste of time): Communicating the importance of bringing the partners together is a key component to the future success of the collaboration. Without demonstrating that regular meetings help to establish connections, understandings and learnings, partners can view the meetings as a 'waste' of time and reduce their enthusiasm throughout the process:

> When you start something new up it's like, okay, why am I here? I felt like I just went to a two-hour meeting and really didn't get anything accomplished. That's when you walk out going, well, this was a waste of my time. So I think we're a little further along now where we're utilizing our times better. We're really understanding how we can build off of each other as well (Year 2).

In their review, Packard and colleagues (2013) found that community groups usually understood that reorganisation or collaboration was a fait accompli, but their acceptance of the change and enthusiasm for implementation depended on their involvement in real-time planning.

Solutions: Participants noted that flexibility and reflection, or adaptability and learning as Kubisch and colleagues (2010) wrote, are key elements that can facilitate the collaborative process and establish the importance of ongoing communication and effort for partners:

> I think you have to have an open mind. I think you have to be flexible. And you have to be open to trying things, that's the key. Because we found that with some stuff that we try, they don't work. Is there any way we can change it to make it work? So it's really going through that evaluation process. And then if it's not, let's move on (Lynn, Year 2).

Time to build relationships

While articulating and defining the Hub initially proved challenging, the lengthy process of establishing this foundation was key to the success of collaborations developing. Susan shared her reflections about how through ongoing communication and time relationships were built and strengthened:

> For the second year, I see more information sharing and trust among the partners, well we are built stronger than before. Like the shared projects or seeing how frequently we share the information and we promote partners activities or events, I think it reflects the trust and the partnership (Year 2).

The collaboration coalescing is captured in the collaboration map for Year 2, in which the mean level of collaboration increased from 3.0 in Year 1 to 4.4 (see Figure 3).
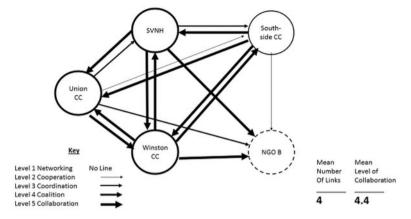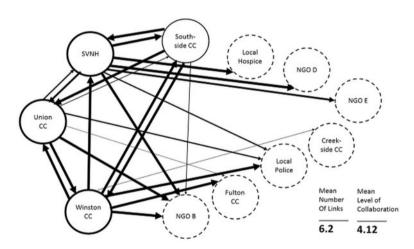
Figure 3 Collaboration map: Year 2

Figure 4 Collaboration map: Year 3

While Figure 3 provides a visual representation of a strengthening Hub, what it does not show is the amount of time, effort and work that goes into creating and widening each line in the collaboration map. Each line can potentially represent hundreds of e-mails, phone calls and hours spent in meetings in order to establish and strengthen partner relationships. The ongoing flourishing of the Hub collaborations is visually represented in the collaboration map for Year 3 (see Figure 4).

Taking the time to establish a foundation upon which trustworthy and effective relationships can be built is a key factor to the success of a collaboration. The final round of interviews were replete with examples of

successful collaborative processes and outcomes. In terms of processes, staff members continued to discuss learning from one another. For example, Susan is creating a board of older adult volunteers to guide the seniors' programming at her community centre; in order to do so, she has relied heavily on the partners:

> Judith and Anna are really familiar with that area. So they've offered to come in and help to facilitate meetings. They've been very supportive with ideas when we've sat at the table for our meetings ... [they are] a good resource and a support team (Year 3).

Challenges (lack of time): In spite of the many successes of the collaboration partnerships over time, it is precisely 'time' that can be seen as a challenge in that building of relationships and collaborations take time. The initial phases (Years 1 and 2) involved challenges that needed to be overcome with time.

Solutions: Participants highlighted how the initial phases of establishing a shared goal and cohesive commitment was essential to the success of the Hub and that time is essential to the process. This finding is consistent with Kubisch and colleagues (2010), who highlight that 'too often, the goals sought by community change intervention are poorly defined at the outset ... having agreement among all stakeholders about the work that will be approached is key to creating and maintaining focus' (p. 11). The strength of the commitment that was built over time was what brought partners together and helped to maintain the ongoing relationships and new relationships that needed to develop: 'We're all there for the same cause. And I see the passion in everybody around the table, wanting to get to our goal' (Judith, Year 3).

Shared expertise, ideas and resources

Throughout the previous themes is the underlying importance of partners' willingness to share expertise, ideas and resources. All of the partners talked about the successful outcomes they experienced by sharing expertise, ideas and resources. Raj is a half-time employee who often attends Hub meetings on personal time. He explained how the Hub saves him time:

> Because we have collaborative events I don't have to program more new events or things on my own. I'll take one event from Union Community Centre, one event from Winston Community Centre and then offer that in my brochure whereas before I'd have to think of three other programs from my own. It helps, coming up with ideas (Year 2).

Participants shared examples of creating events together, promoting one another's event in their brochures, sharing equipment (e.g. newer bingo machines, Nordic walking poles) and sharing the cost of transportation to help their older adults participate in events at all of the partner

facilities. The partners felt that cross-promotion and shared resources helped increase their enrolment. Susan explained one initiative to get more seniors attending an event at one of the CCs:

> We used one of Winston Community Centre' buses and we provided the driver. We invited some of their members to come and take part in the event, so they had another bus. It was mutually beneficial where their members got to come for free and we got to access another bus to get more of our community members from this area over to Southside Community Centre (Year 3).

The cross-promotion of some seniors' events (e.g. a walking group field trip) has been so successful that the partners had to come to an agreement on how to split the profits. Profits are rolled back into the partners' organisations to support future seniors' programming.

Challenges (not sharing resources): Prior to launching the Hub, the partners recognised that they were failing to share resources and duplicating efforts. One frequently cited example was that two partner agencies, geographically close to one another, planned a Strawberry Tea—a theme-based gathering—on the same afternoon, targeting the same cohort of local seniors.

Solutions: This tea, which immediately preceded the launch of the Hub, was later a shared event and was an example of how they could move forward, as partners, potentially doing more for seniors by coordinating their efforts. Recognising this potential resulted in an enthusiastic buy-in from all of the partner agencies.

A strong leadership role

Our participants spoke strongly about the essential role of the Hub coordinator, the individual who plays the central role in bringing the partners together, and keeping them working together. The Hub coordinator undertook much of the e-mails, phone calls and hours spent organising meetings that were vital to the success of supporting and facilitating the growth of the collaboration relationships. As the Hub continued to grow, several participants, like Anna, recognised the sheer volume of work that the Hub coordinator oversaw in her efforts to launch the Hub:

> It's essential for the long term success of the Hub ... I don't see anybody being able to have the full-time hours to do the amount of meeting and coordinating that there is .... A lot can be done by volunteers, but there's a coordinating role that needs remuneration. One person's going to have to do it (Year 2).

While it is often assumed that collaborations can occur within the hours and existing funded positions, Anne emphasised the need for a funded coordination position to successfully launch the Hub.

Challenge (lack of organisational resources): Concern was expressed as to the amount of work required of the Hub coordinator. The Hub coordinator was a paid, full-time position and assisted by a part-time seniors' outreach coordinator. The Hub coordinator functioned as the cog at the centre of the Hub, and invested a significant amount of time and energy developing and supporting each line in the collaborations maps (Figures 1–4). The Hub coordinator participated in approximately 350 meetings per year; for the vast majority of these, the Hub coordinator was charged with calling, scheduling, drafting the agenda and chairing the meeting:

> I'm in awe of what [the Hub coordinator] is able to do, you know. Because they're human beings, they only have certain hours per week to do the job, right … one person has been maximized all over the map. And how she can keep track of all the things, you know, that's—she's doing…. But definitely for me it's kind of like a concern (Daniel, Year 2).

Solution: The Hub coordinator role was seen as essential for the success of the Hub and therefore the only solution highlighted was the value placed on funding this role. The Hub and partner agencies submitted additional grant applications in order to maintain ongoing funding for this role.

Discussion

Through several years of relationship- and collaboration-building, the Hub has come to better and more efficiently serve local seniors through the process of learning to share activities, share resources and more widely promote events. As a group, they moved from uncoordinated efforts, duplication of events and inefficient use of time and resources to a flourishing coordinated effort. The unwillingness to share resources is often cited as a reason for the failure of many collaborations (Grubbs, 2000). However, this was not an issue for the Hub partners due to the time spent in the initial phase of establishing a shared vision that allowed the willingness to share and try different approaches to grow. Consistently with community-based social work, a key step in the Hub development and resultant inter-agency collaboration included 'agreeing on core values, common goals and strategic plans allows partners to develop a common language, appreciate and acknowledge the experience of others' and respect diverse perspectives (Child Welfare, 2008).

Simultaneously, establishing effective communication at the beginning allowed the participants to report learning from one another, and having found 'a broader network of support' (Raj, Year 2). The collaboration literature emphasises having the right personnel (Gulzar and Henry, 2005; Weiss *et al.*, 2010), yet it is not just about bringing the right people

around the table. As noted by our participants, the real work happens once everyone around the table establishes and strengthens the relational ties necessary to function collaboratively. One of the key successes of the early years of the Hub was establishing this foundational 'shared vision'. Our findings from the interviews and collaboration maps demonstrate that this process requires an investment of both energy (*effective communication*) and time (*time to build relationships*). The participants spoke enthusiastically about getting to know one another, sharing their vision of service for seniors and learning from one another. While initiatives such as the Hub are often supported with a year of seed funding to get up and running, both the interviews and collaboration maps demonstrate the real collaborative efforts begin flourishing *after* the initial years of relationship- and collaboration-building take place. The programming outcomes achieved principally in Year 3 were predicated on the relationship- and collaboration-building that occurred in the first two years. Our findings highlight the essential role of longer-term funding to allow the processes necessary for collaborations to be built and become more established.

We see a high concordance between the annual collaboration maps and the annual interviews. Overall, the maps and interviews show a period of working together as a small group (Year 1) with challenges similar to those experienced by many collaborative efforts (e.g. Gulzar and Henry, 2005). Before the Hub could achieve many of their service outcomes, the group required two years to establish themselves, learn from one another, and develop a shared understanding of who they were as a group and what they were going to achieve together. This underscores the importance of outcomes beyond efficiencies to more affective, motivational outcomes such as staff satisfaction and trust that result in the collaborative process. Figures 2 and 3 demonstrate this period of strengthening, which preceded the period of expansion, evident in Figure 4. Collectively, our findings show a story of success, of organisations and individuals overcoming the oft-cited challenges associated with collaboration, and learning the process of accommodating culture, values and goals of existing facilities in order to more effectively work together to serve their local ageing population. In a context of dwindling budgets and an ageing population, their efforts provide a model worthy of emulation (the Hub's governance manual is available here: http://www.theseniorshub.org/uploads/1/1/4/2/11425458/governance-manual.pdf).

In addition, our findings demonstrate that sustainable funding for inter-agency collaborations must also include funding of a Hub coordinator position to ensure the management and organisation of strengthening partnership relationships over time. Our findings demonstrate the importance of having different types of staff and individuals involved in the collaboration process. Participants cited examples of

growth by pairing junior and senior staff, and by working with partners with different areas of expertise. Team diversity is essential when trying to reach under-served older adults (Alkema *et al.*, 2003). Social workers are particularly well positioned to take on a leadership role in facilitating this type of collaboration.

Longer-term evaluation plans must also be in place to track the evolution of collaboration efforts. Indeed, this was the vision of the group of organisations that funded the Hub: rather than supporting numerous smaller, short-term initiatives, they pooled their funds to create sustainable funding for one three-year project, which included a core evaluation component. Cross and colleagues (2009) have suggested that one of the reasons collaborations fail is because participants are not provided with appropriate, accessible and timely assessments of their collaborative efforts, thereby allowing for refinements and course-corrections. Our evaluation provided participants with ongoing, accessible feedback regarding their growing collaboration. Repeat interviews provided important discussion on participants' collaborative experience; they allowed the partners to reflect on their work and compare their experiences from year to year. For example, under the theme *time to build relationships*, Susan compares her experience from Year 2 with Year 1 and highlights the important role that time played in order to establish trust and partnership. Additionally, repeat interviews allowed timely feedback on the collaborative process; findings were shared in an anonymised, plain-language summary report and facilitated the collaborative process.

While the interviews provide the deep contextual information, the maps provide a strong visual representation which is easy to share and communicate with stakeholders. Over the years, the partners expressed their appreciation for the tool. They found the maps to be easily interpreted and useful in sharing information visually with all of their stakeholders, including older adult volunteers. Their funders also enjoyed seeing actual, tangible results of their collaborative efforts, through the reports that contained both the visual graphs and quotes from the interviews. Additionally, they appreciated seeing the links that weakened over time, with poorer ratings, because they then knew where to intervene or increase their efforts. However, the collaboration maps do not highlight the intricacies of humans and organisations learning to work together that are more fully and appropriately captured in the interviews. We suggest the use of both repeat interviews and collaborations maps in order to evaluate an inter-agency collaboration. Stahl and Shdaimah (2008) maintain that collaboration between academic researchers and community-based groups is, more generally, an effective way to study social problems.

Limitations

Although the university ethics committee approved the recruitment protocol, the recruitment procedures that we used could be construed as a form of coercion by having the Hub coordinator recruit participants. Prior to being recruited for interviews, however, it was the participants themselves who had requested the evaluation techniques that we employed. While we aimed to interview all participants at each stage, we were unable to do so due to administrative changes in roles and new hires. Additionally, the mapping can provide an effective way to represent the collaborative activities of the Hub and its partners; the findings are compromised by limitations including the assumption that the person completing the survey has all of the knowledge of how the agency collaborated with others. The key benefit of this tool, however, is that it is able to capture how each individual, be they a programme assistant or manager, *perceives* the development of the collaboration. It can be argued that assessing participants' perceptions of the collaboration is just as important and a more global, macro assessment of the Hub.

Conclusion

Our paper makes two distinct contributions. First, we highlight that successful collaborations are about a process that includes relationship building, sharing of resources and establishing a shared vision. This extends previous literature that focuses primarily on outcomes of collaborations as being the marker of success. Based on these findings, social workers, with training in community development/practice, are particularly well positioned to undertake the work of establishing and supporting collaborations like the Hub. Second, we offer a method for those involved in the establishment and assessment of collaborations to provide appropriate, accessible and timely assessments of collaborative efforts. This method includes the use of repeat interviewing and collaborative mapping. Taken together, the two provide a powerful narrative and visual record to communicate both to those involved in the collaboration and external stakeholders such as government or other potential funders.

Our findings show that inter-agency collaboration can indeed produce efficiencies, reduce overlap and help streamline services so that agencies can try to do more with less (Frey *et al.*, 2006) or simply do better by learning from one another. These efficiencies, however, do not absolve governments and funders from supporting those central coordination and evaluation positions that facilitate the collaborative efforts. Inter-agency collaborations to improve services for older adults in the community have been shown to have great potential. In order for them to

fulfil that potential, we need to continue to improve the knowledge base about how to how to implement community strategies, how to assess what is working and why, and, finally, how to ensure that all of the key actors make use of and apply that knowledge.

Acknowledgements

References

Alkema, G. E., Shannon, G. R. and Wilber, K. H. (2003) 'Using interagency collaboration to serve older adults with chronic care needs: The Care Advocate Program', *Family & Community Health*, **26**(3), pp. 221–9.

Cheadle, A., Senter, S., Solomon, L., Beery, W. L. and Schwartz, P. M. (2005) 'A qualitative exploration of alternative strategies for building community health partnerships: Collaboration-versus issue-oriented approaches', *Journal of Urban Health*, **82**(4), pp. 638–52.

Child Welfare (2008) *Interagency Collaboration*, available online at https://www.childwelfare.gov/pubPDFs/interagency.pdf (accessed 11 May 2017).

Chrislip, D. D. and Larson, C. E. (1994) *Collaborative Leadership: How Citizens and Civic Leaders Can Make a Difference*, San Francisco, CA, Jossey-Bass.

Cottarelli, C. (2012) 'The austerity debate: Make haste slowly', in *Austerity: Too Much of a Good Thing?*, availble online at http://voxeu.org/sites/default/files/file/austerity_ecollection.pdf (accessed 11 May 2017), pp. 39–44.

Creswell, J. W. and Miller, D. L. (2000) 'Determining validity in qualitative inquiry', *Theory into Practice*, **39**(3), pp. 124–30.

Cross, J. E., Dickmann, E., Newman-Gonchar, R. and Fagan, J. M. (2009) 'Using mixed-method design and network analysis to measure development of interagency collaboration', *American Journal of Evaluation*, **30**(3), pp. 310–29.

Ford, C. R., Henderson, J. and Handley, D. M. (2010) 'Enhancing long-term care for older adults: An exploration of interagency collaboration within geriatric education centers', *Journal of Health and Human Services Administration*, **32**(4), pp. 447–85.

Frey, B. B., Lohmeier, J. H., Lee, S. W. and Tollefson, N. (2006) 'Measuring collaboration among grant partners', *American Journal of Evaluation*, **27**(3), pp. 383–92.

Fulop, N., Protopsaltis, G., Hutchings, A., King, A., Allen, P., Normand, C. and Walters, R. (2002) 'Process and impact of mergers of NHS trusts: Multicentre case study and management cost analysis', *BMJ*, **325**(7358), pp. 246–53.

Grubbs, J. W. (2000) 'Can agencies work together? Collaboration in public and non-profit organizations', *Public Administration Review*, **60**(3), pp. 275–280.

Guba, E. and Lincoln, Y. (1989) *Fourth Generation Evaluation*, Thousand Oaks, CA, Sage Publications.

Gulzar, L. and Henry, B. (2005) 'Interorganizational collaboration for health care between nongovernmental organizations (NGOs) in Pakistan', *Social Science & Medicine*, **61**(9), pp. 1930–43.

International Federation of Social Workers (2012) *Ageing and Older Adults*, available online at http://ifsw.org/policies/ageing-and-older-adults/ (accessed 11 May 2017).

Koch, T. and Kralik, D. (2006) *Participatory Action Research in Health Care*, Oxford, UK, Blackwell Publishing.

Kubisch, A. C., Auspos, P., Brown, P. and Dewar, T. (2010) 'Community change initiatives from 1990–2010: Accomplishments and implications for future work', *Community Investments*, **22**(1), pp. 8–12.

Morse, J. M., Barrett, M., Mayan, M., Olson, K. and Spiers, J. (2008) 'Verification strategies for establishing reliability and validity in qualitative research', *International Journal of Qualitative Methods*, **1**(2), pp. 13–22.

Office of Policy Development and Research (2013) *Aging in Place: Facilitating Choice and Independence*, available online at https://www.huduser.gov/portal/peri odicals/em/fall13/highlight1.html (accessed 11 May 2017).

Osborne, S. P. and Murray, V. (2000) 'Collaboration between non-profit organizations in the provision of social services in Canada: Working together or falling apart?', *International Journal of Public Sector Management*, **13**(1), pp. 9–19.

Packard, T., Patti, R., Daly, D. and Tucker-Tatlow, J. (2013) 'Implementing services integration and interagency collaboration: Experiences in seven counties', *Administration in Social Work*, **37**(4), pp. 356–71.

Phillips, N., Lawrence, T. B. and Hardy, C. (2000) 'Inter-organizational collaboration and the dynamics of institutional fields', *Journal of Management Studies*, **37**(1), pp. 22–43.

Richards, L. and Morse, J. M. (2012) *Read Me First for a User's Guide to Qualitative Methods*, Thousand Oaks, CA, Sage Publications.

Salas, E., Sims, D. E. and Burke, C. S. (2005) 'Is there a "Big Five" in teamwork?', *Small Group Research*, **36**(5), pp. 555–99.

Seikkula, J. and Arnkil, T. E. (2006) *Dialogical Meetings in Social Networks*, London, Karnac Books.

Stahl, R. and Shdaimah, C. (2008) 'Collaboration between community advocates and academic researchers: Scientific advocacy or political research?', *British Journal of Social Work*, **38**(8), pp. 1610–29.

Teufel, J. A., Brown, S. L., Thorne, W., Goffinet, D. M. and Clemons, L. (2009) 'Process and impact evaluation of a legal assistance and health care community partnership', *Health Promotion Practice*, **10**(3), pp. 378–85.

United Nations, Department of Economic and Social Affairs, Population Division (2013) *World Population Ageing 2013*, Report No. ST/ESA/SER.A/348, available online at http://www.un.org/en/development/desa/population/publications/pdf/age ing/WorldPopulationAgeing2013.pdf (accessed 11 May 2017).

Van Eyk, H. and Baum, F. (2002) 'Learning about interagency collaboration: Trialling collaborative projects between hospitals and community health services', *Health & Social Care in the Community*, **10**(4), pp. 262–9.

Vogel, A., Ransom, P., Wai, S. and Luisi, D. (2007) 'Integrating health and social services for older adults: A case study of interagency collaboration', *Journal of Health and Human Services Administration*, **30**(2), pp. 199–228.

Weil, T. (2010) 'Hospital mergers: A panacea?', *Journal of Health Services Research & Policy*, **15**(4), pp. 251–3.

Weiss, E. S., Taber, S. K., Breslau, E. S., Lillie, S. E. and Li, Y. (2010) 'The role of leadership and management in six southern public health partnerships: A study of member involvement and satisfaction', *Health Education & Behavior*, **37**(5), pp. 737–52.