EVALUATING POLICY-DRIVEN MULTI-AGENCY PARTNERSHIP WORKING: A CANCER PREVENTION STRATEGY GROUP AND A MULTI-AGENCY DOMESTIC ABUSE FORUM

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ABSTRACT
Many health service policy directives encourage organisations to work in partnership rather than in competition, which has led to a plethora of partnership groups dealing with a wide variety of issues. This research evaluated two very different groups looking at how they had developed and how successfully they functioned. Results showed that one was more obviously successful than the other, but both evaluations highlighted difficulties with partnership as a panacea. Partners need time to develop relationships with each other before they can be ready to deal with some of the more difficult issues they inevitably face, e.g. does everyone have an equal voice round the multi-agency table and does everyone really need to physically be at the table? Ultimately it is important to keep evaluating partnership working for at least two reasons. Firstly to allow new partnerships to learn from the experience of others, and secondly to monitor the policy implementation with a view to determining what, if anything, partnership working is achieving, particularly from the perspective of the target group.

INTRODUCTION
Much has been written over the years about the advantages of people from different organisations working together. However this started to become a political imperative when the Labour government in 1997 fixed upon partnership as the ethos to replace the pseudo internal market arrangements that the NHS had previously been working under. In Scotland this was embodied in the ‘Designed to Care’ policy document (Scottish Office, 1997) and more recently in the Scottish Health Plan (Scottish Executive, 2000).

Partnership working frequently involves health and local authority colleagues coming together to tackle issues relevant to both. This recognises the potential for overlap, in spite of their separate responsibilities, but more importantly it allows all partners to learn from each other’s experience for the benefit of the client group. This is the theory at least, but there are questions about the reality of the policy implementation.

WHAT ARE THE QUESTIONS?
1. Are there expectations of what partnerships should achieve?
2. What kinds of partnership are developing?
3. Are there any new recommendations or is there a need to re-emphasise with
what could be viewed as a reinvention of partnership working?

4. Are there any dangers?

1. Are there expectations of what partnerships should achieve?

The issue of expectations is one of the most difficult questions to answer in relation to partnership working. Because partnership is viewed as inherently a good thing many organisations have been keen to sign up to the idea. Adding this to the policy imperative begs the question of how much analysis there has been about what partnership working is expected to achieve at an organisational level. In years to come will it be seen as a trend that was soon replaced, or will its impact have been so strong that the effects are still visible? This impact could go a number of ways, e.g. closer working leading to blurring of organisational boundaries or closer working leading to a celebration of organisational diversity and greater learning across the boundaries. Little is certain in this area, except that ongoing evaluation of partnership working is essential.

2. What kinds of partnership are developing?

It would not be a valuable contribution to contend that there are as many models of partnership as there are groups being convened. While there are undoubtedly variations between groups, analysis of the policy implementation must seek generalities. This paper presents some of the results from the evaluation of two separate partnerships, one a Cancer Prevention Strategy Group, the other a Multi-agency Domestic Abuse Forum. They were both based in the same geographic area in the West of Scotland, which minimises some of the variables, but they were very different in size (one was considerably bigger than the other) and mode of operation (one was much more formally constituted and run). There were a number of similarities in the evaluation results, as will be described below, but the responses to the findings were very different.

In order to draw out common themes, it is necessary to give some details of the evaluation results. However, these are not intended to be comprehensive and copies of the full evaluation reports are available from the authors.

a. The Ayrshire Cancer Prevention Strategy Group

This was a partnership between Health Promotion, the Primary Care and Acute NHS Trusts and colleagues from Local Authority Education and Environmental Health departments. The evaluation was designed to look at the consultation phase of the group's work. The methods used were

- feedback from public and professional consultation meetings
- feedback from non-attenders at the consultation meetings
- semi-structured interviews with the Cancer Prevention Strategy group
The semi-structured Interview schedule asked only about the consultation phase, but many of the responses clearly related to partnership issues. This was entirely unprompted.

Results specifically related to the consultation process showed that:

- Very few people attended the public consultation meetings. 85% of those who did were women, most had received a letter of invitation and many had a personal interest in cancer
- Non-attenders didn’t see the relevance of the consultation process for them, although timing of meetings was an issue for some people
- The mailing list used was a problem in that inappropriate people were included, the range of appropriate people was not wide enough, and parts of the list were out of date

All eight members of the strategy group participated in interviews and, as was mentioned above, many of the respondents volunteered information about the CPS multi-agency partnership itself. The results demonstrated that

- The group had no uniform view of purpose - six different aims of the consultation process were described by different members
- There was no consensus view on whether or not the group had reached agreement on a range of issues. These included who to consult, when to consult, what to do with feedback from the public, the need for a lay language version of the strategy, and the decision to separate the Cancer Prevention Strategy from the Smoking Cessation Strategy
- There had been many changes to group membership over time, including a new chair who had taken over in the middle of the work

**Partnership more than rhetoric?**

It was difficult to find evidence that this partnership was really engaging in the process beyond holding joint meetings and allowing all partner organisations a voice round the table. The number of interviewees who were unaware of any consensus on various aspects of the work indicated that all was not well, as did the high turnover in membership. The group was not communicating well, as evidenced by the fact that not all members were aware of the amount of work that had been undertaken by a sub-group organising the consultation process. This is not to say that the partnership did not do some interesting work, for example group members gave credit for attempts to organise the meetings at times and in places that might suit the public. However, it was telling that when the draft evaluation report was sent round the strategy group (as they had commissioned the work and agreed the methodology) the results were not fully accepted by the chair.
b. South Ayrshire Domestic Abuse Forum

This partnership had 24 members from health, local authority, voluntary organisations and the police. There were four strands to the evaluation; three were specific projects the Multi-agency Forum had set up (working with women and families in rural areas, additional security initiatives, and a training programme), and the fourth was looking at how the Forum itself had developed. The methods used were

- Working with women and families in rural areas
  - Attendance at the Women’s Day, analysis of feedback questionnaires, interviews with organisers
- Additional security project
  - Interviews with some of the women
- Training programme
  - Analysis of feedback questionnaires
- Development of the Multi-agency Forum
  - Questionnaire to all members, interviews with non-sleeping partners

The term 'sleeping partners' was used to describe those members who did not attend all Forum meetings, but who received relevant papers and could input to all decisions. A review of the minutes showed which were the sleeping partners.

Evaluation results from the three projects:

- The rural initiative was successful. The Women's Day was well-received and provided a means of introducing some ideas around domestic abuse into a rural area, where there are obvious sensitivities. It did, however, raise issues around how to capitalise on this start.
- In terms of additional security, some of the women who had received alarms described how their lives had changed. One innovative system that linked directly to the police station and activated a voice-recorder was particularly welcomed for allowing the women and children to stay in their own homes. Questions of sustainability remain.
- The training had clearly raised awareness among those attending and made them feel they wanted to do something practical to help. It was felt that some groups, conspicuous by their absence, could have been targeted, while others may need the input to be updated/reinforced in the future.

Evaluation of Multi-agency Forum Development:

- The Forum had agreed goals at outset and convened a number of sub-groups to do the work, with clear reporting back structures
- A series of successful projects had been set up. One criticism of this, however, was that these projects had developed some momentum of their own and that taking them forward was not always obviously focused on the
needs of the women and children for whom the Forum had been brought together

- The core membership of the Forum had been relatively stable for the two years of its existence
- Partners round the table did not feel they were all perceived as equal, either within the meetings or when they became aware of some decisions being made outwith the meetings

**Partnership more than rhetoric?**

This partnership seemed to have many of the right components for successful functioning. It had agreed aims and objectives at the outset and was communicating reasonably effectively. However, some tensions were apparent in relation to the view that the successful projects were taking precedence over a focus on the women and children, and the fact that some partners did not feel they had an equal voice. Real partnership working builds on an effective communication foundation, but it is not as easy an option as inter-organisational project management. In presenting the results of this evaluation to the Multi-agency Partnership Forum it was suggested they had a choice between building on their successful project work so far, or moving towards some of the difficult issues involved in real partnership working. It was interesting that the response to this was initially thoughtful, then antagonistic, but anecdotal evidence has shown that they are now making some fundamental changes to accommodate the concerns highlighted in the evaluation.

**Common themes and differences**

Both of the groups evaluated were communicating within the partnership, although with differing levels of effectiveness. The Cancer Prevention Strategy Group seemed to be reasonably effective during meetings, but the lack of consensus among group members on various issues showed that there were some problems with communication. The Domestic Abuse Forum had more clearly defined communication channels, but some members felt that their contributions were not always given equal weight. Perhaps the partnership’s communication processes had not reached a level of sophistication that could accommodate all views round the table.

The two partnerships had clear overall aims, which is a very important start for multi-agency groups, but group members differed in level of consensus on the aims (Cancer Prevention Strategy Group) and desire to question whether the work undertaken was meeting the aims (Domestic Abuse Forum).

The two groups had different views on their relative success. The Cancer Prevention Strategy Group members varied widely from those who felt they had done a good job, or at least the best they could in the circumstances, to those who fundamentally questioned some of the decisions taken by the group over
time. The Domestic Abuse Forum were generally agreed that the project work had been successful, although some of the members questioned whether this was all that the Forum should be concentrating on now.

The response of the two groups to the evaluation findings was very different. Some members of the Cancer Prevention Strategy Group felt the results were a valid reflection of their consultation process and how the group had functioned, but others did not fully accept the report. The Domestic Abuse Forum were initially receptive, but more thinking and questioning around the report led to some dissatisfaction with what had been found. Anecdotal evidence has since suggested that the communication processes for this group have been adapted since then to accommodate the initially less well-received evaluation results.

3. New recommendations or re-emphasise with the reinvention?

It did not appear that many of the evaluation results from these two groups were surprising or earth-shattering. Although the individual group members had different responses to the findings, they replicate many general themes that can be found in the partnership working literature (e.g. Leathard, 1994, Liddle & Gelsthorpe, 1995). However, this literature was not widely known among members of these multi-agency groups and it may be that there is a need to re-emphasise what things can help to make partnerships successful. This is highly topical, given the plethora of partnership groups that are being convened. And it is likely that some discussion of aims and objectives around these multi-agency partnership tables could also encourage debate about whether everything needs to be taken forward in partnership and what can be retained by individual agencies. It is to be hoped that improved inter-agency communication would not be a casualty of this kind of debate.

4. Are there any dangers?

There is a danger in the current climate that everyone is commanded to work in multi-agency partnership groups, even when this level of formalisation of routine inter-agency communication is not necessary. For this reason, debate around what makes partnerships successful and when they are needed should be encouraged.

Evaluation of the two groups described in this paper has shown that successful partnerships are at risk of people being attracted by the positive outcomes and maintaining involvement solely for association with them. Taking forward the successful initiatives can mean that the focus on the main aims of the partnership gets blurred and any dissent is marginalised. Moving forward in true partnership from this position requires some fundamental changes to be made.

Unsuccessful partnerships are often characterised by frequent turnover of members, or even resignation from the group. These partnerships are in great
danger of not achieving their goals, or struggling to achieve some progress with a limited number of active members, potentially leading to a downward spiral and dissolution. There are other reasons why some partnerships seem to be less successful than others, but adherence to the principles and recommendations in the partnership literature might help some of those who struggle.

One of the things that is widely known, but not always adhered to is the fact that it takes time to develop relationships with colleagues from other agencies. If multi-agency partnerships could be convened with longer timescales for achieving successful outcomes they may have time at the outset to agree what they are trying to achieve and get to know their new partners around the table.

References

Scottish Office (1997) *Designed to Care* Edinburgh: HMSO.