

Chapter 2: Collaborative capability

Key messages

Expanding the scope and nature of service delivery into community settings, and personalising support around the health and wellbeing of individuals, requires a workforce that is adept in collaboration.

Collaborative capability applies to individuals as well as to organisational culture and practice. The development of collaborative skills has to occur at both a micro and macro scale in order to be effective. The breadth and depth of collaborative capability across communities of practice, people, culture and place requires a focus on:

- values, behaviours and approaches
- new roles for brokers and specific skills around collaborative leadership
- the specific skills required to collaborate with people accessing services
- development of comprehensive and embedded networking practice
- increasing utilisation of resources to support collaborative capability
- commitment to skills support and training, professional opportunities, good human resource practice, and purposeful education to develop collaborative skill sets.

Introduction

The international and New Zealand literature on collaboration and integrated services emphasises that the MH&A sector needs support and access to better resources in order to develop collaborative capability (Hazel & Hawkeswood, 2016; Network 4, 2016; Platform Charitable Trust, 2012; Platform Trust & Te Pou o Te Whakaaro Nui, 2015; Roche & Skinner, 2005; World Health Organization, 2010).

Many health workers believe themselves to be practicing collaboratively, simply because they work together with other health workers (World Health Organization, 2010, p. 36).

Collaborative capability is essential for the MH&A sector to be able to:

- form mutual partnerships with individual people accessing services
- integrate across existing boundaries
- collaborate within communities.

There are pockets of innovative integrated service delivery across New Zealand¹ with evidence of the MH&A workforce and services collaborating well with and within their communities. Many other MH&A practitioners and services aspire to work more collaboratively, but are not sure how to start or what to put their time and energy into.

This section describes collaborative capability at an individual and organisational level. The focus on individual capability describes personal values, behaviours and approaches, including essential networking skills. It also

¹ See *On Track* (Platform Trust & Te Pou o Te Whakaaro Nui, 2015, p. 50) for emerging models of health and social service delivery in New Zealand. See also *More Effective Social Services* (New Zealand Productivity Commission, 2015) for a range of examples.

describes the features of collaborative leadership and specialised broker roles that sustain connections between partnerships.

Organisational collaborative capability considers the organisational culture and practice required to develop and sustain collaborative practice. Again the emphasis is on values, behaviours and structural approaches to collaboration. There are links to resources for readers to explore further. The section concludes with a description of ways to develop a collaborative skill set.

The key to collaboration is – in our humble view – humility. It is about exploring, unpacking and improving by working with others – inevitably an uncertain and somewhat messy process (Kippin & Fulford, 2016, p. 4).

Features of individual collaborative capability

The features of a workforce adept in collaboration apply across a wide range of types of partnerships and ways of relating. The World Health Organization describes a “collaborative practice-ready health workforce” that is ready and capable of working collectively in order to respond to complexity and emerging problems (World Health Organization, 2010, p. 20).

Collaborative capability described in the literature is a mix of values, behaviours and approaches that range from individual practice through to organisational culture and practice. This section starts with a review of attributes of individual practitioners and enablers of individual collaborative capability. It also looks at skill sets of brokers and the nature of collaborative leadership.

Values, behaviours and approaches

Values are a person’s principles or standards of behaviour: what is important to that person. Behaviours are the ways that a person conducts him or herself, or individual ways of working. There is some overlap between behaviours and approaches but in this context approaches are external mechanisms that enable an individual to practice collaboratively. Approaches are enabled through good human resource practice and a commitment by an organisation or by leadership to developing individual collaborative capability.

Table 1 outlines these individual features.

Table 1: Features of collaborative capability

Individual practitioner attributes		
	Attribute	Source
Values	Humility about what can be achieved alone and commitment to the benefits of mutual gain.	The Partnering Initiative, 2016b
	Commitment to equity, openness and trust, respect and diversity.	Allen and Clarke Policy and Regulatory Specialist Ltd, 2010; Partnership Brokers Association, 2016; State Services Commission, 2008
	Honesty and kindness.	Kippin & Fulford, 2016
Behaviour	Open to risk and innovation.	The Partnering Initiative, 2016b
	Flexibility and adaptability, particularly around decision-making.	Department of Internal Affairs, 2007; State Services Commission, 2008

	Respect for potential partners and motivation to connect and work with others.	Gray & Stites, 2013; Hanleybrown et al., 2012; The Partnering Initiative, 2016b; Whitehead, 2015
	Open to and can accommodate different points of view and alternative working styles. Appreciate the benefits of working in a team.	State Services Commission, 2008
	Able to actively seek out people of a similar mind and motivation.	Department of Internal Affairs, 2007
	Capacity to relinquish autonomy/equalise power and work for a greater good/social outcomes.	Bryson et al., 2006; Kippin & Fulford, 2016; The Partnering Initiative, 2016c
	Good relationship and communications skills, including open and frequent information sharing.	Allen and Clarke Policy and Regulatory Specialist Ltd, 2010; State Services Commission, 2008
	Capacity to work in inter-professional teams and with individuals, family, whānau, carers and communities.	World Health Organization, 2010
External enablers of individual collaborative capability		
	Enabler	Source
Approaches	Collective identity, purpose and vision.	Allen and Clarke Policy and Regulatory Specialist Ltd, 2010
	Clear roles and responsibilities to reduce tension and conflict and to enable cooperation.	Whitehead, 2015
	Space (commitment and resourcing) for negotiation and collaboration.	(Kippin & Fulford, 2016)
	Identification and development of “passionate and visionary staff” and strategic leaders.	(Allen and Clarke Policy and Regulatory Specialist Ltd, 2010; Department of Internal Affairs, 2007, p. 21; Hanleybrown et al., 2012, p. 8; Whitehead, 2015, p. 7)
	Access to good advice to support decision-making.	(State Services Commission, 2008)
	Development of a culture of learning.	(Hanleybrown et al., 2012)
	Opportunities to share what works.	(Prescott & Stibbe, 2016)
	Reduced internal compliance/removal of bureaucratic barriers to allow for creativity and risk taking.	(Thornley & Ball, 2015; Whitehead, 2015)

Brokers

There is varied terminology in the literature about the people who are best at making and sustaining connections between partners. The literature most commonly describes this role as a “broker” (Bryson et al., 2006; Courtney, 2007; Palinkas et al., 2014; Partnership Brokers Association, 2012) but variants of this role are also described as: “public entrepreneurs” (Institute of Policy Studies, 2008; Kippin & Fulford, 2016), “bridge

builders” (Waitakere City Council, 2009b), “system translators” (New Local Government Network & Collaborate, 2016), “partnership facilitators” (Prescott & Stibbe, 2016), “influential champion” (Hanleybrown et al., 2012) and “facilitative leadership” (Partnership Brokers Association, 2016).

There is considerable support in the literature for a broker-type role to contribute to the success of partnerships (Bryson et al., 2006; Courtney, 2007; Palinkas et al., 2014). *The Partnering Toolkit* describes a broker or intermediary as an individual (either internal or external) whose role is to “build and strengthen the partnership – especially in its early stages” (Tennyson, 2011, p. 19). The Partnership Brokers Association (2016, p. 22) survey of international partnerships highlighted that brokers are:

Critical to the successful navigation of contextual issues – in other words, to the way the partners and the partnership learn how to steer through contextual challenges and, sometimes, even how they can actively challenge and change the ‘rules of the game’.

Get Well Soon (New Local Government Network & Collaborate, 2016) describes a variant of the broker role as a “system translator” with an essential skill set to support a shift from service silos to systems outcomes. The report discusses the critical features needed to enable outcome-focussed collaboration at a local level.

System translators have an important, but often poorly appreciated skill set. They are found across professions, services and organisations and typically have career experience across sectors. They are comfortable working in the ambiguous spaces between silos or professional groups, or between public and private service provision. System translators are the glue in organisational relationships, or in the development of integrated services; they bring people together and hold them in place over time. They network instinctively, they build and maintain relationships, inspire trust and confidence, overcome inter-professional tension, and help others feel supported and able to commit to shared outcomes. They tend to be creative problem-solvers and are not constrained by existing boundaries or prior ways of doing things (New Local Government Network & Collaborate, 2016).

Research by the Partnership Brokers Association (2012, p. 36) assessed 250 logbooks maintained by brokers working in collaborative partnerships across a range of international multi-stakeholder contexts. They found that brokers had the most impact on:

- relationship-building and management
- modelling partnership skills and approaches
- supporting partnerships and partners through conflict and to expand the scope of collaborative work
- supporting and encouraging reflective practice.

They identified that the people in these roles are not necessarily leaders of a project, but noted the importance of knowing who they are in order to utilise their skills purposefully from an early stage. The Partnership Brokers Association has developed a broker role description adapted to different stages of the partnering cycle (outlined later in this review). Further information can be found on <http://partnershipbrokers.org/w/wp-content/uploads/2012/01/What-do-Partnership-Broker-Do.pdf>

Collaborative leadership

The UK-based collaborative think-tank (called Collaborate) has developed what it calls an *Anatomy of Collaboration* (Kippin & Fulford, 2016) specifically aimed at leaders in health and social services. Collaborate argue that the

Management 101: Be less coercive and more collaborative. Influence rather than direct. Focus more on people and less on numbers and results. Easy to say, difficult to master (Spreier, Fontaine, & Malloy, 2006, p. 72)

most significant shift in public service practice needs to be in modes of leadership. In particular, they argue that successful contemporary leadership must embrace complexity, non-linearity, devolved power, be systems-based, and committed to co-production of services with the people accessing them. The onus is on leaders taking more risks, being open to and supportive of new approaches, modelling collaborative behaviour, and building opportunities for collaboration into everyday practice. Collaborative leadership accepts not knowing all the answers, and promotes and models asking questions instead. Collaborative leadership incorporates both leading from the front and leading from within.

Leading from the front

Leaders set the culture for the whole organisation. If an organisation aspires to be more collaborative, then its leaders need to model collaborative and community-building behaviour to support the development of these practices across the wider organisation (Alton, 2015; State Services Commission, 2008). Collaborative leaders provide legitimacy and mandate for change (Department of Internal Affairs, 2007; State Services Commission, 2008). Collaborative leaders are adaptive (Collaboration for Impact, 2016), they “foster environments that are flexible, open, with a strong sense of purpose” (Whitehead, 2015, p. 7) and take “responsibility for convening stakeholders and facilitating agreements for collective action” (Fitchett, 2016, p. 68). Collaborative leadership is non-hierarchical and inter-organisational (Collaboration for Impact, 2016; Fitchett, 2016, p. 68). Collaborative leaders help maintain momentum, they must be able to push the thinking of other strategic partners, particularly when there is conflict or differences in organisational values and culture that threaten to derail projects or partnerships (Collaboration for Impact, 2016; State Services Commission, 2008, p. 17).

A social neuroscience approach to collaboration reinforces these ideas and clarifies that different styles of leadership promote or prevent positive engagement (including collaboration) in a workplace. Employees with a more positive mind state have improved problem solving skills, are able to collaborate better and generally perform better in the workplace (Frederickson, 2001, and Jung-Beeman, 2007; cited in Rock, 2008, p. 3). The SCARF model explains how perceived neurological threats or rewards play out across five social domains: status, certainty, autonomy, relatedness and fairness. The model highlights the features of leadership that are likely to promote or prevent collaborative behaviour.

Leaders who make an employee feel good about themselves, have clear expectations, allow autonomous decision-making, trust their staff and are fair, are much more likely to foster an environment of commitment, creativity and innovative problem-solving. Conversely, a leader who provides a lot of direction, but little positive feedback, reduces certainty through lack of clarity, undermines autonomy through micro-management, is aloof and lacks transparency in decision-making, will be much less likely to generate a productive, creative and innovative working environment (Rock, 2008).

Leading from within

The collaboration literature emphasises that a collaborative workplace has multiple types of leadership spread across an organisation, rather than just at the front (Hanleybrown et al., 2012; Inspiring Communities, 2013a; Kippin & Fulford, 2016; Tennyson, 2011). Inspiring Communities describe this as being “leaderful”, where “power is distributed, shared and where leadership comes from many corners of the community” (2013a, p. 7).

Tennyson (2011) acknowledges the challenge of being a “leader”, in a context that is based on collaboration, equity, and shared responsibility. The challenge is resolved through a broader understanding of leadership roles that may include:

- being guardian of the partnership’s mission

- coaching partnership behaviour
- challenging established ways of thinking or doing things
- empowering others to act, innovate, make mistakes
- fostering optimism when facing challenges (p. 20).

This leadership narrative shares obvious links with the broker skill set, and a number of authors see the development of the broker skill set as a critical way of developing collaborative leadership skills within and across an organisation (Adebowale et al., 2015; Hanleybrown et al., 2012). Hanleybrown et al (2012) describe an “**influential champion**” (or group of champions) who have the leadership skills to bridge gaps between services, organisations, or sectors, to coalesce and maintain critical relationships over time, and to remain focussed on outcomes, but allow individual stakeholders the opportunity to innovate and create solutions to the problem or complexity at hand. Kippin and Fulford (2016) describe a “**public entrepreneurship skill set**”, which they argue needs to be developed to better leverage resources, improve decisiveness of decision-making, and create a more nimble and innovative workforce. The authors state that the development of this workforce skill set is important for spreading the “**narrative about leadership beyond a cadre of existing heads-of-organisations**” (p. 10).

Chapter 4 of *Inspiring Communities’ Learning by Doing* (2013a) focuses exclusively on the more nuanced ways that leadership plays out in community contexts. The chapter contains many links to other resources and can be accessed on: <http://inspiringcommunities.org.nz/wp-content/uploads/2015/10/Learning-By-Doing-chapter-4-leadership1.pdf>.

Networking matters

All collaborative partnerships or innovative service developments start with people making connections, valuing what others have to offer, and sharing ideas. The very point of working together is that you can achieve more when you are working collectively than you can on your own. A collaboration-ready workforce is able to network intuitively and organically, and prior networks are a crucial antecedent for the development of collaborative partnerships (Allen and Clarke Policy and Regulatory Specialist Ltd, 2010; Bryson et al., 2006, p. 46; Department of Internal Affairs, 2007, p. 21; Hazel & Hawkeswood, 2016).

The New Zealand Government push for health and social services to collaborate more is geared towards an end goal of more integrated services (New Zealand Productivity Commission, 2015; Platform Trust & Te Pou o Te Whakaaro Nui, 2015). However, not all organisations are ready to collaborate, or their environment is not conducive to collaboration. In fact, the literature universally cautions against collaborating for the sake of it, largely because of the time and energy costs, which may outweigh the benefits (Hazel & Hawkeswood, 2016; State Services Commission, 2004, 2008). Instead collaboration should be purposeful and oriented towards particular and explicit outcomes (Hazel & Hawkeswood, 2016; State Services Commission, 2004; Waitakere City Council, 2009a).

Networking, on the other hand, should be a fundamental part of everyday practice. Networking is typically informal, it is based around sharing information and building relationships, it is about knowing who is in your community and what they are doing (Waitakere City Council, 2009b). Networking also builds trust, it provides opportunities to share expertise, learn what others are doing, and learn from others, without necessarily altering what you are doing locally (Hazel & Hawkeswood, 2016). Networking lays the groundwork for more complex and involved partnerships further along the collaborative continuum (Allen and Clarke Policy and Regulatory Specialist Ltd, 2010).

There are some disadvantages to networking, particularly when more formal partnership approaches are called for or when specific outcomes are sought. Research on networking within the UK National Health Service highlighted disadvantages with the clinical networks studied including:

- too many meetings and not enough output
- weak focus (in the absence of clear targets and milestones)
- limited momentum (particularly in the absence of resources to support relationships, including broker skills)
- domination by particular professional groups (Ferlie et al., 2010; cited in Ham & Alderwick, 2015, p. 27).

From an everyday perspective, good networking doesn't have to be complex or difficult, but it should be about investing in relationships as the basis of everything you do. The following are some basic networking skills to consider as a starting point.

- Start small – relationship building takes time and energy and practice.
- Improve relationships and networking within your own organisation.
- Communicate well – internally and externally.
- Be culturally responsive – prioritise your personal and organisational cultural responsibilities towards other stakeholders.
- Have soft doors – as an organisation be open, permeable, transparent and welcoming; make it easy for others to approach you.
- Practise and understand *kōrero kanohi ki te kanohi* as a preferred way of communicating (O'Carroll, 2014).
- Have obvious and easily navigated points of contact for yourself or your organisation – across a range of platforms.
- Always respond to communication coming in, and expect the same of other organisations – **don't be a black hole** that information disappears into.
- Make the most of opportunities to network with others – give and get invitations.
- Get out of your office or usual workspace and into your community.
- Know your networks – of people accessing services, providers, agencies and support networks.
- Identify who you want to get close to and purposefully make connections with them.
- **Know your organisation's reputation** – find out what people, community stakeholders and other providers think about how they are treated by your organisation and their service experience, and what they think you could do to improve things.
- Seek feedback and treat complaints as a positive opportunity to improve.

The Community Tool Box (Work Group for Community Health and Development, 2016) resource established by the University of Kansas has good advice on basic networking and relationship building. See Chapter 24 on <http://ctb.ku.edu/en/table-of-contents>

The Department of Internal Affairs *Good Practice Participate* resource (2014) has guidance for organisations on how to work with specific population groups and where to go for advice and support. See [http://www.communitymatters.govt.nz/vwluResources/Good_Practice_Participate_Working_with_Specific_Groups/\\$file/GPP_working_with_specific_groups.pdf](http://www.communitymatters.govt.nz/vwluResources/Good_Practice_Participate_Working_with_Specific_Groups/$file/GPP_working_with_specific_groups.pdf)

Collaborating with people accessing services

The Australian Co-design Initiative (2016) has developed a resource to support co-design processes in the MH&A sector. The principles and practice described in the resource outline fundamental skills required to

collaborate with people accessing MH&A services. The skills listed are mirrored in the broader collaboration literature. However the difference is that the Co-design Initiative resource is specifically tailored around working with citizens, whereas the broader literature tends to focus on collaboration between workforce groups, services, organisations and sectors.

Some of the key co-design skills described by the Co-design Initiative (2016) include:

- having honest conversations between all the people involved
- sharing, listening to and valuing stories of personal experience
- meeting face to face
- allowing time to build relationships and trust
- understanding that solutions come from an inclusive process and mindset
- allowing for very open dialogue
- involving lots of people and using peer networks extensively
- providing flexibility around ways for people to be involved
- developing common ground and learning together.

All of these features are central to the collaborative capability required for partnerships with people accessing services.

Features of organisational collaborative capability

Values and behaviours

Collaborative organisations must focus on developing and strengthening relationships inside their own organisation, as well as with external stakeholders. This necessarily means focusing on internal values, being explicit about what those values are, and what they should be (Kippin & Fulford, 2016, p. 8). These findings are echoed in the State Services Commission (2008)

The successful organisations of the future will be highly collaborative across disciplines, flatter, highly connected, open to experimentation, learning and considered risk-taking, very outward-facing, and able to co-create value with other organisations (Whitehead, 2015, p. 14).

report on collaboration: organisations that can collaborate internally will be much more successful in partnerships with external agencies. This internal emphasis applies to organisational culture and work practice, as well as **individual capability**. **Organisations must be able to continually assess the “degree to which they are organisationally ‘fit for partnering’ and take steps to adjust and continually improve”** (Prescott & Stibbe, 2016, p. 9).

There are consistent features identified in the literature about what makes a partnership or collaboration process successful, and what can cause a partnership to fail. Alignment around a common vision and shared goals is often a time-intensive process but is critical to the success of collaborative projects (Hanleybrown et al., 2012; Huang & Seldon, 2014; Palinkas et al., 2014). The beginning processes in a collaborative project are arguably the most important, but also the most time consuming (Department of Internal Affairs, 2007). Establishing solid relationships between collaborative partners is a crucial part of the partnering process, which is why prior networks are so important, but the groundwork laid at the start of a process is often the key to long-term success (Department of Internal Affairs, 2007; Hazel & Hawkeswood, 2016).

Mattesich and Rausch (2013) surveyed professionals working in health, education, social services, housing, transportation and community development finance, to identify the factors that underpin successful cross-

sector community health initiatives, and the obstacles that prevent collaboration between the health and community sectors. All interviewees were employed by organisations with a focus on improving community health outcomes. The researchers followed the survey with in-depth interviews across 27 organisations.

The respondents identified three factors that they believed most strongly influenced collaborative success:

- skilled grassroots and organisational leadership
- mutual respect and understanding among partner organisations
- a shared vision and common goals.

Respondents also identified that community engagement and relationships were critical to project success. Inadequate funding and resources were identified as the most significant barriers to the success of collaborative projects.

The Partnership Brokers Association (2016) surveyed international partnerships to assess the critical features of working collaboratively. Its research focussed on ways that partnerships brought about transformational change **through a controlled process of “creative dissent”**. Its tips for helping create more transformational partnerships are as follows:

- develop a culture of reflection (and efficiency through reflection)
- communicate continuously and imaginatively
- use real examples – to develop confidence and risk taking
- ask lots of good questions (instead of having answers)
- make everything outcome-based
- build collaborative capability
- encourage openness and bravery
- explore divergent views as opportunities for innovation
- allow space and time for ideas and solutions to emerge
- be aware that partnership is not the only mechanism to bring about change (p. 27).

Structural approaches

More formal features of collaborative organisations include clear communication strategies; conflict resolution policies (including a problem-solving orientation); effective use of agreements; shared decision-making processes, including forums to identify, discuss and resolve differences – all identified and implemented early in the process and maintained throughout the stages of partnerships (Hurlburt et al., 2014, p. 167; Palinkas et al., 2014, p. 20; Victorian Health Promotion Foundation, 2001; World Health Organization, 2010). Clarity around what each party brings to the table is also important, particularly around capacity (time, financial and human resources, backroom and technical support) (Braunstein & Lavizzo-Mourey, 2011).

Other structural approaches include, effective governance and other accountability mechanisms (Allen and Clarke Policy and Regulatory Specialist Ltd, 2010), clarity of process through the use of policies, procedures and agreements (Allen and Clarke Policy and Regulatory Specialist Ltd, 2010), clarity around ways of working (Hanleybrown et al., 2012), and **ongoing review of the partnership’s success** (Bryson et al., 2006; Tennyson, 2011).

The Stanford Social Innovation Review of collective impact projects identified two key structural elements that **hold collaborative partnerships together: “backbone organization” and “cascading levels of linked collaboration”** (Hanleybrown et al., 2012, p. 6). A **“backbone organization” provides strategic leadership and infrastructure,**

including relationship support, communication, funding, and information management functions. The leadership function provided by the backbone organisation has to manage the tension between spearheading an initiative, and behind the scenes coordination that opens out opportunities for other partners to drive innovation and change. Fitchett (2016) describes this as leadership having a stake in agreeing outcomes and encouraging divergent ways to reach those outcomes.

“Cascading levels of linked collaboration” describes use of an oversight group or steering committee to oversee the development of a common agenda and strategic framework, with separate working groups developed to work separately on specific goals, but coordinating with other working groups and the oversight group (Hanleybrown et al., 2012, p. 12).

Success and longevity in partnerships is about ongoing evaluation of the success of a partnership and whether outcomes have been met (Allen and Clarke Policy and Regulatory Specialist Ltd, 2010; Bryson et al., 2006). Bryson et al.’s (2006) review of successful cross-sector collaborations identified partnership resilience through consistent review of what is working. The authors showed collaboration is more likely to be successful where there are accountability systems that track inputs, processes and outcomes, using a variety of data methods, and built on strong relationships with constituencies. The authors recommend always celebrating successes, big and small, and the importance of publicising those successes to keep internal and external stakeholders engaged. Allen and Clarke (2010) recommend use of agreements to guide conflict resolution, accountability, success criteria, outcome measurement and stakeholder turnover.

The Partnering Initiative state that a successful partnership should be able to demonstrate either that it has **achieved what it set out to do; that it is “having impact beyond its immediate stakeholder group”**; that it is sustainable, either through ongoing commitment by stakeholder organisations or evolution into another mechanism or form; and finally, that it has added value to partners through learning or improvements to systems, or through transformational change (Tennyson, 2011).

Palinkas et al (2014) reviewed inter-organisational collaboration between Californian agencies. The authors identified internal and external features that most influenced the successful provision of wrap-around services for at-risk youth. The review was based on interviews with providers of probation, mental health and child welfare services in a randomised control trial to scale up the use of evidence-based multidimensional treatment. The researchers identified key success characteristics of participating organisations and individuals. They described **an organisational culture of collaboration (the “inner context”)** as containing the following characteristics:

- a common language
- shared recognition of the problem
- shared goals and values
- commitment to innovation and change
- accountability – through a range of mechanisms
- interpersonal relations and social ties
- willingness to serve as a broker or advocate
- supportive leadership
- a reputation for honesty, trust and respect.

The research showed that organisations need a commitment to innovation and change, and a policy framework that supports transparency and accountability.

Ways of developing a collaborative skill set

The literature is less resolved around how to develop collaborative capability. Part of the complexity around developing collaborative skills is **that it's best to learn by doing, and if sectors generally are not behaving in particularly collaborative ways, then it is more difficult for practitioners to develop collaborative capability.**

The literature describing ways to develop a collaborative skill set focuses primarily on workforce development opportunities. There is some emphasis in the literature on ways of developing a partnership culture in an organisation, with very little literature on how to develop capability around partnerships with people accessing services. See the Networking Matters section in this literature review for recommendations on building relationships in communities with a range of stakeholders.

The five key collaborative workforce development areas identified in the literature are:

- inter-professional education
- skills support and training
- shared learning opportunities
- good human resource practice
- formal education opportunities

Inter-professional education

The World Health Organization has written extensively on the role of inter-professional education in developing a collaborative practice-ready workforce. The World Health Organization argues that inter-professional education is essential to the development of the collaborative capability needed to respond to increasingly fragmented service delivery and complexity of need. **Inter-professional education aims to “shift the way health workers think about and interact with one another”, this in turn changes workforce attitudes and organisational culture in a way that impacts positively on the end user of health services** (World Health Organization, 2010, p. 22). A substantial body of evidence exists to show that inter-professional education contributes significantly to improved teamwork, clearer understanding of roles and responsibilities, improved communication, better learning and critical reflection skills, enhanced capability around building relationships with and recognising the needs of the person accessing services, and more ethically-based practice (p. 26).

Part of the World Health Organization's focus in the development of collaborative capability includes identifying the necessary practice-level mechanisms to support this capability. The remainder of this section highlights what services or organisations can do locally to improve workforce and organisational collaborative capability.

Skills support and training

Skills support and training in collaborative leadership, communication and relationships are crucial components of the development of collaborative capability (Mattessich & Rausch, 2013). Essential collaborative skills training includes improving team performance through development of skills such as appreciating others, being able to engage in purposeful conversations, and how to productively and creatively resolve conflicts (Gratton & Erickson, 2007).

Opportunities to develop partnership skills are increasing with the growth, particularly in the context of sustainable development goals, of organisations focussed on building collaborative capacity and providing training for partnership brokers. Prescott and Stibbe (2016) describe these as **“capacity building organisations”**

that provide partnership effectiveness training for individuals and partnership development for organisations (p. 13).

For example, the Partnership Brokers Association specialises in partnership skills development and support for “partnering process management” across a range of sectors (Partnership Brokers Association, 2016). It provides training opportunities in New Zealand, see: <http://partnershipbrokers.org/w/training/>.

Provision of brokering services at an organisation or sector level is growing internationally. OLM Systems in the UK is an example of a specialist organisation working specifically in the care industry to develop integrated systems, to support change in organisation culture and behaviour, and provide support around working in partnerships (OLM Systems, 2016).

Shared learning opportunities

An additional mechanism for developing a collaborative skill set is through shared learning opportunities, and this can take a number of forms. Coaching and mentoring is critical to developing collaborative behaviour (State Services Commission, 2008), and the more coaching and mentoring is embedded in everyday activities and across an organisation, the more likely it is to increase collaborative behaviour (Gratton & Erickson, 2007).

If you’re encouraging learning by doing, you have to also have facilitated sharing of learning, so that people get enough experience to understand what the issues are, and there is a network of peers who can share learning with one another (Prescott & Stibbe, 2016, pp. 6-7).

Shared learning can also occur through more formal networks for disseminating successful collaborative practice. This can be face-to-face through local groups, or at a distance through an online repository of good practice (Braunstein & Lavizzo-Mourey, 2011). Oxfam’s approach to shared learning is to bring in outside people with wider experience to share new ideas and bring fresh perspectives (Whitehead, 2015, p. 8). The effects of sharing good practice and new ideas are twofold. They provide an opportunity for reflection for practitioners, to think about ways to enhance an existing collaboration, based on input from others. They also provide motivation to others to build their own collaborative opportunities (Mattessich & Rausch, 2013).

Shared learning can also include support around the technicalities of funding opportunities and programmes and other operational issues, as well as opportunities to learn and train in a cross-sectoral way (Mattessich & Rausch, 2013).

Good human resource practice

Good human resource practice is also central to developing a collaborative skill set. *The Anatomy of Collaboration* describes how human resource systems can help align organisational culture with everyday collaborative good practice. The authors describe a very real tension for workers when they are faced with “acts of betrayal” against their organisation “in order to do what is needed and support citizens properly” (Kippin & Fulford, 2016, p. 8). The authors argue for a shift in emphasis away from the “organisational logic” that drives unethical decisions, to a system that rewards values- and outcomes-based career choices.

Two things are needed: first career arcs and workforce strategies that more explicitly value cross-sector experience and social innovation ... second, a more nuanced form of performance management that can create incentives for individuals to adapt and collaborate (Kippin & Fulford, 2016, p. 8).

The *Get Well Soon* (New Local Government Network & Collaborate, 2016) authors argue that there is insufficient development of the broker or system translator skill set across the public sector; and that brokers

tend to fall into collaborative processes by accident, rather than being purposefully identified, developed or recruited for particular projects. *Get Well Soon* outlines a number of ways to establish and grow this capability through good human resource practice.

- Identify the skill set and develop through:
 - performance management competencies and capabilities
 - education and training
 - workforce planning and recruitment strategies.
- Create opportunities for role expansion through:
 - job-swapping between partner organisations
 - job role flexibility beyond core tasks and service or organisational scope to focus on wider outcomes
 - networking between wider workforce teams to allow expanded engagement, issues resolution, and development of integration practice (New Local Government Network & Collaborate, 2016, p. 59).

Formal education opportunities

The role of formal education in developing collaborative capability largely gets picked up in the inter-professional education literature. *The Anatomy of Collaboration* (Kippin & Fulford, 2016) describes universities and other sector bodies as critical partners in efforts to support the shift to collaborative practice and to get **public sector organisations thinking outside of their usual “service lens”**.

Deakin University in South Australia has developed a graduate profile that applies to every graduate, regardless of his or her course or professional affiliation. The profile describes learning outcomes based on sets of **knowledge and capabilities that build on graduates’ discipline-specific expertise**. The intention is to prepare and support graduates for employment and life-long learning in complex, changing, inter-disciplinary and globalised work environments. Table 2 shows a summarised version of Deakin’s graduate learning outcomes.

Table 2: Deakin University graduate learning outcomes

Learning outcome	Features
Discipline-specific knowledge and capabilities	At an appropriate level related to a specific discipline or profession
Communication	Oral, written, interpersonal communication to inform, motivate, and effect change
Digital literacy	Use of technology to find, use and disseminate information
Critical thinking	Evaluation of information using analysis and judgement
Problem solving	Creating solutions to real world and complex problems
Self-management	Independent working and learning and self-responsibility
Teamwork	Working and learning with others from different disciplines and backgrounds
Global citizenship	Ethical and productive professional engagement with diverse communities and cultures

Source: Deakin University (2016).

Deakin's graduate profile presents a useful way of thinking about what capabilities services might expect of their workforce, outside of traditional professional competencies. A local example of this in action is the work of Ko Awatea at Counties Manukau District Health Board. Ko Awatea's mandate is to explore and create opportunities for proactive health promotion through development of leadership and innovative thinking, change programmes and continual improvement of existing systems. Ko Awatea hosts an education centre and provides workforce development opportunities (Ko Awatea, 2015).

Some key resources to support the development of collaborative capability

The Partnering Initiative has developed a range of tools to support organisations to develop their collaborative skills and to ensure the success of partnerships. Of particular note is their Fit for Partnering Framework (The Partnering Initiative, 2016b) that gives an overview of the key components of an organisation's ability to partner. The framework can be accessed at: <http://thepartneringinitiative.org/tpi-tools/the-fit-for-partnering-framework/>.

The Partnering Initiative (2016a) has also developed a summary tool of twelve steps of successful partnerships, which can be found on <http://thepartneringinitiative.org/tpi-tools/12-steps-towards-successful-cross-sector-partnerships/>. Table 3 shows the 12 steps.

Table 3: 12 steps towards successful cross-sector partnerships

1. Understand the issue	2. Know and respect your partners
3. Knowledge and skills	4. Clear partnership objectives
5. Start small and scale up	6. Partnering agreements
7. Organisational commitment	8. Project management
9. Relationship management	10. Strong communication
11. Ongoing review	12. Planning for the longer term

Source: The Partnering Initiative (2016a).

The Australian Government is focusing on innovation in the Australian public service. The emphasis is on supporting organisations to identify good ideas and to implement frameworks that allow those ideas to progress into new ways of thinking, changes in practice and improved systems. The rationales for encouraging innovation includes citizen and stakeholder expectations about how publically funded services behave and act. **The assumption is that innovation “flourishes in an environment of openness and collaboration” and that** improved engagement with people accessing services, communities of practice, and other stakeholders enables better problem identification, access to a broader range of insights, and more innovative solutions (Department of Industry, 2011 n.p.). The Public Sector Innovation website has tools for assessing organisational innovative capacity (Department of Industry, 2011). See <http://innovation.govspace.gov.au/tools/>.

The NZ Navigator (2016) is an online tool that allows community organisations to self-assess their organisational infrastructure and guides decision-making to improve organisational effectiveness and efficiency. It includes review domains around communication (connecting with others) and relationships (collaboration, partnerships and working effectively with others). The tool can be accessed on <https://www.nznavigator.org.nz/>.

The Community Tool box (Work Group for Community Health and Development, 2016) is an online tool developed by the University of Kansas to support community health and development. The toolbox includes toolkits around supporting partnerships, development of leadership, management and facilitation, and resources for community development. The toolbox can be accessed on <http://ctb.ku.edu/en>

Collaboration for Impact (Collaboration for Impact, 2016) is an Australian community of practice and online **collaboration toolkit**. **The resource builds on Kania and Kramer’s (2011) work on collective impact.** The resource includes comprehensive support around developing organisational collaborative capability. The resource can be accessed on www.collaborationforimpact.com.

Conclusion

The development of collaborative capability across the MH&A sector requires a concurrent macro and micro focus in order to be effective. Collaborative capability applies to individual practitioners, at the level of workforce development, and at an organisational system level. An emphasis on all three approaches is required in order to develop partnerships with citizens, across traditional boundaries and multiple contexts.

There are key broker and leadership roles that are central to any collaborative endeavour. But all organisations that want to be better at collaborating should start by looking at their own internal organisational values and their capacity to network well with others. Good human resource practice is essential to good collaboration. An understanding, and valuing of the skills required to collaborate well, and an expansion of ideas about collaborative leadership should form the basis of organisational practice.

There is an expanding range of resources available to support individuals and organisations to collaborate well and the opportunities for collaborative workforce development are expanding as many sectors and interests embrace collaboration as a mechanism to respond to the complexities of need and increased demand for services. The next section explores in more detail the technical resources available to support the development of collaborative capability.