Are there any unintended consequences of service integration to consider?

A study of early years sector perspectives

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THIS STUDY WAS PART OF a broader project to identify best practice models for an integrated early childhood service being delivered as part of a new community service precinct. The planned development will integrate residential development, places of work, a 'town square' and community services and infrastructure. Semi-structured interviews with 11 internal and external stakeholders informed discussion of opportunities and risks as part of the development of an integrated early years' service model. Overall results indicated general agreement regarding understandings of integrated practice and implications for the proposed model. Key informants emphasised potential community benefits and the importance of place-based approaches, as well as governance issues, organisational considerations, change management issues, workforce issues and the importance of effective leadership. Despite a paucity of available guidance in the published literature, a number of key risks were identified, which as discussed, suggest greater consideration and investigation of possible unintended consequences is required.

Introduction

This research was undertaken as part of a broader project commissioned by a community-based organisation seeking to identify best practice approaches to delivering an integrated early childhood service as part of a new community service precinct and residential development. For the purposes of the current project, the organisation broadly defined integration as a single geographical location where all care and support services work together as far as practicable, to positively impact community members. In this context, integrated early childhood services refer to local services delivering integrated early education and care for children, alongside parenting, family support and health services, links to employment opportunities and other community resources, including multi-agency and community partnerships (e.g. Aubrey, 2007; Corter, Janmohamed & Pelletier, 2012).

The organisation had acquired a 'greenfield site'— 'a blank slate' for which they were enthusiastic about harnessing the energies of the organisation and community to create a visionary master-planned development for children, families and the wider community. In addition to integrating residential development, retail and other places of work,

the organisation sought to integrate community service programs, including a range of early years' services. This included identifying opportunities to integrate day care, flexible care and other early childhood, family support and health and community service activities to improve access to services and supports available to the community. The organisation's vision therefore emphasised place-based, program-based and workforce integration.

For a number of years now, international and domestic policy approaches have reflected the need for practitioners and professionals to be prepared to work in integrated, transdisciplinary settings (e.g. COAG, 2006; FaCIA, 2004; OECD, 2006; Queensland Department of Communities, Disability Services and Seniors, 2006). Increasingly, however, it is recognised that working in integrated settings can be complex and challenging. As a result, reflective practice approaches have been emphasised in order to increase understanding and build consensus across disciplines and with partners (Cartmel, Macfarlane & Casley, 2012; DETE, 2013).

Moore and Skinner's (2010) review of the evidence-base for integrated practice in the early years suggests four levels of integration are required. This includes policy

integration, local integration of planning, service delivery integration and integration of teams and professional roles. The degree to which these are achieved are reflected in a continuum of joined-up service arrangements increasing in relationship intensity from co-existence, to cooperation, coordination, collaboration and integration (Moore & Skinner, 2010).

Several characteristics of effective integration of early childhood services are identified in the literature. These include a universal and inclusive service base, using multiple entry points and ‘soft-entry’ points where core services are available to everyone and are inclusive, non-stigmatising and welcoming, as well as assertive outreach programs to engage key target groups. Integrated services provide a mix of strategies and interventions in a range of formats to meet community needs; in particular, vulnerable families (e.g. Macfarlane, Nolan & Cartmel, 2014; Moore & Skinner, 2010; DETE, 2013; Wong, Sumsion & Press, 2012). Integrated service networks with coordinated local planning and governance, including hub models, community-based partnerships, community engagement and capacity building and creation of supportive community environments are also identified as critical components of an integrated service delivery model (e.g. ARACY, 2011; McFarland-Piazza, Allen & Webb, 2013; Moore & Skinner, 2010; Wong et al., 2012).

While the complexities of integrated service arrangements are widely acknowledged in the literature, there appears to be an absence of empirical investigations regarding some of the risks or unintended consequences that may warrant consideration. Indeed, a search of the literature for the risks or unintended consequences of integration in the early years revealed no such evidence existed at the commencement of this research project. There remains a paucity of guidance in the published research for initiating change at the whole-of-community level, let alone any specific guidance to minimise any unintended consequences or associated risks that should be considered. An exploration of early years’ sector perspectives of integrated practice and some of the benefits and associated risks were therefore explicit focuses of this study.

Methods

The scope for the literature review undertaken was identified by the community organisation leading the project who also nominated specific international and national models of interest. Database searches including Web of Science, JSTOR and Auslit were undertaken using the search terms ‘integration/integrated’ and ‘early years’ and ‘risks’ or ‘unintended consequences’. Grey literature sources included locally sourced reports and information identified by key informants and researchers.

To inform the broader project, key informant interviews were used to explore internal and external stakeholders’

perspectives in depth (e.g. Legard, Keegan & Ward, 2003; Mason, 2002; Miller & Crabtree, 2004). Viewpoints were expressed and clarified as informants presented their experience and understanding of the project and this meant content could be clarified immediately (Lawson, 1985). A core interview schedule containing 10 questions relating to the broader project’s needs was used to structure the interviews. Questions using an appreciative enquiry approach (e.g. Mellish, 2000) to build on existing strengths within the organisation were excluded from the current study which focused on stakeholder perspectives of integrated services in the context of the proposed development. This included a particular focus on the identification of strengths and weaknesses and the associated opportunities and risks, consistent with best practice strategy formulation for non-profit organisations (e.g. Bowman & Bowman, 2010; Helms & Nixon, 2010).

After receiving approval for the study, a total of 11 internal and external stakeholders were invited to be key informants for the research project. As outlined in Table 1, these included different service managers and practitioners within the organisation, external providers of early childhood services from other non-government agencies, as well as academic and state policy experts who all agreed to participate. Key informant interviews were conducted between March and April 2012.

Table 1. Summary of key informant roles

Internal key informants (n = 6)	External key informants (n = 5)
<ul style="list-style-type: none">• Executive control team members (x 2)• Early years service managers e.g. family day care (x 4)	<ul style="list-style-type: none">• Funding body representative• Consultant• Academic• Early years’ sector service partners (x 2)

All interview participants received an information sheet and their written consent was obtained to participate in the study and make their results available for other research purposes. The data was de-identified to indicate only whether respondents were internal or external key informants to ensure particular views were not able to be recognised. All interviews were conducted in person or via telephone, with the responses manually transcribed and stored on a secure network at the university.

The data was analysed to identify unique contributions as well as common themes and ideas using a process of analytic induction (e.g. Lofland & Lofland, 1995; McFarland-Piazza et al., 2013). The typology of this information helped to identify the conceptual categories used to summarise interview responses. Each response was intended to provide its own insight; however, common threads were evident, with the frequency that particular issues, themes or concepts were mentioned used to identify issues of

significance (Mason, 2002). Responses to the questions relating to identification of the strengths and weaknesses of the proposal and associated opportunities and risks were summarised and organised using a SWOT/SWOR analysis approach (Bowman & Bowman, 2010; Helms & Nixon, 2010).

Results

The findings are presented separately for responses to the question on integrated practice and results of the SWOR analysis. To elucidate meanings of integrated practice, sample responses provided by the key informants ($n = 11$) are presented for each of the summary themes identified. Indications of whether responses were from internal or external stakeholders are provided in parentheses. The results of the SWOR analysis are presented diagrammatically.

What does an integrated service mean to you?

A one-stop shop:

'A place where the needs of parents and children can be met in the one place' [internal key informant].

The informant recognised that a range of services including early learning and care for children between the ages of birth and 12 years as well as allied health services would be situated on the same site.

Integration:

'Integrating fostering, housing, aged and child care' [internal key informant].

'It's about bringing our best to the table and looking at how we can work together to improve outcomes for children and families' [external key informant].

'Building community and building family connections' [internal key informant].

Integration in the first instance related to thinking about how distinct services for families and children could be drawn together to improve access for families needing support.

Structural integration:

'Need a model to deal with the different layers' [external key informant].

'Concerned with the economy—economies of scale' [external key informant].

The informants were focused on the financial implications of reducing overheads and having one administrative point for activities such as human resources or purchase of goods. However, the participants were wary of assuming that all participants in the services would be able to utilise the same facilities.

Making connections across the lifespan:

'All ages, lots of scope for different projects' [external key informant].

'Integration means bringing everyone together—making connections' [internal key informant].

There was a sense that the compartmentalisation of age groups was detrimental to wellbeing. Having different age groups together was seen as an opportunity to model behaviours and foster a common sense of purpose.

Commitment and purpose:

'Integration is not just physical, it relates to purpose' [internal key informant].

'Is more than just bringing the different bits together' [external key informant].

Theoretical and empirical evidence was important in helping the organisation plan a way forward, in relation to integration.

Integrated service models are still emerging:

'Currently only scratching the surface of integrated practice' [external key informant].

Informants noted a variety of integrated practices across Australia. No two examples were the same, as they appeared to emerge out of the geographical proximity of community focus.

Inter-disciplinary and transdisciplinary approaches:

'Requires new roles to break down silos' [internal key informant].

'New type of worker that is not discipline based' [internal key informant].

The complexity of the qualities of the workforce were acknowledged. Staff in integrated services would need to have the capacity for collaborative activities as well as specialist professional knowledge.

SWOR analysis

The results of SWOR analysis are presented in Figure 1. As indicated in this figure, a number of advantages were identified, consistent with the aims of integrated practice identified by respondents. The main disadvantages identified related to the scale of the proposal and the massive task the organisation has set itself to better respond to the needs of the community. Opportunities for the community, the organisation and staff were identified, as were opportunities to build on the evidence base for integrated practice. Risks highlighted the potential for a number of unintended consequences including integration for the sake of integration, implications for mixing services and settings for children and older people as well as the potential dominance of different professions, services and agendas. The heavy reliance on effective leadership to manage the project and associated change processes and lead transdisciplinary practices were also highlighted.

Figure 1. Results of SWOR analysis

Other results

A range of additional comments and information were collected in the interviews. This was reported as part of the overall project report to the community organisation. The findings from the key informant interviews were therefore considered in the context of the broader study and a discussion of the relevant literature.

Discussion

The results of the key informant interviews revealed a number of innovative aspects of the proposed initiative and corroborate many of the features of effective integration of child and family services as identified in the literature (e.g. Moore & Skinner, 2010; Pelletier & Corter, 2005; Wong et al., 2012). However, while there are many examples and models that share commonalities, there are as yet no examples equating to the vision for the proposed development which will integrate services across the lifespan with other community spaces, community infrastructure and a residential development with a village square. In the context of the current project, responses suggested integrated services refer to co-location and a

one-stop shop model with transdisciplinary staff delivering integrated programs across the lifespan and external and broader structural integration. A commitment to integrated practice and clear sense of purpose were identified as important considerations, with numerous examples within and external to the organisation identified that can be built on. Examples such as Reggio Emilia, UNICEF's framework for action for *Child Friendly Communities* and the Apartments for Life model were identified as providing more specific guidance for approaching integration with the broader community spaces and infrastructure systems (e.g. ACSA, 2012; Benevolent Society, 2009; REAIE, 2011; UNICEF, 2004).

A number of new opportunities were identified in the context of the proposed development. Beyond the development of best practice models to inform future service development and delivery models, they included opportunities for integrated governance (e.g. British Government, 2010), unique benefits for staff and the broader community as well as specific opportunities for the organisation, early years' sector and researchers (e.g. Corter et al., 2012; Moore & Skinner, 2010). Many of the advantages identified, including opportunities for improved

support and outcomes for children and families, recruitment and retention of transdisciplinary staff, the development and implementation of best practice approaches and even the fostering of inter-generational links, mirror existing knowledge (e.g. Corter et al., 2012; McFarland-Piazza et al., 2013; Moore & Skinner, 2010; Nicolescu, 2008; REAIE, 2011; Wong et al., 2012). However, there remains a paucity of evidence in the literature in relation to the benefits (and risks) associated with economies of scale in the short and longer term and integration of services across the community and lifespan.

It is not surprising that the results of this study indicated both a strong will for and general support and commendation for the organisation's innovative proposal. Some of the concerns identified and a lack of guidance available in the literature, however, suggests that more research is required to better identify, understand and manage any unintended consequences and the potential risks involved. These included the need to ensure service integration and innovations are not an artefact of service needs or reflective of 'integration for the sake of integration'. Other concerns suggesting 'that early childhood education and care may get lost' are indicative of those initially raised by Cheeseman (2007). Indeed, such concerns regarding the silencing of pedagogical approaches as a consequence of the dominance of health and welfare agendas would appear to be increasingly evident in the literature (e.g. Macfarlane et al., 2014; McFarland-Piazza et al., 2013; Wong et al., 2012).

Despite all the available supportive evidence, good intentions and strong community and organisational values, the disadvantages and risks identified by key informants are potentially real and significant. The identified risks primarily related to change management issues and management of internal processes, stakeholder expectations and inter-generational links. It is recognised that the complexities of organisational systems and integrated practices are in themselves significant, let alone the complexities of communities, community dynamics and community issues as ecological perspectives demonstrate (e.g. Bronfenbrenner, 1994). The benefits for those who will be engaged and no doubt become strongly embedded in the new community development are obvious, but what does this mean for those not engaged and on the outer? How is this ultimately reconciled with the underpinning values and rationale for integrating early years' services?

Beyond any associated organisational risks, the identified need for and reliance on strong and effective leadership to drive effective service integration suggests the potential fragility of such initiatives. Consistent with McFarland-Piazza and colleagues' (2013) findings, not only are effective systems and processes critical, but key informants, in particular external stakeholders, suggested the success of these initiatives depend on the leadership of key individuals and their human and social capital. This reflects

the significant focus on effective leadership in the early childhood literature (e.g. Hard, 2006; Macfarlane, Cartmel & Nolan, 2011; Muijs, Aubrey, Harris & Briggs, 2004; Rodd, 2006; Woodrow & Busch, 2008). Beyond this, however, there remains an absence of discussion in the available literature regarding some of the other risks and potential disadvantages identified in this study. These include the size and complexity of such initiatives, pragmatics such as that it may be more expensive in the short to medium term and concerns about mixing older people and young people. This indicates an urgent need for more research and evaluation to inform both the proposed development and related community service integration initiatives, in particular in the context of early years' services.

Conclusion

The results of the current study were designed to explore stakeholder perspectives in relation to the proposed project. They do not provide a detailed analysis of the potential risks of such an integrated development nor were they elicited solely for the specific purpose of researching this objective. The exploration of issues with key informants is therefore limited to the questions asked in keeping with the objectives of the broader project. While the literature indicates the frequent application and validity of SWOT or SWOR analyses as a strategic planning tool, debates regarding the over-simplification and inherent tautology of this approach, as well as the need for further research to determine its potential for theory building, are also acknowledged (Helms & Nixon, 2010). Accordingly, it is recognised that both the review of literature and research methods used were determined according to the organisation's specific needs. However, the researchers also recognised that both the broader project and results of the current study offer important insights and perspectives which add to the existing literature.

It is clear that a more urgent need exists in relation to better informing community organisations who are seeking to effectively translate, innovate and implement integrated service models. This is particularly the case when the scale of such initiatives involves the whole community and the integration of services and community infrastructure across the lifespan. While the study's results do not represent a comprehensive list of risks and unintended consequences, they do suggest there are a range of potential risks that demand greater consideration, research and guidance, given recent developments in the early years' sector, community service sector and what is at stake for the community more broadly.

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Endnote

It is acknowledged that since the commencement of this project, the organisation's concept of 'integrated communities' has evolved and as a result, community development approaches are currently being emphasised to actively engage the community to build the project and generate personal buy-in.

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