An independent evaluation of the Collaborative

Pairs Australia National Demonstration Trial

**Final Evaluation report**

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1. **Executive Summary**

**The Consumers Health Forum of Australia (CHF) engaged the University of New South Wales, Canberra and Curtin University to conduct an independent evaluation of the Collaborative Pairs Australia National Demonstration Trial. The purpose of the evaluation is to assess the effectiveness and applicability of the program in the Australian context and inform future implementation of the program.**

In 2015 the King’s Fund ran a series of Collaborative Pairs programs in England, a leadership development initiative that brings together a consumer, patient or community leader to work together in pairs with a service provider, clinician or manager to develop new ways of working together. The program aims to develop partnerships and to break down the cultural barriers that often exist between those providing services and those receiving them.

The trial involves a collaboration between CHF, the King’s Fund (UK), and four PHNs from NSW and Victoria: South Eastern Melbourne, North Western Melbourne, WentWest and Western NSW. Initial planning for the trial began in July 2017 followed by CHF recruiting 4 pairs of facilitators.

The principal features of the Collaborative Pairs program in Australia are:

* + Facilitation by a consumer lead and one clinician/manager lead in each pair who receive supervision from Kings Fund mentor
  + Participants are clinicians and consumers paired together to form a joint clinician-consumer partnership
  + Program is delivered over five one-day face-to-face sessions with three to six weeks in between sessions
  + Program includes theoretical and experiential learning in relation to communication, conflict resolution, partnerships and collaborative working
  + Pairs identify and work on a project during the program as a vehicle for exploring their collaborative working relationship

The specific objectives of the evaluation are to

1. Provide an assessment of the program’s relevance, receptiveness and acceptability in the Australian context;
2. Assess the program’s effectiveness in building collaborative relationships that will impact on practice and lead to system changes in the way health services are designed, developed and implemented;
3. Inform any further implementation of the program (i.e. a sustainable business and delivery model); and,
4. Build the evidence base on collaborative practice, leadership and transformational change.

The evaluation explores the characteristics of the program, the setting, the characteristics of individuals involved in implementation and processes used in implementing the trial through interviews with participants, facilitators and key stakeholders and document review.

44 pairs of participants commenced the 7 programs, with 31 pairs completing. The evaluation finds the Collaborative Pairs program is relevant and acceptable in the Australian context. The program demonstrates a positive impact on some participants in terms of new skills, thinking and approaches to communication, collaboration and partnership. The impact on sponsoring organisations was less evident due to low numbers of participants from each organisation and the time that may be required for cultural change to develop. A number of recommendations are made regarding the marketing, recruitment, format and evaluation of the program to inform future iterations:

# marketing and recruitment

1. Clarify program objectives, highlight experiential aspect of program and articulate anticipated benefits to participants and sponsoring organisations in marketing
2. Clarify time commitment to all program activities
3. Recruitment exclusion criteria to include pairs in current therapeutic relationship
4. Redefine role of project in program as a vehicle to explore collaborative work
5. Co brand with sponsoring organisation where possible
6. As part of recruitment assess commitment of sponsoring organisations providing participants
7. Use experienced facilitators as part of recruitment to model and explain program objectives
8. Provide forum for facilitators to meet applicants prior to confirmation of selection

# Facilitation

1. Contextualize facilitators resources to Australian context
2. Develop facilitator peer support network
3. Remunerate facilitators according to time spent on additional administrative tasks and travel time

# Program format

1. Introduce clear program and session objectives
2. Consider guest speakers to model desired outcome
3. Reduce interval between session to maximum 3 weeks
4. Reduce length of day for participants
5. Allow greater time for discussion through reducing didactic content
6. Provide between session participant coaching by facilitators
7. Investigate session recording/other mechanism for participants who miss sessions
8. Investigate mechanism for post program community of practice or peer support network

# Evaluation

1. Record session attendance, participant background (clinician/manager, consumer, consumer leader) and project type and progress, and reason for drop out
2. Introduce pre and post measure of attitudes to collaborative working
3. Involve facilitators and key stakeholders (e.g. sponsoring organisations, CHF) in future design of evaluation
4. Evaluate the impact of programs located within direct provider organisations in future iterations of the program.