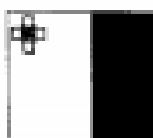


**Collaborative work between different professionals working in public  
services for Children with Special Educational Needs in Malta:  
Current applications and pathways to best future practice.**

Paul Attard- Baldacchino  
University of East London, London, United Kingdom  
Monday, 14 May 2012

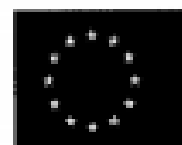


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## **Abstract**

This study focuses on Collaborative work between different professionals working within public services for Children with Special Educational Needs in Malta. The research adopts a mixed methods design. Data gathering involved the use of a questionnaire (n=60), interviews (n=3) and a focus group (n=7). The epistemology adopted involves pragmatism and Collaborative work and is mainly explored in the light of Systems theory. Results indicate that Collaborative work takes place in Malta, and that most professionals report and agree that it is prevalent within Maltese services. While a few of the participants reported that some services have limited collaboration with each other, each participant reported valuing Collaborative work and believing that others generally value Collaborative work too, including most managers within services. Collaboration in Malta is mostly informal and unstructured, has elements of 'Interdisciplinary' Collaboration and is often characterised by sharing of information and sometimes also resources and skills. Professionals believe that there are various pathways by which collaboration can take place most effectively. The approach adopted to improve collaboration is likely to be most effective by addressing the need for promoting Collaborative cultures, increasing centralisation and providing training in Collaborative practices. The approach also needs to overcome challenges including miscommunication between different services and territorialism. A number of positive examples of Collaborative work have already been established and many opportunities for development exist, facilitating the route to applying specific models of collaboration that can target the culturally unique structure of the Maltese Children's services.

### **Student Declaration**

University of East London

School of Psychology

Doctorate in Applied Educational and Child Psychology

This work has not previously been accepted for any degree and it is not being concurrently submitted for any degree.

This research is being submitted in partial fulfilment of the requirements of the Doctorate in Applied Educational and Child Psychology.

This dissertation is the result of my own work and investigation, except where otherwise stated. Other sources are acknowledged by explicit references in the text. A full reference list is appended.

I hereby give my permission for my dissertation, if accepted, to be available for photocopying and for inter-library loans, and for the title and summary to be made available to outside organisations.

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Date: .....

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**-Ms Clarissa Captur, B.Pharm (Hons) (Malta); MSc Clin Pharm (Aberdeen); MRPharmS (London); PgCert Renal (Brighton)**

For your good company during this research journey. Putting it together while alone would have been harder. Thank you also for transcribing and proof reading some of the work.

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**-My Parents and Sisters:**

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**-Clara my Niece:**

For your sweet smiles, laughs and cries. I was lucky to see you learn to walk and talk as I wrote this. I always wished I could play with you instead.

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## 1. 0 Introduction

This chapter presents the background of the research including the terminology used. It also provides a summary of the local context and legislative background. Children's services in Malta forming part of the focus of this research are introduced together with the author's position as a researcher. It introduces the research's relevance and application to both international and Maltese academia. Finally the introduction presents the main research questions.

### 1.1 Background of research

In September 2010, the author was employed at the School Psychological Services (SPS) within the Student Services Department in Hamrun, Malta, in order to fulfil the placement requirements of the Doctorate in Educational and Child Psychology of the University of East London (UEL). The SPS is a Government of Malta Student Service offering school psychological services to public and independent schools situated on the Maltese Islands (Government of Malta, 2011). The schools to which services are offered form part of the central primary and secondary public schooling system of the country. Following the author's assignment as a Trainee Educational Psychologist (TEP), the focus of this research was chosen by the author in discussion with service managers and a unit coordinator of the service. The research area decided upon had a focus on the nature and value of 'Transdisciplinary' work between different professionals, as a mode of service delivery and joint working and its potential present and future application to different services for children in Malta. This interest has been justified by some authors, as it has been claimed that educational psychologists are in a good position to assess the efficacy of working partnerships given their experience of working in environments with complex social and organisational structures (Miller, Guillifor and Stringer, 2006).

'Transdisciplinary' work is a particularly open form of *Collaborative*<sup>1</sup> work that takes place between professionals coming from diverse backgrounds. Rob Briner, an Organisational Psychologist at Birbeck College in London tells us that organisational work is no longer

---

<sup>1</sup> The words 'Collaboration', 'Collaborative' and 'Collaboratively' are central key words in this research and have been capitalised in the text.

organised in different independent working units as was once the case, but instead, work is now more likely to be carried out in teams (as cited in, Arnold et al., 2005). The problem with teams, however, is that they are not usually created specifically for the work being carried out. To give an example, in the formation of interdisciplinary teams, groups are meant to be formed by individuals collaborating together with the goal of achieving some level of interdependence; in reality this rarely happens. In fact part of the recent interest in team-building emerges from the fact that some authors have argued that many teams aren't actually working properly (Arnold et al., 2005).

While Briner's argument might be true to a certain extent, it differs from what other researchers conclude. This author is also of the belief that teams do work well. Nevertheless, it is clear that some teams simply do not function adequately and some professionals prefer to work independently rather than Collaboratively as part of groups. The author has initially focused on 'Transdisciplinary work' which he and his colleagues have considered a 'gold standard for working Collaboratively' (S. Zammit, personal communication, September, 2011). It became evident however, that there was much more to understand before one could argue wholeheartedly for such a form of working in a Maltese Context. Before such discussions can commence, it is important to understand how such a model of Collaborative work could be implemented.

Following a systematic review of the literature on this topic (refer to chapter 2.0) it became evident that to focus on understanding 'Transdisciplinary' work, it was crucial to understand different aspects of working together first. This could be an important step toward understanding the type of working together that is already employed between professionals in services in Malta and its possible future application. Moreover, understanding the different terminology used to describe different modes of working among professionals offering services to Children with special educational needs (SEN) is also important, as it provides the basis for having a wider understanding of the subject. This thesis will now focus on how different forms of working together are frequently referred to, through different terminology in the literature.

## 1.2 Terminology used

There are many different terms used to describe different modes of working together, sometimes creating confusion among readers of the literature (Choi & Pak, 2006). The terms “*Collaborative work*”, “*collaboration*”, “*joined-up work*”, “*teamwork*”, “*joint work*”, “*multi-disciplinary*”, “*inter-disciplinary*”, “*inter-agency*” and “*trans-disciplinary*” are used (sometimes hyphenated and/or unhyphenated, e.g. “*Transdisciplinary*”) to describe specific or general ways of working together (Figure 1, below). Sometimes this is done to emphasise a specific type of working together, while at other times it is done with general reference to professionals working together. Several authors have warned against the confusion that excess use of the different terminology can create and have argued for a more clear distinction of the language and terminology. For example, in relation to the words ‘team’ and ‘teamwork’, it is generally understood that reference is being made to work that involves a group of colleagues who co-operate closely and are interdependent in achieving collective goals. This contrasts with individual work. Uses of such terms originated in Europe in the 1960s and 1970s and in Japanese management within companies where emphasis on multifunctional employees that are loyal to the collective and share collective responsibility for better quality and quantity of work was sought after by stakeholders (Arnold et al., 2005).

Language and terminology can influence the way we define and understand reality (Etta, Ojong and Offiog, 2011) and clarity in the use of language can promote understanding particular phenomena or practices. The author attempts to present a clear distinction that will be used in this research, which refers to three central types of Collaborative work across disciplines. These are defined by several authors (Choi & Pak, 2006, 2007, 2008; Dearden & Miller, 2006; Doyle, 1997; Frost & Robinson, 2007; Zammit, Soler, & Wolfendale, 2004) as *multidisciplinary*, *interdisciplinary* and *transdisciplinary* work. In this study the general term ‘*Collaborative work*’ will be used to encompass all the different styles of working together across different disciplines<sup>2</sup>. It is the term that has been chosen by the author to define all the types of joined up work, multidisciplinary work, interdisciplinary work, etc. Collaborative work involves different professionals coming from different disciplinary backgrounds working Collaboratively in different ways (Barclay & Kerr, 2006; Barnes & Rowe, 2008).

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<sup>2</sup>The term ‘Teamwork’ was also considered as a general reference term, however, feedback was given by different colleagues that the term is colloquial and that the former part of the word ‘team’ has been defined in many different ways as Arnold et al. (2005) explain, possibly creating confusion for the reader.

| General term used in this research | Examples of terminology used in literature  |
|------------------------------------|---|
| <b>Collaborative work✓</b>         | <i>Joined-up work / joint work</i> - (Barclay & Kerr, 2006; Dearden & Miller, 2006)   |
|                                    | <i>Multidisciplinary work</i> - (Bartolo, 2002; Frost & Robinson, 2007; Wilson, Pirrie, & Scottish Council for Research in Education, 2000) |
|                                    | <i>Interdisciplinary work</i> - (Doyle, 1997; Grobstein, 2007; Zammit, Soler & Wolfendale., 2004)   |
|                                    | <i>Transdisciplinary work</i> - (Barclay & Kerr, 2006; Doyle, 1997; Nightingale, Burlo' Tanti, Falzon, & Juan, 1998)                        |
|                                    | <i>Collaborative work</i> - (Dearden & Miller, 2006; Hymans, 2008; Watson, 2006)  |
|                                    | <i>Multi-agency work</i> - (Dearden & Miller, 2006; Hymans, 2008; Leadbetter, 2006; Leadbetter, 2007)                                       |

**Figure 1: General terms used in research and examples of various terminology mentioned in literature**

### 1. 3 Local context and legislative background

Bartolo and Martinelli (2007) explain how, in Malta, the first education act was passed in 1974 and revised in 1988 and this entitles every child to a public education (Zammit Mangionas cited in Bartolo and Martinelli, 2007). In 2007 the education system served about 70,000 students' aged 3 through 16 years. Its structure is similar to that found in the United Kingdom (UK). Children move from kindergarten (ages 3–4) to primary (ages 5–10), to secondary (ages 11–15), to sixth form or postsecondary vocational courses (ages 16–17).

Bartolo (2002) explains that during the past 15 years, a discourse has arisen within the educational system that focuses on the rights of Children, particularly those with additional needs and impairments and their entitlement to an equal education in regular schools. These efforts seem to have been influenced by developments in Europe as well as local legal and political enterprises. Following the implementation by the Ministry of Education of the *National Inclusive policy on Inclusive Education* as described by the Inclusive and Special Education working Group (2005) and the recommendations of the *Special Schools Reform* report (Student Services Department, 2008) an increased number of different professionals are now employed in services for Children with SEN on the Maltese Islands. Many of these professionals have different disciplinary backgrounds related to the provision of support for Children with SEN. As a result, services for Children have expanded and professionals with

different disciplinary backgrounds are increasingly working within a diversely professional environment.

The increase in the number of professionals can be attributed to a number of aspects relevant to changes in the Maltese educational system. *The Special Schools Reform* (Student Services Department, 2008) can be considered important, as it implied that more Children with SEN are attending mainstream schools. As a necessary result, students with additional educational needs require more professionals with the relevant specialisations to support them.

### **1.3.1 The Students Services Department**

Students with SEN receive assessment, support and alternative educational provisions at the Students Services Department that is part of the Ministry of Employment and Education of the Islands. The Student Services Department is now responsible for the provision of various support services, including the statutory assessment of Children with SEN in schools. The Psycho-social section further facilitates access according to Children's statement of need and individual adaptations required. Professionals include educational psychologists, school social workers, school counsellors and different specialised teachers among others. Other services are also found in a separate Inclusive Education Department and these include an Access to Communication and Technology Unit (ACTU), specialist teachers and peripatetic teachers. School counsellors and the recently added peripatetic team working with Children with Social, Emotional and Behavioural Difficulties (SEBD) have also been employed within this highly diverse professional department.

Introduction of new management posts have also been undertaken, involving the positioning of service managers with specific tasks within an Inclusive Education Unit, inclusion co-ordinators (INCOs) to work in Collaboration with schools and other related professionals working within the service (Student Services Department, 2008). Professionals from the Student Services Department also provide services to Children and families of Children attending the recently re-formed special schools on the Islands, which are now referred to as 'Education Resource Centres'. The Student Service Department employs approximately 195 employees who work in several different units for Children with SEN (Student Services Department, Staff List, 2012).

### 1.3.2 Collaborative work in Special Educational needs policy and legislation

The Special Schools Reform review (Student Services Department, 2008) states the need for different forms of Collaboration to take place between professionals in the Student Services Department, mainstream schools and resource centres. This is recommended to take place at both employee service delivery and leadership-management levels. On a similar note, the Inclusive and Special Education working Group (2005) reports that multi-disciplinary teams are currently working to form Individual Educational Programmes for Children. It also states that in 2009 the Special Educational Needs Team (SENT) which is composed of multi-disciplinary teams performing assessments and advising on intervention, has taken up the role of identifying Children with learning difficulties. In addition, prior to 2009 the Government of Malta Education Act (1988, amended 2007, CAP. 327) states that those Children with individual educational needs may be required to have an assessment carried out by a multi-disciplinary team. These references are consequently pointing to the requirement of having Collaborative practices available for service delivery.

The Education act (1988, *amended* 2007, CAP. 327) also prescribes that the Directorate for Educational Services facilitates cooperation and networking among professionals:

It shall be the general function of the Directorate for Educational Services, in constant Collaboration with the Colleges and schools, to plan, provide and allocate the resources, human and otherwise, services, and learning tools, both of a pedagogical, psychosocial, managerial and operative nature and other ancillary support tools, as required in the State colleges, schools and educational institutions, and to encourage and facilitate their networking and cooperation (p.7).

### 1.3.3 Child Development and Assessment Unit

An online report of the European Agency for the Development of Special Needs Education (EADSNE) states that within the Ministry of Health in Malta, the Child Development and Assessment Unit (CDAU) is also responsible for the assessment of students with SEN (2009). This Unit along with the School Psychological Services (SPS) are the principal agencies providing assessments for students' statement of need. The report by EADSNE states that the CDAU and SPS collaborate on the identification and assessment of students with special



educational needs (2009). The CDAU employs a total of approximately 25 employees who work in several different units for Children with physiological, developmental and SEN needs.

### **1.3.4 Collaborative work – Culture and prevalence within services for Children with SEN in Malta.**

Bartolo (1994, as cited in Bartolo 2002) explains how in the 1990s, inclusive education policies expanded, together with the awareness of the need to provide services for Children with SEN which also increased. Maltese Children's professionals agreed that regular schools with inclusive orientations were the most effective means of combating discriminatory attitudes, creating a welcoming society and achieving education for all (Bartolo, 2002; Tanti-Burlo', 1997). However, for individual differences to be celebrated, Tanti-Burlo' argued that within the classroom, educators needed to be supported to become part of a 'Transdisciplinary team' - as though taking on the role of the conductor in order to orchestrate individual educational programmes for the Children. This would involve a setting where significant others in the child's life could easily communicate information with each in order to support the child. With effective working together, the child's world is no longer fragmented and expectations are consistent regardless of the setting.

Tanti-Burlo' (1997) explained that Collaborative work was important in supporting children. Nevertheless, the success of such working together depends on the commitment of the education authorities, the teachers' union(s), parents, ordinary Children, parents of Children with challenging development, regular teachers, support teachers and facilitators, peers, school personnel, community personnel which would include GPs, Paediatricians, Psychologists, Speech Pathologists and others.

The implementation of effective Collaborative work in services and in schools in Malta however was pragmatically not considered an easy task due to the limited required skills available locally for its implementation. It was recommended that a certificate course in the training of Educators in a Special Education Setting (Tanti-Burlo', 1997) be established in order to help develop and the culture and necessary skills including an increased level of

expertise of educators working in special schools, in the Transdisciplinary team facilitation programmes (Tanti-Burlo', 1997).

On a different note, a more recent article published by Bartolo and Martinelli (2007) explains how assessments for Children with SEN are carried out frequently in Multidisciplinary teams in Maltese Public Services, in order to provide sought after diagnoses of difficulties and the identification of needed resources. The article is based upon a literature review of the local Maltese literature as well as the personal accounts of the authors, who were among the first Educational/ School Psychologists on the Maltese Islands.

An unpublished National Inclusive Education Proposal by Tanti-Burlo, Nightingale & Falzon, (1998) encouraged the development of a *'Transdisciplinary team' approach* on the Island. In this proposal, Team members in services offering support to Children with SEN, are made up of individuals playing important roles in the life of the identified child. These may include parents, educators, clergy, family members, childcare professionals, medical and psychological assessors, social workers, therapists, peer advocates (friends), neighbours, in other words, anyone personally involved with the child's welfare. According to the report:

...[In the Transdisciplinary Team] the identified child may also participate as a self advocate when possible and appropriate. Each team member's input is equally valued. There is no hierarchy of expertise but rather a sharing of opinions, observations and reflections (role Release). Decisions involve contributions from all members and participation continues beyond the planning stage throughout the programmes implementation. The team monitors the continued success with each member agreeing to participate in being responsible for monitoring specific short term goals set by the team. The team meets at least once a year to review progress and reframe future goals....., (p.145)

Unfortunately the project outlined in the unpublished National Inclusive Education Proposal by Tanti-Burlo, Nightingale & Falzon, (1998) was never finalised and implemented as an official national educational policy for support within the Children's services in Malta. Aspects of such Collaboration have been advocated by psychologists and educators including the aforementioned authors. It is likely that such contributions have promoted organised encounters between professionals from different services and Children with SEN and their families. For e.g., Individualised/ Inclusive Educational Programmes, often referred to in the abbreviated form as 'IEPs' (Nightingale, 1997) and the McGill Action Planning System often referred to in the abbreviated form as 'MAPS' (Vandercook, York, & Forest, 1989) have been implemented with varying success in primary and secondary schools within the last decade.

This was possible with the Collaboration of different professionals such as School Psychologists, Inclusion Coordinators (InCo's), Trainees and school professionals.

### **1.3.5 IEPs and MAPS sessions in schools in Malta**

From the early developments of the IEP, it was considered important for the team to collaborate closely so that Children IEP's can fit into as many regular activities as possible. Any child in the class who was not able to keep up with core or is capable of doing more advanced work than the core programme, it was argued, needed to have an IEP (Nightingale et al., 1998). In the Collaborative groups, all professionals were advised to examine the part they played in the dynamics of what happens so that each team member could contribute to the restructuring of a revised solution (Nightingale, 1997).

Similar emphasis on Collaboration is described in the recommendations by Vandercook, York and Forest (1989) on the implementation of the MAPS process - a frequent tool used by Schools in Malta to help support Children with SEN. Professionals from Children's services and educators frequently meet within schools to help develop a plan that will meet the individual child's needs in regular education settings. The assumptions underlying and guiding the maps process include (a) integration (b) individualisation, c) Collaboration and (d) flexibility.<sup>3</sup> (Vandercook, York and Forest, 1989). Collaboration in MAPS for those Children with labels of moderate to profound disabilities in regular education environments can function most effectively through coordination and holistic approaches focusing on the need of the child who is the focus of the planning process. A MAP also capitalises on the creative problem-solving abilities of adults and Children who know and care about the individual, for all the planning is to occur for the Child concerned.

### **1.3.6 Action research in special schools in Malta**

Unlike the positive outcome of IEPs and MAP sessions in Malta, not all effort toward Collaborative working has been successful. One particular project entitled the "Action Research for and on the Handicapped" that took place in special schools in 1992 did not result in a positive example of Collaboration.

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<sup>3</sup> Implementation of MAPs: 1. Co-facilitation. Graphic Recording for all participants to see 3. Hospitality-informal atmosphere. 4. All key actors in child life present and participating. 5. Focus person and their sibling present and participating. 6. Key issues addressed: What does child and/or family want? 7. Decision to meet again (date). 8. Concrete plan of action (Vandercook et al., 1989).

The project consisted of setting up a Transdisciplinary team to offer support to Children with SEN in two special schools in Malta. In 1992 Tanti-Burlo' wrote that the purpose and function of the needed Transdisciplinary Team consisted of assisting the child by putting aside the prescribed area of professional reference in order to concentrate energies and pool knowledge and resources for the good of the Children. It was suggested that the success of such programmes depended on the Collaboration and the good will of professionals to sustain and uphold the philosophy of home and community based services, focusing on Children. According to the author of the project, the purpose and function of a Transdisciplinary team is that of assisting the client or patient (the recipient of a service) by putting aside prescribed areas of references and concentrating energies, knowledge and resources for the common good of Children and their families.

The Collaborative unit in the action research was initially composed of a paediatrician, social worker, psychologist, physiotherapist, speech therapist, occupationalist (*currently known as occupational therapist*) and educationalist. In the first months of the implementation of the project the ascribed professionals met with each other, and the outcome of their meetings was reported as having considerable success. Unfortunately though, Tanti-Burlo' (1992) writes that professionals soon refused to attend meetings and collaborate, or share resources and requested that meetings were held in children's' professional public services, rather than in schools. As stated:

The first three months of this year has witnessed a further dismembering of the case conference, resulting in the loss of expert advice, greater difficulties for the follow up of recommendations and the erosion of the *raison d'être* of the project itself. Surely however, the school authorities too, need to show that the responsibility of providing or at least informing the parents of the Children's needs. The majority of parents, who are generally happy with their child's education, tend to be the ones who are at least informed" (Tanti-Burlo', 1992, p.16).

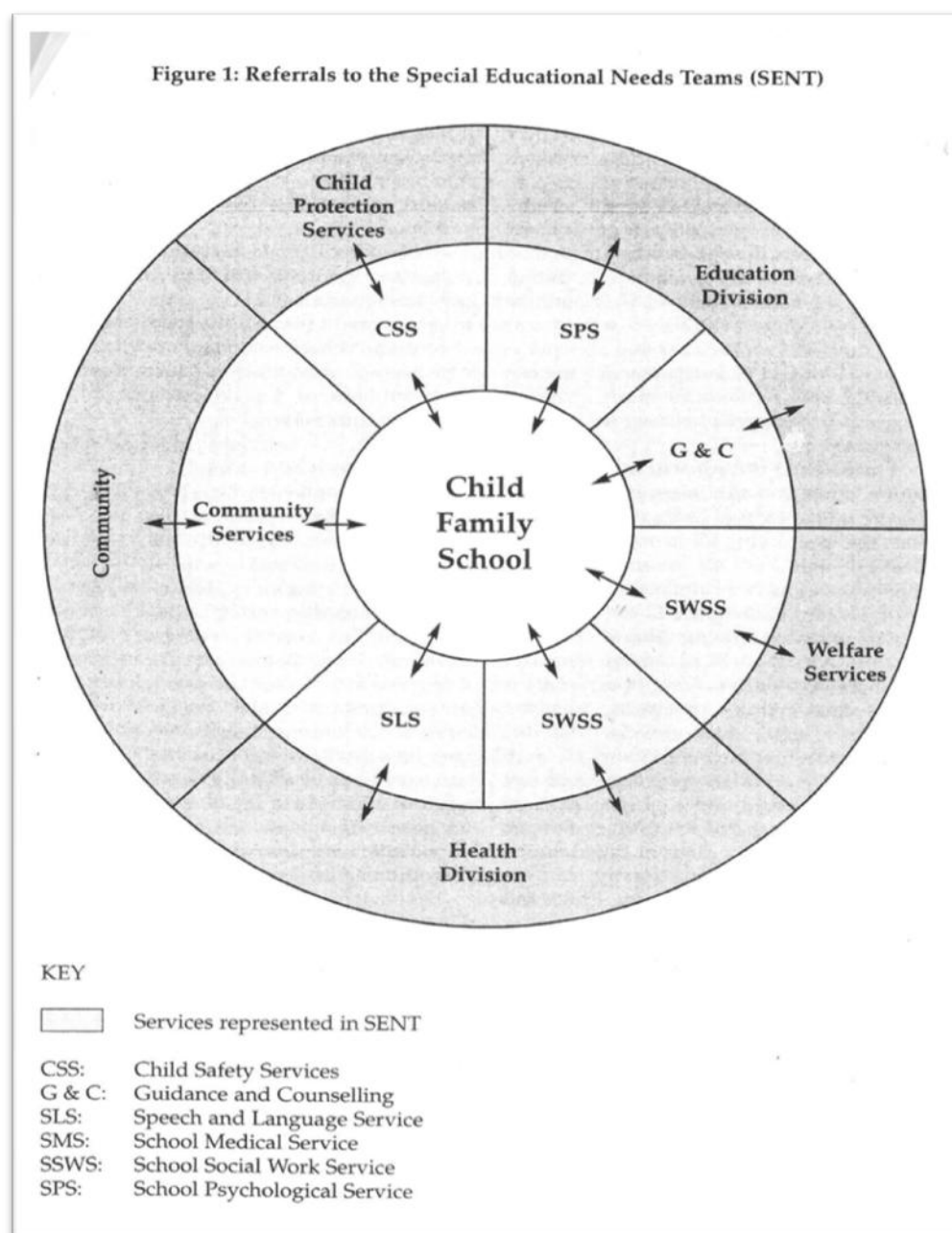
### **1.3.7 The Special Educational Needs Team (SENT)**

The outcomes for SENT presented a more positive picture. A pilot project, The SENT project, was initiated in October 1998 through the joint Collaboration of child-support (including School Psychological Services) within the education and health division state departments in Malta. The rationale behind the SENT was to create a formalised method of 'working together' in the best interests of Children and their families. The project started working in 2 state primary schools and eventually grew to a total of 10 schools depending on

the human resources. Operational baselines for working ‘developed in accordance with the needs of the school and the Children, using an open referral system and ensuring to include the child and family during consultations and decision making processes’ (Zammit et al., 2004, p.10).

SENT worked with a system of ‘Key-workers’ who were identified for each child or group of Children and who ensured that all involvement was documented and shared with the team, including the initial support plan. If support was required by all professionals involved with the child, or at the end of the scholastic year, each would submit their own contribution during specific settings (Zammit et al., 2004). “Services represented in SENT also worked Collaboratively at the group and whole school levels in terms of prevention and intervention. Examples of this work included developmental screening of Children in kindergarten; group multisensory literacy-programme implementation ; in service training for teachers; parent education programmes; and liaison with local parishes and councils” (Zammit et al., 2004, p.12) .As figure 5 illustrates, SENT placed the child, school and family at the centre of Collaboration and service delivery. This is one characteristic of Interdisciplinary work, allowing Collaboration to take place around the needs of the service users.

SENT was a good example of ‘interdisciplinary’ working and an evaluation of this project was published in the Debate CP of the Division of Educational and Child Psychology (2004) as an good working example for reference to Collaborative working practices at the time. The author had the chance to discuss the outcomes of the project with some of the previous members of SENT and it was clear that a shared positive ethic and values of the professionals were likely to be key to the success of such a project. As Tanti-Burlo’ (1992) described in her project, it is clear that not all professionals value Collaborative work on the same levels and some even prefer to work independently and possibly in competition with others, particularly those having different working models to their professional practices.



**Figure 2– This graphic description illustrates the interdisciplinary SENT team professional working model adapted from Zammit, et al. (2004, p.11).**

#### **1.4 Researcher's position**

There are many different units and teams providing different services for Children with SEN. There is no available research verifying how Collaboration is taking place and developing. The author takes the position that this knowledge is needed, as Collaborative work has been advocated internationally and is considered a fundamental asset to delivering effective and efficient services to Children and their families (e.g., Department for Children Schools and

the Family Every Child Matters, 2003, Mental Health Foundation, 1999; Public Health Institute of Scotland, 2003a, 2003b; Scottish Executive, 2001, 2002; World Health Organisation, 2004). Research gaining information on Collaboration within a local context is likely to prove useful in enhancing positive organisational and professional development.

#### **1.4.1 Research rationale and purpose**

The author intends to explore what professionals think and how they rate different aspects of Collaborative practices in Malta. This type of inquiry can be considered novel within the local context of Children's services. The research aims to provide information on various aspects of Collaborative work within the Children's services in Malta. In the same manner the research itself is of an exploratory type, indicating that its purpose lies in the initial stages of information gathering, seeking to gain a good understanding of what is targeted by the research questions. The focus can be seen as broad and general, investigating a range of aspects (Braun & Clarke, 2006); namely – prevalence, purported value, type of Collaborative work, and knowledge about best future practice. Moreover, as the research is searching within an area that is new; information gathered may be seen as an initial exploration of the nature of Collaborative work.

#### **1.4.2 Application to Malta**

As opposed to independent working, Collaborative work across professionals from different disciplinary backgrounds has predominantly been viewed as a better way to deliver services more efficiently for Children requiring interventions in different areas of their lives (Collin, 2009). In the literature it is generally agreed that different services have adopted the Collaborative model successfully, including those coming from backgrounds of medical healthcare (Zwarenstein et al., 2009), social work (Zittel, Lawrence, & Wodarski, 2002), mental health (Fiddler et al., 2010) education (Wilson, Pirrie, & Scottish Council for Research in Education, 2000) and educational psychology (Dearden & Miller, 2006). It is likely that professionals' style of working professionally together in Malta is likely to contribute to the quality and the outcome of such work. Miller, Guillford and Stringer (2006) explain that educational psychologists frequently engage in work together with other professionals in order to manage complex systems and problems.

Despite all the available literature for understanding the nature of Collaborative work, there has been limited application of such theory and literature to the Maltese context. A study exploring the current standing of Collaborative work – the prevalence, type, its purported value among professionals and future potential could fill in a knowledge gap. Outcomes of such research could also be a source of understanding for any possible implementation of future policy on Collaborative working practices.

The benefits of Collaborative work outlined in the literature, may also act as one of the factors contributing to the solution of the concerns expressed by users of services in the Inclusive and Special Education review (Ministry of Education, Culture, Youth and Sport, 2009). Moreover, Hymans (2008) also explains how services may function through limited Collaborative work due to the lack of key workers and resources, frequently leading to the consequence of having Children's services that are fragmented. This research explores whether there is any such risk in the current Maltese context and if so, it could potentially offer useful information on how this challenge could be overcome.

### **1.5 Research aims and questions**

As previously mentioned, the study focuses on Collaborative work within public services for Children with SEN in Malta. More specifically the study focuses on exploring how professionals understand Collaborative Practices. Given this relative lack of knowledge about the focus, the first research question asked therefore is “*What is the current prevalence of Collaborative work?*” Answering this question would shed light on the current level of Collaboration and also serve as providing a baseline for further exploration. The second question the author asks is “*How is Collaborative work valued?*” This question is particularly important as it is clear that Collaboration requires the appreciation and motivation of professionals if it has ever, or will ever, be developed (Leadbetter, 2006, 2007). The third question focuses on the type of Collaborative work being practiced. This is needed simply because the literature outlines many different modes of Collaborative work and knowing which type is practiced, or at least, which type of work Collaboration resembles what is described in the literature will provide more detailed information. Finally the last question the author asks concerns the best possible pathways to Collaboration. This question highlights how participants feel and think about the best possible Collaborative practices in the future.



|            | <b>Research Questions</b>  |
|------------|--|
| <b>(1)</b> | <i>What is the prevalence of Collaborative work reported by professionals?</i> |
| <b>(2)</b> | <i>What is the type of Collaborative work being practiced?</i>                 |
| <b>(3)</b> | <i>How is Collaborative work valued by the different professionals?</i>        |
| <b>(4)</b> | <i>What are the pathways to best future practice?</i>                          |

**Figure 3: The research questions of the present study**

Discussion about the importance and dilemmas of Collaborative work worldwide is evident in the international literature (Arnold et al., 2005; Choi & Pak, 2007; Delaney, 1994; Guzzo & Dickson, 1996; Taylor, 2003; Zwarenstein, Goldman & Reeves, 2009). A good starting point to explore the aims of this research and consequently answer the research questions would be to analyse the current literature and determine whether previous findings and discussions can provide relevant data for the scope of the research.

## **2.0 Literature Review**

The following section includes the literature review presenting previous findings on Collaborative work, both at a local and international level. Reference is made to previous studies as well as several discursive articles and chapters on the subject.

### **2.1 Introduction**

The purpose of reviewing literature is to place the current study within a context of the available literature and to highlight the gap that is present with regards to exploratory studies on Collaboration within the Children's services in Malta. The author hopes to present important dimensions of what is already currently known about Collaboration. The topics addressed point to different findings and arguments about Collaboration providing the reader with an understanding of Collaboration and its application within different systems. The first step in establishing the current availability of knowledge was carried out through a systematic search for literature allowing for the acquisition of several online resources on the subject as well as printed textbooks and journal articles having useful focuses on the subject.

### **2.2 Details of systematic search and academic databases used**

The central part of the systematic search involved the use of *MyAthens Database* a product of *Eduserv* (2011). Through MyAthens access was possible to EBSCOHost Web (2012) which allowed further access to multiple online academic databases to carry out systematic search of the literature. Academic Search Complete (E-Publishing, 2011), *PsycINFO* (2011), *PsycARTICES* (2011) and Education Information Resources Center (2011) were selected as the primary technological sources to be used for the literature review. In addition a search for relevant websites and articles was carried out using the Google internet search engine ([www.google.com](http://www.google.com)), including Google Books ([www.google.books.com](http://www.google.books.com)). A search for books, editorials and magazines on Collaborative work and working together was carried out in the University of East London's Library allowing access to hard copies of relevant books, journals and texts. The Government of Malta's Ministry of Education, Employment and the Family (2011) website was accessed for information relevant to policies, laws and any relevant previous literature on Collaborative work. A matching search was carried out on the website of the UK government, (Department for Children Skills and the Family, 2010). A final search was carried out on the *Cochrane Database of Systematic Reviews* (2012) which is

a database of systematic reviews and meta-analyses which summarize and interpret the results of medical research.

### **2.2.1 Dates of search and keywords used as part of the systemic search**

Five main internet academic databases (appendix 8.2) were used to carry out the online search. Multiple terms were used to search articles related to the scope of the research questions. Key words used to apply a search included the various terms used to describe working together as described in the Introduction (please refer to section 1.2) Keywords and search terms were used in various combinations reflecting the different ways several authors have used terminology to describe general or specific Collaborative work (refer to appendix 8.1<sup>4</sup>). One available literature review article, systematically reviewed the several different terms that have been used in dictionaries and medical databases and presented a summative report of the findings (Choi & Pak, 2006). This article provided a good reference for the choice of search terms to use in order to gain access to other relevant literature.

### **2.2.3 Inclusion and exclusion criteria in search including results.**

A number of inclusion and exclusion criteria were applied throughout the use of the search functions of the different academic databases in the systematic search. These were applied to both internet academic databases (ASA, pA, pI, ERIC) as well as online library search catalogues (UEL). This allowed for increased specification and accuracy of the research search. Due to the fact that several studies are carried out within Multidisciplinary, Interdisciplinary and Trans disciplinary academic approaches the initial search yielded results with keywords similar to those used in the research, however having a different application in the area of academic research<sup>5</sup>. Studies that were not about Collaborative working practices were eliminated from the search.

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<sup>4</sup> Appendix 1 indicates the keywords used for the search, including the corresponding mediums used for the search, the research question that the particular search intends to cover and the dates in which the search was carried out.

<sup>5</sup> The largest number of search results presented literature that focused on joint academic initiatives and most commonly 'multidisciplinary' perspectives within scientific research, particularly from the Health Science fields. This reflects a tendency in the academia for different disciplines coming together and producing research with combined theoretical and professional frameworks. The application to the word 'work' in the search allowed for a greater reduction of the results. The word teamwork in particular, also yielded a large amount of results that can be applied to the scope of the research; however, much of the literature presented was not relevant in comparison to studies that focused more on Children services settings and professionals working with Children. Moreover, Literature that was published prior to the year 1980 was excluded as the author gave

On online academic databases, search inclusion criteria for peer reviewed journals were applied in order to increase the chances that the search results reflected literature that was of a high methodological quality. Peer reviewed journal articles have been critically analysed and therefore this increases the chance that the literature that has been referred to by the author is more reliable. Sataloff argues for the importance of referring to peer-reviewed literature and recommends that high quality literature reviews make use of peer review (Sataloff, 2011). Search results of online articles that did not match peer review criteria were eliminated.

### **2.3 Details of research findings from systematic review**

Different peer reviewed articles, discursive essays, experiential and quasi-experiential studies both investigating and discussing different aspects related to Collaborative work in services for Children with SEN are presently available. The results of the systematic review were highly productive, highly contrasting with the results produced for the literature and studies focusing on research carried out in Malta. The exception lies with a few studies (some of which unpublished), and some reference made to different types of Collaborative work in some of the official government policies and documents regarding developments in the Inclusive Policy for Children with SEN the related services (Bartolo & Martinelli, 2007; Ministry of Education, 2002; Inclusive and Special Education working Group, 2005; Ministry of Education, Culture, Youth and Sport, 2009; Ministry of Education, Youth and Employment, 2002; Nightingale et al., 1998; Tanti-Burlo', 2010). It is important to note however that the research and government documents focusing specifically on Collaborative work in Malta are not available. Interest in Collaborative work between different professionals seems to be new within a local context. As a result most of the theory and literature reference taken within this study originates from the available international literature.

#### **2.3.1 The value of Collaborative work in services for Children**

Throughout this literature review it will become clear as to how it is generally agreed that Collaborative working practices among professionals from different disciplines allow for greater opportunity for a holistic approach to tackling the often complex and diverse problems

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preference to literature reflecting recent study which is more likely to adopt modern and developed research methodologies.

Children face. In the UK, Collaborative working practices have been a key focus of policy implementation and Children's services organisational management (Department for Children Schools and the Family, 2003) Payne (as cited in Hymans, 2008) put forward an argument for Collaborative working practices:

... the case for treating social problems in a holistic fashion is overwhelming. People know, in simple every day fashion, that crime, poverty, low achievement at school, bad housing and so on are connected (p.12).

Rhodes (as cited in Watson, 2006) explains how 'Joint working' underpins many recent policy documents for the implementation of Children's services in the UK and how this was a key feature of the Labour Government's efforts to improve social policy, education and the modernisation of public services. For example the 2006 legislation "Non-statutory guidance to Every Child Matters: Change for Children" states: "Multi-agency working is about different services, agencies and teams of professionals and other staff working together to provide the services that fully meet the needs of Children, young people and their parents or carers"(p.18). Moreover Salmon and Raport (2005) explain how The Children's National Service Framework (NSF) aims to develop national standards across the National Health Service (NHS) and social services for Children. It puts Children and young people at the centre of their care and builds services around their needs. The Children's NSF is based on key values of the NHS Plan, which include modernization and breaking down professional boundaries (Department of Health, 2000). Both the Children's NSF (Department of Health, 2004) and the government green paper, *Every Child Matters* (Department for Children Schools and the Family, 2003) see Children's mental health as the business of all the people, agencies and services in contact with Children and young people.

*Every Child Matters* (2003), published in the aftermath of the inquiry into the death of Victoria Climbié (Laming, 2003), proposes a range of measures to reform and improve Children's care. It takes the concept of Collaboration one stage further by proposing that key services for Children and young people, such as local education, social care and some health services (including locally commissioned and delivered Child Adolescent and Mental Health Services - CAMHS) are integrated as part of Children's Trusts (Salmon & Rapport, 2005).

Policies implemented in the UK seem to contend that one of the benefits of Collaborative working is that professionals may be in a better position to address the complex problems faced by Children. Moreover, Children's services may choose the Collaborative model in

order to increase efficiency when faced with limited resources and as a way to minimise client frustration when using the service<sup>6</sup> (Delaney, 1994). Similar client frustration has been expressed by users of services in Malta who have complained about delays in assessment provision as reported in one public consultation in Malta by different local bodies and service users (Ministry of Education, Culture, Youth and Sport, 2009).

A study in Scotland published in the British Psychological Society (BPS) *Journal of Educational and Child Psychology* consisting of 106 completed questionnaires, 4 focus groups and 5 interviews highlighted that effective Collaborative work can lead to efficient minimal intervention, depending upon the Children's needs (Barclay & Kerr, 2006). This does not mean that quality of intervention is reduced, but is more effective in targeting what is needed effectively. Once professionals communicate with one another on the needs of Children, there is the reduction of the possibility of useless reproduction of similar assessments and interventions. Barclay and Kerr (2006) explain that there is a greater degree of protection for both Children and professionals and a decreased risk of vital information being missed out. The risk of having the need for important decisions to be taken by only one professional in comparison to a group is also diminished.

A discussion by Taylor (2003) explains that Collaborative work is also a source of skill enrichment and knowledge and know-how is transferred between professionals possibly considering each other's case. Taylor explains how in good examples of Collaborative work, professionals from different disciplines have the option of meeting and discussing casework. In the process of doing this, they are in a position to offer alternative explanations and constructions about the cases to each other. This is of crucial importance to decision making. Moreover, within a framework of dialogue and communication, Collaborative work may also give opportunities for real-time practical ways of continuing professional development and training (Taylor, 2003).

### **2.3.2 Arguments against Collaborative working groups**

Existing arguments against Collaborative working practices ought not to be overlooked as some authors have also criticised Collaborative working practices and some have suggested

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<sup>6</sup> Delaney (1994) cites various authors who argue for the need for agencies to collaborate: Increased efficiency in the face of declining resources and minimisation of client frustration when using the service (Whetten, 1982) and pre-existing networks or collaboration.

that individuals tend to function better when working independently rather than in groups. An example is Janis' early study in 'Group think' (1972) as cited in Arnold et al. (2005).

According to Janis, groupthink occurs when group members' desire to collaborate and agree on common perspectives over-rides the ability and motivation to select the best possible outcomes, potential risks and alternative decisions in work groups. This takes place in what Janis calls 'cohesive' groups where group members have positive informal relations with each other. Moreover this effect is also intensified when a key-person in a team is generally un-cooperative and unconstructive in criticism of other individuals' views. Groupthink also happens when individuals are subject to overestimation of the group's power and morality, close-mindedness and pressures towards uniformity.

The validity of Janis' arguments have been criticised, for example by Aldag and Fuller (1993). Criticism includes the fact that Janis' groupthink syndrome has already been investigated by other social scientists in the past who presented mixed evidence. Also, Janis' arguments are based on retrospective accounts and evidence which needs to be reviewed. Despite the valid criticism, however, some arguments appear to be valid. What is important in Janis' study is that it shed light on the different challenges Collaborative working groups can face in decision making process and how their attitudes and value toward Collaborative work may impact on the process of Collaboration. A number of possible explanations have been suggested for this phenomenon, including '*evaluation apprehension*', in which group members feel afraid of what others will think (Arnold et al., 2005).

Another example of a common but criticised practice in Collaborative working groups and teams is that of group idea generating, also known as 'Brainstorming'. It was originally advocated by Osborn (1957) who argued that if a group performs brainstorming more ideas will be generated, and as a further result, members will be encouraged to produce even bizarre ideas, and not be ridiculed for them. Thus individuals can think up twice as many ideas in a group as they could on their own. However, contrary to what Osborn advocated, some research has indicated that lone individuals who are encouraged to think of as many ideas as possible generate more ideas per individual than are achieved by groups (Lamm & Trommsdorf, as cited in Arnold et al., 2005. ).

Despite all the arguments against different aspects of Collaborative working practices, international policy development and organisational discussion, including that regarding the

provision of services for Children with special educational needs, have repeatedly stressed the need to work Collaboratively (Baxter & Frederickson, 2005; Ministry of Education, 2002; Inclusive and Special Education working Group, 2005; Ministry of Education, Culture, Youth and Sport, 2009; Ministry of Education, Youth and Employment, 2002, Department for Children Schools and the Family, 2003). Some authors also explain that in the late 1970's and 1980's the subjects of Collaboration and teamwork dominated the international literature (Giangreco, Edelman, & Dennis, 1991). Moreover, Arnold et al. (2005) explain that 'although many people are very cynical about the value of meetings and committees, the fact is that their work tends to involve a lot of them' (p.425). Furthermore, Guzzo and Dickson (1996) explain how in most organisations most major decisions and many lesser ones are made by groups and not individual professionals. For this reason the way groups work have attracted a large amount of interest and their prevalence and type of Collaboration has aroused increased research interest in organisational psychology.

### **2.3.3 Collaborative work – Prevalence in Europe.**

There are a number of studies on the prevalence of Collaborative work in Europe coming from Organisational Psychology research interests. Although these do not focus specifically on the prevalence of Collaborative work between different professionals in Children's services the author has included them for reference and comparative purposes. Moreover, several manifestations of human behaviour during Collaborative work are likely to extend similarly over different psychological and organisational environments.

A study that obtained survey data from 6000 workplaces across ten European countries asked senior managers to evaluate the level of Collaborative work happening in the largest team within their own organisation. The focus was mainly on Collaborative decision making which is a central aspect of Collaborative work and centred on assessing a number of themes relevant to teamworking. Despite the author's concerns about the potential bias of the managers' response in the research, seeking to display a positive image of their organisation, the results show that responses were far from overly positive.



| <b>The incidence of teamworking in ten European countries<sup>7</sup></b> |   |  |
|---|---|--|
| <b>European Country</b>   | <b>Percentage with at least one decision area assigned to teams</b> | <b>Percentage of workplaces 'team-based'</b> |
| Sweden  | 44  | 11   |
| Netherlands   | 38  | 5  |
| France  | 27  | 5  |
| UK  | 27  | 5  |
| Germany   | 26  | 4  |
| Denmark   | 24  | 3  |
| Ireland   | 22  | 3  |
| Italy   | 22  | 1  |
| Portugal  | 16  | 0  |
| Spain   | 14  | 0  |

**Figure 4 - Indicates the incidence of Collaborative teamworking. Source: Adapted from Heusinkveld & Benders (2001).**

Sweden tops the list in cooperative working; however, such a positive outcome was not indicated by results from neighbouring Denmark. In the bottom of the list we have Mediterranean countries which seem to report a higher amount of individualised forms of work. In the study, Benders explains that processes and scheduling were the most common forms of teamwork recorded, and job rotation and attendance and absence control the least prevalent. Benders *et al.* note that 'headline' figures from studies of teamwork in the United States are higher than theirs (e.g. Gittleman *et al.*, as cited in Beders, 2001), 32 per cent of workplaces using teamwork. However, other authors referring to the study argue that such differences are due to variations in sampling methods and the way that questions were asked. For some authors, teamwork is more prevalent in Europe than in the United States (Arnold *et al.*, 2005).

The variations in results point to the likelihood that the prevalence of collaboration is different across geographical locations. A number of factors are likely to determine the differences in prevalence of collaborative practices including culture and organisational structures. Even though variations exist however, a low prevalence of reported collaborative practices in the different organisations is common across different countries, despite variations in low results. This fact likely suggests that professionals often work individually rather than collaboratively. Despite this likely trend the research does point to the importance of working collaboratively for improving working outcomes in a number of settings.

<sup>7</sup> Benders *et al.* decided that, in order to qualify as a 'group-based workplace', at least four of the eight decision areas should be assigned to teams, and at least 70 per cent of core employees should work in such groups. Only 217 workplaces (about 4 per cent of the total) met both criteria. In fact, only 1404 (24 per cent) of the workplaces assigned any of the eight decision areas to teams. Country-by-country, the 24 per cent were distributed as shown.

### **2.3.4 Prevalence of Collaborative work between different professionals in health settings – A meta-analysis.**

Different amounts of Collaboration also take place across different international settings within healthcare, often having different implications for the outcome of service delivery. This was illustrated by a meta-analysis (Zwarenstein et al., 2009) carried out on five studies of Interprofessional Collaboration for patient care following a search on the Cochrane Effective Practice and Organisation of Care Group Specialised Register (from 2000-2007), MEDLINE (from 1950-2007), CINAHL (from 1982-2007 and Journal of Interprofessional Care (from 1999 to 2007). Despite focusing on healthcare settings, the focus on collaboration makes the study relevant to the author's research of collaboration in children's services, given the similarity of the interest of the research focus. The review suggested that practice-based Interprofessional Care (IPC) interventions can improve healthcare processes and outcomes, but due to the limitations in terms of the small number of studies, sample sizes, problems with conceptualising and measuring Collaboration, and heterogeneity of interventions and settings, it was difficult to draw generalisable inferences about the key elements of IPC and its effectiveness. The authors however concluded that poor Interprofessional Collaboration (IPC) can negatively affect the delivery of health services and patient care. Interventions that address IPC problems have the potential to improve professional practice and healthcare outcomes (Zwarenstein et al., 2009).

### **2.3.5 Values attached to Collaborative work within Children's services**

As discussed so far, it seems that there has been a trend for services for Children to become increasingly stretched both in terms of staffing and accountability and that organisational development policy makers have placed value on Collaborative working (Mental Health Foundation, 1999; Public Health Institute of Scotland,; Scottish Executive, 2001, 2002; World Health Organisation, 2004). What has not been made explicit so far is whether professionals working in organisations and Children's Services value Collaboration. Some may argue that in general most professionals will understand that Collaborative work is the way forward and it is likely that they would value joint efforts to some degree.

One can argue that there is competition between individualism and collectivism, simply because cooperative behaviour is more costly for individuals (e.g. in terms of time, than non-cooperative behaviour, groupthink and team underperformance, etc.). The employee, therefore, may have an incentive to refrain from cooperative behaviours and stick to formally assigned tasks (Sanders, 2009). The professional may choose not to value Collaborative work and instead value working independently. Barclay and Kerr (2006) however presented different results. They reported that increased Collaboration is positively valued by professionals working within and across Children's services. Although the same professionals do not feel there is sufficient Collaboration, they did realise that one of the most perceived key elements to working together involves a positive team attitude and a collective valuing of Collaborative working initiatives. Moreover some types of Collaborative work are more valued than others as different types of Collaboration do take place.

### **2.3.6 A systems approach to exploring Collaborative Work**

Developments in collaborative working systems within organisations are likely to succeed when barriers and facilitators to successful collaboration are fully understood and evaluated in light of their complexity. Systems theory offers a unique way of evaluating complexity within systems such as those in which collaboration takes place allowing for a focus on the most important aspects of collaboration and its relationships. It could prove to be useful in this current research to set some time to review some of the current popular academic literature of the systems theory approach and in so doing gain a better overview of what systems theory consists of and how it can be applied to understand collaborative practices.

Eisner (2005) is the author of *Managing Complex Systems: Thinking outside the box*. This textbook is easily accessible offering different practical examples on how systems operate and offers approaches to use in order to affect systems change. The tools presented for carrying out systems change projects however seem to be mostly theoretical and not easy to apply. Nevertheless a number of important frameworks are presented that could potentially facilitate a systems perspective for change. For Eisner, a systems approach tries to focus on the whole of a system, while attempting to take into account interrelationships between the parts of a system (or units), whether inadvertent or intentional. These are sometimes also called interactions and interfaces, and Eisner tells us that 'empirical data support the notion

that rather than the devil being in the details, it's in the interactions and interfaces' (p152). Interactions that we have not fully accounted for can cause a complex system to fail (2005).

As Eisner also explains, another author, Sherwood (2002), also stresses important steps that need to be carried out for a systems approach to be successful and points toward the importance of evaluating interactions within systems clearly. A comprehensive textbook, seeing *the forest for the trees: A manager's guide to applying systems thinking* provides different approaches and tools that can be used to affect systems change. It clearly highlights essential elements that define and need to be used within a systems approach; meanwhile first time readers probably find it somewhat difficult to understand its core ideas. Sherwood argues that a systems approach needs to be systematic and repeatable in such a way that its application and methodology is recordable and re applicable. Such approaches need to emphasise interoperability and harmonious operation eventually providing a cost-effective solution to complex problems. For Sherwood, in assessing the problems of a malfunctioning system there needs to be a full consideration of alternatives which ultimately can lead to a robust system (2002).

Senge (1994) in a publication titled *The fifth discipline field book: Strategies and tools for building a learning organization* provides useful insights that can serve as a backdrop for improving a collaborative working system. Senge (1994) is strikingly straightforward and 'systematic' in presenting the crucial elements needed to master effective collaboration within a system. Limited descriptions are given on what constitutes poor collaboration or malfunctioning collaborative systems but it may be argued that a solution focused manner is the intentional source of this omission. For Senge, it is highly important to build a shared vision for collaboration and once that is affected, to build personal mastery in being a collaborative team member. Mental models of collaboration and planned collaborative work are also useful as they allow better team learning and organised communication within a team. All this for Senge can take place within a context of Systems thinking which can serve as a guiding framework to solve problems encountered when collaborating.

### **2.3.7 Different Systems of Collaborative working**

Different systems of Collaboration have been discussed in the literature including models of Collaboration that have been proposed by several different authors (Choi & Pak, 2008; Collin, 2009; Doyle, 1997). There is a large amount of literature available to understand how

Collaborative work takes place within systems and how different practices can differ from each other. As described earlier in the introduction, terminology used to describe different collaborative practices between different disciplines and professions is extensive and sometimes confusing. Such terminology is not only used in academic papers but even in everyday language and non-academic settings and literature. Choi and Pak (2006) carried out a highly systematic search of the terminology used to describe different types of collaborative work by using internet Google search engines, Healthcare databases such as MEDLINE (1986-2006) and reviewing several English dictionaries. Their interest was to first clearly describe and establish the most commonly used terminology and then evaluate and discuss different dimensions of collaboration including its applicability and effectiveness in Health, Education and Social Welfare settings. Their study proves to be highly useful for this present thesis and despite various limitations existing in their presentation of the methodology and the arguments in favour of the effectiveness of collaborative work; it provides a good rationale for choosing the triad definition of collaboration.

Choi and Pak (2008) give a limited description of what constituted their strategy for searching the various terms used to describe different types of collaborative work, so it is somewhat difficult to reproduce their literature review. Yet they produce an extensive classification of different types of collaborative interactions between professionals from the results of their study.

The results of Choi and Pak's (2006) study can be broken down into three terms that describe Collaborative working practices as the following:

Multidisciplinarity [collaboration] draws on knowledge from different disciplines but stays within their boundaries. Interdisciplinarity analyses, synthesizes and harmonizes links between disciplines into a coordinated and coherent whole. Transdisciplinarity integrates the natural, social and health sciences in a humanities context, and transcends their traditional boundaries (p.351).

This triple definition allows a classification of different types of Collaborative work among professionals. These are approaches that are used to resolve real world or complex problems provide different perspectives and guidelines and help to integrate comprehensive services and professional disciplines. According to Choi and Pak, these three terms may be seen as functioning on a continuum of eagerness to engage in Collaboration and are additive, interactive and holistic respectively. Many other authors, including Collin (2009) and Doyle

(1997), among many others use the same descriptive distinctions as Choi and Pak and moreover Collin explains that they are the most frequent distinctions used in the literature about Collaborative work (p.103). They are the terms chose to make specific qualitative analysis within this research to describe different models of Collaborative work among different professional disciplines working Collaboratively in Malta.

In another study Doyle (1997) describes multi-, inter- and trans-disciplinary working and provides practical examples. Multidisciplinary working involves professionals working in parallel, carrying out their own assessments in Children's services which are then brought together by a key member in order to give recommendations. However, this process may not reflect all the opinions of the professionals involved. On the other hand Interdisciplinary working, she suggests, is similar in that each professional carries out his or her own assessment and formulates recommendations jointly and agree on how to proceed. In this way information is also shared and knowledge is gained across the professional groups. Finally Transdisciplinary work involves 'role release', where participants may train and advise each other so that skills are transferred, allowing a child to have one key worker who can provide a holistic intervention plan. 'Role expansion' allows for theoretical concepts and language to be clarified without hindering professional identity, but instead improving communication and understanding.

### **2.3.8 Potential systems of Collaboration**

Barclay and Kerr (2006) explain how theoretical underpinnings are often considered when psychologists look at the way Children and young people develop and fulfil roles within the systems and contexts they are a part of, for example their family, peer group and school. The demands and structures of these contexts are believed to shape their development, behaviour and beliefs. Systems theories draw on both individual learning theory and group psychology. Children's services are also systems and those that work within them are exposed to similar pressures. The way Children's services function as systems can therefore help or hinder successful Collaborative working (Barclay & Kerr, 2006; Zammit et al., 2004).

Taylor (2003) describes four systems characterising different environments for Collaborative work. '*Closed complex*' systems absorb some information from external sources (such as other professionals), but most information is produced within the system. Information is shared only if it is requested. Secondly Taylor speaks of, '*Miniature closed*' systems, which

resembles the aforementioned 'multidisciplinary work (Barclay & Kerr, 2006; Choi & Pak, 2006; Collin, 2009; Doyle, 1997)'. Here professionals may collaborate in some ways, but have separate goals. Thirdly, Taylor speaks of '*Open naïve*' system which may comprise some level of interdisciplinary work; nevertheless it is superficial as there is a power struggle between services which are competing for control. Finally Taylor speaks of '*Open complex*' systems where there is a much less focus on roles within meetings, but a focus on minimal interventions, integrating and listening to different views and placing the child and community at the centre.

The different systems described by Taylor can be seen as progressively evolved systems of collaborating that are marked by improved information sharing and role allocation which in turn allow more effective practices for wellbeing of clients and stakeholders. Given the relatively young age of the Children's services in Malta, much of the collaboration taking place has not yet evolved to resemble an open complex system in its entity, but instead finds itself at a stage in need of further development.

### **2.3.9 Pathways to better collaborative systems**

Schrage (1989) has written an informative as well as interesting popular book on Collaborative work called *No More Teams!*. Despite being the earliest published textbook outlining a systems approach presented so far, his outlook is highly relevant to understanding how to improve modern collaborative systems. Like the author, Schrage believes that use of the word team when referring to groups does not address the most important part of the story: collaboration. Schrage does not focus on tools which can be used to assess present collaborative practices yet he explores the matter of collaboration from many perspectives, including: Conceptual and technical, the use of shared spaces and common collaborative platforms, tools that can help promote collaboration, Desires and constraints of collaborators and the systems based ecology of meetings. He does this within a wide variety of examples which remind the author of different aspects of later described findings of this research

Schrage (1989) identifies very specific designs for setting up collaborative system within an organisation. For Schrage effective collaboration is only likely to take place once goals are established and made clear to all collaborating parties. This can happen once feelings of trust and respect are engendered and appropriate methods of communication are made available and adopted. This will best take place within a model of collaboration that makes

responsibilities and boundaries explicit, thus allowing members to understand their own roles, capacities and limitations. The use of outsider inputs can also help facilitate and open information system in which external support can also be consolidated.

### **2.3.10 Potential barriers to effective collaborative working systems**

Without having the necessary support for the effective functioning of collaborative systems, including external support, Eisner (2005) also argues that a number of factors can diminish the efficacy of collaborative systems since they create difficulties in the interaction between functioning units. These factors include aspects that are highly related to people oriented dynamics and need to be addressed within groups as early as possible upon the establishment of working systems.

Having a divisive person within a collaborative working group is highly unproductive as much as having erratic communications styles between collaborative team members. The same can be attributed to having poor leadership and an inability to set boundaries and 'hire and fire'. Another frequently encountered barrier includes having insufficient expertise within the group as this can highly delay the group's effectiveness and limit the group's capacity and creativity. Finally Eisner (2005) explains that having poor information sharing and information gathering systems is likely to drastically decrease efficiency of the collaborative group and make it less likely to succeed in functioning.

## **2.4 Conclusions and implications for current research**

Information is available through literature focusing on theory and practice of Collaboration. There is similarly ample literature on systems theory and how this can be applied to organisational and collaborative systems. None is available however, that answers the research questions as applied to the local Maltese context. The literature review presented however, provides an opportunity for understanding different dimensions of the local and international scenario of Collaboration and to provide a basis for the current research. This research aims to address the gap in the literature by having provided information that can contribute to the current and future understanding of Collaboration between professionals in service for Children with SEN.



### **3.0 Methodology**

This section outlines the methodology adopted in this research. It starts by presenting the purpose and epistemological approach used. The author proceeds by presenting the research design, the data gathering and the data analysis. It finally concludes by considering issues related to the validity and ethical implications of the methodology.

#### **3.1 Purpose of research**

This research seeks to provide knowledge intended to inform the prospective development of Collaborative work among different professionals in the services for Children with SEN in Malta. John Dewey (1859 -1952) who wrote much on the nature of knowledge, frequently described it as being interdependent with action, having a mutual relationship in which both knowledge and action often inform and restructure each other. In a similar way, the author believes that the present research can be seen as a development of knowledge intended to facilitate the development of future Collaborative action within the Maltese services for Children with SEN and eventually possibly even provide the basis for further research built upon future developments of collaboration.

Research should provide information that is relevant to the application of the organisational needs within an educational system (Gert & Nicholas, 2003). The author hopes that it will serve as a resource to guide future policy and professional training. It is the first initiative with such scope, and therefore may be seen as exploratory in nature, investigating an area that is new in practice with the intention of encouraging further developments, both of an investigative and developmental nature. The author also aims to develop ideas that could potentially be subjected to further research investigation (Zikmund & Barry, 2010) and used, if needed, to facilitate more effective Collaborative work. There seems to be agreement in the research methodology literature that for researchers with limited experience about the research issue, exploratory research usually proves most valuable in providing preliminary steps upon which to build more explanatory and emancipatory research (Onwuegbuzie, Dickinson, Leech, & Zoran, 2009; Onwuegbuzie, Johnson, & Collins, 2009; Zikmund & Barry, 2010).

Exploratory research follows a primarily Qualitative approach which provides rich information and broad accounts containing material that is often less factual, numerical and

conclusive than other quantitative approaches that may be chosen for differing purposes, e.g. explanatory and emancipatory research projects (Onwuegbuzie, Johnson et al., 2009). The subjective individual experience of selected samples of people such as those selected for individual and focus group interviews, taking place within the Children's services, are explored through a pragmatic epistemological lens, with the goal of providing a description of the personal knowledge of participants. This allows for a greater understanding of participants' experience of Collaborative work, and consequently, provides data useful in answering the research questions.

### **3.2 Pragmatism and research methodology**

The epistemology adopted in a research project has a central role in determining what research questions are formulated, what type of data we collect and what method we use to collect it. It also consequently determines much of the way interpretation takes place and how our understanding about the research problem develops. Research questions and adopted methodologies most often imply that the respective authors have adopted particular world views (Hesse-Biber, 2010). In the case of this research, the author's Pragmatist epistemological approach is made clear and referred to at different stages in the report.

Views of participants seen in light of pragmatist thinking make it clear how thinking about both past and possible future action in terms of Collaborative work provides important knowledge to support future developments in the area. It is only through the reflection and thought processes that participants show that effective future action is possible. Dewey (1929a) explains how knowing has a strong relationship with our actions and their consequences. Knowing is a form of 'trial and error' thinking in which one can explore potential actions within a mental process, prior to executing the action per se in the 'action-implementation' world. This research plans to provide a platform for knowing, so that Collaborative work can be implemented in the future in a manner that is informed by research. In line with this logic, the research itself can also be considered as an account of trial and error thinking of the author about the intended future development of Collaborative working practices. Moreover, the research itself can be considered as action, of which its consequences and execution will provide reference for more reliable knowledge and, eventually, action. Research was one of the ways in which Dewey (1939) felt that individuals can support effective change within systems and organisations. As mentioned previously,

Dewey (1916) felt that his pragmatism was not solely confined to the remit of philosophy but instead also carried the purpose to promote effective change in the real world. In line with this thinking the author has selected a methodology that can support a framework for gathering the knowledge needed to explore the area of Collaborative work.

### **3.3 Mixed methodology research - Rationale**

The pragmatist rationale behind the choice of this research methodology is that both a quantitative and a Qualitative approach can provide important information and data for understanding how professionals value Collaborative work. This is also characteristic of the Pragmatic epistemological approach to research, which gives epistemological justification for practical applications of different research methods, thus allowing for the most effective production of knowledge. In fact, in the last two decades, an increase in mixed methodological applications can be found in the academia, frequently employing the pragmatic approach to research design, methodology and data interpretation (Tashakkori & Teddlie 2003). There has also been a rise in mixed methods research textbooks and articles (e.g. Creswell & Plano Clark 2007; Greene 2007; Johnson & Christensen 2008; Plano Clark & Creswell 2007; Ridenour & Newman 2008; Teddlie & Tashakkori as cited in Onwuegbuzie, Johnson et al., 2009).

Pragmatism asserts that research need not be either Qualitative or quantitative. Instead pragmatism illustrates that regardless of perspective (e.g. post-positivist or constructivist), both Qualitative and quantitative data can be jointly analyzed (Onwuegbuzie, Johnson et al., 2009). Data that will be gathered as part of the data collection will be ‘multitype’, meaning that it includes both Qualitative and quantitative information. The analysis of such data will also involve different forms of analysis referred to as ‘multi-analysis’, both mathematically for the quantitative part and thematically (Braun & Clarke, 2006) for the Qualitative part. Mixed methods research of this type is likely to provide superior results and research outcomes (Onwuegbuzie, Johnson, et al., 2009) in comparison to single type research. Pragmatic researchers also argue for the use of mixed methodologies as they improve both internal and external validity of the research. This provides clearer assurance that the sought focus of the research is the result of the underlying human phenomena and/or behaviour traits rather than a function or production of the research method, and researcher bias (Onwuegbuzie, Johnson, et al., 2009).

The emphasis of this research's design is Qualitative in nature as the large part of the data gathering is found in the Qualitative section of the mixed method research as well as the eventual central focus of the analysis. The descriptive statistics however have been included to complement to the richness of the data obtained via the thematic analysis (Braun & Clarke, 2006). Descriptive statistics have recently been increasingly included in Qualitative research designs as they can be used to enhance the Qualitative researcher's quest for detailed description and it has been recommended to adopt a quasi-statistical approach to accompany Qualitative research. Interestingly, Howard Becker (1970, p. 81) as cited in Onwuegbuzie, Johnson et al. (2009, p. 126), contended 'one of the greatest faults in most observational case studies has been their failure to make explicit the quasi-statistical basis of their conclusions'.

There are several reasons why a mixed methodological approach was selected as the most suitable way forward for carrying out the research. The author felt that a broad focus data collection was required, given the nature of the research questions and the need to understand what professionals experience. The need to achieve a broad general picture of the views of Collaborative work complemented the need for a more in-depth analysis of participant's experience. This kind of approach in mixed research is not unusual and is advocated by Howe (2003). Howe points to the need for such research particularly when the research actively engages the participation of the stakeholders – as is the case with the service managers/unit coordinators in this research. Such an approach also ensures that all relevant voices are heard through both broad and focused data collection. This approach allows for two types of data to be achieved from the research design. Multi-type data has been collected both in terms of numbers through the descriptive statistics and quantitative design and discursive themes through the Qualitative. Moreover, Hesse-Biber (2010) states:

Qualitative approaches promote listening between researchers and the researched in order to get at deeper, more genuine expressions of beliefs and values to foster a more accurate description of views held" and gather a more complex understanding of social life. Additionally, Qualitative approaches, because of their exploratory and theory-generating nature, tend to be oriented toward discovery of new phenomena and ways of understanding (p54).

### **3.4 Research design**

The original research questions have been shaped both by the interests of the stakeholders and epistemological paradigm and perspective of the author. This is due to the fact that to answer

the research questions it was necessary to gain data about the experience of Collaborative work of both the services managers/unit coordinators (who happen to be stakeholders) and the professionals working within the services themselves. In such a way, the original research questions undoubtedly affect the methodology of research (Hesse-Biber, 2010).

Conveniently, in pragmatist research, paradigms can remain separate, but they also can be mixed or combined into another research paradigm (i.e. mixed research) or theoretical framework (Mertens, 2005). This may also be applied to the theoretical approaches adopted in the analysis, interpretation and discussion of data.

In this research, Pragmatism has been chosen as the central epistemological paradigm, while systems theory is used to understand the dynamics of Collaborative work (Onwuegbuzie, Johnson, et al., 2009). The design of the data collection methods have been influenced by both pragmatism and systems theory as they seek to gather information on participants' knowledge and attitudes towards Collaborative working practices without neglecting their actual Collaborative work practice. Moreover, the items constructed in both the questionnaires used in the data gathering of the quantitative and Qualitative sections are grounded in systems theory allowing a prospective discussion to be informed by the theoretical approach.

Taking a broader view of the research design, Systems theory also influenced the choice of using different data gathering tools together in order to allow the author to understand various levels of experience at different points within the researched organisational system. At the individual level, through the personal interview it was possible to understand how collaboration was experienced from the individual perspective and world view of individual managers/unit coordinators. On the other hand from a group level, through the focus group, it was possible to listen to the experience of participants working within the organisational system. Finally, at the survey level (n=60) it was possible to access different professionals' view on a macro scale and at wider service level, once data gathered for analysed for descriptive purposes. This approach is more holistic and can be considered a systems-based approach, as its underlying rationale avoids ignoring important informative elements as expressed by different units within the system.

Systems theory further allowed the author to create a framework for understanding collaboration according to the triple definition of collaboration described in the literature

Review (2.3) as multidisciplinary, interdisciplinary and Transdisciplinary. This understanding influenced largely the choice of questions in the questionnaires used for data gathering, since the questions chosen seek to establish whether the collaboration participants report resemble the one type of collaboration or another (refer to appendix, 8.3).

### **Mixed methodology research – Design**

The research design is a Qualitative dominant one as the central part of the data obtained was done through the means of the interviews and focus groups. A mixed data analysis was also adopted allowing for a mixed analysis process to be performed and thus offering richer data and possibilities for interpretation. This research can be considered as primarily a Qualitative one employing the use of open ended semi-structured interviews and focus groups, and a survey composed of closed-ended, likert scaled multiple choice questions. As Hesse- Biber (2010) recommend, the type of mixed methodology design can be described by the capitalized term “QUAL” to emphasise the dominance of the Qualitative component of a study in a Qualitative approach to mixed methods research design; while the lowercased term “quan” can be used to indicate the supporting role of the quantitative component manifested through descriptive statistical methods<sup>8</sup>. Mixed methods designs also take into account whether or not the two studies are mixed sequentially (one, then the other) or concurrently (at the same time). In the case of this research, the design was mixed concurrently.

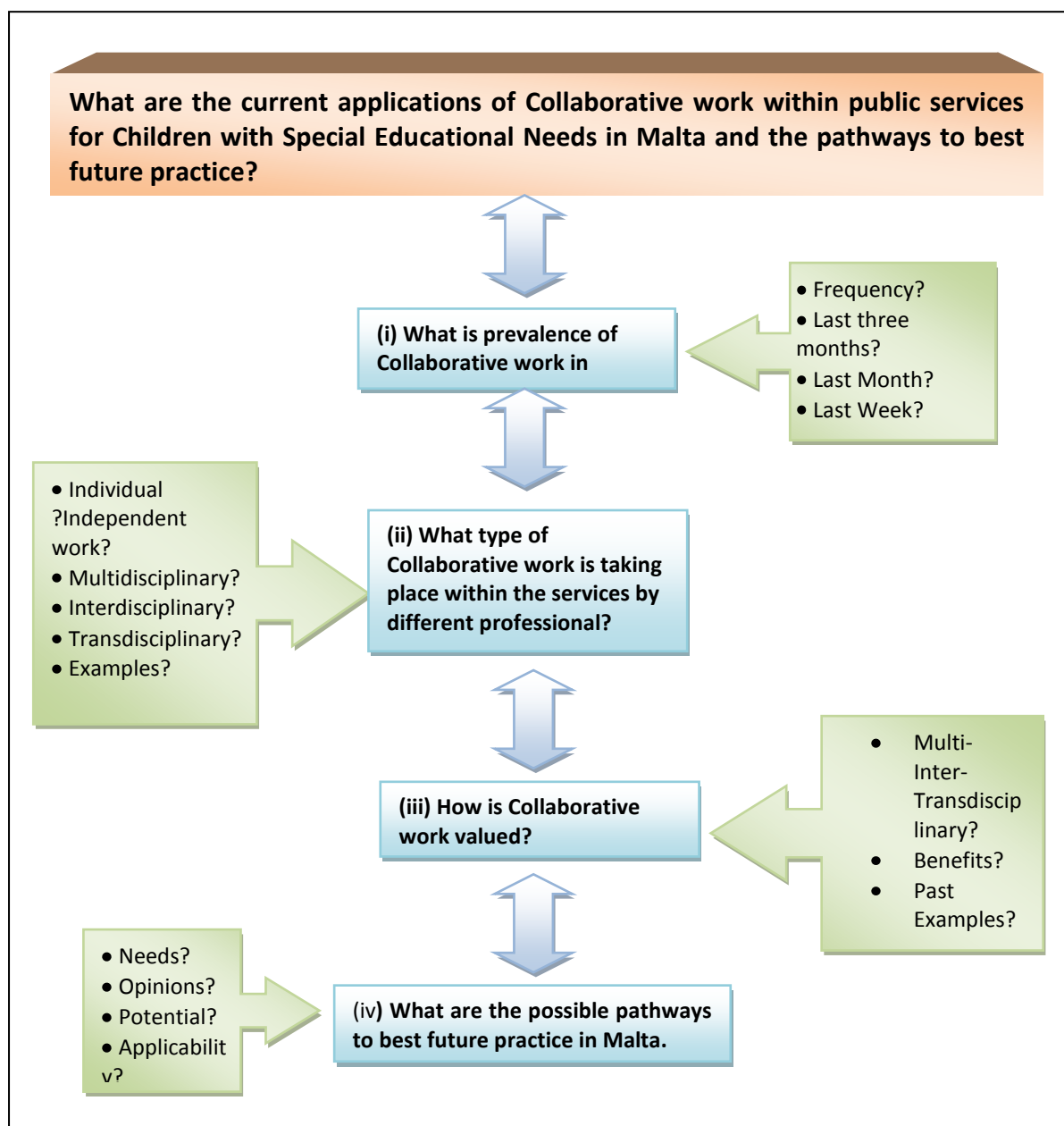
The research design was mixed concurrently in parallel, thus making it also a Parallel mixed methods design (Ridenour & Newman, 2008). This consists of the concurrent mixing of Qualitative and quantitative methods carried out as separate studies within the same research project, with the Qualitative component taking a more dominant role. The quantitative data provided information which supported the collection of the Qualitative data, via the identification of participants for the focus group. The Qualitative data gathered can be considered a representative Qualitative sample since it allowed for the identification of participants who contributed to the Qualitative interview.

The synergy however between the two datasets is only limited to the production of participants and data was only collected in parallel and not analysed as a whole. The data

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<sup>8</sup> Rather than typing ‘QUAL’, in this research, the word ‘qualitative’ will be capitalised : ‘Qualitative’. The word ‘quantitative’ will remain unchanged.

connects through the fundamental point that the questions constructed in both the survey questionnaire and the open ended questionnaire of the interviews and focus groups are based on the same main research questions (Onwuegbuzie, Slate, Leech & Collins, 2007). In parallel concurrent mixed method research designs, data is not combined at any stage of the research process, but instead referred to in the presentation and interpretation of results where quantitative data (quan) is mentioned to complement the Qualitative data (QUAL) of the research (Hesse-Biber, 2010). This applies to the present research methodology. Moreover, concurrent parallel mixed method designs allow a more robust understanding of Qualitative results by triangulating the research findings and possibly even exploring divergent or disparate findings. (Hesse-Biber, 2010).



**Figure 5 - Represents the research questions along with related reflections of the author. These were referred to and expanded on in the construction of the questionnaires.**

### **3.4.1 Design of Qualitative Section**

Being a primarily Qualitative research, the author was aware of the central importance of the Qualitative aspect during its design. The pragmatic orientation of the research also meant that there was a focus on how professionals ‘act’ and ‘think’ about the Collaborative work that they engage in within the Children’s services for SEN in Malta. Moreover, the author was very much interested in participants’ knowledge about the current practice of Collaborative work and how it can be best manifested through action in the future. This framework for thinking stands well in relation to the Qualitative tradition. Qualitative research design takes place within an understanding of the importance of participants’ personal experiences and meanings attributed with such experiences. Some Qualitative research designs are also built by stressing a critical stance towards knowledge building and by taking into account how that knowledge may affect transformation with an emphasis on social change (Hesse-Biber, 2010). This is one aim of the Qualitative aspect of the present research.

#### **3.4.1.1 Interviews**

Semi- Structured open ended Interviews have been selected as the primary mode of data gathering allowing the author to understand participants’ experiences and gain important information (Willig, 2008). These consisted of interviews that were guided by a list of questions that were designed to develop an open discussion on the research area (refer to appendix 8.5). Interviews allowed for a relationship to be built with the participants enabling them to feel comfortable to describe their experience of Collaboration which can sometimes possibly be a sensitive area/ point for some people. Interviews are flexible and the researcher could adapt them to suit the style of communication and needs of the participants and also offer extra information when needed. The disadvantage was that the interviews took some time to carry out and this could be an issue, taking into account the fact that all of the interviewees had administrative positions and very tight schedules. Interviewers at times may be susceptible to influencing the interview process and possibly inducing bias (Willig, 2008). This can be minimised however through researcher reflectivity and a strong listening attitude as opposed to directedness. The author was mindful of the need to ask things in line with the research questions and avoid leading questions in order to minimise possible influence.



Interviews allowed for service managers and unit coordinators to contribute extensively to the research, permitting individuals with broad experience of Collaboration within the services to express their views and voice their concerns. Interviews were recorded on digital audio following consent being given by participants.

#### **3.4.1.2 Focus group**

The Focus group allowed for a different category of professionals to be interviewed simultaneously. It was included along with the interviews because due to the pragmatic nature of the research it is essential that both professionals who have knowledge of Collaboration (the service managers/unit coordinators) and the professionals who have experience of Collaborative action (mainstream professions) are interviewed in parallel. Mainstream professionals were interviewed in a group setting providing information that was also both broad and deep. The Focus groups allowed the researcher to quickly get reliable and common impressions in a time effective manner, given the limited time both the researcher and participants had at their disposal (Willig, 2008). The challenge presented in the undertaking of the focus group consisted primarily in getting the participants to be available at the same time. Moreover, the researcher found it particularly tricky to divert the discussion back to the research questions as he frequently felt the discussion strayed from the main points. Focus groups were recorded digitally both visually and audibly following obtained consent by the participants.

The questions used in the interviews and focus groups were not adhered to rigidly, but were designed to offer a direction throughout the interactions between the researcher and the participants in the data gathering stages. They were considered more as discussion points and open ended questions designed to act as catalysts for discussion. Qualitative research designs in general are not constructed with the goal of seeking direct and precise answers to a list of questions with a goal of generalising findings to wider groups (Hesse-Biber, 2010). Instead Qualitative research such as this look for complex data that can be analysed to obtain important patterns and logical processes within participants' expressed information.

#### **3.4.1.3 Questions used in interviews and focus Groups**

A list of questions was constructed to be used in the interviews and the focus group (Appendix 8.3). The questions have been built upon the main research questions, expanding

each research question into 4 separate questions. The questions target broad issues allowing the participants to discuss and elaborate on their answers (Langdridge, 2005). The questionnaire has been designed in such a way not to rely on a rigorous schedule, but to offer some direction in the course of the interview and focus group discourse. It may be argued that some of the questions cannot be considered open-ended (e.g. Do you value collaborative work?). However, in cases where participants responded with a closed answer, the author asked participants to elaborate on their answers (e.g. what do you value about collaborative work?).

The open approach suits the exploratory purpose of the research and the epistemological social pragmatist framework as it encourages participants to present examples of past actions of Collaboration and the knowledge/experience gained through different aspects of it. It also encourages them to think of future possible actions for Collaboration between professionals like themselves. As interviews and focus groups are a useful tool for providing in depth information of participants views (Braun & Clarke, 2006; Langdridge, 2005), they have been included in the research in a second stage of data gathering. Data gathered through three semi-structured interviews and the single focus group provided the central information about the perceptions of Collaborative work.

Questions in both interviews and focus group were constructed with the purpose of providing space for participants to explain their own understanding of collaboration. No general definition of collaboration was provided with the scope of purposefully allowing participants themselves to explain what type of collaboration they believed currently existed, lacked and was needed. Although the possibility and use of providing participants with a definition was initially considered by the author, during mid-stage of the questionnaire construction for qualitative data gathering the need for providing a definition was omitted. This permitted participants to explain what they themselves understood by collaboration and how this was practices within their professional group. Providing a definition could have potentially induced researcher bias related to the author's own values and understanding of collaboration. This approach was also take during the design of the quantitative questionnaire (n=60).

### **3.4.2 Design of quantitative section**

For the construction of the survey, the different topics that needed to be included, as related to the research questions, were outlined prior to the construction of the questions. Each research

question was broken down to several different sub-questions in order make it more possible to gather broader data (Figure 6). It was decided that a closed ended multiple choice questionnaire would suit the purpose of the research, making it easier and quicker for participants with busy schedules to fill in.

Questions possibly making participants feel uncomfortable or hesitant when answering were avoided as much as possible to ensure that the response rate was high enough to provide enough data. Such questions included “Why do you feel Collaboration does or doesn’t take place?” .A question like that might make participants feel pressured to pass critical judgment on the work of others. The rate of responses (10/10) to the pilot study however indicated that the questionnaire was not viewed as threatening to answer, as no questions were left out. There is always the risk in survey questionnaires however, that participant’ responses are influenced by the need to socially conform to expected behaviour and attitudes (Mertens, 2005). With this in mind, the author constructed the questionnaire by including items focusing on the prevalence of, attitude towards and type of Collaboration practiced. This approach allows for a more thorough evaluation of participants’ experience of collaboration. It also allows for possible incongruence in answers to be analysed, particularly between reported value and actual practice.

Similarly as in the qualitative data gathering, participants were not provided with a general or unilateral definition of collaboration. They were however asked to classify which type of collaboration they value and believe takes place most often within their respective professional group or service. The different type of collaborative practices and interactions presented indicated that there is no one specific kind of collaboration, but different ones. By this process the author hoped to be able to access participants’ subjective experience of collaboration with greater objectivity without hinting at a specific or ideal standard of collaboration. .

### **3.4.2.1 Questionnaire construction for quantitative section**

#### **Questionnaire Part One – Prevalence of Collaborative work**

*Part One* of the questionnaire asks participants about the percentage of time they have spent in Collaborative work in the last month, last week and last three days. *Part One* aims to gather data on the prevalence of Collaborative work. This particular question seeks to answer

the first research question – *How much Collaborative work is taking place between different professionals within the services?*

In order to gain specific data on the prevalence of participants' Collaborative working, participants were asked to rate how many hours they spent working Collaboratively in the last three months, in the last month and in the last week. The choice in time frame allowed participants who engage in Collaborative work to provide the data needed, irrespective of whether they worked Collaboratively in the last week or earlier throughout their working terms. A maximum time frame of three months however, was applied as the author felt that it was best suited for remembering. It is likely that beyond three months participants may not remember accurately what type of work they engaged in and so chances of incorrect data to form part of the responses would increase.

### **Questionnaire Part Two – Professional Backgrounds of Collaborative Team members**

*Part two* involves a table with the name of different professionals (e.g. school social worker, school psychologists and speech and language therapists) and a check box next to each professional background. Respondents are asked to mark which professionals they have worked Collaboratively with in the last month. The purpose of this part is to gain specific data about previous working relationships. More specifically, participants are asked to identify the professionals with which they have worked in the last month. This question allows data to be gathered about which professionals are working Collaboratively with others. A list of professionals working within the service was compiled by referring to the Health and Educational services websites (Government of Malta, 2011). This question has been placed strategically with the purpose of reducing bias and false answers. Rather than asking which profession the respondent belongs to, the author decided to ask the participants which professions other professionals they work with belong to, thus eliminating the need for participants to identify their respective professional backgrounds in their questionnaire. This strategy also grants anonymity to the participants, removing the chance that they are identifiable.

### **Questionnaire Part Three – Type of Collaborative work**

*Part three* of the questionnaire has been constructed using different statements that describe different models (or types) of Collaborative work, as described in the literature (Choi & Pak, 2006; Collin, 2009; Doyle, 1997). These statements represent aspects relevant to a systems

theory based evaluation of Collaborative work; more specifically they refer to the type of Collaborative work being employed (individual, multidisciplinary, interdisciplinary and Transdisciplinary). Seven statements formed through the literature and participants were asked to rate how much these statements reflect the Collaborative work they have engaged in within the last month. One statement was included representing no Collaborative work at all, to check whether participants have worked independently as opposed to Collaboratively. The items in this part are as follows and the respective literature that they have been constructed on is noted respectively:

*Statement 1. Working independently on a project/ casework without other different professionals being involved.*

This statement reflects individual work where professionals either prefer working alone or are required to work independently due to their working circumstances or aspects related to the system that they work. This statement was constructed to emphasise both professional independence and work that does not include other professionals having any involvement of any kind. The wording used describes the opposite of the following statements which as a contrast set examples of different aspects of Collaborative working. If participants score high on this scale it is likely that within the last month they have engaged in independent work mostly.

*Statment 2. Working independently on a project/casework which is also being worked on by other one or more different professionals separately.*

While similar to statement one in terms of independent working, statement two is different in that it states that participant work on the same casework projects. This statement was constructed in line with the literature on multidisciplinary work which states that multidisciplinary work between different professionals takes place when people collaborate but at the same time maintain a high degree of independence (Barclay & Kerr, 2006; Chapman & Ware, 1999; Choi & Pak, 2006; Collin, 2009; Enright, 1997; Frost & Robinson, 2007. For e.g., Collaboration might take place at one or two small intervals but this is usually only limited to joining information for reporting and record purposes.

*Statment 3. Working Collaboratively on the same project/casework with one or more different professionals who has separate goals.*

Like statement two, statement three describes how professionals who collaborate have separate goals. The last part of the statement ‘has separate goals’ indicates that there is a difference in the approach of Collaboration in contrast to the possibility of having similar goals. This is characteristic of multidisciplinary work as it is different from working Collaboratively to achieve common goals. While the author is aware that individuals may still collaborate together effectively to support each other in achieving different goals in a piece of casework/project, a more unified Collaboration very usually entails the need to work on at least one or two common goals. The emphasis in the statement is also on the fact that it is about ‘working Collaboratively on the same/casework project’ and so the goals are separate in the same casework/project.

*Statement 4. Working Collaboratively with one or more professionals where effective communication takes place throughout the whole project/casework*

Maintained effective communication is generally noted as a sign of effective Collaborative work, that is superior to work with limited communication, such as that frequently described as multidisciplinary. Interdisciplinary goes a step further, allowing communication to be consistently maintained. Statement four describes an example of Collaboration which at various points in the literature has been referred to as characteristic of interdisciplinary work (Barclay & Kerr, 2006; Choi & Pak, 2006; Grobstein, 2007; Hughes, 2006 ).

*Statement 5. Working Collaboratively with other one or more professionals, openly sharing information and skills coming from each professional's background but maintaining clearly defined roles and boundaries to work procedures.*

Sharing is a sign that a professional is ready to reach out across to the other professional's background and beyond his or her own. It demonstrates a degree of openness frequently described in the literature about transdisciplinarity. The above statement points to aspects of sharing but also points to a limited open system based on maintaining fixed roles and boundaries. If it was not for the latter this statement could reflect more Collaborative Transdisciplinary working models. However given the fact that there is no ‘role-release’, statement 5 has also been constructed to refer to interdisciplinary work.

*Statement 6. Working in such a way that professional skills and tools needed are transferred from one professional of a different background to another, limiting the need for different professionals to be on the same case*

Statement 6 clearly reflects an advanced form of Collaborative work frequently referred to as Transdisciplinary. The highlight of the statement is the transfer of professional skills from each professional background to another indicating that there is transcendence between one profession to the other in order to make Collaboration most effective. Transdisciplinary work and overlap of skills and tools in joint casework is advocated and described in different literature contributions (Chapman & Ware, 1999; Choi & Pak, 2006, 2007; Collin, 2009).

*Statement 7. Working with one or more professionals in such a way that a unified approach is created using a shared vision and identical goals*

Statement seven describes an approach to Collaborative working that is unified and where professionals share visions and goals. Such value oriented Collaboration is likely to happen in Transdisciplinary type working as defined by several authors. The last statement is made in reference to Transdisciplinary work as referred to by several authors (Chapman & Ware, 1999; Collin, 2009; Doyle, 1997; Grobstein, 2007).

#### **Questionnaire Part Four – Purported Value of Collaborative work**

*Part Four* of the questionnaire utilises the same statements as used in *Part Two* of the questionnaire, however, this time participants are asked to rate on a 5 point likert scale how much they value the different types of Collaborative work as presented in each statement. These questions can be considered attitude questions as they seek to understand participants' attitudes towards Collaborative work, in terms of how much they value it. The word 'value' is defined as 'relative worth, merit, or importance' by Dictionary.com (2011). Participants were asked to rate how much value they place on the same statements that they have just rated in relation to their time spent engaging in it within the last month.

#### **Questionnaire Part Five – Interest in future focus group**

Finally, *Part Five* of the questionnaire measures participants' interest in taking part in a focus group and asks for contact information. Strictest confidentiality is explained in cases where participants provide their contact information.

In line with the recommendations of Mertens (2005), clarification in the questionnaire was provided to the respondents through guidelines prior to each multiple choice question. Brief guidelines explained how the respondent ought to understand and answer the question. Items were also kept as short and specific as possible to make them more time effective and clear to

the reader. Jargon was also eliminated from the questionnaire and simple language was used to facilitate understanding. Bold and Italics were used to emphasise critical words carrying important directions. Response examples were included where the author felt that respondents might find difficulty in understanding. This process was informed through feedback provided through the pilot study (refer to next section).

The front page of the questionnaire (appendix 8.4) was made visually attractive to increase the chance of participants showing interest in the study. The questions were organised, laid out and numbered in such a manner that they were clear to understand. This was achieved by placing the questions in five different parts each roughly related to the different main research question. Each part utilises nominal likert scaling (Langdridge, 2005), with the exclusion of part two which utilises a tick-box table. Following recommendations in the literature for constructing rating scales related to demographics and attitude related items (Mertens, 2005), participants are asked to mark their responses on a Likert Scale ranging from 1 to 5.

The likert scale was selected as the most suitable method to evaluate participants' responses due to the ease of constructing the scale and its well-known reliability in research (Waples, Weyrauch, Connel & Culberston, 2010). Being one of the most popular scales used to assess attitudes and values, the scale was considered with other scales such as Thurstone rating scale and the Q-Sort technique for its applicability of use within the questionnaire. Being able to rate participants' experience of collaboration including their ideas of its prevalence, purported value, reported type of collaborative work practiced and ideas on best future practice, the likert was also easy to score for the descriptive statistical purposes of research. Despite potentially offering more detailed data on values and attitudes when used in questionnaire construction, other rating scales such as those described above can be complicated in constructing and scoring. The likert scale is also very easy to fill in and the author felt that it would make the questionnaire more accessible to participants.

#### **3.4.2.1 Pilot questionnaire construction for quantitative section**

In line with the recommendations by several authors, a pilot distribution was first carried out to ensure that the questionnaire could carry out the data collection as planned (Hesse-Biber, 2010; Mertens, 2005). The questionnaire was handed out as a first draft to a small sample of



ten people. An open ended question at the end was included asking feedback from the participants about the clarity and the ease of the response to the questionnaire. Their answers allowed for the researcher to identify whether all appropriate options were included in multiple choice questionnaires. Examples were provided in the questionnaire to facilitate responses and to help participants understand what the intentions of data collection of the author were. Additional comments regarding participants' experience of Collaborative work were also requested at the end in order to provide space for additional feedback and opinions.

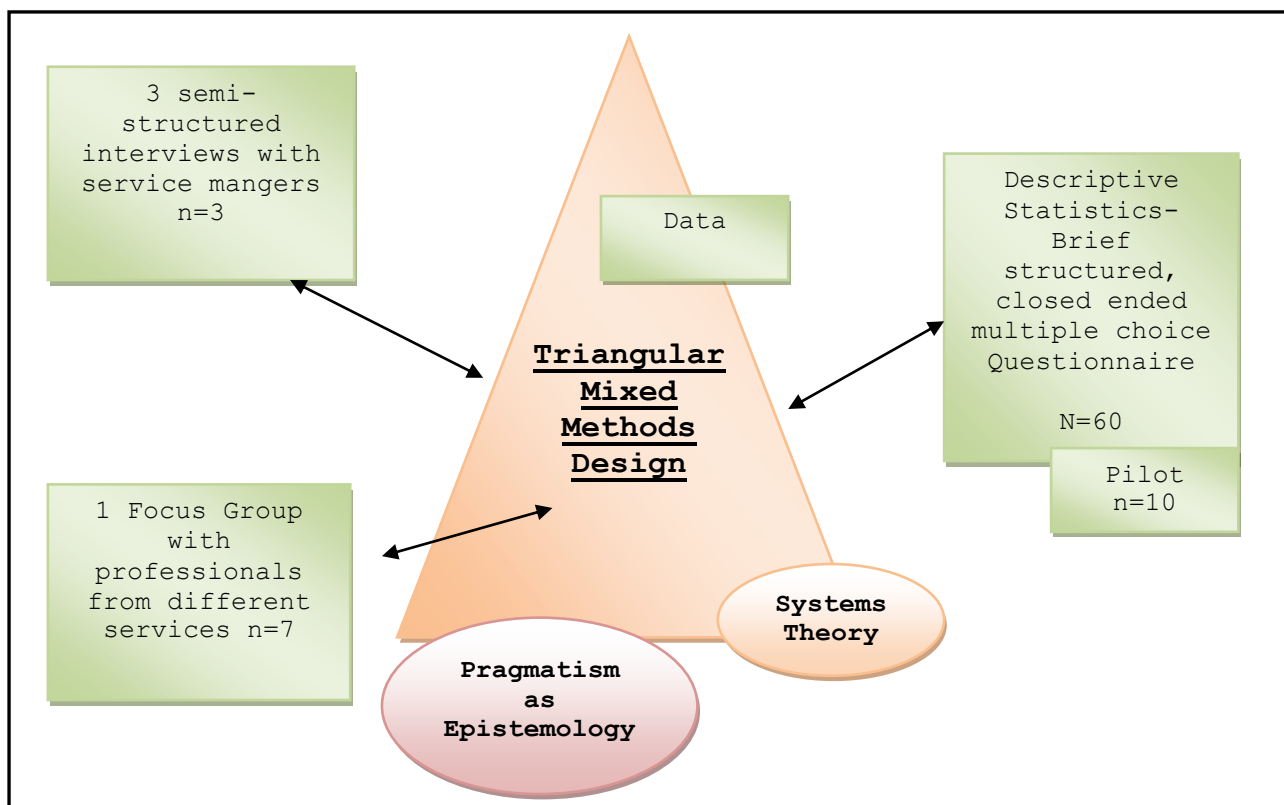
### **3.5 Data gathering**

The data gathering of the research involves primary sources (Hesse-Biber, 2010) which were accessed through a survey (n=60/215), a focus group (n=7) and three interviews (n=3). The data gathering is both Qualitative and quantitative in design and is the product of an attempt to triangulate information. Triangulation in the methodology and data gathering has been selected as the result could possibly offer convergence of data and thus enhance the credibility of the research findings. A list of attributes and items for data gathering was first constructed following a literature review and consideration of the research questions. To decide on the tools needed and methods chosen for data gathering the researcher evaluated the available methods for data gathering as described in the literature (Langdrige, 2005; Mertens, 2005; Willig, 2008). Focus groups and interviews were chosen as the method most suitable for different reasons explained below. For a timeline of the different research steps taken prior to the data gathering, during the data gathering and the following data analysis please refer to appendix (Appendix 8.4).

#### **3.5.1 Qualitative data gathering - Interviews and focus groups**

Interviews and focus groups were chosen for a number of reasons. When considering different methods of data collection (Mertens, 2005), (participant and non-participant observations, structured and unstructured interviews, document reviews) the author felt that the semi-structured open-ended interview held with individual participants and a group (focus group) was most suitable form of data collection. Observation methods for Collaboration could be particularly problematic as Collaboration between professionals took place in highly confidential settings often involving work with Children and families having personal difficulties and needs. Issues of confidentiality and privacy intrusion could potentially exist in observing professionals collaborating in casework. Observation data is also very specific to

the group or individual being observed and is hard to generalise upon greater populations (Mertens, 2005). On the other hand interviews bypassed these issues and participants' views could be sought covering the entire service and how Collaboration happened in different settings, eventually facilitating a degree of generalisability. With regards to document reviews, it is clear that not enough documentation is available to allow a Qualitative analysis that would answer the research questions. Document analysis was not a viable option in the Maltese services as even records of consultations and Collaborative projects had limited details on the nature of Collaboration used. Semi-structured interviews allowed for a personal rapport to be built with the participants, making it easier for participants to express themselves and feel comfortable answering questions about their professional opinions. The brief questionnaire used also provided some structure and direction in the interview allowing the emerging discussion to maintain focus on research questions (Mertens, 2005).



**Figure 7 - A graphical representation of the research design**

### 3.5.2 Quantitative data gathering – Distribution of questionnaire

Prior to the actual distribution of the questionnaire, the author first distributed a pilot questionnaire to ten participants working in two separate units within the student services department. Information gathered from the pilot distribution allowed for the main survey to be more reliable as it included updates that made the questionnaire easier to understand for

the participants. Changes adopted were minor, consisting of brief explanations on how to complete the questionnaire. Professional groups not present in the pilot questionnaire were also added to the updated questionnaire in part two of the questionnaire. A copy of the original questionnaire is available in the appendix (8.6.1) together with the final, adjusted questionnaire (8.6).

The final data from the quantitative part of the research was obtained through the completed questionnaires that were distributed to as many participants as possible working within the different services. The response rate was a positive one resulting in 60 completed questionnaires. Response rates were increased as the author was familiar with many of the participants as he works within the same services. In order to increase the chance of a successful response, the Questionnaires were distributed in graphic and well-presented format and questions were kept as brief and straightforward as possible increasing the chance for successful response rates (Langdridge, 2005).

### **3.6 Selection of research participants**

The recruitment of participants for the research can be seen as being comprised of three stages. Participants were recruited following official approval of the research by the government departments of Education and Healthcare.

#### **3.6.1 Stage one of recruitment process**

Stage one of participant recruitment involved gaining permission from the service managers for the total research project (as the research took place in their respective services) and for the individual interviews to take place. This involved meeting the service managers in person and presenting a summary of the research, consent and of confidentiality (appendix 8.9).

When meeting the service managers, the questionnaire for the quantitative data gathering and the list of questions being utilised in the Qualitative part was shared with participants. Once permission was obtained from the service managers to conduct the research and engage in the individual interviews, it was possible to engage in stage two of the participant recruitment.

### **3.6.2 Stage two of recruitment process**

Stage two of the participant recruitment involved firstly, the distribution of the pilot questionnaire to 10 different professionals working within the Children's services. Secondly, once the pilot questionnaire was collected and any necessary amendments were added to the questionnaire, the final draft of the questionnaire was distributed (n=60). Within the questionnaire participants had the chance to confirm their willingness to participate in a focus group (n=7), or not. Participants confirming willingness to participate in the focus group were contacted, allowing Stage three of the participant recruitment to take place. A cover letter was included with the questionnaire explaining the nature of the research, issues of confidentiality and the right to withdraw from filling in the questionnaire (appendix 8.9). A separate attached sheet asking participants to take part in the focus groups was also provided (appendix 8.5.1), asking participants to provide personal contact information in case they were interested in participating in the focus group.

### **3.6.3 Stage three of recruitment process**

Stage three took place following the data collection of the quantitative part of the interview being comprised of the distribution of the questionnaires. When all questionnaires had been received in the agreed time frame, the responses of the focus group sheet were collated. Professionals expressing willingness to take part in the interview were contacted via email/telephone and an email explaining the nature of the research, confidentiality and the structure of the focus groups was sent to participants. Arrangements were made for the focus group to take place in a location that was accessible to all participants. Professionals have been generally available throughout the year and many were contacted in person within their respective services and units. In the rare cases that professionals were working school day schedules and were not able to participate in research during the summer months, alternative arrangements were made to meet the participants outside normal working hours.

Only three services managers/unit coordinators expressed interest in participating in the interview and these were subsequently interviewed. Twelve participants confirmed interest in the focus group but seven were chosen on the basis of being able to attend on an agreed date.

#### **3.6.4 Participant sampling and response characteristics**

The participants' availability depended on whether they were present within the services when the questionnaire was distributed by hand, thus the sampling may be considered convenience sampling (Langdridge, 2005; Todd, 2004). Questionnaires were made available at the entrances of offices / clinics (Student Services Department and Child Guidance Clinic) for two weeks, and also placed on the desks of all employees within respective services.

Given the small total population of the Maltese Islands (population 400,000) and the services (approx. 215 employees), it was not difficult to target a large proportion of professionals in the data gathering, increasing the chances that the quantitative research sample is highly representative of the total population of professionals within the Children's public services (n=60/ population 215). The return group for the survey (n=60) represents respondents who were physically present in their respective offices or clinics during a two week long period of distribution in October 2011 and who chose to take part in the study. The non-return group (155 professionals) represents participants who were not in their offices in October 2011 due to being not available in their office/clinic. Participants not available were likely to be doing casework or being on occupational leave. A small number of participants from the non-return group were present in their offices/clinics but also unable to complete the questionnaire due to time constraints.

Participants from focus group were selected via a positive response in the survey indicating that they were interested in participating in the focus group. Professionals within the focus group (n=7) represented seven professionals from different units within the Student Services Department and these were chosen randomly from 11 participants who expressed interest in participating in the focus group. Forty nine participants indicated that they were not interested in participating in the focus group in the questionnaire. The non-return group for the focus group request came from random units within the general services. Service Managers / Unit coordinators (n=3) taking part in the interviews as well as professionals within the focus groups were recruited only if they worked for at least two years within their respective

services. This allowed for a sample with greater work experience and exposure to the service's Collaborative working culture. Some Service Managers / Unit coordinators could not take part in the interviews due to time constraints.

### **3.6.4 Rationale for participant sampling for interviews and focus group**

Participants for the interviews (n=3) included service managers and unit coordinators. Their extensive experience of their professional groups and services allowed for details data to be made available to the researcher. Interviews were chosen as opposed to focus groups or other quantitative methods of data collection in order to allow the author to have the opportunity for personal contact with the managers and diplomatically make participants feel comfortable to disclose their ideas and experiences of collaboration. The author felt that collaboration between the services could be a sensitive topic which could, as a result, elicit contrasting opinions and emotions. A focus group for service managers and unit coordinators was considered but this was thought not to be ideal in terms of providing a safe space for disclosure. Interviews are also well renowned for their effectiveness in gathering data with experienced professionals in administrative positions as they offer opportunity to vent out feelings and provide an often sought after safe space to express ideas and concerns (Drever, 1995).

Professionals working in non-administrative positions were chosen for the focus group (n=7) and their experiences were recorded within a group setting. The professionals each came from a different professional background and worked in different units within services for children with SEN in Malta. Their identity, demographics and background could not be disclosed in this research. This protected the identity of the participants, also making them feel more at ease when participating in the focus group. As suggested in the literature (Onwuegbuzie, Johnson et al., 2009) the focus group also provided the opportunity for debate within the participant group allowing for ideas to be developed within a group and reflective processes to be used. Participants in focus group were not employed in administrative positions. The author followed the rationale that this reduced their capacity to feel the need to defend motivations within their professional group and service. The focus group provided a rich account of participants' experiences and this complemented data gathered from the survey. The rich detail of the data gathered through the focus group eliminated the need for a second focus group since it was clear that the research questions could be answered effectively. Time

constrains and a limited response rate in expressed interest to participate in the focus group also reduced the practicality of looking for more participants in order to carry out a second focus group

### **3.7 Data analysis**

The data analysis of the quantitative section of the research can be considered an ‘experience-focused’ one, being concerned mainly with participants’ experience of Collaboration (Onwuegbuzie, Johnson, et al., 2009). The data analysed as part of the Qualitative section was carried out separately from the analysis of the quantitative section. This type of data analysis can be considered a parallel mixed analysis. Data integration is characteristic of mixed method designs however, integration was limited to the interpretation of results that took place following the data analysis that was done separately and in parallel for both quantitative and Qualitative sections. Principles applied in the analysis for Qualitative and quantitative parts are embedded in both Qualitative and quantitative research theory, without compromising the theoretical and epistemological stance of the author. This is referred to as a ‘within-paradigm analysis’ (Onwuegbuzie et al., 2007).

### **3.1 Rationale for choice of Data Analysis**

The data analysis adopted involved a thematic analysis for the qualitative data collection and descriptive statistical analysis for the results collected in the survey. Thematic analysis was chosen over other qualitative methods of data analysis such as Grounded theory and Interpretative Phenological Analysis (IPA) due to its similarity with the pragmatic approach of the author. Thematic Analysis allowed important themes to be identified within the transcripts at a semantic level. Analysis that takes place at a semantic level reduces chances for bias and has greater face and surface validity, since it is less influenced by the subjective and theoretical ideas of the researcher. No inferences from the data are made at semantic level and this distinguishes the semantic approach from others such as Grounded theory and IPA.

Descriptive statistics have been included to provide additional information to complement the exploratory goal of the research. Statistics were analysed? at a descriptive level without using inferential statistical analysis. Since the research was exploratory in nature the author felt that this approach answered the research questions effectively.

### 3.7.1 Data analysis of Qualitative section: Thematic analyses

Data gathered through the focus groups and interviews was analysed using thematic analysis to select the most important recurring themes appearing in the research data. Thematic Analysis was chosen as the most suited form of data analysis because it allows for the identification of the most important aspects of information to be selected both at a surface meaning value and in relation to the theoretical and epistemological orientation of the researcher. It could also be easily applied through assistive software packaged such as QSR NVivo 9 (QSR International, 2012) and organised efficiently through different functions. Thematic analysis as a data analysis method is not rigidly tied to an epistemological framework and is flexible allowing different approaches in selecting and choosing relevant patterns of information within the data. Patterns of meaning, also selected through the approach, were chosen due to their relevance to systems theory as described by the author in the literature review.

Thematic analysis is compatible with social constructionist epistemology within psychology, and is very much concerned with the language being used between participants in the study (Braun & Clarke, 2006). Nevertheless, the author felt that thematic analysis could be very useful for research that is grounded in pragmatism as it is capable of highlighting how participants express knowledge and also refer to actions in the real world. The process of interaction between their experience and how they collaborate also emerges as participants express their experience during interviews and focus groups. Moreover, thematic analysis allows participants to express their views and experiences regarding their interaction with other units such as professionals and services within the organisations and systems in which they work. This kind of information creates the space for an understanding through systems theory which itself places importance on the interaction between different communicative units.

As this study is novel in its nature, the data was considered a crucial source for exploring the research questions and providing a framework of knowledge that is collected from the participants' expressed experiences. The thematic analysis was carried out through the assistance of QSR NVivo9. This was done in different stages comprising a) a transfer of the transcribed material to the software package, b) identification of data nodes through the coding application, and c) further identification of sub-nodes for more specific categorisation



of themes. This process of coding was done in an inductive style or ‘bottom up way’, whereby much of the meaning and understanding in the research was obtained primarily through the participants’ experiences as described in the interviews and focus groups (Braun & Clarke, 2006). Compiled transcripts of participants’ views have been analysed at a semantic and explicit level and so the research could be considered as primarily focusing on interpreting participants’ experience at the surface level. This contributes to the combined subjective as well as objective stance to the nature of knowledge that the author has as a result of his pragmatic approach. Another reason is a result of the focus of the research being primarily an exploratory one. However the author also employed a deeper analysis when discussing the value of the selected themes in light of systems theory. Such flexibility in the use of thematic analysis is not uncommon and is described by Braun and Clarke (2006) as well as in literature advocating the use of pragmatic orientations (Cavaleri, 2011; Gert & Nicholas, 2003). This, however, has been carried out in a coherent and clear manner ensuring that interpretation and analysis is internally consistent (Williams, 1999).

### **3.7.2 Data analysis of quantitative section: Descriptive statistics**

Data collected through the questionnaires was analysed mathematically and listed in nominal forms and measures of central tendency have been applied in order to present mean and grouped-mean responses (Langdridge, 2005). These were presented in the form of bar graphs allowing a user friendly graphic representation of the data. Statistical tests were not used as the quantitative data obtained was collected for descriptive and not inferential purposes. No relationships between results achieved from professionals working within different services were analysed for relationships, as nominal data representing professionals’ responses were collated and analysed as a total. This feature was fundamental in allowing the anonymity of the different services and units, as opposed to presenting statistics under different service or unit name headings.

Descriptive Statistical data was analysed by using Microsoft Excel (2007) (refer to Data CD). The analysis was composed of different stages. The first stage involved counting and collating all responses gathered from the questionnaires and inputting them on an electronic spread sheet. Each question was given a title and each response was marked allowing for the total responses for each section of the questionnaire to be calculated. The second stage of the data analysis process involved establishing measures of central tendency; namely the mean

and the grouped mean. Means of the data responses including the calculation of grouped means when necessary were processed through Microsoft Excel's (2007) basic formula functions. Considering the small sample and the descriptive nature of the statistics, more advanced statistical analyses were not considered necessary and therefore not carried out. Total and mean responses provided enough data for the author to present relevant results to the research aims. The last stage involved using the graph function to produce bar graphs that were attractive and visually representative of the data collected.

### **3.7.3 Maintaining anonymity in data analysis**

Service professionals' names were changed to single letters in the data presentation to ensure the anonymity of the professionals within the services. This procedure does not create any hindrance to the research goals since the research is focused on Collaboration as general practice, rather than the origins of the services in which it is practiced. This was necessary to guarantee anonymity. This was done throughout the quantitative data analysis. In the Qualitative thematic analysis, names of professionals were removed and different services were simply referred to as 'services' and different professionals as 'professionals' without specifying the professional type. On some accounts it was considered appropriate to make reference to entire departments since indentifying specific professionals was not possible (e.g. Healthcare and Education).

## **3.8 Validity in research**

The author hopes that the objectives and procedures of each approach used for collecting, analysing and presenting the data have been made transparent to the reader. This has allowed for transparency in the presentation of both the quantitative and Qualitative stages of the research which are important for the monitoring of validity (Willig, 2008). The questionnaire has been constructed keeping in mind the focus of the research questions, and the important factors relating to the different aspects of Collaborative work. A pilot questionnaire was sent to a small sample of ten participants and questions have been reassessed for face and construct validity, ensuring that scaled questions and statements measure participants' responses accurately, fitting in with the psychology of the research (Langdridge, 2005) and the theoretical perspective of the researcher (Mertens, 2005).

Attention to the reliability and validity of the Qualitative part of the research has been given proportionate concern. This has included the researcher remaining aware throughout the project of any possible bias arising towards the benefit of Collaborative work. Research reflexivity and reflectivity (Bleakley, 1999) have been given importance as they contribute to ensuring that the research is reliable. Reflectivity has been taken into account and despite the pragmatic approach, the researcher's contribution to the construction of meanings throughout the research process, and an acknowledgment of the difficulty of remaining outside of one's subject matter while conducting research has been considered (Henwood, Pidgeon, Parkhill, & Simmons, 2010) Reflexivity for author is has much in common with the researcher's willingness to remain open to a continued dialectical interaction between the researcher's goals and information produced by participants (Williams, 1999).

### **3.8 1 Strategies' used to enhance validity**

Strategies to enhance validity and reliability have also included reliability reviews carried out in liaison with the author's research supervisor at different intervals throughout the progress of the research. This has also included an interim check in the mid-term stage of the research, whereby data collected through the data gathering stage was reviewed for validity (Miller, et al. 2006). Once the data was collated and compiled it was reviewed and confirmation of its applicability to the research goals was sought. Ongoing supervision throughout the research, which also consisted of reviews of the methodology and the result, including during its eventual write-up, was maintained. Tutor feedback was processed and applied.

Care was undertaken in the transcriptions of the Qualitative data collections since the language used by the participants sometimes included parts that were in the Maltese Language (the author's native language). Translations were carried out in such a way not to alter the meaning conveyed as much as possible. An external check of codes was carried out once the first thematic analysis was subjected to the compiled transcripts of the interviews and focus group. QSR NVIVO9 (QSR International, 2012) also has different functions allowing visual representation of themes which were used to ensure that coding and node creation had good face validity and were relevant to the research questions.

A personal reflective journal was kept throughout the research and especially used during the data gathering stage which included the reflections and steps taken by the researcher. This

allowed the author to reevaluate the progression of his ideas and attitudes in relation to the research and the data analysed, making it easier to take note of changes in his own reflective positions. The journal was also instrumental in allowing reflecting processes to take place when working in one of the services being researched and thus making it possible to review such ideas in the course of writing the present thesis.

### **3.8.2 The researcher being a member of a service being researched**

Being an employee and practitioner within one of the services being studied (The School Psychology Services) could potentially place different pressures on the approach of the researcher and the interpretation of the results. Some may argue that having a researcher being part of a setting being researched could present issues similar to those encountered by participant observers, who can become influenced by the social and psychological subculture of the researched system, thus skewing the interpretation of results and researcher objectivity (Mertens, 2005). This aspect was acknowledged and resisted by the researcher so as to avoid affecting the research as a result of external pressures. This often meant that the author took an active role in maintaining an awareness of the possible implications of being influenced by factors such as an external pressure to succeed, deliver positive results for the services and be able to provide research with results that was expected by the admiration of the service. From the start, the author encountered differing views in discussions regarding the prevalence and feasibility of collaboration. In view of this, the author often reflected on how this could possibly influence his own opinions of collaboration and, potentially, also encourage bias.

Following the data gathering, expressed interest in the results of the research was also conveyed to the author prior as well as during the research project. It was made clear to the author on different occasions that different colleagues in the service had strong opinions on Collaboration between professionals and these were sometimes different to those reported in the data gathering. Such a contrast in views was acknowledged but care was taken in maintaining a consistent neutral and objective position within the research. Potential negative research outcomes found in the results on Collaboration could also be harder to distribute – with the possibility of having negative consequences on professionals within the services, including that of the same services as the researcher. Luckily results about the prevalence and value of Collaboration were mostly positive, thus facilitating future distribution.

Working within the services made it easier to find participants, gain consent and carry out the data gathering of the research. Establishing trust with different participants and individuals commissioning the research was also facilitated.

### **3.9 Ethical considerations in the research**

Ethical considerations are very important in every research project involving human subjects since results can have various implications for participants and the wider population (Mertens, 2005). Throughout this research project careful consideration was given to a number of aspects that could potentially have short term and long term effects for participants, the services as organisations and the author himself. This researcher has also made reference to the British Psychological Society's Guidelines for minimum standards for ethical approval in psychological research (2004) and Code of Ethics and Conduct (2009)

#### **3.9.1 Research in a small country**

The small size of the country and the dense geographical distribution of the services were considered important ethical considerations having their own implications. In the Maltese Islands social and professional relationships are marked by frequent and close contact between different professions particularly those that work with common clients such as Children and their families. If professional services and professionals could be represented by their actual designations and names, there would have been some differences in the way data could be presented and analysed. This was deemed inappropriate

Reports of limited Collaboration could possibly be interpreted negatively and services and professional groups could be seen in a negative light. This was considered inappropriate and so the researcher took the decision to anonymous all professional groups completely when presenting the results. The names of services have also not be included in the research and the fact that scores within the quantitative part have been processed as totals, implies that distinct services and units in Malta have not needed to be referred to.

#### **3.9.2 Anonymity and informed consent**

Informed consent was obtained from each participant prior to any involvement in the data gathering phase of the research (Appendix 8.9). Participants were also informed of the

purpose and objectives of the research and their rights made clear including the right to withdraw from the research at any time prior to the publication of the results. This was done through information sheets prior to research involvement as well as verbally prior to the interviews and focus groups.

The author's commitment to anonymity in the research was clarified with the participants (Appendix 8.9). Results were to be presented in a thoroughly anonymous way and the researcher took an active stance in anonymising data so that confidentiality was guaranteed. A verbal agreement was set that exclusion of research material reported during data collection could be requested on specific or entire parts of the data set by participants. Following the transcription of the interviews and focus group discussion, the author explained that the transcripts would be forwarded to the participants. In the event that the participants expressed the need to remove anything they said during recordings, they were given the opportunity to contact the author via email. Eventually, transcripts were sent to participants as agreed, but participants did not request any removal of data.

### **3.9.3 Distribution of results**

Once the research is complete a summary of the results will be sent to participants of the interviews and focus group, providing feedback and information to the participants. This will happen in a confidential and secure manner without disclosing the identity of other participants and services. The project will also be presented to the service with which the author works (the School Psychological Services) and possibly to different unit coordinators, managers and unit directors. Anonymity of participants and professional groups in the results will be maintained even following the submission and publication of the research. Transcripts of the material and recordings of the interviews and focus groups will not form part of the distribution of the results and they will be destroyed securely following the successful completion of the research. Printed transcripts will be destroyed via electronic shredding and any data saved on computer memory will be deleted effectively.

### **3.9.4 Commissioning of the research**

The research has been commissioned by both the Ministry of Education, Employment and The family in 2011 and the Ministry of Elderly and Healthcare in 2011. Written Approval

was gained through top officials within these ministries. Each service and unit mentioned in the introduction of this research, (1.3) forms part of the aforementioned ministries in Malta. This allowed the researcher to carry out the research with participants in line with official consent by the departments in which research was being carried out. The title of the research was not imposed on by the aforementioned entities and was negotiated with the author's service manager and unit coordinator in line with the research needs of the Psycho-Social Section and the School Psychological Service. This agreement was an informal one.

The research was also approved by the School of Psychology of the University of East London and Ethical Consent was granted by the Research Ethics Board of the University of East London.

### **3.10 Costs and resource utilisation**

The study was feasible as participants were amply available in the Student's Services Department and an eagerness to participate in the study had already been expressed to the author prior to the commencement of the research design and implementation. Financial costs for the research methodology were minor involving: printing costs of questionnaires, access to computer software and basic equipment, subscriptions to academic databases, basic transport to participants' interview sessions, use of free trial subscription of QSR NVIVO9 and minor costs in hiring human transcribers.

Having results in the quantitative and qualitative part of the study anonymised, decreased participant resistance to the study, this might otherwise possibly occur as a result of professional or service identity exposure. Despite some views and experiences of Collaboration being potentially frustrating and stress provoking, this research is not concerned with areas consisting of vulnerable groups, highly confidential material, and hard to access populations. Thus gaining approval for the research to be carried out was not difficult, with both the university and the respective services involved. The research was designed keeping in mind the available timeframe the researcher had to complete each stage of the study. Despite the possibility of an increased sample providing more reliable and generalisable data, the author felt the need to limit the data gathering to the current sample due to time constraints and participant availability. The author is aware of the limitations of the methodology and this is discussed later in the research discussion.

### **3.11 Conclusion**

Within this mixed methods research, the author designed and distributed a questionnaire (n=60) to a population of 215, to gather quantitative data and used a brief question list for interviews (n=3) and one focus group (n=7). Data was analysed using Microsoft Excel (2007) for measure of central tendencies. QSR NVivo9 was used to support a thematic analysis that was performed inductively to identify themes at a surface level. The researcher took an active role to ensure that the research methodology and data gathering took place in line with ethical needs and also used a number of strategies to enhance research validity. Despite having a methodology that was successful in providing results that answer the research questions effectively, there are a number of Methodological limitations present and these will be dealt with later in the discussion.



## **4.0 Results and findings**

This section focuses on presenting the findings of the research. It presents the quantitative and qualitative results consecutively. Although linked through the commonality that data presented was collected with the aim of answering identical research questions which are central to both parts of the mixed methodology, combination of the results is limited to the discussion in the next chapter of the research.

### **4.1 Introduction**

In parallel-concurrent mixed method research designs, data is not combined at any stage of the research process, but instead referred to in the interpretation of results, where quantitative data (quan) is mentioned to complement the Qualitative data (QUAL) of the research (Hesse-Biber, 2010). Firstly, the results of the quantitative research findings are presented in the form of descriptive statistics. This is done in the same sequence as in the structure of the questionnaire. Secondly, the results of the Qualitative part of the research are presented in the form of themes. These have been chosen and analysed through a thematic analysis.

#### **4.1.1 Participant information**

Participants of the research were recruited from three separate services from two state government Ministries. For the quantitative part of the research participants included professionals in specialised non-administrative positions. In the Education Division of the Government of Malta, 80 questionnaires were originally distributed in the Student Services Department of which 50 participants responded. This is a good sample proportion considering that approximately 195 are employed at the Student Services Department (Staff List, 2012). Professionals at this department have different professional backgrounds and work within different units within the department. These include the School Psychological Services, School Counselling Services, School Social Work Services, School Medical Services, Inclusion Services Unit, Access to Communication and Technology Unit, Autism Support Team, Peripatetic Teachers, Anti Bullying Services; School Child Protection Services etc. (refer to appendix 8.6). No questionnaires were distributed to the Child Guidance Clinic where approximately 15 professionals are employed. 20 questionnaires were distributed to the

Child Development and Assessment Unit (CDAU) where approximately 25 professionals are employed with medical /Allied Health Professional backgrounds. Ten response forms were completed and returned.

#### **4.2 Results of quantitative data analysis**

The results of this section have been processed using Microsoft Office Excel (2007). The total number of responses for each question in every section were counted and recorded on a spread sheet (refer to Data CD). Graphs were created using the 'Insert ~ Chart Function' once each variable table was completed for each section of the questionnaire. This was a straightforward and easy process, given the fact that no mathematical formulae were required apart from summing up the number of responses of each participant. All the results collated from the questionnaires were analysed and presented as a whole with the exception of a bar chart on professional background. The latter presents data into different groups representing anonymous professional types. Throughout the quantitative section no comparison was made between different professional groups and the sample was analysed as a whole (n=60). The reason for this is to ensure that different professional groups remain anonymous. If comparisons were to be made between professional types, and groups were differentiated according to the number of responses, it would be easy to identify which professional service is being referred to in the Maltese Children's services, as this would necessitate providing data on the number of professionals within each service or unit. Section 3.9.1 discusses ethical issues related to carrying out research in a small country and limited services in further detail. .

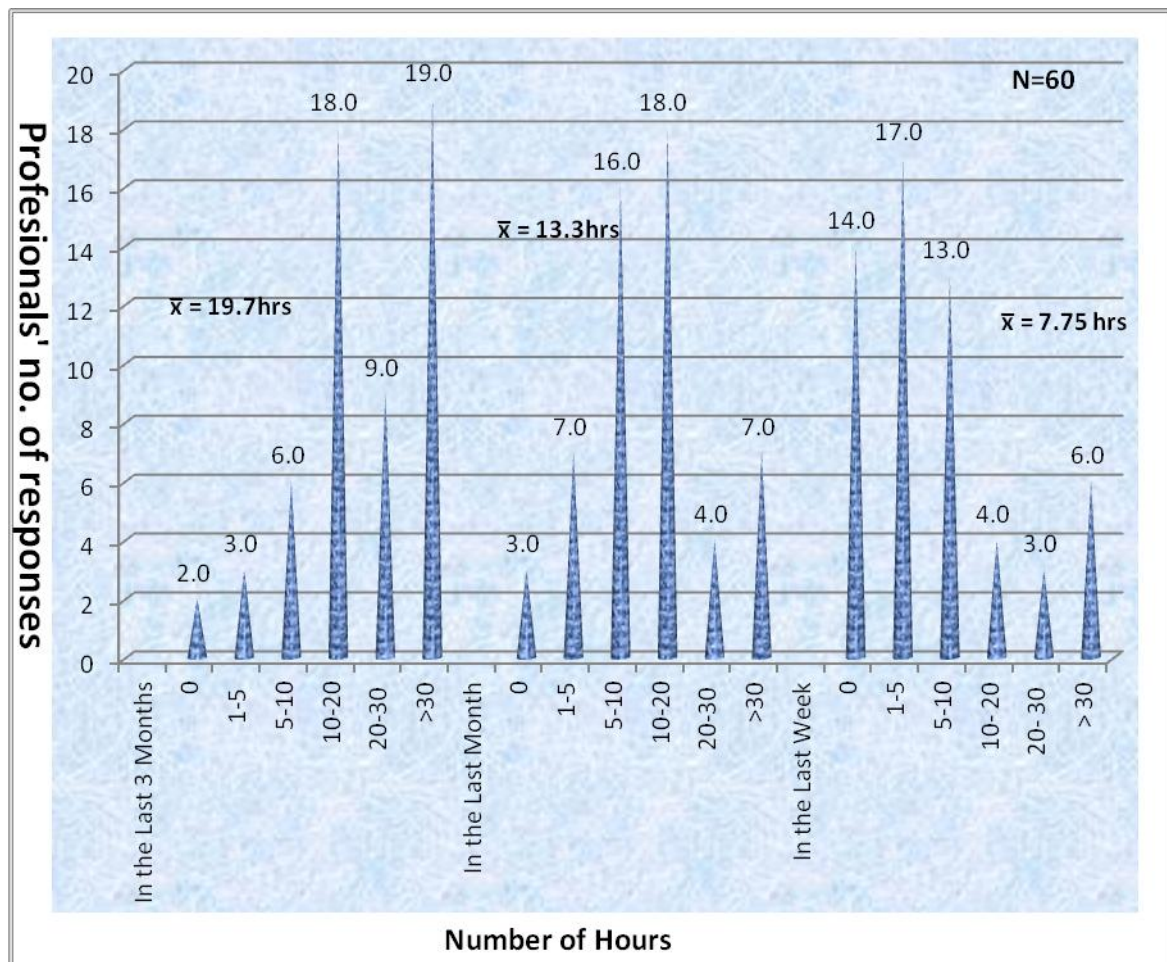
##### **4.2.1 Prevalence of Collaborative work**

In the first section of the questionnaire, participants were asked about the prevalence of Collaborative work. Respondents were asked to mark how many hours they spent working with one or more agencies different to their own professional backgrounds. They were then provided with three time frames - in the last three months, in the last month and in the last week. Within each time frame they were asked to mark a range of hours reflecting the time spent engaged in Collaborative work (0 hours, 1-5 hours, 5-10 hours, 10-20 hours, 20-30 hours and 30-40 hours). The following table indicates participants' responses on this section of the questionnaire.

| <b>Hours of Collaborative work carried out</b> | <b>Number of Professionals' responses</b> |
|--|---|
| <b>In the Last 3 Months</b>                    |   |
| 0 hours  | 2   |
| 1-5 hours                                      | 3   |
| 5-10 hours                                     | 6   |
| 10-20 hours                                    | <b>18</b>                                 |
| 20-30 hours                                    | 9   |
| >30 hours                                      | <b>19</b>                                 |
| <b>) = 19.7hrs in the Last Three Months</b>    |   |
| <b>In the Last Month</b>                       |   |
| 0 hours  | 3   |
| 1-5 hours                                      | 7   |
| 5-10 hours                                     | <b>16</b>                                 |
| 10-20 hours                                    | <b>18</b>                                 |
| 20-30 hours                                    | 4   |
| >30 hours                                      | 7   |
| <b>= 13.3hrs in the Last Month</b>             |   |
| <b>In the Last Week</b>                        |   |
| 0 hours  | 14  |
| 1-5 hours                                      | <b>17</b>                                 |
| 5-10 hours                                     | <b>13</b>                                 |
| 10-20 hours                                    | 4   |
| 20-30 hours                                    | 3   |
| >30 hours                                      | 6   |
| <b>= 7.75hrs in the Last Week</b>              |   |
|  |   |

**Figure 8 - A table including the number of hours reported spent collaborating with professionals having professional backgrounds different to those of the respondents. Respective grouped means are included at the end of each time period.**

The left column in the above table contains the range of hours worked within this respective time frame – in the last 3 months, in the last month and in the last week. The column on the left indicates the number of responses by each professional. For example, in the last month, 19 professionals had worked 5-10 hours, while in the last week 14 professionals had worked 14 hours. The mean responses are indicated in bold at the end of each timeframe. The data in the table above is also represented in the graph below to allow a visual view of the data gathered, with respect to the prevalence of Collaborative work.



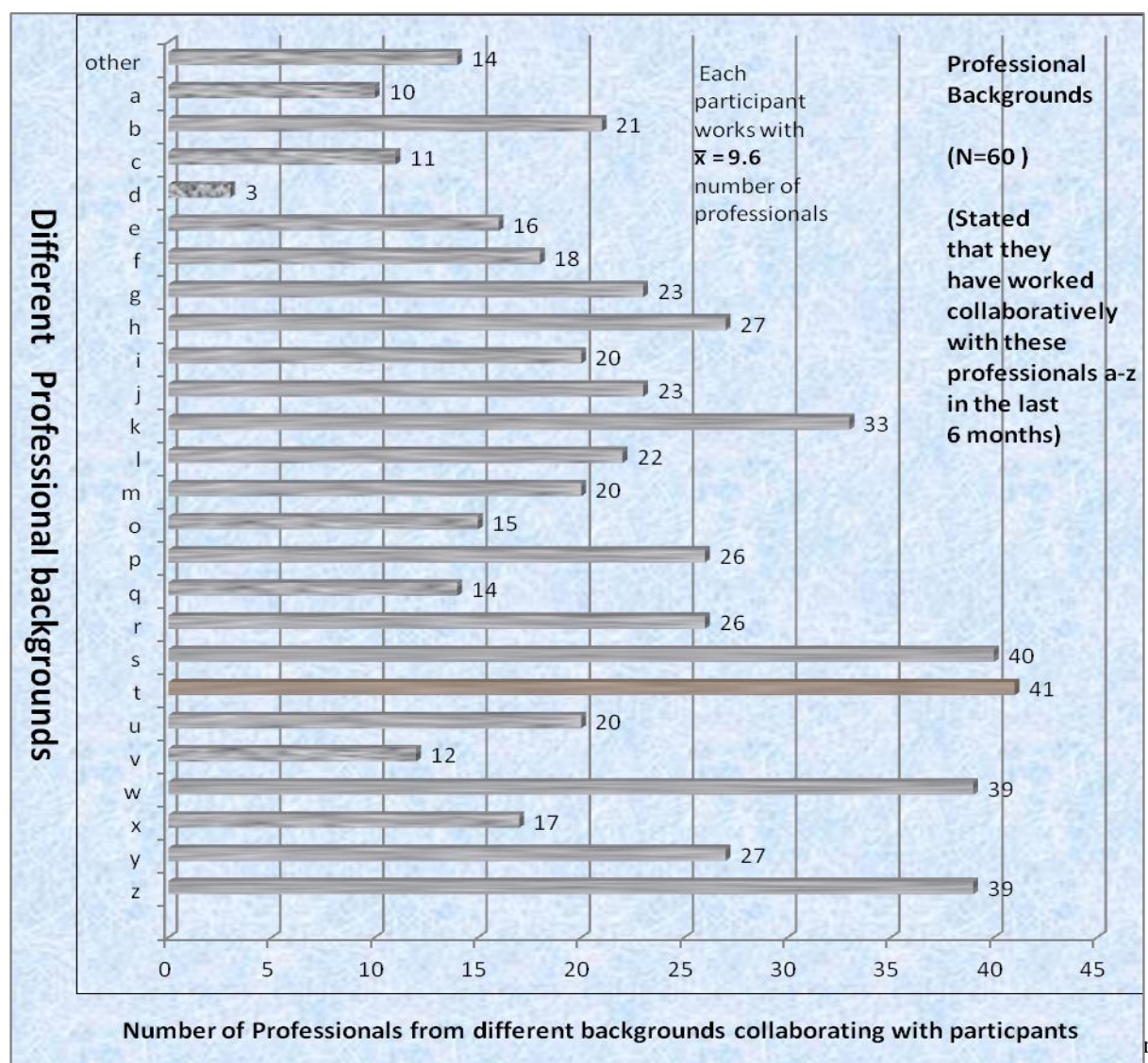
**Figure 9- A bar chart representing the number of hours participants reported spending in collaboration with professionals with backgrounds different to participants' own professional background.**

The left column in the above table contains the range of hours worked in the respective time frame – in the last 3 months, in the last month and in the last week. The left column indicates the number of responses by each professional. For example, in the last month 19 professionals have worked 5-10 hours, while in the last week 14 professionals have worked 14 hours. The results show that participants reported working a mean of 19.7 hrs in the last three months, 13.2 hrs in the last month and 7.75hrs in the last week. The most frequent response for the last 3 months that the professionals chose was >30 hours, in the last month 10-20 hours and in the last week 17 hours.

#### **4.2.2 Backgrounds of professionals engaging in Collaboration with the respondents**

The second section of the questionnaire asked participants to mark the professional types with which they have worked in last six months. The professionals included in the questionnaire pertain to 25 different professional backgrounds. In the results presented below, these have been represented by a letter in the alphabet. Each letter may refer to a professional type such as Psychologists, School Social workers or Inclusion Coordinators. The names of the professional types have been replaced to guarantee anonymity. Letter y represents a general group, namely, professionals from external services. This has been left unchanged since it is not possible to identify the result of which professional the variable 'others' is referring to.

The data obtained in the second section of the questionnaire provides us with information on how frequently Collaboration takes place with professionals from different services. It also enables a comparison between different professional backgrounds, providing information that may shed light on how Collaboration is taking places across the highly diverse professional services for children. Meanwhile services cannot be identified due to anonymity yet it gives the reader the opportunity to inspect the uneven level of Collaboration across professional type.



*Figure 10-* This bar chart shows the number of professionals from different backgrounds collaborating with participants

In the vertical axis of the above graph, letters stand for different professional types. The horizontal axis represents the number of participants confirming they have worked with each professional type represented by each letter on the vertical axis, in the last 6 months. Letter Y represents professionals from external services, while every other single letter represents an anonymous professional type.

#### 4.2.3 Type of Collaborative work

The third section of the questionnaire focuses on establishing which type of Collaborative work professionals engaged in within the last three months. Participants were then asked to rate how frequently they engaged in different types of Collaborative work. Examples of which were presented in the previous section of the questionnaire (refer to Appendix 8.6 and to the next page). Participants were then asked to rate the frequency of Collaboration on a 5 point likert scale as follows:

| Likert scaling used for statements on 'value'             | Likert scaling used for statements on 'prevalence' |
|---|--|
| 1= <i>I never engaged in this type of work</i>            | 1= <i>I do not value this kind of work</i>         |
| 2= <i>I rarely engaged in this type of work</i>           | 2= <i>I slightly value this kind of work</i>       |
| 3= <i>I occasionally engaged in this type of work</i>     | 3= <i>I moderately value this kind of work</i>     |
| 4= <i>I frequently engaged in this type of work</i>       | 4= <i>I highly value this kind of work</i>         |
| 5 = <i>I very frequently engaged in this type of work</i> | 5 = <i>I very highly value this kind of work</i>   |

**Figure 11 - This table includes the five-point likert scales used in this research.**

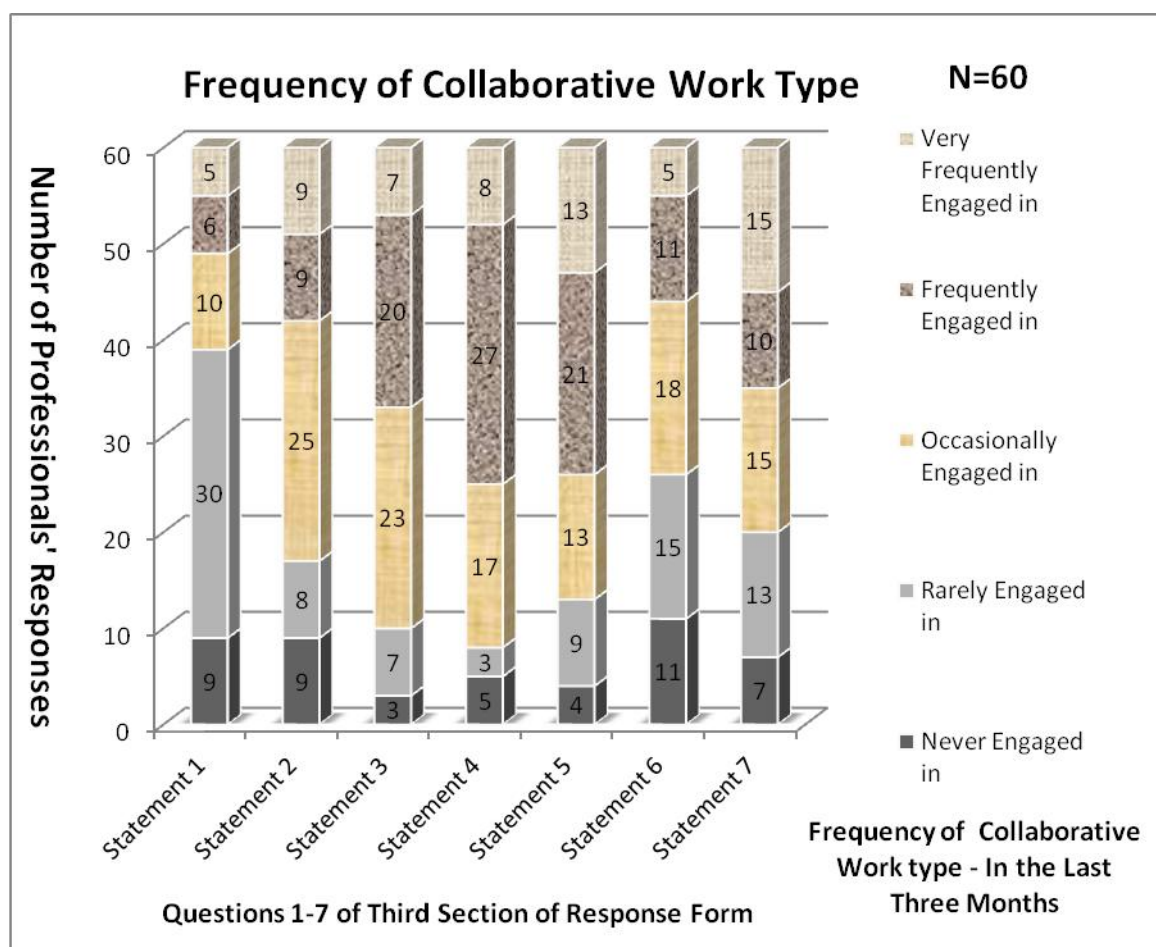
The statements that were presented in section three of the questionnaire are presented in the following table, along with the grouped means for each of the responses, as shown below:

| Statements presented in section 3 and 4 of questionnaire. Grouped means are presented in the right columns showing results for ratings on Value of Type and Prevalence   | result<br>(Value of Type) | result<br>(Prevalence) |
|--|---------------------------|------------------------|
| 1. Working independently on a project/casework without other different professionals being involved.   | 2.4                       | 2.5                    |
| 2. Working independently on a project/casework which is also being worked on by another one or more different professionals separately.  | 2.6                       | 3                      |
| 3. Working Collaboratively on the same project/casework with one or more different professionals who has separate goals.   | 3.4                       | 3.4                    |
| 4. Working Collaboratively with one or more professionals where effective communication takes place throughout the whole project/casework  | 4                         | 3.5                    |
| 5. Working Collaboratively with another one or more professionals, openly sharing information and skills coming from each professional's background but maintaining clearly defined roles and boundaries to work procedures. | 4.4                       | 3.5                    |
| 6. Working in such a way that professional skills and tools needed are transferred from one professional of a different background to another, limiting the need for different professionals to be on the same case          | 3.5                       | 2.6                    |
| 7. Working with one or more professionals in such a way that a unified approach is created using a shared vision and identical goals   | 4.2                       | 3.1                    |

**Figure 12 - Statements featuring collaborative work examples used in questionnaire are presented in the left column. Grouped means are presented in the right columns showing results for ratings on Value of Type, and Prevalence of Collaborative work respectively.**



The participants' responses to the third section of the questionnaire:



**Figure 13 - Bar chart representing responses for the frequency of Collaborative work types as outlined in the statements above.**

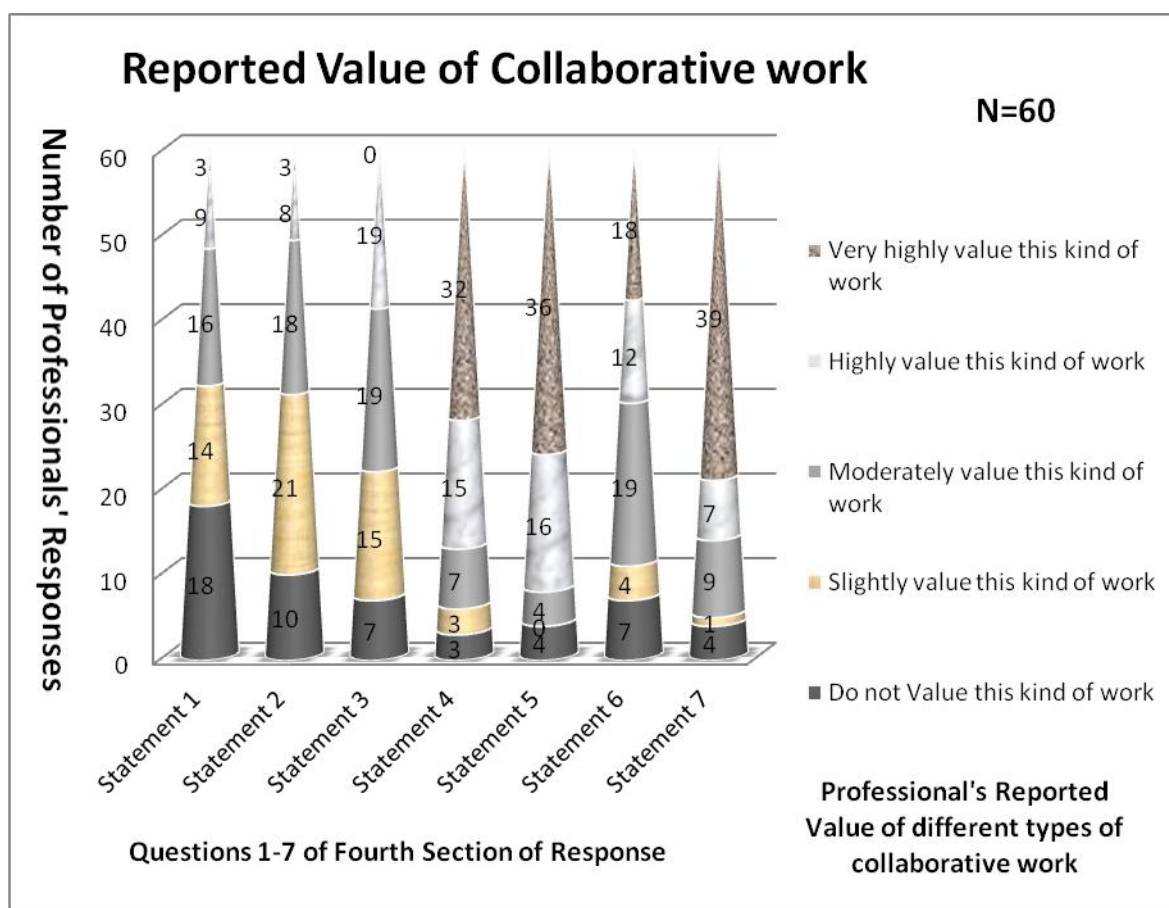
The horizontal axis represents 6 different statements as shown in Table 5. The vertical axis represents the number of professionals confirming each statement within the selected frequency (refer to the key to identify the different frequencies related to the responses). For the mean responses refer to Table 5.

#### 4.2.4 Professionals Reported Value of Collaborative work

In section four of the questionnaire the participants were asked to rate how much they value Collaborative work. The same procedure was used as in the third section of the questionnaire as presented above. Identical statements were presented to the participants as presented in



Table 5, with the following difference: instead of the frequency of engagement in the past 3 months, participants were asked to rate how much they value the type of Collaborative work as presented in the different statements.



**Figure 14-** A bar chart representing the responses for the reported value of Collaborative work types as outlined in the statements.

The horizontal axis represents 6 different statements as shown in Table 5. The vertical axis represents the number of professionals confirming that each statement is within the selected level of value (refer to the key to identify the different levels of value related to the responses; for the mean responses refer to figure 11).

#### 4.2.5 Summary of the quantitative results

The quantitative results gathered from the questionnaire (n=60) show that the participants reported working a mean of 19.7hrs in the last three months, 13.2hrs in the last month and 7.75hrs in the last week. The most frequent response in the last month was 10-20 hours; in the last week 17 hours and >30 hours for the last 3 months. Each participant works with = 9.6

number of professionals from different professional backgrounds and there is a significant difference in the reported Collaborative work with different professional types. Participants seem to value mostly “*working Collaboratively with another one or more professionals, openly sharing information and skills coming from each professional’s background, but maintaining clearly defined roles and boundaries to work procedures*”. This is also one of the most commonly reported types of Collaborative work participants very frequently engage in.

Participants also reported very frequently engaging in “*working Collaboratively with one or more professionals where effective communication takes place throughout the whole project/casework*”. The Qualitative section of the research provides further in-depth information on the nature of Collaborative work between professionals in Malta and more details are also presented in the discussion.

### **4.3. Results of Qualitative Data Analysis**

The following section presents the results obtained in the Qualitative section. Transcripts of the interviews and focus groups were subjected to a thematic analysis and this rendered several important themes identifiable.

#### **4.3.1 Identification of themes**

The thematic analysis applied was carried out through the inductive or ‘bottom up approach’ (3.7.1) which means the themes identified are strongly linked to the data itself (Braun & Clarke, 2006). Hence the thematic analysis can be considered data-driven. This means that themes were identified in respect of the content of the data itself and not from the pre-existing research questions. A semantic approach was also utilised, paying attention to explicit or surface meanings within the data.

With a semantic approach, the themes are identified within the explicit or surface meanings of the data (Braun & Clarke, 2006) and the author did not look for anything beyond what a participant had said or what had been written. By using this approach the transcripts of the interviews and focus groups were analysed and themes were identified at ‘face value’. A detailed presentation of the central quotes identified for each theme identified is presented in the following section.

The quoted examples from the transcripts presented to illustrate the identified themes have been anonymised. This has been done by frequently referring to named professionals types by using the general term 'professionals' and named services using the general term 'services'. For example Social Workers were referred to as 'professionals' and the Counselling service as 'service'.

#### 4.3.2 Thematic map of Qualitative data

A visual thematic map was created to facilitate the readers' understanding of the results of the Qualitative section of the research. It highlights the central themes and the connections between different datasets gathered.

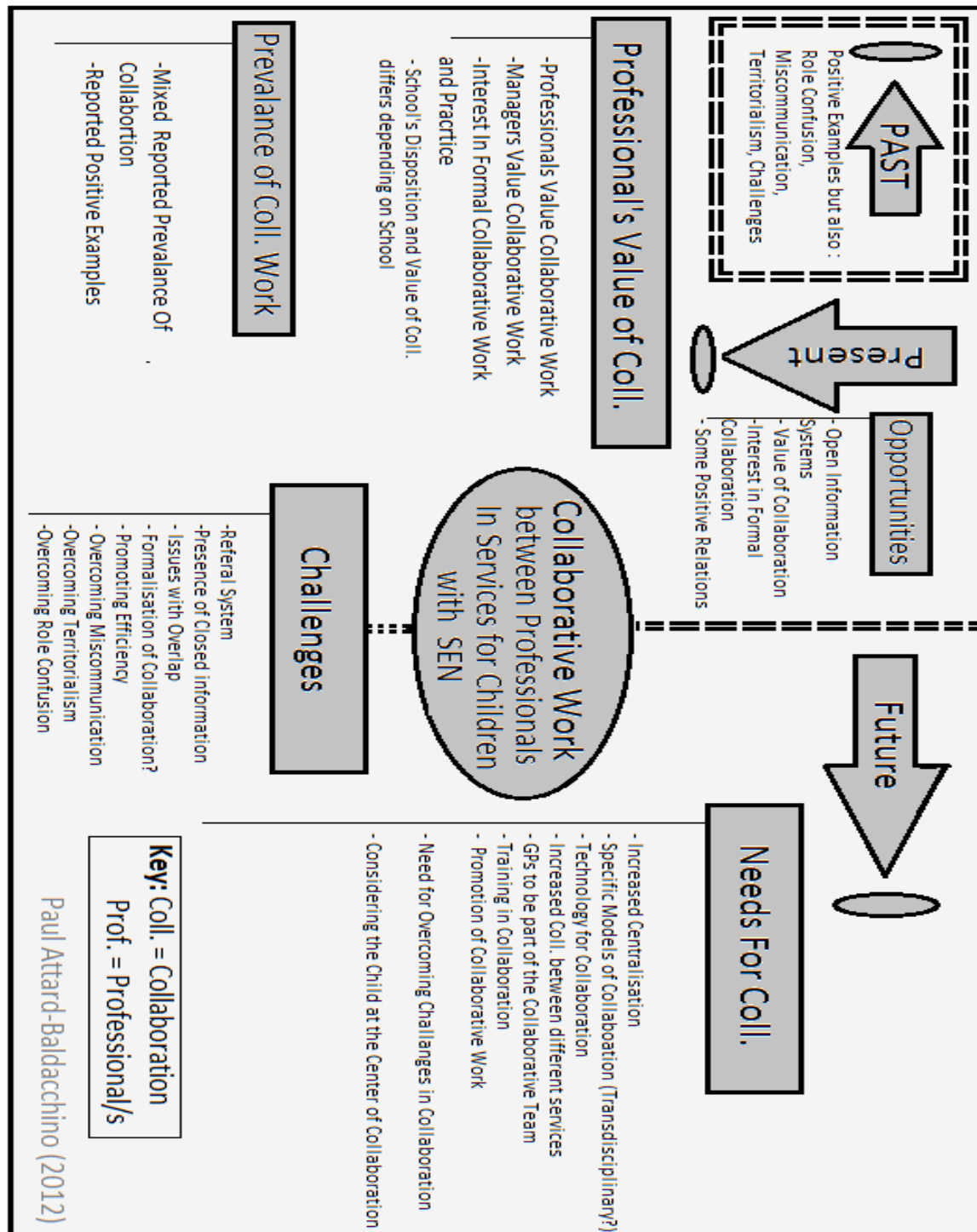


Figure 15- Thematic map of Qualitative Data Analysis Results

### 4.3.2 Mixed prevalence and frequency of Collaboration between professionals

There are several difficulties in having an accurate count of the overall prevalence of Collaboration between professionals within the services, particularly through data gathered from interviews and focus groups. There appear to be mixed views about the prevalence of Collaboration. In general however, it seems as though most of the participants agree that Collaboration does take place in different forms. This however does not exclude participants from stating that some people choose to work independently and not collaborate.

“I mean, there are different ways of collaborating but what I would feel that professionals in the service are collaborating with like [sic] through supervision and peer consultancy and having included here different professionals working here. There are a lot of consultations about different cases, (referring to the opportunity to discuss problems in Collaboration) different sessions and there is a lot of discussion so I know what problems some have encountered in comparison to mine, for example” (Interview 1, page 3)

“Yes since we had especially the latest project of our monthly consultation meetings here this has really helped to grease the wheels on our contact. Before for example I would call rarely but now do we call regularly and we help each other” (Focus Group, page 34)

“Again even if people don’t get their case conference every professional has to discuss his problems with the parents and other professionals involved in the joint case work you know and give them reports obviously you know. So although people are not meeting in one room to discuss with the parents they are actually meeting individually” (Interview 2, page 14)

### 4.3.3 Positive Collaborative work examples

Different examples of current Collaborative practices have been shared by the participants. This indicated that there is flexibility in Collaborative working practices. Collaboration takes place between different professionals in the same services but also between professionals from separate services (e.g. healthcare and educational services).

“So at the moment we reached a point where we are working as a team. They come up to me not like as it was 2 years ago where everybody was working independently you know” (Interview 2, page 14)

“But I think we are beginning to do that [work Collaboratively]. What remains are to work with those particular professionals and we need to see how we can engage them more, if they are available in the first place. Those professionals are an extremely essential part of meeting children’s learning and developmental needs” (Interview 1, page 10)

“it developed because the particular professionals working with those other professionals were putting undue pressure for taking up referrals. And the waiting lists at the a particular professional service were very large and taking months to be seen. There was also a need for children to be seen in schools and outside the general area of the hospital. And one principal professional asked me is there something we can do to help his professionals working in schools. And I and another professional had some ideas on how this could be done. I developed the idea of how we could work together. The openness was very good

and we worked with the other professionals so it was interesting that the other professionals wanted also the our professional side of things. And it worked fantastically” (Interview 1, page 8)

#### **4.3.4 System supports Collaborative work**

In general participants seemed to agree that there was opportunity for Collaborative working practice. Rather than a lack of Collaboration, participants felt that there was a lack of organisation in Collaborative practices.

“....well in my case yes [there is opportunity for collaboration] because I managed in the way I want to and I have built it up that way. I have called the other professionals and I have established a clinic there so I have set it up that way. Even with that professional’s service, but if you are thinking of that particular professions, the work setting gives ample opportunity for Collaborative work ...” (Interview 3, Page 22)

“There is a lot of opportunity to collaborate informally however most people find no guidelines or models to refer to and I strongly feel that this is lacking in the current system. The issue is with the organisation process of it all...” (Interview 1, page 4)

#### **4.3.5 Referral system affects outcome of Collaboration**

Referral practices within the system have also been held responsible for affecting the development of Collaboration. Participants frequently described it as being an initial stage in the Collaborative sessions between professionals, often determining who will carry out the work and which professionals should be involved.

“Basically in this service, children are referred to us our professional service and then what we do is we see children in general and then we refer to the members of the multidisciplinary team. From my point of view I feel that this should be sort of done rationally. Perhaps other people do it in the sense that other people actually refer to all the team members in the multidisciplinary team irrespective of the problem of their child which I feel a bit is a waste of resources and a waste of time for parents and children” (Interview 2, page 12)

“I have these papers from the other professional service and I try to...(collaborate) you know it is getting so multidisciplinary (the need for it). It doesn’t mean that just because they are not in our professional service (we should not work with them). I don’t contact them (however) so I have.. you know referrals to the other professional service... you know ..And I tell people to you know use their services as well. Sometimes people from that other professional service come here and we meet the parents together.... so we work a lot with referral forms and that's the first way our communication starts, so they give me a short referral form and before I meet the child, I already know what the child has. Yes I mean can assess the child developmentally and medically and then so you refer the child when you need to (to the other professionals)... ” (Interview 3, page 21)

#### **4.3.6 Presence of open information sharing between professionals**

Some participants described information sharing as effective between professionals. They described how they often sought information from other professionals to decrease the need for unnecessary repetition particularly during assessments in their case work.

“Well yes, when you have the multidisciplinary team , one of the uses is that you know each other , you trust each other more and I find that very helpful rather than being territorial and private about the work you choose to personally do” (Interview 3, page 23)

“...but why do you need to repeat [assessments]. I try to avoid it. I use the information that has already been obtained and if I need to I speak to them as I see what they said” (Interview 3, page 23)

#### **4.3.7 Presence of closed information sharing between services**

On the other hand some participants felt that there were different issues that were negatively affecting information sharing.

“...for example the intake process at that particular professional service could be done over here at this professional service so instead of having as it is now, both an intake there and an intake here we could have one intake here and provide the initial information and so would not need to duplicate the referral process.” (Interview 1, page 4-5)

“...Because of the fact that there is no shared database we are frequently trying to obtain information about the needs of children that has already been obtained by other professionals in different services, or sometimes even in the same unit. I am sure that there would be willingness for information to be shared if the right structure was in place but there is not enough serious pressure to make this change happen from the side of the authorities....” (Focus group, page 37)

#### **4.3.8 Criticism of non-formalised Systems for Collaborative work**

Some participants were quite critical of the current non formalised systems for Collaboration. In contrast to formal systems, which are official ways of agreed Collaboration by different services and professionals, non-formalised systems include casework related meetings between different professionals, such as the unstructured case conference or case review that frequently takes place within the services and at schools.

“..We are meeting up for case conferences. But then we are not saying who is responsible for what and you get a lot of people doing it in a different way. And you can get some case conferences that go well but another case conference where things turn out to work very differently. So I think formalisation is more efficient, is more effective and responsibilities are clearer....” (Interview 1, page 6)

“Most services cannot operate in isolation and they need other people to work with. But I’m not sure people understand the same thing when we talk about Collaboration. And for all you know you can go to different services and everyone will tell you “Yes we are collaborating”

and it could be not quite like that. As there is nothing formalised they may say “Yes we are working with this person and that person” but there is no accountability of that and no formal procedures to follow” (Interview 1, page 5-6)

#### **4.3.6 Issues with overlap of professionals contribution during Collaboration**

Participants frequently acknowledged that there is a large amount of overlap between different professions. Through Collaboration one can maximise efficiency and save useful resources without duplicating unnecessary work.

“Yes I do but why do you need to repeat [assessments]. I try to avoid it. I use the information that has already been obtained and if I need to I speak to them as I see what they said...” (Interview 3, page 23)

“For example there are two related professions ...and between these two there is a lot of overlap. Who’s doing what and who’s responsible for what and with whom? So I think that the operation can take such a structure. So I think formalisation gives you that structure and people understand the roles and responsibilities better. But you can also have something informal for example let’s meet for a case conference together.” (Interview 1, page 6)

“There might be a lot of overlap as well but there can be a lot of contribution that is specific to each profession. But you see how the joint group perfected can address the problem better. We’re thinking on different frames. And then you see how there is a lot of overlap and you see ha, how much of what we do and you do is the same.” (Interview 1, page 11)

#### **4.3.7 Professionals’ value of Collaborative work**

Despite a few exceptions, it is clear that most professionals report valuing Collaborative work. Whether Collaborative work is being implemented in daily practice is a different matter requiring its own investigation. Most of the participants who were professionals working within the services explained that they valued Collaborative work.

“I would say that the general feeling that I get is that professionals working here value Collaborative work and one of the reasons could be that people believe that children, people and their families are very complex and that services and professionals therefore have to be coordinated to meet the complex needs that are presented and another reason is that it reduces waiting lists. If you work with other people you can coordinate and also pass on your case work. So I am not sure for people’s reasons for Collaboration in all situations but I would be interested if you had to ask different services whether they value Collaboration and I think they would say yes as services are very specific in their orientation for example you have [professional service] and they deal with one aspect of things” (Interview 1, page 5)

“What I think was helpful is that I like seeing other people’s perspectives and coming from different disciplines we can see things in different ways and by putting them together we are going to get a fuller a picture” (Interview 3, page 22)

“In general yes they know, but people may have different reasons for not wanting to be part of Collaborative work. But I would say that most people realise that Collaboration is better than working in isolation” (Interview 1, page 10)



#### **4.3.7.1 Management professionals value of Collaborative work**

Professionals reported that most of their managers within the services seem to promote Collaborative work. Some professionals however explained that this was not always the case with a few individuals in management posts, within particular services, who generally appear to prefer to work individually.

“Yes yes, I think so. I think our management does value Collaborative work. They are increasing the standards of the professionals” (Focus Group, page 32)

“She definitely agrees with it and more than encourages it. She demands it so. She wants it. It is not always possible to. It is not easy to meet everyone up and let everybody know what is happening. It takes a lot time. In fact it is a bit of an insight for me now because I know what the policy is that they want us to adopt and I say but did I leave anybody out” (Focus Group, page 32)

#### **4.3.7.2 Value of Collaborative work and schools’ perspective**

Professionals who have worked Collaboratively so far have mentioned how important it is for schools to be open to Collaboration and teamwork when group work is taking place within schools. Some have argued that some schools can actually facilitate such work while others hinder it. It is important for the schools to understand the roles of the team and the effective Collaborative contribution it can make.

“...we have identified schools which suggest that the situation is well exposed to receiving professionals working together with children. So in that case schools are willing to give time, energy and to provide the necessary resources and activities that support the team’s work and so I think paramount to it was the school’s disposition, where it is proactive and child centred and supportive. We had a couple of situations, at schools where we decided to move the team because the school’s disposition wasn’t the right disposition. And by saying not the right, its schools that do not understand the roles of the people involved in the scene, they consider the team more of a solution service” (Interview 1, page 8)

“I have a problem, you solve it for me.” They didn’t see us as people providing service to our clients, the children, so there was a bit of a conflict of agenda, the school’s agenda with the team’s agenda...” (Interview 1, page 8)

#### **4.3.8 Need for professional’s personal initiative and positive predisposition**

Participants explained that there were a number of needs that needed to be catered for in order for Collaborative work to take place successfully. One of the most fundamental one was the personal initiative towards Collaborative work practices between professionals. The urge to

work with other people was regarded to be of paramount importance by the participants on a number of occasions.

“Number one you have to want to work with other professionals. You have to be able to accept their point of views and you need to be aware that in their fields they are the experts and not you. I think us as [professional type] we always tend to be ‘weird’ in working Collaboratively... well not only. Well so its the mentality firstly, firstly the mentality to actually work together. Secondly you need that at a higher level there is the willingness and the permission to work.....” (Interview 3, page 23)

“It took me time to develop this. One must be up to the person. But when it comes to me and the other participant, it did take time. It is easier on me. Of course. So it is actually easier. She makes me see things more clearly and I can come up with options because I just talked and I might use a certain approach with with her” (Focus group, page 29)

#### **4.3.8.1 Need for increased centralisation of professionals’ services**

Different participants expressed the need for increased centralisation. The type of centralisation that participants referred to is mainly a geographical one where different services are located together in the same place. Even though a degree of centralisation was acknowledged so far, further centralisation was needed particularly between healthcare and educational services which remain separately located.

“I used to find, initially, that different professional services where set up in different places. So even communication was more difficult. But now in education, it is set up in [location] and it is much easier for me to communicate with everyone. It is necessary, I like speaking to all the people possible in my work. “(Focus group, page 23)

“Well rather than policy I would consider them as guidelines. And I would like to mention also the aspect of coordinated services which is more important actually because service users need coordinated services and not fragmented satellite services. So I have a problem, don’t need to move around so many places. There’s all coordinated in one place...” (Interview 1, page 6)

“Another thing is that there is a home setting, a central place. Rather than having different settings all over the place, it would be better to have somewhere centralised.” (Interview 1, page 8)

#### **4.3.8.2 Need for specific models of Collaboration**

Different participants made reference to specific models of Collaboration as outlined in the literature. Some felt that the lack of structured Collaboration minimised the efficacy of teamwork. The case conference in particular was seen as overvalued and more open models of Collaboration were needed. To achieve the most effective form of Collaboration one

participant argued for the need to approach optimum Collaborative work in stages, from basic models of Collaboration to more advanced ones.

“But you know to be honest I think I am going to speak very frankly I think this is really more a formality than anything else. I feel that this case conference is a bit over valued because in reality this dialogue with parents should be continuous and even this dialogue between the team should be continuous. In a sense you know I refer as people to as members by obviously a referral trying to discuss you know in summary what the main problem is. But obviously if I have something very specific and anyone wants to discuss something specific I’d have to walk across the corridor and talk to [name] the [professional type] and say hey! listen I think this is a bit of an urgent case and I am not quite sure whether the child has autism or not and parents are quite worried and well we’ll have to discuss it you know” (Interview 2, page 13)

“Well I believe very much in the Transdisciplinary way and we can manage to achieve that.. I think it is fantastic but it is not easy to achieve, because there is mentalities, there is people with very different professions with their of esoteric knowledge and to start diffusing that and to work more Collaboratively in a Transdisciplinary work, also involving more parents which is very much central to Transdisciplinary work, basically parents take a very much central role. It is not always easy, because we have very much this expert model. But that would be definitely the ideal way, for me. There are problems to achieving that and I think we might need to first take an alternative course such as multi-disciplinary, interdisciplinary and then go on to Transdisciplinary. I feel like things have to evolve. You can’t just impose Transdisciplinary like that. It can kill it I would say” (Interview 1, page 9)

“Well if they are useful, they have been tried and tested before I feel that we should use them and that anything that helps could engage us” (Focus Group, page 24)

#### **4.3.9 Interest in formal Collaborative practice and policy**

Participants also felt the need for Collaborative work to become an official practice, that is, part of policy. ‘Formalisation’ as some referred to it, would ensure that the right practices were implemented and accounted for. Yet, the developed policy should not be rigid and should function mostly as a set of guidelines that need to be followed. For some participants, Collaboration meant different things to different people and it was important that this issue was addressed through shared formal policy in practice.

“But you can also have something informal for example let’s meet for a case conference together. But then we are not saying who is responsible for what and you get a lot of people doing it in a different way. And you can get another case conference where things turn out to work very differently. So I think formalisation is more efficient, is more effective and responsibilities are more clear. So there was some flexibility but the key ideas, the key procedures could be outlined, could develop outside the school and within the school that was left up to the team. So as with the guidelines are not a rigid set of procedures and the vision that is expected of them are to be outlined” (Interview 1, page 6)

“But I’m not sure people understand the same thing when we talk about Collaboration. And for all you know you can go to different services and everyone will tell you “Yes we are collaborating” and it could be not quite like that. As there is nothing formalised they may say “Yes we are working with this person and that person” but there is no accountability of that and no formal procedures to follow” (Interview 1, page 6)

“this has to move from just being individual initiative towards standard practice. It is part of the essence of good practice. It has to move in this way” (Focus group, page 38)

#### **4.3.10 Technology needed for increased Collaboration**

Technology was a recurring theme that was identified at different points in the data gathering. Participants felt that there was not enough technology enabling communication between professionals. These included computers, internet access and a common database that could be accessed. Limited availability of technology was highlighted as a barrier by some of the participants. As well as the need for the introduction of a shared referral database and referral information database. Information about the access to different services made available through technology was also mentioned as requiring urgent attention in order to facilitate communication.

“Yes laptops. We also need laptops. so we need technological tools such as laptops. Tools for communication. Yes we spend a lot of time sending emails just for some basic communication. Laptops are very important. cause by e-mails you can do a lot of work and not calling and trying to get the person there you call again you forget because there will be other problems going on” (Focus group, 37)

“There should be a database with the name of the client of section, not I discover things from other services a month after I need them. A shared database would be ideal. Because even for example something that I encounter in schools is that they refer to me kids who are absent from school whatever. And then they don't update the telephone numbers and everything like addresses. There are people who change their mobiles every term. Its true cause there are these [mobile provider] offers or they have problems with their ex partner. But even the CPD which is something central it is not updated I'm sorry. I've got a child from [location] that is missing and don't know where to search for him and I don't know if he is already being followed” (Focus group, 30)

“Like even simple can make such a difference like an updated a simple chart with all the services and all the completed forms can make such a difference” (Focus group, 30)

#### **4.3.11 Need for increased Collaboration between professionals in Health, Education and Social Services**

Despite participants acknowledging that in the last two years milestones have been reached to establishing connections and Collaborative initiatives between the different public services, most felt that there needs to be increased Collaboration between Health, Education and Social Services. The division was frequently seen as creating unnecessary fragmentation in the services which if surpassed would create better support for the service users. One participant

said that in the past, professionals from different services were not welcome, however the situation has changed today where initiatives for Collaboration are being sought after.

“So that’s the problem. So I think there should be more Collaboration between the education department and health than that. But that might mean because in the past they weren’t very welcomed.” (Interview 2, page 17)

“In the future I think we need to build and continue our relationship with the health services, to kind of break even further the division between us and the dichotomy in way the child is seen, there aren’t health issues or educational issues. There is the child, and the child has needs and the needs have to be met and we need to work towards better contact with the health services as well and also I think something new, I think we need to work more with the other professionals” (Focus group, page 37)

#### **4.3.11.1 Need for Family Medicine practitioners to be included in Collaboration**

Participants argued for the need to include family doctors who work outside the services. These could potentially share useful medical and developmental information of the children which could help inform assessment processes. Contact was needed so that information could be shared effectively via an open system.

“There is the child, and the child has needs and the needs have to be met and we need to work towards better contact with the health services as well and also I think something new, I think we need to work more with family doctors. Family doctors are the people who often know the family well and they can help us as part of the team. They can issue certificates; they have the medical history of the children and the family” (Focus group, page 37)

“Yes and there is a lot of medical problems that we are not aware of. We explain in psycho-educational terms, both in ways that we underline, perceive and interpret. Many situations we interpret from your knowledge base, but we are missing out on many things” (Interview 1, page 11)

#### **4.3.11.2 Need for training in Collaborative working practices**

The need for training was also an important theme that was identified in the data. Training in Collaborative working models and practices are needed to be made as part of the Trainee’s formation so that the ethos of Collaboration is encouraged from the start.

“And another thing that I would suggest, that the representatives of that profession could meet also the professionals in training. While, I mean I know they have lectures by those particular professionals, but in order to break this barrier between health and education, it would work if we were to be invited to have some meetings, even informal meetings with the students who are going to become professionals, some of the who will go on to have their own practice, even if they go into their own specialization, they would still need to know how to meet us and you know to work with the child. This will move us towards holistic practice” (Focus group, page 38)

“Well if they are useful, they have been tried and tested before I feel that we should use them and that anything that helps could engage us. There needs to be something that can

encourage the process as well. Even in training, this could be included in the training of the work, I think this could be very useful. Instilling the need of Collaboration from the start” (Focus group, page 24)

#### **4.3.12 Need for the promotion of Collaborative work, commitment and trust**

Participants explained the need for Collaborative work to be promoted as an initiative that could help all. Along with Collaborative work, promotion was also inviting commitment towards such practice as well as trust. These seem essential to participants for the maintenance of Collaboration. The development of Collaboration was also seen as a process.

“Number one you have to want to work with other professionals. You have to be able to accept their point of views and you need to be aware that in their fields they are the experts and not you. I think us as particular professionals; we always tend to be ‘weird’ in working Collaboratively... well not only. Well so it’s the mentality firstly, firstly the mentality to actually work together. Secondly you need that at a higher level there is the willingness and the permission to work. There must be this balance” (Interview 3, page 23)

“Yes it is a process and it will create trust. Experience. Experiencing it. Experiencing the liability, experiencing the process of Collaboration will create trust” (Focus group, page 35)

“.....it is about a disposition and a commitment for all services to work together and the realisation between all professionals that there is the need and the realisation that you are working to collaborate together” (Focus group, page 35)

##### **4.3.12.1 Positive relationship factors influence Collaborative work between professionals**

Participants felt that if the relationship between professionals was good then this was likely to facilitate more effective Collaboration. Personal and professional affinity encouraged Collaboration to take place between different professionals. In some instances participants explained how they were welcome in some services and expressed interest to increase Collaborative practice in the future.

“I think the time is right, because even from the health department I heard willingness to work much closer. Also this includes, we need to clarify what each professional has to offer” (Interview 1, page 9)

“I mean sometimes it’s also because of the affinity between people, personal or professional affinity. For example, I can be working with the youth worker but I would have a greater affinity with the Inco or the person working there. So I work with them it’s arbitrary, it’s not organised or structured. It’s not for example a set way but I just work with the people I work best with and I see who is most professional, organised. But for example, in cases like this I work mostly with psychologists or for example instead of working with that particular professional I work mostly with a professional specialist” (Interview 1, page 4)

#### **4.3.13 Challenges to successful Collaborative work.**

Participants explained that for Collaboration to take place successfully, professionals needed to face a number of challenges. Perseverance was necessary to face these challenges and support was needed from the administration. Participants also mentioned the need to make best use of the resources available.

“It is clear that there are a number of challenges but if we work together these could be overcome. We need to keep on trying and that is what [undecipherable] (giggle) you know is” (Focus group, page 35)

“That’s how people grow and we should go for it really. What’s important is that administration support us in this if we are going to do it right and we have to start from somewhere. The database is definitely going to help but it is not everything that is for sure. We need to make use of everything we can” (Interview 1, page 12)

##### **4.3.13.1 Challenges in promoting cost effectiveness and efficiency through Collaboration**

Research participants explained that promoting an effective form of Collaboration that was cost effective and efficient was a challenge and needed planning and a good organisational strategy. Excessive numbers of professionals working on the same case at the same time, despite an initiative to work together, was best avoided and instead it was important to use good communication to mobilise and economise resources.

“Perhaps other people do it in the sense that other people actually refer to all the team members in the multidisciplinary team irrespective of the problem of their child which I feel a bit is a waste of resources and a waste of time for parents and children” (Interview 1, page 6)

“So I think that having formal procedures mobilizes the resources. You’re using resources in a streamlined and efficient way to the best of its value so nothing gets really wasted. Human resources, professional services are used effectively and efficiently in a formalised way. Because everybody knows what, who to consult with, when, how long we should involve and that there is not much wastage. Ok?” (Interview 1, page 6)

“So for example if I have a problem this problem can have different ramifications but what is the service user really seeing and receiving and in our case the service users are mainly the children. Do they need a lot of different services with a lot of different people working and following the cases etc. or how can we give the children an integrated service as a whole?” (Interview 3, page 23)

##### **4.3.13.2 Challenges in overcoming miscommunication between separate services**

Participants felt that clear communication between services was needed, and a challenge, in establishing good communication between separate services of professionals working with

children. They advocated for direct non-formal communication, as needed, that could be used without resorting to non-personal methods of communication.

“Of course there you have [name] and [name] visiting and I how spoken to them. But even there I mean... What exactly? Who where do you work? What do you have to offer and what do you do? Do you do assessments, do I need to assess, do we need to do it from our side?” (Interview 3, page 23)

“Well I don't know basically I think to be honest most of the challenges that arise as a lack of communication and lack of contact and once you get to know people and know them individually because tension increases as what I find, when you actually write e-mail . like very formal e-mails were very former letters and the responses sometimes (are) weaker But of I actually pick up the phone and say hey listen, I have a problem, then it can be clarified. If people actually have his personal contact with you, this can increase Collaboration...” (interview 2, page 18)

#### **4.3.13.3 Challenges in overcoming territorialism**

Participants explained concern that some challenges existed in overcoming the tendency for some professionals to be overprotective of their work remits, often not allowing other professionals to join in and help out. Personal dispositions that utilise authoritative approaches also existed and needed to be changed for successful Collaboration to take place. One participant stressed the fact that many professions have areas in common and skills from those areas could be shared for the benefit of effective service delivery.

“I think it depends on the attitudes and personalities of the people involved so if you have a professional in our field and she see things as though she's a prima donna, or he's the top boss and that nobody should actually interfere with her work or area and his ideas and her plans they wouldn't even talk to you and they wouldn't even taken interest: but on the other hand you have someone who's open and someone wants to chat with you in share their ideas than you can say that these fields are similar and you can help me this and I can in this can work together so I think that basically it's about personal contact apart from the office and sharing same structure and you have old services combined together” (Interview 2, page 18)

“About sort of protecting their remit of work and I think what worked best was when people where very diffused in their roles and very open to learn from others. And so for example, I learnt so much what do through the team. We didn't take a very rigid role for example, that particular professional area can work very well together and we can discuss for example you can work on one aspect of [intervention] and I can work on an aspect of assessment to identify the presenting problem and this tends to be beneficial because we save time and we tend to learn from each other and to support each other” (Interview 1, page 9)

#### **4.3.13.3 Challenges in overcoming role confusion**

One participant explained how issues of identity regarding one's roles come into play during Collaboration, and how this can create tension for some professionals. It is important that roles are understood during Collaboration and the need to keep or transcend roles agreed on.



Role confusion is a challenge that needs to be addressed for good Collaboration to take place. Teams of professionals working Collaboratively need to make their function and orientation explicit, especially when providing services to schools, as different outcomes and forms of working might be expected from the working groups one is prepared to offer.

“... when [name] had decided to work here, I had asked for a few hours of leave as my identity came onto question from myself and I felt confused. I said ok so and was asked why don't you take all the children who have particular needs. I [usually] take children with all types of needs. And there was these ideas that children with particular needs go to the newly employed professional you know. The role lineation between the two professions is really blurred because I also see children with such needs and so how are they seeing me as a professional? What is a [professional type] with my level of training? And yes you're right, I mean and then I began to relax and said ok fine so those see it like that. But I know who I am I know what I do and some cases got referred to [name] as a particular profession and some cases will go to me. It is important that they have a diagnostic side and we feel that that particular profession should do the diagnosis and give the certification, but I mean I do that kind of work myself. I am a trained professional myself but... so what role is the service expecting from me...” (Focus group, page 29)

“We had a couple of situations, at schools were we decided to move the team because the school's disposition wasn't the right disposition. And by saying the right its schools that do not understand the roles of the people involved in the scene, they consider the team more of a solution service. “I have a problem, you solve it for me.” They didn't see us as people providing service to our clients, the children, so there was a bit of a conflict of agenda, the school's agenda with the team's agenda.” Interview 1, page 8)

#### **4.3.14 Considering the Child at the centre of Collaborative work**

Participants mentioned that Collaboration needs to address the complex needs of children and that the child needs to be placed at the centre of Collaboration. The child's needs should be taken into account holistically and this should reflect the Collaboration that takes place. One participant also mentioned how too many people working with children may not be in the best interest of children making use of the services.

“In the future I think we need to build and continue our relationship with the health services, to kind of break even further the division between us and the dichotomy in way the child is seen, there aren't health issues or educational issues. There is the child, and the child has needs and the needs have to be met and we need to work towards better contact with other professionals” (Focus group, page 37)

“In our work with children the problems are many and large. The problems are complex so I see no problem with working together as I do with other professionals. I work very Collaboratively for example with somebody seeing the child on an individual level. We need to focus on the child and place his needs at the centre...” (Focus group, page 29)

“The same person the child wants the same person and the family. Children don't want to see to much professionals working separately. We need to see how this is affecting children.” (Focus group, page 35).

#### **4.4 Conclusion of results and findings**

The results point to important dimensions related to different aspects of Collaborative work between different professionals working with children with SEN in the Maltese public services. Quantitative and Qualitative results are presented separately, given the type of data analysis adopted as a parallel mixed methods research. The quantitative section provides a basic understanding of Collaborative work with the goal of providing a basic structure to underpin the research questions. The thematic analysis is much richer in detail and many themes have been identified that provide a clear picture of the experience of participants.

Revisiting the results of the quantitative section, one can see how participants report that they spend a small but significant fraction (> 8%) of their working time in collaborative work. When doing this it seems that they value working in relationships characterised by open interaction and sharing. Nevertheless, participants also report being faithful to professional boundaries when working collaboratively.

Participants also reported very frequently engaging in “working collaboratively with one or more professionals where effective communication takes place throughout the whole project/casework”. These results point to evidence that collaboration does take place in Malta and when it does, it is one characterised by openness and readiness on the part of professionals which however does not compromise the maintenance of professional boundaries.

The results of the qualitative section that were identified following a thematic analysis provided important information highly relevant to the topic of the research questions. It provided information on the some historical instances of collaboration, where participants explained that in the past one could encounter positive examples of collaboration along with experiences of role confusion, miscommunication and territorialism. The latter three factors were interestingly defined as ‘challenges’.

In general participants reported that they value collaborative work and that they feel that others value it also, including the administration and several of the school’s staff. The thematic analysis however indicated that although professionals generally explained that there are positive examples of collaboration present, many believed that collaboration is not always

popular in the different services and among different professionals. Nevertheless, participants explained that there were various opportunities to improve collaboration and these included: the presence of open information systems, the presence of a general culture that values collaboration, expressed interest in formal collaborative models and pre-established positive relationships between professionals of different backgrounds.

Despite the positive opportunities for collaboration, challenges were recounted in equal proportion indicating an awareness of the shortcomings of professionals with regard to collaborating in different areas. Challenges focused mainly on improving the referral system, overcoming the presence of closed information and overcoming miscommunication and territorialism. These challenges could however be managed once gaps of experience were targeted that addressed needs for specific models of collaboration such as the Transdisciplinary model, needed technology and the promotion and training of collaborative practices among others.

## **5.0 Discussion and Conclusion**

This section focuses on discussing the results in further detail. It also points to a number of important issues related to both the methodology of the present research, its application as well as outcomes.

### **5.1. Introduction**

In discussing the results, the author intends to provide further detail about participants' views on different aspects of Collaboration and evaluate these in light of theory. This allows for the research questions to be answered to different degrees depending on the applicability and generalisability of the research findings. The discussion of this research seeks to explore in further depth the methodology of the research and its findings, without attempting to provide precise answers, even though each research question is tackled individually. An exploratory style in discussing the results is adopted, with the goal of facilitating a better understanding of how Collaboration is being implemented now and can be better implemented in the future. Such knowledge will hopefully guide future action, which will then also support future research and more action-oriented understanding, in line with the pragmatist theory of knowledge. This discussion can be considered a first step on such a path, seeking to provide an initial framework for an on-going knowledge and action based culture of Collaboration.

The author will refer to the systems theory presented so far in discussing and interpreting the results. Theory will inform the discussion with the scope of providing a better context for understanding the results and seeing how they apply to the real world. This will allow for this research to be seen in light of what previous authors have found and developed. As mentioned in the literature review, developments in collaborative working systems within organisations are likely to succeed when barriers and facilitators to successful collaboration are fully understood and evaluated in light of their complexity. Systems theory offers a unique way of evaluating complexity within systems such as those in which collaboration takes place allowing for a focus on the most important aspects of collaboration and its relationships. The triple model of collaboration as multidisciplinary, interdisciplinary and Transdisciplinary systems offers unique insights that can be used in the process of examining the collaborative work reported by participants. However the discussion will first focus on answering the first research question.

## 5.2 Research Question 1 - Prevalence of Collaborative work

Research question one of this study is asked with the goal of exploring the prevalence of Collaborative work. The question is “*What is the current prevalence of Collaborative work between different professionals in services for children with SEN?*” The following discussion seeks to answer this.

### 5.2.1 Estimates of prevalence of Collaboration

Participants in both interviews and focus groups made reference to several different instances of Collaboration in the past in Malta. It is not possible to give a clear estimate of how much Collaborative work has taken place in the past however. The same applies to the present prevalence of Collaboration. Given the exploratory purpose of the research, and its limited weighting in quantitative methodology it is not possible to discuss the prevalence of Collaboration in terms of an accurate numerical estimate<sup>9</sup>.

60 participants responding to the section on prevalence of Collaboration (4.3.1) indicated that they worked Collaboratively for a limited number of hours equalling to less than 7.75 hours a week. This is a relatively small proportion of their total working hours<sup>10</sup>. Mean results on how much time professionals spend in Collaborative work

= 7.75hrs in the

Last Week. One may argue that the participants’ responses are not consistent in representing actual Collaborative working hours taking place each week, since calculations considering total work engagement times do not add up. This is because responses for the last week of their work

= 7.75hrs) than those achieved in questions concerning

Collaboration in the 1a

= 19.7hrs).

There are various possible factors that affect this result and these include decreased Collaborative contact time over the period of the questionnaire, working roles of some professions that require independent work with children rather than Collaborative (e.g. school

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<sup>9</sup> Results achieved can only be considered good estimates for various reasons discussed later in forthcoming sections.

<sup>10</sup> Professionals for children in SEN in Malta mostly work the national standard employment working time which equals to 40 hours a week (EURES Malta, 1999). Some of the professionals are also employed as teachers by profession and work approx 24 hours. The large majority of participants in the research however, (apart from a few exceptions professionals employed as teachers) are meant to spend the remaining 16 hours a week preparing material to use in their work and engage in continual professional development.

nurses) and as three respondents pointed out, they had been on leave recently and restarted work in the last week. This could result in fewer numbers of hours being reported.

Meanwhile it can be argued that the results do reflect a considerably reasonable prevalence of Collaboration. Some may say that the results instead reflect limited Collaboration given that they represent less than half of the time spent working Collaboratively. It is possible that some professionals are not choosing to work Collaboratively. Some may be choosing to work independently without considering Collaborative routes. This may be due to personal dispositions and a limited personally held value placed on Collaboration or the influence of a culture that does not support teamwork in general. As outlined in the literature review, a study (Heusinkveld & Benders, 2001) presented results that suggest that Collaborative work is not very popular in organisations across Europe, and few are the organisations that work in teams. Teamwork is particularly unpopular in southern European countries. One may therefore have reason to believe that the results of this section of the study are validly indicating limited Collaborative work between different professionals in Malta.

Some studies (Dearden & Miller, 2006; Farrell, 2006) focusing on Collaborative work and multi-agency teamwork within children's services do point to the presence of successful Collaborative teams for children in the UK. These however do not point to overall national prevalence of Collaboration in teams for children across the entire area of the UK but to a limited population. The interviews and focus groups in this study do support some statements of the claims within literature from the Maltese Islands which point to the presence of Collaborative work between professionals in different settings for children with SEN. (Bartolo & Martinelli, 2007; Ministry of Education, Culture, Youth and Sport, 2009; Zammit et al., 2004). The analysis of the Qualitative data findings presents a picture showing that participants do agree that Collaborative work does take place in different forms. Sometimes this takes place through consultations, peer supervision, joint casework including assessment and interventions and open discussion between different professionals working on common casework.

Occasionally professionals do not collaborate because the right system and initiatives are not in place. Participants explained that these factors might not occur consistently for some professionals but due to personal attitude, limited time and fragmentation between different services, Collaboration does not take place. Some authors have highlighted examples where

group work does not function effectively due to different factors related to group psychology and local culture (Arnold et al., 2005). The literature also points to different examples of ineffective Collaborative work taking place in groups with limited Collaboration and information sharing as opposed to open ones (Taylor, 2003). It is likely the case that not all professionals collaborate and as reported by participants, some professionals prefer working alone. Eisner (2005) who evaluates collaboration through systems theory explains that having poor information sharing and information gathering systems is likely to drastically decrease efficiency of the collaborative group and make it less likely to succeed in functioning.

The findings produce enough evidence to show that some Collaborative work is taking place between different professionals in services for children with SEN. There are exceptions however, as it is likely that some individuals do work individually rather than Collaboratively. Qualitative accounts of successful Collaboration however are more frequent than reports of individual work. In general professionals personally report that they spend more time working individually rather than Collaboratively. Reports indicate that some professional services are collaborating with others effectively while some others do not collaborate at all.

### **5.3 Research question 2 - Type of Collaborative work practiced**

Even though the previous results indicate that Collaboration does takes place within limits and considering total working hours of respondents, it is clear that it does take place at different time intervals and in different forms. The second research question (1.5) focuses on type of Collaborative work practiced and asks professionals to confirm whether different examples of Collaboration reflects their own practice and to what extent it does. Taking into account the surface meaning of the statements presented to the participants and how they were scored, it is possible to argue that when participants collaborate they “occasionally/frequently” work with others having separate goals, communicate effectively throughout the whole case-work project, share information and skills coming from each other’s profession while maintaining clearly defined roles and boundaries to work procedures and adopt unified approaches and shared visions to work. On the other hand, participants reported that they “rarely/occasionally” work independently on common projects/caseworks

and transfer skills and tools in such a way to limit the need for different professionals to be on the same project casework.

### **5.3.1 Applying the triad definition for Collaborative work**

Referring back to the literature review in section 2.3 one can see that the literature points to different examples of Collaborative work that have taken place in the past, both locally and internationally. A triad definition of Collaborative work is also used in different articles, to discriminate between different types and systems of Collaboration. Section 2.3.7 of the literature explains multi-, inter- and transdisciplinary working and provides practical examples (Doyle, 1997). Multidisciplinary working involves professionals working in parallel, carrying out their own assessments in children's services which are then brought together by a key member in order to give recommendations. However, this process may not reflect all the opinions of the professionals involved. On the other hand Interdisciplinary working is similar, in that each professional carries out his or her own assessment and formulates recommendations jointly thereby agreeing on how to proceed. In this way information is also shared and knowledge gained across the professional groups.

Finally Transdisciplinary work involves 'role release', where participants may train and advise each other so that skills are transferred, allowing a child to have one key worker who can provide a holistic intervention plan. 'Role expansion' allows for theoretical concepts and language to be clarified without hindering professional identity, but instead improving communication and understanding.

All the above described dynamics happen within systems and are based on interaction between units, in the case of this research – professionals interacting with each other. Going back to Eisner (2005), we see how a systems approach meanwhile tries to focus on the whole of a system, takes into account interrelationships between the parts of a system (or units), whether inadvertent or intentional. These are sometimes also called interactions and interfaces. It is highly likely that Interactions that we have not fully accounted for can cause a complex system to fail (2005).



Results gathered from the questionnaire indicated that the most common type of Collaborative work engaged in reflects collaboration that in the literature is frequently described as ‘Multidisciplinary’ and ‘Interdisciplinary’

= 3.4 for “*working Collaboratively on the same project/casework with one or more different professionals who has separate goals*”. This example of Collaborative work reflects a present but limited level of Collaboration often described in the literature as an example of *multidisciplinary* work (Choi & Pak, 2006, 2007; Collin, 2009; Wilson et al., 2000).

The next highest mean response ( = 3.5 ) for another 2 statements “*working Collaboratively with one or more professionals where effective communication takes place throughout the whole project/casework*” and “*working Collaboratively with another one or more professionals, openly sharing information and skills coming from each professional’s background but maintaining clearly defined roles and boundaries to work procedures.*”

These two statements are frequently described in the literature as reflecting more of an advanced form of Collaborative work than multidisciplinary work, often described as ‘Interdisciplinary’. Interdisciplinarity Collaborative work between professionals takes place in such a way that different skills and information are shared between professionals working on similar casework. It is likely that joint work does not happen throughout Collaborative involvement however professionals usually meet at some point to report progress, share information and skills (Choi & Pak, 2006; Collin, 2009; Taylor, 2003).

The lowest mean responses were given by participants for individual non-Collaborative work =2.5), Transdisciplinary work =3.1) and multidisciplinary work =3). This means that the least frequent type of Collaborative work engaged reflects individual/ non-Collaborative and Transdisciplinary work.

Transdisciplinary Collaborative work reflects Collaborative work that distinguish it from other types of Collaborative work such as interdisciplinary and multidisciplinary work.

Transdisciplinary Collaboration reflects:

“a high degree of Collaboration and joint decision making among team members (including parents) in conducting assessments, establishing programs and teaching the skills that are traditionally associated with one discipline to other team members who function in direct

service capacities and work directly with learners throughout each day across a variety of environments and activities [role release]” (York, Rainforth, & Giangreco, 1990 ,p73).

### 5.3.2 Professionals’ views of Collaboration

Given the highest mean results achieved on interdisciplinary type statements, and low mean results on multidisciplinary and transdisciplinary type statements, one could argue that the type of Collaboration taking place in Malta has stronger elements of interdisciplinary work, in contrast to multidisciplinary and transdisciplinary forms of working. Placing this classification aside for the time being, and focusing on more specific examples of Collaboration reported by participants; we see how participants have explained that they have collaborated with other professionals within the same departments as well as those coming from other departments (e.g. Health and Education). Professionals from different services and departments often have skills and working practices that are different to each other, often being attached to differences in policy and work procedures. Despite this, participants explained that it was possible to find examples where different units shared ‘openness’ with each other, often working jointly and achieving positive outcomes (4.3.6).

Professionals often work with each other through peer consultations, supervision and frequently share their resources if they feel that others could use different tools in common casework and projects. Participants reported that they could call each other openly, even when the other professional worked in a different unit. Information was shared also through reports and notes and when children were referred it was not uncommon to include information to help support the other professional. These references to open information sharing can be explored in light of Systems theory and compared to the qualities representing an ‘Open Naive System’ or possibly ‘Open Complex’ systems as discussed by Taylor (2003). As discussed earlier in the literature review an ‘Open Naive System’ may be comprised of some level of interdisciplinary work; nevertheless it is superficial as there is a power struggle between services which are competing for control. In fact instances of territorialism whereby professionals prefer to work alone and stick to rigid ways of working had been reported, even when other examples of open Collaboration were described concurrently. The application of the idea of the ‘Open Complex’ systems can be made in light of reported examples allowing for the process of integrating and listening to different views of different professionals. However the open complex systems explained by Taylor (2003) allow specifically for less

focus on roles within meetings and strive towards minimal intervention in casework. The latter was not mentioned by participants.

Data gathered from participants is difficult to compare accurately to models and examples of Collaboration as outlined in the literature review, both reflecting past examples of Collaboration locally and internationally as well as those encouraged through theoretical models. It would appear that the type of Collaborative work described in this study contains some elements of collaboration as described in the literature, as opposed to complete replicas. A possible reason for this is that, as described by the participants, formal and structured methods of Collaboration do not currently exist in the services. It may be argued that the reason for this is that the need to work collaboratively has not yet been stressed well enough, despite there having been positive examples of collaboration, such as those described in the introduction (e.g. Zammit et al., 2004).. It is likely that not enough resources and pressure has been allocated to maintain such past collaborative trends. Moreover, no current policy, official guidelines or protocols exist within the services and among professional bodies that stress and verify the needs of collaborative working relationships. This contrasts with historical developments in other countries such as the United Kingdom where collaborative work and integrated services have been key national agendas and sometimes even forming a considerable part of national legislations ( e.g. Special educational needs : Code of practice,1994); Every Child Matters, Department for Children Schools and the Family, 2003).

The collaborative work that professionals report in the Maltese services has stronger elements of interdisciplinary work in comparison to independent, multidisciplinary or Transdisciplinary work. Interdisciplinary Collaborative work between professionals takes place in such a way that different skills and information are shared between professionals working on similar casework. Participants also report that professionals were open to each other and were willing to share resources, particularly those working in the same services. The level of information sharing can be compared to an ‘Open Naive System’ and as having elements of the ‘Open Complex System’ (Taylor, 2003). More structure and formal models of Collaboration are needed to be able to evaluate the type of Collaboration being practiced.

#### **5.4 Research question 3 - Professionals’ value of Collaborative work**

The initiative to collaborate seems to be present, and the author can confidently argue that the majority of participants value Collaborative work and appreciate its potential. In answering the third Research Question – '*How is Collaborative work valued by different professionals in services for children with SEN?*', one may first refer to section 4.2.4 of the results which provide us with mean responses to the items about value of Collaborative work. Similarly to part three (refer to Appendix 8.8) of the questionnaire, part four presents participants with the same statements, this time asking them to rate how much they value Collaboration. This is done providing a likert scale as "*1 = I do not value this kind of work*" to "*5 = I very highly value this kind of work*". Considering participants responses to the statements in relation to their respective surface meaning, one can confidently state that participants 'Highly Value/Very Highly Value' effective communication throughout casework/projects, openly sharing information and skills coming from each professional's background but maintaining clearly defined roles and boundaries to work procedures and working in such a way that a unified approach is created using a shared vision and identical goals. On the other hand, participants reported "*Slightly Value[ing]/Moderately Value[ing]*" working independently and working independently on a project/casework which is also being worked on by other one or more different professionals separately. Finally, by looking at the mean responses of participants it is possible to state that participants reported "*Moderately Value[ing]/Highly Value[ing]*" working Collaboratively on the same project/casework with one or more different professionals who has separate goals and working in such a way that professional skills and tools needed are transferred from one professional of a different background to another, limiting the need for different professionals to be on the same case.

By referring to the triad definition of Collaboration as presented in the literature review (2.3.10) it is possible to argue that the most commonly valued type of Collaborative work has elements of interdisciplinary work (= 4.4) as well as transdisciplinary work (= 4.2). This suggests that in general, participants favour open and effective Collaborative forms of working with each other as opposed to individual work and closed multidisciplinary types of Collaboration. In fact, value for individual and multidisciplinary forms of work (=2.6). This shows that the participants completing the questionnaire value Collaborative work between professionals in contrast to individual and independent work.

The Qualitative data collected also contains rich information with regards to how professionals value Collaborative work. By reviewing the themes that have been identified through the thematic analysis (4.2.2) it is possible to strongly argue that the research participants personally value Collaborative practices and believe that others value it as well. This is not exclusive to the setting in Malta as pointed out in the literature review (2.3.1). In the UK professionals reported that increased Collaboration is positively valued across children's services. Although the same professionals do not feel it is taking place enough, they did realise that one of the most perceived key elements to working together involves a positive team attitude and a collective valuing of Collaborative working initiatives (Doyle, 1997). One can argue that such a disposition can be very beneficial for collaboration. For Senge (1994) who examines the functioning of organisations from a systems perspective, it is highly important to build a shared vision within organisations for collaboration and once that is affected, to build personal mastery in being a collaborative team member.

Professionals reported that managers do value Collaboration and it is expected that professionals working within the services collaborate and share information and resources (4.3.7.1). In general professionals also pointed towards the importance of Collaboration and how this can help make work in schools more effective (4.3.7, 4.3.9, 4.3.7.2). Collaboration was also seen as being necessary between professionals in the same service; however, another recurrent theme identified the need for Collaboration to happen across different services and departments. This kind of Collaboration was also valued (4.3.11, 4.3.13.2, 4.3.8.1)

Throughout the interviews and focus group, participants were frequently open and had a large amount of ideas on the various organisational and individual needs at the data gathering stage. This aspect highlights participants' motivation to establish good Collaborative practices within the services. Participants not only expressed their value of Collaboration but they also emphasised the importance of professionals taking up personal initiative and maintaining a positive attitude towards Collaboration, thus ensuring its implementation in the future (4.3.8). Participants were also very keen on participating in the research. This strongly suggests that the topic of Collaboration between different professionals is one of value to professionals in the services in Malta.

Some participants were quite critical of some current non formalised systems for Collaboration (4.3.8). In contrast to formal systems which are official ways of collaborating

agreed on by different services and professionals, non-formalised systems include casework related meetings between different professionals such as the unstructured case conference or case review that frequently takes place within the services and at schools. Participants seem to value pre-established methods of Collaboration agreements so that joint work is carried out more effectively (4.3.8.2).

## **5.5 Research question 4 - Pathways to best future practice**

Establishing that Collaboration is positively valued by professionals makes it easier to achieve further Collaboration in the future, since having professionals' value Collaborative work facilitates the implementation of Collaborative practices. Valuing collaboration is likely to increase the motivation for the implementation of collaborative. Of equal importance is having data that provides good guidelines for best future practice. Conveniently, the Qualitative results of the research were successful in providing detailed information on how participants believe Collaborative work can be best implemented in the future.

### **5.5.1 Professional attitudes and service ethos**

Participants explained that having the right attitude and professional dedication toward Collaboration was very important in the implementation of Collaboration. This was seen as a necessary prerequisite so that professionals within the services could take Collaboration seriously. As discussed in the previous section (5.4), it is clear that participants generally report that Collaboration is valued in the services. This lays the right foundations for supporting professional attitudes and commitments to give Collaboration a central place in service delivery. The literature also explains how important basic assumptions and values are in the process of cultural change within organisations (Cummings & Worley, 2005). Personal values lie at the centre of initiatives for organisational change. In line with this, participants repeatedly reported that taking personal initiatives to establish Collaborative practices was important, often referring to personal examples of such initiatives that were taken in the past (4.3.3, 4.3.12.1).

Participants explained that there was a need for services to adopt a Collaborative ethos, possibly being supported by the policies guiding Collaborative practices and formalised models. This change needs to happen at an organisational level. Policies and formalised modes of working have been described as providing frameworks within organisations that can

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limit competing values, thus facilitating common goals. This is central in Collaborative work, particularly within Transdisciplinary type of work (Doyle, 1997; York, Giangreco, Vandercook & Macdonald, 1992) described in earlier chapter (2.3.10). For some participants, this was different to unstructured and non- formalised models of Collaboration which frequently have limited accountability and are often difficult to evaluate and assess. There is a considerable body of literature focusing on Collaborative work within and across services. In some countries Collaboration within and between services has become part of national policy development (Choi & Pak, 2007; Collin, 2009).

### **5.5.2 Organisational development**

A large number of themes identified in the Qualitative data point to several different areas that could potentially guide development of the practice of Collaborative work. Systems-based thinking allows us to see organisations as composed of different systems interacting with each other, often being interdependent and having simultaneous cause and effect relations (Fox, 2009; Stoker, 2002). The services within which professionals for children with SEN in Malta work can be considered as systems and possible pathways to best future practices in Collaboration can be identified through an exploration of the dynamics of these systems.

Referring back to the systems theory presented in the literature review we see how Taylor (2003) described open complex systems which function with a high degree of interdependence and open information sharing practices. In the open complex model their meetings are held between professionals to discuss and plan intervention and work with a coordinated framework. This can be seen as resembling the Interdisciplinary framework evident in some of the current practices in Maltese services. We see such examples in the results of this research (4.3.3, 4.3.6) as well as other good examples of Collaboration reported previously (Zammit et al., 2004). Building upon such examples, one could argue that the implementation of the Transdisciplinary model is also possible.

The transdisciplinary model was in fact described by one participant in an interview as being a possible pathway of working for professionals, allowing for more effective service for children and their families. It can be argued that Transdisciplinary work naturally takes place

within an open complex system as “participants share and pursue information, prioritise work, plan minimal interventions, look at and retain differing views, listen to the views of the family and child, apply egalitarian principles, apply research evidence, avoid predetermined strategies and identify wider community needs” (Barclay & Kerr, 2006, p.39). An advantage of systems such as those described by Taylor, is that positive changes in one system often have a positive influence on other aspects of the system (Stoker, 2002). This can help in achieving progressive models of Collaboration gradually as each positive step in Collaboration has positive developmental effects in different areas of the organisation.

As mentioned in the literature review, there are numerous models for Collaboration placing children and families at the centre and allowing for the development of Transdisciplinarity. (Giangreco, et al., 1999; Giangreco, Whiteford, Whiteford, & Doyle, 1998). The VISTA programme provides good practical guidelines for Collaboration between professionals which could potentially be tried and adapted within services in Malta. As one participant in the interviews suggested (4.3.8.2), such models could also serve as guidelines to working rather than fixed policy, allowing for each professional to have the opportunity to contribute to potential working groups. Collaboration does not necessarily need formalisation and support by policy to function, although formalisation and support by official policy could be helpful in its implementation. One participant argued that Collaboration can be carried out informally without reference to guidelines and protocols. This would facilitate an open system where professionals could communicate as needed in non-formal ways supported by positive relationships and working partnerships (4.3.12.1).

### **5.5.3 Specified needs for the implementation of Collaboration**

Some participants made specific reference to needs that are important for the development of Collaboration. Centralisation of services can involve the restructuring of both the physical and organisational functioning of services into one central working system. Within a Maltese context, this can apply to centralisation of professional services and units. As described in the introduction, centralisation has already begun in the Maltese context as many services for children with SEN were in the last ten years re-located under one service within the Student Services Department (1.3.1). This author believes that this is a positive step. Some participants have argued that there is a need for further centralisation of the services in order



to have professionals working closer and being able to establish greater contact. The usefulness of this aspect has been described in the literature as having both pros and cons (Witesman & Wise, 2009). However, given the small size of the Maltese Islands further centralisation is not likely to have adverse organisational effects. Instead the author, like the participants, believes that centralisation is likely to contribute to the development of open complex systems with all its advantages for Collaboration. Schrage (1989) who writes from a systems perspective, explains that shared spaces for collaboration and common platforms are likely to bring working units within a system closer together and increase the chances that information is exchanged more effectively.

Centralisation was also strongly argued for by participants in terms of having a common referral mechanism, a central referral intake system (refer to 4.3.5) and record keeping system (refer to 4.3.10) which could allow data to be shared effectively and confidentially thus making services more efficient for service users. A common database of referrals is also seen as key to reducing overlap of assessment and interventions between different services. Meanwhile, it is clear that common databases have a number of benefits in terms of efficiency in Collaboration between professionals and service delivery. Many issues of confidentiality need to be considered in light of ethical procedures and data protection policies (Peckover, Hall, & White, 2009). The rights of children and their families need to always be safeguarded and the needs of professionals ought to always be secondary.

Potential issues can however be overcome, particularly when there is a closer working alliance between health and educational services for children with SEN. Professionals within these departments have already taken positive steps and the results show that there have already been some positive Collaborative outcomes between units from both departments (4.3.11). Particular reference was also made with regards to family General Practitioners (GP) in the Medical field (4.3.11.1). One participant explained that GPs could contribute to the teams supporting children with SEN because they quite often had access to a lot of information about the family. GPs are professionals who have prolonged contact with families over time and often meet and assess children at different stages in their development. The integration of healthcare and social care teams has received much support in recent years overseas; particularly in the UK where different services for children were encouraged to work Collaboratively (Department for Children Schools and the Family, 2003). In line with this idea, Schrage as early as 1989 explained how the use of outsider inputs can also help to

facilitate and open information systems in which external support can also be consolidated and used to enhance the strength of communication of an internal system.

In this present study, participants expressed belief that services can work together if training is provided, possibly from university level so that students become accustomed to working with different professionals coming from different backgrounds and services (4.3.11.2).

Without having the necessary support for the effective functioning of collaborative systems, including external support, Eisner (2005) also argues that limited knowledge and training on how to share information and communicate effectively within organisational systems can diminish the efficacy of collaborative systems since this creates difficulties in the interaction between functioning units. It is important therefore that knowledge on effective collaboration is made available to professionals as early as possible particularly when they are developing and learning ways of interacting within new information systems.

#### **5.5.4 Overcoming challenges in Collaborative pathways**

Collaboration between services is definitely not new in Malta. The literature review presented both successful and unsuccessful attempts at having teams work Collaboratively in the past (Tanti Burlo', 1992; Zammit et al., 2004). Considering that Collaboration takes place in such complex social, cultural and psychological environments, some may argue that this is quite natural. Some participants referred to the development of Collaboration as a challenge, (4.3.13) a process (4.3.13, 4.3.8.2), sometimes even breaking it down into stages (4.3.8.2). This is much more realistic and, like every important and complex project, effective Collaboration and improved Collaborative working practices will only be possible with the agreement of those responsible for managing services and the professionals themselves. In fact participants explained that the administration professionals were key in facilitating the implementation of Collaborative work (refer to 4.3.13). What is needed, as some participants explained (refer to 4.3.13), is the perseverance of both professionals in basic and senior posts and the managers and directors in the various services in encouraging Collaborative work and providing the necessary resources for success.

## **5.6 Post-research correspondence with service Managers and participants**

Contact with both Managers of the services and participants in the research will be carried out once the research is complete, approved and finalised. The aim will be to provide feedback, useful information about services and professionals working within services as well as a chance to offer feedback to the author. This is in line with the Pragmatist orientation of the research that considers the acquisition of knowledge only completely fulfilled once ideas are tested in the real world and verified for accuracy.

### **5.6.1 Presentation of research project and feedback to participants**

A presentation is planned with managers of the Students Services Department and potentially the Education Division outlining the findings of this research project. The presentation will present both quantitative and Qualitative data in summarised forms and findings and implications will be discussed. Time will be provided for questions and feedback will be requested. The research project could potentially be used to guide the development of service policies, further research and training of professionals within the services for children with SEN. As discussed in the methodology, a summary of the findings of the research will also be presented to the participants via email once the research has been approved and accepted. Participants expressed interest in receiving information on the outcomes of the research.

### **5.6.2 Future goals**

In addition to being a requirement of a Professional Course in Educational and Child Psychology, a secondary goal of the research is to support the creation of a working party that promotes the development of Collaborative practices between professionals within services and potentially across services. The research will shed light on potential ways of working, organisational needs and other useful information that can support the implementation of Collaborative practices.

## **5.7 Critique of methodology**

This research is exploratory in nature and, as with all research purposes and designs, a number of limitations exist in various sections of the research. The author hopes to shed light on possible limitations in order to increase awareness of possible weaknesses to avoid in

possible future research. The mixed method design was selected in line with the research questions and to facilitate a broader and more reliable picture of the current and possible future application of Collaborative practices. Nevertheless, the mixed method approach showed some deficiencies as well as strengths in the course of the research.

### **5.7.1 Limitations in the construction of questionnaires**

Despite the success of this approach in allowing data gathering that has good face value and results that are similar and consistent with other findings expressed in the literature, a number of aspects are worth noting when evaluating the Methodology. In retrospect, the author was aware of some of the limitations however others became clear at the data analysis and presentation stages. The first of these concerns are that the same questionnaires were used in both the Qualitative and quantitative part of the research. In the Qualitative part of the research questions used were not adhered to rigidly in the focus groups, rather they were used as a source of discussion. They were constructed by expanding the research questions into various areas of interest as outlined in different parts of the literature. Even though this process worked in generating effective questions for discussion, it was only at the analysis stage that various missing potential questions were noted. Such questions could have been constructed if a focus group was carried out with a small sample of professionals prior to the development of the questionnaire encouraging discussion about topics of interest that were related to the research questions.

A discussion produced in such a focus group could potentially provide a large amount of questions and consequently inform and enrich the design of the quantitative section. The literature describes how focus groups of this type have been used successfully informing the design of questionnaires for use in interviews and focus groups (Ouimet, 2004). This process however was not possible during the design of the present research due to time constraints involving the need to carry out the data gathering within a limited time frame.

Nevertheless, the questions employed actually used as part of the interviews and focus groups did generate a large amount of useful data in addressing the fourth research question about pathways to best future practice. Questions about prevalence, value and type of Collaboration were not addressed as successfully. Considering the results section of this research it is clear

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that a lot of data related to the first research questions was made available from the results gathered from the questionnaire used in the survey rather than the interviews and focus group.

#### **5.7.1.1 Providing a definition of collaboration to participants**

Providing a definition of collaboration during the data gathering has different implications for the research. It may be argued that a definition presented to participants at the start of the interviews, focus group and survey could provide the opportunity for participants to have a general understanding of what type of collaboration the author was interested in researching and thus ensure that participants share the same general ideas of collaboration. For this to be plausible however, it would be necessary to provide a definition of collaboration which is inclusive of the three types of collaborative systems this research is concerned with. Due to the difficulty in accessing such a definition, the author omitted from providing the definition altogether.

#### **5.7.2 Participants and sampling**

Despite having a good coverage of the total population of professionals within the Children's public services in Malta (n=70/225), it is generally agreed that the larger the sample and the coverage of the research the greater the reliability of the data (Langdrige, 2005; Todd, 2004; Mertens, 2005). Larger samples also allow for more valid generalisations of the population. A larger sample in the quantitative part would have also allowed an application of more advanced statistical analysis and a search for relationships between variables. This process would have permitted a more complex analysis and understanding of the quantitative data, permitting inferences about relationships within the sample to be made. A possible tool that could also be utilised in the future that was not used in this research consists of distributing the questionnaire via email. This is likely to increase the number of respondents. Also, the participants' recruitment depended on whether they were available in person when the questionnaire was distributed by hand. Thus the sampling may be considered convenience sampling (Langdrige, 2005; Todd, 2004). A more systematic distribution could possibly be applied, particularly if a larger sample is included in the distribution.

It could also be argued that three interviews are relatively few considering the large number of support units for children in Malta however; there was difficulty in finding managers willing to participate in the research. Resistance in participating in the research was a result of

limited time availability from the side of the managers rather than a reluctance to engage with researcher. The limited time frame of the researcher was also an issue throughout the research, as the research itself forms part of the requirements of the final two years of a Doctoral Course.

### **5.7.3 Generalisability of findings**

The results of the research can be generalised to the rest of the population of professionals within the service. It is important however to keep in mind that the purpose and the methodology of the research is an exploratory one and that results achieved are indications rather than precise measures of Collaboration. Moreover, the small sample used needs to be considered as well as the specific services within which the sample was recruited. The research focus is on public services for children with SEN in Malta and does not include external services such as NGO's, private institutions and public social services for children. Some may argue that Collaboration has common elements across different services, and that the human dynamics involved in Collaborative work often recur in different settings. On this account, results can therefore be generalised to a certain degree. Nonetheless caution is always advised particularly in Qualitative findings where the culture of a place can shape and influence human constructs about Collaboration and does have an impact on individual studies that might not take place on others.

### **5.7.4 Reliability of data**

The data obtained in this research has good reliability as active measures were taken to prevent error in the methodology and analysis of the research. Some issues may arise however when considering the predictive validity of the research results. Predictive reliability consists of having data that is consistent in demonstrating similar results over a longitudinal time frame (Mertens, 2005). Due to the rapid change in the structure and organisational culture of the children's services in Malta, it is likely that the culture of services will change over time. Professionals in Malta are frequently being assigned to new roles and teams to work with. In responding to the research question about pathways to best future practice for example, participants are likely to have different opinions in five years time, since the need and challenges of the service are likely to be subject to change. For example, the type of Collaboration described in the literature taking place in Malta (Zammit et al., 2004) takes a

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different structure from the type that has been reported in this research, despite also having common elements.

Reliability of the research also depends on the assumption that participants answered the questions presented in an honest and non-biased manner. As the research finding also suggest (4.3.7.1), in professional organisations Collaboration between professionals is generally encouraged and forms part of the expectations of managers and teams. Participants often had strong opinions about Collaboration and some could argue that participants were thus encouraged to adopt certain stances in responding to the questions. Such stances could possibly not reflect true opinions and applications in the real world. Participants could also be influenced by the psychological pressures to comply with groups (Janis, 1972) and for instance, present a much more positive picture of Collaboration and teams than they really believe in.

Possible issues usually exist in Qualitative research dealing with the reliability of the data analysis. A possible argument is that researchers may be biased in analysing data, selecting themes that are informed by personal judgements rather than informed decisions. To avoid this, and increase inter-rater reliability (Willig, 2008), the author assigned a colleague to carry out a section of the thematic analysis of the Qualitative data. Once this was done, a check was carried out to confirm that the themes being selected were consistently identifying themes of similar focus over the different sections in the data set. Thus, once this was done, it became possible to argue that the themes being identified in the data were selected due to face validity and significance, rather than the subjective orientation and possible bias of the author.

### **5.7.5 Researcher bias**

Researcher bias could have possible consequence in different sections of the research and not only in the data analysis stage. Researcher bias could affect choices made in literature reviews, theoretical approaches and also data collection methods. In line with constructionist thought (Burr, 1995), the author believes that it is impossible to place constructs and personal beliefs aside completely when undertaking research as humans are bound to construct knowledge in line with their own personal core beliefs and subjective experience. The author

however maintained awareness of this researcher-research interaction and took an active role in maintaining objectivity and reflexivity as much as possible.

The construction of the questionnaire took place after carefully reviewing the meaning of the research questions and considering international literature on Collaboration. This contrasts with constructing questions which address personal interests within a research field. In interviews and the focus group the author had minimal involvement in the dialogue process, often allowing the participants to participate and lead the discussion independently, as long as the focus on Collaborative work was maintained.

The author clearly positively values Collaborative work and prior to the research had a number of ideas about the subject of Collaboration. Over the course of the research these initial ideas were reshaped by reflexivity on the research methodology and findings including the epistemological stance of the author. The author's epistemological positions changed prior to the research design and data gathering, since the author learnt of epistemologies that matched his own beliefs and approaches to knowledge and experience more closely. The first hand experiences of the challenges prevalent in collaboration and the difficulties related to some aspects of collaborative practice allowed the author to reflect on his own experiences of collaboration and how these influenced the choice of the research questions and the development of the questionnaires used in the data gathering.

Despite maintaining a positive view of collaboration throughout and toward the end of the research, a critical approach adopted by the author permitted reflection and development of ideas which the author used in interviews and focus groups. This also took the form of reflecting on the feedback given by his professional research tutor. This was considered in light of the difficulties and challenges experienced in the research and data gathering. The author hopes that this process suggests that the research influenced the researcher and not vice-versa.

#### **5.7.6 Ethical considerations**

Having a research sample consisting of professionals makes ethical considerations more straightforward than doing research with other samples such as children and vulnerable groups. Gaining consent for the research was relatively easy and the research itself was



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encouraged by managers within services. The main consideration needed in this research concerns the anonymity of professionals and units within the services. Having each service and professional anonymised however meant that the results could only be presented in a particular way without describing potentially unique results for specific services. Feeding back the results will be carried out without making comparisons between different groups of professionals and referring to the sample of the research as a whole.

## **5.8 Future research – Considerations**

This research could be used to provide ideas and data for future research which is needed to continue to establish evidence which can inform the practice of Collaboration. In this research, not all results of the Qualitative data analysis could be discussed completely, given the limited word count requirements of the dissertation. Other potential researchers on Collaboration are encouraged to use the results presented to inform their own practice. A number of considerations can be made as described below.

### **5.8.1 Use of present research in future research**

As an exploratory research, this research could possibly inform potential future research of the current scenario of Collaboration and provide the basis for further evaluation. It explores the prevalence, type and reported value of Collaborative work by professionals within the services. Moreover, it provides different accounts of professionals' ideas on the pathways to best future practice. This information is a resource for future research and the author hopes that it can be referred to in the future. Rich data on Collaborative work is also available through this research. It is important to consider however that the sample used in the research does not cover Collaboration taking place in services outside the remit of the research, such as NGO's and non-profit organisations. These are known to have an important role in providing support to children with SEN in Malta. To have a study focusing on the overall national status of Collaboration of the small country of Malta would require the inclusion of such services and this cannot be obtained from the present research. Indicators of possible Collaboration external to the services of this study however can be established to inform future research covering larger samples. The quantitative data in particular is less applicable, focusing on a limited number of participants in specific geographical areas.

### **5.8.2 Potential future research**

Future research is needed covering all the services for children with SEN and placing a particular focus on how Collaboration takes place across and within different services, including those in Healthcare and Education. Larger scale quantitative studies providing inferential statistical analysis could cover larger population samples. Evaluative research could also take into consideration the efficacy of different Collaborative working groups within the services and possibly evaluate them in light of established models or similar working groups that are functioning overseas. Research of this sort could also affect changes between professionals particularly if action oriented methodologies are adopted. Action research can serve to bring about change and pilot studies of Collaborative groups, such as the VISTA (Giangreco, Edelman, Luiselli, & MacFarland, 1996; Giangreco et al., 1999; Giangreco et al., 1998) could be tried and tested within a local context.

### **5.9 Implications for Educational Psychology**

This research points to an area that is important in educational psychology. It has been argued in previous research on Collaborative work (Farrell, 2006) that the EPs can make unique contributions to Collaborative work by being able to bridge the school, professionals and the community through Collaboration and thus make connections between school based issues and those facing children and their families in the communities. To reinforce the point that EPs can contribute to effective Collaboration, the author would also argue that EPs are empowered with tools to understand what works best in Collaboration and be able to consider the various systems that come into the interplay of successful Collaborative practices. Such tools consist but are not limited to the ability to refer to the extensive literature on the subject including that which is informed by the available theory and evidence. Some Educational Psychologists (EPs) have strongly argued for the need for EPs to engage themselves in this kind of work and see how 'teamwork' can be enhanced and developed by psychology (Dennison, 2006).

Farrell (2006) suggests that the EP is regarded as having a detailed knowledge of different educational and community contexts and of the different demands of such contexts. A number of available models for collaboration have already been described in this dissertation (e.g. the Transdisciplinary model, VISTA and COACH Giangreco, et al, 1998) and a number

of frameworks have been developed in the last decade that can support the development of effective collaborative practices between different professionals (Boyle, 2008). The author hopes that this research will encourage EPs to use such frameworks that can ultimately create and promote more effective collaboration between professionals. The results of this research show that there are various specific places in which EPs can start to apply such frameworks (particularly If they choose to work in a local setting) and in so doing facilitate systems to overcome the challenges and barriers that exist to provide a better service for families and children. These areas include but are not limited to: overcoming the presence of closed information, overcoming miscommunication and territorialism and promoting the knowledge base and resources needed to collaborate effectively within a context of shared values and trust.

This research contributes to providing such tools to educational and child psychologist working in services for children with SEN. It can form part of the evidence and provide an invitation to bridge systems theory to collaborative working systems with the intention of understanding and improving them.

## **6.0 Concluding remark**

The author is confident that the research has successfully answered the research questions and explored Collaborative work between different professionals in public services for children with SEN in Malta. The results have shown that Collaborative work takes place in Malta, and that most professionals report and agree that it is prevalent within the services. Collaboration does not take place between some services for children. On the other hand each participant reported valuing Collaborative work and believing that others value Collaborative work, including managers within services. Collaboration in Malta is mostly unstructured, has elements of 'Interdisciplinary' Collaboration and is often characterised by sharing of information and sometimes also resources and skills. Professionals believe that there are various pathways to which Collaboration can take place most effectively. The approach adopted to improve Collaboration needs to address different needs and overcome a number of challenges. A number of positive examples of Collaborative work have already been established and many opportunities for development exist, facilitating the route to possibly apply specific models of Collaboration that can target the culturally unique structure of the children's services. The information obtained through this research, has a methodology that

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has strengths as well as potential issues. These can be considered in further research which might lead to an added understanding of Collaborative work between different professionals in public services for children with SEN in Malta.

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## 8.0 Appendices

### Appendix 8. 1 Keywords/search terms used in literature review

| Keywords/ Search Terms / Statements  | Medium/ Database/ Website   | Relevant Research Question | Search Date                       |
|--|---|----------------------------|-----------------------------------|
| Multidisciplinary <i>AND/OR</i> Interdisciplinary <i>AND/OR</i> Transdisciplinary ( <i>hyphenated and unhyphenated</i> ) <i>AND/OR</i> Collaborative <i>AND/OR</i> joint up <i>AND/OR</i> multiagency <i>AND/OR</i> team <i>AND/OR</i> Collaboration + <b>work</b>   | ASA, pA, pI, ERIC, google.com, meef.gov.mt (policies), UEL library catalogue, UoM Library catalogue | (i), (ii), (iii), (iv).    | November 16, 2010; March 11, 2011 |
| <b>working together</b> <i>AND/OR</i> <b>Collaboration</b> <i>AND/OR</i> <b>teamwork</b> <i>AND/OR</i> <b>teams</b> <i>AND/OR</i> <b>group work</b> ( in services for children with special educational needs )  | ASA, pA, pI, ERIC, google.com, meef.gov.mt (policies), UEL library catalogue, UoM Library catalogue | (i), (ii), (iii), (iv).    | November 16, 2010; March 11, 2011 |
| Multiprofessional <i>AND/OR</i> Interprofessional <i>AND/OR</i> Transprofessional ( <i>hyphenated and unhyphenated</i> ) <i>AND/OR</i> Collaborative <i>AND/OR</i> joint up <i>AND/OR</i> multiagency <i>AND/OR</i> team + <b>work</b> ( in services for children with special educational needs )   | ASA, pA, pI, ERIC google.com, meef.gov.mt (policies), UEL library catalogue, UoM Library catalogue  | (i), (ii), (iii), (iv).    | November 18, 2010; March 23, 2011 |
| Psychology of <b>effective Collaboration</b> in Multidisciplinary <i>AND/OR</i> Interdisciplinary <i>AND/OR</i> Transdisciplinary ( <i>hyphenated and unhyphenated</i> ) <i>AND/OR</i> Collaborative <i>AND/OR</i> joint up <i>AND/OR</i> multiagency <i>AND/OR</i> teams  | ASA, pA, pI, ERIC   | (i), (ii), (iii), (iv).    | November 18, 2010; March 11, 2011 |
| <b>prevalence</b> of Teamwork <i>AND/OR</i> Collaborative work in multi professional settings <i>AND/OR</i> Multidisciplinary <i>AND/OR</i> Interdisciplinary <i>AND/OR</i> Transdisciplinary ( <i>hyphenated and unhyphenated</i> ) <i>AND/OR</i> Collaborative <i>AND/OR</i> joint up <i>AND/OR</i> multiagency teams  | ASA, pA, pI, ERIC   | (i)                        | November 18, 2010; March 23, 2011 |
| Multidisciplinary <i>AND/OR</i> Interdisciplinary <i>AND/OR</i> Transdisciplinary ( <i>hyphenated and unhyphenated</i> ) <i>AND/OR</i> Collaborative <i>AND/OR</i> joint up <i>AND/OR</i> multiagency <i>AND/OR</i> team <i>AND/OR</i> Collaboration + <b>Prevalence</b> <i>AND/OR</i> <b>Distribution</b> <i>AND/OR</i> <b>Frequency</b>  | ASA, pA, pI, ERIC   | (i)                        | November 19, 2010; March 11, 2011 |
| <b>purported value</b> <i>AND/OR</i> <b>reported value</b> <i>AND/OR</i> <b>professional's experience</b> <i>AND/OR</i> <b>appreciation</b> <i>AND/OR</i> <b>appraisal of</b> Multidisciplinary <i>AND/OR</i> Interdisciplinary <i>AND/OR</i> Transdisciplinary ( <i>hyphenated and unhyphenated</i> ) <i>AND/OR</i> Collaborative <i>AND/OR</i> joint up multiagency <i>AND/OR</i> team + <b>work</b> | ASA, pA, pI, ERIC   | (ii)                       | November 20, 2010; March 23, 2011 |
| <b>models</b> <i>AND/OR</i> <b>type</b> <i>AND/OR</i> <b>dynamics</b> <i>AND/OR</i> <b>methodologies</b> for Multidisciplinary <i>AND/OR</i> Interdisciplinary <i>AND/OR</i> Transdisciplinary ( <i>hyphenated and unhyphenated</i> ) <i>AND/OR</i> Collaborative <i>AND/OR</i> joint up multiagency <i>AND/OR</i> team + <b>work</b>  | ASA, pA, pI, ERIC   | (iii), (iv)                | November 19, 2010; March 11, 2011 |
| <b>best practises</b> <i>AND/OR</i> <b>outcomes</b> <i>AND/OR</i>  | ASA, pA, pI, ERIC,  | (iii), (iv)                | January 22,                       |

|  |   |                            |  |
|--|---|----------------------------|--|
| <b>future needs, evaluation AND/OR consultations</b><br><b>AND/OR history AND/OR needs AND/OR</b><br><b>debates AND/OR a critique AND/OR criticising</b><br><b>AND/OR discussions about AND/OR</b><br><b>perspectives on AND/OR</b> of Multidisciplinary<br>AND/OR Interdisciplinary AND/OR<br>Transdisciplinary ( <i>hyphenated and unhyphenated</i> )<br>AND/OR Collaborative AND/OR joint up<br>multiagency AND/OR team + <b>work</b> | google.com,<br>meef.gov.mt (policies),<br>UEL library catalogue,<br>UoM Library catalogue                       |                            | 2011; March<br>23, 2011                |
| Multidisciplinary AND/OR Interdisciplinary<br>AND/OR Transdisciplinary ( <i>hyphenated and</i><br><i>unhyphenated</i> ) AND/OR Collaborative AND/OR<br>joint up AND/OR multiagency AND/OR team +<br><b>Malta AND/OR U.K. AND/OR Worldwide</b><br>AND/OR <b>Europe</b>  | ASA, pA, pI, ERIC,<br>google.com,<br>meef.gov.mt (policies),<br>UEL library catalogue,<br>UoM Library catalogue | (i), (ii), (iii),<br>(iv). | January 22,<br>2011; March<br>23, 2011 |

*Details of Systematic Search including search terms, mediums, relevant research questions and dates respectively.*

**Appendix 8.1 Online databases used for searches**

| Name (Abbreviation)                                 | Databases' -Websites' adapted information regarding database   |
|---|--|
| <i>Academic Search Complete (ASA)</i>               | The world's most valuable and comprehensive scholarly, multi-disciplinary full-text database, with more than 8,500 full-text periodicals, including more than 7,300 peer-reviewed journals. In addition to full text, this database offers indexing and abstracts for more than 12,500 journals and a total of more than 13,200 publications including monographs, reports, conference proceedings, etc.                       |
| <i>PsycARTICLES (pA)</i>                            | From the American Psychological Association (APA), is a definitive source of full-text, peer-reviewed scholarly and scientific articles in psychology. The database contains over 150,000 articles from nearly 80 journals published by the APA, and its imprint the Educational Publishing Foundation (EPF), and from allied organizations including the Canadian Psychology Association and Hogrefe Publishing Group.        |
| <i>PsychINFO (pI)</i>                               | The database, American Psychological Association's (APA) renowned resource for abstracts of scholarly journal articles, book chapters, books, and dissertations, is the largest resource devoted to peer-reviewed literature in behavioural science and mental health. It contains over 3 million records and summaries dating as far back as the 1600s with one of the highest DOI matching rates in the publishing industry. |
| <i>Education Resource Information Center (ERIC)</i> | The Education Resource Information Center contains more than 1.3 million records and links to more than 323,000 full-text documents dating back to 1966.   |
| <i>Cochrane Internet Library</i>                    | The Cochrane Collaboration is an international, independent, not-for-profit organisation of over 28,000 contributors from more than 100 countries, dedicated to making up-to-date, accurate information about the effects of health care readily available worldwide   |

(Adapted from EBSCOHost Databases from <http://web.ebscohost.com> and <http://www.thecochranelibrary.com/view/0/index.html> )

**Appendix 8. 2 The research methodology timeline**

| <b>Research Methodology Time-Line</b>                                       |                            |  |
|---|----------------------------|--|
| <b>Methodology Section</b>  | <b>Month of Completion</b> | <b>Comments</b>  |
| Proposal First Submission   | December 2010              | <i>This was a first attempt and the focus of the research was initially to establish the prevalence of Transdisciplinary work taking place. A Transdisciplinary trial was also part of methodology</i>     |
| Proposal Second Submission  | January 2011               | <i>Proposal was updated to include a more holistic focus of Collaborative working types and a more structured methodology</i>  |
| Proposal accepted by University   | March 2011                 | <i>Proposal was accepted following some minor adjustments</i>  |
| Ethical Consent Granted by University                                       | April 2011                 | <i>Ethical clearance was given once the author confirmed giving a chance to participants to modify their input if they felt the need to</i>  |
| Ethical Consent Granted by Ministry of Education, Employment and the Family | June 2011                  | <i>Ethical Consent was given without any alterations needed</i>  |
| Ethical Consent Granted by Ministry of Health                               | July 2011                  | <i>Ethical Consent was given without any alterations needed</i>  |
| Research Epistemology established as Social Constructionism                 | September 2011             | <i>Author felt attracted to Constructionism as a framework for understanding the roots of knowledge and how this was potentially applicable to the data analysis, particularly in the Qualitative part</i> |
| Construction of Survey Questionnaire  | April 2011                 | <i>Statements were chosen from the literature following a systematic literature review and applied as items in the literature review.</i>  |
| Pilot Survey Questionnaire Distribution (n=10)                              | April 2011                 | <i>Successful response including feedback and recommendations</i>  |
| Survey Questionnaire Update   | April 2011                 | <i>Updated, including small modifications based on pilot study response</i>  |
| Construction of Interview, Focus Group Questionnaire                        | April 2011                 | <i>Main research questions expanded into 'sub questions'</i>   |
| Distribution of Final Questionnaire (n=70)                                  | April 2011                 | <i>Professionals in Health and Education Departments</i>   |
| Questionnaires Collected  | June 2011                  | <i>Within a week questionnaires collected, box was placed in each room to allow for anonymity</i>  |
| Interviewees Contacted by email, telephone calls                            | June 2011                  | <i>Service managers/ Unit coordinators were happy to participate in the interviews</i>   |
| First Interviews held with Service Manager/Unit Coordinators (N=1)          | April 2011                 | <i>Interviews recorded and transcribed. Following transcription, transcripts were given to interviewees and approval was gained for use in research</i>  |

|   |               |  |
|---|---------------|--|
| Research Epistemology re-established as Pragmatism                            |               | <i>Social Constructionism was dropped as epistemological paradigm and Pragmatism adopted as it reflected the authors worlds view and rationale more accurately</i> |
| Second and Third Interviews held with Service Manager/Unit (N=2) Coordinators | August 2011   | <i>Interviews recorded and transcribed. Following transcription, transcripts were given to interviewees and approval was gained for use in research</i>            |
| Focus Group carried out (n=6)   | January 2012  | <i>Good response and rich data gathered. Participants' described the focus group as a 'growth process.'</i>  |
| Quantitative Data Analysed  | February 2012 | <i>Use of Excel, median, mode and mean</i>   |
| Qualitative Data Analysed   | February 2012 | <i>Use of NVIVO QSR software for transcription, three stages of coding</i>   |

**Appendix 8.3 – Questionnaire used in Qualitative section of research****Open Ended Questionnaire referred to during Interviews and Focus Group**

- 1. How much Collaborative work is currently taking place in this service/unit?*
- 2. How often do you think the professionals in this service work Collaboratively taking into account all their time spent working?*
- 3. With which other professionals does Collaborative work take place?*
- 4. Are there professionals from external agencies to the one you are working in involved?*
- 5. Do you value Collaborative work?*
- 6. In your opinion, do other agencies value Collaborative work?*
- 7. What aspects of Collaborative work do you value?*
- 8. Do you think the current work setting supports Collaborative work?*
- 9. What is needed in the current work setting for Collaborative work to function?*
- 10. What types of Collaborative work has worked so far?*
- 11. What has made Collaborative practices work well/or not?*
- 12. How would you like Collaborative work to develop in the future?*
- 13. How would you describe the ideal Collaborative work?*
- 14. What do you think needs to be changed for the ideal Collaborative work to take place?*
- 15. What are the benefits of Collaborative work?*
- 16. What are the challenges?*
- 17. What do you think is the most important thing for Collaborative work to take place effectively?*

**Appendix 8.3.1 – Focus group sheet used in recruiting participants for focus groups****Collaborative work – A brief Focus Group****Interest in participating in focus group**

Would you be interested in participating in a focus group about Collaborative work (should last not more than 40 minutes)? **Yes** ☐ – **No** ☐

If **Yes** please include your contact phone number \_\_\_\_\_ and/or email address \_\_\_\_\_

**Please note that your contact information will be dealt with the strictest confidence and will only be used for focus group purposes.**

Please Post this completed paper slip in the shoe box provided by the author

Thank you very much for your time


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Paul Attard Baldacchino – School Psychological Services

*paulattardb@gmail.com*



## Appendix 8.4 – Questionnaire used in quantitative section of research

| Collaborative Work – A brief Response Form   |  |
|--|--|
|  | <p>Researcher:<br/><b>Paul Attard Baldacchino</b></p> <p><i>Doctorate in Educational and<br/>Child Psychology at the University<br/>of East London</i></p> <p><i>paulattardb@gmail.com</i></p> |
| <div>Won't take you more<br/>than 8 minutes to<br/>complete! 😊</div>               |  |
| 1/5  |  |

-

This research focuses on Collaborative work between professionals from different backgrounds working within the public services for children with special educational needs in Malta.

The information given in this questionnaire will be treated with the Strictest Confidence.

This research has been approved by the University of East London Ethics and Research Committee.

It has also been approved by the Department for Research and Development, at the Ministry of Education, Employment and the Family  
and

Department for Research, at the Ministry of Health and the Elderly

There are NO risks in participating in this research.

If you would like more information on this research, please do not hesitate to speak to the researcher personally, or contact him on

paulattardb@gmail.com

**1. Prevalence of Collaborative work**

How many hours have you spent working with one or more professionals different to your professional background in the following time periods?

(Please mark the corresponding ☐ below indicating hour ranges)

**In the last three Months (Approximately):**

0 ☐    1-5 ☐    5-10 ☐    10-20 ☐    20-30 ☐    30-40 ☐    (Hours)

**In the last month (Approximately):**

0 ☐    1-5 ☐    5-10 ☐    10-20 ☐    20-30 ☐    30-40 ☐    (Hours)

**In the last week (Approximately):**

0 ☐    1-5 ☐    5-10 ☐    10-20 ☐    20-30 ☐    30-40 ☐    (Hours)

**2. Professional Backgrounds**

Please mark the box ☐ next to the professional types with which you have worked with within last six months. Trainees also count. **In the last six months I have worked with:**

|  |  |
|--|--|
| <input type="checkbox"/> <i>Inclusion Coordinators</i>                                     | <input type="checkbox"/> <i>School Counsellors</i>                           |
| <input type="checkbox"/> <i>School Social workers</i>                                      | <input type="checkbox"/> <i>Prim. / Sec. School Teachers</i>                 |
| <input type="checkbox"/> <i>Medical Doctors (e.g. GPs, paediatricians, psychiatrists)</i>  | <input type="checkbox"/> <i>Peripatetic Teachers (including Home Tutors)</i> |
| <input type="checkbox"/> <i>Psychologists (including Education, Clinical, Counselling)</i> | <input type="checkbox"/> <i>Guidance Teachers/ Prefects of Discipline</i>    |
| <input type="checkbox"/> <i>School Career Advisors</i>                                     | <input type="checkbox"/> <i>Early Intervention Specialists</i>               |
| <input type="checkbox"/> <i>Psychotherapists</i>   | <input type="checkbox"/> <i>Occupational Therapists</i>                      |
| <input type="checkbox"/> <i>Learning Support Assistants</i>                                | <input type="checkbox"/> <i>Autism Support Teachers</i>                      |
| <input type="checkbox"/> <i>Head Teachers / Assistant-Head Teachers, Principals</i>        | <input type="checkbox"/> <i>Learning Support Zones Teachers</i>              |
| <input type="checkbox"/> <i>Service Managers</i>   | <input type="checkbox"/> <i>School Nurses</i>                                |
| <input type="checkbox"/> <i>Resource Centres Teachers</i>                                  | <input type="checkbox"/> <i>Anti Bullying Teachers</i>                       |
| <input type="checkbox"/> <i>Speech and Language/ Communication Therapists</i>              | <input type="checkbox"/> <i>Professionals from external agencies/centres</i> |
| <input type="checkbox"/> <i>Child Safety Team Members</i>                                  | <input type="checkbox"/> <i>Dyslexia Specialists</i>                         |
| <input type="checkbox"/> <i>SEBD Specialists</i>   | <input type="checkbox"/> <i>Others</i>                                       |

### 3. Type of Collaborative work

The following are some different work examples. On a scale from 1 to 5 please rate how frequently you have engaged in that particular type of work with different professionals in the last three months.

- 1= *I never engaged in this type of work*  
 2= *I rarely engaged in this type of work*  
 3= *I occasionally engaged in this type of work*  
 4= *I frequently engaged in this type of work*  
 5 = *I very Frequently engaged in this type of work*

1. working independently on a project/casework without other different professionals being involved.

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

2. working independently on a project/casework which is also being worked on by another one or more different professionals separately.

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

3. working Collaboratively on the same project/casework with one or more different professionals who has separate goals.

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

4. working Collaboratively with one or more professionals where effective communication takes place throughout the whole project/casework

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

5. working Collaboratively with another one or more professionals, openly sharing information and skills coming from each professional's background but maintaining clearly defined roles and boundaries to work procedures.

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

6. working in such a way that professional skills and tools needed are transferred from one professional of a different background to another, limiting the need for different professionals to be on the same case

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

7. working with one or more professionals in such a way that a unified approach

is created using a shared vision and identical goal.

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

#### 4. Professionals' Value of Collaborative work

The following are the same scenarios as above, however this time , on a scale from 1 to 5 please rate how much you currently **value (appreciate)** this kind of work and would wish to include it as part of your work.

- 1= I do not value this kind of work*  
*2= I slightly value this kind of work*  
*3= I moderately value this kind of work*  
*4= I highly value this kind of work*  
*5 = I very highly value this kind of work*

1. working independently on project/casework without other professionals being involved.

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

2. working independently on a project/casework which is also being worked on by other one or more professionals from a different professional background independently.

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

3. working Collaboratively with another one or more professionals who has separate goals

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

4. working Collaboratively with one or more professional where effective communication takes place throughout the whole project/casework

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

5. working Collaboratively with another one or more professionals, openly sharing information and skills coming from each professional's background but maintaining clearly defined roles and boundaries

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

6. working in such a way that professional skills and tools needed are transferred from one professional of a different background to another, limiting the need for different professionals to be on the same case

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

7. working with another one or more professionals in such a way that a unified approach is created using a shared vision and identical goal.

|   |   |   |   |   |
|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|

#### 5. Additional Information (optional)

Is there anything you will like to comment about or any additional information that you would like to include:

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Please post the completed questionnaire in the shoe box provided or leave it at the place designated by the researcher.

**Thank you so much for your time. Much appreciated 😊**

**The End**

## Appendix 8.5 – Pilot questionnaire used in quantitative section of research

|   |  |
|---|--|
| <div data-bbox="220 421 1284 600"><h2>Collaborative Work – A brief Response Form</h2></div> <div data-bbox="300 689 874 1102"></div> <div data-bbox="284 1608 750 1809"><p><b>Won't take you more than 8 minutes to complete! 😊</b></p></div> <div data-bbox="347 1848 386 1877"><p>1/5</p></div> | <div data-bbox="973 638 1324 772"><h1>PILOT</h1></div> <div data-bbox="981 1272 1372 1668"><p>Researcher:<br/><b>Paul Attard Baldacchino</b></p><p><i>Doctorate in Educational and Child Psychology at the University of East London</i></p><p><i>paulattardb@gmail.com</i></p></div> <div data-bbox="1316 1899 1356 1937"></div> |
|---|--|

**This research focuses on Collaborative work between professionals from different backgrounds working within the public services for children with special educational needs in Malta.**

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**It has also been approved by the Department for Research and Development, at the Ministry of Education, Employment and the Family**

**If you would like more information on this research, please do not hesitate to speak to the researcher personally, or contact him on [paulattardb@gmail.com](mailto:paulattardb@gmail.com)**



**1. Prevalence of Collaborative work**

**How many hours have you spent working with one or more professionals different to your professional background in the following time periods?**

**In the last three Months (Approximately): (Hours)**

0 ☐      1-5 ☐      5-10 ☐      10-20 ☐      20-30 ☐      30-40 ☐

**In the last month (Approximately):**

0 ☐      1-5 ☐      5-10 ☐      10-20 ☐      20-30 ☐      30-40 ☐

**In the last week (Approximately):**

0 ☐      1-5 ☐      5-10 ☐      10-20 ☐      20-30 ☐      30-40 ☐      -

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**2. Professional Backgrounds**

**Professional types with which you have worked with within last six months. Trainees also count.**

|  |  |
|--|--|
| <input type="checkbox"/> <i>Inclusion Coordinators</i>                                     | <input type="checkbox"/> <i>School Counsellors</i>                           |
| <input type="checkbox"/> <i>School Social workers</i>                                      | <input type="checkbox"/> <i>Dyslexia Specialists</i>                         |
| <input type="checkbox"/> <i>Medical Doctors (e.g. GPs, paediatricians, psychiatrists)</i>  | <input type="checkbox"/> <i>Peripatetic Teachers (including Home Tutors)</i> |
| <input type="checkbox"/> <i>Psychologists (including Education, Clinical, Counselling)</i> | <input type="checkbox"/> <i>Guidance Teachers/ Prefects of Discipline</i>    |
| <input type="checkbox"/> <i>School Career Advisors</i>                                     | <input type="checkbox"/> <i>Early Intervention Specialists</i>               |
| <input type="checkbox"/> <i>Learning Support Assistants</i>                                | <input type="checkbox"/> <i>Autism Support Teachers</i>                      |
| <input type="checkbox"/> <i>Head Teachers / Assistant-Head Teachers, Principals</i>        | <input type="checkbox"/> <i>Others</i>                                       |
| <input type="checkbox"/> <i>Service Managers</i>   | <input type="checkbox"/> <i>School Nurses</i>                                |
| <input type="checkbox"/> <i>Child Safety Team Members</i>                                  | <input type="checkbox"/> <i>Anti Bullying Teachers</i>                       |
| <input type="checkbox"/> <i>Speech and Language/ Communication Therapists</i>              | <input type="checkbox"/> <i>Professionals from external agencies/centres</i> |
| <input type="checkbox"/> <i>Child Safety Team Members</i>                                  | <input type="checkbox"/> <i>Dyslexia Specialists</i>                         |

**3. Type of Collaborative work**

**Please rate how frequently you have engaged in that particular type of work with different professionals in the last three months.**

- 1= *I never engaged in this type of work*  
 2= *I rarely engaged in this type of work*  
 3= *I occasionally engaged in this type of work*  
 4= *I frequently engaged in this type of work*  
 5= *I very Frequently engaged in this type of work*

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. working independently on a project/casework without other different professionals being involved.   | 1 | 2 | 3 | 4 | 5 |
| 2. working independently on a project/casework which is also being worked on by another one or more different professionals separately.  | 1 | 2 | 3 | 4 | 5 |
| 3. working Collaboratively on the same project/casework with one or more different professionals who has separate goals.   | 1 | 2 | 3 | 4 | 5 |
| 4. working Collaboratively with one or more professionals where effective communication takes place throughout the whole project/casework  | 1 | 2 | 3 | 4 | 5 |
| 5. working Collaboratively with another one or more professionals, openly sharing information and skills coming from each professional's background but maintaining clearly defined roles and boundaries to work procedures. | 1 | 2 | 3 | 4 | 5 |
| 6. working in such a way that professional skills and tools needed are transferred from one professional of a different background to another, limiting the need for different professionals to be on the same case          | 1 | 2 | 3 | 4 | 5 |
| 7. working with one or more professionals in such a way that a unified approach is created using a shared vision and identical goals   | 1 | 2 | 3 | 4 | 5 |

#### 4. Professionals' Value of Collaborative work

please rate how much you currently value (appreciate) this kind of work and would wish to include it as part of your work.

- |  |
|--|
| <p>1= I do not value this kind of work</p> <p>2= I slightly value this kind of work</p> <p>3= I moderately value this kind of work</p> <p>4= I highly value this kind of work</p> <p>5 = I very highly value this kind of work</p> |
|--|

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1. working independently on project/casework without other professionals being involved.  | 1 | 2 | 3 | 4 | 5 |
| 2. working independently on a project/casework which is also being worked on by other one or more professionals from a different professional background independently.   | 1 | 2 | 3 | 4 | 5 |
| 3. working Collaboratively with another one or more professionals who has separate goals  | 1 | 2 | 3 | 4 | 5 |
| 4. working Collaboratively with one or more professional where effective communication takes place throughout the whole project/casework  | 1 | 2 | 3 | 4 | 5 |
| 5. working Collaboratively with another one or more professionals, openly sharing information and skills coming from each professional's background but maintaining clearly defined roles and boundaries            | 1 | 2 | 3 | 4 | 5 |
| 6. working in such a way that professional skills and tools needed are transferred from one professional of a different background to another, limiting the need for different professionals to be on the same case | 1 | 2 | 3 | 4 | 5 |
| 7. working with another one or more professionals in such a way that a unified approach is created using a shared vision and identical goals  | 1 | 2 | 3 | 4 | 5 |

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**5. Additional Information (optional)**

**Is there anything you will like to comment about or any additional information that you would like to include:**

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**6. Do you have any comments about the structure and presentation of the questionnaire?**

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**Appendix 8.6 – Pragmatism continued - an epistemological approach to understanding the nature of knowledge.**

The epistemology adopted in a research project has a central role in determining what research questions are formulated, what type of data we collect and what method we use to collect it. It also consequently determines much of the way interpretation takes place and how our understanding about the research problem develops. Research questions and adopted methodologies most often imply that the respective authors have adopted particular world views (Hesse-Biber, 2010). In the case of this research, the author's Pragmatist epistemological approach is made clear and referred to at different stages in the report.

Pragmatism can be defined as a school of thought that emerged primarily from the writings of three American thinkers: the natural scientist and philosopher Charles Sanders Peirce [1839-19], the psychologist and philosopher William James [1842-1910], and the philosopher, psychologist, and educationalist John Dewey [1859-1952] (Gert & Nicholas, 2003). The approach used in this research is closest to that recommended by John Dewey. Dewey deals with the acquisition of knowledge within a framework of philosophy of action and explains that actions are the most basic and central category for the production of knowledge. For Dewey, there is a continuous connection between knowledge and action and this connection is especially relevant to those approaching questions about knowledge primarily from a practical standpoint. Such people could be educators, researchers and psychologists (Gert and Nicholas 2003). Like Coughlan (1975) and Gert and Nicholas (2003) the author does not believe that pragmatism provides the final answers to the acquisition of knowledge. Nevertheless, in research such as this one, which concerns itself with human action and more specifically Collaboration among different professionals working in services for children with SEN, such a framework could prove to be very useful in different ways.

Knowledge, to Dewey was not separate from action and involved a combination of reflection and action that leads to knowledge. Doing, undergoing doing and the mental reflection upon the undergoing gives rise to cognitive experiences allowing knowledge (1939). In Dewey's own words: "To run against a hard and painful stone is not in itself . . . an act of knowing; but if running into a hard and painful thing is an outcome predicted after inspection of data and elaboration of a hypothesis, then the hardness and the painful bruise which define the thing as stone also constitute it emphatically as an object of knowledge." This may be hard to

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understand at first, but it makes much sense when one thinks of how the acquisition of knowledge is not something that happens independently in the human mind but always involves some kind of human experience or process. Knowing and cognitive experiences are themselves actions and literally something we do. Therefore, knowledge can never be separated from actions (Gert & Nicholas, 2003).

### **Pragmatism – A move away from epistemological dualism**

Dewey's epistemology concerns also the question of the objectivity of knowledge. Post-positivists and realists argue that true knowledge should be objective and be as close to as possible to an accurate description of things that are external to our mental experience in the physical world (Onwuegbuzie, Johnson, & Collins, 2009). Constructionists and Constructivists on the other hand, argue that it is ultimately the human mind that constructs knowledge, either through a process of language communication or independent mental construction (Halling & Lawrence, 1999). These two opposing views create a dualism of thought where we have objectivism one side and subjectivism on the other.

Critical theory to some degree, successfully integrated the dualism of objectivity and subjectivity, in arguing for the importance of middle-way in this dualism, thus combining the later with the former. The recent critical realist theory however seems to ignore the importance of action in the process of knowledge creation and redefinition. Conveniently, Dewey finds a central place for action, unlike other philosophical schools at the time which were functioning from a dualism that he felt was causing extreme stances in the development of psychology and the understanding of human behaviour. To refer to an interesting example, with reference to the development of positivism and the laterally influenced behaviourist psychology we find the following note. Its application was made in reference to biological science and the concept of the neurological reflex arch which was used to explain human psychological phenomena occurred at the time. Gert and Nicholas (2003) describe Dewey's insight as following:

The "new psychology" was still dualistic. Dewey argued that the older dualism between sensation and idea "is repeated in the current dualism of peripheral and central structures and functions," while the older dualism of body and soul "finds a distinct echo in the current dualism of stimulus and response" (1896, 96). The only way to overcome these dualistic views is by not starting from disjointed parts (stimulus, processing, response) and then to ask how these parts hang together, but to begin with the process "all the way around" (Coughlan 1975, 129). In Dewey's case this process is the organism-environment transaction. (Gert & Nicholas, 2003) (p.32)

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In the way researchers and psychologists view the world; Dewey invites us to move away from seeing knowledge as having one-dimensional focuses and sources. He argues for the combination of objectivism and subjectivism. He also asks us to remain inquisitive of the truth, taking into account that humans can never be completely certain about knowledge and its implications. For Dewey however, our uncertainty of knowledge is not related to the gap between the knower and the known, but rather to the fact that knowledge and its related action dimension may prove to have different practical applications in the past in contrast to what can work in the future. For Dewey it is important that we remain receptive to a process of knowledge and action redefinition taking into account the circumstance, systems and time in which it is happening (Gert and Nicholas 2003). Moreover, according to Dewey's transactional approach, characterising an interplay between the knowing organism and the environment, knowledge manifests itself primarily in the way the knower acts with and responds to changes in the environment.

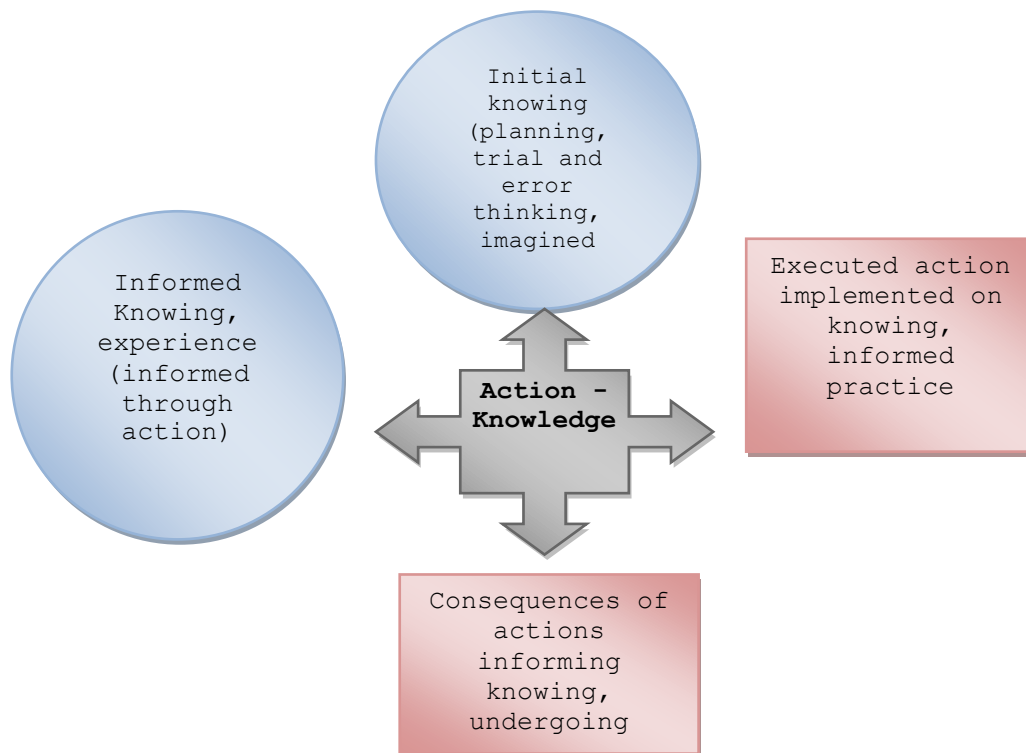
Apart from Dewey's distinctive view of knowledge, other important aspects of his epistemology are his ideas on communication as practical intersubjectivity and transactional realism. These two philosophical notions give us answers to the aforementioned questions about how consciousness and knowledge is disconnected from reality. They provide a framework for understanding how action and knowledge interact between different units within an environment. In this approach, it is assumed that on a very basic level of human existence, that we are constantly in transaction with separate and yet connected entities reflecting our reality (1929a).

Dewey does assert that knowledge is ultimately a construction; however, he departs from the view that it is solely located in our mind or can possibly be an accurate reflection of the environment without it being tried and tested through action. On the other hand, he sees it as originating in the organism-environment 'transaction' itself (1929a). Knowledge changes if the environment changes, as this ultimately, requires different forms of action. This relationship is not linear and can also work the other way round where the environment can change when our knowledge changes, primarily through the course of the knowledge-action transaction with the environment. Here we are once again presented with the important relationship between action and knowledge and how this influences constructs and our appreciation of realities. Gert and Nicholas (2003) describe this as part of Dewey's thought as

‘transactional constructivism’ in order to refer to the process of knowledge being constructed in reaction to transactions between an organism and environment.

### **Pragmatism - Action and Trans-action.**

Knowledge is therefore not a direct measure of reality in itself (as the realists, post-positivists assert), but this does not mean that knowledge is not important. It is a mode of experience, as is the thinking process of trial and error that ultimately supports action, and consequently further knowledge (Gert and Nicholas 2003). We learn mainly through our actions as a result of their consequences which informs our knowing. Dewey tells us that knowing allows for ‘control’ that allows us to intelligently plan our actions, and our actions to inform our knowing. This approach to knowing allows us to interact in a more connected way with our environments where both our knowledge and our actions have a strong influence on our realities. Moreover, as Dewey states, it allows for the “the transformation of disturbed and unsettled situations into those more controlled and more significant” (1929a, p. 236).



Dewey defines the interactions between knowledge and action as a transactional realism and he saw it as dissolving many of the questions that have troubled many thinkers. This organism-environment transaction can be compared to the systems based interactions discussed earlier in the literature review, whereby information is transferred between different

units in a system within either complex or simple environments, and processed by each individual unit to make sense of reality. The idea of transaction for Dewey, is not only a method or procedure but also stands as an important part of understanding the way we co create knowledge within nature, systems, groups and organisms. Dewey described nature as a moving whole of interacting parts (1929). For him, the organism acts in line with personal structure, simple or complex, upon its surroundings. As a consequence the changes produced in the environment react upon the organism and its activities. The living creature undergoes experiences and sometimes suffers the consequences of its own behaviour. Central to Dewey's thinking is the Idea that individual's close connection between doing and undergoing forms what we call experience (1920).

The process of doing and undergoing allows for meaning to form and this always includes an organism environment, or in systems terminology, a unit and a system. Systems which lack meaning require an intelligent systematic inspection of the situation in order to understand how knowledge and transactions are being processed within the system. This allows for an understanding of the situation. However while thought and analysis must play an important part in this process it will not result in knowledge. As Gert and Nicholas (2003) firmly state:

It is only when action follows, that is, when we use the suggested solution to guide our action, that the value of both the analysis of the problem and the suggested solution can be established. We need overt action to determine the worth and validity of our reflective considerations. Otherwise we have, at most, a hypothesis about the problem and a hypothesis about its possible solution. This means that in order to get knowledge we need action. But although action is a necessary condition for knowledge, it is not a sufficient one (p. 46).

To understand real life situations therefore, we need to hypothesise about the possible nature of phenomena and also act upon those with the goal of achieving clearer knowledge. The present overview of Dewey's key ideas regarding the nature of knowledge provides a framework for both the rationale and the methodology of this research. What is good about Dewey's arguments is that he invested so much time to understanding knowledge not only create a new contribution to philosophy, but because he thought that development of such theory was crucial in understanding and acting to address some of the complex problems of modern life (Gert and Nicholas 2003). Such problems remind the author of the challenges faced by services to establish Collaborative methods of working and to understand best forms of practice.



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In light of the pragmatic views just expressed the author believes that knowledge obtained through the research is likely to provide an increased chance for effective implementation of Collaborative working practices in the future function of the services for children with SEN in Malta. Views of participants seen in light of pragmatist thinking make it clear how thinking about both past and possible future action in terms of Collaborative work provides important knowledge to support future developments in the area. It is only through the reflection and thought processes that participants show that effective future action is possible. Moreover, the research itself can also be considered as an account of trial and error thinking of the author about the intended future development of Collaborative working practices. The research itself can be considered as action, of which its consequences and undergoing will provide reference for more reliable knowledge and eventually - action. Research was one of the ways in which Dewey felt that individuals can support effective change within systems and organisations. As mentioned previously, Dewey felt that his pragmatism was not solely confined to the remit of philosophy but instead also carried the purpose to promote effective change in the real world. Along this thinking the author has selected a methodology that can support a framework for gathering the knowledge needed to explore the area of Collaborative work.

*NOTE: References can be found in main Reference list in above section.*

**Appendix 8.7 -- Transcript- Interview with Service Manager/Coordinator**

*INTERVIEWER:* Alright so what type of collaborative work is taking place in this service would you say?

**PARTICIPANT:** Basically in this service, children are referred to us our professional service and then what we do is we see children in general and then we refer to the members of the multidisciplinary team. From my point of view I feel that this should be sort of done rationally. Perhaps other people do it in the sense that other people actually refer to all the team members in the multidisciplinary team irrespective of the problem of their child which I feel a bit is a waste of resources and a waste of time for parents and children .(Barriers to Multidisciplinary) So I do is you actually see the child and if you see the child has sort of more medical problems you actually refer her to the medical side of the multidisciplinary team and if there is you know specific educational problems you refer her to the educational side of the team and that's where the multidisciplinary approach comes here because we refer to people who are around, according to the needs of the child.

*INTERVIEWER:* ok yes that makes sense, yes ok. So if I were to ask you for a kind of an estimate more or less. I mean out of a 40hr week. ?

**PARTICIPANT:** Yes yes yes.

*INTERVIEWER:* But the other teams when we say they work multidisciplinary like out of a 40hr week would you say that they would spend most of the time working with each other like?

**PARTICIPANT:** No I don't think so. (Past negative Example of Collaborative Work) Ideally it should be that every child has a multidisciplinary group set up... it's what we call a multifaceted conference and basically that means that all members of the multidisciplinary team sit down and discuss with the child all together you know and discuss and having a consensus view of the child. (Opportunities - Value of Collaborative Work Expressed) And after that doesn't happen because that can't happen.. because there are so many people waiting for a referral. but the case conference (does happen sometimes). So that's only limited just because of resources. So anyone who is born 2008 onwards to 2009, 2010 will have to have a case conference then and that's where perhaps the greatest multidisciplinary approach is applied because eventually these children will have a meeting test program. (Prevalance - Presence of Multidisciplinary work) Basically for them, all the team members meet to discuss the views of every team member. So the psychologist will be discussing, the speech therapist (will be discussing in the team) basically there are about 8 members of the multidisciplinary team. They are not all based here within this service, they're not here so we have to refer to [another hospital]. But in a week if you want this as a black or white answer ...usually you'd have one day out of let's say a six day week dedicated for this case conference but that has to be qualified because not all children get these case conferences. (Barriers to Multidisciplinary Work)

*INTERVIEWER:* And which ones so ? what is the reasoning behind to the 2008 2009 birth system?

**PARTICIPANT:** The reasoning is you early intervention and the case conference actually serves for children who are younger.

*INTERVIEWER:* Ok

**PARTICIPANT:** But that doesn't mean that older children don't get the service. What they don't get is this basically a day for assessment, well it will be one and a half hour where team watch and meet and discuss their problems together and then parents will be invited so we discuss again with the parents.  
(Barriers to Multidisciplinary Work)

*INTERVIEWER:* Ok

**PARTICIPANT:** But you know to be honest I think,..I am going to speak very frankly - I think this is really more a formality than anything else. I feel that this case conference is a bit over valued because in reality this dialogue with parents should be continuous and even this dialogue between the team should be continuous. (Challenges with multidisciplinary work) In a sense you know I refer as people to as members by obviously a referral trying to discuss you know in summary what the main problem is. But obviously if I have something very specific and anyone wants to discuss something specific I'd have to walk across the corridor and talk to [name] the [professional type] and say hey! Listen I think this is a bit of an urgent case and I am not quite sure whether the child has autism or not and parents are quite worried and well we'll have to discuss it you know (Challenges to collaborative work. Needs for collaborative work – open communication)

*INTERVIEWER:* Ok.

**PARTICIPANT:** So that does need to happen.

*INTERVIEWER:* Ok. All right so that's it basically.

**PARTICIPANT:** Yeah. Or they phone me obviously you know. We are basically the people who are here, there are the occupational therapists which are ... (Presence - Examples of collaborative communications)

*INTERVIEWER:* Yeah.

**PARTICIPANT:** ..and the physiotherapists, the speech therapists across the corridor and [name] the psychologist and his team and they're quite close.

*INTERVIEWER:* And how many psychologists?

**PARTICIPANT:** I think [name] is the chief psychologist and I think about three psychologists. I think some of them are trainee psychologists. I think about 2 or so. And then there is another psychologist I don't know if you know her... [name] is here name? (Type - Awareness of different professionals within the services)

*INTERVIEWER:* Oh yeah.

**PARTICIPANT:** And.

*INTERVIEWER:* Yeah I know (Name).

**PARTICIPANT:** She is a qualified psychologist.

*INTERVIEWER:* Yeah. She is a neuropsychologist.

**PARTICIPANT:** Yeah.

*INTERVIEWER:* Yeah.

**PARTICIPANT:** And I think overall cause they are doing quite well. (Type and Prevalance - Positive examples of collaborative work)

*INTERVIEWER:* Ok.

**PARTICIPANT:** Because how it was before it was just [name].

*INTERVIEWER:* Yes.

**PARTICIPANT:** He was overwhelmed. (Challenges - Extensive workload within some services)

*INTERVIEWER:* Yes of course I remember. (Challenges – Resources)

**PARTICIPANT:** Yes. So formally it is one day every six days.

*INTERVIEWER:* The case conference.

**PARTICIPANT:** The case conference.

*INTERVIEWER:* But then there is ongoing consultations?

**PARTICIPANT:** The informal contact should be ongoing.

*INTERVIEWER:* Yeah. And that sounds like it works well.(referring to the possibility of informal consultation). (Needs -

- specific models of practices involving open collaboration).

**PARTICIPANT:** Yeah I think so.

*INTERVIEWER:* Yeah.

**PARTICIPANT:** Again even if people don't get their case conference every professional has to discuss his problems with the parents and other professionals involved in the joint case work you know and give them reports obviously you know. (Need for open collaboration and joined-up discussion) So although people are not meeting in one room to discuss with the parents they are actually meeting individually (pause\_in\_speech) . (Need for open collaboration and joined-up discussion)

*INTERVIEWER:* Yes with each other. Ok. So you mentioned [name of health service].. are there any other I don't know agencies, people from other agencies that you work with, I don't know, maybe the Student services department with respect to schools.(Barriers – Possible limited awareness Do you ever have contact?

**PARTICIPANT:** Yeah sure sure. I mean I am specifically you know assigned to have contact with you know the educational services [name of hear of service] Yeah? (Opportunities –Open Communication)

*INTERVIEWER:* Ohh, well I assumed you work with them but I didn't know you are assigned specifically with him.

**PARTICIPANT:** And (Name)

*INTERVIEWER:* Ok.

**PARTICIPANT:** And I am also specifically assigned to have contact, make contact with the NGOs like you know The Down's Syndrome Association, [Name of NGO] and all the other ones. And obviously I am very much involved in the [Name of NGO]. So I am sort of I am supposed to be perceived to be the bridge between OT Services and out service. So I have sort of regular meetings with them to discuss issues typically we'd have meetings with [Name of NGO] this is one of the newest NGOs who had some issues about the level of support. And they have actually you know have organized meetings with them and they have come here to discuss and I think everyone is quite happy that they seem quite open to discussion with these NGOs. (Positive Example – Current contact with NGOs) And I was a professional so apart from these NGOs and government organizations, with [name of healthcare centre] obviously we have meetings, we refer our discussions with the Ophthalmologist and the Audiologist. But obviously even with the Pediatricians, the Plastic Surgeons and other doctors. Ok. And anyone really because they need to be involved at some point. I am just looking at these papers just to remember. I have these papers from the other professional service and I try to...(collaborate) you know it is getting so multidisciplinary (the need for it). It doesn't mean that just because they are not in our professional service (we should not work with them). (Needs – need to work with different groups and establish further communication) =I don't contact them( however) so I have.. you know referrals to the other professional service... you know ..and I tell people to you know use their services as well. Sometimes people from that other professional service come here and we meet the parents together (Current examples – including different professionals and services)

*INTERVIEWER:* Yeah so you refer to (name of service)?



**PARTICIPANT:** Well I actually yeah basically sometimes I de eight hours for example basically parents of schools. I said an opportunity. And I actually read papers in the [name of database] you know contract details for them.

*INTERVIEWER:* Ok.

**PARTICIPANT:** And I actually sometimes you know phone. Then we have another consultant who is in [profession] who is really dealing with [professional area], a [name], and she is the one who actually deals with social problems. So if there is something very serious abuse and things like that she is the one who takes care of them.

*INTERVIEWER:* Child guidance clinic?

**PARTICIPANT:** Yes she is in charge of guidance.

*INTERVIEWER:* Is that part of here or?

**PARTICIPANT:** No it isn't. It's not. Yeah it is a bit confusing. Child guidance is under psychiatry.(Challenges – decrease confusion on allocation of services / need for centralisation?)

*INTERVIEWER:* Ok.

**PARTICIPANT:** But then again we refer and they refer to us but we refer to them when there is severe behavioral problems probably requiring medication. (Current Examples - Open referral system between different services)

*INTERVIEWER:* I see.

**PARTICIPANT:** And we do for all the children.

*INTERVIEWER:* Ok. So well this question I think is quite straight forward no 5. I get the impression that you value collaborative work. Can I ask you what do you think are the main benefits of collaborative work like what cause there are some people think it's more efficient to work individually but then again some people feel that you know putting resources together and getting people to work together can be even more cost efficient than the

**PARTICIPANT:** Yeah well basically collaborative work is basically no one is really a specialist in everything you know I mean who might I don't know where to discuss things like there are physiotherapy aspects things like that and parents don't really are not really interested in subdivision of the child if there is a physiotherapy problem or an OT problem or a psychologist problem. (Value – professionals aware of need of multiple specialisations/ Needs – increased Interdisciplinarity They want someone to integrate everything. Ok. And I feel actually our role as [professional type] here is actually to try to make sure that this collaborative work is actually integrating and so making sure that everyone is pulling the same rope you know and collaborating together. (Needs- Manager to act as facilitators of collaboration) So you know collaborating with the other professionals is very important because then parents feel this is a you know... a one stop shop you know basically. And I realize this ideally should be really extended really beyond what is now but I think that is idealistic you know. Having one building where you've got the educational department, the medical department and the social department in one building and people just cross corridors and say listen I can text you this problem and I'll take over from here. (Need – Increased physical centralisation and shared collaborative spaces)

*INTERVIEWER:* Yes.

**PARTICIPANT:** But this is up till now it's just help.

*INTERVIEWER:* Help yeah.

**PARTICIPANT:** So we have it for teachers here in malta but we don't there is no one chosen framework for the other services, you know . (Barrier – No established model or framework). So you can deal with problems rapidly in that that building. People have to go from here to the statementing board from the school services or through the social services and educational services (Challenge – Too many Separate services) and the services seem like they are fragmented. (Challenge – Fragmentation)

*INTERVIEWER:* Yeah.

**PARTICIPANT:** But at least from health we're interested in collaboration.

*INTERVIEWER:* Ok. And would you find that other agencies that you have contact with are generally responsive. My idea is from what I understood that yes they are but are there any challenges? What would you say? When you work with other agencies you mentioned the education do you find that they're responsive usually to working collaboratively?

**PARTICIPANT:** Well yes but there are problems and I think problems have to be grasped over time and it is no one's specific fault. (Challenges – Referring to the process of change) I think there should be more collaboration because obviously for example most parents headmasters and headmistresses are

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actually send their children to the GP to refer them to here because there is too many children to be seen by a medical professional (Challenges – Too many referrals)

*INTERVIEWER:* So what about the system of all children having the need to be seen by a GP. How was that set?

**PARTICIPANT:** No I didn't set that up but that's how the system is. So you might have a referral from a child by a GP who knows nothing about the child and we have no actual referring letter from the headmaster headmistress. So you depend on what parents tell you and the parents tell you listen the headmaster send me to the GP to be seen here. But you don't have it's always by third party that you actually hear what the headmaster said to the parents and to the GP. So I think more collaboration would be needed if people just pick up a pen or a phone and just write a note what they are worried about. Ok? (Barriers – shortcuts to collaboration)

*INTERVIEWER:* Yeah. Yes.

**PARTICIPANT:** So that's the problem. So I think there should be more collaboration between the [government sector department] departments than that. But that might mean because in the past they weren't very welcomed. (Prevalance – Limited Presence of collaboration in the past)Especially the way it works... that you have to go to a GP to be sent for an educational problem. (Need – Increased collaboration involving increased communication between departments)

*INTERVIEWER:* What do you think needs changing the most?

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Well there needs to be some form of common referral point. An information systems that makes the practice easier.

*INTERVIEWER:* Are you referring to a referral database?

**PARTICIPANT:** Ideally... it's ideal you would like to have that. In reality I think I see that the most important person who has the right for that information are the parents. (Needs – Increased centralization is needed involving common referrals)

*INTERVIEWER:* The parents yes.

**PARTICIPANT:** And although when people look nice as having all this information available for the professionals in reality I think parents have a right to withhold that if they want. (Needs – Parents to own information and information made readily available to them)

*INTERVIEWER:* Yes.

**PARTICIPANT:** You know sometimes we work with reports and I actually do it delicately and diplomatically instead of writing about these (confidential) situations.

*INTERVIEWER:* I see. Data protection yes of course..

**PARTICIPANT:** Whether the parents, they are separated or divorced or you know.. just having a partner. And that is very information you give in and I'll go right back. I don't write very blunt things saying you know parent has been divorced or. (Challenges – Caution when writing reports) But I actually say who

with who the parents is the child living with parent partner and the grandmother and that implies if it is a partner that means there not actually married officially. But that's irrelevant for me but it gives you a feel of the background. Now that's sort of information I think gives the parent and they know I am going to write it and if they feel very happy with it they can give it to the headmaster. It's important not to take things for granted.

*INTERVIEWER:* Ok.

**PARTICIPANT:** But sometimes they might not be happy with that.

*INTERVIEWER:* Yes of course.

**PARTICIPANT:** And I think that because of data protection and people describe the legality and secrecy. I think that parents should have the right to. And if people you know... if you're going to you know I don't know pay an educational psychologist they said well may I see the report. I think it is very good for the parents to get a chance and say this is what they gave us. (Needs-open information and confidentiality) That's the only problem with the big brother total of big database on everyone and I'm a bit wary about that because of you know even when you have. We are actually computerizing our system here in hospital. It is extremely easy to go on to a computer system you've got to have a password obviously and look at any other peoples you know lab investigations. (Challenges – maintaining confidentiality and safety in centralized computer databases) I'm just talking about lab investigations. I have had you know parents you know knock here not officially but in the private sector Stanley listen I apply for insurance any insurance people I don't know if this is true had actually gone into my pile and said that I can be covered for this because my child had a febrile convulsions and I found it very odd almost

unbelievable seeing that somehow someone from the insurance actually got information that is so confidential and that's what I'm wired about central databases I think everyone should be responsible for his own data .

*INTERVIEWER:* you take away the services and structure collaborative work?

**PARTICIPANT:** Well I don't know basically I think to be honest most of the challenges that arise as a lack of communication and lack of contact and once you get to know people and know them individually it is much better.. because tension increases as what I find, when you actually write e-mail . like very formal e-mails were very former letters and the responses sometimes (are) weaker. But if I actually pick up the phone and say hey listen, I have a problem, then it can be clarified. If people actually have his personal contact with you, this can increase Collaboration. (Need – Overcoming miscommunication through open and personal contact between professionals)

*INTERVIEWER:* do you think people are aware that they can do that?

**PARTICIPANT.** I think it depends on the attitudes and personalities of the people involved so if you have a professional in our field and she see things as though she's a prima donna, or he's the top boss and that nobody should actually interfere with her work or area and his ideas and her plans they wouldn't even talk to you and they wouldn't even take any interest: but on the other hand you (Barriers – Negative Attitude leads to poor collaboration by some individuals) have someone who's open and someone wants to chat with you in share their ideas than you can say that these fields are similar and you can help me this and I can in this can work together so I think that basically it's about personal contact apart from the office and sharing same structure and you have old

services combined together (Challenges – Establishing closer contact for collaboration)

*INTERVIEWER:* how do you think you'd like to see collaborative work take place in the future?

**PARTICIPANT:** I think we should have more meetings together so that we can know people individually face-to-face and discuss our problems. I think in the past we have tended to consider that this is health and did anything to do with education is an educational issue. So at the moment we reached a point where we are working as a team. They come up to me not like as it was 2 years ago where everybody was working independently you know. And that the only way that we can collaborate is that early intervention teachers send their own teachers to the case conference. And I think that it's more than that you know and that the more meetings and more dialogue that we have with each other like everyday dialogs everyday things the better. Sometimes we learn things from parents. For parents tell me that the education board sent me to inspire, for speech and language or communication difficulties. And I was sort of surprised because I didn't know that there is this kind of service. And if we were to have this meeting with the education department and the officials concerned it would be more reasonable and understandable and people would expect me to... you know I am trying to deal with their problems and I didn't know that the education actually sent people to inspire, well I don't even know if that's true and they have gone, but that is what the parents actually told, so the greater the contact and dialogue with all people involved, the better.

*INTERVIEWER:* I was thinking maybe I should design a contact and services tree that we could use as part of this research to help everyone find their way through the different services.



**PARTICIPANT:** Yes that is very good that is something everyone should do in his own personal time. I'll try to do that. Basically what you need is me and a telephone network. And actually had this problem and I emailed some administration people in education and asked them and they answered me and asked them to clarify things, so that people know what the left hand and right hand is doing.

*INTERVIEWER:* So what is the ideal?

**PARTICIPANT:** The ideal scenario? Well the ideal would be to have for everyone, to have one building and all the service providers there, so that people would have principle contact there and you would in the morning say, good morning how are you? Remember that boy with autism, what do you think? You know, so that there is personal contact. Having people meet in the same building every day for years, actually improves the dialogue and the collaboration. Having different services on different sides of the island makes it disjointed.

*INTERVIEWER:* In fact I have been speaking to an occupational therapist that came from London and she actually said that she was working in a service there where there was everyone involved in the same building, occupational therapists, physios, medical doctors .... Well it's a very good set up.

*INTERVIEWER:* Have you been to student services in education?

**PARTICIPANT :** No I haven't been there.

*INTERVIEWER:* we're kind of similar there, having two floors.

**PARTICIPANT :** Yeah... that is good... but wait this is what I find odd. You have a autism therapy in the speech and language therapy centre in half luqa – and that is in health. And then you have the student services with similar services. Errm, im not saying 24.42 that they are not offering good services but the services aren't united. (Barriers – Different services fragmented and communication limited)

*INTERVIEWER:* yes they are fragmented. And although I'm saying that they are although we are located in the same building we feel that we are the same and frequently working apart from other services. So what do you think the main challenges are?

**PARTICIPANT :** The main challenges are establishing communication. (Challenges – Establishing communication and limited waiting list) That there is also the challenge of the waiting lists, not only because of the collaboration here but because of the waiting lists that we have. Basically I think that there is too much work for too little workers. Its not the medical, actually as peadiatricians we have one, two, three or four weeks waiting list if you want that, not more than four weeks. The problem is psychologists because they are inundated with work and the occupational therapists because they do not have staff, even the psychologists do not have staff. And again the problem with collaboration, this is overall collaboration, I find sometimes that the referrals are mis-refered. Because what they need is an educational pscyholgist, and what we have here is clinical psychologists and what the parents do is they (Barriers – Limited Staff which are overwhelmed with work) come here and they say that I need a report from an educational psychologists. Well I look at them and say, look there are no educational psychologists in the health department, the educational

psychologists are in the educational department and that's why. Sometimes I think that they are mis-referred, and probably they are misreferred because even the educational psychologists are probably inundated with work in the education department. So people try to find services where they can.

*INTERVIEWER:* so one of the things we finding difficulty with at the moment is that educational psychologists are focusing a lot on examination access arrangements. Yes yes, that is what the director told me is that at the moment we are very much focusing on examination access arrangements and as a consequence, although it is good to see a child of 8 years old at the start we are not managing to do that because they are focusing on examination arrangements at the moment. (Challenges –focusing resources and time management) There is something going on at the moment and they are working on it ...funding by the government issuing tenders to the public sector.

(Thanks, mentions keeping ongoing confidentiality)

Thanking me and telling me how important it is to have met me on a personal level in order to establish personal contacts. Note on how important to increase contact between people.

**Appendix 8.8 Participant research information and consent form**

University of East London  
Docklands Campus  
University Way  
London E16 2RD

**University Research Ethics Committee**

If you have any queries regarding the conduct of the programme in which you are being asked to participate, please contact:

*Secretary of the University Research Ethics Committee, Ms Debbie Dada, Admissions and Ethics Officer, Graduate School, University of East London, Docklands Campus, London E16 2RD (Tel 0044 20 8223 2976, Email: d.dada@uel.ac.uk)*

**Researcher**

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**Consent to participate in research through interviews/focus group**

The purpose of this letter is to provide you with the information that you need to consider in deciding whether to participate in this study. By participating in the upcoming interview/focus group, you are thereby providing consent to the author to carry out this research with you and record the upcoming interview/focus group session. Information gathered will be anonymised and it will not be possible to identify your identity or the identity of your service once the research is published.

**Project Title**

Collaborative work between different professionals working in public services for children with special educational needs in Malta. Current applications and pathways to best future practice.

**Project Description**

This research explores the current and potential future application of Collaboration between different professionals within services for children with special educational needs in the Maltese Islands. Participants are requested to share their views about Collaborative work. They will be asked to speak of their personal opinions; Collaborative work takes place in their services. Also of interest to the researcher is how Collaborative work could take place in the future. There are no hazards in this research.

**Confidentiality of the Data**

Data will be stored at the residence of the researcher for up until the research is completed. It will be accessible only to the researcher and all names of people and services will be anonymised. Any possibility of personal identification will be removed. Once the Doctoral Programme the researcher is reading will be completed, all data will be destroyed.

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**Remuneration**

Participants are not paid for this research.

**Disclaimer**

You are not obliged to take part in this study, and are free to withdraw at any time during the interviews/focus group. Should you choose to withdraw from the research you may do so without disadvantage to yourself and without any obligation to give a reason.

**Thank you**

**Paul Attard-Baldacchino**