practice article

How can helpful policy plus helpful professionals produce system failure? Exploring development interventions with active local professionals and active young people with life-limiting conditions

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The paper reflects on the implications of selecting local multifunctional networks as a principal method of achieving improvement in the transition experience of young people with life-limiting conditions, given the range of blocking factors identified. It summarises a programme of work that aimed to tackle these blocks through developing local systems responses. It then offers a review of organisation development that sets a context for the work and helps consider its implications, including a five-part model that emerged. Finally, learning and insights for practitioners engaged with local complex systems are offered, taking account of leadership, emergent boundaries and actor-network dynamics.

Keywords: Organisational development • health and care • system improvement • actor-network theory

Introduction

The Marie Curie Young People and Transition Programme[1] explored ways to improve the difficult and often unsatisfactory experience of transition to adulthood for young people with life-limiting conditions.[2] As a core principle, the programme focused on the aspirations of these young people for their adult lives, rather than the needs arising from their frequently complex conditions. All elements of the programme were shaped by the belief that young people themselves, along with those who support them, can best coproduce ways of working towards their desired lives. By exploring with them creative ways to support their strengths and aspirations and so challenge the traditional, needs-based focus of many services, the programme complemented a range of other initiatives across the UK.[3]

This paper focuses on *local multifunctional networks* (LMFNs), which were developed as a core part of the work to improve young people's experience of transition, alongside a young people's engagement programme and wider influencing through events and publications. We consider *what works* in supporting local agencies to overcome fragmentation in working with young people. Our approach was less an 'intervention', with its implications of a one-way process, than a series of contextualised negotiations:

about starting points, about drawing together the right people and agencies, and navigating the complexities of working for outcomes across multiple agendas – and the centrifugal forces these create.

The authors worked in the programme team and/or the project management board and draw on their histories of working to change and influence organisational systems through consulting and of working with Marie Curie Cancer Care, a complex and devolved national charity.[4] Our concerns in writing this paper are to explore what emerged in tackling this work and to reflect on the learning for us in what transpired. We did of course start from our own assumptions: principally, tacit belief that dialogue and creating a space for this that transcended organisational boundaries and provided a clear focus on the concerns of young people and their families would nurture solutions to the fundamental system failures our early work identified.

We start with background information on this early work and how LMFNs were intended to respond to its findings. We then summarise the work done to operationalise LMFNs in six sites. A reflective section follows, drawing on organisational development literature to locate the underpinning ideas for and theoretical issues arising from this work, before we discuss implications and draw conclusions intended to be useful to other practitioners.

Background

In the first three months, our exploratory work showed how, broadly, the policy framework shaping service provision for young people with life-limiting conditions was adequate. In addition, many professionals were committed to effective support for these young people. However, despite these factors, actual professional practice and the prevailing system of care at transition fell a long way short of what was needed. Young people, moving from the generally effective, whole-family based care of children's services when they reached the (variously defined[5]) age for transition, then 'fell off the cliff', their experiences described as 'universally awful'. Further, the work uncovered the 'triple transition' that has to be negotiated successfully by all involved if young adults' lives are to show a marked improvement. This comprises:

- Transition *from young person to adult* – about growing up, independence and dignity
- Transition *from parent to carer of an adult* – about complex emotions and anxieties within the context of an expected earlier-than-normal death
- Transition *for professionals* managing the transfer, either for children's services learning to let go or for adult services learning to take on the unknown. Both have to learn to enable young people to act for themselves, so far as their condition allows.

In practice, the triple transition means taking account of young people's aspirations, the stress and anxiety of their parents, and the concerns of professionals. Two underlying issues obstructing this emerged: first, the system of care was fragmented over a number of agencies. Fragmented systems militate against a holistic view of transition; it is a struggle to get people in education, housing and health and care agencies working in concert to build on young people's strengths and meet their needs. Second, the young adult with life-limiting conditions shares many features with their non-disabled peer group, but often cannot act as a fully independent adult, inhabiting a paradoxical

and frustrating world of independence and dependence that they share with their parents/family and with professionals involved in their care.

Thus, it became clear that the presence of broadly enabling policy and committed professionals on the ground was not enough to achieve the transformation required to improve young people's experience at transition. Systemic and organisational shifts had to go alongside changes in practice and new approaches in policy and legislation: transition is inherently a complex and wide-ranging process.

Our early discussions with 140 or so people (managers, clinicians, professionals, young people, parents) raised what they felt could be done locally that might help improve the lives of young people with life-limiting conditions:

- broader support systems, beyond the dominant subsystems of education, children's services and adult services
- cross system networks
- young person–centred ethos
- joint training and development
- good communication across agencies
- working with young people and families to co-produce transition plans and service responses.

These ideas shaped the plan to develop LMFNs that could take up this challenge, that is, local networks of people working together, with the explicit aim of ameliorating the lives of young people with life-limiting conditions at transition.

LMFNs became a central part of the year-long implementation programme. The consultant team would provide process support for them with development and engagement expertise, creative facilitation and by funding a network development worker. Otherwise, the network's development would be driven by local wishes, needs and priorities, and by the positioning of young people and their parents as central to the network. This approach was enthusiastically welcomed by Marie Curie Cancer Care and the potential members of networks in the candidate sites.

Local multifunctional networks (July 2011 to June 2012)

£143,000 was invested in activities in six sites (see Figure 1: schematic of the LMFN work), alongside over 100 days of consultant time in development and support – and of course, importantly, substantial time and money was invested by participants in all the sites.

Essentially, sites needed to have work already going on that could be developed and taken to a next level faster through this investment. The decision was made to focus on sites in North and East London, Solihull, and Somerset, which would develop broad local multiagency systems in order to explore at local level how to improve experience of transition for young people with life-limiting conditions and their families. Agencies would collaborate and work with young people/families in service network development, and hopefully identify network models sustainable in different geographies. A further three sites would each contribute to one dimension of improving practice, identified as important in the early work: East Anglia (linking adult and children's services), Newcastle (creating specialist young adults' provision), Penarth, South Wales (workforce development).

Figure 1: Schematic of the Local Multi-Functional Networks work
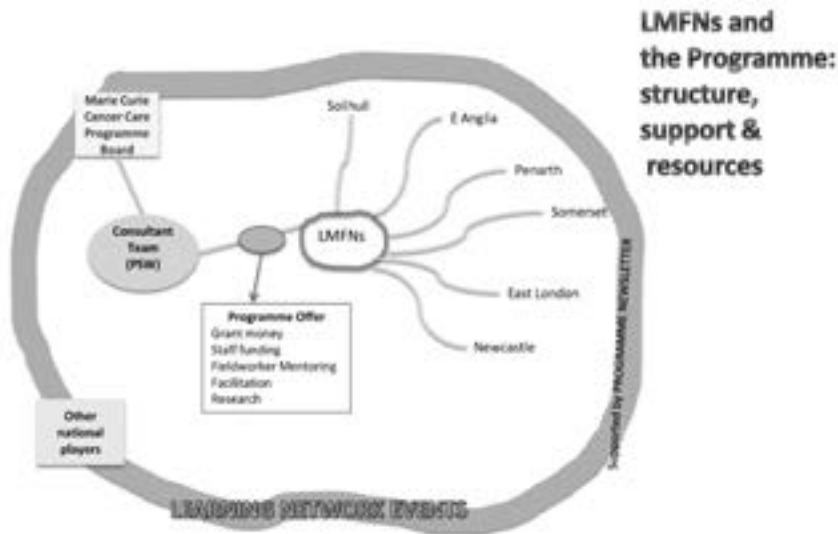
To develop networks and demonstration work in 12 months is a big ambition, even where some links are in place, so the 'constant urgency was irritating' to some.[6] Nonetheless, over the year, seven stakeholder events were held across sites and numerous partner meetings held monthly or six-weekly in five sites,[7] all supported by the programme team. Examples of achievements are shown in Box 1.

Box 1: Achievements in LMFN sites

- a clear agenda for regional work on transition in East Anglia, being sponsored by the East Regional Lead in local government stemming from a conference of 80+ stakeholders
- an innovative 'shadowing' scheme for learning across children's and adult palliative care piloted in South Wales, together with specially written learning support materials; scheme now a module at Cardiff University
- the development and testing of a new, young people-centred model of care in East London
- the scoping of volunteering activities and the production of a transition conversation tool *Snakes and Ladders* in Solihull
- the development of simple but effective online tools for transition (websites and app) for use by young people and parents in Somerset (and beyond) that link to relevant professionals: *My QuOL-T* and *MyFutureMyPlan*
- the publication of experience in setting up young adult specific services as a case study: Living longer than you thought I would
- the complexities of commissioning in Somerset and East Anglia were explored in a helpful stakeholder event and interviews that informed the programme's wider work on policy for commissioners
- wide range of new people/agencies involved in transition compared with those involved at the start, recorded in each area for further network building.

The variable local contexts within which activity was taking place meant the best approach was to work with what people wanted to do in their local system – and with what they could do. Many people on the ground had been working on transition issues for some years, had formed their own views, developed their practice and established initiatives that the Programme aimed to build upon. Work in all the sites focused on the achievement of seven 'statements of intent' (see Figure 2): these were intended to be directional, aspirational, strategic aims or principles. They drew on the early work and were developed with LMFN partners at the outset; they then underpinned local plans and guided activities. The statements provided a common language for the site work despite the adoption of very different approaches in each area. All sites were exploring different ways of achieving the statements of intent in order to learn about what had the potential to work, as well as what didn't.

Figure 2: 'Statements of Intent' for site work

1. The wellbeing of young people and their carers/families will be the focus of flexible responsive support and good information, irrespective of age, condition and stage of their personal journey

2. Young people will be enabled to make a contribution and develop their own voice

3. Young people will be enabled to have as far as possible a 'normal life', improving social life and combating isolation

4. Young people, their families, carers and those who work with them will act together for a positive transition

5. Parents will feel supported on their specific journey of transition with their child/children as they become adult(s)

6. Commissioners will understand the needs of this group of young people and their families and will be acting to improve what happens locally around transition

7. Partners across the whole system, including the public, will better understand the issues and opportunities for this group of young people and their families and make a contribution to their lives

'These statements underpin all the work people are doing around transition. They capture the key elements... very accessible statements which young people can engage with.' [clinical psychologist, children's hospital]

The consultant team developed a range of approaches and interventions in working with the six sites. These are summarised in Table 1. Cross-programme learning from the local initiatives was shared in three Learning Network meetings over the year that also invited other national actors to contribute.

The next section explores the ideas underpinning the aims and approaches to the LMFN work before we review the challenges and insights emerging from the work with sites.

Underpinning ideas

Organisational Development (OD) – origins

Organisational Development (OD) is a discipline that emerged from a group of organisation theorists and practitioners broadly known as systems thinkers. OD exists within a rationalist tradition with strong humanistic values, hostile to the reductionist notion of 'organisation-as-machine' (eg. before Taylorism) and informed by the

Table 1: Summary of consultant approaches to working with sites

Approach	Specific methods/tools	Why?
Outcome alignment	Statements of intent Learning network meetings	To make purposes explicit and connect different programmes across sites To share formative insights and develop relationships
Leading working groups	Chairing meetings Expanding membership	New networks needed an 'honest broker' leader without previous agenda to bridge divides/fragmentation Groups did not know who could be part of the network – new contacts required
Role development	Funding new roles Developing young people's group	To explore new practice model across children's and adult hospices To demonstrate the potential for young people to self manage
Facilitation	Open Space World Café Drama/stories Graphic recording Visual mapping Prioritisation tools Workshops	To enable successful large stakeholder events in early work, in sites, at end of programme To enable smaller events/meetings for target groups eg service commissioners, site members, people doing the shadowing programme
Direct resourcing	Research/scoping New tools/practice models Learning materials Newsletter	Adding on-the-ground resources to supplement local capacity eg freelance workers/team members to scope possibilities, support activity, develop written material
Coproduction	Joint publications Creation of IT tools/game	To create learning material grounded in local experience To work as peers with young people To support and extend existing work on IT tools
Capability development	Coaching Shadowing scheme Working with young people	To support staff in new roles To extend staff skills and understanding about transition into adult care settings

theories of individual psychology and group dynamics that emerged during the 20th century – from Bion to the Tavistock Institute.[8] When Fordist relations of production in manufacturing were starting to give way in the 1970s and 1980s to more flexible and adaptive systems, OD made a big impact in both public and private sectors.

Classical OD, hegemonic for around three decades from the 1960s, has a positivist orientation. It believes in organisational research, believing that data should be collected about the organisational issues that are the focus of the concern being explored. It sees the organisation as an 'open' system, whose survival depends on its ability to adapt to a changing environment. It assumes that there is an 'objective', discernible organisational reality to be investigated. It believes that (valid) data reflects or reveals an underlying structure and that carrying out organisational diagnosis of these data is part of the OD toolkit. [9]

This picture somewhat over-simplifies the way OD has been affected by postmodern ideas. Placing quotation marks around 'objective' above reflects discomfort with the term, in the light of thinking that sees reality as more socially constructed. OD practitioners probably use a combination of process and techniques that derive from both strands of thinking – systems and postmodern. For example, the original Royal Dutch Shell (de Geus, 1999) version of scenario planning, begun in the early 1950s, draws both on highly analytical work but critically also on creative, vision–building stages, explicitly involving intuition. This is a far cry from the rational/standard, linear stereotype that could be inferred from critics of 1960s/70s OD, and suggests practice has always adapted to purposes and context.

The fascination with the 'new science' for OD practitioners

During the last two decades of the twentieth century, there was increasing interest in applying scientific ideas, notably those associated with quantum physics, to organisations.[10] This paralleled an earlier development when some scientists began to extend their thoughts beyond the scientific into the world of social systems and processes.[11] Key here was David Bohm, a quantum physicist. He was struck by what he described as 'implicate order' in the natural world, focusing especially on the appearance of difference and disorder at the physical level and the reality of an underlying order at the quantum level. Systems thinkers and OD practitioners similarly see that apparently dysfunctional behavior in organisations is often symptomatic of a deeper system or structure, and that any analysis of behaviour without attending to deeper structures cannot find sustainable solutions. Bohm readily extended his ideas beyond the domain of science: he noted the nature of thought and the problem of learning when reflecting oneself because there is no 'neutral place to stand': thought is part of the problem/system. 'Bohm's Dialogue'[12] was one of his answers: a space for scientists (and others) to meet with no agenda, a tolerance of silence, equal status. The meetings had four principles: no decisions made, each agrees to suspend judgment, be honest and transparent as possible and try to build on others' ideas. Bohm's Dialogue uses a method that is both familiar and unfamiliar (for example, it is not used purposively) to OD facilitators, and shows the extent to which scientists have extended their thinking into the social domain.

Other scientists also influenced OD thinkers and practitioners, including Fritjof Capra and the mathematician Benoit Mandelbrot, whose fractals in many ways exemplified the idea of immanent order emerging from self-managed systems.

Wheatley (1999) directly references the intricate patterns of fractals and how small variations are amplified to affect the entire pattern. Other influential work includes the way apparently chaotic behaviour at a subatomic level creates, over hundreds of iterations, clear patterns that express an underlying order; the way that disequilibrium in systems creates its own change; the ability at quantum levels of subatomic particles and their relationships to create the whole system (that is, relationships rather than structure are the determinants of the whole system). All of this thinking signifies a change in hegemonic metaphor: from Newtonian billiard balls and the importance of *mass* to 'working with *energy* not matter' (our emphasis) and of change through 'meaningful information [that] lights up a network' (Wheatley, 1999, 151-2).

Complexity theory and its challenges to OD practice

Complexity theorists take these developments in science quite literally. For example, Patricia Shaw (2002) contends that from the outset, OD was about the science of practice information (and how we might change it) and cooperative research (that is, research with the engagement of people affected by the search goals). In this way, she says, Lewin tried to 'heal the split between pure and applied research' (2002, 126) – research *with* rather than *on* people. Implicitly, the facilitator is a 'knowing practitioner', somewhat apart from the process s/he has designed as a conscious 'intervention' in the group. Shaw endorses Schein's critique, 'the clients remaining as actors while the consultant remains in the role of audience, refusing to take the stage' (Schein, 1987, in Shaw, 2002, 128). A key problem of OD (echoing Bohm's 'no neutral space to stand') is 'the human-ness of the consultant'. The rational tradition takes a structured approach to process, trying to identify whole patterns – mental models, systems archetypes, unconscious scripts, culture – 'underlying, explaining and causing our current experience of direct interaction'. By contrast, Shaw sees all reality, especially organisational reality, as socially constructed, and therefore the facilitator/ practitioner cannot stand outside the process.

So her consulting practice consists of 'moving into what may be emerging without too fixed an idea of what each move will lead to'. She approves John Shotter's (1993) 'rhetorical-responsive form of social constructivism' and his view of the 'open, pluralistic, changeable, incomplete, contested, negotiated nature of our communicative interaction before we manage to impose upon it, in retrospect, a single systematic, complete, intelligible order' (Shaw, 2002, 45). Shaw sees this as 'thinking from within the movement of our participation'. So for her (and the case stories she recounts), the consultation process consists of inserting herself into random encounters, opportunism, making connections purposefully but without a clearly defined set of objectives – keeping things 'emergent'.[13] In this she is clearly referencing 'new science' findings in the quantum world of patterning behaviour emerging out of apparent randomness. For Shaw then, the role of the consultant is to take part in emergent and opportunistic initiatives – to work from *within* the movement of change.

How did these ideas shape the consulting team's 'intervention' choices?

The goal of the consulting team was to support change locally in such a way that the lives of young people with life-limiting conditions would be improved. It was clear that there was no single agency solution to the awful problems of transition;

even agencies working together were unlikely to make much headway. The *system* was broken.

A number of critical questions arise in exploring why and how we thought the LMFNs could tackle broken-system problems. Why should a process of meeting and talking lead to the solving of some of the complex problems described earlier? How could a cross-agency forum or 'network' without any formal authority achieve such a scale of change? What mechanism would enable professional people – some of whom were senior staff but many were not – to release resources and energies across agency boundaries? How does traditional public service accountability bounded within individual agencies deal with such cross-agency challenges? Why would placing young people with life-limiting conditions in the centre of the network be effective in supporting the change process?

First, we identified and chased the energy. Existing energy to make change was an explicit criterion for selecting each local site. We sought evidence that there were local actors who already had begun – no matter how partial and incomplete – to focus their thoughts and actions on trying to overcome the problems of transition. The sociology of 'actor-network' theory offered help here:

> Ask about the possibility that there are partial connections. Partial and varied connections between sites, situations, and stories. This, then, is the patchwork option. It's to imagine that materials – and stories too – are like bits of cloth that have been sewn together. It's to imagine that there are many ways of sewing. It's to imagine that there are many kinds of thread. It's to attend to the local links. And it's to remember that a heap of pieces of cloth can be turned into a whole variety of patchworks. By dint of local sewing. It's just a matter of making them. (Law and Mol, 1995, 290)

To this extent we were, to use Law and Mol's metaphor, selecting places where 'some local sewing' had begun.

Second, since the broken system could not be mended alone by the agencies that were part of that system, a coalition or network needed to be assembled. Because the constituent members of the network were autonomous individuals when in the network, any development intervention could not be directive. A consultant could only add value to the local group by helping with the sewing, finding new pieces of cloth, developing innovative approaches to the group's processes and bringing new information to the group.

Third, this meant that the consultant was inserting themselves into local flows of energy in the manner suggested by Shaw. In this way the consultant tried to shape the direction and momentum of the network by the purchase that their value added had gained them. However, this insertion was purposive and thus borrowed much from traditional OD, using the 'Statements of Intent' to set direction, project management to maintain momentum, using mentoring to provide emotional support and reflective space for local workers.

Fourth, the consultant team offered innovative approaches and new resources to the local network. The toolkit of traditional OD included Open Space Technology and group facilitation and these were used extensively as the principal way large group working was processed. These approaches were entirely consonant with sustaining and increasing energy and ensuring the highest degree of ownership by/affiliation

of network members. A separate stream of the Programme focused on the capacity building of the young people. This article is not the place to describe these fully, but the key point is that the consultant team offered opportunities that were highly prized by the local actors. Thus further leverage was effected on the network to achieve its system-patching (not mending, which would not have been possible) activity, with young people, their carers and parents a central part of the networks (we did not always succeed in achieving the latter).

Finally, each LMFN was linked to the others, as well as to national experts and innovators, through the network newsletter and, critically, through the *learning network events* (there were four during the programme, including the last that engaged more than 240 people in a single event). This enabled a 'sewing' that moved the network beyond its locality.

This description does not reflect the challenging, sometimes paradoxical, circumstances that had to be faced. Team members working with local sites struggled with issues of their role and involvement. For some people on the ground the team was seen as owning and driving the project work; for others it was *their* work that the project was simply supporting. Clarity had to be explicitly negotiated in one site where the development workers funded by the programme were line-managed by local staff but also worked with a programme team member in action learning style 'supervision'. While local development workers undoubtedly drove the work forward in sites where they were funded, they still remained part of local systems and were inevitably 'participating in the way things changed over time'. Equally, team members found themselves being drawn into local systems and being viewed as members (and are still being informed of developments and work months after the programme ceased!). Partly this stemmed from a deliberate aim to work side-by-side with sites and not take a role of 'parachuted-in' expert, and partly from a lack of development worker in some places, meaning the Programme team took a more hands-on role in developing the work. For example in Somerset, it was tricky to find a suitable development worker who was not overly identified with one or other sub-area or with children's or adult services.

Reflections on our work

Working 'with the grain' as described above meant allowing site work to progress according to local energy and trying to shape events rather than imposing a specific intervention or approach. This produced a rich set of experiences and material that, overall, added a great deal to understandings of transition emerging from other work taking place nationally.[14] It did not, however, produce a clear model or defined approach; rather it offered a glimpse of a number of *elements that add up to potentially helpful approaches to transforming local systems*. After one year of implementation, it became clear that taking all the activity together across all the sites – illustrated vividly in the learning network events – much had been achieved in identifying and trialing elements of an effective local system, but that no single, coherent model of an effective local support system had been created.

We are interested in understanding why the achievements were such a patchwork; what, if anything, did help achieve the aims we set out with, and what got in the way. Law and Mol's view (1995) cited earlier, using the sewing metaphor, is that real achievement is when things hold together and endure at all, given the competing

actors in play and the multiple possible connections and possibilities; that we should focus on partial 'patchwork' connections as a positive exception and explore their nature. From a similar perspective, Bruno Latour (2005, 35) comments that 'what has to be explained, the troubling exceptions [to the norm of change and decay], are any type of stability over the long term and on a larger scale'. The pressures to fragment that our sites faced were essentially the centrifugal pull of each person's agency (its priorities, its internal dynamic, the constraints of agency funding, the 'rules' governing their work with the young people) and individuals' agendas and aspirations, along with the unmediated tensions between young people and their parents/support workers.

What helped hold things together were the approaches, methods and tools outlined in Table 1, especially the central positioning of young people in our approach, both in their position and in supporting their *active* involvement. But this was not straightforward and this section aims to explore what helped maintain the stitching when the 'normal' state would be for it to unravel.

Of course, our 'sites' were each made up of many 'sites, situations, and stories' as Law and Mol (1995) would say. Their thinking helps us acknowledge how only in looking back can we see the 'sewing' that had to go on to make local sense – Weick too sees coherent 'sense-making' as significantly about retrospective work (2001) and this is close to Patricia Shaw's thinking. Actor-network theory views all actors as potential 'mediators' able to do this sewing – and importantly that non-human elements can act to create connections. Essentially the precondition for 'sewing' to work is the *energy* of all actors to energise others. In our sites, the programme team members were purposive actors with local participants, and we enabled resources and nonhuman 'actors' that changed relations, such as funding, local development staff, the 'Statements of Intent' – so people could self-direct or do their own 'sewing'. For them, their various organisational purposes were always there, if only as a backdrop: they could be more flexible in pursuing what they thought was needed to improve things for young people locally. But the programme team was under pressure to stick to the key, time-limited goals of the programme; this produced different connections, creating bursts of energy across sites through the learning networks and at national level through the final programme event.

To explore this further, this section considers *starting points, issues of boundaries, facilitation* and *resources/relationships*, all of which reflect strongly the concerns of complexity theorists discussed earlier.

Starting points

Because sites were already engaged in innovative work on transition, inevitably the LMFN work was wedded to existing local or organisational agendas. This aspect had both positive and negative points. On the whole, people in the sites appreciated our approach in supporting work done or in progress and the additional helping hand offered through programme investment. Work in two sites would have stopped due to lack of funds were it not for the programme. What was harder was to keep a 'pure' approach to LMFN development as initially envisaged. For example, a 'model' of support to young people was in development in London. Trialling this stimulated the support workers to expand their thinking and how they connected to young people, but meant they focused less than we had wanted on extending network membership to draw others into resourcing the model. In the Midlands, local changes

in commissioning and provision were in process so the site decided to focus on local network development for providers, rather than including commissioners. By the end, they saw the need to draw commissioners into the work. But work in the Midlands produced completely new and important links into specialist education; work in London produced contact with numbers of young people not previously in the 'system' and enabled some adult services to begin serving young people positively.

Boundaries

The work on LMFNs encountered many kinds of boundaries and was notable for the ways these intersected. Initially, geography is highly determining. It shapes agencies on the ground, the networks they form and affects the willingness of people to engage: 'how far are you from a motorway junction?' People often seemed more willing to make cross-regional or national contacts than to stray across more local boundaries. This created challenges for the concept of LMFN development. Even with a worker on the ground, it was hard to disrupt established ways of working or create cross-agency links and create the chance for new thinking and conversations. The team found their own involvement as outsiders helped shift established boundaries in some sites; they were able to invite a broader range of people to meet, they were able naively to ignore preset geographic boundaries and get people connected.

This was especially striking in Somerset, where Avon County Council (abolished in 1996) still affects current networks: CUBA ('councils that used to be Avon')[15] continues previous solid connections across North and North-East Somerset, Bath, Bristol and South Gloucestershire. These make sense locally and were very different from the connections across the remaining county of Somerset itself. The LMFN attempted to span both geographies but ended in supporting activities in both separately, making links for all to draw on in project meetings. As Latour comments, in working with people we must

> grant them back the ability to make up their own theories of what the social is made of… no longer to impose some order, to limit the range of acceptable entities, to teach actors what they are, or to add some reflexivity to their blind practice… you have 'to follow the actors themselves', that is to try to catch up with their often wild innovations in order to learn from them what the collective existence has become in their hands, which methods they have elaborated to make it fit together, which accounts could best define the new associations they have been forced to establish. (Latour, 2005, 11–12)

Professional and sector boundaries were also intractable: statutory/voluntary sector; adult/ child clinicians, clinicians/managers, health/social care. The challenge for the work was to accept all these structural barriers to networks but to focus on what could transcend them, what people could do, 'to follow the actors'. For example, despite the complex geographies in Somerset, the team persisted in inviting more and more people to network meetings to expand thinking and connections. This was the only site where a meeting occurred that included people from health, care and education, both providers and commissioners, and from both child and adult branches. This achievement was made explicit in the group and appreciated. People began to see the point of 'widening the circle' (Axelrod, 2000). In the Midlands,

housing joined the list of those involved, though education was never able to attend. System optimisation was never the goal, merely to keep the network dynamic and hopefully growing, linked to the swathe of issues young people were raising about what would enable a fuller life. Of course the variable membership involved in the network in different sites led to very different conversations and action emerging everywhere (despite much the same goals and problems). This, in turn, led to different results, making overall conclusions tricky.

Thus, one key goal, while accepting that networks had to work with boundaries (geographical, administrative and conceptual), was to explore how these boundaries might be pushed into slightly different shapes. Achieving this was easier in the voluntary than in the statutory sector. For example, an adult hospice, with evident anxiety among staff at expanding their traditional clinical roles, began to experiment with respite care for a young person with a life-limiting condition. Doing so meant rethinking the scope, care model and workforce development needs of what 'palliative care' meant for the younger adult as distinct from the older adult. Arguably, the field of palliative care for young adults is new and still being formed; palliative care itself is a relatively new field in clinical terms. Determining these field boundaries was emergent work being negotiated by all the actors in the sites, including by parents and young people themselves. For example, the marginality of this agenda for adult services was vivid: it was hard to get and keep adult service providers involved and even harder to get adult services commissioners (from either the NHS or local government) involved – with a few notable exceptions in all categories. Young people were constantly pushing the boundary of what they felt they should be offered; parents were often trying to conserve what already existed; paid staff were negotiating it all within the context of major changes in funding and structures over the year of the programme. But helping boundaries to become more dynamic, less fixed, (and critically to be perceived as such by the principal players) had also to be a goal in relation to the statutory sector. For example, the unhelpful divide between funding streams in the NHS and in Social Care, between adult services and children's services, needed to be challenged so that at transition shared funding of support could be achieved. Support such as getting out of the home often requires both health and care agencies to collaborate.

Facilitation

We earlier reviewed how 'traditional OD' has been challenged by the complexity theorists and how the latter see themselves the inheritors of the ideas of the 'new science', whereas these have probably helped shape both traditions. The differences end up being most acute in thinking about the following questions for practitioners:

- what should be the role of the change agent? And, where should the change agents focus their attention?
- Should change agents play an instrumental role, bringing special knowledge to the groups with whom they work, and working towards a specific goal? Or should they 'insert' themselves into existing networks and relationships, without explicit goals, but working with the groups to create 'emergent' solutions to the broken elements of a system?

- Should change agents focus on data and structure or would a focus on relationships be more appropriate?

For programme team members working in the sites, these were questions that needed answers because they would affect the style of facilitation, the data to be generated and used, the process techniques to be deployed. However, these questions could not be answered fully or in an a priori fashion. While sites had been agreed, many questions remained about the players and agencies to be involved, the goals that needed to be achieved, the level of facilitator support and even the duration of the programme. The team approached each site with two expectations: that sites should develop an *outcome-oriented statement* of what they would like to see in place at the end of the programme (based on the 'Statements of Intent'); and that sites would receive a *level of support* (facilitation, coordination, development worker, funding) that network members would stipulate and negotiate once they had begun to meet. The 'agenda' for each site would be set by them and, other than the two expectations, team members would respond to whatever emerged from the site. To this extent, team members were to 'insert' or immerse themselves in whatever direction the network members wanted to move and with which their energy was best mobilised. Nonetheless, the programme team facilitators also had an agenda – shared with network members and that was embedded in the 'Statements of Intent'. They also had a client other than the local network members in the form of the sponsoring charity and, through it, the Department of Health, the ultimate funder. All of this was transparent. But it required a certain degree of purposiveness on the part of the programme team. There is then in the development style, something of an oscillation between *insertion in the emergent* and *the instrumentalism of shaping change*. Holding the implicit tension between these two styles was sometimes conflictual, for example in pushing sites to produce material in time for the end of programme event in June 2012, when some were only just beginning to see real progress. However, perhaps this was an essential, perhaps the only way, of supporting change in the conditions we have described.

Resources and relationships

Dedicated worker time undoubtedly helped site work. What was problematic was to find suitable people for a broad, boundary-crossing role, since all of them were already part of the local system in some form. So, in London a team that crossed professional boundaries of health and social care was formed, whereas in East Anglia the key support worker was within the children's hospice. In the Midlands an educational background informed the worker who developed the inquiry about volunteering. Their backgrounds in all cases were strengths but also set some limits on what could be achieved.

Fragmentation was the norm. For example, multiple versions of transition planner tools and of person-centred planning tools are in use – but there is no coherence in what people select or how they use them, and little evidence of agencies linking up to share approaches. In this respect, learning network meetings proved to be extremely popular, being well attended and evaluated. Two sites developed tools, including online and smartphone app, that have been promoted across the sites and nationally through the programme, which may aid future coherence. These tools helped focus

and cement relationships in those sites and are examples of the 'non human actors' discussed earlier.

Conceptual framework emerging from our work

In this part of the paper, we set out the five-part conceptual design that emerged from our work.

First, the aim was to assemble *the whole system in one room*. This aim led us to form a networked group from the individual representatives of the local whole system of health, social care and wellbeing, together with their young people. While our objective was to get a complete representation of the local system in the room, we succeeded only incompletely. 'In the room' is both metaphorical and literal because people seemed to experience maximum energy when assembled in a specific time and place and this energy helped carry through agreed activities between meetings. By getting as much of the system in the room as possible, the explicit aim was to try to fix breaks in the system by working on the *relationships* rather than the structures. After all, it was the 'silo' (that is, functional differentiation) nature of the system that caused a significant part of the breakage. The 'whole' for us included agencies that others did not initially see as crucially involved, for example housing organisations, so that expanding system members' view of the 'whole' became an important task.

The whole system in one room was essentially a *container* within which conversation, with its attendant consensus formation and action agreement, took place. We paid great attention to how the 'container' would function and, when within it, what facilitation styles would be best suited to the groups, to what happened after each event and to how action plans could be followed up. Shaping the conversations that took place within the container depended most, we found, on the ability of an individual or agency to contribute. Those that were most able to *mobilise* resources in support of the statements of intent were generally the most influential (this is not the same as which agency had the most resources – the impact factor was leverage not size). In effect, the container became the locus of leadership and creativity.

Conversation was the principal process that took place within the container. Through conversation – and, in consequence, relationship building – realignment of ideas was effected; common understanding was developed; organisational constraints, such as differing 'rules', were probed; the scope of what might be possible was explored and agreed. There clearly were differences of formal status, but because conversations took place outside 'normal business' and across agencies there was functional parity between network members. Because conversations were purposeful – guided by the statements of intent – and because young people were either physically present or were consistently the focus of attention, emphasis shifted subtly from what action might be constrained by the formal scope of agencies to *what could be done*. Ways were found, entirely through peer conversation, to explore and carry out actions that had not been done before, thereby expanding the boundaries of what might be possible. For example, the 'rules' and scope of a particular adult service charity seemed to preclude the possibility of admitting young people for respite. Through conversation in the container, staff explored how a sister charity had experimented with the admission of young people and other agencies considered how commissioning might help resource the experiment. As a direct consequence of these interactions, the adult service charity successfully tried out a weekend respite stay, learning from others

how to make the environment for the young person appropriate and how to ensure that clinical care needs could be met effectively. Within the container all respected the fact that individuals had to manage their agency boundaries and accountability for resource use, yet conversation and consensus formation enabled these constraints to be pushed against, with the purpose (improving the experience of young people with life-limiting conditions) providing the motivating *raison d'être*. Difference and tension were surfaced rather than avoided and may have been functionally important in maintaining levels of energy in the groups.

The *positioning of young people with life-limiting conditions as central* to the network was an explicit aim of the programme. The intention was that young people would play an active role in the network, whatever their disability. The programme developed a separately-funded work stream for a wide range of capacity-building activities with young people. Some young people already had strong capacity to shape the network and play an active role, through positions with related organisations and charities, or through their own businesses. The consultant team 'offer' helped these and others to further develop their skills/businesses, linking them together and to industry supply chains, providing mentoring opportunities, offering creativity development and tasking them with reviewing project proposals and giving feedback on these. The final programme event for over 200 participants in June 2012 included government ministers, managers, clinicians, commissioners, senior policy staff, academics and charity staff. The active role of young people in every aspect of the event (cochairing, presenting, running exhibitions and speaking) – with their very visible paraphernalia of support (wheelchairs, hoists, oxygen masks, personal assistants and so on) – was emblematic of the power of foregrounding service users. Their presence provided a continuous counterweight to the endogenous pull of 'normal' organisational life, along with the national policy strapline 'no decision about me without me'.

The final element of the conceptual model that emerges from this work is *amplification*. Amplification locally was a critical goal, especially to overcome networks where the whole system was not entirely in the room. Amplification processes, such as high profile events, newsletters, 'ambassadorial' activity and networking, were designed both to promote and attract further adherents. Success rates here were variable, and in some areas, in the limited timescale available to the programme, getting more of the whole system into the room – especially health commissioners and the education sector – proved intractable. We do not think this is a structural problem and feel it would be overcome with more time. At a national level, amplification aimed to promote the learning and innovation created in the local networks to a wider audience of national players and aimed also to attract policy interest.

One of the main vehicles for amplification was the Learning Network: a series of large-group events, partly facilitated through the Open Space approach (Owen, 1997). The events drew in interested individuals from national charities, academics, young people and their parents/carers and others from health and social care agencies with expertise or experience, as well as site participants. Each event was hosted close to/ in a network site and therefore had both a local and a national character.

Learning Network Newsletters helped build a community of people, within and outside the networks – a *de facto* coalition of interest, made visible at the final event in June. The newsletters and other communication products had high design content with innovative features such as cartoons. These became a widely recognised brand feature of the programme. One other element of amplification was a policy paper

launched at a House of Lords reception. In amplification, as elsewhere, young people were active participants, both in terms of shaping the strategy but also as participants who attracted media attention.

This five-part development model emerged tacitly, in a partial and patchwork way. Any coherence that it may have is strengthened through *post hoc* sense-making on our part. There are weaknesses in this, but there are strengths too. One of the strengths is that all elements of the model have been tested and are, with careful consideration, reusable in other areas. One key factor that others should consider, and on which we only partially touch in this article, is *the negotiated and emergent nature of local leadership*. We found that high calibre leadership was critical in helping the work: it was local leaders that helped glue the five parts of the model to each other, to provide legitimacy for network activity and to create at least some chance of sustainability for the network over the medium term.

Concluding comment

Complexity theorists in OD consciously see themselves as opposing 'traditional' OD. However, our development experience here was more nuanced and more of an oscillation between the two, contingent on network context and the degree of momentum in each site. Yet we hope this paper shows that the narrative of what was done, why and what it means has coherence.

Working in a publicly funded programme reinforced the need for accountability and underlined transparency in how we worked. The understandable expectations of linear progress according to a plan had to be balanced by a convincing case for patience in the face of emergent but often uncertain progress. Having in the sponsoring charity's senior managers a client that was patient and did understand emergence was enormously helpful. Nevertheless, we managed a series of tensions in both this relationship and with the networks. We note this here because we believe these tensions are inherent in such situations and need to be managed rather than resolved once and for all.

For the client, it was sometimes difficult to see what pattern was emerging and how the local development was following the plan. It would have destroyed the energy, ownership and creativity of the networks for us to have transmitted anxiety about progress and its shape by being more directive. This produced another set of more intrinsic, endogenous tensions that triangulated time, goals and emergence. But these tensions were apparent among all three players: networks, client and within the programme team itself and were sometimes experienced conflictually.

Using existing energy as a key selection criterion for sites meant that we had our team members 'insert' (as Shaw, 2002 would say) themselves into emerging changes in each locality. But we also played our part to shape the direction in which the energy might move. We did this with the expertise, data and resources that we brought to each network, reflecting a positioning more proximate to traditional OD. Both we and the network increasingly converged on the overriding goal of improving the (short) lives of young people with life-limiting conditions. Each network adopted different strategies and aimed for different outputs but their overriding goals were ultimately aligned. The oscillation between the emergent and the goal-oriented was constant and the outcome not always clear to see.

Although the five-part model described above has benefited from *post hoc* reasoning, our reflective practice *en route* as a team helped us gain perspective on what was happening – the first appearance of the model as a point of discussion was just a few weeks after the start of the site work. The details and connections were not clear and the model lacked sufficient granularity but without it we, the programme team, would also have been working entirely emergently and this was not the case. The model, even in its undeveloped state, was important in the architecture of our activity between May 2011 and June 2012.

Our experience shows that the five elements must be addressed as a coherent model in order to change local systems. The insights of actor-network theory also reinforce the importance of viewing such networks as dynamic and largely self-determining: the task for OD practitioners is to describe and so come to understand the 'distributed, variegated, multiple, dislocated [action which otherwise] remains a puzzle for the analysts as well as for the actors' (Latour, 2005, 60). It was helpful, then, as practitioners, to recognise that in actor-networks the achievement is when things hold together at all.

Notes

[1] The programme was sponsored by Marie Curie Cancer Care with funding from the Department of Health. We would like to thank for their support and understanding during the programme and in the writing of this paper: Gerry Mahaffey, Assistant Director Carers' Services, Patient and Family Engagement and Programme Lead at Marie Curie Cancer Care, Dr Louise Jones, Clinical Senior Lecturer and Head, Marie Curie Palliative Care Research Unit UCL (Acting Head of Research for Marie Curie Cancer Care during the Programme) and members of the Advisory Group chaired by Dr Jones, who supported the Programme.

[2] The term 'life-limiting conditions' is used in children's hospices and in palliative care to mean children and young adults whose condition means they are unlikely to live a full adult lifespan, and possibly may not reach adulthood. It is used here for its specificity therefore, though we acknowledge it is a term often rejected by young people themselves in favour of 'complex health needs'.

[3] In 2010 the Department of Health committed £30m to a children's palliative care programme that produced a huge range of initiatives of which this Transition programme sponsored by Marie Curie Cancer Care was one. See www.30millionstars.org.uk

[4] The PublicServiceWorks team (the authors with Marsaili Cameron, Pauline Cross, Maria Duggan, Roma Iskander and Jud Stone) had varied professional backgrounds (policy, research, management, large group facilitation, social work, local government, voluntary sector, health – see www.publicserviceworks.com) but broadly shared an 'organisation development' (OD) tradition, with its roots in systems thinking and development-through-engagement but more recently influenced by dialogical methods.

[5] The age at which 'transition' is required varies with organisation and sector, from 16 years (age that young people are automatically treated on adult wards in NHS hospitals to 25 years (age at which some children's hospices and some specialist health services

require young adults to move on to adult services. Others require this at various points in between, eg at 18, 19 or 21 years.

[6] Comment in programme evaluation survey May 2012

[7] Newcastle took a different approach to their issue from other sites: they used their experience and learning in creating specialist provision for young people by producing a publication for wide distribution 'Living longer than you thought I would', and as a consequence regular site meetings were not held in the same way.

[8] See useful overview by Cheung-Judge and Holbeche (2011)

[9] In what has become a classic OD text, Warner Burke (1987) defines organisation development as 'a planned process of change in an organisation's culture through the utilization of behavioural science, research and theory'

[10] For example, OD practitioners and writers like Margaret Wheatley (1999) and the leading thinkers at Hertfordshire Business School (such as Ralph Stacey and Patricia Shaw) were deeply influenced by the ways of thinking emerging from the so-called 'new science'.

[11] For example Ilya Prigogine whose finding that apparently unstable and apparently disordered systems (or systems at the edge of order) actually had a self-organising driver could lead to a more optimistic view of nature and led non-scientists to turn an interested eye to his ideas in the 1970s and after. Prigogine himself was keen to get his ideas across to a non-scientific audience and positioned his ideas in a broader philosophical context (1980).

[12] See Dialogue – a proposal by David Bohm, Donald Factor and Peter Garrett.   www.david-bohm.net/dialogue/dialogue

[13] See Shaw (2002), in which this notion of 'insertion' is further developed.

[14] For legacy material from the programme see www.mariecurietransitionprogramme.wordpress.com

[15] See http://en.wikipedia.org/wiki/Avon_(county)

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