



Exploring law enforcement and public health (LEPH) as a collective impact initiative

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Tasmanian Institute of Law Enforcement Studies (TILES)

Partnership between University of Tasmania and Tasmania Police (DPFEM)

Established 2002 /2003

Mission: To conduct and promote evidence-based research to improve law enforcement and public safety

Research 'on', 'for' and 'with' police

Professionalisation of policing

- Research + education of police

Themes areas: Forensic Studies, Vulnerability and Policing, LEPH



website: utas.edu.au/tiles



Outline

Global LEPH Network – identify city ‘laboratories’

- Hobart
- describe and monitor implementation of new models in city ‘labs’

Collective impact initiative

- key components
- e.g. Saskatchewan model
- Begin by developing a shared definition and understanding of the problem

Current models (Partnerships and collaborations)

- IAST, TEIPP, MHDL, CMD, ‘Joined Up’ services, Safe Families
- Strengths and weaknesses of existing models

ATDC Workshop May 2016 – comments

Next steps – TILES Discussion Paper – for comment – workshop early 2017.

Global LEPH Network

Global LEPH Network – identify city ‘laboratories’ i.e. cities that are energetically tackling issues at the interface of policing and public health (Monique Marks and Jennifer Wood)

- Hobart, capital of Tasmania (an Australian state)

Objective 4: Use the city as a site to bring people together for a regional LEPH symposium to:

- develop a shared understanding of the problem
- develop a shared understanding of current efforts to tackle the problem covering the perspectives of relevant local actors involved in innovation
- develop a shared understanding of the challenges associated with the above efforts, covering the perspectives of relevant local actors
- jointly identify and critique recommended ways forward for addressing the above challenges
- produce a case study document and present at the subsequent global LEPH conference (describe and monitor implementation of new models in city tories)

Tasmania: the context

Tasmania has a small population, high numbers of older people and is the most disadvantaged state in Australia according to key socio economic indicators.

In last few years, budget cuts have reduced staff in human service delivery.

Interplay of social disadvantage and multiple and complex needs accounts for a significant number of people presenting to human services.

Complexity of problem and need results in a multiplicity of service delivery points for a single person.

There have been many reforms to parts of the human services system, a key driver is the recognised need to break silos and enhance collaboration.

- often led by Police as the lead agency (sometimes led by Health)
- increased recognition among practitioners and managers of the need for better inter-agency collaboration

Existing collaborations

A significant number of collaborative programs currently in existence in Tasmania:

- Inter-Agency Support Teams (IASTs)
 - identifying young people 'at risk of entering the justice system (Police led)
- Tasmanian Early Intervention Pilot Program (TEIPP)
 - targets people under the age of 18 who have been apprehended by Police in possession of alcohol or misbehaved under the influence of alcohol (Police led)
- Mental Health Diversion List (MHDL)
 - diverts eligible offenders; detailed Treatment Plan involving therapy in the community
- Court Mandated Diversion (CMD) Program
 - diverts eligible offenders into drug treatment
- Joined Up Human Services project
 - joined up approach to human service delivery (Health led)
- Safe Families
 - data sharing for family violence risk assessment (Police led)

Existing models – strengths and weaknesses

Identified through program evaluations (e.g. IASTs, TEIPP)

Strengths

- collaboration
- information-sharing
- communication
- shared focus/agenda
- improved case management
- trust and respect developed between agencies and participants

'invaluable opportunity to foster and extend my network to collaboratively address multi-faceted issues for at risk youth and their families' (Devonport stakeholder)

'work collaboratively with various govt and non-govt agencies to provide early intervention strategies to assist or prevent youth at risk of entering the justice system. To discuss ideas and community services knowledge to provide opportunities to the youth and improve their life/education/housing outcomes' (IAST stakeholder)

Existing models – strengths and weaknesses

Weaknesses

- lack of senior management support
- irregular attendance by some stakeholders
- lack of involvement from NGOs
- lack of business rules
- need for a full time liaison person to work with all agencies
- lack of demonstrable impact
- lack of agreement on performance indicators
- inconsistent follow-up on cases
- predominance of police as key agency
- siloed funding/budgets

Goal - To find a better collaborative model for the integration of law enforcement and public health

- collective impact initiative

The Collective Impact concept

1. 'Collective Impact' – Kania & Kramer, 2011, *Stanford Social Innovation Review*
2. 'Large scale social change comes from better cross sector coordination rather than from isolated intervention of individual organisations'.
3. Especially relevant for 'wicked' problems
4. Isolated impact = competition
5. Five conditions of collective success



The Saskatchewan Model

1. 2009-2010
2. Recognition that law enforcement-based solutions & budget allocation was not working
3. Reallocation of (same) resources
4. Inter-ministerial commitment
5. Crime prevention/crime reduction
6. High speed identification of cases and case management (24-48 hours) – meetings twice weekly
7. Embedded data collection and evaluation
8. Impact on calls for service and decline in crime rates
9. ‘Hubs’, with exemplary models (Prince Albert, Winnipeg, etc) – dedication of 1 FTE from each agency for each hub
10. Spreading across the nation

Collective impact initiative

Moving beyond partnerships and collaboration

‘The Collective Impact approach is premised on the belief that no single policy, government department, organisation or program can tackle or solve the increasingly complex social problems we face as a society. The approach calls for multiple organisations or entities from different sectors to abandon their own agenda in favour of a common agenda, shared measurement and alignment of effort. Unlike collaboration or partnership, Collective Impact initiatives have centralised infrastructure – known as a backbone organisation – with dedicated staff whose role is to help participating organisations shift from acting alone to acting in concert’.

Taken from: <http://www.collaborationforimpact.com/collective-impact/>

- Begin by sharing the idea of a possible future
 - my conversation with Police Commissioners

ATDC Conference Workshop

Begin by

- developing a shared definition and understanding of the problem and a shared understanding of current efforts to tackle the problem and the challenges associated with the above efforts
- jointly identify and critique recommended ways forward for addressing the above challenges

ATDC Workshop – National Conference - May 2016 – comments
Alcohol Tobacco and other Drugs Council – peak body

Purpose:

To find a better collaborative model for the integration of law enforcement and public in the AOD sector

Panel members: Debra Salter (DPEM), Mathew Healey (DHHS), Michael Voumard (Anglicare)

Participants – round table discussions

ATDC Workshop – Discussion points

Mapping exercise essential to know who is doing what and where: many agencies do not know what they are doing internally (staff working in silos) or what external agencies do either (agencies working in silos). As a result, a lot of collaboration that SHOULD happen is NOT happening because of ill-placed expectations in other's agencies and core businesses -> important to have a clear definition of agencies' roles, responsibilities and duties. It also means that there is a need to map the relevance of each agency towards each other (almost like a network analysis).

Centralised data gathering is crucial

Important for structure (1 or 2 FTEs) to support local and state initiative, LE & PH cannot happen without (top-down) organisational support and resourcing. Budget is a sign of institutional commitment, and will support initiatives.

Silo agency funding is problematic and an obstacle to any LE&PH effort, and should be issue-based instead.

In acknowledging that any LE&PH initiative should be comprehensive of shared outcomes for all agencies involved, there is a need to be clear as to who does what and how, otherwise there is competition as to core businesses, clients, and budgets (the issue of resourcing is really an issue of competition).

Important to reduce this issue of competitiveness

Higher governance is needed, to get more significant commitment from government so that initiatives are supported – this means that any initiative needs to be embedded in policy and evaluation

Next steps

Next steps – TILES Discussion Paper – for comment – workshop early 2017.

- a state-wide consultation about the nature of current law enforcement / public health initiatives and various possible paths forward by way of a discussion paper.
- Community members, heads of agencies and specialist (social, justice, forensic) frontline workers will be invited to respond to the discussion paper.
- an early 2017 state-wide multi-disciplinary workshop on law enforcement and public health, with discussions from various government areas (and perhaps, even a public discussion amongst key political leaders).
- Possible regional LEPH symposium with international keynote speakers.



Thank you

ANZSOC Conference
Hobart, 29 Nov – 2 Dec 2016
<http://www.anzsoc2016.com/>

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