



INTRODUCTION

- Collaboration and coordination across interprofessional teams is integral to school mental health.
 - It maximizes the range of expertise across professionals, helps garner resources for youth, and supports participating professionals' development (Mellin & Weist, 2011),
- Yet, little guidance on supporting and sustaining interprofessional collaboration at a state level exists.
- This presentation shares lessons learned and discusses the potential for Social Network Analysis to be used to identify ways in which a collaborative can be more strategic in its development and activities through measuring membership characteristics.

CURRENT STUDY

- Thirty-three school-serving organizations across Colorado were funded in 2016 to develop a state-wide collaborative.
- The aims of the collaborative are to
 - support schools and districts—statewide—to implement the Whole School, Whole Community, Whole Child (WSCC) model
 - help schools support student comprehensive health and wellness needs
 - improve the alignment of resources the state-level system providers provide to schools/districts
- In effort to develop a sustainable statewide collaborative that would be likely to achieve its aims, attention to collaboration building has been fundamental to its development.
- Among other strategies for collaboration building (e.g., monthly in person meetings, establishing workgroups, shared vision, strategic plan and roadmap), this statewide team also measures its membership.
- The current study focuses on the use of a membership survey and Social Network Analysis for enhancing understanding of the collaborative, it's membership, and services provided.

METHODS

A Social Network Analysis (Cross, Borgatti, & Parker, 2002) was used to visualize our statewide collaborative. A 15-item survey was developed and administered by the collaborative in the beginning of its 3rd year. Twenty-six (81.2%) organizations completed it. The social network map was developed using Kumu, an online network mapping platform (Kumu relationship mapping software, 2019), to visually display indicators such as, the relationships between members, types of services, areas of expertise, and other organizational characteristics the collaborative identified as important to measure.

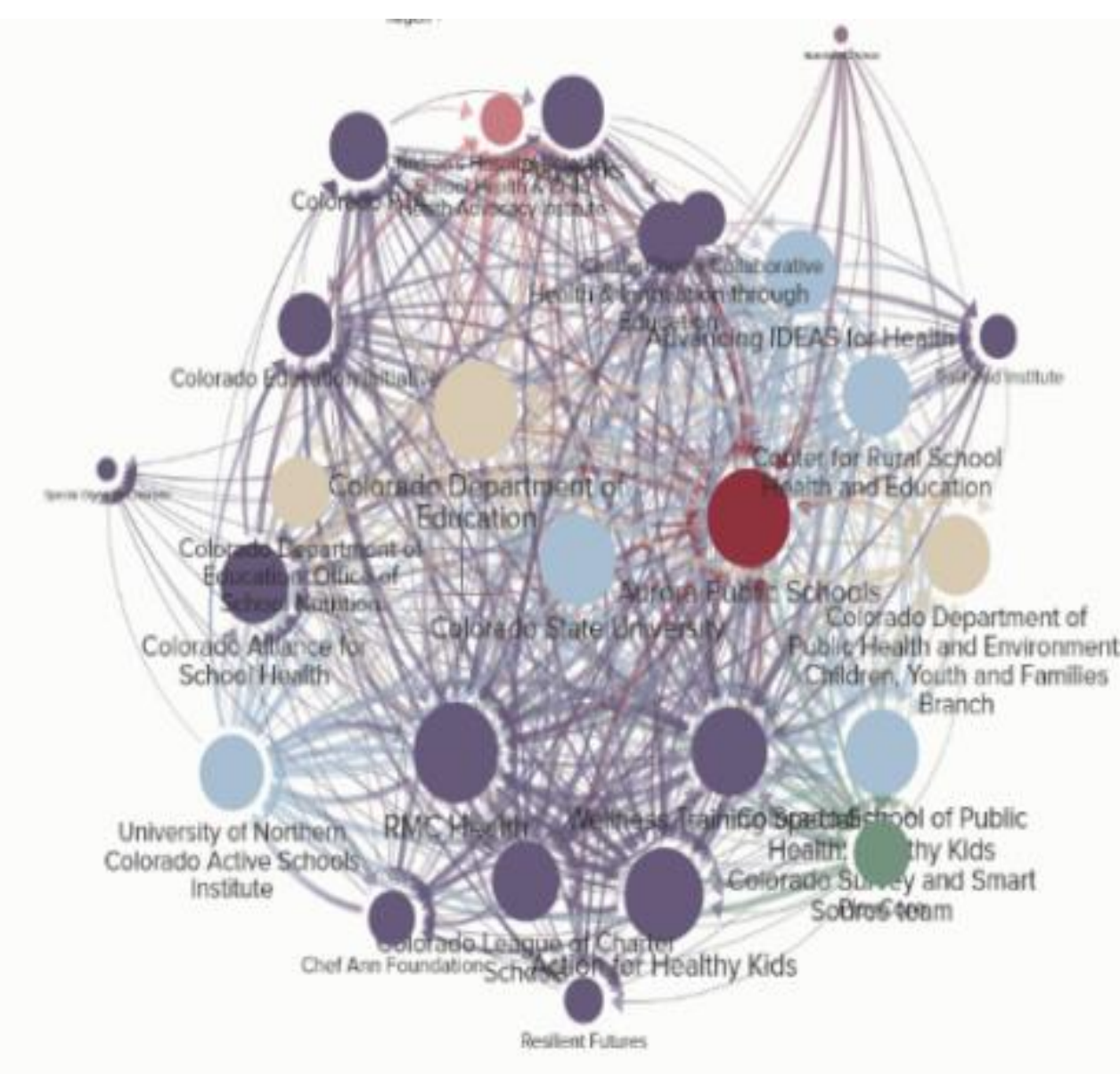
This network map allowed us to filter different variables for the collaborative to further understand itself, including membership based on sector, geographic regions it provided services to schools/districts, identified areas of expertise and areas of growth. These were examined to identify gaps in membership, services provided, and relationships to enhance collaboration and support the team's initiatives.

RESULTS

The following three maps, organizational sector, geographic regions of provided services, and areas of expertise, are filtered views of the network map. The findings of each map view are below.

Organizational Sector

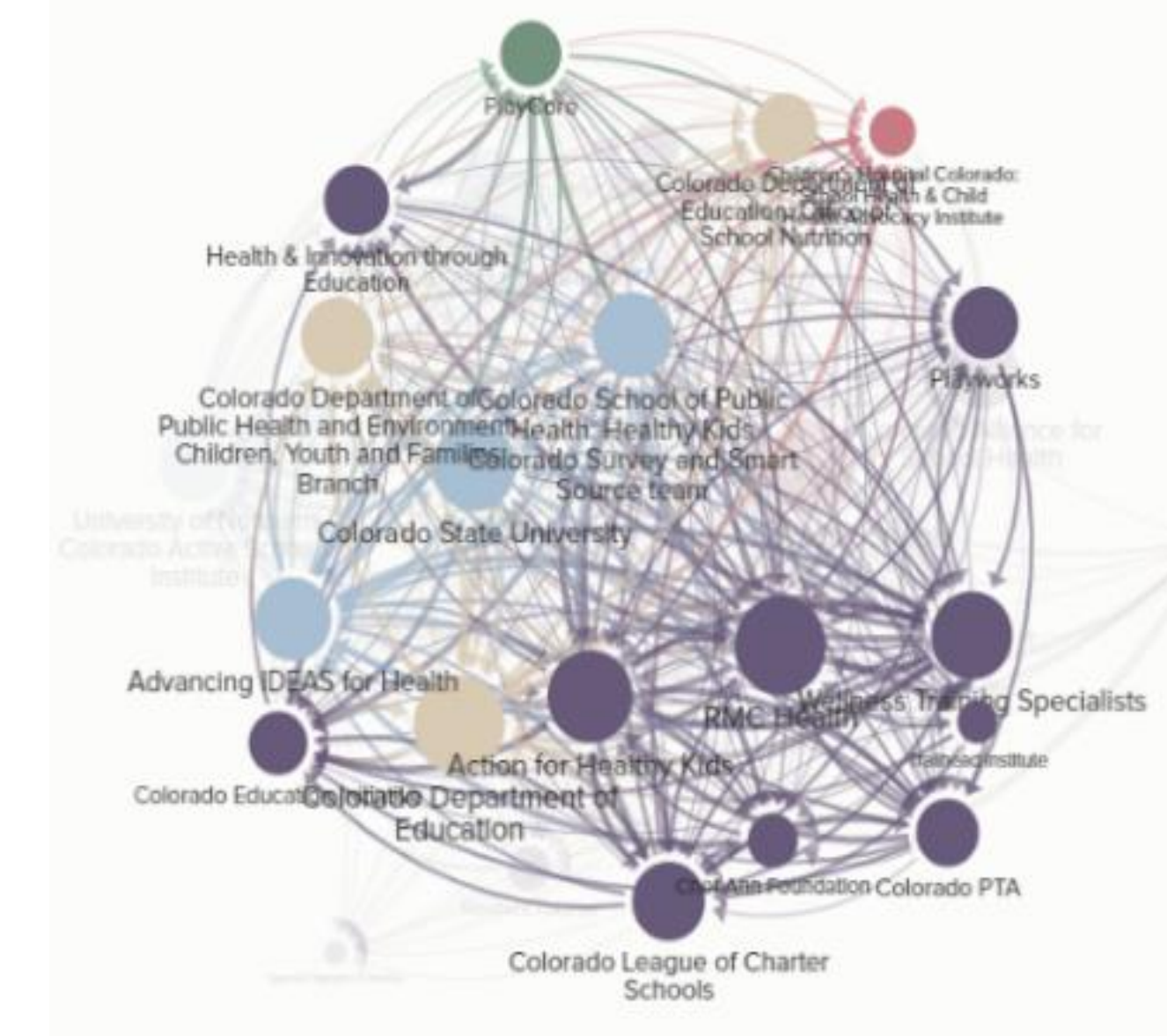
- Non-profit: n=15 (57.7%)
- University: n=5 (19.2%)
- Government Agency: n=3 (11.5%)
- Business: n=1 (3.8%)
- Public School District: n=1 (3.8%)
- Charter School Network: n=1 (3.8%)
- Healthcare Provider: n=1 (3.8%)



Data show (1) strong representation by non-profit organizations, as well as, across our universities and state agencies and (2) further engagement of business and healthcare sectors may be important.

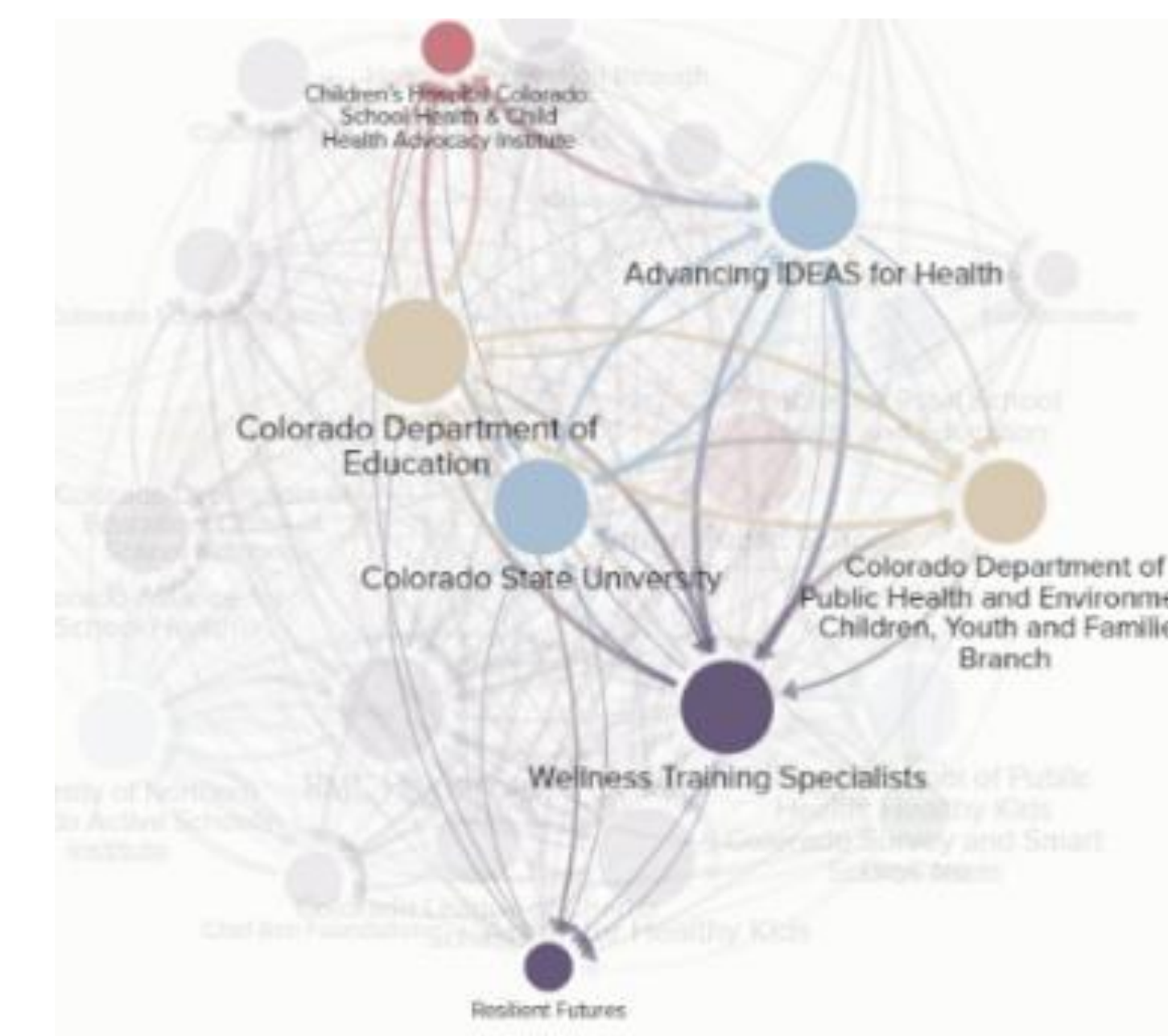
Services Provided Across Colorado

- Statewide: n=18 (69.2%)
- 5 Metro Area: n=5 (19.2%)
- North Central: n=1 (3.8%)
- Southeast Area: n=1 (3.8%)
- West Central Area: n=1 (3.8%)



Data showed that the collaborative identified a majority of its member organizations were providing services to schools/districts statewide. One-third of organizations reported serving a specific geographic region of the state, with the majority of those being the Denver metro area.

Areas of Expertise



- Physical Activity: n=12 (46.2%)
- Implementing the WSCC: n=10 (38.5%)
- Comprehensive Health & Wellness: n=10 (38.5%)
- Behavioral Health: n=7 (26.9%)
- Policy: n=4 (15.4%)
- Health Services: n=2 (7.7%)

Out of 12 areas of expertise, data suggests organizations report greatest expertise in physical activity and policy and health services were areas with least expertise within the collaborative. Despite funding for the collaborative requiring supporting the implementation of the WSCC model and advance evidence-based practices in comprehensive health and mental health, these areas were only endorsed by 1/3 of the organizations in the collaborative.

IMPLICATIONS

Organizational Sectors

- Understanding the proportions of organizational sectors present can increase awareness of
 - which sectors are represented in the collaborative
 - what gaps exist
 - what sectors may want to be engaged.

Services Provided Across CO

- Understanding the regions in CO where services are being provided can
 - increase awareness of regions in need
 - increase alignment of services
 - can decrease duplication of resources to schools.

Areas of Expertise

- Understanding the collaborative's areas of expertise can increase
 - awareness of the organizations that can provide knowledge and resources in that area
 - awareness of the areas that may need further organizational representation.

CONCLUSION

- Research has indicated that effective collaborative and cross-sector coordination improve the effectiveness of the collaborative and its impact on systems change (Kania & Kramer, 2011).
- Utilization of the map has been lower than anticipated due to challenges we have faced.
- Challenges include
 - Changes in organizational membership and funding
 - Members' unfamiliarity with how to use Kumu's platform.
- To increase the use of the current map and future maps, further discussions about the potential benefits a network map and the specific ways in which we want to use the map to support our work are needed.

REFERENCES

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