



# FOSTERING SYNERGY:

## Enhancing Children and Youth Outcomes through Collaboration Across Human Service Organizations



Insights from the Regina Intersectoral Partnership (TRiP)



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“I know it brought me and my daughter closer while being in TRiP” [PWLE19]



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## DECLARATIONS

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The opinions and interpretations in this report are those of the research team and do not reflect those of CIHR or SHRF. This project has been approved on ethical grounds by the University of Regina Research Ethics Board on May 4, 2023. All images featured in this report are courtesy of Unsplash.com.



# LIST OF ACRONYMS

**TRiP** The Regina Intersectoral Partnership

**PS** Policy Makers and Service Providers

**MOU** Memorandum of Understanding

**I&RO** Intake and Referral Officer

**C<sup>4</sup>** Coordinated Custom Case Conference

**ARTO** Assessment of Risk to Others

**11UI** '11 and Under' Initiative

**YMCA** Young Men's Christian Association of Canada

**PWLE** Persons with Lived Experience

**VTRA** Violence Threat Risk Assessment

**SHA** Saskatchewan Health Authority

**ICT** Intersectoral Collaboration Team

**RTSIS** Regina Treaty Status Indigenous Services

**ADHD** Attention Deficit Hyperactivity Disorder

**YWCA** Young Women's Christian Association of Canada

**ECIP** Early Childhood Intervention Program



# BRIEF SUMMARY

Access to services and supports for children and youth in vulnerable contexts remains a key challenge in Canada due to fragmented service delivery systems. Cross-sectoral collaboration has proven to be an effective strategy to overcome existing silos through providing wraparound coordinated services, and a means to promote healthy development and safety of children. Given the challenges associated with establishing and sustaining cross-sector collaborations, including coordination issues and conflicting interests of the sectors involved, our study used TRiP (The Regina intersectoral Partnership) as a case study to explore the dynamics of this collaborative initiative. TRiP is a collaboration across six human service organizations to improve outcomes for children/youth in vulnerable contexts, which has been functioning in Regina, Saskatchewan since 2010.

Our research aimed to investigate the emergence, formation, and evolution of this cross-sectoral collaboration; factors influencing collaboration and service coordination across sectors; and the processes and structures involved in establishing and sustaining robust collaborative initiatives. By drawing on interviews with stakeholders from six human service organizations engaged with TRiP (n=25), and persons with lived experience (n=20), observations, and document reviews, the research team identified factors influencing collaboration and service coordination across sectors. We also examined the governance, process of coordinating services across sectors, funding structure, and accountability mechanisms within TRiP.

Our research findings are categorized into four key themes: 1) achievements and outcomes, 2) factors contributing to success and sustainability, 3) perceived gaps and areas for improvement, and 4) suggestions for improvement. Many caregivers and children interviewees pointed to the significant *achievements and outcomes* accomplished by TRiP since its conception, including: the positive outcomes to the safety and well-being of children; and the positive outcomes experienced by the caregivers, including a nurturing support, improved child-caregiver relationships, and better access to support services. Participants identified a host of *factors contributing*



to the success and sustainability of TRiP including: having a shared vision to guide the direction of TRiP; continuous growth and evolution of the initiative; the leading role of champions within the initiative; the sharing of information between sectors and stakeholders; having a dedicated and single point of contact between TRiP and its clients; and TRiP's ability to act as a conduit for effectively communicating with various human services organizations. Participants also identified several *areas for improvement* within TRiP, including: chronic resource limitations; administrative hurdles associated with information sharing; ongoing siloing of sectors engaged; TRiP's limited public presence; and limitations to clients in the form of age-restricted supports and disrupted continuity of care. Finally, participants provided *suggestions for improvement* to guide the continued refinement and evolution of TRiP, including: adoption of a proactive rather than reactive approach; enhancement of TRiP's visibility in the public; revitalization of TRiP's current system of governance; strengthening TRiP's accountability mechanisms; establishing cohesive and unified definitions and measures of success; enhancing staff retention; and expanding the range of support opportunities for children.

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# EXECUTIVE SUMMARY

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**Introduction:** In Canada, addressing the challenges faced by vulnerable children and youth, particularly those with mental health conditions, is hindered by fragmented service delivery and lack of collaboration across sectors. This results in poor academic performance, low graduation rates, substance use, physical health issues, and increased involvement in social assistance, child welfare and the justice system. A 2019 survey in Saskatchewan revealed alarming rates of depression-related symptoms (38%), suicidal thoughts (23%), and self-harm (21%) among 10,500 Grade 7-12 students. While cross-sectoral collaboration has proven effective in overcoming existing silos by providing wraparound coordinated services and promoting healthy development and safety of children/youth, challenges persist in establishing and sustaining such collaborations.

Our study examines TRiP (The Regina intersectoral Partnership), established in 2010 in Regina, Saskatchewan, as a case study to explore the dynamics of this collaborative initiative. TRiP coordinates support services for vulnerable children/youths across six organizations: (1) Saskatchewan Health Authority; (2) Regina Public School Division; (3) Regina Catholic School Division; (4) Ministry of Corrections, Policing & Public Safety; (5) Ministry of Social Services; and (6) Regina Police Service. TRiP facilitates connections and referrals between institutional and community settings, providing diversified and integrated support services. Our research aimed to investigate the emergence, formation, and evolution of TRiP, factors influencing collaboration across sectors, and the processes and structures involved in establishing and sustaining robust cross-sector collaborations. Additionally, we examined governance, organization, delivery of coordinated services, funding structures, and accountability mechanisms. Unlike traditional impact evaluations, our focus was on generating insights applicable to similar collaborative initiatives at local and national levels.

**Methods:** We used multiple qualitative data collection methods, including interviews, document reviews, and observations. A total of 25 interviews were conducted with policy-makers and service providers from six sectors engaged with TRiP between May and August 2023, all via Zoom. Additionally, 20 in-person interviews were held with children, youth, and caregivers between June and October 2023. Written consent was



obtained from all interviewees, and all interviews were audio recorded and transcribed verbatim. To enhance data validity, we reviewed TRiP's internal and external documents such as their Functioning Process document, evaluation reports, and website content. The project lead also attended four key meetings including an iCT (intersectoral Collaboration Team) meeting, a C<sup>4</sup> (Coordinated Custom Case Conference), a TRiP team meeting, and a Steering Committee meeting. A qualitative thematic framework analysis, comprising six steps, was employed for data analysis: (1) data familiarization, (2) initial code development, (3) revisiting initial codes, (4) identifying patterns and categories across data, (5) generating an initial list of categories, and (6) reviewing, revising, and refining the categories and sub-categories.

**Findings:** The research findings are organized into four broad themes: (1) achievements and outcomes of TRiP; (2) factors contributing to the success and sustainability of TRiP; (3) perceived gaps and areas for improvement within TRiP; and (4) suggestions for the improvement of TRiP.

## 1. Achievements and Outcomes

The findings suggest significant positive impact of TRiP's initiative on persons with lived experience, including children/youth and their caregivers, as reported by both groups.

**1.1. Child-Reported Outcomes:** Children and youth credited TRiP for fostering personal growth and development as it provides a safe environment that encourages learning. Through TRiP, children reported access to diverse pro-social activities, offering fun opportunities for physical exercise, and safe social interaction with peers. TRiP support workers, serving as both supervisors and positive role models, contributed to the children's trusted sources of support, motivation, and guidance, facilitating the adoption of healthy behaviours.

**1.2. Caregiver-Reported Outcomes:** Caregivers considered TRiP a valuable, dependable support system for both emotional and tangible assistance. They highly appreciated assigned case managers for their accessibility and prompt, meaningful responses to concerns, contributing to an overall sense of comfort. Caregivers emphasized that these relationships extended beyond professional roles, fostering deep connections based on trust, mutual understanding, and genuine care. They reported that TRiP contributes to improved caregiver-child relationships and helps families navigate care and support systems, accessing additional benefits and services. Many acknowledged TRiP's crucial role in identifying and addressing the root causes of their child's behaviour.



## 2. Factors Contributing to the Success and Sustainability of TRiP

The analysis of interviews with policy-makers and service providers (hereafter stakeholders) and persons with lived experiences revealed various factors contributing to TRiP's success and sustainability. Stakeholders identified four factors: a shared vision; continuous growth and evolution; champions; and information sharing. Persons with lived experience identified two factors: a dedicated point of contact; and a conduit for communicating with other service providers.

**2.1. Having a Shared Vision:** Stakeholders recognized the importance of aligning all involved parties towards a shared vision and goal, emphasizing a consensus on improving outcomes for vulnerable children/youth and their families. In instances of conflicts arising from differing expectations, stakeholders noted the importance of the shared priority - to ensure that children safety and well-being come first - as a strong foundation for effective conflict resolution.

**2.2. Continuous Growth and Evolution:** Over time, TRiP's fundamental goal has remained the same: coordination of its stakeholders to ensure the safety and well-being of children and youth. Stakeholders observed TRiP's priorities evolving from addressing youth needs to adopting a more comprehensive approach that considers the needs of their families. The scope has also expanded from serving children aged 11 and younger to those up to 18.

**2.3. Champions:** Champions, who are passionate advocates for a specific cause, have played a significant role in establishing and sustaining TRiP, as highlighted by our findings. Deviating from institutional norms and status quo, champions display high motivation and a strong belief in the need and merit of the cause. During the initial stages of establishment, champions faced challenges garnering support across sectors, with stakeholders acknowledging the mental and emotional toll of championing initiatives like TRiP. Stakeholders recognized that not everyone is poised to be an effective champion and it requires accepting new responsibilities, and accountability for the initiative's success. Being an effective champion demands navigating uncertainty, taking a leadership role to forge a new path, and embodying vital characteristics identified by stakeholders.

**2.4. Information Sharing:** Stakeholders valued TRiP's shared information system, utilizing a consent-based approach that allows unrestricted information exchange across sectors. Consent is obtained during intake from caregivers or legal guardians and once a consent form is signed, internal information sharing among stakeholders is facilitated. Stakeholders highlighted that this streamlined consent



process enhances information access, benefiting both stakeholders and families. The collaborative information-sharing arrangement eliminates the need for families to navigate the human services systems alone, enabling tailored service direction and coordination by TRiP's stakeholders.

**2.5. Dedicated Point of Contact:** Several caregivers noted the significance of a consistent case manager as their central contact in TRiP, streamlining communication and reducing the need to navigate multiple channels for information. For many caregivers, staying informed and accessing relevant resources became more efficient once connected with their dedicated TRiP contact. Caregivers also appreciated how it helped avoid the discomfort, violation, and trauma associated with repeating their personal stories to multiple contacts. The dedicated point of contact was praised for understanding and prioritizing caregivers' needs. Caregivers expressed that TRiP relieved them from the overwhelming task of managing all aspects of their child's life alone, offering much needed assistance and breathing room.

**2.6. Conduit for Communication with Human Services Organizations:** Caregivers appreciated TRiP for facilitating seamless communication with service providers from different collaborating organizations. Independent attempts by caregivers to establish these channels were time-consuming and challenging, requiring separate contact with each provider. TRiP acted as a conduit between child/youth and caregiver and their service providers, simplifying information sharing and coordination through established and varied communication channels.

### 3. Perceived Gaps: Areas for Improvement

Stakeholders and persons with lived experience identified recurring challenges in effective partnership implementation: limited resources; delays with information sharing; difficulties in breaking down silos; limited community presence; and issues related to continuity of care.

**3.1. Resource Limitations:** The most frequently discussed barrier was chronic underfunding, exacerbated by TRiP's struggle to attract new funders, particularly from provincial government agencies. Stakeholders noted challenges in allocating time by frontline staff to the initiative due to different sector demands and difficulty aligning contributions with TRiP's unique requirements. High turnover and transiency were deemed detrimental to the initiative's sustainability. These resource constraints impacted persons with lived experience, with caregivers raising concerns about the lack of a comprehensive approach to meet diverse family needs. Prolonged wait



times in the referral process were highlighted by many caregivers.

**3.2. Challenges with Information Sharing:** TRiP's current information sharing practices were criticized due to challenges in requiring information sharing agreements and privacy impact assessments for linking datasets, emphasizing the importance of privacy protection. Another challenge involves obtaining and implementing consent for information sharing. Stakeholders noted difficulties aligning TRiP's individual consent with other agencies' protocols, hindering seamless collaboration.

**3.3. Ongoing Siloing:** Despite significant strides, differences in approaches stemming from cultural and organizational norms still exist, impeding seamless collaboration in TRiP. Stakeholders expressed concerns about the absence of structures to hold individuals accountable within TRiP. Some stakeholders identified barriers such as a lack of commitment and understanding among involved individuals and agencies, as well as inherent challenges in teamwork due to differing perspectives, biases, and professional backgrounds. Unequal engagement and commitment among different agencies were identified as significant challenges.

**3.4. Limited Public Awareness:** Another significant challenge identified was TRiP's limited public presence. Stakeholders and persons with lived experience noted that many individuals are unaware of TRiP's referral process and coordinated supports. Stakeholders stressed that increased public awareness might prompt politicians to allocate more resources to TRiP, but cautioned about the delicate balance between raising awareness and substantial strain on existing resources. Many caregivers discovered TRiP only upon an agency referral, limiting their ability to utilize the initiative's self-referral process perhaps sooner. Even engaged families lacked clarity on TRiP's scope and mandate, which may contribute to fear and stigma around engaging with TRiP. Several youths expressed anxiety or distress about engaging with TRiP due to misconceptions about the initiative being specifically intended for 'bad and troubled' kids.

**3.5. Age-Restricted Supports and Continuity of Care:** Recognizing that TRiP does not deliver services, rather bridges access to currently delivered programs and services in the community, age restrictions on services provided by sectors was identified as another challenge. Caregivers expressed frustration in finding suitable resources for children under 12, noting that many available services were primarily geared towards adolescents and youth. The data analysis suggests a need for a careful balancing between reliable continuity of care and recognizing that the



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support and programming required by children will vary during transitions from childhood to adolescence/youth to adulthood.

## 4. Suggestions for Improvement

Both stakeholders and persons with lived experience provided several suggestions for improvement: adopting a proactive mindset; enhancing visibility; revitalizing governance; enhancing accountability; addressing staff retention; and more support opportunities for children.

**4.1. Adopting a Proactive Approach:** Caregivers emphasized the need for a shift from a reactive to a proactive approach in allocating resources and support services, citing a current emphasis on immediate concerns, at the expense of building caregivers' capacity. Some suggested that TRiP's existing support services do not necessarily promote self-sufficiency, and may lead to over-dependency, impeding families' ability to compensate for the loss of these services after phasing out of the initiative. Suggestions to address this challenge included connecting caregivers with professional prevention programs for specialized knowledge and guidance, enabling them to navigate developmental milestones more effectively. However, the findings also illuminated challenges TRiP faces in pursuing a proactive agenda.

**4.2. Enhancing TRiP Visibility:** Participants expressed the need for better public awareness of TRiP and its mandate. Persons with lived experience saw increased visibility as a means to portray TRiP as accessible, approachable, and safe place for families seeking support. Caregivers noted misconceptions that could deter those who could benefit from TRiP's supports. Stakeholders saw external communications as a strategic avenue for securing additional resources. They proposed various strategies to boost TRiP's visibility.

**4.3. Governance Revitalization:** Stakeholders called for a revamped governance structure due to concerns about the limitations of the existing Steering Committee in making decisive decisions. Some stakeholders observed that committee members, often leaders from TRiP's collaborating organizations, were split between advocating for TRiP and their respective organizations. Concerns were raised about the role, position and authority of Steering Committee members, with some lacking the authority to make decisions regarding funding, resourcing, and other crucial aspects of initiative functioning and evolution. Stakeholders emphasized the importance of top-level leadership buy-in, commitment, and understanding of the initiative's value for its success and sustainability. Stakeholders suggested alternative governance models. Some stakeholders also noted that the Steering



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Committee members were often far removed from the frontlines, advocating for a more hands-on approach.

**4.4: Enhancing Accountability:** The data analysis indicates a perceived lack of formal accountability measures both at the level of Steering Committee and frontline staff. Some stakeholders expressed concerns about the absence of mechanisms to verify whether the overall initiative expectations are being fulfilled, questioning the efficacy of existing governance and accountability mechanisms in ensuring tangible outcomes. Without a formal accountability mechanism, several stakeholders noted that TRiP often relies on ‘organic’ or informal accountability at the frontline level, where the team holds each other accountable in meetings or communications. Many stakeholders were dissatisfied with this informal accountability system, leading to inefficiency and disillusionment with TRiP’s mandate. Stakeholders highlighted the potential benefits of having a universally-adopted memorandum of understanding from the initiative’s inception, outlining each organization’s roles, commitments, and resource contributions for a more solid foundation and smoother operations. There were differing opinions among stakeholders regarding best practices for accountability.

**4.5. Defining and Measuring TRiP Success:** The research findings revealed variations in stakeholders’ definitions and perceptions of success with many stakeholders aligning it with their organization-specific metrics. Stakeholders recognized the complexity of defining success in a collaborative initiative, and emphasized the need for a more comprehensive, shared understanding of success that goes beyond individual sector-specific metrics. Suggestions included a client-centered perspective of success tailored to unique family needs. Challenges were noted in creating a holistic definition given variability of success for each family, and the long-time required for assessing intervention impact. Success was also defined through a cost-benefit analysis lens for attracting additional funders. Stakeholders emphasized developing a comprehensive measurement framework, including shared outcomes, to assess TRiP’s direct impact on collaborating organizations and the community.

**4.6. TRiP Staff Retention:** Caregivers and children raised concerns about TRiP staff turnover, highlighting the need for consistent personnel, particularly case managers and support workers, throughout their TRiP involvement. The sensitivity of their situation required time for children and their families to open up and be vulnerable. Some caregivers found it challenging to work with different support workers, impeding rapport-building with their child. This turnover created a barrier,



likely preventing some children and their families from fully engaging with TRiP.

**4.7. More Support Opportunities for Children:** Persons with lived experience advocated for additional resources and support services for children/youth engaged with TRiP. Caregivers suggested a more gradual closure of files, expressing dissatisfaction with what they perceived as an abrupt process, as they felt their children were suddenly cut off from all services and resources without sufficient warning. Caregivers proposed cultural programs and educational sessions through TRiP, covering various topics and delivery methods. The research findings highlight the positive impact of mentorship outings on children engaged with TRiP, who appreciated support workers and desired an expanded range of activities during these outings.





# INTRODUCTION

Access to services and supports for children and youth in vulnerable contexts remains a key challenge in Canada due to fragmented service delivery systems, and a lack of coordination and collaboration across sectors (Tonmyr et al., 2020). Research shows that vulnerable children and youth frequently fall into cracks between fragmented systems of care (Dufour et al., 2014). Canadian children and youth with mental health conditions, for example, are significantly affected by service fragmentation as they are dependent on a variety of support service systems (Bartlett, 2018). These children experience the poorest outcomes in academic performance and graduation rates, dependence on social assistance and a higher likelihood of being in child welfare care, substance use issues, physical health issues, and justice system involvement (Bartlett, 2018; Dufour et al., 2014; Wright et al., 2020). In Saskatchewan, a survey of more than 10,500 Grade 7-12 students in 2019 showed that over 38% of students experienced symptoms of depression, over 23% had considered suicide, and over 21% had committed self-harm (Saskatchewan Alliance for Youth and Community Well-being, 2020). Cross-sectoral collaboration has proven as an effective strategy to overcome existing silos through





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providing wraparound coordinated services, and a means to promote healthy development and safety of children (Marcellus et al., 2022). It is a key strategy to transform the fragmented human services system into a comprehensive and coherent amalgam of organizations empowered to address the multiple and complex needs of children and youth in vulnerable contexts (Van Dongen et al., 2018b).

Given the challenges associated with establishing and sustaining cross-sector collaborations, including coordination issues and conflicting interests of the sectors involved (Stål et al., 2022; Van Dongen et al., 2018; Ward et al., 2018), our study used TRiP (The Regina intersectoral Partnership) as an in-depth case study to explore the dynamics of this collaborative initiative. TRiP is a collaboration across six human service organizations to improve outcomes for children/youth in vulnerable contexts in Regina, Saskatchewan. Our research aimed to investigate the emergence, formation, and evolution of this cross-sectoral collaboration, factors influencing collaboration and service coordination across sectors, and the processes and structures involved in establishing and sustaining robust cross-sector collaborations. Instead of evaluating the effectiveness of TRiP as a cross-sector collaboration compared to silo systems (i.e., impact and outcome evaluation), our focus was on generating insights applicable to similar collaborative initiatives at local and national levels.

By drawing on (1) interviews with policy-makers and service providers (hereafter stakeholders) from different human service organizations engaged with TRiP, and persons with lived experience, (2) observations, and (3) document reviews, the research team identified factors influencing collaboration and service coordination across sectors and its sustainability over time. We also examined the governance, organization, and delivery of coordinated services across sectors, funding structure, and accountability mechanisms within TRiP. Our research findings have provided a rich and detailed description of TRiP functions and features that will enhance transferability of our findings to other settings (Bryman, 2012). Our research findings have policy implications for the six human service organizations engaged with TRiP to better plan for effective and efficient coordination of services across sectors. The recommendations and lessons could be scaled up and adopted as good practices in other jurisdictions.



# BACKGROUND (CONTEXT)



## WHAT IS TRiP?

TRiP is a collaboration across six human service organizations including the Ministry of Social Services; Ministry of Corrections, Policing & Public Safety; Saskatchewan Health Authority; Regina Public and Catholic School Divisions; and the Regina Police Service. Since its establishment in 2010, TRiP has been committed to coordinating support services to children/youth in vulnerable contexts. The collaboration's central focus is on mitigating or eliminating varying levels of risk and victimization among children/youth by identifying behaviours or conditions that place them in vulnerable positions (TRiP, n.d.).

"[TRiP] OPENED UP A LOT OF RESOURCES THAT I WASN'T ABLE TO GET [CHILD] INTO BEFORE." (PWLE 20)





TRiP defines children/youth in vulnerable contexts as hard-to-reach children/youth who are at risk of mental health disorders, crime, violence, school absenteeism, disruptive behaviour, and substance use issues. Through enhanced communication and collaboration among service providers, TRiP aims to facilitate appropriate connections and referrals between institutional and community settings to provide diversified and integrated support services. The primary objectives are threefold: (1) to ensure children's safety and their healthy development and wellbeing, (2) to build a collaborative environment to better coordinate services, and (3) to promote parents and families' involvement in decisions around support services (Mahani et al. 2023). The outcomes involve the establishment of a shared commitment among multiple human service organizations, fostering intersectoral collaboration, risk reduction of negative outcomes among children/youth, and ensuring coordinated service provisions (TRiP, n.d.).

## STAKEHOLDERS ENGAGED WITH TRiP

TRiP stakeholders, representing the six human service organizations mentioned above, contribute staff, financial resources, and in-kind support. All partners actively participate on the Steering Committee, and TRiP team (frontline staff). Instead of delivering direct services, TRiP collaborates with stakeholders and leverages existing community agencies through three support lenses (TRiP, n.d.):

- 1 Stakeholder Representative Agencies:** TRiP addresses cases connected to agencies such as the Ministry of Social Services; Ministry of Corrections, Policing & Public Safety; Child and Youth Services at the Saskatchewan Health Authority, and school divisions. This involves exploring past involvement, discussing present circumstances, and devising case plans with agencies like Fox Valley Counseling Services, Aboriginal Family Services, Family Service Regina, Catholic Family Services, and Ranch Ehrlo Society, among others. TRiP's direct connections to both major school systems in Regina provides valuable insights into system navigation, student information, and access to school professional supports. Additionally, affiliations with justice and probation contribute to responsiveness of the team's ability to assist individuals with reintegration and support.



**2 Community-Based Organization Programming:** Through strong community relationships, over the years, TRiP secures spots or reduced-cost participation from partners like YWCA, YMCA, Dream Brokers, Regina Treaty Status Indigenous Services (RTSIS), Bricks for Kids, Amazing Adventure, Saskatchewan Science Centre, University of Regina, City of Regina Leisure Centres, Neil Balkwell Centre, Big Brothers, Special Olympics, Sport Ball, Level 10, Lumsden Beach Camp, Dallas Valley Camp, Artrageous, Hoop School, and Regina Equestrian Centre.

**3 Aligned Initiatives with TRiP Referrals:** TRiP engages with organizations and government agendas to address needs commonly encountered in referrals. This includes collaboration with the Cognitive Disability Strategy, Complex Needs Case Protocol, Autism Resource Centre, Assessment of Risk to Others (ARTO) formerly known as Violent Threat Risk Assessments (VTRA), and Regina Open Door Society.

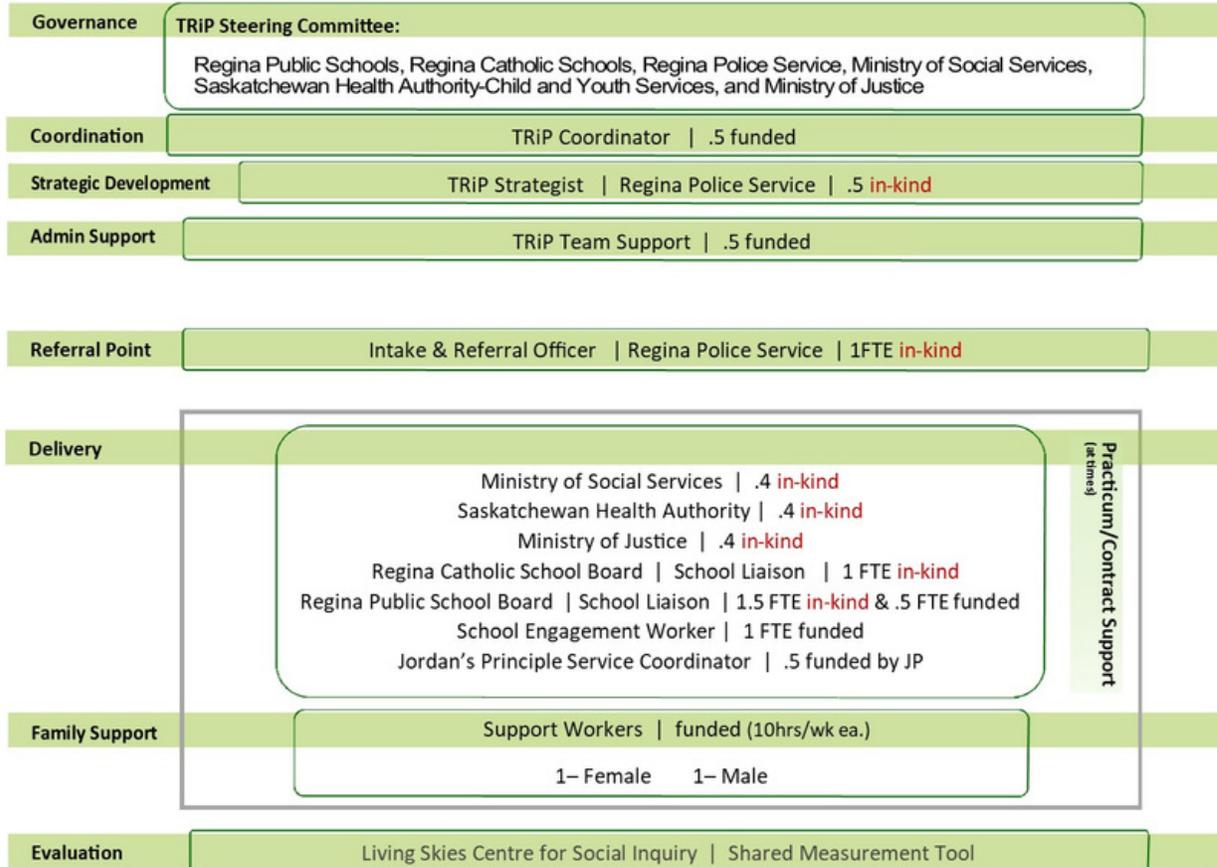
## TRiP FUNCTIONING STRUCTURE

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TRiP is implemented by a team consisting of a coordinator, initiative strategist (n=1), administrative support (n=1), referral and intake officer (n=1), school engagement worker (n=1), public school liaisons (n=2), catholic school liaison (n=1), three sector representatives (Justice, Social Services, Health), Jordan's Principle Coordinator (n=1), and support workers (n=2). TRiP team members contribute a unique set of skills and experience to the initiative. Each team member adheres to the safety protocols, privacy frameworks, disclosure practices, and confidentiality standards within their respective sectors, operating within the policies and procedures of their individual mandates (TRiP, n.d.). Despite representing different organizations, institutions, or Ministry mandates, team members collaborate effectively towards the shared goals of TRiP. Team members actively promote the initiative through community outreach and educational efforts, targeting both parents/families and other human service professionals. These efforts raise awareness about TRiP's offerings, resulting in the generation of referrals for children showing signs of vulnerability and risk. Operating from a centrally-housed shared office space provided by the Regina Public Board, the team's service area encompasses the city of Regina (TRiP, n.d.).



### Human Resource Functioning Structure



NOTE: the sole source of human resource funding (stated as 'funded' in the matrix above) is from the Ministry of Social Services; Jordan's Principle (JP) Coordinator is funded by JP with File Hills Tribal Council as the accountable partner

updated September 2023

## TRiP WORKING PROCESS

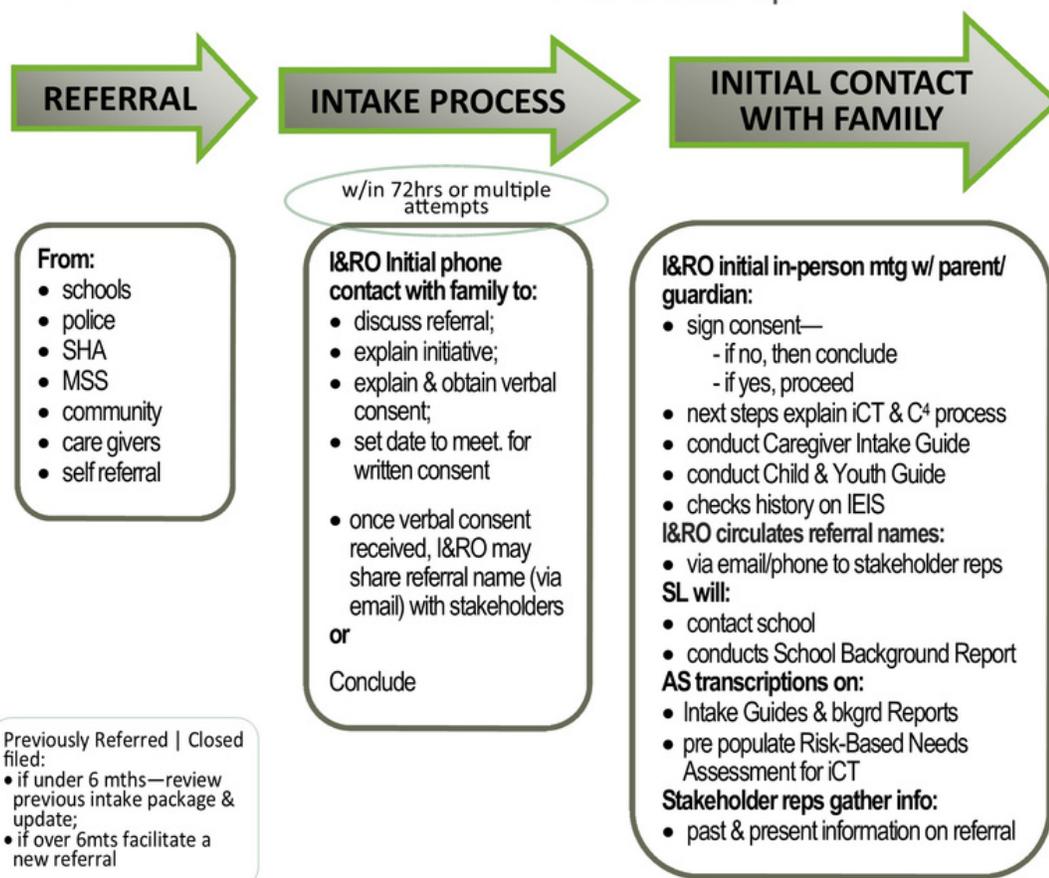
TRiP's comprehensive process prioritizes the needs of families and stakeholders. During the intake process, the Intake and Referral Officer (I&RO) explores a child's needs, risks, behaviours, vulnerabilities and interests through interviews with caregivers, the child and communication with schools (TRiP, n.d.). Following the intake, TRiP's intersectoral Collaboration Team (iCT) is mobilized to determine if a file

will be accepted or not. If so, the team works to identify appropriate community resources and supports for integrated case management (TRiP, n.d.). In collaboration with the family/caregiver, a Coordinated Custom Case Conference (C<sup>4</sup>) is held to develop an action plan around the needs of the child and their family (TRiP, n.d.).

# TRiP

The Regina  
intersectoral  
Partnership

May | 2023



Previously Referred | Closed filed:  

- if under 6 mths—review previous intake package & update;
- if over 6mths facilitate a new referral

## FORMS

- Caregiver Referral Form
- Agency Referral Form

- if concluded, complete appropriate closure forms

- Consent Form
- Caregiver Intake Guide
- School Background Report (Public | Catholic)
- Child & Youth Intake Guide



### Positions Acronyms:

- I&RO- | Intake & Referral Officer
- SL | School Liaison
- AS | Administrative Support
- SW | Support Worker
- SEW | School Engagement Worker
- JP | Jordan's Principle

## intersectoral COLLABORATION TEAM (iCT)

iCT mtg weekly

### I&RO presents client info incl:

- Police history
- Risk-Based Needs Assessment Tool
- Any other observations from questionnaires

### Stakeholder round table:

- Share info on past & present involvement

### iCT Action Plan form completed

### iCT Stakeholders determine course of action:

- conclude or
- develop contact plan
- Who takes the lead at C<sup>4</sup> case conference?
- Who attends C<sup>4</sup>?
- Is there a role for JP and/or SEW?

## COORDINATED CUSTOM CASE CONFERENCE (C<sup>4</sup>)

incl: SEW & SW fdbk

### iCT Stakeholder Lead will:

- reach out to family to schedule time & location to meet then informs required iCT stakeholders
- develop action plan based on previous services provided & current needs (centred on iCT Report Form)
- ensure family & stakeholder consensus & commitment to execute Action Plan
- determine frequency of case conferences & set next date
- case conference notes transcribed (C<sup>4</sup> Lead/AS) & circulated to C<sup>4</sup> participants
- C<sup>4</sup> Lead follow-up with family on case conference 'To-Do/Actions' & commitments
- continuous follow-up by all C<sup>4</sup> stakeholders involved
- process repeats based on need until point of stability or conclusion
- transition plan for closure (when appropriate)

Case Conf notes out to C<sup>4</sup> stakeholders in advance of next meeting

## CONCLUSION

### Reasons:

- refused consent
- C<sup>4</sup> determination to terminate
- obtained stability
- aged out
- family not engaged
- family not supporting school attendance
- family moved
- MSS status change (apprehension; in Family Treatment Program; or are a long term ward)

\*Consent re-sign done by C<sup>4</sup> lead @1 year;  
\*AS advises of anniversary date 60 days prior

### Case Closure | File Review:

- occurs 1-2 x /year
- Utilizing a prescribed tool, assists case leads in making a decision on difficult to determine files

- iCT Action Plan
- Risk Based Needs Assessment Tool *Pre*
- Risk Factor Definitions *Pre*
- Stakeholder Background Report

- C<sup>4</sup> Report
- Support Worker Request Form
- Student Engagement Worker Form
- Community Engagement Summary
- Client Pro-Social Record

- Case Closure Report
- Risk Based Needs Assessment Tool *Post*
- Risk Factor Definitions *Post*
- Child/Youth Exit Survey
- Caregiver Exit Survey
- Post TRiP Student Report



# ROLES AND RESPONSIBILITIES OF TRiP TEAM MEMBERS

## **CASE MANAGERS**

are individuals designated to take the lead within TRiP team for an active TRiP file. These individuals are either a Public & Catholic School Liaison; or a stakeholder representative from the Ministry of Corrections, Policing, and Public Safety. Upon acceptance of a referral at iCT, they assume the role of case manager for the respective file. While their responsibilities align with TRiP process, TRiP has delineated them separately to highlight any sector-specific nuances and to maintain the integrity of the organization/sector they represent and report to.

## **CATHOLIC SCHOOL / PUBLIC SCHOOL LIAISON(S)**

### **Responsibilities:**

- consulting with school administration, counselors, and Student Support Specialists on referrals to promote suitability
- conducting school background reports and submitting to the referral officer
- participating at weekly iCT meetings
- arranging and leading Coordinated Custom Case Conferences (C4) for each client
- taking accurate C4 notes and sending to the team
- enrolling clients in appropriate pro-social activities, arranging transportation when necessary
- making appropriate referrals to outside agencies
- submitting invoices for payment to the TRiP coordinator
- communicating with families between C4s as needed
- maintaining client files – C4 notes, pro-social activities, invoices, etc.
- closing files when client has stabilized, resources are in place and TRiP is no longer required, or clients are not engaged/move
- educating about and promoting TRiP within schools and the community

## **SUPPORT WORKERS**

are additional support from the TRiP team for certain (not all) eligible TRiP active youth files. Each support worker may provide support to an average of 3-4 youth, to a maximum of 10 hours per week from September to May. During the summer months, when students are out of school, support worker’s hours increase to 35 hours per week to accommodate an increased number of youths.



### **SUPPORT WORKERS (CONTINUED)**

#### **Responsibilities:**

- focus on supporting and assisting the implementation of individualized supervision/support plans for children and families engaged with TRiP
- encourage school attendance and engagement
- encourage appropriate levels of caregiver supervision
- engage and facilitate opportunities for children to participate in pro-social structured leisure, creative, and cultural activities
- act as a mentor and positive role model

### **SCHOOL ENGAGEMENT WORKER**

a dedicated full-time position within TRiP team to provide educational specific support to active TRiP youth.

#### **Responsibilities:**

- monitor attendance of children in TRiP, whose attendance is an issue (non-attendance reduction in attendance) & drive to school if support is needed
- engage kids in school, who could use more support (kids whose attendance is non-issue, but could use extra help in reading or other capacities)
- work with family, school & youth, to come up with incentives & a plan to achieve, as needed
- discuss with parents possible options that could assist their situation- either parenting approaches or options for their child
- liaise with schools – when children do not show up, school advises & contact families & follow up accordingly (attend house if needed)
- pop-in visits/maintenance visits with TRiP kids who are being successful & showing improvements
- occasionally provide random treats as unexpected rewards
- track and record attendance of TRiP kids – noting patterns or issues that may cause or contribute to absenteeism, & address those, either as a team or individually
- maintain excel spreadsheet sheet of both month to month & overall yearly, attendance of youth whose attendance is a concern - spreadsheet includes attendance & several subcategories for tracking & comparisons



### MINISTRY OF CORRECTIONS, POLICING AND PUBLIC SAFETY STAKEHOLDER REPRESENTATIVE

#### Responsibilities:

- act as a point of contact for the Ministry for information & questions specific to TRiP
- pre -Screening referrals from the Ministry of Corrections, Policing and Public Safety
- attending weekly iCT Meetings to review and discuss new TRiP referrals
- sharing Ministry involvement / history with TRiP team to assist with decision making, assessment process, case planning and to help incorporate appropriate supports
- arranging and leading initial and ongoing case conferences with the families, schools, and other supports
- keeping all involved agencies / supports informed regarding case planning, making them aware of concerns and challenges as they arise and initiating discussions to address these
- making appropriate referrals for support completing all forms and reporting as per the 11 and Under Initiative and twelve&up process
- arranging/leading Coordinated Custom Case Conferences (C4) for each client
- taking accurate C4 notes and sending to the team
- enrolling clients in appropriate pro-social activities, arranging transportation if absolutely necessary
- making appropriate referrals to outside agencies
- submitting invoices for payment to the TRiP coordinator
- communicating with families between C4s as needed
- maintaining client files – C4 notes, pro-social activities, invoices, etc.
- closing files when client has stabilized; resources are in place and TRiP is no longer required; or clients are not engaged/moved
- educating about and promoting TRiP within schools and the community.



## TRiP REFERRAL PROCESS

TRiP operates on a referral and consent based model, meaning it is not the initial point of contact for children/youth and their caregivers. Referrals, whether from an agency, community or caregiver to TRiP typically occur after previous interactions with other service providers or support systems, alongside the identification of composite risk factors such as specific behaviors or conditions that indicate vulnerability. The primary considerations for a TRiP referral include:

- Displaying multifaceted behavioral challenges
- Exhibiting or being affected by composite risk factors
- Demonstrating limited progress with previous services
- Facing personal, situational, and/or institutional barriers to accessing services and support

After exploring other options, the referring agent deems TRiP to be the most suitable option.



OPTIMIZING THE HEALTH, SAFETY,  
AND DEVELOPMENT OF CHILDREN





# METHODS

**WE USED MULTIPLE QUALITATIVE DATA COLLECTION METHODS TO COLLECT DATA, INCLUDING INTERVIEWS, DOCUMENT REVIEWS, AND OBSERVATIONS. DOCUMENT REVIEWS AND OBSERVATIONS WERE UTILIZED TO VALIDATE AND SUPPORT INTERVIEW FINDINGS.**

**Interviews:** A total of 25 interviews were conducted by the project lead with policy-makers and service providers from six human service organizations engaged with TRiP. The interviewees included present and past members of the TRiP Steering Committee (n=11), existing and former members of TRiP team or frontline staff (n=9), and select policy makers and thought leaders who were well familiar with TRiP (n=5) with two of them having played a key role in the early development of the initiative. The interview sample ensured representation from all human service organizations. All interviews were conducted via video conferencing platform, Zoom between early May and late August 2023. Each interview lasted a minimum of 60 minutes. Additionally, we conducted 20 in-person interviews with children, youth, and their caregivers involved with TRiP between June and October 2023, with an average duration of 35 minutes per interview. These interviews were conducted by two project team members who had experience working with children/youth and vulnerable families. One interviewer had an education background and another a psychology background. Both interviewers had training in trauma-informed care and cultural sensitivity. Written consents were sought for all interviewees who were asked to read and sign the consent form prior to the interview. All interviews, both Zoom and in-person, were digitally recorded with the participants' consent and transcribed verbatim. A \$50 honorarium in the form of gift cards was provided to participants with lived experience. Notes were taken during interviews.





**Document Reviews:** The types of documents reviewed include, but are not limited to: all internal and external TRiP evaluation reports; data collection measures (e.g. intake surveys, needs assessment forms, referral forms, community networking and outreach forms); policy brief published by the project lead in collaboration with TRiP team; reports to the Ministry of Corrections, Policing, and Public Safety; functioning process documents; reports prepared for the TRiP Steering Committee; and webpages on TRiP website.

**Observations:** To support and validate interview data, the project lead also attended four TRiP meetings including iCT (intersectoral Collaboration Team) in November 2023, a Coordinated Custom Case Conference (C4) in December 2023, TRiP team meeting in December 2023, and Steering Committee meeting in January 2024. Observation of these meetings provided rich data on collective decision-making, organization and delivery of coordinated services, communication, power relationships, funding and accountability mechanisms, and management processes. Notes were taken during observations. These meetings that were observed, were not recorded.

**Data Analysis:** We used a qualitative thematic framework analysis to analyze interview data, excerpts from documents, and observation notes. We followed six steps in our data analysis: (1) data familiarizing, (2) developing the initial codes, (3) revisiting the initial codes, (4) searching for patterns and categories across data, (5) generating an initial list of categories, and (6) reviewing, revising, and refining the categories and sub-categories. We used NVIVO 12 software to support coding data and in developing categories and sub-categories.



# FINDINGS



## THE DATA ANALYSIS IDENTIFIED FOUR BROAD THEMES:

- 1** Achievements and outcomes of TRiP
- 2** Factors contributing to the success and sustainability of TRiP
- 3** Perceived gaps and areas for improvement within TRiP
- 4** Suggestions for the improvement of TRiP

RESEARCH FINDINGS REPORT

RESEARCH FINDINGS REPORT



**“I CONSIDER [TRiP SUPPORT WORKER] LIKE FAMILY EVEN.” [PWLE13]**



# 1 ACHIEVEMENTS AND OUTCOMES



The research findings suggest significant impact of TRiP initiative on persons with lived experience (PWLE) that include children/youth (hereafter children) and their caregivers. Both caregivers and children reported positive outcomes for their engagement with TRiP. Caregivers expressed appreciation for the reliable support provided by TRiP, emphasizing the instrumental role of assigned case managers.

## CHILD SELF-REPORTED OUTCOMES

Children and youth interviewees remarked that their engagement with TRiP was a catalyst for their personal growth and development. Many of the children, for instance, were appreciative of how TRiP had provided them with a safe environment in which they were encouraged to grow and learn. One of the children discussed how the rapport they had established with their School Engagement Worker was instrumental in boosting their self-confidence. They went from having a significant level of doubt and pessimism in their own abilities to having a genuine sense of hope and self-pride as one youth remarked:

*“Before I couldn't do anything. I couldn't go to school and hold a job. Like I was just really down and my life was really bad when I joined TRiP...But, I think having the support of TRiP around me helped me grow to be the person I am today.” [PWLE13]*

Other children similarly reflected on the personal changes they had observed in themselves since being involved with TRiP. They referred to themselves with a sense of pride over their own development, reflecting on how far they have come in



developing healthy social relationships with others. They described how with the support of TRiP, they were able to become less confrontational and more sociable:

*“I feel like I've gotten better as a person. And my attitude and my respect aren't as bad as it was. I wasn't respectful before. And then I got involved with TRiP and I started becoming more respectful.” [PWLE23]*

Children reported being able to gain access to a wide range of pro-social activities through TRiP. These pro-social activities ranged from more traditional experiences - such as sports and clubs - to more unique and unconventional ones - such as shopping or going to Chuck E. Cheese (a family arcade center in Regina). These types of pro-social activities offered children the opportunity to have fun, get physical exercise, develop healthy interaction skills and safely engage with peers in social settings:

*“We wanted to go boat fishing. And we would go to this park over by my old school and play catch, football and frisbee.” [PWLE4]*

Children attended these pro-social activities while accompanied by a TRiP support worker. These representatives were not only able to supervise children during these activities but also had the opportunity to develop a positive rapport with them. A young child noted how a TRiP support worker played a crucial role in providing emotional support and guidance, creating a safe space for them to discuss sensitive topics that might be challenging to address with others. This finding underscores the importance of the human element in support services, indicating that the relationship and communication between the support worker and the young person significantly contribute to the impact and effectiveness of the intervention.

*“They [TRiP support worker] were nice to me and gave me really good advice. I was able to talk to them about things that I wouldn't be able to talk about to others.” [PWLE23]*

Once children have had the opportunity to build up a foundation of trust, TRiP representatives including support workers, and School Engagement Worker could also become sources of support, motivation, and guidance for the children. Having these positive relationships provided the children with the opportunity to adopt



healthy behaviors from a positive influence and role model. One caregiver highlighted the positive dynamics of the relationship between TRiP support worker and their child that extends beyond formal sessions, emphasizing the significance of trust, companionship, and a genuine interest in the well-being of the children.

*“With him [child] and [TRiP support worker], they've established that relationship with each other where it's just, she'll go and pick them up after school or pick them up for lunch, and they'll go for lunch, and they'll be able to talk and just kind of see where things are at, like what's going on.” [PWLE14]*

In some cases, children felt so supported and cared for that they even likened their TRiP representative (i.e. support worker or School Engagement Worker) to family. For many of the children who engaged in TRiP, this more personal connection provided them with access to a confidant, a friend, and a role model, as one child noted:

*“I consider [TRiP support worker] like family even.” [PWLE13]*

## CAREGIVER-REPORTED OUTCOMES

Caregiver interviewees reported a valuable source of nurturing support at TRiP, offering a reliable support system. They appreciated both emotional and tangible supports. Caregivers reported that TRiP has contributed to improved caregiver-child relationships, and facilitating personal growth in their children. Moreover, TRiP has supported families to navigate care, and support systems to access additional material benefits and support services.

### NURTURING SUPPORT

Several caregivers shared that they were able to surround themselves with the reliable support system TRiP offers. In particular, many caregivers were especially appreciative of their assigned TRiP case manager. Caregivers appreciated that the case manager was someone they could freely reach out to with questions and concerns. Additionally, they found solace in knowing that they would likely receive a prompt and meaningful response, contributing to their overall sense of comfort. This



provided caregivers with an important outlet for alleviating stress, assuring them that they were not alone. Knowing they had the support of a competent case manager backed by a well-connected organization, was enough to instill confidence in most caregivers. For many caregivers, one of the key indicators of TRiP success was the fact that they no longer felt alone or helpless as one caregiver noted:

*“It [TRiP support system] puts the parent more on stable ground with being able to know how to access anything. And if you're still not sure, they make sure you're okay, and know that there's more help out there or what you need.” [PWLE3]*

Caregivers also explained how the relationships they had established with TRiP case managers and support workers went far beyond that of a purely professional working arrangement. In many cases, the continuity of a case manager's involvement with a family allowed for the emergence of deeper relationships built on reciprocal trust, mutual understanding, and genuine care. These relationships were noted to have a profound impact on both children and their families, particularly for those who had experienced impersonal and indifferent encounters in prior interactions with the human service sectors. One caregiver remarked how, by spending the time to get to know their child, TRiP support worker was able to foster a positive relationship in which the child felt understood and heard:

*“I think what has worked well, is the fact that [TRiP support worker] has spent a lot of time with [child] directly. That really helped and made [child] feel the very center of all of this.” [PWLE15]*

In addition to feeling more emotionally supported, caregivers were also appreciative of the tangible support they had received from TRiP. Many caregivers noted their appreciation for the wide range of support they were able to access as a result of their newfound relationships through TRiP case managers. Some caregivers even voiced their appreciation for how TRiP's resources varied in scale and magnitude. TRiP did not only exist to help manage the most severe crises - it also mobilizes resources that are intended to address more day-to-day challenges that caregivers and their children may face. Caregivers noted that they found themselves developing their capacity and competency with the assistance of TRiP case manager and the C4 team, to the point where they felt more confident and capable in their own abilities:



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*“I know it brought me and my daughter closer while being in TRiP [initiative]. Because they teach me things that I didn't do before with my daughter. They taught me all this stuff, which is really helpful for me to be successful with my daughter, with her mental health.” [PWLE19]*

### IMPROVED CAREGIVER-CHILD RELATIONSHIP

Many caregivers noted instances in which they observed personal growth and development in their children. One parent discussed how prior to engaging with TRiP, they had a fairly tense relationship with their child. They described their child, prior to referral, as being aggressive and confrontational to the point of deterring their relationship. Since engaging with TRiP, this same parent noted that their relationship with their child has started to mend. The parent noted that their child was now less aggressive and seemingly more caring, creating an opportunity for the family to come together and find a path forward:

*“The change for her is more respectful and more caring and wanting to be at home. And not always thinking everything is bad. She's come a long way. Like she used to be really rude and mean to me. And now it's more kind and more loving and caring.” [PWLE19]*

Several caregivers, while corroborating that they have seen substantial personal growth in their children, also acknowledged that they still had a long way to go. They emphasized that this was ultimately a positive development. TRiP had allowed them and their children to embark on a journey of personal growth, and TRiP had provided them with the tools and resources needed to sustain this growth in the long term. For instance, several caregivers noted that from the knowledge and skills they gained from TRiP, they felt more equipped to continue to steer their children on the right path. While some caregivers still reported instances where their children experienced emotional outbursts and fits of aggression, they also reported employing some of the strategies and coping mechanisms they had learned through TRiP to help their children during these instances.

*“He is doing a lot better overall at school, which was where the main struggle was with his social skills and emotional regulation. Academic [wise], when his mindset is good, he could probably go up. But they've just been working on him with different ways to cope and bring himself back down if he gets upset or any of those kinds of things.” [PWLE20]*



### INCREASED ACCESS TO SERVICES

Many caregivers acknowledged that TRiP had played an important role in helping them identify the root causes of their child's behavior. Prior to understanding these root causes, many caregivers felt frustrated and hopeless. Many felt that they had no way of knowing how to support their child, as they had no context for the challenges that the child was facing. In many instances, caregivers were able to work with TRiP to take appropriate steps to have their children tested for underlying mental, behavioral, or neurological conditions. By identifying a reason for a child's behavior, the problem suddenly became far less daunting for the caregivers. These diagnoses often gave parents a strong starting point from which they could search for specific resources, develop specific strategies, and gather specific information - all this was done with the support and guidance of TRiP:

*"I would have had no idea. I could see that there's something different about my child. But it's not quite as bad but it's enough that we were getting kicked out of daycares and can't keep long-term friends because of that impulsiveness. And then in school, all of the frustrations, because you're not understanding. So, it just really helped us understand who he is, and how that fits into our life." [PWLE22]*

One caregiver discussed how engaging with TRiP allowed them to get their child referred to a pediatrician who was able to diagnose the child with Attention Deficit Hyperactivity Disorder (ADHD). This same caregiver noted that prior to this diagnosis, they did not understand anything about their child's condition. Once the root cause of the child's disposition had been identified, the caregiver was able to work with TRiP to develop a strategy that took into account the full extent of the child's circumstances, including their new diagnosis. This resulted in a major breakthrough for the family:

*"TRiP has provided a lot more insight and helped us step away from the boundaries of the school. Before with the school, it was like, 'Oh, [child] had another bad day and he's not getting along.' And, I just thought maybe he was just going through some growing. But it just didn't get better until it escalated to that one incident that got us referred to TRiP and then ever since it's been great. He's such a really considerate, calm kid now, especially now that we identified that it was ADHD. I had no clue, but TRiP helped me see that in him." [PWLE2]*



Through the connections offered by TRiP, families could receive aid in terms of system support navigation to gain access to more material benefits. One caregiver explained how TRiP provided them with access to new forms of financial support, providing them with the means to provide for their children. By engaging with TRiP, caregivers may be directed to new sources of financial support (i.e., KidSport, JumpStart), and oftentimes, receive guidance on how to put together an application for a grant:

*“She [TRiP case manager] helped me apply for all the funding to get the kids to continue going to camps, his piano lessons, and if they wanted to go into sports or something.” [PWLE6]*

Caregivers also remarked the support they receive to navigate the bureaucratic structures, such as application for registrations, especially in reference to health (e.g., mental health or addictions), social services, or even at times the educational systems. In other circumstances, the support offered by TRiP could translate into more tangible benefits. For instance, caregivers of children who required continuous care were very appreciative of the pro-social activities offered by TRiP, especially when these pro-social activities included a representative from the initiative who was equipped to supervise the child on the caregiver’s behalf. These arrangements had the potential to provide caregivers with much-needed respite, giving them the time and energy needed to recuperate, take care of other tasks, or attend to their own needs and self-care:

*“It’s given me a little bit of free time because I’m always with him 24/7. So, it was kind of nice to have a little breather and be able to either be able to just sit there and like watch him be involved in something or even if I need to do something then I know he’s active and getting some energy out and stuff like that.” [PWLE18]*

Several caregivers also explained that TRiP was essential to providing their children with access to a greater number and quality of pro-social activities. In many instances, TRiP worked with families to offer access to pro-social activities at affordable prices or for no cost at all. Some caregivers noted that there were cases where, without the assistance of TRiP, their child may not have been able to enrol in any pro-social activities at all:



*“With TRiP, it's been amazing, because I don't know how he would have been involved in any other sports, financial-wise. I don't know how people can afford so many sports for their kids. But that helped a lot.” [PWLE18]*

## 2 FACTORS CONTRIBUTING TO THE SUCCESS AND SUSTAINABILITY OF TRiP



The analysis of interviews with policy makers and service providers (hereafter stakeholders) and persons with lived experiences (PWLEs) including children/youth and their caregivers, revealed a host of factors contributing to the success and sustainability of TRiP. Stakeholders identified four factors including: the importance of having a shared vision; the initiative's continuous growth and evolution; the importance of champions within the initiative; and the streamlining of information sharing between stakeholders. Persons with lived experience identified two factors which they felt contributed to the success of TRiP: having a dedicated point of contact within the initiative; and TRiP's ability to act as a conduit for easily communicating with other service providers.

### HAVING A SHARED VISION

Several stakeholders recognized the importance of having all involved parties aligned toward a shared vision and goals. There was a general consensus among stakeholders that the shared goal is to improve outcomes for vulnerable children/youth and their families. Interviewees' understanding of TRiP's goal was aligned with the official mission statement of TRiP, which reads as: “make appropriate connections and referrals for children to optimize their health, safety and development through improved communication and collaboration among service providers” (TRiP Steering Committee Report, 2022, pg. 3).

Stakeholders highlighted how the presence of a shared vision among the collaborating organizations was vital to creating a working environment that was conducive to collaboration toward a common goal. This shared vision and



coordinated effort, in the stakeholders' view, reflects a collective commitment to a holistic approach, recognizing the interconnected nature of the issues that TRiP aims to address:

*"I didn't need any work in terms of convincing them [other sectors] that there has to be a better way of approaching youth, because they have similar issues in discipline and truancy and all kinds of issues within the school system." [PS5]*

Stakeholders also pointed to the alignment of goals among those sectors involved with TRiP, emphasizing the understanding that overcoming fragmentation and breaking down silos is crucial for maximizing impact:

*"The goals of those involved with TRiP are aligned, so that they understand that to have the most impact, we have to get away from the fragmentation in the silos." [PS1]*

All stakeholders could find common ground in the understanding that the priority of this initiative was to improve youth safety and well-being. Whenever there was a conflict due to the differing expectations, stakeholders noted that having this shared priority - to ensure that youth safety and well-being come first - could serve as a strong foundation for any remedial conflict resolution:

*"Everybody's here for the purpose of the family and individual, and it's not one person trying to take over navigating certain things or recommending certain things. It's a team" [PS13]*

## CONTINUOUS GROWTH AND EVOLUTION

Throughout its existence, TRiP's fundamental goal has largely remained the same: to coordinate its stakeholders in maintaining child and youth safety and well-being. However, several stakeholders described how TRiP's priorities have evolved over time. For instance, one stakeholder observed a shift in TRiP's overall approach away from exclusively addressing the needs of youths, towards a more comprehensive and holistic approach which takes into consideration the needs of their families. As per this participant, this was motivated by the acknowledgment that the safety and well-being of youths are heavily influenced by their environments, which invariably



includes their families. This evolution has ultimately been informed by the experiences of the stakeholders involved in TRiP:

*“When TRiP first started, I think it was more about finding an outside connection for some of these kids and putting them into a program. Whether it's swimming or soccer, or art, or whatever it happened to be. And where I see it now is more comprehensive in the sense that probably an equal amount of time is spent with the parents or the family, getting them the support they need. And then also, not just looking at activities for the kids but looking at wellness as well. And, overall mental health, finding programs to support that side of things, counseling, group activities, different things like that. So seeing that kind of shift to a more holistic approach with the students and families.” [PS11]*

Stakeholders highlighted other ways in which TRiP's scope has evolved over time. For instance, as per these stakeholders, TRiP's scope was initially concerned with the safety and well-being of children 11 years old or younger. This was reflected in TRiP's original '11 and Under' Initiative (11UI), which took a prevention and early intervention approach to youth safety and well-being. However, throughout TRiP's evolution, stakeholders noticed that the safety and well-being of some youths had not necessarily stabilized by the time they turned 12. As such, many of these youths were aging out of TRiP's mandate without resolving the issues that had originally driven them to access TRiP. This sparked a conversation to expand TRiP's scope to include a focus on youth between 12 and 18 years of age, culminating in the creation of the 'twelve&up' initiative (TRiP Functioning Process Document, 2021, pg. 7). This evolution sparked the continuum of support approach, which now forms the basis of TRiP. This new direction allowed TRiP to provide continuous support to young people beyond the age of 11, fostering a more flexible and responsive approach to supporting youth:

*“We did 11UI and then we ended up adding twelve&up, which was a response we started as some weren't ready to leave TRiP yet and they were aging out. There were other students who had a need over the age of 12 and so that was a response to something that changed. And so that progressed as we went along into the 12 and up as well.” [PS16]*



One stakeholder acknowledged that the continued evolution of TRiP's scope and priorities was a key driver of the initiative's relevance and survival. They observed that TRiP's initial simplicity has given way to a complex initiative that requires ongoing adaptation to best meet the needs of the dynamic community that it serves. The stakeholder highlighted the need for constant evolution, stating that settling for mediocrity, or adhering to the status quo, would ultimately render TRiP irrelevant. This perspective underscores the importance of remaining responsive to the population's evolving needs and implies that sustained change is integral to the long-term sustainability of TRiP:

*"It started very simply, it's evolved into what it is today. And it's in need of more evolution today. So it's an ever growing, ever changing sort of initiative, which I think it has to be. It has to change. And I say this in jest, I say to our staff all the time: striving for mediocrity isn't what we do at TRiP, right? It's not about the status quo, if you settle for status quo, you will disappear. You will become non relevant. So you can't strive for status quo, we have to keep growing. So that was an important component to the long-term development and growth of TRiP." [PS20]*

Another stakeholder emphasized the importance of maintaining continuity in TRiP's core mission amid its evolutionary journey. While simultaneously acknowledging the need to adapt to its clients' emerging challenges, the stakeholder took pride in the initiative's unwavering commitment to its fundamental goals. This steadfastness is seen as a source of fulfillment, indicating how, despite the evolution of TRiP's strategies and approaches, its foundational mission has remained constant. According to stakeholders, this commitment is portrayed as a unifying factor that has contributed to the initiative's ongoing resilience and cohesion:

*"...the core of what our shared goal was, is still our shared goal today and I take great pride in that because we have not deviated from all of our sectors that join us at the table, for every stakeholder, the mandate of TRiP has not changed – our shared objectives have not changed." [PS23]*

## CHAMPIONS

Champions are individuals that actively and passionately advocate for, and support a particular cause, initiative, or endeavor. Our findings highlighted the importance of champions in both the establishment and sustainability of the initiative. In many



cases, champions were described as having to deviate away from the institutional norms and status quo of their respective organizations. This required champions to be highly-motivated individuals who, from the onset, had a strong belief in the need and merit of the cause:

*“Having that passion and that commitment to the program. He [the champion] lived and breathed TRiP. Sometimes you can tell, some people are more engaged than others, some people don't show up to the meeting, but [champions] are always sitting there.” [PS14]*

During the initial stages of establishment, champions faced challenges in persuading and gaining support from other sectors. A stakeholder recognized the discomfort of this process, noting that efforts to diverge from the status quo were initially met with considerable resistance:

*“I received a lot of criticism, even internally. I knew there was a lot of chatter, ‘What are we doing?’, ‘We're not social workers’, usual rhetoric, that silo. They always have that chatter because it's not necessarily their fault, they don't have the experience.” [PS5]*

Stakeholders also acknowledged that championing an initiative such as TRiP could be mentally and emotionally taxing. To become a champion was to not only accept a whole new set of responsibilities, but was to also hold oneself accountable to the success of the entire project. One stakeholder stated:

*“I think his ability to connect with outside agencies to push the mandate forward and not give up. It's like a dog with a bone TRiP TRiP TRiP. I think that is the number one reason why people connect to him [champion].” [PS15]*

As a result, many stakeholders recognized that not everyone was poised to become an effective champion. To be an effective champion, one must be equipped to not only navigate a delicate and uncertain landscape, but must also be prepared to take a leadership role and forge a new path. Stakeholders viewed the role of TRiP coordinator as a champion and identified several characteristics and qualities that were vital for a coordinator role to successfully lead such a collaborative initiative



including: strong communication and organizational skills; a solutions-oriented mindset; a commitment to improving the program; and a willingness to think outside the box.

*"I see someone with a significant work history behind them. So they've got experience in the human services field, understanding the complexities of that. Obviously, excellent communication, organizational skills are important. Somebody who's focused on looking for connections, as opposed to seeing barriers. Whenever we're trying to do something different, you can always find excuses and barriers not to do it. So, it has to be somebody who's interested in identifying and addressing challenges for the betterment and the improvement of the program." [PS1]*

A similar sentiment was described by another participant, who stressed certain qualities that they believed every champion (coordinator role) should possess including strong collaboration skills, a capacity to envision shared outcomes, and a natural curiosity about how various elements can synergize to create common goals. This role thus required someone who was either already familiar, or was at least willing to become familiar, with the nuances unique to each stakeholder:

*"Those that are in those kind of catalyst positions, like they're very collaborative people, they can see the shared outcomes, they're curious. They want to know how different things can work together to create these common outcomes. They're going to have certain strong organizational capabilities and the ability to communicate well with multiple sectors at different levels and do it in common language, so that people can understand and see themselves in it." [PS3]*

Another stakeholder described champions (coordinator role) as the "glue that holds everything together" [PS17]. According to this participant, champions' direct involvement with frontline staff, families, and the community positions them as vital conduits for information sharing and understanding the evolving needs of clients and the community:



*“They are vital to the success of TRiP. They are probably the key component I would say. They often are the glue that holds everything together. They're the biggest advocate for TRiP as far as they come to the Steering Committee, and they're sharing information with the committee and helping inform the committee in order to make those decisions. So they're the conduit for that information sharing, they also are the person who's working directly with those frontline staff. They're in the trenches with them [case managers] working with the families, they're in tune with the needs of the clients with the needs of the community. They're probably one of TRiPs biggest advocates.” [PS17]*

Continuity and persistence of champions - i.e. having the same individuals remain involved in the initiative over extended periods of time - was found to inspire confidence in the success of the initiative. The more time champions spent as part of the initiative, the more time they had to become familiar with the unique needs, ambitions, and objectives of their fellow stakeholders. This familiarity, which offered a sense of stability through their continued presence, could be an invaluable asset when these champions sought to navigate conflicts and disagreements among stakeholders:

*“I think having a really strong coordinator who had been involved from day one, who isn't or wasn't afraid to have those conversations with all the different agencies to keep sort of pushing the boundaries of where the initiative was, I think that was really key in keeping the conversation alive in terms of what does growth or expansion or what could it look like? Or this demand reduction continuum, could we get there? And so, I think having that collaborator [coordinator] really be engaged with all the different stakeholders has been invaluable.” [PS8]*

Several stakeholders also noted that the continued involvement of highly-motivated individuals, as either champions or backbone support, was necessary for the sustainability and long-term success of TRiP. Many stakeholders described how the passion shown by these select individuals could serve as an important source of inspiration and boost morale. By outwardly demonstrating their passion for TRiP, these highly-motivated individuals also helped to foster a working environment in which stakeholders could be encouraged to take pride and genuinely believe in the initiative's cause and purpose. In many cases, the motivation of these individuals could be seen in their actions as well. Many of these individuals were frequently



reported to have gone above and beyond in supporting their team members, advocating on behalf of TRiP, and rallying stakeholders toward a shared cause:

*“Having passionate workers and stakeholders, people that actually really care about the better good and helping moving forward. And that will go above and beyond with trying to do their best to connect services and help the families and the kids.” [PS4]*

The consistency of key personnel over the initiative's lifetime was recognized as another beneficial factor. In stakeholders' view, this consistency not only contributes to the institutional memory of the initiative but also fosters a sense of stability and reliability for both the team members and the broader community:

*“...we had some consistency of people who were on those Steering Committees. And then some consistency of people who were on the working group [TRiP team] and actually doing the work every week. I think one of the most important things is having consistent, passionate people who are doing the work.” [PS16]*

## INFORMATION SHARING

Stakeholders acknowledged the importance of having a shared system for sharing information between all parties, in which all data on a set of collective indicators were systematically collected and reported in a cohesive manner. Data is freely exchanged across sectors as TRiP utilizes a consent-based approach. TRiP has a specific administrative infrastructure designed for intake with consent obtained from caregivers or legal guardians. As a result of a consent form being signed during the intake process, data is internally shared among the stakeholders:

*“Being able to access information is huge. Kind of goes back to our consent, being able to share information and being able to have those agencies very easily accessible to us, to quite literally walk across the hall or pick up the phone and call our rep. And being able to get that information is a huge component of success, because that allows us to get the information that we need to then ensure our clients' success.” [PS24]*



Stakeholders highlighted the ease of accessing information due to an established consent process and communication channels. The ability to quickly and directly reach out to TRiP stakeholders or additional agreed upon agencies, ensures a timely exchange of information, enabling TRiP to make informed decisions that contribute to the success of their clients. One stakeholder emphasized the value of information-sharing in preventing duplication of efforts and ensuring a focused and efficient approach to supporting families:

*“When you're working in silos, agencies are doubling up what they're trying to do, and so you're wasting resources because you don't have a focused approach on that family. But, when we work as TRiP, we work together to make sure we've got just what we need, and which agencies present it or share it.” [PS11]*

This internal data-sharing arrangement was also a major benefit to the families engaged with TRiP. Rather than needing to navigate the human services systems themselves, and apply to each service provider separately, TRiP's stakeholders can work together to guide families to the services most relevant to their particular needs:

*“We're able to share freely, and oftentimes, you think that that agency will have nothing to do with this family, but they've got a huge file or they've got information that's important. It gives us background, it gives us that full picture, and allows us to make sure we've got the right supports in place” [PS11]*

As explained by one participant, this contributed to the cohesion of the initiative by fostering trust, accountability, and opportunities for learning:

*“Sharing information and knowing that we can trust the other sectors with having this information and constantly collaborating, and communicating and letting everybody know that we're following through with what we're saying that we're doing. So, they know that we can continue to work together.” [PS4]*

## DEDICATED POINT OF CONTACT

Several caregivers noted that one of the key enabling factors to their engagement with TRiP was having a consistent, central point of contact within the initiative in the form of a case manager. By having a single point of contact who they could rely on to



address all their questions and inquiries, caregivers found that they had to jump through fewer hoops to get the information they needed. Many caregivers stressed the importance of feeling like they had a support system that they could rely on. For many caregivers, this made the process more accessible. Many caregivers remarked that their ability to stay informed and access relevant resources increased once they were connected with their designated point of contact within TRiP as one caregiver noted:

*“When I first got referred [to], I thought it was a pretty neat idea that how one worker could help blend all of them. So, if I needed help with [camp] or getting them [children] into extracurricular activities, I would just go straight to my TRiP case manager, and she would kind of arrange everything.” [PWLE3]*

Caregivers also noted that by corresponding with just one point of contact within TRiP, they were able to avoid having to repeat their same story multiple times. Some caregivers described the process of repeating their personal stories to access resources as uncomfortable, violating, and traumatizing. Fortunately, by working with just one point of contact within TRiP, caregivers were able to avoid the level of vulnerability that comes from having to divulge across multiple encounters with multiple people. This single point of contact could act on the participant’s behalf, presenting them with an emotional buffer through which they could get access to the resources they need, without needing to be put on the spot:

*“You're not getting thrown a bunch of different workers from a bunch of different places that you're like, “Hey, I just mentioned that to that person. Why do I have to do it again?” So, if you have that one worker to kind of open those doors for you and say it once, you don't feel violated with everybody asking the same things.” [PWLE3]*

Many caregivers noted the considerable support offered through this dedicated point of contact, who was able to understand and prioritize their needs. Caregivers noted that TRiP has provided them with breathing room, as they no longer had to manage all aspects of their child’s life by themselves and without assistance. The mere existence of TRiP was noted to lift a mental burden that many caregivers carried:



*"It's sometimes a push and pull with our relationship [with] me and him [child]. So, it's just nice to have [someone] outside where they're able to give advice like, "this is what you can try", or even just getting him to sit down and talk." [PWLE14]*

Having consistent case managers was also stressed by caregivers who remarked how they wished their family was able to continue working with TRiP case managers who had been assigned to support their child back when they first engaged with TRiP. By working with the same individual over time, both caregivers and children could build mutual understanding by establishing trust and rapport. As a result, caregivers and children were able to grow more comfortable with their designated point of contact, allowing them to divulge more information - that they may not have been comfortable sharing otherwise - and consequently access more relevant resources. This process allows them to develop a sense of familiarity and stability, providing them with more comfort as they navigate through what could be very stressful and uncertain circumstances:

## CONDUIT FOR COMMUNICATION WITH HUMAN SERVICES ORGANIZATIONS

Many caregivers appreciated how TRiP was able to provide a venue for regular communication between themselves and service providers from various human service organizations collaborating with TRiP. When caregivers attempted to establish these same communication channels on their own, this proved to be a lengthy and difficult process, in which they would have to contact and communicate with each service provider separately. Through TRiP, service providers could more easily share information and coordinate using the communication channels that had been established and facilitated by TRiP's process. This made the process of exchanging information between caregivers and service providers more efficient.

*"So before, I tried to keep communication between everybody. You talk to one person, say the school, the teacher, or the principal. They're still not really aware of a bunch of different things. So, with TRiP being involved, it's kind of brought us all together and makes us work better as a team." [PWLE22]*

Several caregivers also spoke positively about TRiP support workers who had been assigned to work with their child. Many of these caregivers noted that TRiP support workers acted as a reliable source of information and that their familiarity with and



knowledge of the City of Regina's social services system was an important asset. As a result, many caregivers looked to the insights of TRiP support workers as an alternative to the daunting and inefficient prospect of having to navigate the system themselves. This not only allowed caregivers to access relevant resources in a more timely manner, but also granted them access to resources that they likely never would have been able to access on their own:

*"They [TRiP initiative] know about all the different programs that [are] offered in the City. So otherwise, I wouldn't have a clue where to start. Like you can make phone calls. But sometimes, I think one day, I felt like I was on the phone from the time I woke up to everyone closed." [PWLE14]*

One caregiver explained how, with the assistance of their TRiP case manager, who linked to stakeholder resources, they were able to get their child tested for a psychological developmental assessment, which covers cognitive, developmental and mental health. This is a process that may not have been easily navigable if a caregiver was working on their own. However, with the assistance of someone who was already intimately familiar with this process, supported by an initiative with comprehensive connections in the social services sector, they were able to better inform themselves of the health needs of their child:

*"With Child and Youth [TRiP connected service], I really had my foot in the door with [child], so it opened up. I was able to get him tested for that [Attention Deficit Hyperactivity Disorder (ADHD)] and then we did more testing. I knew there was no FAS [Fetal Alcohol Syndrome] or autism or all of that, but it's just a wide spectrum that they test for all the disorders. He turned out to be good with the average, so he doesn't have all those other things, just a severe ADHD." [PWLE6]*



# 3 PERCEIVED GAPS: AREAS FOR IMPROVEMENT



Participants (stakeholders and persons with lived experience, including children and caregivers) identified several recurring challenges to effective partnership formation and implementation. Examples of challenges discussed by participants include: limited resources including financial and human resources; administrative delays with data sharing; ongoing difficulties in breaking down silos; limited presence in the community; and continuity of care.

## RESOURCE LIMITATIONS

The most frequently discussed barrier to supporting collaboration within TRiP, from the perspective of stakeholders, was the lack of available funding. Several stakeholders remarked that there was simply no realistic way for TRiP to acquire the funding it needed to support all of its desired projects. This chronic underfunding has been exacerbated by TRiP's struggle to attract additional funders, particularly from the provincial government stakeholders whose mandates TRiP intentionally aligns with:

*"There's no budget that's big enough to provide all of the resources that [such] a [collaborative] initiative needs." [PS3]*

Another stakeholder corroborated concerns about the financial barriers to TRiP's operations, noting that the initiative's budget has not increased since its inception, making it difficult to sustain operations amidst rising costs:

*"What's happened is that those dollars haven't increased since the start of the program [TRiP initiative], and costs have gone up in all sectors, and they're still trying to make it work within that initial budget. And of course, it's hard to go back to say, 'We need more money.'" [PS8]*



In general, a lack of resources was one of the biggest barriers to the operations of TRiP. The lack of resources was not limited to funding and also included political, human, and social resources. Oftentimes, this was the culmination of a lack of resources at the level of individual sectors and organizations involved in TRiP. When these stakeholders lacked the resources to cover the operating costs of their own organizations, they found it difficult to justify the allocation of resources to specifically support TRiP.

Many stakeholders pointed to a significant barrier related to the time allocated by frontline staff to the initiative. Stakeholders acknowledged the diverse demands of different sectors and the challenge of aligning their contributions with the unique requirements of TRiP. Stakeholders noted that, despite working within budgetary constraints, the limited time commitment from staff can impede relationship-building and hinder the prioritization of the initiative within their work plans.

*“The biggest hurdle is the percentage of time that's allotted to their staff members assigned to the [initiative]. And this is understanding everyone works within budgetary realities. But, when people are assigned for a day a week, it is hard to maintain those relationships, it's 20% of their job, it's hard for that to take priority for them, and to shift their mindset a little bit in that small amount of time.” [PS1]*

High turnover and transiency within different roles in TRiP, over relatively short periods of time, was deemed detrimental to the long-term well-being of the initiative. Every time an individual left one of the stakeholder positions at TRiP, they left behind a hole in the form of relationships, trust, and continuity. These gaps could sometimes require a significant investment of resources to fill. One stakeholder highlighted that turnover can result in new staff entering with limited understanding or buy-in to the initiative's goals. The lack of a cohesive team approach due to frequent changes in personnel may hinder the collaborative efforts required for the success of TRiP.

*“There has been a lot of turnover with staff. And one thing that I have noticed, when new people come in, they don't always have a good understanding of the initiative and their role. As a result, at times we have had staff that don't buy into working as a collaborative team.” [PS9]*



### IMPACT OF RESOURCE CONSTRAINTS ON CLIENTS

Many caregivers noted that the initiative is resource-constrained. From their perspective, the limited availability of resources meant that TRiP needed to be selective in the quantity and types of services it could offer. Furthermore, there can be fluctuations in the amount of resources available to TRiP over time, translating into periodic differences in the quantity and types of programs and services that the TRiP initiative can provide at any given point in time. This was reported to be a source of frustration among some caregivers, as they were unable to consistently rely on some of the resources offered by TRiP, which they perceived as being susceptible to disappearing whenever TRiP entered a period of low funding.

*“That [group outings with other youth] was temporary, where they had extra funding and they were able to do that. So, that wasn't something that they were able to continue doing.” [PWLE14]*

Many of the children/youth were unable to fully benefit from TRiP as a result of barriers in the amount of time, money, and energy that TRiP could offer. For instance, many caregivers explained they faced financial barriers to accessing appropriate programs and services for their children. Some extracurricular activities were associated with registration fees that caregivers could not afford. Furthermore, the financial barriers reported by caregivers often went beyond the upfront costs of accessing a program or service. For instance, some caregivers also considered the costs of traveling to and from activities, such as in the form of gas consumption, care maintenance, and sometimes out of town travel and associated costs (hotel and food). Going beyond the direct financial costs incurred to access these activities, many caregivers also had to consider the opportunity cost in terms of the time that had to be set aside as part of these travels. While TRiP attempts to link families to financial supports available within the community, such support often comes with specific eligibility criteria and potential restrictions, leaving affordability as a primary concern for caregivers.

*“Whether it's putting them [children] in sports or something extracurricular, they [TRiP] help with the funding. And it's amazing, because I can afford some things, but not everything. I can't keep in hockey, that's \$3,000. And that's not even including gas to start your car, and traveling or staying at hotels if you go out of the city.” [PWLE14]*



These financial constraints were an especially pressing concern for caregivers who were already experiencing financial burdens. Some caregivers acknowledged that their child could benefit from these sorts of extracurricular programs, but found them difficult to justify when they were currently struggling to pay for the costs of necessities such as food, rent, and utilities. Many of the caregivers who reported these financial concerns also happened to be the sole caregivers of their children, and thus faced an extraneous financial burden as a result of being the sole source of income. As a result, even when TRiP was able to refer caregivers to relevant services and programs for their children, there was no guarantee that these resources would be financially accessible to them.

*"I'm a single parent. I have so many expenses at home. I don't get child support for any of my kids. Well, except for my youngest, but that goes towards pull-ups and groceries and baby wipes and stuff and daycare." [PWLE21]*

Caregivers raised concerns about how these resource limitations translated into the lack of a comprehensive approach to meet the unique and diverse needs of families. Caregivers highlighted that while TRiP was equipped to provide them with immediate support in the face of crises, the initiative itself was far more surface-level in addressing other areas of concern. Caregivers noted that TRiP's mandate is geared towards families who are in the most critical need of support. For instance, one caregiver's understanding of TRiP was that it meets families at the point of crisis, and could only offer limited preventive interventions to support vulnerable families who have not quite reached a point of immediate crisis.

*"Largely our engagement with TRiP has been reactive, something is wrong and so we're calling and we're asking for help." [PWLE16]*

Some caregivers and children attributed these circumstances to the resource constraints faced by TRiP, which resulted in TRiP allocating its limited pool of resources towards the most severe cases that were presented to them. One caregiver noted:



*“They get points for effort. But, the sense I get, they don't tell me as much because they're being professional, I suppose. I think they [are] just overloaded. I just don't think they have enough resources. And so, they're able to operate at a surface level with a lot of things, but to really go deep, they're not really able to do that. It becomes almost a squeaky wheel type situation. So whoever has the biggest problem gets the resources.” [PWLE16]*

Other caregivers described the consequences they faced as a result of the initiative's lack of resources. For instance, as TRiP's staff were often stretched thin and inadequately resourced, many caregivers felt that their needs were not being met. They suggested that because TRiP's staff had insufficient resources to manage multiple competing priorities, in the form of children with varying needs, some children were inevitably going to receive more or less support than others. One caregiver noted how they felt that the resource constraints faced by TRiP's staff often translated into delays for a young person being accepted to TRiP.

*“[In] the summertime, she was supposed to have a support worker all summer. But, that didn't go very well. No one called me and that was kind of disappointing. Because my daughter could have used some of that one-on-one time with [the support] worker. But they didn't end up coming for her...” [PWLE19]*

Many caregivers noted that as a result of resource constraints, there could often be long wait times between the initiation of the referral process, the acceptance of their application by TRiP, and their subsequent provision of relevant programs and services. As per caregivers, this process could take up to several months, leaving themselves and their children in a frustrating state of limbo. The time spent on TRiP's waitlist impedes the coordinated custom case conferencing that could occur through TRiP's collaborative approach. While caregivers have the option to access services directly, these channels are often exhausted, making TRiP the preferred choice. Consequently, the needs of their child may remain unaddressed, potentially leading to further deterioration in their condition.

Despite TRiP's efforts to initiate contact with a referral source within a few weeks of receiving a referral to advise on potential timeframes, caregivers often found themselves uninformed about their status during this period, with limited ability to plan amidst uncertainty. This could be especially frustrating, as the long wait times



could even interfere with their ability to access other forms of support for their children in the interim. For instance, one caregiver suggested that their application to TRiP was declined because they had made a separate, yet simultaneous, application to Health Services. If their assessment was correct, then caregivers not only had to grapple with these long wait times but also had to avoid preemptively applying for other services, leaving them with little safety net if their application to TRiP did not go through.

*“They [TRiP team] weren't clear and there was a very long period of time between the referral and the contact. We waited months, I forgot we contacted them. It was a long time to get in.” [PWLE16]*

### CHALLENGES WITH DATA SHARING

The data sharing efforts at the core of TRiP are generally well regarded by stakeholders and persons with lived experience alike, particularly for how they allow stakeholders to share information efficiently and seamlessly. That said, the current data sharing practices used within TRiP are not without criticism. Stakeholders discussed the necessity of data sharing agreements and privacy impact assessments when linking datasets, emphasizing the importance of safeguarding individuals' privacy. One stakeholder brought the challenges related to obtaining and implementing consent for information sharing. While TRiP staff uphold their home agencies' privacy guidelines, the stakeholder noted difficulties in aligning TRiP's individual consent with the protocols of other agencies. This discrepancy can result in challenges when attempting to share information across different agencies, leading to the need for separate consent forms and potentially hindering seamless collaboration.

*“At the end of the day, all of us individual employees at TRiP team are responsible for upholding our home agencies, guidelines, etc, around privacy and confidentiality. But working within TRiP team, we also have our individual TRiP consent, that clearly lays out this, we can share information, etc, that is signed by the caregiver. What is challenging sometimes is bringing that consent to teams, and to other professionals and different agencies and then coming back and saying, 'We cannot share that information. We have to get a separate consent form signed'. So that's one that has really come up several times.” [PS24]*



### ONGOING SILOING

The data analysis suggests the persistent challenges faced by TRiP in achieving its goal of breaking down administrative and delivery silos among stakeholders. Despite significant strides, differences in approaches stemming from cultural and organizational norms still exist, hindering seamless collaboration. Stakeholders expressed concerns about the lack of structures to hold individuals accountable within TRiP.

*“For years, I've heard [they] talk about, “We need this commitment, we need this growth, we need more staff”. So, I don't feel that there is enough in place to hold you accountable, basically, or to have that common agenda. I think it is in silos for that piece.” [PS14]*

Another stakeholder made an example of challenges with breaking down silos within health and social services, where individuals may struggle to view themselves as integral parts of the solution to broader problems. They discussed the difficulty in obtaining diverse perspectives and collaboration where certain issues are perceived as specific to a particular sector.

*“You're given, “Here's a problem, resolve it”, but it's hard to get other perspectives, because they don't necessarily see themselves as being part of the solution. So, if you work in health or social services, a lot of things are kind of seen as, like health or social services specific and then you don't get as much work or agreement on certain things. So, I think those would be the biggest reasons as to why that siloing tends to happen.” [PS12]*

Similarly, other stakeholders identified barriers such as lack of commitment and understanding among individuals and agencies involved, and inherent difficulty in working as a team, acknowledging that differing perspectives, biases, and professional backgrounds can create challenges.

*“Just working in a team, sometimes it's hard. It's fantastic and it's wonderful. But, it can also be difficult too. So, you do have differing perspectives, and you do have differing kinds of views on things, both as human beings and then also as professionals. And we all do, we all bring our own biases, we all bring our own perceptions into things. It's our human nature. It's a huge barrier when that isn't able to happen.” [PS24]*



Unequal engagement and commitment among different agencies were identified as significant challenges. Stakeholders highlighted the variability in engagement levels among different agencies or ministries involved in TRiP. For instance, some stakeholders were noted to contribute considerably less time, and significantly fewer resources and personnel, towards the operations of TRiP. This was often cited as a source of frustration and indicative of a lack of cohesion.

*“There are some agencies or ministries that are more involved and engaged and committed to these collaborative groups than others; and I think that makes a big difference.” [PS14]*

### LIMITED PUBLIC PRESENCE AND AWARENESS

The research findings highlight a significant challenge faced by TRiP concerning its limited public presence and awareness. Both stakeholders and persons with lived experience noted that in the status quo, TRiP does not reach many individuals who could benefit from its coordinated supports. It should be noted that TRiP is a referral-based initiative and does not actively outreach to families but to diverse government and non-government organizations to garner support. This referral-based approach, however, questions the effectiveness of self-referral component of TRiP that expects families to self-refer. Some stakeholders, and many persons with lived experience, who participated in the study, expressed concerns about public unfamiliarity with TRiP’s existence and mandate. This lack of awareness raises concerns about the potential underutilization of TRiP’s coordinated supports, with individuals missing out on valuable support. Stakeholders noted that, should TRiP and its mandate gain more of a presence in the public consciousness, this presence may translate into an increased pressure on politicians to allocate more resources their way.

*“At the ministry level, people don't know exactly what TRiP do[es]. So, they should get a kind of clear idea about it.” [PS18]*

Some stakeholders brought attention to the delicate balance between raising awareness and the potential increase in demand for services, which could strain existing resources and budgets. This dilemma highlights the importance of strategic communication efforts to ensure that increased awareness is coupled with sustainable resource planning.



*“Even in public messages, if you talk to families, and you mentioned TRiP, most have no idea what TRiP is or what it does, and how it can be helpful for their child or their family. So, a little bit more awareness in the general public in terms of how we can support, but that usually leads to more business. So that also comes with the challenge of manpower and resources in that as well.” [PS11]*

The limited public presence was more emphasized by persons with lived experience. Many caregivers had no knowledge of TRiP’s existence prior to their referral to TRiP. Several youth remarked that they had expected TRiP to be similar to other programs they had accessed previously. For instance, one youth stated that they had expected TRiP to be similar in structure and format to *Big Brothers Big Sisters*. Overall, the child was impressed by TRiP, and stated that their expectations were exceeded. The underwhelming expectations that persons with lived experience had of TRiP may have dissuaded them from engaging with its coordinated support services.

*“It’s kind of funny because I was just expecting, like a ‘Big Brothers Big Sisters’ thing. But it was so much more than that. Like they actually care. They want you to do well, more than other companies or other places.” [PWLE13]*

This reflected a wider issue in the social services sector, in which there is inadequate external messaging and communication to inform caregivers of the types of supports and resources that are available to both themselves and their children. This lack of knowledge resulted in many caregivers reporting feelings of being alone, unsupported, or abandoned. In some cases, this may have translated into feelings of hopelessness and despair. Furthermore, caregivers, especially those who are already experiencing challenges in meeting the needs of their children, may not have the time or energy to navigate different systems of care or research appropriate interventions and support services.

*“You don’t know what you don’t know. So, I know that he’s got challenges and we’re trying to figure out what those challenges are. But at the same time, they’re like: “he’s not fitting into this school, we want him to go here”. Nobody was suggesting anything and I didn’t know. I just thought I have a bad kid, like [laughter] for real. So, definitely didn’t know of most of the things that I know now.” [PWLE22]*



Oftentimes, caregivers were entirely reliant on referrals from other organizations - typically by the police, schools, or social services - to learn about TRiP. As a result, this meant that caregivers had little opportunity to familiarize themselves with TRiP before initiating its onboarding process. This lack of information could make engaging with TRiP a more daunting and intimidating process.

At the same time, it should be acknowledged that this referral model presented a number of advantages as well. Through these collaborations with stakeholders from various human service organizations and community partners, information about TRiP was able to reach a wider audience than it would have been able to otherwise. For instance, one caregiver highlighted how they first learned about TRiP through a police officer. This speaks to the role of the early intervention lens of the policing sector in increasing the promotion and adoption of TRiP.

*"I wish TRiP was a little bit more known than it is. Because I never knew about TRiP until I had that police officer tell me "Well, there's TRiP" and I'm like, "What's TRiP?" [PWLE14]*

The limited awareness of TRiP within the general public meant that many caregivers were unable to take advantage of the initiative's self-referral process. Many caregivers did not know that this self-referral process was available to them. This may be indicative of a lack of adequate external communication by TRiP.

*"I don't know that it [TRiP] is as known as it could be. I didn't know I could do self-referral until not that long ago. But there are a number of kids that I can think of that would really benefit from it. And I don't know if all the schools know about TRiP." [PWLE20]*

Even among those families who were already engaged with TRiP, there was a lack of clarity on the initiative's scope and mandate. One caregiver expressed that they were not sure which age groups were eligible for enrolment in TRiP, and questioned whether the initiative was being accessed by all those who could benefit from its coordinated support services. The following excerpt was provided by a caregiver who was already enrolled with TRiP, suggesting that even those who are currently engaged had a limited understanding of the initiative.



*“So, I don't know how old you have to be for TRiP but yeah, there's a lot of like young kids. There's ECIP [Early Childhood Intervention Program] and things like that I don't know if they're involved with ECIP or not.” [PWLE22]*

The lack of awareness may have also contributed to pervasive fear and stigma around engaging with TRiP. When interviewed, several youths mentioned that they were anxious or distressed about engaging with TRiP. They explained that, prior to engaging with TRiP, their understanding was that the initiative was specifically intended to address the needs of ‘bad and troubled’ kids. The children interviewed were fearful of the type of treatment or judgment they would receive, or were concerned with how engaging with TRiP would reflect upon them. The severity of this anxiety is exemplified by one child’s experience of a panic attack during the intake process, highlighting the emotional toll associated with the initial reluctance to engage with TRiP.

*“[Now, I'm] more willing to go, less scared. [However,] I broke down crying, like a panic attack during my intake because I really didn't want to join.” [PWLE13]*

As per many persons with lived experience, this trepidation was exacerbated by a lack of knowledge of what TRiP was and what it entailed. This lack of awareness may have contributed to their feelings of uncertainty, causing them to fear the worst. This finding underscores the importance of addressing misconceptions and improving awareness to reduce stigma and encourage a more positive perception of TRiP among its potential beneficiaries.

*“I was pretty intimidated at first because it's mostly through the Regina Police Service at the start. And I was just concerned that my son was going to be singled out with all of this interaction with the police in plain sight. But, it turned out that they're very subtle with that and it's been a lot different than I thought.” [PWLE2]*

*“I didn't really know what to expect. It's a little leery to hear that it's an [initiative] partnered with the police. You're like, if my kid doesn't listen, he's going to end up in jail. But no, they were really good. [PWLE20]*



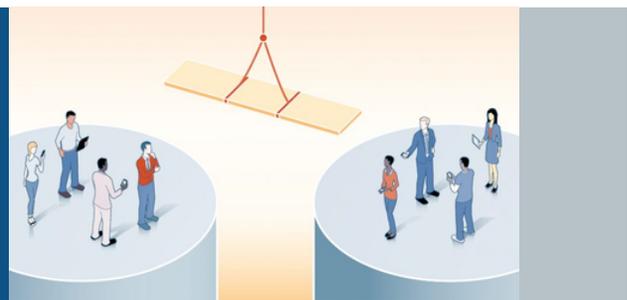
### AGE-RESTRICTED SUPPORTS AND CONTINUITY OF CARE

The research findings highlight a significant challenge with the services and supports utilized by TRiP concerning age restrictions on the coordinated supports offered. TRiP often relies on coordinating support and programs in the social services sector to meet the needs of its clients. Caregivers expressed frustration in finding and accessing suitable resources for children under the age of 12, with several noting that many available community and government services that TRiP assisted in making referrals to were geared primarily towards adolescents and youth. This limitation poses a barrier for parents dealing with behavioral issues in younger children, as they struggle to secure appropriate support. Addressing this challenge is crucial for enhancing the accessibility and effectiveness of TRiP's coordinated support for a wider range of children and their families.

*"But it was all private, and getting him [child] in somewhere; a lot of places were like, "no, we can't do anything. He's too young"." [PWLE14]*

The concerns raised by caregivers reflect a wider discussion in the social services sector about the insufficient continuity of care and the limited considerations for the changing needs of children as they progress through different stages of their life. The findings emphasize the need for more comprehensive and age-appropriate support services for children as they progress through different life stages. The data analysis suggests that there must be a careful balance between the need for continuity of care, which must be seen as stable and reliable, and the fact that the types of support and programming needed by children will vary as they transition from childhood to adolescence/youth to adulthood.

## 4 SUGGESTIONS FOR IMPROVEMENT



Both participant groups (stakeholders and persons with lived experiences) provided several suggestions for improvement that TRiP could consider to better meet its mandate, including: adopting a proactive mindset and approach; enhancing TRiP



visibility; governance revitalization; greater retention of Steering Committee members and TRiP team staff; and coordination of more support opportunities for children.

## SUGGESTION 1: ADOPTING A PROACTIVE APPROACH

The research findings highlight a crucial perspective from both stakeholders and persons with lived experience, emphasizing the need for a shift from a reactive to a proactive approach in the allocation of resources and support services. Caregivers expressed the view that there is a current emphasis on addressing immediate concerns for children and families, often neglecting the vital aspect of building the capacity of caregivers. In caregivers' view, resources currently tend to be primarily allocated towards support services that are intended to fill niches that caregivers are unable to provide. Some caregivers suggested that existing support services accessible through TRiP do not necessarily provide opportunities for families to bolster their own self-sufficiency. This may result in arrangements in which families become overly dependent on the services accessed through TRiP, to the point where they may be unable to compensate for the loss of these services after phasing out of the initiative.

Several caregivers highlighted the challenge of TRiP's involvement often occurring after issues have escalated into more significant problems. Caregivers expressed that some elements of a proactive approach, for instance having consistent check-ins between caregivers and TRiP case manager, could help to circumvent these challenges.

*"I think the support would come from more kind of nonreactive check-ins. I think that would probably be really helpful." [PWLE16]*

Caregivers observed that while the current support services effectively address immediate needs, they may not fully empower families to strengthen their self-sufficiency. This concern suggests a nuanced understanding of the balance required in providing immediate relief while concurrently fostering long-term resilience within families. One proposal from caregivers is to reallocate resources towards initiatives



hat actively build the capacity of caregivers. The focus on the child's needs, while crucial, should not overshadow the challenges faced by caregivers who may feel isolated and unsupported.

*“What is sometimes missed is the focus is so much on the child, and it should be. There should be a lot of focus on the child, but the caregivers themselves, you're kind of out there on your own, like you really struggle.”[PWLE16]*

Suggestions to address this challenge included connecting caregivers with professional prevention programs for specialized knowledge and guidance, enabling them to navigate developmental milestones more effectively. However, the findings also illuminated challenges TRiP faces in pursuing a proactive agenda.

One example of a potential capacity-building strategy involved connecting caregivers with professionals prevention programs such as Early Childhood Prevention Program. Caregivers suggested that these connections could empower caregivers by enhancing their knowledge and skills related to child development. By connecting with these experts, caregivers may gain access to specialized knowledge and guidance, enabling them to navigate developmental milestones more effectively. This could serve as a valuable basis for capacity-building efforts, providing caregivers with ideas for how they can modify existing living arrangements to better support the growth of their children. This not only contributes to the well-being of the child but also equips caregivers with tools to create a nurturing home environment that aligns with their child's unique needs.

*“It's Early Childhood Intervention Program [ECIP]. So, we were involved with ECIP when [child] was really young and I don't know if [TRiP is] involved with them. But, if they are, and they have young kids, that would be something that would be really helpful because they'll come out and help with speech, behavior and stuff like that.” [PWLE22]*

The suggestion implies that by investing in services and programs delivered in the community or supported by government funding, that enhance the skills, knowledge, and capabilities of caregivers, the overall effectiveness of TRiP can be amplified. This, in turn, could contribute to the sustained well-being of families even after their involvement with the initiative concludes. For example, one stakeholder highlighted the potential impact of adopting a proactive mindset on funding constraints. In their view, a shift towards proactive and preventative measures might necessitate initial



investments but could yield long-term benefits, both in terms of cost savings and improved outcomes. The hypothetical example this stakeholder provided about reallocating resources from part-time to full-time staff underscores the potential ripple effect such a shift could have on the capacity of the initiative. Building relationships and capacity within families, as suggested, is seen as a proactive measure that can contribute significantly to reducing the overall demand for services, thereby achieving a sustainable impact.

*“We all work with limited budgets, and all of those pieces with a growing population and not equal resources. I think that all of our organizations need to look at the work that's being done through TRiP and look at it through the lens of proactive and preventative, which is harder to measure. And go to the other agencies and say, if you can change your investment, just as a hypothetical example, from a part-time to a full time employee to [a 1.0 employee], think of the number of files and cases that could be carried by that person - building relationships with the family, building capacity with the family - I think we could have a significant impact. I truly believe, although I can't quantify it, we would reduce the number of people needing to access those services from that agency. I think that's the piece that we have to change the mindset to see it that way differently.” [PS1]*

However, the findings also shed light on the challenges faced by TRiP in pursuing a proactive agenda. For example, one stakeholder noted that prevalent budgetary discussions with stakeholders and potential funders tend to prioritize reactive issues such as homelessness and food insecurity over long-term projects. The perceived dichotomy between addressing immediate, pressing community concerns and investing in the future sustainability of preventative initiatives presents a complex challenge. This dilemma underscores the need for a broader societal recognition of the value of proactive, preventative measures in enhancing community well-being. Balancing the urgency of reactive interventions with the foresight of proactive strategies is pivotal for the initiative's success in fostering resilient and self-sufficient communities.

*“Anytime you're trying to do proactive work, it's easy to spend money on reactive issues. And so there's this notion [that] we can't afford to do both. And we have to keep reacting because these are day-to-day problems in the community. And so it becomes easier as a budget discussion and a decision point, to say, well, we can't invest in this, because the need is too great on homelessness and food insecurity. Obviously, those things need to be our priority.” [PS6]*



## SUGGESTION 2: ENHANCING TRiP VISIBILITY

Participants expressed a need for TRiP, and its mandate, to be better known by members of the public; especially by the youth and their families who may benefit from TRiP's services. Persons with lived experience highlighted the potential benefits of increased visibility, viewing it as a means to promote the image of TRiP as an accessible, approachable, and safe place for families seeking support. Caregivers noted that there are many misconceptions which may cloud the community's perception of TRiP, to the point where people who could benefit from TRiP's supports, may be deterred from doing so. For instance, the few children who were aware of TRiP prior to their referral typically had very negative perceptions of what the initiative entailed. Many perceived TRiP to be more punitive, rather than supportive, and were thus fearful of engaging with its services. Persons with lived experience noted that TRiP should put effort into changing this perception and improving its image as one child remarked:

*"I think TRiP should start doing more things out there in the community. So, people are aware that it's not like a punishment or for bad kids or anything." [PWLE13]*

Similarly, many aspects of TRiP are poorly understood by both the general public and individuals who are already engaged with its support services. For instance, many caregivers were unaware of the fact that TRiP is open to self-referrals by families, and that caregivers do not need to access TRiP exclusively through referrals by service providers.

Moreover, stakeholders saw external communications as a strategic avenue for securing additional resources, whether in the form of funding, skilled personnel, or collaborative partnerships with other agencies. By increasing awareness, TRiP could potentially unlock opportunities for mutually beneficial relationships with like-minded organizations.

A key advocacy point among stakeholders was the need for TRiP to have a more prominent presence in schools and communities. Stakeholders emphasized the importance of families being informed about TRiP's existence, as this awareness could prompt them to seek support at an earlier stage when their children begin to



face challenges. The goal is to enable families to reach out to TRiP before issues escalate, thereby enhancing the chances of providing timely support for the child's safety and well-being. Currently, the lack of general awareness often results in families learning about TRiP only when referred by individual service providers like healthcare professionals, law enforcement, or social services, at a stage where the child's condition has already progressed significantly.

Stakeholders proposed various strategies to boost visibility. One stakeholder highlighted the importance of proactive efforts to promote TRiP, suggesting active engagement in schools, attendance at community events like health fairs, and collaboration with other sectors involved in the Steering Committee. The intention is to bridge the gap in awareness and ensure that TRiP's services are known to a broader audience.

*"So, it's our job to bring that to the forefront and make sure that people know about it [TRiP], and connect more to the school divisions. So, asking to be present at a principal's meeting to promote it. And out in the community. If there's events like a health fair, set up a booth and be there to speak to other people who are may be providing similar services for families just in a different way. With the sectors that are involved with a Steering Committee, offer my support: how can I be involved with your community to come out and share the information about TRiP? I believe we have to continue to promote it, so everybody is aware, and we can be present for the families that need it." [PS25]*

## SUGGESTION 3: GOVERNANCE REVITALIZATION

A recurring theme among stakeholders was the need for a revamped governance structure. Concerns were raised about the limitations of existing governance, particularly the Steering Committee, in making decisive decisions on critical matters like funding and resource allocation for the entire initiative. Stakeholders particularly expressed concerns about the composition and functioning of the Steering Committee. Some stakeholders noted that because the Steering Committee was typically composed of leaders from TRiP's collaborating organizations, the committee members were often - consciously or not - split between advocating for TRiP as a whole and advocating for the best interests of their respective organizations.



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*“Now, we kind of loosely have an advisory board that helps make decisions, but they make decisions from the chair of the organization that they sit in. So sometimes, when you have a board that looks after the interests of an organization, the board members have to put that hat on, and they have to think about what’s best for the board.” [PS6]*

Some stakeholders also expressed concerns about the role/position and authority of current Steering Committee members noting that in the existing governance model, some members of the Steering Committee lack the authority to make definite decisions regarding funding, resourcing, and other crucial aspects on behalf of the initiative as a whole. Instead, decisions are made through a careful process of deliberation in which the Steering Committee members act as checks and balances against one another. One stakeholder emphasized the importance of having decision-makers with substantial authority directly involved in the Steering Committee to shape organizational direction. This stakeholder recognized that impactful decisions and strategic directions often require the authority to enact changes and allocate resources effectively.

*“We needed decision makers at the table, not, with all due respect, three or four levels down, that didn’t have the authority to make things happen. [We] insisted on superintendents and people that basically had broad authority to make decisions and carve out organizational direction.” [PS5]*

This sentiment was echoed by other stakeholders who emphasized the significance of having decision-makers with the ability to secure approvals, especially regarding budgetary matters, which directly impacts the efficiency of the decision-making process. Stakeholders stressed that individuals who can provide immediate responses and approvals, without the need for extensive consultations or approval processes, are crucial to preventing bottlenecks.

*“If you have a bunch of people that say, ‘sorry, I can’t vote on this, I’m going to have to take it back to my leader and get information and get the approval for it’ versus someone... So if they’re looking for a budget increase, for example, from the partners, [they] can say, “Yeah, that’s no problem, we can do that”... If you have someone who’s in a position that doesn’t have the authority to make a decision, make a budgetary promise, any of those things, then it bogs down the process.” [PS6]*



Another stakeholder recommended a shift, proposing that Steering Committee members need to be directors, not managers to allow them to have the final say on large decisions, so resources could be allocated more efficiently and decisively.

*“You need people that can make that [those] decisions, or have a direct link to the people who make decisions. Managers don't have that. There are too many levels to go through to get there. And it can be stopped at any level. So, you need appropriate governance, it doesn't have it right now, in my opinion.” [PS20]*

Stakeholders emphasized the critical role of top-level buy-in and commitment for the success and sustainability of the initiative. One stakeholder contended that if senior leadership (i.e., Steering Committee) does not fully support and commit to the initiative, it runs the risk of unraveling from the top down. Stressing the importance of senior figures understanding the initiative's value, the stakeholders suggested that even if top leaders cannot be physically present, they should appoint someone at a senior level who comprehends the initiative's significance. This highlights the participant's belief that commitment from influential leaders is vital not only for the initiative's continued progress but also for maintaining cohesion within the organization.

*“... if they don't buy in at the top, it's destined to start to come apart because the organization will sense that lack of commitment at the very top and just unravel from there. So, we need to ensure that our senior people understand the value. I think it's important that they're the right people. I think they need to, if they can't physically be there to ensure that it's still moving forward, they need to ensure a senior person that gets it is speaking for the organization.” [PS5]*

Some stakeholders questioned the effectiveness of the existing governance model, with some even pitching alternate models of governance that would allow for a more independent board whose interests were more exclusively committed to that of TRiP. One stakeholder in particular expressed a vision for a more robust governance model involving a full-time Executive Director who would be accountable to a representative board of directors from all collaborating organizations. Currently, the Steering Committee's decision-making dynamics, influenced by the competing stakeholders perspectives, may lead to fragmented perspectives, potentially hindering the



cohesive pursuit of TRiP's objectives. This stakeholder envisions the next phase of TRiP involving not only sustainable funding but also a governance structure that transcends the collaborative problem-solving phase and establishes a more formalized, strategic oversight for the initiative. This emphasizes the importance of evolving TRiP's governance model to effectively address the multifaceted challenges it seeks to tackle.

*"Probably in the grand scheme of running a non-profit organization, or a provincially funded organization, likely still has some room to grow when it comes to governance. I think, in a perfect world they have a full-time Executive Director that answers to a board of directors that is representative of all the partners. Right now, we have an advisory group, which comes from social services, mental health, policing, education, but they all still have their own budgets. They all still have their own areas. I don't think it quite is where we need it to get to and I think, that's part of what the next level of this looks like, is not only finding some sort of longer-term sustainable funding, but governance that is a step above a bunch of human service partners coming together to try and solve a problem." [PS6]*

Some stakeholders also noted that the Steering Committee members were often far removed from the frontlines of their respective organizations, suggesting that members may benefit from a more hands-on approach. In stakeholders' view, the Steering Committee members were often uninformed as to the reality faced by those who were working directly with children and families to translate the organization's mandate into the real world. In such instances, stakeholders questioned whether the Steering Committee members were equipped to make decisions that aligned with the practical limitations faced by TRiP's team members.

*"I think at times as a Steering Committee we lose touch a little bit with what's happening with the working group [TRiP team], their conversations around support for children and families. What does it look like to intake a student? What does that programming in the meetings look like? What threshold do we hit to let that family go? I don't feel like I have a really good understanding of that, even with my years on the Steering Committee. So, that could be a recommendation that we take some time as a Steering Committee to commit to go into a few iCT [intersectoral Collaboration Team] meetings throughout the year." [PS16]*



This sentiment was echoed by another stakeholder who highlighted a desire for Steering Committee members to have a better understanding of the processes, challenges, and thresholds faced by TRiP team members, which reflects a need for a more integrated governance structure. This underscores the importance of fostering a closer alignment between the higher-level strategic discussions within the Steering Committee and the practical aspects of TRiP's operations.

*"I think having players, part of the Steering Committee, understand our day-to-day work is crucial. Now, does that mean that Steering Committee members need to sit here and have an office at TRiP? No. I just want kind of that basis of understanding, genuine understanding, of what our day-to-day work looks like, as case managers, as a school engagement worker, as a TRiP admin, as an intake- because that understanding right now isn't there." [PS24]*

### MOVING TOWARD A UNIFIED GOVERNANCE STRUCTURE

Some stakeholders underscored the need for a higher-level governance structure to optimize decision-making processes and resource utilization. By higher-level governance model, they meant integrating existing siloed but interconnected risk reduction collaborative initiatives under a unified integrated and comprehensive governance structure. One stakeholder emphasized the benefits of this unified governance structure in terms of efficient resource allocation and decision-making, particularly regarding human resources and funding. In this stakeholder view, a broader governance framework can facilitate coordinated efforts and streamline operational functions across various initiatives, and more importantly across various sectors. Stakeholders' call for a broader governance structure overseeing multiple existing collaborative initiatives indicates a recognition of the interconnected nature of these initiatives.

*"We need a number of these [collaborative] initiatives to be working closer together and to be managed by one governance structure. A number of those pieces that the governance structures are seeing can have a lot of the same human resources functioning in them at the operational level. But, there needs to be a much broader governance structure that oversees all of these pieces, so that appropriate decisions can be made around human resources and financial resource funding." [PS20]*



This stakeholder acknowledged that TRiP was starting to reorganize in this direction, a shift towards a unified governance structure by combining Steering Committee meetings for TRiP and other Regina-based risk reduction collaborative initiatives such as Hub, and Assessment of Risk to Others (ARTO) formerly known as Violent Threat Risk Assessments (VTRA), acknowledging that there may be some initial duplication. They discussed the emergence of a high-level working group comprising various existing Regina-based collaborative initiatives. In this working group, TRiP was represented by just two individuals. These two individuals were able to provide TRiP with a unified voice in these working group meetings, allowing them to concisely advocate on behalf of TRiP's needs, mandate, and shortcomings. As the sole representatives of TRiP in this working group, these two individuals wielded significant influence over TRiP's engagement in these discussions, allowing them to make more conclusive and definite decisions. This stakeholder envisioned a streamlined approach where one person oversees multiple tables, including the Hub, ARTO formerly VTRA, TRiP, and potentially a connection to the Early Years Family Resource Centres. Stakeholders viewed this consolidation as aiming to improve efficiency and coordination, ensuring a comprehensive and unified approach to addressing the needs of vulnerable individuals in high-risk environments. The stakeholder saw this evolving governance structure as a crucial step towards achieving a more integrated and effective response to complex issues, highlighting the importance of refining and optimizing the structure for enhanced collaboration and impact:

*“My understanding is they were starting to move towards that [unified] governance structure. At our Steering Committee meeting now we were having a Steering Committee meeting, about TRiP and the Hub and we had all the people together. Now there was a little bit of duplication - like we have two people, maybe from here [one stakeholder agency] where some of the efficiencies will come in, as they continue to refine that. You will have one person who is overseeing the HUB table, the VTRA [Violence Threat Risk Assessment] table, the TRiP table, and maybe has something to do with [Early Years Family Resource Centres], but stuff that is dealing with vulnerable people in high risk environments. So that's what I believe is needed for a governance structure.” [PS20]*

Another stakeholder independently raised the topic of a unified governance structure. Much like the prior participant, this stakeholder suggested that the proposed governance body could comprise the leadership of all Regina-based collaborative initiatives that have a mandate centered around providing risk



reduction for children and youths in the community. This proposed committee was envisioned as a bridge between the community's needs and government-driven initiatives, capable of digesting and relaying critical information to higher levels within the departments. Within this governance body, TRiP would be represented by high-level decision-makers who had the power to act decisively on behalf of the rest of the initiative. This stakeholder emphasized the importance of this new governance body's ability to facilitate collaboration among funding bodies, recognizing that addressing complex issues requires coordinated efforts across multiple sectors:

*"... this was about trying to provide seamless risk reduction and intervention services in our community. The reason that I bring this up is because in our view, a continuum needs to be comprehensive, it was our belief that it was everything from the [Early Years Family Resource Centre], to TRiP which includes TIUI and T2 and up, to Hub and to VTRA [Violence Threat Risk Assessment]. We have been proposing that there ought to be a high-level decision-making body of people who can understand what each of these very interconnected, importantly linked initiatives that are all - except for the early years family centers - are government involved." [PS23]*

## SUGGESTION 4: ENHANCING ACCOUNTABILITY

The data analysis suggests a perceived absence of formal accountability measures at both the Steering Committee and TRiP team (frontline staff) levels. Some stakeholders expressed concerns about the lack of mechanisms for verifying whether the overall initiative expectations are being fulfilled, raising questions about the efficacy of existing governance and accountability mechanisms in ensuring tangible outcomes. One stakeholder raised concerns regarding accountability and the need for a more robust system to check whether the goals and requirements of TRiP are being effectively implemented. The stakeholder mentions the presence of a Steering Committee and a coordinator but suggests that there might be a gap in ensuring that the intended outcomes are realized in practice. This finding suggests a potential area for improvement in terms of accountability mechanisms and the need for clearer lines of responsibility to ensure that the initiative's goals are being met on the ground. Addressing these concerns may contribute to the overall success and impact of TRiP.



*"I'm just talking about the overall expectations, who's checking that those expectations have been met? Nobody's checking. So that's one concern that I do have about governance. I know there's a Steering Committee and then the coordinator but there isn't a whole lot of leadership, as in ensuring that the goals and what is needed for TRiP is actually occurring in real life." [PS15]*

### ACCOUNTABILITY AT FRONTLINE STAFF LEVEL

It should be noted that frontline staff, who represent different agencies, are primarily guided by and report directly to their respective home agencies. While TRiP Coordinator may offer guidance, the ultimate responsibility for addressing work expectations or employee concerns lies with the home agency, usually facilitated through the Steering Committee representatives. Despite this, many frontline staff expressed concerns about lack of formal accountability within TRiP. In the absence of a formal accountability mechanism, several frontline staff noted that TRiP tends to rely on 'organic' or informal accountability mechanisms - i.e. frontline team holding one another accountable in meetings or in their communications - rather than formal processes that had been defined from the outset of the initiative. One stakeholder noted that frontline workers play a crucial role in ensuring accountability by addressing instances where individuals may not fulfill their responsibilities. This accountability structure appears to be decentralized, emphasizing peer-driven expectations and feedback rather than a formalized framework for monitoring and enforcing obligations among partner agencies.

*"There's not really any real measures in place from an accountability perspective for our partner agencies. At the working level, at the frontline level, there's no accountability framework. The accountability is simply people are held accountable by their peers and by their partners. I say peers, but really by your working partners. So, our frontline workers will keep our staff accountable, so if somebody's not doing what they should, then the staff holds those people accountable by just going to announce it." [PS20]*

Many frontline staff stated that they were unsatisfied with this informal or organic accountability system. Some even likened the status quo of organic accountability mechanisms to a total absence of accountability whatsoever.

*"I really don't see any accountability. I'm being honest, I haven't seen any accountability." [PS15]*



This situation often leads to frustration when a new staff member from the same stakeholder agency replaces a previous one, and the departing individual has not adequately followed TRiP processes or documented their work. Consequently, the new staff member is left scrambling to catch up and rectify the files and reporting issues, as one stakeholder noted:

*“When I came here, I started going through files and stuff to get history, and I found that there is no history in the files, they haven't been kept up. And yet they do a review every three months of the files, but nobody physically does the review. And the files were a mess.” [PS15]*

According to stakeholders, the subsequent lack of accountability often resulted in some stakeholders not putting as much care or effort into their work as they could. This could, in turn, result in inefficiency and disillusionment with TRiP's mandate. The lack of sufficient accountability could result in stakeholders losing interest and, gradually, disassociating from TRiP's cause.

*“Internally, they need to have more accountability. I feel like I can walk out here for three hours and no one would question where I was. I don't have to tell anybody. There has to be some accountability for the onboarding, [and this is] for safety. I could go in North Central and don't come back.” [PS15]*

Stakeholders highlighted the potential benefits of having a form of constitution or a universally-adopted memorandum of understanding (MOU) from the inception of TRiP initiative.

Stakeholders suggested that a clear and detailed agreement specifying each organization's roles, commitments, and resource contributions would have provided a more solid foundation for the initiative. This, in turn, could have facilitated smoother operations and minimized challenges related to staffing fluctuations and resource allocations.



*“If I was going to start from scratch, having that government document [MOU], at the get go, very clear in terms of who does what, what is everyone's role, what is the commitment by each of the organizations, I think that that would have helped us down the road. There's been some ebbs and flows in terms of staffing, and which agency provides how much, in-person resources. And so, I think if that would have been spelled out a little bit better at the beginning and signed off and agreed to by everyone, then it's easy to say, “Well, you've committed to one and a half people on here and so we expect that you would follow through with that commitment”. And so, I think that having those pieces in place initially would be helpful.” [PS8]*

### ACCOUNTABILITY AT STEERING COMMITTEE LEVEL

Several stakeholders acknowledged that, at the beginning of TRiP initiative, a draft memorandum of understanding (MOU) was created and circulated among the Steering Committee members and was reviewed by each stakeholder agency legal departments. The purpose of the MOU was to delineate the terms of engagement, specify the time commitments, define reporting structures for external collaborators, and outline roles, responsibilities, and expectations from each member of the Steering Committee. It also clarified the parameters within which confidential information could be shared and used. In essence, the MOU was intended to provide a high-level framework to guide the actions of the Steering Committee. By signing the MOU, all parties would pledge to hold themselves accountable to the terms contained within.

*“Then we put in place the equivalent probably of a MOU, where we indicate how much of their time we will be needing, what functions they'll be serving, what the reporting will look like, how their management team will remain informed, like those types of things. So, to really kind of set the groundwork around the use of that resource.” [PS3]*

Unfortunately, several stakeholders noted that the MOU was never signed by all relevant parties due to advocacy barriers and delays in legal department feedback. This severely reduced the MOU's capacity to act as an accountability mechanism. Even when the contents of the MOU continued to guide the actions of some members of the Steering Committee, not all parties felt beholden to it. Those who had not signed the MOU could not be held accountable to the expectations that it had laid out, as they had never formally agreed to adhere to them in the first place.



*“There was a draft MOU circulated back at the beginning when the initiative was started up. And my assumption had been that it had been signed by all the parties at some point, and we were currently looking at renewing it. But in actuality, it was never signed by all the parties. And so, it's still a piece of work that's ongoing right now with all the legal folks to ensure that it covers off everything that we have been doing.” [PS8]*

More recently, there have been efforts to rework the MOU by updating its contents and receiving the universal assent of all collaborating organizations. One stakeholder noted that the revised MOU will address details such as costs and aligning responsibilities with the broader mission and vision of TRiP, which underscores the significance of this document in providing a clear and formalized framework for collaboration. Stakeholders noted that legal representatives from each party are involved in scrutinizing the language of the MOU, which reflects the commitment to legal precision highlighting the importance of ensuring that the document accurately captures the collaborative expectations and commitments of all involved parties. Should this new, revised MOU be signed by all relevant parties, then it may have significantly more weight as an accountability mechanism.

*“We're in the process of just reworking the MOU. And we'll be able to present hopefully, the final draft of a new MOU that lays out the roles and responsibilities of the partners and goes into all the details about cost and whatever to but kinda lays out those roles and responsibilities in the bigger mission, vision of TRiP” [PS11]*

Despite ongoing efforts spanning multiple years, the MOU has not been finalized at the time of interviews. It has recently (DEcember 2023) been finalized and signed by all members. One stakeholder noted that the reluctance to formalize this agreement might stem from concerns that it might restrict or bind individuals to specific responsibilities. Some stakeholders highlighted a tension between the desire for accountability, which the MOU aims to provide, and the fear that such formalization may hinder flexibility.

*“They've been trying to [build] a MOU that will keep people sort of somewhat accountable. I do not think it was a priority, having a signed MOU might keep people sort of tied to what their responsibilities are. So that's been in the works for 6,7,8 years, and just a ludicrous reality that has never ever been finalized.” [PS20]*



Several stakeholders also alluded to the existence of a 'Terms of Reference' – a foundational document outlining the expectations and responsibilities of the Steering Committee as a whole. The Terms of Reference can be considered to be part of a wider accountability mechanism, as it outlines the minimum standards against which the Steering Committee must hold itself to. Several stakeholders, however, noted the limitations of the Terms of Reference as an accountability mechanism, mainly its application to the Steering Committee only. Stakeholders expressed that, aside from discussions within the Steering Committee, there is a limited presence of formal structures ensuring accountability. This absence was attributed, in part, to the diverse nature of the agencies/sectors involved. The challenge of creating comprehensive accountability mechanisms was acknowledged, raising questions about how to foster collaboration and ensure commitment when stakeholders come from distinct agencies/sectors without a shared formal accountability framework.

*"...at the Steering Committee level, there is a terms of reference that guides the work. Discussions are encouraged around being good partners and in evaluation conversations; assisting if data needs to be collected to ensure that we are in fact working towards meaningful work. Outside of the Steering Committee Terms of Reference, and a stakeholder MOU, we don't have anything formal that says 'you must do.'" [PS23]*

### CLARITY AROUND ROLES AND RESPONSIBILITIES

Among stakeholders, there were two competing schools of thought regarding the best practices for accountability and ensuring clarity around the roles and responsibilities of different stakeholders. Some stakeholders were in favor of a more devolved approach which afforded stakeholders a greater amount of flexibility in their actions. Instead of meticulously defining each individual's roles and responsibilities, these stakeholders opted to trust stakeholders to exercise their judgment based on their capabilities and expertise.

*"If you start writing the policy before you take the action, the policy will actually prevent you from doing the work that you need to do. If you have the accountability structure in place and the ownership in place, I don't think you need to get down to the granularity. Like if a police officer is going with a teacher to a call. I don't think you need to define the right to the letter of the law, because the police officer and the teacher both can think on their feet. If the teacher leads, then you need to actually be able to support that individual in relation to how it transpires so clarity of roles aren't really that hard. If you put the client at the center, it's actually what did you do together to make this client in a safer or a better place than they were before you got there?" [PS2]*



In contrast, some stakeholders adhered to an entirely opposing school of thought. These stakeholders were unsatisfied with the current level of involvement of leadership figures in TRiP, and called on them to play a greater role in delineating the specific roles and responsibilities of stakeholders. One stakeholder explained how the existing arrangement created confusion for staff, who were sometimes unsure as to who they should report to:

*“Supervision within TRiP is the director [TRiP Coordinator] sets the mandate for it based upon the Steering Committee, and so they kind of oversee the work and support it, but they don't directly supervise staff. And so, the staff would be potentially in some state of conflict as to who they are responsible to, for different parts of their role, and from their home organization.” [PS1]*

One stakeholder stressed that clarifying roles and responsibilities was a continuous and ongoing process. They attributed this, in part, to the pervasive transiency and turnover in various stakeholder agency roles that introduces a lack of consistency and continuity, necessitating the periodic revisiting of expectations. This stakeholder noted that the constant flux in personnel demands continuous communication and ongoing efforts to rebuild relationships and trust which can be time consuming, yet necessary.

*“The challenge is there's a lot of transiency in who is in the different roles, and that lack of consistency and continuity, requires regular refreshing of those expectations, and also requires the continued rebuilding of relationships and trust, to go beyond.” [PS1]*

## SUGGESTION 5: DEFINING AND MEASURING TRiP SUCCESS

### CHALLENGES WITH DEFINING TRiP SUCCESS

The research findings revealed notable variations in how different stakeholders defined and perceived success within the initiative. Many stakeholders held definitions of success that were closely aligned with the specific, day-to-day functions of their respective organizations. For instance, those from the education sector often



embraced definitions of success that included metrics such as attendance, grades, and graduation rates.

*“[To define success] at times we go back a little bit to our silos. I think of my lens through education. When I look at that family, I would look through my lens of attendance and achievement and graduation. I don't know if there's enough of an overall shared outcome that guides a decision to determine if a family is ready to move on from receiving our services.” [PS16]*

Stakeholders discussed the complexity of defining success in a collaborative initiative, highlighting a significant challenge and potential source of conflict within TRiP initiative related to the definition of success. One stakeholder noted the complexity surrounding the evaluation of success, not only among TRiP team (i.e., frontline staff) but also among the Steering Committee members. This stakeholder raised crucial questions about what constitutes success in a collaborative setting. This finding suggests the difficulty in establishing clear and universally agreed-upon criteria for success within TRiP initiative.

*“That's where that conflict comes in both for the working members of the TRiP team...but also for other partners at the Steering Committee table. What is it that they need to look at in terms of how do they define success? How is the absence of a referral that we never know about, is that success? And how do we identify that and define it? And that's the million-dollar question.” [PS1]*

Stakeholders acknowledged this tension and highlighted the need for a more comprehensive and shared understanding of success that goes beyond individual sector-specific metrics, fostering a holistic approach to addressing the diverse needs of the children/youth and families involved. They highlighted the interconnectedness of various sectors in achieving success within TRiP. According to stakeholders, the notion of success that should be measured collectively across sectors seemed to align with a comprehensive understanding of well-being. One stakeholder emphasized the interconnectedness of health, justice, and social services in addressing complex issues such as addiction and crime. This stakeholder suggested an integrated and holistic approach to defining success, and highlighted the economic benefits of early intervention and prevention, particularly in reducing crime rates. This integrated perspective challenges the traditional siloed measurement of these sectors and advocates for a more comprehensive evaluation that takes into account their interconnected effects on individuals and communities.



*“If you know that you can get somebody off their addiction earlier through health and police interaction, it's way cheaper than when you have to on the far end deal with them in an acute environment, like the hospitals. So, that is easy to measure. If you hit both of those on the head, you're going to reduce your crime automatically. If you engineer public health, and you reverse engineer justice, you will shrink social services by 20% tomorrow, because a lot of the clients, they get entrenched in this system on social services without the appropriate interventions, actually become almost the farm team for jail. The whole point is none of these groups should be measured individually, they should be measured against each other, collectively, and you change the game.” [PS2]*

Stakeholders suggested a client-centered perspective of success, emphasizing the importance of tailoring success metrics to the unique needs and circumstances of each family. Rather than defining success in terms of the stakeholders and what they can do, this client-centered approach to understanding success aims to put the needs of children/youth and their families first. It contextualizes success in terms of what each youth and their families need to live a safe, secure, and healthy life. This definition of success extends beyond the individual child/youth to encompass the entire family unit, emphasizing parental engagement in child development. One stakeholder envisioned success as a long-term achievement where all the family's needs are met, allowing for a gradual disengagement from services as they become unnecessary. Once this client-centered approach to success has been established, stakeholders can better conceptualize the actions that their organizations can take in order to work toward this goal.

*“In my view [success] would be having all their needs met long term, no gaps, wellness of a family with so many services in place that they could slowly start disengaging from each service that's in place as they don't need it anymore. That's what success would look like for me and not just our child, but also the family as a unit.” [PS19]*

At the same time, stakeholders acknowledged the difficulty of creating a holistic definition of success that not only captures the diverse needs and goals of the stakeholders involved in TRiP, but also the diverse backgrounds and perspectives of the families engaged with TRiP. Stakeholders noted that it did not make sense to create a single, inflexible definition of success to be applied to all youth and their families, especially when each of these families faced their own unique challenges



and barriers. They emphasized that success varies for each family, ranging from parents overcoming addiction and regaining custody of their children to those managing their substance use to protect their children from exposure. The challenge emerges in creating a unified metric for success across such diverse needs.

*“In our work with our families, there's different levels of success. So, does [success mean] a parent completely stop[s] using and they're healthy for two or three years and have the children back in their care, and they're functioning well as a family? That's definitely success. But, then we also have families where they have such a history of trauma and addictions in their family that if they're only going to use once in a while, but they're going to call grandma so that she can take care of the kids, so they're not exposed, that's also success. So it's the different levels, and I don't know how you'd come up with one for TRiP. Because it's, did we keep this child out of the justice system for five years or for a year? Or did we completely keep them out and turn their life around? Do they have an impact on the younger siblings, and so now, they're not going to take that same path as their older sibling. It's hard to say.” [PS14]*

The challenges stakeholders encountered in defining the success of TRiP reflect the complex nature of the problem that TRiP aims to address. Acknowledging that TRiP's overarching aim is to enhance the safety and well-being of children/youth, stakeholders also recognized that the scope of the problem is boundless. One participant, for example, highlighted the challenges and complexities involved in determining the duration of intervention and success criteria in human service areas. The dilemma this stakeholder exemplified, underscores the difficulty of establishing clear-cut guidelines for decision-making in social service structures, indicating that the nature of human service work often involves nuanced and context-specific considerations.

*“As an example, if we're working with a family for 15 months, and nothing's really changing, then do we just close it? Or do we say, “Okay, this family needs us a little bit more, maybe we're involved for two and a half years”. That's where it is tough in the human service areas that there's no black and white with how we make those decisions, and what we define as success or as our goals.” [PS14]*

Several stakeholders also noted that, given the scale of the problem that TRiP aims to address, it frequently took a significant amount of time to see whether the



interventions introduced by TRiP actually manifested into a positive outcome for children and youth. In some cases, it could take years for stakeholders to see the impacts of their involvement. This made it difficult to ascertain if a given solution had translated into a tangible success, or if any observed successes could even be attributed to their efforts. For instance, one stakeholder expressed a sense of frustration and skepticism regarding the visibility of success within TRiP, indicating that their tenure may not have been sufficiently long to witness tangible positive outcomes. This stakeholder noted a high volume of cases in progress, suggesting a heavy workload for TRiP frontline staff involved. Additionally, the stakeholder highlighted bureaucratic challenges such as excessive paperwork, which they perceive as contributing to a sense of “busy work” that may detract from meaningful engagement with families and hinder the effectiveness and success of the initiative.

*“I don't think I've been there long enough to actually see successes. I see lots of cases in progress. I do see a lot of cases per person. I see too much disconnect, from families especially and you've only got two or three people, too much paper. Too many applications, too much busy work.” [PS19]*

There were also instances where success was primarily defined in terms of the cost-to-benefit of a given intervention. Considering how TRiP often struggled to gain sufficient resources to meet its operational needs, not to mention the desire to bolster its pro-social budget, many stakeholders were keenly aware of the need to measure efficiency of resource allocation. Stakeholders highlighted the importance of continued investment by showcasing the initiative's impact on the lives of the youth involved. They saw cost-benefit analysis as a valuable asset in courting additional funders, especially if these evaluations indicated that TRiP had a high return on investment. Given the limited resources available to TRiP, stakeholders highlighted the significance of these evaluations, not only for gauging the impact of their current interventions but also as a strategic tool for securing additional resources.

*“We are seeing great results. We are seeing actual names of youth that are part of TRiP that we never see or hear from again, as a police agency. That's them getting their education and getting their life set in a good path. So, those pieces of assessment are the verification that often agencies and funders need to show that this investment is worth continuing.” [PS6]*



## CHALLENGES WITH MEASURING SUCCESS

Some stakeholders highlighted the importance of developing a comprehensive measurement framework to assess the direct impact of TRiP on collaborating organizations and the community. For instance, one stakeholder emphasized the need to measure various outcomes, such as the reduction in emergency room visits, decreased police calls for service, improved access to mental health services, and lowered instances of child apprehensions. This stakeholder also raised the critical question of measuring collaboration and highlighted the varying levels of investment among collaborating organizations. Their call for full investment suggests that meaningful measurement requires a commitment from all stakeholders, allowing for a more accurate evaluation of the overall impact and cost avoidance associated with TRiP.

*“We need to have a larger measurement around the direct impact on our partner organizations. So, when I say direct impact, what does this mean in terms of reducing emergency room visits? What does this mean in terms of reducing police calls for service? So, being able to measure all of these things. We have to be able to measure the cost avoidance of this. How do we measure collaboration? We would need to have that full investment in order to adequately measure. Health is kind of invested. But unless you're fully invested, what are you measuring? How do you measure your cost avoidance if you're not fully invested?” [PS20]*

One major challenge faced by TRiP is the lack of a standard measure to evaluate the impacts and shared outcomes in relation to its multi-organizational collaborations. Our data analysis suggests that while TRiP's stakeholders do administer a wide range of evaluation tools as part of its wider data collection policies, these methodologies are generally not standardized across all stakeholders. There are few opportunities for TRiP's stakeholders to not only identify shared outcomes, but also determine whether these shared outcomes can be attributed to the collaborative efforts at the center of TRiP's mandate.

When measuring the success of a given intervention, many stakeholders recognized that it was essential to take into account the perspectives of the clients (children/outh) and their families. Stakeholders recognized that success should be evaluated from the standpoint of both the child/youth and the family, with an emphasis on collaborative goal-setting. This approach involves ensuring that families are well-informed about the various opportunities available for success and actively



engaging them in the decision-making process. One stakeholder brought up the idea of “treatment contract”, which highlights the importance of fostering commitment and shared understanding between the stakeholders and families regarding the definition and achievement of success within TRiP initiative.

*“Success from the child and family. They have to identify what their goals are and we can work with them to offer the opportunities. So, good service delivery would be that they know what all the opportunities are for possible success, but they might have their own ideas -and not only that, but a good treatment contract is going to be engagement and commitment to shared understanding of what success is going to look like.” [PS21]*

Many stakeholders noted the inherent complexity and challenges associated with measuring success within TRiP, particularly considering the volatile and ambiguous nature of the situations many youth and families face. For instance, one stakeholder underscored the significance of obtaining first-hand testimonies regarding TRiP’s impact on specific families. Here the emphasis on qualitative narratives reflects a recognition within TRiP of the nuanced and dynamic nature of success, emphasizing the importance of individual experiences and stories in capturing the impact of the initiative. This emphasis is particularly crucial when dealing with families facing vulnerabilities linked to their position along intersectional axes of oppression and disadvantage. In this context, the definition of success is intricately tied to the narratives provided by the youth themselves. For instance, this stakeholder discussed how a client’s Indigeneity may have had a profound impact on the way in which they perceived and received TRiP supports, stressing the importance of having this lens inform the evaluation process. The same stakeholder highlighted the fluidity of success, acknowledging that a youth’s positive trajectory can be fragile and subject to sudden changes.

*“All this work has such a high degree of volatility and gray area in terms of a measurement. And many of these kids that were involved with their families, there are such deep-rooted challenges with their families, and generational cycles would be at someone an Indigenous background and involved from Residential School and trauma from there. It's typically very fluid situations. So, I think the definition of success in many of these instances is really, in the narratives that are provided from kids. I think TRiP has done hard work, and instances of having families come in and sit.” [PS10]*



Stakeholders also raised the challenge of attribution, and noted that the intricate nature of collaboration with diverse individuals, organizations, and agencies makes it challenging to attribute the success of an intervention or event (e.g., a case conference meeting) solely to TRiP. The multifaceted and context-dependent nature of interventions adds to the difficulty in pinpointing specific factors contributing to success for families or youth. To address this challenge, stakeholders stressed the need for a comprehensive approach, combining anecdotal (qualitative) and quantitative evidence to fully grasp the impact of collaboration. One stakeholder highlighted that engaging in conversations with families, children, and stakeholders becomes a valuable approach to synthesizing diverse perspectives and creating a holistic view of collaboration's impact on TRiP's success. This stakeholder noted that while a precise quantitative measure remains elusive, the ongoing efforts to pool examples and experiences pave the way for a more comprehensive understanding and, eventually, the development of a quantitative framework to measure collaboration and its impact within TRiP.

*"Just really trying to gather as much- both anecdotal, but also that hard evidence, the numbers, the data- bringing it together. Once that's pooled together, then we can look at things and say, 'We might not be able to measure collaboration in one small way. But what we can do is take this whole host of examples, look at it together and say, based on this, this is how collaboration has made TRiP successful.' Hopefully one day, it'll lead us to a more kind of quantitative way that we can say, 'This is how we measure collaboration. This is how we measure success.'" [PS24]*

## SUGGESTION 6: TRiP STAFF RETENTION

Many caregivers and children raised concerns about TRiP staff turnover and the importance of maintaining consistent personnel, particularly case managers and support workers, throughout their involvement with TRiP. Given the sensitivity of their situation or past experiences, children and their families took time to open up and allow themselves to become vulnerable. Some caregivers noted that they, their child, and their family had to work with different support workers throughout their time with TRiP. This made it difficult for them, and especially for their child, to warm up to and build rapport, as they were constantly having to reform connections each



time they were assigned a new support worker. This created a barrier that likely prevented some children and their families from engaging with TRiP to their full extent.

*“They need something that continues. And one consistent person all the way through would be ideal.” [PWLE15]*

Both children and their caregivers noted that TRiP staff were being stretched thin. Some questioned whether TRiP had sufficient resources to support its staff, noting that the initiative as a whole was often overburdened and short-staffed. In some cases, this resulted in periods during which support workers or a case manager were absent, maybe during the time that TRiP had vacant positions in the support worker role. For instance, both children and their caregivers noted instances where they were unable to get into contact with members of TRiP staff, with whom they had begun building a rapport, for up to months at a time. In such instances, children and their families often had their needs go unmet, and may have felt abandoned by TRiP.

*“It comes down to funding and stuff like that with what they can offer. Switching from [case manager #1] to [case manager #2], there was a big disconnect. And I wasn't getting all my answers or my emails returned.” [PWLE22]*

## SUGGESTION 7: GRADUAL FILE CLOSURES

Although TRiP has a process for gradual file closure in place, with ongoing support encouraged to continue following file closure, caregivers still felt they received insufficient warning prior to their child's file being closed. Many caregivers perceived the process as abrupt, feeling that their child had been suddenly cut off from all services and resources. This concern was particularly pronounced for children who faced challenges with change, transitions, or ending relationships. Caregivers stressed the need for a smoother transition and continued support even after file closure, recognizing the ongoing needs that persisted beyond the formal conclusion of services.



*"I feel like it needs to be more of a gradual ending, instead of just saying, "hey, we're going to end it, but if you need help call us". Because for my son, having everything stop, when he has had an outlet in person to talk to. It was just kind of weird, you know, it ended and just that all of a sudden, it was just like he had nothing." [PWLE14]*

## SUGGESTION 8: MORE SUPPORT OPPORTUNITIES FOR CHILDREN

The research findings reveal a diverse array of suggestions from persons with lived experience, reflecting the wide range of perceived needs for children/youth engaged with TRiP. Both children and caregivers suggested the need for increased resources and support services catering to the well-being of children and youth. Three specific supports that persons with lived experience suggested include: therapeutic services, educational sessions, and mentorship outings.

### COORDINATING THERAPEUTIC SERVICES

One caregiver suggested that TRiP could be improved, and made more relevant, by coordinating support services relating to counseling, occupational therapy, or other forms of therapeutic support. As per this caregiver, these services are difficult to access through existing avenues in the Canadian healthcare system. As a result, by facilitating access to these services, TRiP would be filling an important niche in a way that would empower caregivers and their children. TRiP has attempted to address these concerns by ensuring that representatives from these service delivery sectors, for instance, representatives from the Saskatchewan Health Authority (SHA), are integrated into the initiative's functioning structure and organizational processes. This caregiver expected TRiP to refer children/youth to these services offered by other agencies.

*"I feel that's just a piece I think that's missing in the health system, the child and youth end of things. I mean, you can't tell me that there isn't some kind of play therapy or something that can work with these kids?" [PWLE15]*



Another caregiver emphasized the necessity for TRiP to facilitate access to healthcare providers, particularly emphasizing the importance of mental healthcare services for their child. They expected TRiP to coordinate a broader range of healthcare services, encompassing both mental and physical health professionals.

### EDUCATIONAL SESSIONS FOR CHILDREN

Several caregivers suggested that their children could benefit from receiving educational sessions through TRiP. Caregivers offered a range of suggestions for what these educational sessions could cover and how they may be delivered. For instance, one caregiver suggested that, through TRiP, the initiative's stakeholder partners could offer education sessions hosted by police officers, or other representatives of the Regina Police Service, to inform children of rules, regulations, and safety. This could have the benefit of both informing children of how to protect themselves and others, while also providing them with a venue for building a more trustful relationship with the local police.

Several caregivers also expressed their interest in educational sessions in which their children could participate in cultural programs. These cultural programs, as the caregivers envisioned them, would provide their children to learn about other cultures, engage in new forms of art and handwork, and express themselves creatively while also expanding their worldview. Some caregivers specifically expressed a desire for educational sessions focused on Indigenous culture, emphasizing the importance of involving representatives from local Indigenous communities in such initiatives. For instance, one caregiver highlighted the positive impact of incorporating Indigenous cultural elements into TRiP.

*"The Aboriginal culture should really come and help TRiP because it will help kids like mine. With like learning the aboriginal way, like their culture is just amazing." [PWLE19]*

On the other hand, some caregivers expressed interest in educational sessions that expose their children to their own cultural backgrounds, acknowledging the diversity of experiences within the community.

*"Things are different here than they would be up north. So, we just kind of didn't join in on these ones [Indigenous cultural activities]. But there are options to join different cultural things." [PWLE3]*



### MENTORSHIP OUTING OPPORTUNITIES

The research findings highlight the positive impact of mentorship outings on the children engaged with TRiP, as expressed by their enthusiastic feedback. The children not only appreciated the support workers assigned to them but also expressed a desire to expand the range of activities during these outings. The variety of suggested activities, such as mini golfing, visiting racetracks, arcades, and going to the gym, reflects the diverse interests and preferences of the children.

The significance of these mentorship outings goes beyond mere entertainment; persons with lived experience recognized them as valuable opportunities for children to interact, build relationships, and engage in group-based activities, such as team sports. Children saw mentors serving as positive role models, providing supervision and guidance during these outings. This mentorship model not only fosters a one-on-one connection but also creates a supportive and safe environment for the children to interact with similar-age peers.

*“Take me and a couple of other people out to like restaurants or drink or to an arcade?” [PWLE5]*

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