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An 'integrative moment'? Interprofessional collaboration to children's services integration

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Abstract

Using the conceptual framework offered by the fairly new but potentially fruitful conceptual map of 'social capital', this paper examines the effects of recent policy and legislation on the work relations between teachers and speech and language therapists. Policy statements are critiqued using an analytical framework of questions which explore the implications for professions. It is suggested that at this 'integrative moment' it is critical that policy, which is sending out messages in children's services integration policy that are reconstructing interprofessional and interagency relations in complex ways, is produced by groups that are representative and that policy processes are transparent.

Introduction

Focusing specifically on the work relationship between teachers and speech and language therapists (therapists) in schools in Scotland, this paper explores recent Scottish policy relating to interprofessional collaboration and children's services integration. In Scotland, a series of developments in teacher/therapist collaboration culminated in publication of the document *A Manual of Good Practice in Special Educational Needs* (The Manual) (SOEID, 1998). For service evaluation purposes, The Manual specifically features expectations of good practice - working together to develop flexibility in approaches, shared approaches to identification and assessment, strategic policies, effective planning and resource allocation, structures and procedures for monitoring and evaluating the services. The Manual challenged previous professional values of autonomy, knowledge and responsibility by prescribing that teachers and speech and language therapists who have common involvement with the same client

group should adopt a 'co-ordinated inter-agency approach' (SOEID 1998, p.34). This paper will examine how more recent policy and legislation, now impacting on the therapist/teacher relationship, has developed earlier policy moves towards integration of children's services in Scotland. But first, the fairly new concept of *social capital* is introduced and a rationale offered for its potential fruitfulness as a tool to map and analyse the types and qualities of working relations.

The conceptual framework

In order to make sense of the different discursive strands in policy that constitute professional relations or connections, it is necessary to specify the conceptual framework that will be applied to examine types of interprofessional relations. The conceptual map used here is that of sub-types and levels of social capital (Bourdieu, 1986; Coleman, 1988; Putnam, 1993, 2000).

For Halpern (2005), the somewhat elusive notion of social capital is about the ways in which people are connected with one another through particular social structures and networks - including professional association. It focuses on the quality of social norms, customs and ties that define people and groups, promote trust, provide individuals with shared understandings of how to behave and operate to keep people together. In particular, it seems to be Putnam's view of the economic and social benefits of association and network formation which theoretically inform and justify the recent raft of integrated children's services policy initiatives.

Following Putnam, Halpern (2005: 10) emphasises that social capital also has a range of important outcomes related to economic growth, performance and efficacy. He identifies the three basic components of most forms of social capital, including the form of interest here, work-based, in the following terms:

> They consist of a *network*; a cluster of *norms, values and expectancies* that are shared by group members; and *sanctions* - punishments and rewards - that help to maintain the norms and network.

Putnam (2000: p22) describes a second dimension of social capital that is concerned with its sub-types of *bonding* (or exclusive) and *bridging* (or inclusive) connections, noting that:

> the former may be more inward looking and have a tendency to reinforce exclusive identities and homogenous groups. The latter may be more outward-looking and encompass people across different social divides.

A model of social capital may then be developed along these two axes of *components* and *sub-types*, allowing an analysis of social capital connections at three levels - the interpersonal, interprofessional and interagency levels. As indicated above, it is the examination of professional level ties in school sites that constitutes the focus of

this analysis. Using the suggested conceptual map which envisages the intersections of teachers' and therapists' bonding and bridging connections with those professionals' norms (of values, expectancies and of practice) and sanctions (punishments and rewards) allows professional level connections to be identified and foregrounded for analysis

A new policy agenda: children's services integration

An explicit imperative in current Scottish policy for education and young people is concerned with

> 'rolling out the new community schools [now integrated community schools, ICS] approach…The aim is that all schools will have adopted the new community schools approach by 2007' (Scottish Executive, 2002, p.10 parenthesis added).

Currently, all children's services initiatives focus on 'driving forward better integrated services for…children' (p.10). These school and services restructuring initiatives are high profile and centrally funded through, for example, the 'Changing Children's Services Fund' (p.10). In terms of the professional audience enjoindered to accept and act upon this policy, these documents contain messages for all professional groups that provide children's services.

Implementation of the policy imperative of children's services integration at school level has not occurred as smoothly as may have been envisaged politically and in policy. Indeed, Her Majesty's Inspectorate of Education (HMIe, 2004a, p.28) report into the development of ICS concluded that

The ICS initiative has not been fully successful in its aim of establishing a new over-arching vision and framework for the delivery of education and other children's services using schools as the hub.

HMIe attributed the limited success in establishing new frameworks for children's services delivery in school sites to difficulties in 'engaging the commitment of all relevant practitioners' (p. 28) and with the 'often limited awareness…among professionals in other agencies' (p. 28). This article would argue that research that is able to produce a fine-grained examination of the concerns that HMIe discerned relating to interprofessional ties - quality of engagement and of relations with the other - is now needed.

Connecting children's services integration and support for learning

The passing of the Bill for the Education (Additional Support for Learning) (Scotland) Act 2004 (ASL Act, The Act) constituted a major shift in relationships between education and other agencies - including health - in the exercise of their functions under

Scots Law. Since Scottish devolution and the establishment of the Scottish Executive, the stated twin aims of Scottish public policy have been those of social justice and social inclusion (Scottish Executive, 1999). As outlined above, in subsequent children's services policy the school has been viewed as 'the hub' (HMIe, 2004a, p.28) for services integration - including integrated provision, management, service delivery, commitment and leadership, multi-disciplinary training and staff development (Scottish Office, 1998).

In the exercise of its functions under the Act, The ASL Act empowers an education authority to request the help of an appropriate agency - including any Health Board - and, unless the request from education is incompatible with the agency's own statutory duties or will unduly prejudice the discharge of that agency's functions, appropriate agencies must in law comply with such requests for help (ASL Act, 2004, p 18, excerpts paraphrased). Within this policy statement, which has universal applicability across all agencies that provide children's services, there are a number of statements that are targeted at specific agencies. Under The Act, the specific general functions with which the education authority might seek the help of the Health Board include: bringing a child to the attention of the education authority; compliance with requests for assessments and examinations related to the preparation and reviews of co-ordinated support plans (CSP); compliance with request for additional support identified in a CSP; complying with CSP co-ordination mechanisms; providing relevant advice and information in relation to additional support needs or the CSP; informing the authority of any provision which the agency is making or likely to make for a child or young person (ASL Act, 2004, pp 6-10 excerpts paraphrased). Education is constituted in legislation and policy as the 'first among equals'. It is education that will decide priorities and direct requests for help to the 'appropriate agency' - which is identified by education.

This paper argues that the rhetoric of the ASL Act (2004), and of the subsequent document that provides guidance concerning implementation of The Act: *Supporting Children's Learning: Code of Practice* (The Code) (2005), centralizes and privileges the role of the education authority as the lead agency - 'the hub' for children's support services and, in so doing, the Act squanders a critical opportunity to set out in law a new framework for children's support services integration which is truly shared by all children's support services. Further, it will be argued that the lack of success in integrating at professional and agency levels in school hubs, identified by HMIe (2004a), is a critical failure which may doom to failure the wider policy aim of the Scottish Executive of creating social justice and social inclusion. As argued above, this article takes the view that in order for school sites to operate successfully as originally envisaged - as productive vehicles for interprofessional work coalitions or 'hubs' - then close examination of the concerns relating to practitioners' ties and the quality of interprofessional, interagency engagements - relations with the other - is now of urgent concern.

Discourse analysis: an approach to policy analysis

This article offers a critique of some previous and current discursive strands in policy documentation relating to interprofessional, interagency collaboration and services restructuring. The excerpts from policy analysed below were selected as illustrative of discursive moves and change in policy. Given an approach that critically questions the positions taken in policy, what follows is offered as a positional, partial and provisional interpretation that is, likewise, open to critique. Taking a discourse orientation, the article examines policy texts to unpick the ways in which key terms in this particular policy arena - professional, collaboration and services' integration - are invoked. The aim in such an approach is to examine how the rhetoric of interprofessional collaboration and services' integration is authoritatively deployed in policy texts (MacLure, 2003) and uncover some of the effects of such uses in constituting new conceptual maps of work relations. Humes (1997, p 24) provides a summary of this kind of application of the techniques of discourse analysis to educational policy documentation in the following terms:

> Discourse analysis is essentially concerned with the inter-relation between knowledge, rhetoric and power…It proceeds by examining educational 'texts'-…official policy documents, ministerial statements, or other material deriving from individuals, groups or institutions seeking to explain, justify or influence the policy process - and subjecting them to careful scrutiny not just in terms of their surface meaning but also in terms of their underlying messages. It is, in other words, an exercise in decoding (p 24).

This analysis deconstructs some of the effects of recent policy statements. Using the analytical frame of types and levels of professional ties, what follows examines specifically the implications for the practices of the teaching and therapy professional groups of some of the things said in policy documents that impact on the practice of teachers and therapists working together.

The analytical frame

In order to critique the conceptualizations of professional level connections that are manifested in the recent policy documentation introduced above, this analysis will apply an analytical framework of questions. A number of policy review framework questions were developed by the Applied Educational Research Scheme (AERS) in Scotland, Schools and Social Capital Network (SSCN), Policy Review Group for the SSC Activity 1:2 to analyse 'Implications for Professions' (AERS, SSCN, 2005, p 26) and it is an adaptation of that frame that is applied in the present analysis. The following questions are asked:

1. Which professional groups are specifically charged to implement the policy?
2. Are professions not mentioned that could have expected to be involved?
3. What are the new knowledge-bases, skills, approaches, practices assumed or recommended to professional groups in recent policy?

4. Are there implications for tensions, difficulties or failures within or between professional group(s) in the work to adapt practice to accommodate new policy?
5. Is staff development or training proposed and funded?

In addition, as outlined above, this analysis maintains a focus on the implications of policy shifts for the interprofessional working relationships of teachers and speech and language therapists. The notion that it is the optimum configuration and quality of these practitioner-level ties which is of critical importance for policy to persist and succeed will be further developed in the application of the social capital lens which follows.

The question must be asked as to what are the teacher therapist ties that are manifested in current policy. As suggested above, in order to examine how the teacher/SLT relationship operates it is necessary to draw upon a framework for analysis which focuses specifically on relations or connections and the conceptual frame of social capital sub-types (bonding and bridging ties) at the interprofessional - school - level would seem to offer such a suitable analytical lens.

Inter-professional ties: analyzing current policy conceptualizations

Which professional groups are specifically charged to implement the policy?

While recent policy strands in the Scottish policy context have seemed to provide drivers to services' integration, there is some evidence that recent policy statements are losing the earlier focus on a specific inter-professional bridging relation - that of the teacher and speech and language therapist. In one example, policy concern with 'all relevant practitioners' (HMIe, 2004a, p 28) would suggest that interest in previous policy with the functioning of the specific connections that bridged between teacher and SLT practitioners and professional groups (HMI, 1996a) seems to be now at defining turn, a point at which the previous statements of policy that addressed the working relationship of teachers and therapists at the institutional level in schools are being lost among policy that applies universally to all school workplace networks - all professional groups involved in children's services delivery. It might be argued that this constitute a step back and that such a retrograde step to a position where this specific bridging relation is subsumed within many other professional ties will prove detrimental to the working together of core language support teams and, therefore, have a negative effect at the micro or individual level on the development of the children, young people and parents who are the current and future users of language support services. Conversely, it might be suggested that the availability of help from a wider number of practitioners may, at

times, produce a better 'ties mix' amongst professional teams - connections that effectively meet service users' assessed needs.

Are professions not mentioned that could have expected to be involved?

There is evidence of a step back in recent policy statements from specific reference to the co-practice concerns of therapists and teachers and the specific recommendations for action to bridge their work which were evident in earlier policy documents directed at these groups. The SOEID Manual (1998) seems to signal something of a watershed in policy statements that have applicability to targeted professional groups or have universal applicability for all practitioner groups working in schools. The Manual (1998, p 34), making no specific mention of the teacher/speech and language therapist relation, speaks, for example, of

> Joint professional development opportunities are provided to develop a common understanding of the special educational needs (now additional support needs, ASN) of the client groups and of the contribution the respective services make to meeting these needs
>
> Where professional staff of different services are working together, working practice agreements are negotiated to clarify roles, responsibilities and accountability
>
> Services work together to develop flexibility in approaches to meeting the special educational needs of children/young persons
>
> Professional staff from relevant services involved in multi-disciplinary assessment of children and young persons share their respective approaches to the assessment and identification of special educational needs with each other, the parents and, where appropriate, the child/young person.

As suggested above, the above policy recommendations contained in The Manual replace targeted messages to named professional groups to bridge their practices with general prescriptions that have universally applicability to all professionals working in schools. These new policy enjoinders signal an early move towards systemic reformation of public services for children and young people, more closely networked professionalism and, ultimately, it is suggested, the integration of children's services in Scotland. At agency level, two recent consultation documents which aim to institute a common integrated approach to inspection and audit, *Making Services Better for Scotland's Children* (HMIe, 2004b) and *A Common Approach to Inspecting Services for Children and Young People* (HMIe, 2005), reflect the policy aim of comprehensively integrating the delivery of services to children and young people.

Examining policy recommendation relating to interprofessional level connections, it is notable that the specific statement made in the whole-school evaluation document *How Good is Our School?* (1996b, p 80) concerning effective liaison and joint work with speech and language therapists (How effectively do specialist staff, including other teachers and therapists, work with class teachers?) is omitted in the updated

version of that same document *How Good is Our School?* (SEED, 2002). The earlier policy focus specifically directed at evaluating the quality of the bridges connecting the practice of teachers and therapists in schools is lost.

Previous Scottish Office and Scottish Consultative Council for The Curriculum (SCCC) interest in the specific area of support for language and communication needs, demonstrated in the 1997-1999 national communication disorders project (COMDIS) and culminating in the publication the booklet *Support for Learning, Part Three Number 7* (1999) which comprised specific staff support materials for teachers and speech and language therapists working with pupils with language and communication disorders, has not been sustained. New statements which exclude previous targeted attention and policy references risk uncertainty, misunderstanding and disagreement about practice between individual practitioners and more widely among practitioners and their managers and leaders at school and agency levels. It might be suggested, that such unwanted negative effects may, in turn, intensify and ossify the strong bonding ties that exist within professional groups and disrupt, rather than promote, the work of building up bridging connections to other practitioner groups.

At interagency level, a number of statements in the ASL Act (2004) and The Code (2005) that refer to grounds for requiring the legal compliance of other 'appropriate agencies' with requests for help from education, constitute another integrative shift in the current legislative and policy framework. As argued below, the mentioning of professions in these more recent documents is about a different level and category of involvement. In these documents, mentioning agencies is not about supporting the particular joint-practice of practitioners from different agencies; rather, it is about drawing other public services agencies into a tight network of compliance with the 'requests' of education. Education is constituted as the central - and prioritising - service, an effect that is likely to disrupt bridging initiatives, in this case, at the interagency level.

What are the new knowledge-bases, skills, approaches and practices assumed or recommended to professional groups in recent policy?

The Code (2005: 13) signals that The Act (2004) has an impact beyond education, in that:

- it has significant implications for service providers and professionals working
- in the health and social work sectors and other appropriate agencies.

It goes on to state that additional support for children and young people may include

> 'the deployment of personnel…from other agencies (2005, p 17), and explicitly acknowledges that:

- some children and young people will require additional support from agencies from outside education services if they are to make progress. [for example]

- a Communication programme drawn up by a speech and language therapist and

- a teacher, for implementation in the classroom (2005, p 18, parenthesis added).

An important theme in The Code is concerned with the integration of planning across the range of plans which a child or young person may have. In addition, The Code includes detailed statements of policy relating to the new legal document instituted in The Act (2004): the co-ordinated support plan.

The Code (2005, p 22) also provides much detailed guidance concerning inter-agency co-operation more generally beyond that relating to planning. It places the responsibility on education authorities to:

- play their part in ensuring that there is effective communication, collaboration

- and integrated assessment and provision when other agencies are involved.

Equally, stating unequivocally that 'The Act promotes integrate working across agencies, in assessment, intervention, planning, provision and review' (p 22), The Code calls on other agencies to ensure that they engage with education and places a number of duties on agencies in relation to inter-agency working. These duties are linked to the staged approach to identification, assessment and intervention and in the main, in relation to the range of planning documentation, they essentially codify current practice. An area in which The Code regularises current variations in practice relates to contexts where more than one agency or service is, or should be, involved with the child or young person. In such circumstances:

- planning should aim to ensure the effective co-ordination of support

- every opportunity should be taken to ensure that there is an *integrated* action plan for a child or young person

Such an integrated action plan may be made up of different elements; for example an individualised educational programme (IEP) may be appended to a looked after care plan. In this way the professionals working with the child or young person *use one integrated action plan with shared educational objectives* (p 41, parenthesis and emphasis added).

The tension between the aims of an integrated approach with the view of education as the central agency is evident. In order to implement effectively the aims of closer networking at professional and agency levels for the purposes of planning, a number of new practices will need to be instituted; for example, stronger school/clinic and inter-agency connections; better knowledge and understanding of the other practitioner group's assessment related knowledge bases and skills; better knowledge - and acceptance - of the others' intervention/treatment practices more generally; the more general use of school level agreements; and more generous staff time allowances negotiated within agency level contracts.

The Code recognises that other agencies have their own planning requirements and processes. In particular, The Code (2005, p 42) prescribes that 'education plans should link with any health or social care plan'. Recognising the existing bonds of shared practice within services, The Code speaks directly to disciplines allied to health, including speech and language therapy, have their own plans which are:

> informed by an assessment process with clear objectives and outcomes…monitored to inform and ensure clinical effectiveness…[with] their own specific purposes (p 43, parenthesis added).

In a statement targeted at the same practitioners, the Code goes on to state that:

> It is important that they [clinical outcomes plans] are integrated with and cross-refer to education plans for purposes of identifying learning needs and educational objectives (p 43, parenthesis added).

The illustrations offered in the above analysis would suggest that there are inherent tensions among The Code's messages - universal and targeted - relating to expectancies of agencies and professional group in relation to new and existing norms of practice.

Are there implications for tensions, difficulties or failures within or between professional group(s) in the work to adapt practice to accommodate new policy?

The above examples suggest that recent Scottish policy and practice developments that are aiming for more whole scale integration of children's services have lost the previous specific focus on the particular teacher/therapist relation. Such a loss of focus has important implications. It risks practitioners lacking knowledge of new developments in policy practice and provision that seek to ensure effective support for the additional needs of children and young people with language and communication disorders and so hindering smooth transitions to collaboration and integration. Perhaps more critically, recent inattention in policy to issues and concerns specific to teachers and therapists in developing and evaluating their co-work, may produce practitioners who lack knowledge of the aims and values driving the changed practices that they are subject to. Such

disaffection may contribute to the current difficulties identified by HMIe (2004a) in achieving successful integration in school hubs. HMIe recognise the less than successful outcomes of recent children's services integration initiatives in schools. For example, in the Integrated Community Schools evaluation report *The Sum of Its Parts* (2004a), HMIe note:

> the ICS initiative had not been fully successful in its aim of establishing a new over-arching vision and framework for the delivery of education and other children's services, using schools as the hub (p 28).

Further, the HMIe evaluation report recognizes that:

> the vision and ethos underpinning ICS initiatives had often not had sufficient impact in engaging the commitment of all relevant practitioners in the area. Whilst dedicated ICS team workers were well aware of the aims of initiatives there was often very limited awareness amongst mainstream staff in schools and mainstream professionals in other agencies. This inhibited the extent to which pupils could benefit (p 28).

Working in ICS, speech and language therapists and teachers and their managers and leaders, as practitioners, managers and leaders from other local agencies, need to work together ever more closely to plan and deliver their integrated provision. In order to do this effectively continued research is needed that examines the operation of all aspects of the school site and interprofessional level work relation between teachers and therapists; and explores how teacher/therapist core partnerships might, if required, connect to a wider skills mix held by other practitioners who currently - and increasingly in future - will work in ICS. As HMIe (2004a, p 29) prescribe, in the new policy and practice context of ICS developments which are reconstituting relationships among all practitioners groups involved in delivering children's services:

> Local authorities, Health Boards and other partner services now need to build on existing good practice by working more closely together to support all Scotland's children and young people to reach their full potential…local agencies need to work more closely together at all levels to plan and deliver more integrated provision.

Such efforts to achieve *multi-agency* integration at the macro (agency) level should not exclude or further marginalize previous and on-going initiatives to develop good collaborative practice between an *inter-agency* core team at the meso (inter-professional) level. In responding to the HMIe imperative to monitor and audit the multiple and complex multi-agency developments involved in ICS initiatives, teachers and speech and language therapists and their agencies' managers and leaders must not lose sight of the existing good practice in working together which they have already established. It is the strengths of such initiatives which need to be built upon in an approach to services integration which attends equally to particular and multiple work relations and is bottom-up as well as top-down. It is perhaps not a matter of either/or but of both/and.

Is staff development or training proposed and funded?

Inter-agency level training sessions that specifically focus on the implementation of the ASL Act (2004), and in particular on the legal requirements relating to children's services integration which the associated Code (2005) imposes on other agencies, has been funded and delivered by local authorities to increasing numbers of agency representatives. Funded in the main by education services, courses in multi-agency training have also been established by higher education institutions (HEI) and other providers. While a growing number of award bearing postgraduate level inter-professional courses are offered by HEI, to date, many courses with a focus on 'working together' are non-award bearing and targeted towards pre-school, early years and additional support needs practitioners - including non-graduate members of those teams. It is interesting to note that the 'core' professional groups who have not taken up these courses in large numbers include educational psychologists and school medical officers. Should this remain the norm, it may risk the view developing that closer -and integrated - team working is required of 'paraprofessional' groups and not of other state-funded professionals who view themselves - and are viewed by others - as fully professionalized, high status and, therefore, autonomous (Perkin, 1999). The maxim offered by Perkin that 'all professionals are equal but some are more equal than others' (1999, p 9) may apply in relation to those groups for whom interprofessional training is currently recommended and implemented.

At the interprofessional level, since the late 1990s, multi and inter-professional education and training - both non-award bearing and award bearing - has been supported nationally, funded by local authority education services and provided by universities. A number of such courses focus specifically on the joint work of teachers and speech and language therapists. More generally, there is no equivalent in Scotland of the recent initiative by I CAN (a national education charity for children with speech and language difficulties), the Department for Education and Skills (DfES), the Department of Health (DH), the Royal College of Speech and Language Therapists (RCSLT) and the Teacher Development Agency (TDA) to frame and coordinate the knowledge and skills necessary in the professional education and training of teachers and therapists co-working with children, which produced the Joint Professional Development Framework (JPDF) (2001). Practitioners in the field in Scotland with links to UK language support agencies and institutions may be aware of the JPDF - and may implicitly draw upon its framework; but, without wider dissemination, it has not impacted more generally on the education and training of language support practitioners in the ways envisaged by its authors or in the ways evidenced in other parts of the UK - to develop the stronger bridging ties necessary in their co-work.

(Re-) tying the ties

The above analysis of some of the messages in policy that are reconstituting interprofessional and interagency relations amongst individual practitioners working in

schools prompts further questions and suggestions. Given the rapidly shifting policy context that is reforming children's services in Scotland in ways that are integrative, do teachers and therapists and their managers and leaders - and current trainers and educators - need to retain 'ownership' of the policy agenda relating to specific areas of joint work in schools? If so, then how is this to be done? It is important that such critical concerns for individual practitioners and professional groups do not get lost in the increasingly complex and tangled professional ties that are one effect of school site integration. If, within universal children's services policy there remains a place for joint learning and development about bridging knowledge, skills and practices in specialised areas of work such as that of language support, then how such a collaborative core skills and knowledge policy agenda might continue to be developed needs urgently to be addressed by practitioners and their representatives.

This analysis would also suggest that any monitoring of the impact of recent policy changes on the co-practice of teachers and therapists will need to continue to explore a number of issues and concerns. The key policy players who are introducing particular views that are driving the restructuring of children's services need to be identified and their institutional and organizational bonds - positions and loyalties - made transparent. The relevant policy elite, within children's services, may, amongst others, include representatives - or delegates - from central government agencies; local authority, health trust and other employers; voluntary agencies, professional bodies; trades union and professional organizations, practitioner groups, service users and their families and academic institutions.

Ensuring the representativeness of policy development groups has important implications for the wide acceptance of the policy statement produced and for its persistence over time. For policy to be more widely acceptable, it is important that the balance of representation within policy committees is openly known and explicitly agreed amongst wider interest groups and stakeholders - including the relevant professions and agencies. Making committee members' institutional positions public would engender debate about the representativeness of particular policy groups and the range of disciplinary knowledge bases - political, professional, economic - which each delegate is likely to be able to draw on and apply. Taken together, openly available information about policy group selection and timely opportunities to debate and challenge members' participation might serve to re-engage those who currently feel excluded from participation in the policy process.

It is likely that the institution of more representative groups would better produce the 'right policies', which address the contingent concerns of particular user groups and offer broadly acceptable solutions to those and so it is critical in this 'integrative moment', given the recent policy turn to services integration, that the right agencies, and, within agencies, the right people, are being charged with the co-development and co-implementation of policy. A new mix of ties is now needed to develop the new co-

practices that are required if the overarching policy vision and framework of the provision of fully integrated children's services using schools as the hub is to succeed.

For integrated children's services policy to persist, and the policy aim of social justice and social inclusion to succeed, it is critical that individuals feel adequately equipped to accept the changed expectancies - values and commitments - involved in taking on the task of radical service reformation and restructuring. Funded jointly by the Scottish Executive Education Department (SEED) and the Scottish Higher Education Funding Council (SHEFC), The Applied Educational Research Scheme (AERS) in Scotland constitutes a major recent national training development in relation to building capacity in research and its applications in practice. Currently, participation in this scheme and its networks is limited only to those working in the field of education. If opened-up, and centrally funded to apply more widely to practitioners from all professional groups working in children's services, such a scheme might offer the kind of joined-up opportunities for multi-professional education in policy study, review and critique that are urgently needed as an evidence base that will better inform strategic planning of reformations in practice in the new and increasingly complex integrative children's services policy context.

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