



Activities, prerequisites, and outcomes of service coordination: A logic model for the ‘New Patterns’ intervention

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Abstract

In Norway, more than one in ten children grow up in low-income families. Persistent low income and its consequences are often transferred across generations, and coordinated cross-sectoral services are potentially part of a solution. In this study, we present a logic model for the ‘New patterns’ intervention. This new service, which aims to prevent the transfer of poverty and accompanying social, financial and health-related consequences across generations, was designed to integrate health and social care for low-income families. The logic model facilitates robust evaluation of the intervention’s effectiveness. New Patterns is an intervention promoting comprehensive and coordinated efforts for families with children who struggle with persistent low income and experience complex challenges. In this intervention, a family coordinator is responsible for conducting close follow-ups with children and adults in ten families over a period of five years. We identified ten activities in the family coordinator’s follow-up of the participating families. These elements are presented in a *logic model*, which illustrates the potential mechanisms linking activities, prerequisites and short and long-term outcomes. Detailed descriptions of a logic model are useful for its implementation and model fidelity. Thus far, only a few studies have described the constituent activities of coordinating functions. Therefore, this article contributes knowledge on how coordination activities may unfold, and how these activities are interconnected with prerequisites and outcomes. We argue for a more detailed and holistic approach to service coordination and functions that address complex challenges, such as poverty and social inequality.

Keywords

social work, long-term follow-up, poverty, logic model, family coordinator

Background

In Norway, more than one in ten children grow up in families with persistent low incomes (Normann & Epland, 2023). Persistent low income and its consequences are often transferred across generations (Markussen & Røed, 2020). In addition, the challenges that low-income families face are often complex; they experience not just one, but several problems at the same time (Trommald, 2017). These families also experience frustration and powerlessness with what they characterize as a fragmented support system (Ask & Sagatun, 2014).

The Norwegian government's strategy against child poverty, 2015–2017 (The Norwegian Directorate for Children, 2018), and the cooperation strategy for children and young people in low-income families 2020–2023 (The Norwegian Departments, 2020), promote municipalities as particularly important entities in the work being conducted to alleviate on child poverty and emphasize increased competence and better coordination in the municipalities. Nevertheless, services for children and adults in these families are not well coordinated (Fløtten & Grødem, 2014). In addition, the Norwegian Board of Health Supervision found that only a few families struggling with complex living challenges received social work follow-up from the Norwegian Labour and Welfare Administration (NAV) (Norwegian Board of Health Supervision, 2019).

In a specialized and sectorized welfare system, it is difficult to manage the situation of low-income families with complex challenges (Hansen et al., 2020; Vik & Hjelseth, 2022). In the Norwegian welfare model, increased cooperation is highlighted as a response to the challenges that differentiated, specialized services entail (Lundberg & Breimo, 2021). Although coordination seems to be the solution, we know little about the coordinator's roles and the activities they conduct. Furthermore, we lack knowledge about the elements involved in the coordination of activities, and their potential outcomes and which prerequisites are important.

This study describes a logic model (Mills et al., 2019) for an intervention that coordinates services to families with low incomes and complex challenges. The logic model presents mechanisms and interconnections that can be useful for implementation of the intervention and model fidelity. Furthermore, the logic model may be relevant for other target groups with complex challenges.

Case and context

The empirical starting point for this study is the 'New Patterns' intervention, in which a family coordinator coordinates interdisciplinary and cross-sectoral efforts for families with children who are living with persistent low income and require supportive services (Mølland et al., 2020). Through systematic mapping, close follow-up and coordinated efforts from the health and welfare system, the goal is that children and parents experience better health and quality of life, acceptable living conditions, and a stable environment. Furthermore, it is an objective that the personal financial situation improves and that parents participate in the workforce or in work-related activities. The role of family coordinators in the New Patterns intervention is based on the profession of social work (Ellingsen, 2015; IFSW, International Federation of Social Workers, 2014, wherein Norwegian social workers are obligated by social welfare law to provide coordinated

services (Act related to social services, 2009). The professional role and practice of family coordinators in the New Patterns intervention has been comprehensively described by Lundberg and Danielsen (2024). To guide family coordinators in their everyday work, the project team developed a handbook. The intervention model developed in this study aims to prevent the transfer of poverty and the accompanying social, financial and health-related consequences across generations. The intervention applies a systems theory approach, to improve the interactions between individuals and their environments (Healy, 2022). Hence, the New Patterns intervention focuses on changes in parts of the system surrounding the family, and not necessarily on the family itself (Coulshed & Orme, 2012).

When developing the New Patterns intervention, a multidisciplinary team of researchers and social workers searched for best practices and included findings from a pilot study in which families expressed frustration and powerlessness because no one addressed the 'whole picture' of their situation (Ask & Sagatun, 2014). Based on these findings, the New Patterns intervention was developed by Kristiansand municipality in 2016. The New Patterns intervention was adopted by 10 municipalities in Norway and was used for more than 200 families. Families with low income and longstanding needs for welfare services were recruited from different parts of the local welfare system, such as schools, the Norwegian Labour and Welfare Administration (NAV) and public health clinics (Mølland et al., 2020).

The New Patterns intervention employed a project design wherein evaluation and implementation functioned as simultaneous and reinforcing processes, inspired by the Effectiveness Implementation Hybrid Designs framework (Curran et al., 2012). Since its development in 2016, the New Patterns intervention has been continuously developed based on the experiences of and feedback from participating families and practitioners.

Study aim and research question

The aim of this study was to describe the New Patterns intervention for providing coordinated services to low-income families through a logic model to support the intervention's implementation and to ensure fidelity. The research question was as follows:

Which elements are included in the 'New Patterns' intervention for providing coordinated services to low-income families and how are the activities, prerequisites and outcomes interconnected?

Method

As stated earlier, the development of the New Patterns intervention began in 2016. A multidisciplinary team consisting of the first two family coordinators, researchers and an innovation project leader developed the intervention based on a long-term goal of preventing intergenerational transfers of low income and social challenges.

As part of the Norwegian Public Health Program (The Norwegian Directorate of Health, 2018b), 10 municipalities from urban and rural areas have been involved in developing and testing the New Patterns intervention. The smallest municipality participating in this activity had 1,000 inhabitants, and the largest had 140,000 inhabitants. The number of family coordinators varied from one person working half-time in a small municipality to 17 in full-time positions in one of the largest municipalities. During the project-period, family coordinators gathered twice a year and discussed experiences and

challenges from their practical work. Hence, throughout the project period, the New Patterns intervention has been continuously updated based on the experiences of and feedback from family coordinators. In this study, we have worked inductively and developed a logic model based on empirical practice and experience from the intervention itself, as well as by using a recommended framework for developing and evaluating complex interventions (Skivington et al., 2021). Addressing complex challenges and interventions, a logic model offers an approach to understanding interventions (Funnell & Rogers, 2011; Moore et al., 2015). A logic model visually describes the interconnections and mechanisms of an intervention, which can be linear or non-linear (Rogers, 2008). Logic models aim to capture the most important elements to understand the mechanisms of interventions and their effects (Moore et al., 2015; Rutter et al., 2017). Moreover, logic models can contribute development of knowledge about complex challenges through investigating the elements, interconnections and outcomes of intervention that address complex challenges, as described in the MRC (Medical Research Council) framework for developing and evaluating complex interventions (Skivington et al., 2021).

The visualization of interventions' activities, prerequisites and outcomes through logic models can support robust evaluation, implementation, and fidelity in the scale-up phase.

We applied a process-tracing design (Beach, 2016; Beach, 2022; Mahoney, 2015) which provides a better understanding of how a cause produces an outcome. The purpose of developing a logic model of the intervention was to identify potential mechanisms linking family coordinators' prerequisites, activities, and outcomes. Robust logic models are essential components in the development and evaluation of complex interventions that aim to improve health and well-being (Moore et al., 2015). The authors drafted a logic model based on the mechanisms described by the multidisciplinary team in the start-up phase. Family coordinators representing 10 different municipalities and intervention sites were then invited to digital workshops, where the draft of the logic model was introduced. The family coordinators verified or contradicted the activities, prerequisites/assumptions, and outcomes as well as how these were related to each other. This process was inspired by the 'smoking gun test' (Mahoney, 2015; Ricks & Liu, 2018), in which hypotheses are contradicted or confirmed using an iterative process. Family coordinators' verification of activities, prerequisites/assumptions, and outcomes, as well as the relationship between them, provided strong support for the mechanisms described. We applied an interpretive approach to use empirical data to understand the mechanisms experienced by the family coordinators. In this study, we present the final version of the logic model.

Ethical considerations

The family coordinators participated voluntarily and by virtue of their professional roles in the New Patterns project. No personal data were collected for this study.

The families' participation in the New Patterns intervention and in the research project was voluntary, and they gave written consent to participate.

The New Patterns research project was approved by the Norwegian Regional Ethics Committee West, REC West (reference number 249507), and was conducted according to recommendations from the Norwegian Agency for Shared Services in Education and Research (file number 274535 and 541803).

Results

In this section, we present the results from the logic model of the New Patterns intervention (see Figure 1). First, the *core activities* of the logic model are described, including *prerequisites/assumptions* (white boxes), *individual short-term outcomes* (orange boxes) and *intermediate outcomes* (grey boxes). Further, *system level outcomes* (green boxes) are presented, followed by *long-term outcomes*, which is the final output of the model. We introduce potential relationships between important elements of the model, wherein the identified activities and prerequisites are assumed to be important in achieving long-term outcomes. These are presented by arrows in the logic model.

To illustrate how the logic model can be read, we start with one example. As a starting point, low-income families are invited to participate, and if they are willing to participate, they receive a follow-up from a family coordinator; this follow-up comprises ten activities (blue boxes). One of the activities is *Systematic Mapping* (blue box), which is used to develop a *Family Plan* (blue box). Based on the Family Plan, the family coordinator *involves needed services* (blue box) and *communicates and navigates the welfare system* (blue box). This may lead to the individual short-term outcome of *Use of Appropriate Services* (orange box), which further enables various individual short and long-term outcomes (grey and yellow boxes). The list of relationships between these elements, illustrated by arrows, is not complete.

Activities

To achieve long-term outcomes, the New Patterns intervention provides a family coordinator who is responsible for conducting close follow-ups with children and adults in ten families over a period of up to five years. The family coordinator performs a systematic, detailed mapping of the family's resources and needs. Based on this mapping, the family coordinator, in conjunction with each family, develops a Family Plan that defines the goals of the cooperation and identifies the necessary activities. In addition, the family coordinator involves the required services and further coordinates inter-sectoral work. The coordination of complex inter-sectoral efforts includes services from different sectors, i.e. culture, education, health and social services and volunteer organizations.

The family coordinator provides social and practical support to the family, including both children and parents. Many family coordinators described the need for practical help in the start-up phase such as transportation of firewood for the winter season or getting the washing machine fixed. Social support could, for example, involve following family members to meetings at the children's school or to a doctor's appointments, situations described as difficult for the family members to do on their own. Family coordinators based their follow-ups on home visits, which gave deeper insights into the family's situation. In our study, we found that family coordinators working in the family setting also enabled family coordinators to model parenting skills. Visiting families in their everyday situations enabled the coordinators to provide low-threshold parental advice and guidance.

During the project period, the family coordinators used Feedback Informed Treatment (FIT) as a tool to address user involvement systematically in each home visit (Jensen, 2023; Mackrill & Steensbæk, 2021). They applied the FIT measures Outcome Rating Scale (ORS) to measure therapeutic progress and the Session Rating Scale (SRS) to measure therapeutic alliance. These scales each consist of four questions and are usually completed in a few minutes. The family coordinators had mixed experiences with using FIT; many

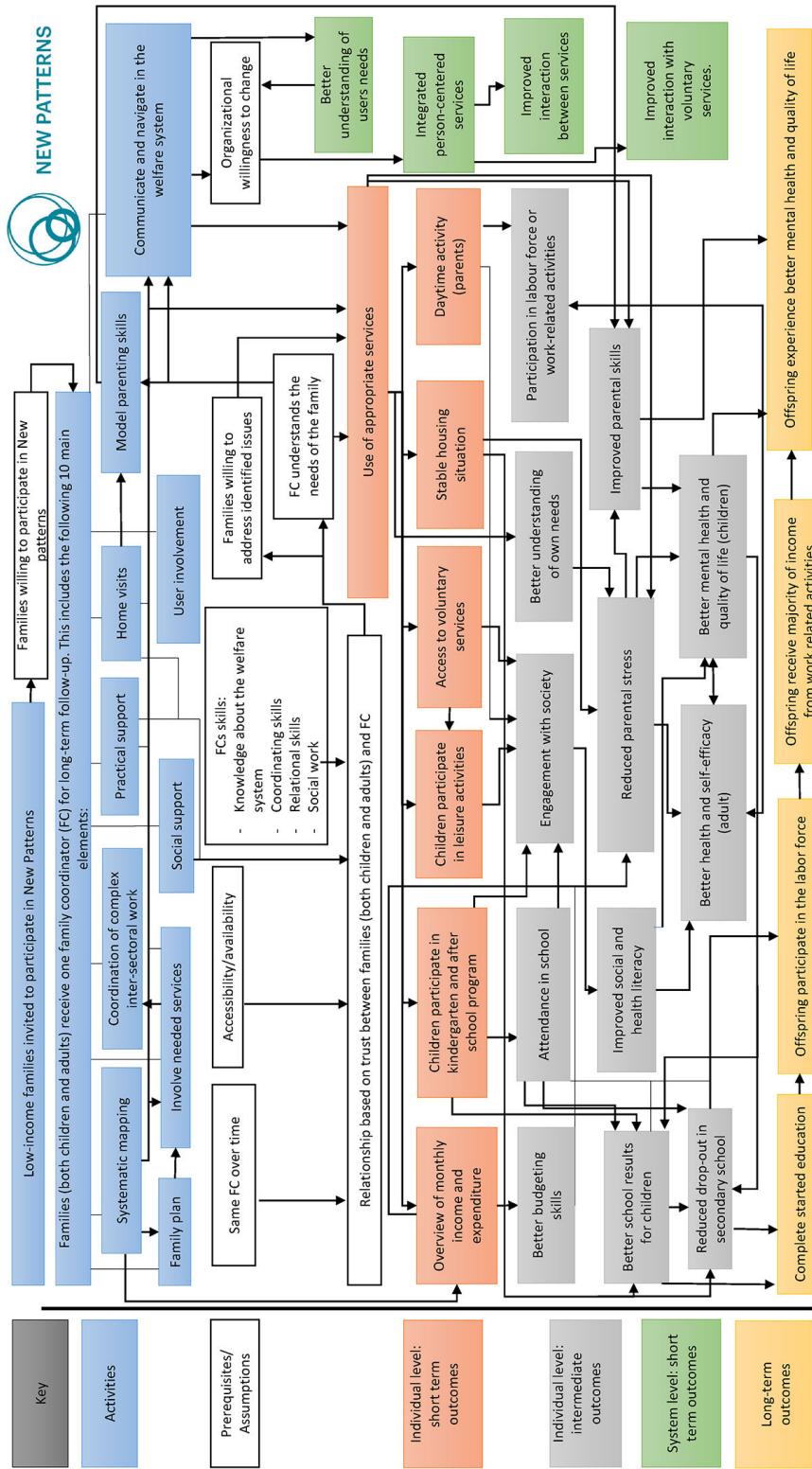


Figure 1. The figure illustrates the New Patterns intervention in a logic model. Colour-coded boxes represent different elements of the model, and arrows illustrate the expected relationships between the different elements. Blue boxes describe family coordinators' activities, white boxes describe prerequisites/assumptions, and orange boxes represent short-term individual outcomes. Grey boxes describe individual intermediate outcomes, and yellow boxes represent individual long-term outcomes. Green boxes describe potential short-term outcomes at the system level.

described the tool as less suitable for close home-based follow-ups, and potentially more suitable for use in traditional therapeutic settings. Therefore, FIT was replaced with *User involvement* in the logic model (Figure 1). Furthermore, we added the question ‘What is important to you?’ in the systematic mapping for both adults and children to contribute to the development and evaluation of the family plan. Systematically asking parents and children in the families what was important to them enabled their influence on which interventions and activities should be mobilized.

Finally, communicating with and navigating the welfare system was described as one of the most important activities. The family coordinators described a typical working day as comprising multiple phone calls, emails and meetings searching for solutions and answers to challenges that the families experienced related to housing, personal finances, health problems, children’s leisure activities and other problems and questions that emerged.

Prerequisites/assumptions

As presented in the logic model, we assumed that a number of prerequisites should be present for family coordinators’ activities to interconnect with the expected outcomes. A preliminary prerequisite is that the family should be willing to participate in the intervention. The intervention involves multiple collaborative partners and close follow-up over time, which the family must be aware of and consent to before the start-up phase. The family receives follow-up from the same family coordinator over time. Building trust is crucial, and frequent changes of family coordinators will be counterproductive. Another prerequisite is that the family coordinator should be accessible and available to the family. The family coordinator must be easy to get in touch with through phone or email, not through a central office. This did not imply 24/7 availability but a direct communication line within ordinary working hours. Despite a challenging work situation, we experienced a very low turnover among family coordinators, possibly due to their wide mandate and legitimacy to act across silos, where they experience meaningfulness because they can perform social work in ways that fit the family’s needs.

We identified four family coordinator skills that are important in the New Patterns intervention. The first skill is knowledge of the welfare system. Family coordinators need to have a broad overview of the different services and arrangements that might be relevant to mobilizing help in solving the challenges a family is facing. The second skill is coordination competence. Involving and mobilizing relevant collaboration partners, defining goals, leading meetings and ensuring progress are important activities. The third is interpersonal skills. This skill is important because family coordinators need to address both adults and children in families, as well as their collaboration partners when conducting a coordinating role. The fourth skill is based on traditional social work, wherein the person within the situation constitutes the unit of analysis (Levin, 2021). Hence, these skills build on the definition of social work ‘...that promotes social change and development, social cohesion, and the empowerment and liberation of people’ (IFSW, International Federation of Social Workers, 2014).

Through systematic mapping, close follow-up over time, practical and social support and coordination skills, the family coordinator develops trust-based relationships that provide new insights into the family’s challenges. A trust-based relationship stands out as a crucial prerequisite for relating activities to expected outcomes, which are indicated by multiple connections in Figure 1. Trust is a prerequisite for the family’s willingness to address the challenges identified in the detailed mapping, even if they are vulnerable and

difficult to address. The use of appropriate services is expected to increase as the family coordinator gets insights into the families' needs.

Short-term and intermediate outcomes

On an individual level, the expected outcomes of the New Patterns model are divided into short-term and intermediate outcomes. An overview of monthly income and expenditure is an expected short-term outcome, that enables better budgeting skills, which is an intermediate outcome. A short-term outcome for children is participation in kindergarten and after-school programmes, with an expected intermediate outcome of increased attendance in school, continued in better school results and reduced drop-out risk in secondary school. The short-term outcome for children participating in leisure activities is connected to the intermediate outcomes of increased engagement with society, improved health literacy and better mental health and quality of life for the children. Access to voluntary services is a short-term outcome expected to increase families' engagement with society. Further, the short-term outcomes of a stable housing situation affect multiple intermediate outcomes, such as reduced parental stress, better school results and reduced drop-out risk in secondary school. Further, short-term outcomes of daytime activities for parents are expected to give an intermediate outcome of parental participation in the labour force or work-related activities, which is also assumed to be connected to reduced school drop-out risk for the children and improved financial situation for the family.

System-level outcomes

Finally, we identified short-term outcomes of the New Patterns model on a system level. We found that the prerequisite/assumption of a relationship based on trust, following the family coordinator's understanding of the needs of the family and the family's willingness to address identified issues, is interconnected with the family coordinator's activity of communication and navigation in the welfare system. This may lead to better an understanding of the user group's needs at the system level. An increased understanding of users' needs may influence organizational willingness to change, which can, in turn, lead to improved integrated person-centred services in the welfare system, improved interaction between services, and improved interaction between public and voluntary services.

Long-term outcomes

The aims of the New Patterns intervention are that children in the participating families complete their education, participate in the labour force as adults, receive most of their income from work-related activities, and experience better mental health and quality of life. These are illustrated as long-term outcomes in the logic model (yellow boxes).

Discussion

Our purpose behind describing the logic model in detail was to understand how the different activities, prerequisites and outcomes involved in the intervention are interconnected. The Norwegian welfare system is largely organized in silos, implying that families in need of services have to relate to multiple service providers representing different silos and with limited responsibilities. In the New Patterns intervention, family coordinators have a mandate to act across silos and to function as pilots and trusted companions in a complex welfare system. It is a requirement that the system facilitate a working situation that allows long-term follow-up.

In the logic model, we describe in detail the activities and prerequisites underpinning the intervention. We claim that the complexity and interconnections between activities, prerequisites and outcomes are under-communicated and underestimated in the debate on coordinating services. The main focus in this debate has been on the specific and single activity of *Coordination of inter-sectoral work* (The Norwegian Directorate of Health, 2018a). As the logic model illustrates, this is only one activity in a much bigger picture of potential mechanisms for the coordination of complex challenges.

Analysing the logic model, the prerequisite of *Relationship based on trust between families (both children and adults)* and the short-term outcome *Use of appropriate services* were the most extensively interconnected (Figure 1). These two mechanisms are significant for the interconnections between activities and outcomes.

Building a relationship based on trust depends on continuity, accessibility/availability, and the family coordinator's professional and personal skills. These prerequisites differ from traditional models of welfare organization, in which follow-up is contemporaneous and dependent on the type of service or benefit received. This implies a lack of continuity, wherein families receive short-term, limited follow-ups from different service providers.

A logic model can also provide guidance for stakeholders. Discussing a logic model with involved actors representing different municipalities and professions enables discussions that also establish consensus across and within intervention sites. In the New Patterns intervention, a practical guide was developed to assist family coordinators in their everyday work, and the logic model can also function as a checklist for family coordinators to ensure that their activities are relevant to achieve the intended outcomes. Our logic model describes the complexity that family coordinators work with on a routine basis; therefore, it will seem familiar to them. For leaders in organizations implementing the New Patterns intervention, the prerequisites/assumptions presented in the logic model illustrate which organizational structures must be facilitated to make the model work as intended. For example, the prerequisites of the *same family coordinator over time* and secure *accessibility and availability* impact the definition and organization of the family coordinator role. We argue that the usefulness of the New Patterns logic model is strongly related to the implementation and fidelity of the intervention. The New Patterns logic model constitutes a detailed description of the intervention as the implementation object. Consensus among family coordinators and leaders about the implementation object will be decisive for achieving success and maintaining fidelity.

New Patterns is an intervention that addresses a complexity that calls for context-sensitive facilitation strategies for intervention models (Mills et al., 2019). Moreover, implementation of this intervention in different sites and contexts calls for local facilitation strategies that would enable the activities and prerequisites of the model to be implemented in the local context. Nevertheless, the core activities and prerequisites cannot be ignored or left out if one intends to reach the expected outcomes of the intervention. The logic model is useful in developing local context-sensitive facilitation strategies that do not interfere with the expected causal mechanisms.

Strengths and limitations

This study describes a specific model for the coordination of services to low-income families with complex challenges. The New Patterns logic model does not express interactions between the intervention and the context. We used a logic model that emphasizes the details of how the intervention works to support its implementation and fidelity. Other

types of logic models focus on interventions' interconnection with the context and can include complex perspectives and mechanisms associated with contextual factors (Mills et al., 2019).

The research topic could have been further investigated by involving families in the logic model development; however, this was not feasible within the resource frame of this study. The logic model was developed in collaboration with researchers and practitioners. It builds on the empirical experiences of family coordinators. End user involvement and families' perspectives have been examined in other work packages of the research project (Bøe et al., 2023; Haraldstad et al., 2023; Lundberg & Danielsen, 2024). The current study is limited to a description of the logic model, and its activities, prerequisites and expected outcomes. Whether this model succeeds is outside the scope of this study.

Despite its limitations, we believe that this study provides a valid understanding of the New Patterns intervention that can shed light on the complex features of coordinated welfare services and the potential causal mechanisms involved in such services.

Conclusion and practical implications

Coordination functions have been highlighted as a solution to the challenges of a sectorized and specialized welfare system (Lundberg & Breimo, 2021; The Norwegian Departments, 2020; The Norwegian Directorate for Children, 2018); however, only a few studies have described the constituent activities of coordination functions. Our detailed mapping of the New Patterns model gives insights into how coordination activities may unfold, and how these activities are interconnected with prerequisites and outcomes. By mapping a coordination function model in such detail, we can describe the potential mechanisms of coordination activities.

In the New Patterns model, we identified 10 important activities that constitute the family coordinator's follow-up of the participating families. These activities are illustrated in a *logic model*, which illustrates the relationships between the activities, prerequisites/assumptions, and outcomes in the short and long terms. The New Patterns intervention facilitates integrated health and social care for families with complex challenges. The intervention does not introduce new services but coordinates and optimal use of existing municipal welfare services. Presenting these mechanisms and interconnections in a logic model enables deeper insights into the intervention and is useful for the intervention's implementation and model fidelity. The logic model may be relevant for other target groups with complex challenges wherein health and welfare systems struggle to provide integrated and coordinated care to all family members.

In policy discussions of coordination between services as a solution for handling sectorized and specialized health and welfare systems, there has been little focus on the specific activities and mechanisms that constitute coordinator roles. Many of the mechanisms identified in the New Patterns intervention are features that have been insufficiently described in these discussions, and we argue for a more detailed and holistic approach to coordination efforts and functions addressing complex challenges, including poverty and social inequality.

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