A MOSAIC

From a Team of Developmental Evaluators

Resources and Tools for the *Enriches Collaborative.* A Project to Reduce the Isolation of Senior Caregivers

THE TEAM

Paul Bakker - Social Impact Squared

Chris Connolly - Freelance Consultant

Tanya Darisi - Openly
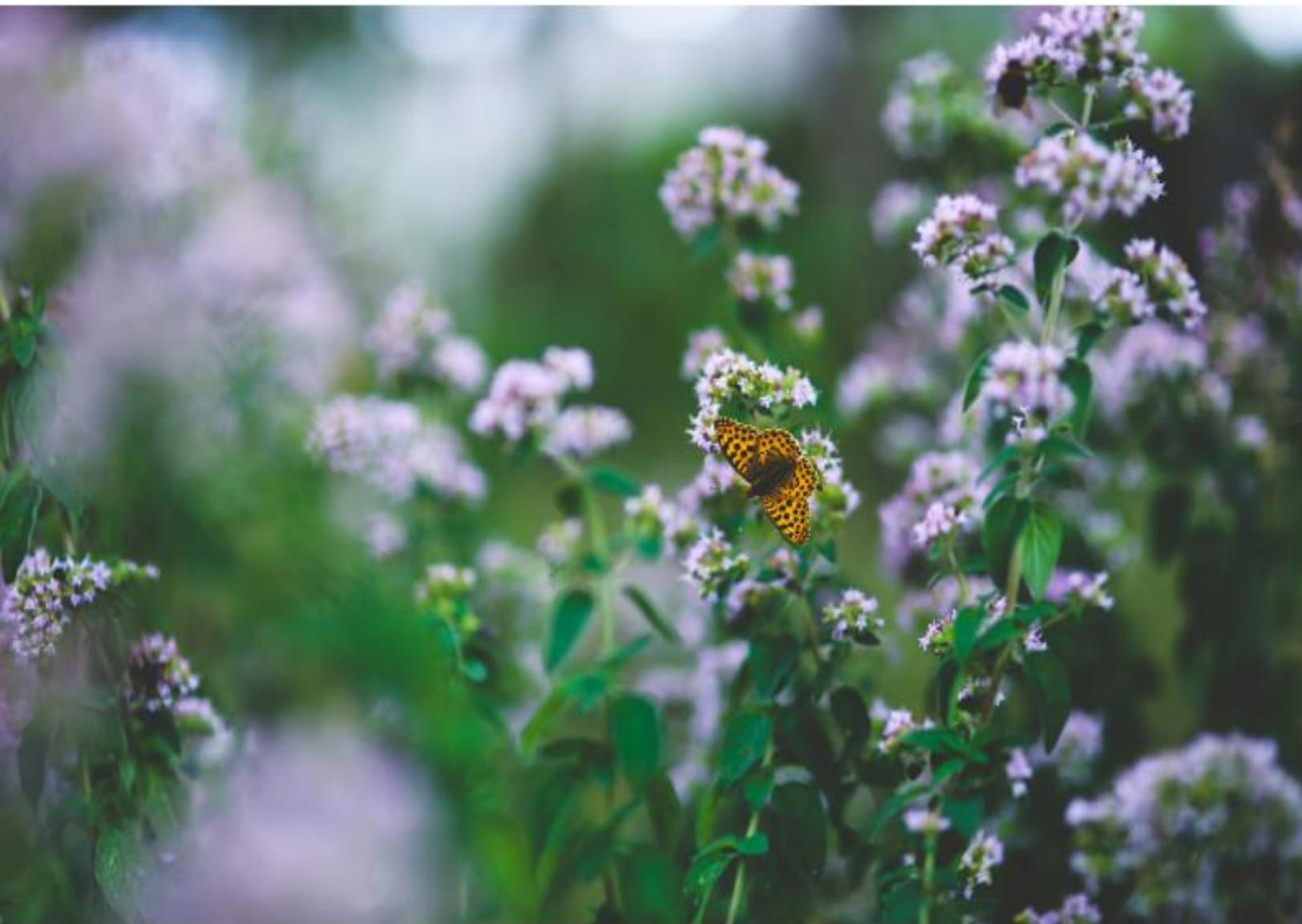
Adam Fearnall - Twelve Canada

Dr. Marc Langlois - Twelve Canada

Art by: Jenny Gifford jennymayinc@gmail.com

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Introduction

Welcome to our Studio.

Our mosaic is a shared art project: unique styles, sites of inspiration, and approaches to making meaning. Over the course of an afternoon, we sift through the observations and learnings from our time with the Enriches collaborative—each of us drawing meaning from different parts of the collaborative and contributing to an emerging picture of the whole.

At the end of the afternoon the glass walls are covered with chart paper and dry-erase marker — a piece of advice for you, *don't assume that dry-erase marker will come off every piece of glass.* As we pack up, pictures are taken, windows are cleaned, and wisps of conversation drift around the room.

At the end of our time in the studio we determine that we will create tools and resources that can be adopted and adapted by the Enriches collaborative. These, along with our existing contributions, will be our final gifts.

An Artistic Note.

A mosaic is defined in two dominant ways: literally, "a picture or pattern produced by arranging together small coloured pieces of hard material" and more figuratively, "a combination of diverse elements forming a more or less coherent whole." The following document represents both meanings of mosaic. It presents a variety of discrete learning briefs and tools that, when arranged and viewed with discernment, come together to form a more or less coherent illustration of the developmental evaluation team's contribution to the Enriches collaborative.

We hope that this mosaic offers a point of reflection for the Enriches collaborative and for others who seek to improve conditions for senior caregivers across the country. We encourage each viewer to act on the insights that come from exploring this mosaic and believe that individual and collective reflection will help each person to gather the meaning that is most import to their work.

A mosaic is only practical if you spend the time to reflect on what it is revealing to you. Each part has the potential to show you something new depending on when, how, why, and with whom you explore it. If you can't quite seem to make sense of it, you can always change the angle by changing your positioning.

In other words, give yourself space to experience the mosaic. Its meaning is for you to determine, not for us to prescribe.

Our Materials.

Developmental evaluators draw from a *bricolage,* of practices, theories, and methods to carry out our work. *Bricolage,* drawn from the world of French junk collector, is defined as, "making creative and resourceful use of whatever materials are at hand (regardless of their original purpose)."[1] As we put together this mosaic we made a commitment to honouring the materials at hand and to creating the pieces that we needed to produce a piece of work that provides space for meaning to emerge. Each piece represents a point of synthesis, informed by individual and collective sense-making processes.

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[1] Westley, Frances. Social Innovation and Resilience: How One Enhances the Other. Stanford Social Innovation Review, Summer 2013. https://ssir.org/articles/entry/social_innovation_and_resilience_how_one_enhances_the_other

The materials **at hand** were created throughout our team's engagement with the Enriches collaborative. The **new materials** were created with intention after the DE Team's final reflection session in the spring of 2017. They are offered as final gifts, to be adapted and adopted by the Enriches collaborative.

<u>**Learning Briefs**</u>

September 2016
DE Team

December 2016
DE Team

Good Practices for a Neighbourhood Approach
Dr. Marc Langlois

Understanding Warm Transfers
Adam Fearnall

<u>**Tools**</u>

Self-Assessment Tool for Caregiver Involvement
Paul Bakker

Self-Assessment for Partnership Development
Chris Connolly & Adam Fearnall

<u>**Resources**</u>

Early Learning Map
Dr. Marc Langlois & Chris Connolly

Theory of Change
Tanya Darisi

Viewing the Mosaic.

Like all art, we know that this piece will be as meaningful as the viewer allows it to be.
For some, a quick look will create the impetus for practical application, others will sit with it until meaning reveals itself unexpectedly, and still others may never find what they're looking for.
For this reason, we present this mosaic with gentle encouragement to view it with the intention of letting it impact your day-to-day practice. This intention may help you to uncover the meaning that feels most relevant to you as a practitioner who hopes to improve the lives of senior caregivers.

Here are some tips about how to do that:

- Read the **learning briefs** and ask yourself, "*What does this learning brief tell me about my individual practice? Do I want to change anything?*"
- Look at the **resources** and ask yourself, "*How might this resource help me to understand what is happening right now in my work?*"
- Try out the **tools** and ask yourself, "*Is this tool useful to me? How could it be more useful? What do my results tell me about my work?*"

Learning Briefs

ENRICHES DEVELOPMENTAL EVALUATION BRIEF

SEPTEMBER 2016

This brief shares key insights and learnings from a reflection session held with the ENRICHES Project Managers committee. The purpose of the session was to reflect on experiences, successes and challenges to date by revisiting the ENRICHES Theory of Change. The Theory of Change was originally crafted early on in the collaborative, and after nearly a year of gaining on-the-ground experience, it was time to check in on assumptions and connections between activities and outcomes.

The session was held early September 2016 at the Reitman Centre. It was facilitated by Tanya Darisi and Marc Langlois. Notes from this session were shared with the DE team and the Backbone Project Manager for further reflection and refinement. The second part of this document shares a summary of these reflections for consideration.

EXPERIENCES, OBSERVATIONS AND REFLECTIONS ON STRATEGIES

The ENRICHES Theory of change includes four key strategy areas. Project Managers thoughts and reflections about each of these is shared below.

- **Build public awareness**

So far the activities have been less focused on raising general public awareness, and more on building targeted partnerships. Partnerships have fast become the cornerstone of program activities, which are built through networking and relationships. There is concern about the effectiveness of broader communication, and around ENRICHES own identity and positioning within relevant communities.

- **Identify isolated senior caregivers aged 55 and up, provide outreach to them**

There is a key concern here that projects are not reaching the target group of seniors. The challenge of reaching isolated seniors has confronted each of the project managers. Success seems to come through partnerships with other community agencies and groups who can host/champion ENRICHES programs; however, this success has been variable and there is a worry about reaching a limit with community partners/leaders (how many times can you go back to the same well?). There is also the concern that "isolated senior caregiver" is not an identity that resonates with the target group. There is evidence that the phrasing "isolated senior caregiver" is actually off-putting to community members.

There is the perceived need to find the right language, which is appropriate and which resonates with diverse communities.

The collaborative has not engaged seniors/those with lived experience in the design and activation of outreach of project activities.

- **Provide education and training of professionals and volunteers and intervention programs for seniors to reduce social isolation**

Education and training for professionals and volunteers seem to be on course; there were few reflections on this process other than to emphasize interventions need to be about more than bums in seats. Engaging seniors in programs is more challenging than originally thought.

Caregivers need respite to participate. Group programs and social events seem to be more successful than one-on-one visiting. So far, interventions are focused on individual-level outcomes, and the question was raised about the kind of system-level change that is needed.

- **Implement a management structure**

Here there are some adjustments to consider. In particular, there is the question of greater role authority for the Project Managers Committee. Decision-making and activity feel held up. There is also a question of the identity of the collaborative. What makes it "collective impact" specifically

IDEAS FOR MOVING FORWARD

Prompted to imagine new ways for moving forward, project managers identified the need to experiment with more innovative ways to engage seniors. Experimenting together creates the opportunity to learn by doing, and achieve collective impact through action. This requires supporting each other outside our comfort zone. Possibilities include:
- Learning more from lived experience, including understanding how older adults find their own solutions to isolation
- Trying "let's grab a coffee" strategies, taking a non-programmatic approach
- Organizing a more collective presence within specific neighbourhoods
- Going where caregivers are at (e.g. churches/faith centres, grocery stores…)
- Building a stronger public presence and trust for ENRICHES
- Clarify roles and communication with the steering committee

CONSIDERATIONS FOR REFINING THE THEORY OF CHANGE

Guiding Principles

It is clear there is energy around doing, in particular doing together. From the Project Managers, both individually and collectively, we have heard underlying principles in how you frame your work and willingness to tackle on-the-ground challenges. These principles – drafted below – can be more clearly articulated by the group, and used to bring greater intentionality in your design and activation of new strategies.

For your consideration and discussion, these principles are:
1. Go to where the older adults/intended beneficiaries are
2. Reach beyond our usual suspects
3. Step outside our comfort zone
4. Learn from those with lived experience, including what they are doing to find their own solutions
5. Drop our "if we build it they will come" program heads
6. Create something tangible together as a collaborative.
7. Leverage our established community partnerships to drive deeper impacts.
8. Learn from things going well
9. Accept the challenge of doing outreach
10. Focus on the experience of isolation and of caregiving rather than the identity of "isolated senior caregiver"

Strategies

The experience over the last year has revealed core assumptions inherent in the original Theory of Change. As we reflect on the experience and learning, you may wish to refine your Theory of Change to reflect more specific strategies and stronger connections to outcomes. For instance, you can consider recrafting:

1. the focus on *public awareness* to **Building Intentional Partnerships –** recognizing that partnerships are foundational to the theory of change; these partnerships can be then mapped against the range of activities, which can include a public communication/education strategy; outreach and engagement; education and training for professionals and volunteers; and interventions for seniors, building capacity etc. Greater public awareness could then be positioned as an outcome of these partnerships.

2. the focus on *identify and outreach* to **Outreaching and Engaging** – noting that outreach and engagement is targeted towards seniors (55+) and allowing for seniors to self-define caregiving of family and non-family members; recognizing isolation is a range of experiences where engagement can both prevent and reduce the experience of isolation; and learning from seniors about what resonates and how they find their own solutions

3. the focus on *implement a management structure* to **Creating Space for Collaboration –** recognizing that not only structures but also processes must be in service of collective impact; creating spaces for conversations, connections, and creation both within the collaborative partners and with broader community partnerships; recognizing the need for flexibility and adaptation; and drawing on emerging thinking about collective impact that nudge the conversation beyond the five conditions towards guiding principles and adaptive leadership.

The next step in refining your Theory of Change is more clearly connect these strategies to emerging outcomes, at the individual, community and systems level. Assessing the logic of these connections will help inform decisions about where more energy is needed to achieve your intended impact.

ENRICHES DEVELOPMENTAL EVALUATION BRIEF

DECEMBER 2016

This brief shares key insights and learnings from a reflection session held with the ENRICHES Steering Committee. The purpose of the session was to reflect on the Steering Committee's experiences, successes and challenges to date, focusing specifically on how they work together and what they would like to see for themselves going forward.

The session was held early December 2016 at the Reitman Centre. It was facilitated by Tanya Darisi and Robin Cory.

BEING FRANK AND STRETCHING OUT THE KINKS

For the last number of months, there has been underlying tension within the Steering Committee. This tension surfaced in the partnership check-in survey completed in the spring as well as in the challenge signing off on the Terms of Reference. Everyone agreed that the December reflection session needed to focus on open dialogue with each other, so that partners could put issues on the table and co-create a new way of working together.

During the reflection session, Steering Committee members attributed the source of tension to a number of intersecting threads:
- The partnership was originally formed in a rushed, and somewhat artificial, way
- They hadn't gotten to know each other very well (resulting in limited opportunities to build trust and rapport)
- There were differences in understanding and expectations for collective impact (CI) – what it was, how it would unfold, and what it would feel like
- Without a clear, and shared understanding of CI, it felt like they were falling back on what they knew, which was how to deliver programs
- Meetings did not feel engaging or inspiring
- Project Managers were moving ahead faster than the Steering Committee; the two committees were out of step
- There was an unclear sense of what it was they were supposed to be steering
- There were still big questions around what their place and contribution needed to be in the ecosystem around vulnerable senior caregivers

Challenges like these are not uncommon when forming collaboratives,[2] and often the first year together is characterized by working out the kinks. What matters is the commitment to building trust, mutually beneficial relationships and working towards a shared vision. All collaborations require an investment of time to nurture and develop a shared space and identity.

The challenges experienced by the ENRICHES collaborative turned to tension in having to launch activities and programs at each of the partner sites while they were still working out their

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[2] Darisi, T., Chuong, K., Strohm, S., & De Guzman, J. (2011) Collaborations: Priorities & Promising Practices. Institute for Community Engaged Scholarship, University of Guelph.

relationships together. It was akin to building the plane while flying it. Focusing on structure, programs, and information sharing in the early days helped to get the work on the ground going.

For collective impact, and with their experience, motivation and commitment to making a difference in the lives of vulnerable senior caregivers, the level of collaboration reached in the first year of ENRICHES was not enough. Naming the tensions during the reflection session released a new energy, and the conversation within the Steering Committee turned to what their ideal would look like.

PUTTING THE IDEAL INTO PRACTICE

When asked what their ideal would be in working together towards creating meaningful impact, Steering Committee members responded:

- Our work together would be energizing
- We would be active
- We would feel empowered
- We would have flexibility in our structures
- Structures and processes would support innovation, which means we would have space to take risks and make mistakes, and learn from our journey
- Leadership would be distributed
- There would be shared accountability and responsibility; we would find the right balance between accountability, strategy and adaptation
- We would look up and out, hold the vision and not get caught in the weeds
- We would plan, be strategic and keep the process on track
- We would harness our respective expertise and apply it to our stated impact – reducing social isolation among vulnerable senior caregivers

These ideals can be the foundation for guiding principles that can be used to check in regularly on how the collaborative is progressing. As a start, the Steering Committee brainstormed some ways to put these ideals into practice and agreed to try out different ways of working together.

The table on the following page summarizes their ideas for changing the energy and productivity of their meetings.

New Ways to Work Together	What we Need to Consider to Make it Work
Rotate the chair for each SC meeting	Meeting chair and BB work together to prepare for meeting
Jointly craft the agenda for the next meeting	Protect time at the end of each meeting for developing the next agenda
Share updates electronically	BB to distribute updates by email in advance of SC meeting
Open up agenda to more strategic/decision-making conversations	SC members commit to reading materials in advance and come prepared to engage in discussion
Host meetings at each partner organization	Rotate hosting between backbone and other partners every other month

Present tour at each meeting site	Keep it short and focused
Extend in-person meetings to 3 hours	Need to be mindful of parameters on each other's time
	Balance longer meetings every other month with one hour teleconferences. Check in after 6 months to see if that's working
Invite senior caregivers to share experiences at SC meetings	Connect to PM caregiver involvement strategy, and invite caregivers in for relevant discussions
Invite partners/expert knowledge to present at SC meetings	Invite partners and others when needed to move the discussion forward
Complete skills/interest/resources chart	Need to be mindful of the parameters of each other's time
Each partner takes lead on one of the strategies (e.g. Public Awareness, Outreach)	Foster leadership/strategic role
	Need to be mindful of not getting caught in the tactics or in duplicating/replacing work of the PMs
Joint meetings with SC and PM committees more often	Coordinate once every three months
	Revisit whether that's working/right frequency along the way
SC members connect with working groups	Connect according to interest and capacity
Partners connect additional staff members with relevant expertise to working groups	Can be for shorter or longer periods of time

The expectation is that with these changes in place, the Steering Committee will build a better understanding of each other, trust, and a shared sense of leadership and accountability. The important thing moving forward will be to check in to see if the changes are working, if partners are focusing attention and efforts in productive, meaningful and more impactful ways. The ways the Steering Committee works together can continue to evolve. The structures of collective impact have to be in service of greater functionality, effectiveness, and of course impact. When structures hold back energy and movement towards impact, they need to change.

PRIORITIES AND NEXT STEPS

To conclude the session, the Steering Committee identified priorities for immediate next steps. These priorities were:

→ **Completing the skills/interests/resources matrix**

Action: The December meeting will focus on creating this matrix *Action:* The Alzheimer's Society

to chair the meeting & work with backbone to craft the agenda

→ **Refining the Theory of Change to reassess assumptions, strategies and logic**
Action: January Steering Committee meeting will be extended to three hours for a facilitated conversation about the ENRICHES theory of change.

Action: Project managers will be invited to the January TOC session.

Action: Following the theory of change session, SC members will reflect on their work to identify skills and interest, and will align a partner lead for the strategies (not every partner has to take on a strategy, only if it makes sense given their interest and capacity)

→ **Planning the directions and milestones for year 2**
Action: In February, prioritize strategies for the year (e.g. Public Awareness, Engagement) and develop a plan for the year that sets directions and milestones

Action: Engage funder for conversation and update about learnings, refinements to the theory of change and progress planned for year 2.

GOOD PRACTICES FOR A NEIGHBOURHOOD APPROACH

Dr. Marc Langlois

The following good practice tips are drawn together for use by the *Enriches Collaborative* for consideration in regard to their neighbourhood strategy. The tips are based on current evidence, including the author's experience, and research on comprehensive community development initiatives.

1. Out of program head and into the neighbourhood's associational life.

The *Enriches Collaborative* hopes to utilize a neighbourhood approach for the involvement of the broader community in their aspiration. Due to the fact that the majority of the activities of the Collaborative's member organizations is packaged as programs and services; this will be a significant challenge. The Developmental Evaluation team often heard from Enriches Program Managers that, "we need to get out of program head." Community is not an organization, yet the programs, services, strategies and processes used for projects like Enriches are designed as though it is.

John McKnight (1989, 1995, 2010), a respected community development leader, suggests that the growth of professional human services created a separation of the common citizen from their responsibility for helping our neighbours. Research suggests that if *Enriches* is to transform a neighbourhood into a place that reduces the rate of social isolation of marginalized senior caregivers, it will require radical shifts in the way it currently convenes and facilitates programs and services.

> A wicked question[3]:
>
> *Is the Collaborative's program-centric methods a constraint to the engagement of isolated senior caregivers and citizen in reducing the isolation of marginalized senior caregivers?*

For the *Collaborative* to infuse a new level of caring and compassion for isolated senior caregivers, it would do well to reach into the *associational life* of the community. There are countless informal ways and reasons that groups of people associate with one another in a community e.g. bowling teams, weekly visits at the market, regular barbershop conversations, prayer groups, family picnics, local soccer games, etc. Each of these associations of people are a new access point to the community. Understanding and interacting with the associational life of a neighbourhood will enable *Enriches* to find those hard to reach isolated caregivers as well as individuals that can act as their community guides.

John McKnight, describes the role of community guides as, "not just introduc[ing] one person to another but to bring a person into the web of associational life that can act as a powerful force in the person's life" (1996, pg.119). He perceives community guides as being "generally well-

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[3] Wicked questions are used to expose the assumptions which we hold about an issue or situation. Articulating these assumptions provides an opportunity to see the patterns of thought and surface the difference in a group. These patterns and differences can be used to discover common ground or to find creative alternatives for stubborn problems.

connected in the interrelationships of community life, trusted by community peers, and believing strongly that the community is a reservoir of hospitality that is waiting to be offered" (McKnight, 1996, p. 121).

McKnight is advocating for the important role of individual citizens who have a natural capacity to build multiple connections between others in the neighbourhood (McKnight & Block, 2010). In the stories of innovation in *Getting to Maybe*, the popular 2007 book on social innovation, relationships such as those with community guides helped navigate new environments and in one way or another informed a path to go forward (Westley et al, 2007, p. 95). "The energy of others is your most important resource" (Westley et al, 2007, p. 159).

2. Things are different when you are prototyping - embrace it!
Prototyping (or experimenting) a new approach calls for an adaptation of all aspects of your structure, and fresh mindsets. The *Collaborative* is best to suspend all assumptions about their usual of language, communication online, decision making, and organizing together. The *Collaborative's* structures and the way they operate need to adapt in whatever way best serves the emergent nature of rapid prototyping and the people involved with it.

3. Educate only when asked.
The partnerships and individuals the *Collaborative* engages within the neighbourhood are best assumed to have a value of reciprocal learning. If any individual from the *Collaborative* assumes a role of educating, even for a moment, it is a sure way to shut down the possibility of a more generative exchange. There are important times to share knowledge but the impetus of the what, when, and to and by whom must flow first from a profound demonstration of listening on the part of individuals from the *Collaborative*. The best answers for how to carry out the neighbourhood approach will always lie within the collective hearts and minds of those living in the neighbourhood and/or experiencing isolation.

4. Keep quality relationships the highest of priorities.
To place the development of quality relationships as the highest of priorities is to practice a neighbourhood approach built with care and respect of those with lived experience. This will drive engagement, innovation and local accountability. It's also an important principle to carry into any convening and hosting of the *Collaborative's* initiates in the neighbourhood.

5. Follow a design, planning and action model.
As the neighbourhood work progresses past its early stages much of your time will be spent in very unfamiliar territory. The *Collaborative* and its local partners will be susceptible to growing anxious and disagreeing on what and where the priorities are. A community development model that informs your planning and action can help the *Collaborative* navigate through the unknown. This *map* can help those involved feel empowered to design solutions to challenges that arise. Without a *map* through the unknown, the emerging uncertainty can have the reverse effect (Langlois, 2013).

6. Notice and advocate for enterprising citizens in the neighbourhood
Pay attention to enterprising individuals in the neighbourhood. They may be youth, adults, seniors, lawyers, soccer coaches, ministers, store clerks--they may be all sorts of folks. Once you meet them, slow down. Your role is not to co-opt, coordinate for, sell your ideas, or try to further motivate these individuals. What you can do is learn from them. They can help you navigate neighbourhood networks, formal and informal. Only then will you discover ways that your mutual interest might weave together.

7. Support learning.
During your journey into the neighbourhood approach, moments for reflection need to be carved out along the way. All of those involved from the *Collaborative* and in the neighbourhood need a rhythm of action and reflection that generates continual learning to inform improvements. This requires a clear process that embraces the uncertainty of the neighbourhood prototyping. Whether it's regular group phone check-ins, a facebook page, one-on one check-in calls, monthly meetings, or greets and reflections in the neighbourhood; it is best to establish it ahead of time before the opportunities and challenges arise.

References

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UNDERSTANDING WARM TRANSFERS

Complete Referrals and a New Understanding of Referral Partnerships
Adam Fearnall

Introduction—A passion for this work

The following information comes from time spent observing work at WoodGreen to support the system navigation needs of isolated senior caregivers. WoodGreen demonstrates a passion for this work and has done some prototyping to learn about how to effectively support seniors caregivers to navigate the programs and services available to them. The ideas below are

offered as an example of emerging practice that could be helpful to others who are interested in reflecting on their processes and expectations for referrals and partnership.

Key Learning #1—When referrals go beyond *our* programs.

Sometimes isolated senior caregivers have needs that extend beyond the support being offered in WoodGreen's ELA program. When these caregivers are identified they are referred to WoodGreen's group of Community Navigators. These CNEVs assess a caregiver's needs and refer the caregiver to additional internal and/or external services or supports to meet their needs.

In this case, there are two referral partners:

- The program or organization (in this case, ELA) that refers caregivers to WoodGreen's CNEV team[4]
- The organizations that receive caregiver referrals *from* WoodGreen and provide support to the referred caregiver

This adds to an early definition of referral partners that defines them as relationships that result in an increase in the number of senior caregivers attending courses or programs[5].

Key Learning #2—Good referral partnerships require **complete referrals**

The key to the referral process is WoodGreen's practice of **complete referrals**.

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[4] For the sake of relevance to the Enriches collaborative, this brief focuses on caregivers who are identified and referred through ELA because this represents a type of need or interaction that might be consistent across all Enriches partners who offer courses or programs that encounter senior caregivers. WoodGreen receives referrals to its CNEV program from a variety of different sources.

[5] As discussed in a brief prepared by Chris Connolly in December 2016 called "Building Intentional Partnerships"

A referral is considered **complete** when:

- WoodGreen receives a report back from the referral partner (with the caregiver's permission) or directly from the caregiver about the outcome of the service interaction
- WoodGreen reports back to an agency that has referred a caregiver to its CNEV team

A **complete referral** is important because it:

- Develops trust between the referring agency and WoodGreen
- Helps WoodGreen to evaluate the quality of services at agencies that it refers to
- Establishes a relationship between WoodGreen and the caregiver being served
- Helps to ensure that the caregiver receives the support that they need and does not fall through the cracks[6]

Challenge #1—A new definition and a new understanding of partnership

The information above moves from an understanding of referral partnerships as:

- Relationships between programs and/or organizations that result in an increase in the number of senior caregivers attending courses or programs within the Enriches collaborative[7].

Towards a new definition, based in the concept of a *chain of care*:

- A relationship between programs and/or organizations that results in an integrated *chain of care*[8] for isolated senior caregivers[9].

Challenge #2—Learn more about the *chain of care* concept and think about how to practice it

If there is resonance with the concept of a *chain of care*, here are some reflection questions that might lead to interesting discussions within the collaborative:
- How might a *chain of care* approach change the way that the Enriches collaborative approaches partnership development? 16

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[6] If a caregiver is not able to address their challenge immediately, WoodGreen will stay with the case and help to facilitate an alternative solution

[7] The increase in the number of senior caregivers attending courses or programs might become a useful metric to track.

[8] The term *chain of care* comes from the World Health Organization's "Glossary of Terms for Community Health Care and Services for Older Persons" and refers to "a well planned entity of inter- and intra-organizational care processes to solve the complexity of problems of an individual, and accompanied by systematic follow-up actions. Care chains are integrated to the extent that there are no gaps, barriers or breaks in the process leaving the older person without proper care."
http://www.who.int/kobe_centre/ageing/ahp_vol5_glossary.pdf

[9] Note: it could be hypothesized that this would result in an increase of isolated senior caregivers in programs and courses; as system integration grows referrals would likely increase

- How is the Enriches collaborative modeling a *chain of care* approach within the collaborative?
- How might Enriches partners strengthen its *chain of care*?

SELF-ASSESSMENT TOOL FOR CAREGIVER INVOLVEMENT

Paul Bakker

During ENRICHES' first year of operating, the collaborative learned about the importance of engaging senior caregivers in their work. By engaging senior caregivers the collaborative can better ensure their programs are offering what isolated senior caregivers need and want to be less isolated and ensure that those services are communicated and promoted in a way that resonates with seniors' voice and lived experience.

This tool is meant to help the ENRICHES Collaborative assess how well they are following through on their stated value of ensuring isolated senior caregiver participation and learning from their lived experience. ENRICHES seeks to engage senior caregivers in a way that:

- Is meaningful (actually impacts how the collaborative does its work)
- Capitalizes on ENRICHES partners' existing connections whenever possible
- Does not overly burden senior caregivers that are already experiencing caregiver burden
- Can flexibly engage different types of seniors to help the collaborative with different questions/tasks

INSTRUCTIONS

Data Input

When entering data consider senior caregiver engagement instances that have occurred over some period of time (i.e. over the last year). We recommend the Collaborative complete this assessment annually.

Column 1: Ways ENRICHES is Engaging Senior Caregivers

List all the ways the Collaborative has engaged senior caregivers to address collective activities or issues.

(Note: Collective activities or issues relate to ways multiple agencies are coordinating and working together to address senior isolation; they do not include activities or issues that are only applicable to individual partners' projects).

Column 2: Existing or New Connections

Enter "Existing" if all or almost all of the seniors engaged were already connected to an ENRICHES partner organization.

Enter "Mixed" if some seniors were already connected to an ENRICHES partner organization and others were not.

Enter "New" if all or almost all of the seniors engaged were not already connected to an ENRICHES partner organization.

Column 3: Types of Senior Caregivers Engaged

Describe the types of senior caregivers that were engaged in terms of:

- Their isolation
- Their ethno cultural or faith-based backgrounds
- The characteristics of the person they are caring for (i.e. dementia, child, parent, etc.)

Column 4: Level of Participation

Rate the senior caregiver engagements in terms of the IAP2 Spectrum of Public Participation.

Column 5: Impact on the Collaborative's Work

Describe how the senior caregiver engagement has changed how the collaborative does its work.

Column 6: Burden

Indicate whether the burden of participating is "Greater", about "Equal", or "Less" than the benefits of participating.

For assessing burden on senior caregivers, consider:

- The financial costs of participating, including travel costs.
- The amount of time it takes to participate, including travel time.
- How much flexibility there is in when they can participate. Is there only one time when they can participate, multiple options, or can they participate on their own time whenever it works best for them? Is participating a long or short-term commitment?

For assessing benefits for senior caregivers, consider if participating in ENRICHES provides them with:

- Social activities/connections
- Material benefits (i.e. honorariums, food, etc,)
- Knowledge benefits (i.e. available supports, others' experiences, etc.)

Data Input Table

Input the data into the following table. The table can be created in Google Doc's so that different ENRICHES Partners can edited and view it in real time.

Table 1: ENRICHES Senior Engagement Table

Ways ENRICHES is Engaging Senior Caregivers	Existing or New Connections	Types of Senior Caregivers Engaged	Level of Participation	Impact on the Collaborative's Work	Burden

Analysis

Existing or New Connections

Determine the percentage of opportunities where ENRICHES partners were able to engage senior caregivers that they were already connected to.

Ask yourselves:

- What are the types of senior caregivers that we were **not** already connected to?
- How can we expand and deepen our connections to various senior caregivers so we won't have to go beyond our existing connections in the future?

Level of Participation and Types of Senior Caregivers Engaged

Count the number of engagement opportunities at each level of the IAP2 Spectrum of Public Participation.

Ask yourselves:

- Are we engaging senior caregivers at the right level of participation?
- How can we deepen senior caregivers' participation?

List the different types of senior caregivers ENRICHES has engaged at each level of participation.

Ask yourselves:

- What types of senior caregivers do we need to engage/engage more deeply?

<ins>Impact on the Collaborative's Work</ins>

Count the percentage of engagements that have made a meaningful impact on ENRICHES work?

Ask yourselves:

- Can we engage seniors in a different way (including ending some engagement opportunities) to better ensure that senior caregivers have an impact on our work?

<ins>Burden</ins>

Determine the percentage of engagement opportunities that the burden on senior caregivers is rated as being "Greater," "Equal," or "Less" than the benefits of participating.

Ask yourselves:

- Can we engage seniors in a different way to decrease the burden on them or increase the benefits for them?

PARTNERSHIP SELF ASSESSMENT TOOL

Chris Connolly & Adam Fearnall

This self-assessment tool is designed to help members of the Enriches collaborative to reflect on the important partnerships that they are building with organizations in the communities that they serve. The tool brings forward four principles of effective partnership building, generated from a synthesis of conversations with Jenny Hardy (CMHA) and Shrid Dhungel of WoodGreen Community Services. It is our hope that the process of completing this self-reflection will inspire each Enriches member to commit to specific actions that lead to more effective partnership management. We think that effective partnership management will strengthen the system of support for isolated senior caregivers by better integrating Enriches' efforts with those of other organizations working to support seniors.

The Tool

This self-assessment tool will help you to reflect on **an important partnership** that you are building in the community. The actions that you take after completing this self-reflection will increase the strength of collaboration between organizations serving senior caregivers.

Name of the Partner—*Write the name of the partner that you are assessing.*

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[                                                                    ]
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Self Assessment—*Use the scales below to rate yourself on your practice of the following four principles of effective partnership building.*

How effective have I been at the following?

a) **Bringing the party to them**—*finding a partner who knows where senior caregivers live, work, and play.*

      1   2   3   4   5

b) **Adapting to partner needs**—*developing a responsive and distinct relationship with the staff lead(s) at the partner organization.*

      1   2   3   4   5

c) **Being a positive cheerleader**—*celebrating what's working by sharing with the partner information about their contribution to participation, outputs, and outcomes.*

    1   2   3   4   5

d) **Holding myself accountable**—*checking in with the partner to make sure that they are getting what they need from me.*

    1   2   3   4   5

My Score—*Add your ratings together to get your total score. The higher your score, the better!*

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Commitments for Improvement—*Reflect on your score(s) and commit to taking specific actions to increase it. If you're stuck, ask someone else in the Enriches collaborative for advice—they're pretty smart!*

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A LEARNING MAP FOR SYSTEMS TRANSFORMATION

Chris Connolly

*Matrix and Visual Learning Map adapted from Vanessa Reid's "Learning Map for Systemic Transformation http://the-lwi.org/publications/item/58-the-four-rooms
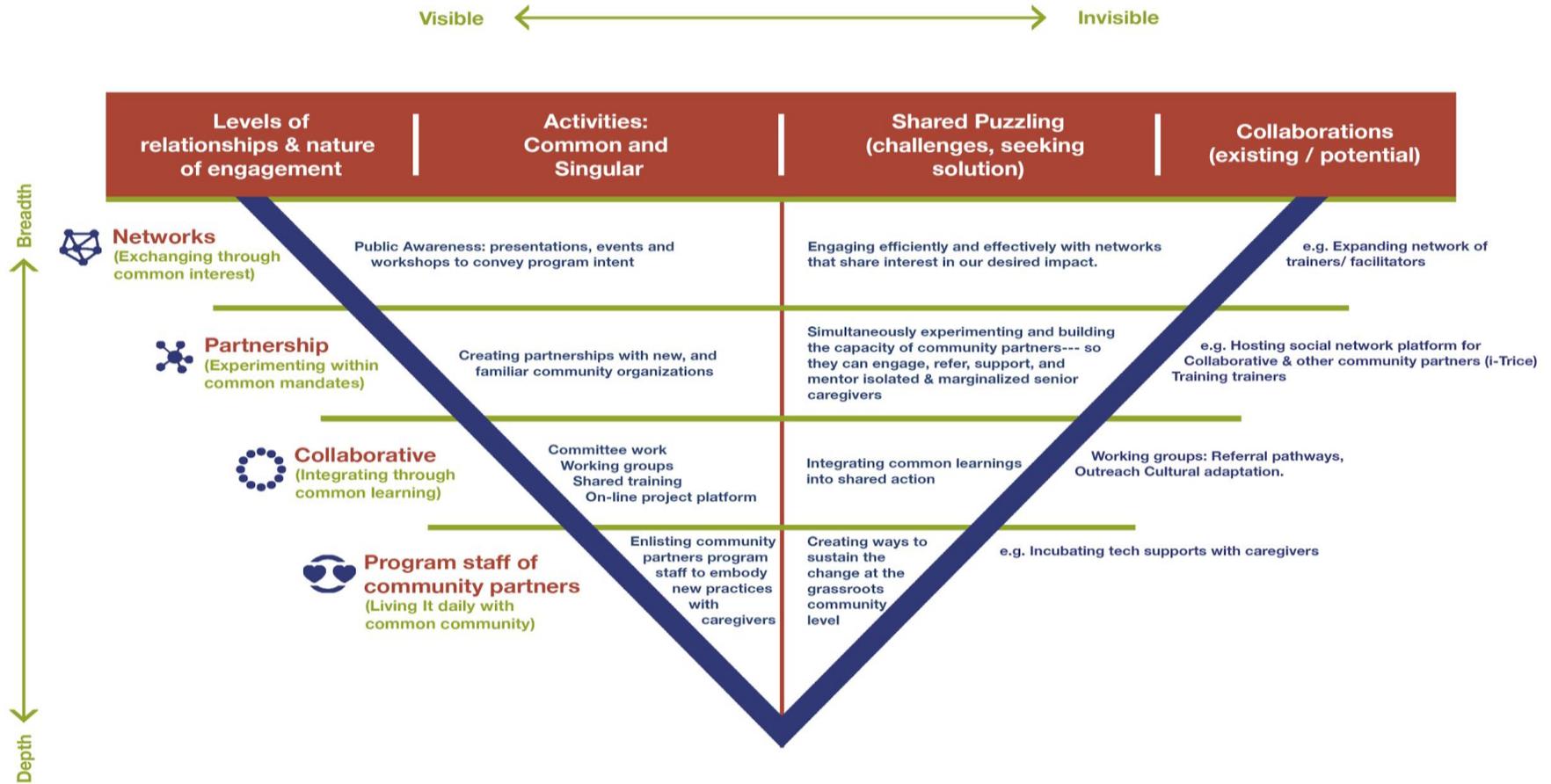
ENRICHES Collaborative: Getting to Impact

Impact Statement: To measurably reduce the rate of social isolation of marginalized senior caregivers age 55 and up living in Toronto by 2018

Theory of Change: *If we* use collective impact to build capacity for understanding, seeking and engaging marginalized senior caregivers

we expect senior caregivers will become better connected to the services and supports (formal & informal) they need

so that they will experience reduced isolation, greater self-sufficiency and improved mental health/resiliency

Create & sustain seamless management structure to support communication between partners & evaluation of learning and success

Level of Intervention

- Systems
- Organization/Institution
- Community
- Marginalized Senior Caregivers

Strategies

Build Capacity
- Create space to bring senior caregiver voice into the process
- Create/nurture strategic partnerships and connections
- Generate & share knowledge about needs & experiences of marginalized seniors
- Educate & train health professionals and volunteers in innovative interventions to support marginalized senior caregivers
- Create more effective referral pathways to support

Outreach & Engage
- Develop & activate neighbourhood strategy to support outreach, engagement & learning
- Develop public awareness to help communities identify this "invisible" group
- Encourage understanding own needs & recognition of role as caregiver
- Seek & engage marginalized seniors in services and programs

Outcomes

Shorter-term
- Greater understanding & capacity to respond to needs of senior caregivers
- Increased leadership, including culturally diverse leadership to address needs of marginalized seniors/caregivers
- Increased coordination among organizations that serve seniors
- Increased capacity for innovative approaches & program design driven by senior caregiver needs
- Greater awareness and support for senior caregivers
- Stronger voice/ feel hear & valued
- Greater access & participation in services
- More often find & create own systems of support
- Less overwhelmed

Longer-term
- Increased awareness and policy interest in issues and needs of marginalized seniors caregivers
- Fewer barriers to services
- More effective services

Values
Guided by caregiver voices
Test new ideas
Learning & evaluation

- Reduced isolation
- Greater self-sufficiency
- Enhanced mental health & resilience

IMPACT