Preventative activities in public services
– a study of Skolfam

Maria Eriksson (First Author)
Department of Quality Management and Mechanical Engineering
Mid Sweden University (Sweden)
Email: Maria.Eriksson@miun.se
Corresponding Author

Christer Hedlund (Second Author)
Department of Quality Management and Mechanical Engineering
Mid Sweden University (Sweden)
Email: Christer.Hedlund@miun.se

Abstract

The purpose of this paper is to explore how preventative activities in public services are practiced, and to identify factors that enable preventative activities within organizations. The case studied, Skolfam, was chosen since it had been shown to facilitate significant change from previously mainly reactive behavior towards a clearly preventive way of working. Skolfam is a work model, used in many Swedish municipalities, for multidisciplinary teams of social workers, school teachers, psychologists, the child, and the foster-care family, that are all committed to support the schooling of the children. The study identified enabling factors related to management, collaboration, follow-up of the child's school development, and the Skolfam model itself. Furthermore, the study also revealed that persistence is required to gain political support. Additionally, a mindset change was found among stakeholders at a system level that enabled a shift from reaction to prevention. Working towards a common goal, focused on the customer and in multidisciplinary teams were identified as major strengths to that enable prevention. Using an accepted and well documented model that provided structure and focused on the needs of the children in foster care was fundamental. This study contributes findings from a successful preventative public service activity using the Skolfam model.

Keywords
Prevention; process orientation; foster care; customer focus and multidisciplinary teams.

1.   **Introduction**

How do we succeed in ensuring that society's resources are sufficient for all needs when the demand for public services is constantly increasing, for example due to a higher average age or as our society becomes more diversified? In Sweden, as in many other countries, a strategy of preventative measures has been initiated to develop public service providers so that they produce more and higher quality welfare services for citizens, without increasing the cost of these services. One possible approach is to move some of the resources from the daily operational activities and invest them in evidence-based preventive measures, while simultaneously improving the individual's health. Identifying these new approaches that utilize tax money in the most cost-effective way is a challenge, but many well-documented and evidence-based approaches already exist (Nurse et al., 2014). The preventative effort aims at avoiding risks or reducing the effect of unwanted actions. One of the problems of prevention in welfare services is that it is difficult to detect risks, to anticipate needs and to know which prevention measures are useful and effective. If we manage to find these preventive measures, much can be gained for all parties.

Studies exist that analyze which activities have preventive effects, this study will instead focus on system factors that enable or obstruct the introduction and use of preventive measures. The study aims to explore how preventive work is performed in practice and to investigate enabling factors. Furthermore, the study aims to identify what influences the organization to make the necessary changes for the transformation to take place. Finding system-level solutions that prevent accidents from happening is a known and established method for preventing risks and minimizing the consequences when something happens. Using the same thinking when it comes to human well-being and health is not only a way to reduce risks but also enables acting from a humanistic perspective. If this way of thinking and acting can lead to a more cost-effective public service system, everyone is a winner.

The purpose of this paper is to explore how preventative activities in public services are practiced, and to identify factors that enable preventative activities within organizations.

2.   **Theory**

2.1 Municipalities

In Sweden, the municipalities deliver most of the welfare services. Services include childcare, schools, homes for elderly, and public libraries. Sweden is also divided into regions that govern hospitals and cultural activities. Both the municipalities and regions are to be reliable and efficient and not waste public tax money. According to Swedish municipal law, it is up to the municipality to decide on economic guidelines, and these guidelines need to be both efficient and appropriate (KL, 2017:725). Both the regions and municipalities in Sweden are obliged to provide equal healthcare to the entire population (ibid.). Municipalities are required to set goals and operational guidelines and demonstrate the results that are achieved. If they succeed in the delivery of welfare, preventative actions can act as investment in public health and lead to a healthier society and possibly even lower healthcare costs, according to a WHO public health summary report by Nurse et al. (2014).

2.2 Close care

A recent Swedish healthcare reform referred to as *Close care* (Nära vård) aims to better use tax-funded resources by shifting the focus and increasing the responsibility of primary care, thereby relieving the more expensive specialized hospital care (SOU, 2018:39). The reform

involves a new assignment not only for primary care but also for the municipalities' social services. This is a shift towards an expanded mission and creates a larger need for social services. The basic concept behind *Close care* is to provide care as close as possible to the patient and as early as possible. Ideally, the need for care should be prevented as described in the interim report *God och nära vård - En primärvårdsreform* (SOU 2018: 39, page 342). There is great focus on prevention and activities at an early stage (ibid.).

2.3 Healthcare and prevention

Prevention is all about avoiding the occurrence of something unwanted. In terms of healthcare it can involve preventing illness (primary prevention) or preventing a disease from worsening or reoccurring (secondary prevention). There are many reasons to work with preventative healthcare especially when causation has been established, for example regulations regarding alcohol or use of tobacco. All this is described in the WHO report "*The case for investing in public health, A public health summary repor*t" by Nurse et al. (2014.) Even though the report indicates areas where prevention is considered profitable, only 3% of the European healthcare budget is invested in preventative activities (ibid). Regulations that counteract the use of drugs, alcohol and tobacco, reduction of salt consumption, increased physical activity, prevention of domestic violence, vaccination programs, preventative traffic activities, and secure work environment are just some of the examples provided of preventative actions. According to the report, as a rule of thumb every Euro invested in proven preventative activities generates four Euros of health profit (ibid).

2.4 Quality Management

Quality development is all about the systematic development of products, services, and processes focused on the needs of the customer (Bergman & Klefsjö, 2010). Within any system an understanding of who the customer is, and the customer's needs, is vital to provide high quality in an efficient manner. Quality tools and methods have been developed over many years to identify faults and risks and thereby eliminate the cause and work with preventions in the process. In an ideal world production is flawless, but real-world production environments are not flawless. Scholars have identified four steps of maturity of quality management (QM) (Bergman & Klefsjö, 2010) as a way to systematically improve quality in a system. The first step is quality inspection, which appears after production. The second is quality control and consists of control during production to ensure the necessary quality. The third is quality assurance, which means checking the quality of both incoming and outgoing deliveries and adding education of employees before production. The fourth and final step is a combination of all three steps, working with improvements before, during and after delivery using quality tools in a systematic and preventative system called Total Quality Management (TQM) (ibid.). Prevention, from the perspective of QM, can largely be seen as part of the third and fourth steps – preventing poor quality from entering the process in the first place.

2.5 Cost-effective prevention studies

Some of the needs of citizens may be to stay healthy, have free access to education, or to achieve future employment. When working with prevention activities there is a need to know which preventative actions are cost effective and fulfill the needs in question. Longitudinal studies have been carried out to identify these actions. In Denmark a study of the elderly found that physical activity and information regarding disease and intervention contributed to a higher quality of life, a longer life span, and a reduction of costs (Kronborg et al., 2006) compared with a group that did not participate in the preventative project. QM in a societal context needs to start at a system level to address the needs of the societal services concerned. Cost-effective preventative activities were studied by Gyllensvärd (2010) in a municipal district. Issues

relating to traffic safety, fire safety, fall accidents, hip fractures, and sports injuries were examined and it was concluded that preventative actions were cost effective and beneficial in these areas (ibid).

2.6 The Skolfam model

It is known that children in foster care have lower grades than other children and that the numbers of students that are not eligible for high school in Sweden is increasing (Berlin et al., 2011 and Tordön, 2020a). Children in foster care are affected more by mental illness and low or incomplete grades from elementary school (Tordön, et al., 2014, Durbeej & Hellner, 2017; Pirttimaa & Välivaara, 2018 & Tordön, 2020a).

Children in foster care have inferior chances of achieving high results in school. They also have a higher risk of being left outside the labor market, and in ending up with drug abuse and involvement in criminal activity (Tordön 2020a). Weak grades and a low level of education are pointed out as the largest risk factors for the life of children in foster care (Tideman et al., 2013). Completion of school and improvement of grades is an important component for a better life for such children, according to Tordön (2020a) and these risks are cut in half if the children graduate from elementary school. In Sweden a national initiative called Skolfam aims at strengthening the prospects for children in foster care and improving their abilities to finish elementary school and be eligible to apply for high school (Tordön, 2020b). In 2020, 73.8% of foster care children received the right level of grades in comparison with only 55% in 2015 (ibid.) due to the Skolfam model. The model is structured to initiate preventative activities that stimulate social investments (Bernfort & Lundqvist, 2014). Skolfam is funded by a national foundation of governmental financing that supports children exposed to difficult life circumstances (Tordön, 2020b). The work of Skolfam is deemed to be successful and involves collaboration between the school, social services, and the foster care family, all with the common goal to support the children in their schooling. Social workers, school teachers, psychologists, and the foster care family work closely together with an individual plan for every child.

3. **Methodology**

Since the purpose of this paper was to explore how preventative activities in public services are practiced, and to identify factors that enable preventative activities within organizations, a case study was chosen as the research design. The identified case involved a team of leaders and colleagues in a multi-disciplinary team that works with the schooling of children in foster care within a municipality in Sweden, referred to as the Skolfam team. The selection of the case was made in collaboration with the relevant municipality and the criteria for the selection was that the case had successfully implemented a preventative way of working. Another aspect that made the case interesting was that it had recently moved from a project organization into ordinary operations.

Through the case study, data was collected via qualitative interviews, analytical dialogs, studies of official documents, and through literature studies that included reports, articles, and books within the framework of the study. The literature searches mainly focused on preventative measures in municipal activities. The case study was planned and implemented in collaboration between the authors and the local project group; comprised of one department manager from the school administration and one section manager representing the social services office. The case study was conducted in 2020 and 2021.

3.1 Data collection and analysis

Data collection took place through a dialog-based qualitative focus group interview with the Skolfam team and through dialogs and interviews. The interviews were based on questions that were designed from the first phase of the 4D methodology of Appreciative Inquiry (AI) (Bushe, 2011). This first phase in the methodology is called *Discover* and helps the participants start from what can be described as the *best known*, in terms of what is being studied. The best known can be explored and discovered in different ways, for example through dialog, but interviews are often used that are based on the participants' accounts of their own best experience of the studied phenomenon (ibid.). The questions in this study were designed to explore the group's own experiences of the best way of working and collaborating within the Skolfam team. This process starts with what the individuals in the group identified as strengths (referred to as success factors in this paper) when working with prevention supported by the Skolfam model and subsequently lets the participants process and analyze these memories. A picture is thereby formed of the success factors sought in this study, in line with what is described as AI methodology (ibid.). The themes of the common success factors were then analyzed and developed by the participants during the workshop and based on the dialog the team wrote statements describing success factors. The collated success factors were later interpreted and analyzed interactively by the authors and the team in the municipality to find common themes within the success factors.

In this case study, we use theoretical generalization (Teorell & Svensson, 2007) as a step in the thematization of success factors. One example of this theoretical generalization is the transformation of the statement: "Many adults see the child" into the generalized success factor "The child's needs are noticed by several actors". This type of theoretical generalization should be seen as a method tool to be able to describe specific results in a more general manner and should not be interpreted as the result from this case study automatically being generally applicable to everyone who works with preventive work in public service.

4.   **Results and analysis**

4.1 Background to Skolfam, the case studied

In 2015 a project was initiated with the aim of implementing the Skolfam model in the Swedish municipality studied. It was organized as a joint project between two municipal administrations, the school and social services. The project lasted until 2020 and after that Skolfam became permanently embedded within the municipality. Before the project started there was a struggle to get the necessary political support to initiate the program, even though officials from both the school administration and social services agreed that the Skolfam model was a good idea. A Skolfam team consists of special-needs teachers from the school, a psychologist, and a team of social workers from social services. The team works together and meets both the child and the foster care family with which the child lives. Working together, all parties create an individual plan for every child within the Skolfam program with the aim of improving the schooling of the child in elementary school.

Several driving forces were identified behind the shift to working with Skolfam in the municipality. These were: committed employees within the municipality, deep knowledge of the Skolfam model, a collection of facts through reports and other documents regarding benefits of the Skolfam model, and experience from other municipalities, which all were used to initiate the project. There was also a relentless will to maintain the struggle until the project was accepted and could be initiated within the municipality. The political decision-making process

was long, especially since the project was a collaboration between two different administrative units (the school administration and social services) with separate staff, management, regulations, and budgets. There were also problems recruiting and retaining personnel.

During the case study both the managers behind the decision to implement and the employees within the Skolfam team were interviewed. Four themes were identified from the interviews; collaboration, management, follow-up, and the Skolfam model. Listed in the tables of the results are the success factors identified under every theme. The left-hand column shows the factors identified, and in the right-hand column the factors have been theoretically generalized according to Teorell & Svensson, (2007). Every theme is first described in text based on the results of the interviews with the Skolfam team and their managers.

4.2 Theme 1 - Collaboration

There is strong and important co-operation between several municipal officials who are key players. This is identified as a success factor in the realization of the Skolfam model. The key players consist of social workers, staff within the elementary school, personnel from child and adolescent psychiatry, the biological parents, and the foster parents. The school staff varies depending on the needs of the children. There is strong collaboration between different competencies, all of which are needed to support the children and keep the focus on the child. The collaboration is multidisciplinary and cross functional between two separate municipal administrations with the child's best in focus.

The Skolfam team members describe positive collaboration between the child and individual stakeholders. Collaboration between stakeholders was also identified as a success factor, such as between the school and the foster care family. The Skolfam model is supportive and is therefore a success factor due to how it guides the process of defining a plan for the schooling of the foster-care children. The model also encourages different competencies to collaborate in the creation of the plan. It helps to identify the needs of the children and provides a mandate to use different competencies to fulfil those needs. Increased collaboration between the school and social services creates value not only for the primary customer, the child, but also in the form of good relations between the colleagues within the separate administrations, which benefits more children than solely those in the Skolfam program.

Table 1. List of success factors identified from interviews with the Skolfam team, and their theoretical generalization.

Identified success factors	Generalized success factor
Collaboration between different actors (e.g., social services, youth educational support, the school, and the child's biological parents).	Collaboration between different organizational functions.
Cooperation between the school and the foster care family.	Cooperation between the organization and stakeholders.
A work group with a wide range of competencies and a broad understanding of differences.	Collective competencies in a close multidisciplinary collaboration.
Collaboration within the multidisciplinary team of teachers, special support staff, gym teachers, psychologists, speech therapists, and other necessary resources.	Support from a structured model to guide the process.

Multidisciplinary teams lead to a broad understanding of different competencies, increasing the understanding of the needs of the children.	Collaboration within the multidisciplinary team leading to a deeper understanding of the needs of the child.
When you work across administrative boundaries it can lead to an understanding of each other's operations	Collaboration leads to systemic understanding.
Collaboration leading to additional value created, not only for the primary customer (the children) but also other stakeholders.	Value created for more than solely the children. Collaboration leads to good relations.

4.3 Theme 2 - Management

The Skolfam team members do not work full-time within Skolfam, they also have their regular jobs in education within school, or social care of foster-care children. They feel that they are supported by management to be able to clear their calendars, put aside other duties, and work with activities that are needed within the Skolfam program when necessary. This is a supportive enabling factor that helps them prioritize and work with issues that are important to deal with. The support from management enables them to work with duties both within and outside of the Skolfam program. The first identified success factor in Table 2 originates from the colleagues in the Skolfam team. The rest of the identified success factors originate from managers within the Skolfam program.

Table 2. List of success factors identified from interviews with the Skolfam team, and their theoretical generalization.

Identified success factors	Generalized success factor
Help in clearing calendars to prioritize specific matters to support the Skolfam children with urgent needs.	Management supporting the activities, support in prioritization.
Common goal set at a political level to guide school administration and social services administration.	Higher-level common goals
Common ground between the two administrations (school and social services).	A common will to co-operate
Skolfam model was established nationally with strong justifications and vital facts providing grounds for political decisions.	Results with beneficial effects from the national network support political decision-makers.
Positive effects and results from improved schooling of children in foster care as a result of Skolfam.	Results to support political decision-makers.
Structure of Skolfam including roles and a process of collaboration between the school and social services enables them to gain an	A well proven and structured work model.

understanding of the needs of the children.	
Political consensus within the municipality.	Consensus across different political parties.
Working with the model in multidisciplinary administrations.	Normally not a success factor since it can prolong political decisions.

4.4 Theme 3 - Follow-up

Within the theme "Follow-up" the identified success factors mainly focus on the work within the Skolfam team vis-à-vis the foster-care child and the foster-care family with which the child lives. The first identified success factor in Table 3 is that the Skolfam team follows a preventative work plan including several check-points to follow up on the progress of the child in their schooling and life outside of school. The Skolfam model helps the Skolfam team to create this plan and all participants from both the school and social services know what to do, as clarified by the plan. The plan aims to help the child manage schooling and everyday life. In order to follow up on the progress and maintain preventative activities for the child, this plan requires regular check-points rather than the traditional approach of waiting for something to happen and then reacting to it.

Follow-up activities may include a visit to the home environment of the child in the foster-care family. This meeting is described as a success factor and as a very positive meeting with good intentions to make life better for the foster-care child. It involves talking about what can be done to support the child, rather than being a meeting when social workers are called out because something has happened regarding the child that they instantly need to react to. The regular follow-ups within Skolfam create a different tone (more positive) to the conversation with the child and the foster parents and make it easier to talk about what the child can benefit from and make plans for the future together with social workers. This is a preventative activity rather than reacting to what occurs.

The Skolfam model prescribes preventive meetings and regular follow-up meetings with the child in foster care, the foster-care family, and sometimes the biological parents together with the Skolfam team members. The members may be both social workers and school employees. Follow-up makes it easier to identify the needs of the child and to address problems earlier, while they are a minor, and avoid them escalating into larger problems. During the follow-up meetings, activities may address the foster-care family, such as giving them the proper information and education to help the child manage school, and then follow up on the progress within the foster-care family. As an example, an information meeting can be held to talk with foster parents about the importance of education and the improved quality of life the child may gain by finishing elementary school with grades that qualify them for high school. They make a plan together that includes good ways for the family to give the child support based on their individual needs. This may involve providing a box of books and instructions that are suitable for the age and level of reading of the child, for the family to read with the child, or other activities that are considered helpful. Such activities support the child and also increase the foster parents' understanding of what the child needs to manage school.

Every child within Skolfam has their individual plan describing their schooling support needs. This is a success factor.

The work of the Skolfam team involves many adults focusing on the child, including teachers and special-needs teachers from school, the social worker, sometimes a psychologist or others,

along with the foster-care family. This is identified as a success factor, that the child has many grown-ups all wanting to support them in their schooling and in their everyday life, and that they are given attention.

Table 3. List of success factors identified from interviews with the Skolfam team, and their theoretical generalization.

Identified success factors	Generalized success factor
Preventative activities and follow-up part of a school plan. Everyone knows what to do and who is to do it.	A model or process of guidance encouraging follow-up meetings.
Visit the child in their home environment with the foster family.	Rather than wait for a crisis, a preventative meeting is held with the child.
Follow-up of school progress with the child and the foster care family.	Joint perspectives on school targets.
Several adults focus on the child.	The needs of the children are addressed by several parties.
Support from the foster-care family.	The needs of the children are addressed by several parties.
Individual support for the foster-care family within Skolfam such as box with appropriate reading tasks for the child.	Match expectations with the abilities of the child.

4.5 Theme 4 - The Skolfam Model

The Skolfam model is a well-known model in Sweden, applied with successful results by several municipalities across the country and thereby widely documented. Employees from the municipality have received training in the Skolfam model, both to prepare for being team members and as project leaders for implementing Skolfam. Several success factors identified refer to using the model itself and are presented under this theme.

Every child within the Skolfam program has an individual plan for their schooling and progress in life. This was a generalized success factor that was derived from several identified and expressed success factors in the interviews. Since the individual plan is drawn up collaboratively and consists of several follow-ups, the necessary adjustments for each child can be made during the process, which was identified as a success factor. When the plan is initially created, the child participates in the process together with staff from the school, to identify what the child needs to make progress in school. This helps the Skolfam team to really learn about the child's skills and support needs in school. Sometimes the expectations of the child were set too low due to a difficult family situation and at other times the expectations were set too high. Thanks to the Skolfam model, the picture of the child becomes more accurate and specific to the child. This was identified as a success factor. The foster-care family also participates in creating this plan and thus develops an increased understanding of the importance of education and the needs of the child. This was identified as a success factor.

Within Skolfam there was a clear process including structure, management, and how to apply the different activities identified as success factors. This acts as support for the Skolfam team and their stakeholders, who can focus on creating value in the process and becoming more

preventative than reactive. The clear process within Skolfam also makes it easier for staff to rotate when working with the case.

The Skolfam process also changed the way social workers are perceived when working with a case. The proactive dialog is described as open and positive rather than their being viewed as the "bad cop," reacting to something that has happened. This is stated as a success factor.

Table 4. List of success factors identified from interviews with the Skolfam team, and their theoretical generalization.

Identified success factors	Generalized success factor
Necessary adjustments.	Every plan is individual.
A more just and accurate picture of the child.	Identification of the real needs of the children.
Identification of individual needs creates a fair view of both the strengths and weaknesses of the child.	A tool developed for the identification of needs.
The Skolfam process.	The process facilitates a focus on building value.
A clear and structured process with preventative activities.	The process avoids reliance on only one person.
Social services can work proactively, and not only act as a "bad cop".	The process enables proactive work.
The foster-care family develops an increased understanding of the importance of education, and cooperation with the school increases.	The process encourages collaboration.

5.   Conclusions

The purpose of this paper was to explore how preventative activities in public services are practiced, and to identify factors that enable preventative activities within organizations. From the results and from the analysis of the results, this study suggests five enabling factors that appear to be important in implementing and sustaining preventative activities.

Enabling factors
One common theme and our first enabling factor is the evident focus in the Skolfam process model on the needs of the child. This, in conjunction with how the multidisciplinary team is organized around these needs and the clear evidence showing that preventative work with children in foster care works, is truly important. The first enabling factor is thus:

The choice of development activities is based on the child's needs and that these needs are met through collaboration within a multidisciplinary team.

There are indications in the study that in order for two distinct administrations in the municipality to collaborate and step outside the administrations necessary *must-do* activities

and perform optional preventive work that is neither mandatory nor regulated, it is better if the needs can be articulated, not on behalf of the individual but instead as a need at a system level. This makes it easier to argue for and to raise the necessary resources, or to gain access to budgeted resources. Our second enabling factor is thus:

If the assignment and/or needs arise at a system level, it is easier for collaborating units to prioritize and find the needed budget resources.

The Skolfam initiative was never questioned nor subject to any criticism, on the contrary, the project was approved by politicians and senior officials within the municipality. Nevertheless, it took considerable time before project implementation could commence. This is interesting as the study indicates that there were driving forces in favor of the change. However, these driving forces were not strong enough to directly prompt the municipality to make a decision on implementation after the first push and proposals to implement a Skolfam project. Even after the decision to introduce a Skolfam project, the start was delayed due to initial problems with staff recruitment. This shows the need for strategically important development issues to be raised up the municipal agenda, and also the need for individuals with the strength to push for good, necessary, and desired change initiatives. This example also highlights the inertia that may exist in the municipal system when it comes to implementing new ideas and working methods. With this interpretation we conclude enabling factor number three:

Sustained commitment from management and employees is crucial to overcome long decision-making processes in municipal operations.

To be able to argue and convince officials and politicians, nothing beats a proven concept with evidence-based results. Many statements from the respondents support this, and they describe the value of a documented process with activities and roles. Since the Skolfam model consists of a national network of development and training of personnel it brings knowledge and confidence to employees working with the process. Enabling factor number four is therefore:

There is a well-documented, evidence-based, and proven work model to follow, which provides a process, roles, structure, clear delimitation, development possibilities, and a network that supports work, development, and collaboration.

Respondents in the focus-group dialogs stressed the importance of common goals for the joint process in order for the two administrations to continue to support and collaborate within the Skolfam project. This leads to the fifth and last enabling factor:

When two or more organizational entities collaborate in a joint project, common goals enable professionals to collaborate.

In the present study, the respondents are convinced of the usefulness of the effort and that it was important to implement it from both a humanistic and an economic perspective.

6.   Discussion

Introducing preventive work and precautionary measures is a natural part of any organization's development. Decision making and insights in organizations are based on experiences of both failure and success. Organizations find ways to improve how they work to prevent shortcomings. Some prevention improvements stick, some prevention opportunities need to be repeatedly explored. But the pace at which this happens depends on the organization's ability to identify the opportunities for prevention, as well as its ability to implement preventative activities. In both the business sector and in public organizations, good financial management takes precedence, which primarily leads to short-term planning of activities. Acting and thinking long-term and arguing for measures and activities that have an effect over a longer time perspective can be difficult and meet resistance. However, the resistance we saw in the studied implementation of the Skolfam initiative does not indicate that financial restraints limited implementation. Rather, it was other circumstances and the protracted decision-making process that delayed Skolfam.

Today, the Skolfam initiative studied has been successfully converted from a separately funded project, to being fully incorporated in everyday municipal activities. The effects that have been reported from Skolfam, together with the support from the national body, have changed the views of stakeholders, such that the costs associated with Skolfam activities are no longer seen as costs but as ongoing preventive work to ensure the schooling of children placed in foster care. The journey to a successful Skolfam project has been long and the enabling factors that this study has discovered and highlighted are important for other projects and changes that take place or are planned in municipal organizations. In the present study, respondents are convinced about the usefulness of the effort, and that it was important to implement Skolfam from both a humanistic and an economic perspective.

This study can thus support the overall win-win logic that it is possible to save money by investing more in preventive measures at an early stage and thereby reduce the needs and cost in later stages. But the decision, to invest in prevention for any organization is by default not easy and needs support. This study helps decision-makers with the identification of enabling factors.

7.   Future research

This study is a single case study, and the results can be seen as a first attempt to explore enabling factors for the implementation of prevention activities. The results can of course serve as a starting point for other studies into prevention in public services and in other contexts. Here we want to highlight the enabling factors identified in the study. The relative importance of these enabling factors or successful implementation of prevention activities cannot be answered by our study, nor can it state whether any one of them is crucial, this needs to be addressed in future research.

References

Ailawadi K.L. & Keller K.L. (2004). "Understanding retail branding: conceptual insights and research priorities", *Journal of Retailing*, 80(4): 331-342.

Bergman, B. & Klefsjö, B. (2010). *Quality from customer needs to customer satisfaction.* Studentlitteratur AB.

Berlin, M., Vinnerljung, B. & Hjern, A. (2011). School performance in primary school and psychosocial problems in young adulthood among care leavers from long term foster care. *Children and Youth Services Review*, *33*(12), 2489–2497.

Bernfort, L. & Lundqvist, M. (2014). *Är insatsen SkolFam lönsam? Utvärdering av skolFam2 i Norrköpings kommun.* Centrum för utvärdering av medicinsk teknologi, CMT, Linköpings universitet.

Bushe, G. R. (2011). Appreciative inquiry: Theory and critique. *The Routledge companion to organizational change*, 87, 103.

Durbeej, N. & Hellner, C. (2017). Improving school performance among Swedish foster children: A quasi-experimental study exploring outcomes of the Skolfam model. *Children and Youth Services Review*, 82, 466-476.

Gyllensvärd, H. (2010). Cost-effectiveness of injury prevention-a systematic review of municipality based interventions. *Cost effectiveness and resource allocation*, 8(1), 1-7.

Kronborg, C., Vass, M., Lauridsen, J. & Avlund, K. (2006). Cost effectiveness of preventive home visits to the elderly. The European journal of health economics, 7(4), 238-246.

Mantrala M.K., Levy M., Kahn B.E., Fox E.J., Gaidarev P., Dankworth B. & Shah D. (2009). "Why is assortment planning so difficult for retailers? A framework and research agenda". *Journal of Retailing*, 85(1), 71-83.

Nurse, J., Dorey, S., Yao, L., Sigfrid, L., Yfantopolous, P., McDaid, D. & Moreno, J. M. (2014). *The case for investing in public health: A public health summary report for EPHO 8*, downloaded 2021-05-14 https://apps.who.int/iris/bitstream/handle/10665/170471/Case-Investing-Public-Health.pdf?sequence=1&isAllowed=y

Pirttimaa, R. & Välivaara, C. (2018). Educational intervention planning for children in foster care in Finland: A case study. *Education Inquiry*, 9(2), 237–246.

SFS (Statens Författningssamling), 2017. *Kommunallag (2017:725).* Finansdepartementet K: SFS, downloaded 2021-05-14, https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/kommunallag-2017725_sfs-2017-725.

SOU 2018:39, *God och nära vård - En primärvårdsreform*, downloaded 2022-08-28 https://www.regeringen.se/49c941/contentassets/85abf6c8cfdb401ea6fbd3d17a18c98e/god-och-nara-vard--en-primarvardsreform_sou-2018_39.pdf.

SOU 2020:19, *God och nära vård - En reform för ett hållbart hälso- och sjukvårdssystem*, downloaded 2022-06-28, https://www.regeringen.se/495be8/contentassets/320f37078d854712ab89e8185466817b/god-och-nara-vard-en-reform-for-ett-hallbart-halso--och-sjukvardssystem-sou_2020_19_webb.pdf.

Tideman, E., Sallnäs, M., Vinnerljung, B. & Forsman, H. (2013). *Paired reading: ett försök i sju kommuner med lästräning för famljehemsplacerade barn.* Stiftelsen Allmänna barnhuset.

Teorell, J. & Svensson, T. (2007). *Att fråga och att svara: samhällsvetenskaplig metod.* Liber.

Tordön, R., Vinnerljung, B. & Axelsson, U. (2014). Improving foster children's school performance: a replication of the Helsingborg study. *Adoption & Fostering,* 38(1), 37-48.

Tordön, R. (2020a). *Health, Experienced Support and School Performance among Children in Out-of-home care* (Vol. 1739). Linköping University Electronic Press.

Tordön, R. (2020b), Skolfam 2020, *En arbetsmodell som hjälper barn i familjehem att lyckas i skolan*, Stiftelsen Allmänna Barnhuset, downloaded 2022-06-28.

https://wwwallmannabarnh.cdn.triggerfish.cloud/uploads/2020/10/Skolfams-rapport-2020-webb.pdf.