The DSS Data Exchange Protocols

Department of Social Services - August 2014



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# 1. Introduction

## 1.1 Purpose of this document

This document is intended to provide operational guidance to users of the *DSS Data Exchange* *Framework* across the full range of service delivery contexts associated with the Department of Social Services (DSS) in-scope programme activities. The *DSS Data Exchange Protocols* (Exchange Protocols) should be read in conjunction with:

* The *DSS Data Exchange Framework*
* Your funding agreement
* The *User Guide and Task Cards* (for service providers intending to use the free web-based portal) or
* The *DSS Data Exchange Technical Specification* (for service providers wanting to submit their data through system to system transfers or bulk uploads using their own case management tools)

The Exchange Protocols are not intended to prescribe how service providers should run their business or how they should collect data. Rather, they are intended to provide practical information for managers and front-line staff to assist them to integrate the new consolidated data definitions and requirements into existing service and administrative practices.

The Exchange Protocols will be periodically updated to provide more detailed guidance on questions and issues as they arise. All resources associated with the *DSS Data Exchange Framework* are now available on the [DSS website](http://www.dss.gov.au/grants/programme-reporting), with the exception of the *Technical Specifications* which will be released in late September 2014.

## 1.2 The DSS Data Exchange Framework

The *DSS Data Exchange* *Framework* (the Framework)is the new approach to programme performance reporting in grant agreements. DSS will progressively introduce standardised, prioritised, and collaborative reporting processes across grants programmes from 1 July 2014 to 1 July 2015.

Data requirements will be divided into two parts: a small set of mandatory *priority requirements* that all service providers report, and a voluntary extended data set that providers can choose to share with the Department in exchange for relevant and meaningful reports to help inform service delivery, known as the *partnership approach*.

This new approach to reporting will be streamlined, processes automated and there will be a shift in focus of performance measurement from outputs to more meaningful information about service delivery outcomes. Specifically this will mean:

* **Streamlining reporting arrangements**. A standard client level data record (the *priority requirements*) will apply across the broad suite of DSS client-based programmes, replacing aggregate data reports, ‘Smart Forms’ and multiple IT reporting systems. Reporting cycles will be standardised to two six monthly periods, with a 30 day closure period.
* **Free access to a simple case management system**. Providers who do not have their own case management tools can now access a free, simple IT system (the *DSS Data Exchange* web-based portal). This allows for recording client, service and outcomes data that meets all the DSS programme performance data requirements and allows providers to confidentially manage their core client and case information.
* **Bulk uploading and system-to-system transfers**. The *DSS Data Exchange* will also support providers who have compatible case management tools to transfer information directly from their own systems through bulk uploading and system to system transfers.
* **Promoting a partnership approach to reporting and accessing information about client outcomes**. Service providers are invited to participate in a *partnership approach* to share client outcomes data with DSS in exchange for regular and relevant reports. Reports back to service providers will be outcomes focused and include a rich set of information to help inform service delivery using programme performance, client survey and government data. They will be available in an interactive and static format.

Further information about the policy principles underpinning this new approach to programme performance reporting can be found in the *DSS Data Exchange Framework,* available on the [DSS website](http://www.dss.gov.au/grants/programme-reporting).

# 2. Recording client-level data

This section describes the key concepts and terminology associated with collecting and reporting client level data. It is important that managers and front-line staff understand these concepts because they underpin the Framework.

## 2.1 Client level data

Client level data refers to data collected and reported on each individual client rather than as summary (aggregate) data. This approach recognises that the collection of summary data is often cumbersome and duplicative, in most cases requiring client level data to be collected and then aggregated by service providers at the organisational level. Where the collection of client level data is not practical or appropriate, for instance due to an activity involving a large group of people or a whole community, aggregate reporting is accommodated in the Framework (see Section 5.2.3).

The advantages of client level data are:

* The flexibility to analyse and report administrative data in multiple formats for different audiences— without burdening service providers with multiple data requests.
* The improved reliability of the administrative data—because all service providers provide the same raw data records without the need to apply complex counting rules.
* The improved usefulness of the administrative data—because of the possibility of matching
de-identified data records across DSS programme activities.
* The improved capacity for reporting data back to service providers—because the administrative data is held within a common DSS-wide data repository.

Importantly, client level data provided through the *DSS Data Exchange* will be de-identified so that no personal client information is provided to DSS. DSS will never access the names of clients, and will never seek to match a client level data record back to an individual. Instead, the data submitted by service providers will automatically generate a Statistical Linkage Key (SLK) that allows de-identified client data to be linked over time and across programme activities, without ever disclosing the identity of the individual client (see Section 5.2.2).

We will work with you to ensure clear communication and information is available to clients to affirm that only de-identified data is collected and made available as part of this new approach to programme performance reporting. Further information about protecting personal information is provided at Section 4. A fact sheet: *Protecting a Clients’ Personal Information* is also available on the [DSS website](http://www.dss.gov.au/grants/programme-reporting).

## 2.2 Who is a client

When delivering programme activities, the term ‘client’ is used in many different ways potentially covering individuals, families, groups, other organisations and whole communities; as well as cases, participants, audiences and one-off contacts. While this appropriately reflects the diverse strategies used to deliver these services, it creates particular challenges for programme performance reporting.

Under the *DSS Data Exchange* *Framework,* a specific definition of a ‘client’ is introduced to ensure comparable information is reported about the number of clients that received a service within a reporting period. This ensures that we can make ‘apples with apples’ comparisons when we report data about clients both within and across activities.

For the purposes of recording a ‘client record’ in the *DSS Data Exchange*, a client is defined as:

* An individual who receives a service as part of a DSS funded activity that is expected to lead to a measureable individual outcome.

This definition includes a number of components that must be met in order to count a person as a client. Answers about whether these components have been met are programme and context specific, but ultimately involve determining whether the individual in their own right is expected to achieve an outcome that can be linked to a programme-specific objective.

There are many different types of outcomes that can be achieved as part of service delivery. Outcomes are not limited to high level, life changing events. Client outcomes can also be as simple as learning a new skill, receiving a service that is required, or gaining increased knowledge to access other services that are appropriate and available. All of these different types of outcomes are able to be reflected as part of the *DSS Data Exchange Framework*.

## 2.3 Services for individuals

For many case management services, clients are easily identifiable because service recipients have their own case plan with individual goals and outcomes. In these circumstances:

* The client is an individual person; and
* The client has received a service delivered as part of a DSS funded activity within the reporting period; and
* It is feasible and appropriate to record information about the individual service recipient and the service they received; and
* The service is expected to lead to a measureable individual outcome.

## 2.4 Services for children

A child can be recorded as a client in the *DSS Data Exchange* if that child directly received the service delivered and meets the above definition of a client. When children are recorded within the *DSS Data Exchange* it is best practice to seek parental consent from a child’s parent or guardian, except in circumstances where the service provider considers that the child is able to provide informed consent on their own. .

**Practice examples of when to count someone as a client**

| **Activity/service context**  | **Who is the client** |
| --- | --- |
| Providing weekly practical one-to-one assistance to a person with severe mental illness.*(Community Mental Health)* | The individual person is the client—a ‘client record’ is created and separate information is recorded about the services the client receives and the outcomes they achieve. |
| Providing direct case work and one-on-one intensive support to address a person’s financial difficulty.(*Commonwealth Financial Counselling*) | The individual person is the client—a ‘client record’ is created and separate information is recorded about the counselling sessions they attend and the outcomes they achieve. |
| An individual makes contact with the service with a general enquiry or to receive information about the services offered by your organisation.(*Settlement Services*) | The person is not counted as a client within the *DSS Data Exchange*—because they haven’t yet received a service as part of a DSS funded activity.  |
| A person attends a counselling service and brings a support person with them.(*Commonwealth Financial Counselling*) | The person receiving counselling is counted as the client. The support person is not counted as a client as even though they were present during the session, as they did not received a unique outcome relevant to them. Instead, their purpose for attending was exclusively to support the person receiving counselling.  |

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## 2.5 Services for couples, families and households

The *DSS Data Exchange Framework* captures information about individual clients—however there are some funded activities where multiple individuals are assisted as part of the same ‘case’ or ‘family’. If a service is delivered to a related group of individuals such as a couple, family or household, more than one ‘client record’ can be created and grouped together using a case record.

To ensure ‘apples with apples’ comparisons can be made about clients receiving a service within a reporting period, a consistent approach is needed to determine how many client records should be created for a service targeting couples, families and households.

The thresholds question when making this assessment is whether it is relevant to separately record information about the specific services each individual receives and measure the different outcomes achieved for each individual. This would typically be documented in an individual plan or case notes specific to each individual who received the service.

**Practice examples of when to create a client record**

| **Activity/service context** | **Who is the client** |
| --- | --- |
| Assisting a couple at risk of homelessness to manage their finances and household expenses in order to prevent a future accommodation crisis.*(Financial Wellbeing & Capability)* | 2 client records - Both parents participate in budgeting support sessions and each has particular issues that they want help with. Both individuals are recorded as clients and the family case plan recognises their different goals and the outcomes they want from the service. |
| Working with a young person at risk of homelessness and their family to improve family relationships and to support the young person’s re-engagement in education.(*Families & Children – Young People)*  | 2 client records – The young person and the mother of the family are both registered as clients of the service. The service has some contact with the father—but (in this particular instance) not sufficient to record separate services and outcomes.  |
| A couple attend family counselling and their two children are in the room during the counselling session.(*Family Law Counselling*) | Both of the parents are counted as clients as they received a service and will achieve an outcome. The children present are not recorded as no measureable outcome will be achieved for them on this occasion. However if the children subsequently attend a counselling session and participate directly in the session (achieving their own outcomes) they would then be recorded as clients. |

## 2.6 Services for groups

There are some funded activities that involve delivering services to the community or a group within the community. These can include education courses, information sessions and community events. The purpose and delivery of this work differs across activities but can include early intervention and prevention, education, awareness raising and capacity-building. Sessions can range in size from a few people to a few hundred people. There may be ‘identified clients’ (where you create a client record for each individual attending) or ‘unidentified clients’ (where you only record a general attendance figure)—or a mix of both.

Where it is feasible and appropriate to create client records for some (or all) individual participants in a group (such as a regular playgroup) the same ‘counting rules’ apply as to services targeting individuals, couples, families and households. Essentially, creating a client record means the service provider has determined it is relevant to record separate information about the specific services each individual receives and to measure the different outcomes achieved for each individual.

If it is impractical to collect information about individual participants, for example in group community outreach activities, you can simply record the aggregate number of ‘unidentified clients’ (how many people attended). The *DSS Data Exchange* has functionality for recording group work to reflect the total (aggregate) number of people participating. For service providers participating in the *partnership approach*, the outcomes achieved from these group activities can also be recorded through Community SCORE (Section 7.4).

**Practice examples of when to create a community or group record**

| **Activity/service context** | **Who is the client** |
| --- | --- |
| Community mental health promotion for carers and families of people with severe mental illness. *(Community Mental Health – Support for carers)* | 25 individuals participate in information and advisory workshops—recorded as an aggregate count because it is not practical to record individual client details or measure individual client outcomes. |
| Intensive supported playgroup focussed on improving children’s development and supporting the capacity of those in a parenting role. (*Children and Parenting*) | All children and participating parents were registered as individual clients (belonging to the same supported playgroup ‘case’)—recognising that it was relevant to record separate outcomes for each individual.  |

# 3. Linking client data to service delivery information

## 3.1 What is a Service?

In a similar way to defining a client, the *DSS Data Exchange Framework* introduces a specific definition of a service based on key service delivery concepts. These service delivery concepts have been introduced to ensure that an instance of service can be consistently applied across the varying funded activities and service delivery contexts.

This will again help us to do ‘apples with apples’ comparisons to better understand the quantum of what has been achieved. These concepts have been modelled to align with how organisations collect this type of information for their own business purposes.

For the purposes of the *DSS Data Exchange Framework*, a service is defined as:

* One or more individual instances or episodes of assistance (sessions) in a reporting period that are delivered as part of a distinct case.

The concept of a ‘case’ and ‘session’ are integral to the *DSS Data Exchange Framework*—because they help maintain a consistent set of counting rules for services. They form an important part about telling the story of client outcomes, providing an understanding about the different activities clients are accessing, how these services are being delivered and the location they are being delivered from. These concepts are discussed in general below and in further detail at Section 5.3.

## 3.2 What is a Case?

A **case** captures one or more instances or episodes of when a service is received by a client (or grouping of clients) for an in-scope programme activity that is expected to lead to a distinct outcome. A case record is only created once for each unique case you wish to create and can operate over multiple reporting periods.

Depending on the nature of the service, a case could be linked to an individual, a couple, a family, or an unrelated group of individuals such as a monthly playgroup. There is no right or wrong reason to create a case and each service provider is free to create cases in the style that best suits their needs. As a general rule:

* If a client receives services under a number of different funded activities—each of these is treated as a separate case.
* If a client receives the same services from a number of different locations/outlets managed under the same funding agreement—each of these is treated as a separate case.

A case record allows for an understanding of what funded activity is being delivered, the location it is being delivered from and the number and profile of the clients receiving the service. A case record can be reused to record information about a client if they return to receive the same service.

## 3.3 What is a Session?

A **session** is an individual instance or episode of service, stored within a case and ‘related’ to other sessions (when/if they occur) by its inclusion in the same case. A case may contain between one and a potentially unlimited number of sessions.

A session record allows for an understanding of the date (reporting period) the instance of service that occurred, the type of service the participants received (for example counselling or intake/assessment) and which of the clients associated to the case were present on that date.

## 3.4 The counting rules for cases, sessions and clients

A **case** will be counted against the reporting period if at least one session has occurred under the case within a reporting period. If the case was active within a previous reporting period, it will be counted as an existing case. If the case was created in the current reporting period it will be counted as a **new case.**

A **session** will be counted against a reporting period if the date of the session fell within the reporting period and at least one client is attached to the session.

A **client** will be counted against a reporting period if the client was recorded as attending at least **one** session against **any** case and the session date occurred within the reporting period. If a client record has been recorded against a funded activity delivered by a service provider in the previous reporting period and the client attends another session against the same activity in a subsequent reporting period, they will be counted as an **existing client**.

If a client record has not previously been recorded against a funded activity and the client attends a session against that activity for this first time, they will be counted as a **new client**.

# 4. Protecting client’s personal information

The *DSS Data Exchange Framework* has been designed to ensure a client’s personal information is protected through stringent protocols that comply with the requirements of the Commonwealth Privacy Act 1988 and the Australian Privacy Principles.

## 4.1 Service provider obligations

Service providers must obtain informed consent from clients to collect and store personal information that is needed for their own business purposes. This is in line with Commonwealth and State/Territory privacy legislation. This is a standard privacy requirement that is not linked to the *DSS Data Exchange Framework*.

Service providers must not disclose personal information to DSS or any other party without the consent of the client—specifically the names of clients attending the service or personal identifiers. As part of the *DSS Data Exchange Framework*, personal information is not disclosed to DSS as it is de-identified using the AIHW Statistical Linkage Key (SLK) (see Section 5.2.2).

## 4.2 Additional obligations when using the web-based portal

DSS has prepared registration forms which it recommends service providers ask clients to complete when collecting their personal information for registration on the DSS Data Exchange web-based portal. This portal can be used by providers like a free case management system.

Service providers may adopt their own registration forms; however, to enable service providers to enter client data on the DSS Data Exchange web-based portal, service providers must include the DSS standard notification (as below) and obtain the consent of the client to record their personal information on the web-based portal. This is necessary as DSS is hosting the IT system, however DSS staff will never have access to identified information, as described in Section 4.3 below.

The standard notification required by DSS is:

“The information that you provide on this form includes your personal information. Your personal information is protected by law, including the Privacy Act 1988.  Your personal information collected on this form is used primarily for [service provider’s name]’s purposes [insert explanation of service provider’s purpose and reason for collection].

As part of the services provided to you by [service provider’s name], we need to collect some information about you to assist the Australian Government Department of Social Services to conduct performance reporting and research relating to the services that you receive from this organisation. To assist this process, [service provider’s name] will enter your personal information onto the DSS Data Exchange web-based portal which is administered by the Department of Social Services. The Department of Social Services will not use your personal information in an identifiable form when conducting its research and evaluation, except where you have agreed or it is required by law.

You can find more information about the way the Department of Social Services will manage your personal information, including information about accessing and correcting personal information held on the DSS Data Exchange and making privacy complaints at the [DSS website](http://www.dss.gov.au/privacy-policy).  For information about how [service provider’s name] manages your personal information, please contact [contact information of appropriate contact in service provider]”.

In addition to providing this notification to clients, service providers using the web-based portal will need to obtain the consent of their clients for their personal information to be collected and used in the manner outlined in this notification. If a client does not consent to the use of their personal information in this way, the client’s name, date of birth and address must not be entered on the DSS Data Exchange web-based portal in connection with their demographic information. In these circumstances the service providers may enter a pseudonym in connection with the demographic information and birth year.

Under the National Privacy Principles, clients must have the option of not identifying themselves when engaging with an organisation. The DSS Data Exchange Framework allows for the reporting of anonymous clients using a pseudonym if required.

## 4.3 DSS Data Exchange privacy protocols

When reporting client-level records, service providers will enter client details into the *DSS Data Exchange*, either through the web-based portal, bulk uploading of files, or a system-to-system transfer. The *DSS Data Exchange* will automatically de-identify client information using a SLK.[[1]](#footnote-1)

The SLK allows records to be matched on a de-identified basis, while protecting a client’s identity. For instance John Smith (male, born 15 April 1960) will never be identified to DSS staff. He will instead be reflected as MTH0H150419601.

Where a service provider uses the *DSS Data Exchange* web-based portal to collect and store client personal information, only the service provider will access the personal information stored on this DSS-hosted information system. Strict IT security protocols will prevent DSS staff from accessing personal information in this system.

DSS will apply best practice data integration methods that align with the Commonwealth Privacy Act 1988 and the Australian Privacy Principles. This will ensure that regardless of the size of a community or any information at hand, a client will not be re-identified when analysing the data and producing and sharing reports.

## 4.4 Consent arrangements for follow-up client research

In addition to the programme performance data collected by service providers, DSS is interested in commissioning client research (such as surveys) to better understand client needs and opportunities to improve service delivery outcomes. Arrangements for client surveys will also be designed to respect a client’s privacy.

Specifically:

* Service providers will ask clients if they are willing to participate in client research - this question forms part of the mandatory *priority requirements*.
* Any research conducted will be approved by a recognised ethics committee.
* DSS and service providers are committed to clear and simple communication with clients to help them understand the reasons why client research, such as surveys, are important and what it would mean to participate.
* Clients are not obliged to participate in this research.

In the *DSS Data Exchange* the only information that needs to be provided is an indication that the client is willing to participate in client research. The methodology to support the administration of client research is under development. Until established, in order to contact a client at a later date service providers are asked to store client contact details such as phone numbers or email addresses separately to the *DSS Data Exchange*. This information may be used to facilitate contact with the client for an ethics approved research activity in the future.

The specific details about commissioning and administering client research (surveys and evaluations) are likely to vary dependent on the nature of the activity being conducted. Further communication will occur with service providers prior to the commencement of any research activities.

# 5. Collecting the mandatory priority requirements

The mandatory *priority requirements* are restricted to a small set of data items that allow for an understanding of who is accessing programme activities, how often they are attending, where they are attending, what they are attending and what outcomes are being achieved.

The rationale underpinning the selection of the data items in the mandatory *priority requirements* is outlined in the *DSS Data Exchange Framework*. In summary, the *priority requirements* reflect the collection of information about client details (Section 5.1 and 5.2); case and session details (Section 5.3); and client consent to participate in follow-up research (Section 5.4).

This section presents practical information about each of these concepts to support managers and front line staff to consistently and accurately collect the required data. It is not presented as technical information for IT managers to configure their systems (who need to reference the *DSS Data Exchange Technical Specifications*) or as a computer guide for using the *DSS Data Exchange* web-based portal (covered in the *DSS Data Exchange* *User Guide and Task cards*).

## 5.1 Client details

The first part of the mandatory *priority requirements* cover data items to uniquely reflect the client and their key demographic characteristics. This provides an understanding of the pathways of each client over time, remembering that this is achieved on a de-identified basis.

Client records are reported for all individuals who receive a service as part of a funded activity—in line with the definition and counting rules outlined in Section 2 and 3. These records are the basic ‘building blocks’ of the *DSS Data Exchange Framework*—and are used to unambiguously answer standard questions about ‘how much did we do’:

* How many clients were assisted?
* How many clients had previously been assisted?
* How many clients also received assistance under a different funded activity that your organisation delivers?
* How many clients also received assistance from a funded activity delivered by a different service provider?
* How many clients receiving assistance were from vulnerable target population groups (for example age, gender or ethnicity profile)?

Answers to these questions will help tell the broader story about the outcomes being achieved, by providing an understanding of **who** these outcomes are being achieved for and **when**.

Sample responses to client’s frequently asked questions

**Why are you asking me these questions?** We only collect information that we need to better understand who we assist. We and our funding body (DSS) want to understand the profile of clients coming to our service. We use this information to help improve our service and to make sure it is easy to access and delivering good outcomes for the community.

### 5.1.1 Collecting client given and family names

A client record only ever needs to be created once. This would typically occur the first time that the client receives any funded activity from your organisation.

In most instances the details to create a client record will be gathered directly from the client using either a registration form or an intake interview; however organisations are free to gather this information in accordance with their standard practices.

A sample client registration form is available on the DSS website as part of the [*DSS Data Exchange Task Card 2 – Adding a new client*](http://www.dss.gov.au/grants/programme-reporting/support-to-use-the-dss-data-exchange). Service providers are not required to use the sample registration form. Service providers can instead choose to create their own client registration form and add their own branding if preferred.

A client’s Given Name and Family Name are recorded because they form part of the Statistical Linkage Key used to uniquely identify clients without disclosing personal information (see Section 5.2.2). **Given Name** is typically a client’s first name, but it may include one or more middle names. Ideally, the Given Name should be recorded exactly as it is on key identification documents such as a Passport or Driver’s License.

**Family Name** is typically the client’s last name, (also known as a surname) and should be recorded exactly as it is spelt on key identification documents, where possible.

Where clients are known by more than one name, or prefer to be called by a particular name (for example Joe rather than Joseph), the preferred option should be to use the Given and Family Names used on key identification documents.

Where a client does not have identification documentation or chooses not to disclose this documentation, the service provider should record the Given and Family Name that is most commonly used or preferred to be used by the client.

Where a client chooses not to disclosure their ‘real’ name, the service provider should indicate that a pseudonym is being used and record a pseudonym that ideally can be used again if the client returns for other services.

### 5.1.2 Date of birth

A client’s date of birth is recorded for two reasons—it forms part of the SLK (see Section 5.2.2) and provides a direct means of calculating the client’s age.

Data about age is part of the standard demographic profile for clients of many government programmes—and is of particular importance to programmes that target age-specific cohorts.

Where a client doesn’t know their date of birth or chooses not to disclose it, it is acceptable for an estimate of the date of birth to be used. A date of birth estimate flag is used to indicate when this occurs. For example, if a client thinks they are approximately 30 years old (and it is 2014), the date of birth is recorded as 1st January 1984 and the date of birth estimate flag is activated.

### 5.1.3 Gender

A client’s gender is recorded for two reasons—it forms part of the SLK (see Section 5.2.2) and in some circumstances may be used to assess if target groups are accessing services. A client’s gender is recorded based upon how the client self-identifies.

Under standard data collection definitions used by the AIHW, four options are available to record a client’s gender:

* Male
* Female
* Intersex or indeterminate
* Not stated or inadequately described

The ‘Intersex or indeterminate’ response should be used in circumstances where a client does not identify as male or female. If a client chooses not to disclose their gender it is acceptable to record ‘Not stated or inadequately described’.

### 5.1.4 The client’s residential address

Information about where clients live can assist with understanding if services are located in the right area. A client’s residential address can also be linked to other useful information to help understand a client’s circumstance such as the Socio-Economic Indexes for Areas (SEIFA) rankings and the Australian Bureau of Statistics (ABS) community profiles.

When used in conjunction with other data captured in the *DSS Data Exchange Framework,* additional valuable information can be derived. For example, with the collection of outlet address it is possible to estimate how far a client travels to receive a service.

Within the *DSS Data Exchange* web-based portal there will be capacity to record a full residential address for each client shortly. This is expected to be available in December 2014. In the interim, a client’s postcode is required.

The identity of clients providing their full residential address will be protected by converting the data to the ABS standard mesh block code. A mesh block code is recorded in place of the client’s address and de-identifies the record.

In some limited circumstances it may not be appropriate to record the client’s residential details. On these occasions, the outlet address where the funded activity is being delivered from can be recorded instead.

### 5.1.5 Recording a homeless client’s residential address

If a client is homeless (or of no fixed address), the client (or service provider) can determine the most appropriate residential address to reflect in the address field. A flag to indicate the client was homeless will be added to the residential address area of the *DSS Data Exchange* web-based portal in the next release.

### 5.1.6 Indigenous status

A client’s Indigenous status is recorded because it provides an important understanding of whether Indigenous clients are accessing services. Under standard data collection definitions used by the AIHW, five options are available to record a client’s Indigenous status:

* Aboriginal but not Torres Strait Islander origin
* Torres Strait Islander but not Aboriginal origin
* Both Aboriginal and Torres Strait Islander
* Neither Aboriginal nor Torres Strait Islander
* Not stated/inadequately described

Data about Indigenous status is part of the standard demographic profile for clients of many government programmes—and is of particular importance in ensuring Indigenous people and communities have appropriate access to funded services.

Where a client chooses not to disclose their Indigenous status, it is acceptable to record ‘Not stated or inadequately described’.

Sample responses to client’s frequently asked questions

**Why do you want to know if I’m Indigenous?** We collect this information because we want to make sure Aboriginal and Torres Strait Islander people and communities have appropriate access to funded services. While it is up to each person to decide if they want to identify as Indigenous or not, we think it is important because we want to make sure we are offering a good service to Indigenous clients.

### 5.1.7 CALD background

A client’s Culturally and Linguistically Diverse (CALD) background is recorded because it provides an important understanding of whether CALD clients are accessing services. Under standard data collection definitions used by the AIHW, two questions are asked to record a client’s CALD status:

#### Country of birth

* Australia
* Born overseas
* Not stated/inadequately described

#### Main language spoken at home

* English
* A language other than English
* Not stated/inadequately described

The mandatory *priority requirements* reflect basic summary information to determine if a client is from a CALD background. More detailed information about ethnicity is collected as part of the voluntary extended data requirements in the *partnership approach* (see Section 6).

Data about CALD status is part of the standard demographic profile for clients of many government programmes—and is of particular importance to ensure CALD clients and communities have appropriate access to funded services. This information can also be of assistance to service providers, to determine whether the engagement of translating services or bilingual staff may assist in delivering services to their clients.

Where a client chooses not to disclose their CALD status, it is acceptable to record ‘Not stated or inadequately described’.

Sample responses to frequency asked questions

**Why do you want to know if I’m born overseas?** We collect information about whether people were born overseas and what language they speak at home because we want to make sure people from different ethnic backgrounds and communities have appropriate access to funded services. While it is up to each person to decide if they want to say whether they were born overseas, we think it is important because we want to make sure we are offering a good service to all communities.

**Why do you want to know what language I speak at home?** Some people may be more comfortable speaking a language other than English so it is important to know this. It helps us plan for things like language translators and bilingual staff.

### 5.1.8 Disability

Clients are asked to self-identify whether they have a disability or impairment because it is important for service providers and funders to know whether clients with a disability are accessing services.

Under standard data collection definitions used by the AIHW, disability is recorded in groupings that most clearly express the experience of disability by a person. Disability groupings constitute a broad categorisation of disabilities in terms of the underlying health condition, impairment, activity limitations, participation restrictions, environmental factors and support needs:

* **Intellectual/learning** - associated with impairment of intellectual functions which limit a range of daily activities and restrict participation in a range of life areas.
* **Psychiatric** - associated with clinically recognisable symptoms and behaviour patterns frequently associated with distress that may impair personal functioning in normal social activity.
* **Sensory/speech** – including vision disability (blindness, vision impairment); hearing disability (deafness, hearing impairment that cause severe restrictions in communication); deaf-blind (dual sensory impairments causing severe restrictions in communication); speech disability (speech loss, impairment which cause severe restrictions in communication).
* **Physical/diverse** - associated with the presence of an impairment, which may have diverse effects within and among individuals, including effects on physical activities such as mobility. This grouping includes physical disability (paraplegia, quadriplegia, muscular dystrophy, motor neurone disease, neuromuscular disorders, cerebral palsy, absence or deformities of limbs); acquired brain injury; neurological disability (including epilepsy, dementias, multiple sclerosis and Parkinson disease).
* **No disability**.
* **Not stated/inadequately described**.

When recoding data about disability, clients should be allowed to self-identify with more than one disability group (for example physical/diverse and intellectual/learning).

Data about disability status is part of the standard demographic profile for clients of many government programmes—and is of particular importance to ensure people with a disability have appropriate access to funded services.

Where a client chooses not to disclose if they have a disability, it is acceptable to record ‘Not stated or inadequately described’.

## 5.2 Unique client identifiers

As highlighted in Section 4, programme performance data provided by service providers through the *DSS Data Exchange* will be de-identified or encrypted so that no personal client information will be accessed by DSS.

Two client ID data items are included in the mandatory *priority requirements* to help uniquely identify individual clients—without disclosing personal information.

### 5.2.1 Client ID

Each client record in the *DSS Data Exchange* will include a client ID unique to that client. The client ID is simply a technical data item used to organise client records within the *DSS Data Exchange* and does not include any personal information.

For service providers using the *DSS Data Exchange* web-based portal, they will have the option of either entering their own client ID (an ID used internally by the service provider to administratively manage clients) or a system generated client ID that can be automatically created if the field is left blank.

For service providers using their own client management information system and pushing their data across to the *DSS Data Exchange* (through bulk-uploads or system-to-system transfers)the client ID will be pushed across from their own system.

Technical information for IT managers to configure their systems to transmit client IDs will be available in the *DSS Data Exchange Technical Specifications*. This document will be published on the DSS website in late September 2014.

### 5.2.2 Statistical Linkage Key (SLK)

A client’s SLK is not visible to service providers. The SLK is only visible to DSS and is used in place of a client’s name when analysing client level data.

The SLK effectively enables two or more records belonging to the same individual to be brought together. The SLK used in the *DSS Data Exchange* was developed by the AIHW as a unique client identifier. It is used in a way that does not disclose personal information.

Technically, the SLK is a code consisting of the second, third and fifth characters of a person‘s family name, the second and third letters of the person‘s given name, the day, month and year when the person was born and the sex of the person.

For example John Smith, a male born on 14th February 1971 has an SLK of:

* **MIHOH140219711**

For service providers using the *DSS Data Exchange* web-based portal, the SLK will be automatically generated within the system—without staff having to do anything. For service providers using their own client management information system and using bulk-uploads or system-to-system transfers to push data to the *DSS Data Exchange*, the SLK can be automatically generated through a one-off bulk system change. Following this system change, staff will not have to do anything to create the SLK.

Technical information for IT managers about configuring their systems to push the SLK across to the *DSS Data Exchange* will be available in late September 2014, when the *DSS Data Exchange Technical Specifications* are released on the DSS website.

### 5.2.3 Recording aggregate (group) attendance

The *DSS Data Exchange* *Framework* is focused on the collection of de-identified individual client records. This is driven by the desire to understand client pathways across services being delivered as part of funded activities, to better understand the outcomes achieved for clients over time. Service providers are strongly encouraged to create individual client records for as many of their clients as possible.

It is however recognised that in limited situations (such as the delivery of services to large groups) it is not always possible or practical to record each client as an individual record. In these circumstances service providers can still record the number of clients who attended a case using the field “Unidentified client attendance”. In these instances the number of clients who attended a case is recorded as a simple aggregate number. This number is reflected against both the case and session records.

Unidentified client numbers captured at the case level indicate the total number of unique unidentified clients who are anticipated to attend the case over the life of the case. In contrast, the unidentified client attendance numbers captured at the session level allows the recording of how many unidentified participants attended a particular instance of service. This helps to prevent double counting.

It is possible that in some instances there may be a preference to attach a mix of unidentified attendances and individual clients to the same case. For example if delivering a community capacity event a number of regular clients (that are able to be identified) may attend the event as well as a number of unknown new clients. This can be accommodated in the *DSS Data Exchange*. The regular clients can each be attached individually to the case and to the session(s) as separate records, while the other new clients who were also in attendance can be included against the case and sessions as aggregate unidentified client attendances.

## 5.3 Service delivery information

As highlighted in Section 3, the concept of a ‘case’ and ‘session’ are integral to the *DSS Data Exchange* *Framework* because they help maintain a consistent set of counting rules for services and tell the story about the outcomes achieved for clients.

### 5.3.1 Case details

A case record is only created once for each unique case you wish to create and can operate over multiple reporting periods. Each case record consists of a number of data items:

* **Case ID** - that uniquely identifies a particular case in a way that is meaningful to the service provider (for example Monday Playgroup).
* **An activity** –the funded activity that the case is being delivered under.
* **An outlet** – the location the case is primarily being delivered from, as referenced in the funding agreement.
* **A client record** –that links a client to a case (or in limited circumstances an aggregate group client attendance number).

The number of case records you create will be dependent on the type of funded activity(ies) you deliver and the way you deliver these services. For example if delivering to couples or families for counselling it is likely you would want to create a case for each couple/family. This lets you reflect the composition of each couple/family you are providing a service to, and count the number of couples/families you provided a service to.

Likewise if delivering a funded activity such as Communities for Children Facilitating Partners you may wish to create a case for each of the locally run activities you deliver in the community, such as a playgroup, breakfast club, or education course.

For service providers using their own client management information systems, the concept of a ‘case’ should already be well-established and readily applicable to any funded activity. For service providers using the *DSS Data Exchange* web-based portal, the creation of cases is a routine part of entering client records.

### 5.3.2 Session details

A session record is used to indicate that a case was active within a reporting period. It reflects the types of services being delivered under the case and which of the clients associated with the case attended on the date of the session. For service providers using their own client management information systems, the concept of a ‘session’ should already be well-established and readily applicable to any funded activity. For service providers using the *DSS Data Exchange* web-based portal, the creation of sessions is a routine part of entering client records.

Each session record consists of a number of data items:

* **Session ID** - that uniquely identifies a particular instance or episode of service.
* **Session date** – the date the particular instance or episode of service occurred.
* **Service type** – this describes the main focus for the session being delivered. If a session covers multiple service types the most relevant one should be chosen either on the basis of the majority of time spent focusing on the particular service type or the main way an outcome was achieved.
* **Client attendance** – recorded for each client that was present at the session.
* **Unidentified client attendance** – the aggregate number of clients who attended a session can be recorded. This should be limited to large groups where the collection of client level information is not feasible.

When recording a session a range of service types can be chosen to reflect the nature of service delivery. Different service types are associated with different funded activities. Within the *DSS Data Exchange* web-based portal only the relevant service types will be available to choose from. The service types are listed at Attachment 1.

## 5.4 Consent to participate in follow-up research

As highlighted in Section 4.4, the commissioning of client research (such as surveys) forms an important part of the *DSS Data Exchange Framework*, as it helps to better understand client needs and opportunities to improve service delivery outcomes. Arrangements for client surveys will also be designed to respect a client’s privacy.

Specifically:

* Service providers will offer clients the opportunity to participate in client research
* Any research conducted will be approved by a recognised ethics committee

The specific details about commissioning and administering client research will be available in an updated version of this document, following sector consultations and approval of the research by a recognised ethics committee. This will include specific requirements for obtaining informed consent to participate in follow-up research.

# 6. Collecting the partnership approach extended data

The *partnership approach* voluntary extended data set will be available in March 2015. The following is provided as guidance for service providers wishing to prepare to collect this information.

As part of the ‘New Way of Working for Grants’, service providers can choose to report an optional extended data set to the Department in exchange for regular and relevant reports. This is known as the *partnership approach*. The extended data set includes information about a client’s presenting needs and circumstances such as the reason for seeking assistance, referrals (in and out), household composition, income status. Other outcomes focused data is collected using Standard Client / Community Outcomes Reporting (SCORE).

This section presents practical information about the extended data requirements describing a client’s presenting needs and circumstances. Detailed information about collecting and reporting SCORE is presented separately in Section 7.

## 6.1 Client needs and presenting context

Under the *partnership approach*, service providers that volunteer to participate agree to collect and report additional data items about client needs and presenting circumstances where they already collect this data, or where they consider this information to be relevant and are able to collect it.

There are eight additional data items about client needs and presenting circumstances. For many service providers, these data items are already collected to inform internal service planning—but some items (for example migration visa category) may only be relevant for specific funded activities.

## 6.2 Reasons for seeking assistance

Data about the reason a client sought assistance is collected to inform service planning to better respond to presenting need. The categories for describing the reason for seeking assistance are standardised to reflect the SCORE outcome domains that cover the range of funded activities captured as part of the *DSS Data Exchange Framework*. For each client, data is recorded about the main reason for seeking assistance and, if relevant, a secondary reason for seeking assistance.

The categories for describing the reason for seeking assistance cover:

* **Physical health** is selected as the reason for seeking assistance where the client is seeking to change the impact of their physical health on their independence, participation and wellbeing.
* **Mental health, wellbeing and self-care** is selected as the reason for seeking assistance where the client is seeking to change the impact of mental health issues on their self-care, independence, participation and wellbeing.
* **Personal and family safety** is selected as the reason for seeking assistance where the client is seeking to change the impact of personal and family safety issues on their independence, participation and wellbeing.
* **Age-appropriate development** is selected as the reason for seeking assistance where the client is seeking to improve age-appropriate development.
* **Community participation and networks** is selected as the reason for seeking assistance where the client is seeking to change the impact of poor community participation & networks on their independence, participation and wellbeing.
* **Family functioning** is selected as the reason for seeking assistance where the client is seeking to improve family functioning and change its impact on their independence, participation and wellbeing.
* **Managing Money** is selected as the reason for seeking assistance where the client is seeking to change the impact of inefficient money management on their independence, participation and wellbeing.
* **Employment, education and training** is selected as the reason for seeking assistance where the client is seeking to address disengagement from education and /or the labour market.
* **Material wellbeing** is selected as the reason for seeking assistance where the client is focussed on the immediate lack of money and basic items needed for day-to-day living.
* **Housing** is selected as the reason for seeking assistance where the client is seeking to improve their housing stability or address the impact of poor housing on their independence, participation and wellbeing.

Clearly, many clients’ needs are complex, they change over time and the ‘real’ reason for seeking assistance is often not apparent until after a client initially engages with the service provider. While recognising these limitations, data about the reasons for seeking assistance is recorded towards the start of the service to provide a high-level indication of the presenting need—within one of the ten standard outcome domains.

Up to two data items are recorded for reasons for seeking assistance:

* **Primary reason for seeking assistance –** the main reason for seeking assistance, classified as one of ten possible categories.
* **Other reasons for seeking assistance** – the secondary reason for seeking assistance, if relevant select another reason from the ten possible categories.

## 6.3 Referral source

Referral source refers to the person or agency responsible for the referral of a client to a service provider. The source of referral is important in mapping client pathways and access points. It can assist service providers to identify the main avenues their clients come through to reach their services. This information can be used to help target networking and communication strategies to increase client engagement with a particular funded activity if desired.

Based on the data collection definitions used by the AIHW, referral source is classified into three standard categories. This information will be recorded towards the start of the assistance, as the single category that best describes the main or primary referral source.

#### Agency / organisation

* Health agency
* Community services agency
* Educational agency
* Legal agency
* Employment/ job placement agency
* Centrelink / Department of Human Services
* Other agency

#### Non-agency

* Self
* Family
* Friends
* General Medical Practitioner
* Other party

#### Not stated/inadequately described

## 6.4 Referrals to other services

Data is recorded about referrals made to other services because they reflect client needs for assistance outside the scope of the funded activity. Referrals should be recorded at the level of sessions (see Section 5.3.2) – because different referrals can be made as part of any service episode or instance.

Two data items are recorded to reflect referrals to other services:

#### Referral to other service

* Yes internal – made to another service offered within the same organisation
* Yes external – made to a service that is provided by a different organisation

#### Referral purpose

* **Physical health** is selected where the client is referred to assist with the impact of their physical health on their independence, participation and wellbeing.
* **Mental health wellbeing and self-care** is selected where the client is referred to assist with the impact of mental health issues on their self-care, independence, participation and wellbeing.
* **Personal and family safety** is selected where the client is referred to assist with the impact of personal and family safety issues on their independence, participation and wellbeing.
* **Age-appropriate development** is selected where the client is referred to assist with improving age-appropriate development.
* **Community participation and networks** is selected where the client is referred to assist with the impact of poor community participation & networks on their independence, participation and wellbeing.
* **Family functioning** is selected where the client is referred to improve family functioning and change its impact on their independence, participation and wellbeing.
* **Managing Money** is selected where the client is referred to assist with the impact of inefficient money management on their independence, participation and wellbeing.
* **Employment, education and training** is selected where the client is referred to address disengagement from education and /or the labour market.
* **Material wellbeing** is selected where the client is referred to assist with their immediate lack of money and basic items needed for day-to-day living.
* **Housing** is selected where the client is referred to improve their housing stability or address the impact of poor housing on their independence, participation and wellbeing.

## 6.5 Household composition

Data is reported about household composition as it provides important information about a client’s presenting context. Adapted from the data collection definitions used by AIHW, household composition is classified into standard categories:

* Single (person living alone)
* Sole parent with dependant(s)
* Couple
* Couple with dependant(s)
* Group (related adults)
* Group (unrelated adults)
* Not stated or inadequately described

## 6.6 Main source of income

Data is reported about main source of income as it providers important information about a client’s presenting context. Based on the data collection definitions used by the AIHW, main source of income is classified into standard categories:

* No income
* Paid employment income or business income
* Private savings (savings, investments, superannuation)
* Income from family and friends
* Income support
* Not stated or inadequately described

## 6.7 Approximate weekly gross income

Data is reported about approximate income as it provides important information about a client’s presenting context. Data is recorded as a numerical value for the estimated dollar value of the client’s weekly gross income (earnings before tax). This should be based solely on what is reported by the client. No evidence of income is required.

Within the *DSS Data Exchange* web-based portal an estimated income can be provided as either a weekly, fortnightly, monthly or annual figure. The *DSS Data Exchange* web-based portal will then automatically convert the figure to a weekly amount.

## 6.8 Expanded CALD indicators.

Additional data is reported about CALD background as this information provides important context about clients’ circumstances. This includes:

**Main language spoken at home** – provides additional information about clients who speak a language other than English, identifying which language each client speaks. The categories reflect ABS Australia Classification of Languages (ASCL) 2011**.**

* **Country of Birth** – provides additional information about clients who were born overseas, identifying whichcountry a client was born in. The categories reflect ABS Standard Classification of Country (SACC) 2011.
* **Date of first arrival in Australia -** is available to record the date a client first arrived in Australia where appropriate for a funded activity. While primarily included as an eligibility indicator for Settlement Services Grants Programme, it can also be used as a potential indicator of disadvantage for other programme activities.
* **Migration visa category** – is available to recordthe Visa category the client arrived on, where appropriate for a funded activity. While primarily included as an eligibility indicator for the Settlement Services Grants Programme, it can also be used as a potential indicator of disadvantage for other programme activities.

## 6.9 Programme-specific data items

The *DSS Data Exchange Framework* establishes streamlined and standardised programme performance reporting to inform priority information requirements. A small number of funded activities require a few additional discrete questions to be included as part of the data ask. The following items will only appear and apply to the relevant **Family Law Service Activity** when it is selected at the case creation process:

* **Parenting agreement reached**–this item is captured at the case level. It supports the measurement of an important programme specific outcome, reflecting if a parenting agreement was reached between parties. The response options are Full agreement, Partial agreement, No agreement.
* **Fees charged** –this item iscaptured at the session level. It allows service providers to report whether the participants of the session were charged a fee to attend the service and reflects the programme activities policy regarding fee collection. This item is captured as a dollar figure.

The following items will only appear and apply to the relevant **Financial Wellbeing and Capability Activity** when it is selected at the case creation process:

* **Money management workshop delivered** – this item is captured at the session level. The field contains the nine workshop types able to be delivered under this programme activity and allows service providers to show that clients have undertaken the required training.

# 7. Recording client and community SCOREs

The main focus of the extended data set (the *partnership approach*) relates to reporting information about client and community outcomes achieved for individuals accessing particular funded activities.

Client and community outcomes can be achieved in a variety of different ways and progressively over different periods of time. They range from immediate short term outcomes to longer term changes that positively affect a client’s life circumstances.

Service providers use a diverse range of instruments and methods for measuring and assessing client and community outcomes—often linked to organisational and sector-specific priorities. In some programme areas, specific validated instruments are already used by a number of service providers (for example Outcomes Star). In other programme areas, significant work is planned to develop new validated instruments that can be used to rigorously measure client and community outcomes.

While there is a strong rationale for more standardised instruments to improve the rigor in measuring client and community outcomes, this needs to be done in ways that do not impose additional administrative costs on service providers—recognising that service providers are not funded to be specialist researchers or to spend disproportionate amounts of time measuring outcomes.

The Standard Client/Community Outcomes Reporting (SCORE) approach used in the extended data set allows service providers to continue to measure outcomes using a range of self-selected service specific tools and methods—but to report the outcomes in a consistent and comparable manner.

There are four different types (components) of outcomes measured through SCORE to help tell the story of what has been achieved—three for individual clients (their circumstances, goals and satisfaction) and one for a group/community.

1. Changes in client circumstances in relevant outcome domains
2. Progress in achieving client goals set within relevant goal domains
3. Client satisfaction with the contribution of the service to meeting their needs
4. Changes in group, organisation, community capacity to address identified needs

SCORE is reported using a simple five-point rating scale. This provides a consistent and comparable way to translate outcomes into a quantified measure. It is intended that SCORE is recorded towards the beginning and end of a case within a funded activity, to best assess change pre- and post- service delivery. However, client satisfaction with the contribution of the service is only recorded once, towards the end of a case.

Service providers are encouraged to collect SCORE in the way that bests suits their own unique service delivery context. This may be through either a service provider practitioner assessment, a client self-assessment, or a joint assessment. Reporting SCORE data only applies to organisations that choose to opt-in to provide the extended data set as part of the *partnership approach*.

## 7.1 Collecting and reporting client circumstances SCOREs

Service providers who volunteer to participate in the *partnership approach* agree to report client circumstances SCORE for the majority of their clients—with at least one SCORE reported towards the beginning of the case within a funded activity and another SCORE reported towards the end of a case within a funded activity.

While it would be valuable to have pre- and post- SCOREs for all clients, as well as progress SCOREs at review points in between, it is recognised that there are a range of situations where it is not feasible to collect the ‘ideal’ outcomes data. Despite best endeavours, there will be some occasions where pre- and post- outcome SCOREs may not be able to be recorded for each client that receives a service. The following example illustrates when the collection of pre- and post- client circumstances SCORES may not be able to be collected during a reporting period.

| **Client**  | **Towards start of Activity** | **Progress throughout Activity** | **Towards end of Activity** | **Client Circumstances SCORE** | **Possible context** |
| --- | --- | --- | --- | --- | --- |
| 1 | ✓ |  |  | No | Ongoing client. Post SCORE to be collected in the next reporting period. |
| 2 | ✓ |  |  | No | Client unexpectedly exited service.  |

### 7.1.1 Circumstance outcome domains

The Client Circumstances SCORE is linked to ten outcome domains where changes are sought for clients of a funded activity (see below).

The type of outcome domain that will be relevant to each client will depend on the context of the funded activity being delivered. With this in mind, service providers only have to report against the domain that they think is most relevant. Service providers have the option of also reporting on one or more additional domains if they consider these to be important.

Given that there are potential connections between all of the outcome domains across programme activities, there are no fixed rules for selecting the most relevant outcome domain for a particular client or funded activity.

* **Physical health** is selected as a principal outcome domain where the funded activity is seeking to change the impact of a client’s physical health to improve their independence, participation and wellbeing.
* **Mental health and wellbeing** is selected as a principal outcome domain where the funded activity is seeking to change the impact of mental health issues on client’s self-care, to improve their independence, participation and wellbeing.
* **Personal and family safety** is selected as a principal outcome domain where the funded activity is seeking to change the impact of personal and family safety issues to improve the client’s independence, participation and wellbeing.
* **Age-appropriate development** is selected as a principal outcome domain where the funded activity is seeking to improve children’s age-appropriate development to improve the client’s independence participation and wellbeing.
* **Community participation and networks** is selected as a principal outcome domain where the funded activity is seeking to change the impact of poor community participation & networks to improve a client’s independence, participation and wellbeing.
* **Family functioning** is selected as a principal outcome domain where the funded activity is seeking to improve family functioning and change its impact so it enhances the family’s independence, participation and wellbeing.
* **Managing Money** is selected as a principal outcome domain where the funded activity is seeking to change the impact of poor money management to improve the client’s independence, participation and wellbeing.
* **Employment, education and training** is selected as a principal outcome domain where the funded activity is seeking to address a client’s disengagement from education and /or the labour market to improve the client’s independence, participation and wellbeing.
* **Material wellbeing** is selected as a principal outcome domain where the funded activity is focussed on the immediate lack of money and basic items needed for day-to-day living to improve the client’s independence, participation and wellbeing.
* **Housing** is selected as a principal outcome domain where the funded activity is seeking to improve the client’s housing stability or address the impact of poor housing to improve the client’s independence, participation and wellbeing.

### 7.1.2 Circumstance rating scale

A five-point rating scale is used to report changes in client outcomes when using SCORE. This scale is used for all four SCORE components (Client Circumstances, Goals, Satisfaction and Community SCORE). For each of the outcome domains:

* **Rating = 1** is used to report that the client’s current circumstances are having a significant **negative impact** on their independence, participation and wellbeing—for example, a significant negative impact of poor family functioning on the family’s wellbeing; or a significant negative impact of a lack of safe housing on an individual’s independence.
* **Rating = 2** is used to report that the client’s current circumstances are having a **moderate negative impact** on their independence, participation and wellbeing—for example, a moderate negative impact of physical health issues on their independence; or a moderate negative impact of family safety on the family’s wellbeing.
* **Rating = 3** is used to report that the client’s current circumstances are in a ‘**middle ground’** between the significant/moderate negative impacts (indicated by Ratings 1 and 2) and the adequate circumstances over the short and medium term (indicated by Ratings 4 and 5)—for example progress towards improving a client’s community participation without having reached a point where the client’s current circumstances are adequate over the short or medium term.
* **Rating = 4** is used to report that the client’s current circumstances are **adequate over the short term** to support their independence, participation and wellbeing—for example, adequate access to money to meet basic needs in the short-term; adequate family functioning to support the family’s wellbeing in the short-term.
* **Rating = 5** is used to report that the client’s current circumstances are **adequate and stable over the medium term** to support their independence, participation and wellbeing—for example, adequate and stable money management to support an individual’s independence; adequate and stable family functioning to support the family’s wellbeing.

In order to record a client SCORE, service providers will need to record a SCORE rating (of 1 – 5) against a relevant domain, reflect the date this assessment was undertaken, and link this to the case of the client.

**Client Circumstances SCORE Table**

| **SCORE outcome domain** | **1:****No progress in achieving outcome** | **2:** | **3:** | **4:** | **5:****Outcome fully achieved**  |
| --- | --- | --- | --- | --- | --- |
| Physical health | Significant negative impact of poor physical health on independence, participation and wellbeing | Moderate negative impact of poor physical health on independence, participation and wellbeing | Progress towards improving physical health to support independence, participation and wellbeing | Sustained initial improvements in physical health to support independence, participation and wellbeing | Adequate ongoing physical health to support independence, participation and wellbeing |
| Mental health, wellbeing and self-care | Significant negative impact of poor mental health, wellbeing and self-care on independence, participation and wellbeing | Moderate negative impact of poor mental health, wellbeing and self-care on independence, participation and wellbeing | Progress towards improving mental health, wellbeing and self-care to support independence, participation and wellbeing | Adequate short-term mental health, wellbeing and self-care to support independence, participation and wellbeing | Adequate ongoing mental health, wellbeing and self-care to support independence, participation and wellbeing |
| Personal and family safety | Significant negative impact of poor personal and family safety on independence, participation and wellbeing | Moderate negative impact of poor personal and family safety on independence, participation and wellbeing | Progress towards improving personal and family safety to support independence, participation and wellbeing | Adequate short-term personal and family safety to support independence, participation and wellbeing | Adequate ongoing personal and family safety to support independence, participation and wellbeing |
| Age-appropriate development  | Significant negative impact of poor age-appropriate development on independence, participation and wellbeing | Moderate negative impact of poor age-appropriate development on independence, participation and wellbeing | Progress towards improving age-appropriate development to support independence, participation and wellbeing | Adequate short-term age-appropriate development to support independence, participation and wellbeing | Adequate ongoing age-appropriate development to support independence, participation and wellbeing |
| Community participation & networks | Significant negative impact of poor community participation & networks on independence, participation and wellbeing | Moderate negative impact of poor community participation & networks on independence, participation and wellbeing | Progress towards improving community participation & networks to support independence, participation and wellbeing | Adequate short-term community participation & networks to support independence, participation and wellbeing | Adequate ongoing community participation & networks to support independence, participation and wellbeing |
| Family functioning | Significant negative impact of poor family functioning on independence, participation and wellbeing | Moderate negative impact of poor family functioning on independence, participation and wellbeing | Progress towards improving family functioning to support independence, participation and wellbeing | Adequate short-term family functioning to support independence, participation and wellbeing | Adequate ongoing family functioning to support independence, participation and wellbeing |
| Managing money | Significant negative impact of poor money management on independence, participation and wellbeing | Moderate negative impact of poor money management on independence, participation and wellbeing | Progress towards improving money management to support independence, participation and wellbeing | Adequate short-term money management to support independence, participation and wellbeing | Adequate ongoing money management to support independence, participation and wellbeing |
| Employment, education & training | Significant disengagement from education / labour market | Moderate disengagement from education / labour market | Actively engaged in looking for work / training | Appropriate short-term engagement in employment, education, training | Appropriate long-term engagement in employment, education, training |
| Material well-being  | Significant negative impact of lack of basic material resources on independence, participation and wellbeing | Moderate negative impact of lack of basic material resources on independence, participation and wellbeing | Progress towards stability in meeting basic material needs to support independence, participation and wellbeing | Adequate short-term basic material resources to support independence, participation and wellbeing | Adequate ongoing basic material resources to support independence, participation and wellbeing |
| Housing | Significant negative impact of poor housing on independence, participation and wellbeinge.g. ‘rough sleeping’ | Moderate negative impact of poor housing on independence, participation and wellbeinge.g. living in severe overcrowding; or at significant risk of tenancy failure | Progress towards housing stability to support independence, participation and wellbeing e.g. supported transitional housing | Adequate short-term housing stability to support independence, participation and wellbeing e.g. supported transitional housing | Adequate ongoing housing stability to support independence, participation and wellbeinge.g. stable private rental or social housing |

### 7.1.3 Measurement and reporting of client circumstances SCOREs

The SCORE approach allows service providers to continue to measure outcomes using a range of self-selected programme-specific tools and methods—but to report the outcomes in a consistent and comparable manner.

If a service provider does not currently have a standard or systematic approach to measuring outcomes, it is possible to use table above as a simple interim outcomes measurement tool. Alternatively, organisations may prefer to adapt the SCORE scales and domains to create their own interim outcomes measurement tool that can be adjusted to the audience the organisation is providing services to.

If a service provider already uses an existing outcomes measurement tool that meets their needs, they can continue to use it and simply translate the outcome data to the SCORE rating scale. For example, if a service provider is using Outcomes Star that measures changes in client circumstance on a ten-point scale, they can create a ‘concurrence’ table to report these outcomes as part of the *DSS Data Exchange*.

**Example Concurrence Table**

| **Service Providers Outcomes Measurement Tool****(For example Outcomes Star - OS)** | **Client Circumstances Score** |
| --- | --- |
| Family well-being OS rating = 1Family well-being OS rating = 2 | Family functioning SCORE = 1 |
| Family well-being OS rating = 3Family well-being OS rating = 4 | Family functioning SCORE = 2 |
| Family well-being OS rating = 5Family well-being OS rating = 6 | Family functioning SCORE = 3 |
| Family well-being OS rating = 7Family well-being OS rating = 8 | Family functioning SCORE = 4 |
| Family well-being OS rating = 9Family well-being OS rating = 10 | Family functioning SCORE = 5 |

## 7.2 Collecting and reporting client goal SCOREs

Service providers who volunteer to participate in the *partnership approach* agree to report client goal SCORE for the majority of their clients—with at least one SCORE reported towards the beginning of a case within a funded activity and another SCORE reported towards the end of a case within a funded activity. In some instances, such as the delivery of short term services, SCORE may be reported twice on the same day, or within a short period of time.

A client goal SCORE is a measure of the extent of achievement of a client’s individual goal. The term ‘goal’ is used very broadly. In some service contexts, goals refer to planned objectives that are documented in the client’s case plan. In other cases, goals are better described as simply the things that clients want help with. In both scenarios, the client goal SCORE is used to measure the extent of goal attainment or the extent to which the service provider been has able to address the things that the client sought help with.

While it would be valuable to have pre- and post- SCOREs for all clients, as well as progress SCOREs at review points in between, it is recognised that there are a range of situations where it is not feasible to collect the ‘ideal’ outcomes data. Despite best endeavours, there will be some occasion where pre- and post- outcome SCOREs may not be able to be recorded for each client that receives a service. The following example illustrates when the collection of pre- and post- client goal SCOREs may not be able to be collected during a reporting period.

| **Client** | **Towards start of funded Activity** | **Progress throughout funded Activity** | **Towards end of funded Activity** | **Client goal SCORE** | **Possible context** |
| --- | --- | --- | --- | --- | --- |
|  | ✓ |  |  | No | Ongoing client. Post SCORE to be collected in the next reporting period. |
|  | ✓ |  |  | No | Client unexpectedly exited service. |

### 7.2.1 Client goal domains

Rather than trying to record the achievement of individual client goals that will vary widely from client to client and service to service, the Client Goal SCORE reports achievement in one or more of six goal domains where changes are sought for clients of a funded activity (see below). For any client, the goal domain that will be relevant will depend on the context of the funded activity and the client’s needs. With this in mind, service providers only have to report against the goal domain that they think is most relevant. Service providers have the option of also reporting on one or more additional goal domains if they consider these to be important.

Given that there are potential connections between all of the goal domains, there are no fixed rules for selecting the most relevant goal domain for a particular client or funded activity.

* **Changed knowledge and access to information** is selected as the goal domain where the funded activity is seeking to change a client’s knowledge and understanding of issues to improve their independence, participation and wellbeing or to improve their access to relevant information about these issues.
* **Changed skills** is selected as the goal domain where the funded activity is seeking to enhance a client’s skills set to improve their independence, participation and wellbeing.
* **Changed behaviours** is selected as the goal domain where the funded activity is seeking to change a client’s behaviours to improve their independence, participation and wellbeing.
* **Changed confidence to make own decisions** is selected as the goal domain where the funded activity is seeking to enhance a client’s confidence to make their own decisions and take actions on issues that impact on their independence, participation and wellbeing.
* **Changed engagement with relevant support services** is selected as the goal domain where the funded activity is seeking to improve a client’s engagement with support services needed to support their independence, participation and wellbeing.
* **Changed impact of immediate crisis** is selected as the goal domain where the funded activity is seeking to address or reduce the impact of an immediate crisis to improve the client’s independence participation and wellbeing.

### 7.2.2 Client goal rating scale

The rating scale for reporting a Client Goal SCORE uses the same five-point rating scale that applies to all SCOREs. Within each of the outcome domains:

* **Rating = 1** is used to report that the client has made **no progress** in achieving their individual goals within the selected goal domain.
* **Rating = 2** is used to report that the client has made **limited progress** in achieving their individual goals within the selected goal domain but there is **emerging engagement** in addressing the issues they sought assistance with.
* **Rating = 3** is used to report that the client has made **limited progress** in achieving their individual goals within the selected goal domain but there is **strong engagement** in addressing the issues they sought assistance with.
* **Rating = 4** is used to report that the client has made **moderate progress** in achieving their individual goals within the selected goal domain.
* **Rating = 5** is used to report that the client has **fully achieved** their individuals goals within the selected outcomes domain.

In order to record a Client Goal SCORE, service providers will need to record a SCORE rating (of 1 – 5) against a relevant domain, reflect the date this assessment was undertaken, and link this to the case of the client. A summary of the ‘generic’ scale for the Client Goal SCORE in each goal domain is presented in the table below.

**Client Goal SCORE Table**

| **SCORE goal domain** | **1:****No progress in achieving goals** | **2:** | **3:** | **4:** | **5:****Goals fully achieved** |
| --- | --- | --- | --- | --- | --- |
| Changed knowledge and access to information | No progress in increasing awareness and knowledge in areas relevant to clients’ needs and circumstance  | Limited progress to date in achieving knowledge goals—but emerging engagement | Limited progress to date in achieving knowledge goals—but strong engagement | Moderate progress to date in achieving knowledge goals | Full achievement of goals related to increasing awareness and knowledge in areas relevant to client’s needs and circumstance |
| Changed skills | No progress in increasing skills in areas relevant to clients’ needs and circumstance  | Limited progress to date in achieving skills goals—but emerging engagement | Limited progress to date in achieving skills goals—but strong engagement | Moderate progress to date in achieving skills goals | Full achievement of goals related to increasing skills in areas relevant to client’s needs and circumstance |
| Changed behaviours  | No progress in changing behaviours in areas relevant to client’s needs and circumstance  | Limited progress to date in achieving behaviour goals—but emerging engagement | Limited progress to date in achieving behaviour goals—but strong engagement | Moderate progress to date in achieving behaviour goals | Full achievement of goals related to changing behaviours in areas relevant to client’s needs circumstance |
| Changed confidence to make own decisions | No progress in increasing confidence in making decisions that impact client’s needs and circumstance  | Limited progress to date in achieving confidence goals—but emerging engagement | Limited progress to date in achieving confidence goals—but strong engagement | Moderate progress to date in confidence achieving goals | Full achievement of goals related to increasing confidence in making decisions that impact client’s needs and circumstance |
| Changed engagement with relevant support services | No progress in increasing engagement with support services relevant to client’s needs and circumstance  | Limited progress to date in achieving engagement goals—but emerging engagement | Limited progress to date in achieving engagement goals—but strong engagement | Moderate progress to date in engagement achieving goals | Full achievement of goals related to increasing engagement with support services relevant to client’s needs and circumstance |
| Changed impact of immediate crisis | No progress in reducing the negative impact of the immediate crisis  | Limited progress to date in achieving goals to reduce the negative impact—but emerging engagement | Limited progress to date in achieving goals to reduce the negative impact—but strong engagement | Moderate progress to date in achieving goals to reduce the negative impact  | Full achievement of goals related to reducing the negative impact of the immediate crisis |

### 7.2.3 Service provider measurement and reporting of client goal SCOREs

The SCORE approach allows service providers to continue to measure goal attainment using a range of self-selected service-specific tools and methods—but to report the outcomes in a consistent and comparable manner.

If a service provider does not currently have a standard or systematic approach to measuring the achievement of client goals, it is possible to use table above as a simple interim client goal SCORE measurement tool. Alternatively, service providers may prefer to adapt the SCORE scales and domains to create their own interim outcomes measurement tool that can be adjusted to the audience the organisation is providing services to.

If a service provider already uses an existing outcomes measurement tool that meets their needs, they can continue to use it and simply translate the outcome data to the SCORE rating scale. For example, if a service provider is using Outcomes Star that measures changes in client goals on a ten-point scale, they can create a ‘concurrence’ table to report these outcomes as part of the *DSS Data Exchange*.

**Example Concurrence Table**

| **Service Providers Outcomes Measurement Tool****(For example Outcomes Star - OS)** | **Client Circumstances Score** |
| --- | --- |
| Parenting skills OS rating = 1Parenting skills OS rating = 2 | Change Skills SCORE = 1 |
| Parenting skills OS rating = 3Parenting skills OS rating = 4 | Change Skills SCORE = 2 |
| Parenting skills OS rating = 5Parenting skills OS rating = 6 | Change Skills SCORE = 3 |
| Parenting skills OS rating = 7Parenting skills OS rating = 8 | Change Skills SCORE = 4 |
| Parenting skills OS rating = 9Parenting skills OS rating = 10 | Change Skills SCORE = 5 |

## 7.3 Collecting client satisfaction SCOREs

Service providers who volunteer to participate in the partnership approach agree to report client satisfaction SCORE for a small sample of their clients, once towards the end of a case.

While it would be valuable to have client satisfaction SCOREs for all clients, it is recognised that this may be time consuming for some service providers to collect and there are a range of situations where it may not be feasible to collect this information. As a minimum, the *partnership approach* involves reporting client feedback SCORES for a random sample of around 10 per cent of clients over a six month reporting period—selected over any time during the reporting period.

The Client Satisfaction SCORE relates to three key questions about a client’s perceptions of the responsiveness and value of the service received:

* The service listened to me and understood my issues
* I am satisfied with the services I have received
* I am better able to deal with issues that I sought help with.

The rating scale for reporting a Client Satisfaction SCORE uses the same five-point rating scale that applies to all SCOREs. For each of the satisfaction questions:

* **Rating = 1** is used to report that the client **disagrees** with the statement about the service (for example, disagrees that the service listened to them and understood their issues).
* **Rating = 2** is used to report that the client **tends to disagree** with the statement about the service (for example, tends to disagree that the service listened to them and understood their issues).
* **Rating = 3** is used to report that the client **neither agrees or disagrees** with the statement about the service (for example, neither agrees nor disagrees that the service listened to them and understood their issues).
* **Rating = 4** is used to report that the client **tends to agree** with the statement about the service (for example, tends to agree that the service listened to them and understood their issues).
* **Rating = 5** is used to report that the client **agrees** with the statement about the service (for example, agrees that the service listened to them and understood their issues).

In order to record a Client Satisfaction SCORE, service providers will need to record a SCORE rating (of 1 – 5) against a relevant domain, reflect the date this assessment was undertaken, and link this to the case of the client. A summary of the ‘generic’ scale for the Client Satisfaction SCORE in is presented in the table below.

**Client Satisfaction SCORE Table**

| **SCORE client satisfaction domain** | **1:****Disagree** | **2:****Tend to disagree** | **3:****Neither agree or disagree** | **4:****Tend to agree** | **5:****Agree** |
| --- | --- | --- | --- | --- | --- |
| The service listened to me and understood my issues |  |  |  |  |  |
| I am satisfied with the services I have received  |  |  |  |  |  |
| I am better able to deal with issues that I sought help with |  |  |  |  |  |

### 7.3.1 Service provider measurement and reporting of client satisfaction SCOREs

The SCORE approach allows service providers to continue to measure client satisfaction using a range of self-selected survey tools and methods—but to report the outcomes in a consistent and comparable manner.

If a service provider does not currently have a standard or systematic approach to measure client satisfaction, it is possible to use the satisfaction SCORE survey in the table above as a simple survey tool as an interim measure. Alternatively, service providers may prefer to adapt the SCORE scales and domains to create their own interim measurement tool that can be adjusted to the audience the organisation is providing services to.

### 7.3.2 Protocols for the ethical and reliable collection of client feedback about satisfaction

Given that client satisfaction SCOREs are intended to be collected as part of good practice service delivery, each service provider is responsible for ensuring that the data collection process is ethical and reliable. Key practices to consider when collecting client feedback are outlined below.

#### Data collection methods

It is important that client satisfaction feedback is voluntary and that it does not cause discomfort or anxiety for clients. In particular, the pre-existing relationship between clients and you as the service provider may lead to clients feeling that they have to participate and/or be less likely to provide negative feedback.

A number of measures can be taken to ensure that clients understand the nature of participating and their options:

* It is important that all participants are provided with information that makes it clear that completing the survey is voluntary.
* Participants should be provided with information that makes it clear that the purpose of collecting the client feedback is to improve services.
* Tell clients that you want their honest views and to make constructive suggestions if they think the service could be improved.

#### Consent procedures

Consent for recording client feedback should be obtained as part of the standard consent arrangements for collecting client’s personal information (see Section 4). While all clients have a right to participate in providing client feedback, specific conditions may affect some participants’ capacity to consent. In some circumstances it may be appropriate to consider additional practices.

For example:

* Consent from the participant may be witnessed (but is not mandatory) by family members or another key support person.
* Refusal or reluctance to participate in the survey should always be respected, and a person declining to participate in, or deciding to withdraw from, the client feedback process should not incur any negative consequences or disadvantages.
* Parental consent may be required for children and minors (however this may be context specific and may therefore not apply in all circumstances – see Section 2.4).

#### Client confidentiality

It is important that clients can provide feedback without service providers knowing what they said. There are a range of ways to achieve this. For example:

* Having the client feedback collected by a person not directly involved in service delivery.
* Using an e-survey so that clients can complete and submit the survey without showing the service provider their response.
* If paper-based forms are used, consider using sealed envelopes for returning completed surveys.

## 7.4 Collecting community SCOREs

Service providers who volunteer to participate in the *partnership approach* agree to report community SCORE for the majority of group or community activities where it is not feasible to record the changes for individual members of the group or community. At least one community SCORE is reported towards the beginning of the group / community case within a funded activity and another SCORE reported towards the end of a group / community case within a funded activity.

### 7.4.1 Community SCORE domains

The Community SCORE is linked to three domains that reflect changes that may occur for a group or a community rather than individual clients:

* Changed knowledge, skills and behaviours for a group of clients or community members participating in the service (where it is not feasible to record the changes for individual members of the group or community).
* Changed knowledge, skills and practices within organisations that the service provider works with.
* Changed community structures and networks to better respond to the needs of targeted clients and communities.

### 7.4.2 Community SCORE rating scale

The rating scale for reporting a Community SCORE uses the same five-point rating scale that applies to all SCOREs. Within each of the community domains:

* **Rating = 1** is used to report that there has been **no change** in the group / organisation / community capacity to address or respond to their own needs or the needs of targeted clients and communities.
* **Rating = 2** is used to report that there has been **limited change** in the group / organisation / community capacity to address or respond to their own needs or the needs of targeted clients and communities—but there is **emerging engagement** in addressing the issues.
* **Rating = 3** is used to report that there has been **limited change** in the group / organisation / community capacity to address or respond to their own needs or the needs of targeted clients and communities—but there is **strong engagement** in addressing the issues.
* **Rating = 4** is used to report that there has been **moderate change** in the group / organisation / community capacity to address or respond to their own needs or the needs of targeted clients and communities.
* **Rating = 5** used to report that there has been **significant change** in the group / organisation / community capacity to address or respond to their own needs or the needs of targeted clients and communities.

A summary of the ‘generic’ scale for the Community SCORE in each goal domain is presented in the table below.

**Community SCORE Table**

| **SCORE community domain** | **1:****No change** | **2:** | **3:** | **4:** | **5:****Significant change** |
| --- | --- | --- | --- | --- | --- |
| Group / community knowledge, skills, behaviours to better address their own needs  | No change in knowledge, skills, behaviours to better address their own needs | Limited change in knowledge, skills, behaviours —but emerging engagement | Limited change in knowledge, skills, behaviours —but strong engagement | Moderate change in knowledge, skills, behaviours | Significant positive change in knowledge, skills, behaviours to better address their own needs |
| Organisation’s knowledge, skills and practices to better respond to the needs of targeted clients / communities | No change in knowledge, skills, practices to respond to the needs of targeted clients / communities | Limited change in knowledge, skills, practices —but emerging engagement | Limited change in knowledge, skills, practices —but strong engagement | Moderate change in knowledge, skills, practices | Significant positive change in knowledge, skills, behaviours to better respond to the needs of targeted clients / communities |
| Community structures and networks to respond to the needs of targeted clients / communities | No change in community structures / networks to respond to the needs of targeted clients / communities | Limited change in community structures / networks —but emerging engagement of community networks | Limited change in community structures / networks —but strong engagement of community networks | Moderate change in community structures / networks | Significant positive change in community structures / networks to better respond to the needs of targeted clients / communities |

### 7.4.3 Service provider measurement and reporting of community SCORES

The SCORE approach allows service providers to continue to measure community outcomes using a range of self-selected sector-specific tools and methods—but to report the outcomes in a consistent and comparable manner.

If a service provider does not currently have a standard or systematic approach to measuring the achievement of community outcomes, it is possible to use the table above as a simple interim community outcome measurement tool. Alternatively, service providers may prefer to adapt the SCORE scales and domains to create their own interim outcomes measurement tool that can be adjusted to the audience the organisation is providing services to.

If a service provider already uses an existing community outcomes measurement tool that meets their needs, they can continue to use it and simply translate the data to the SCORE rating scale.

# 8. Administrative matters

## 8.1 Programme activities in-scope for the Framework

As part of the new way of working for grants, from 1 July 2014 programme performance reporting in all new funding agreements will transition to the *DSS Data Exchange Framework*. Service providers will be required to use the *DSS Data Exchange* (the web-based portal, system to system transfers or bulk uploads through a compatible third party application) by 1 July 2015.

The following DSS funded programme activities are in-scope to transition to the *DSS Data Exchange Framework*, unless otherwise specified in the funding agreement (item E and F).

* Families and Children
* Financial Well-being and Capability
* Settlement Services
* Community Mental Health Services

A number of other programme activities may become eligible to use the *DSS Data Exchange* over time. If required, additional activities in-scope for the *DSS Data Exchange* will be reflected in updated versions of this document. A full list of data items collected as part of the new Framework is at Attachment 2.

## 8.2 Reporting frequency

As part of the new way of working for grants, two standardised six monthly programme performance reporting periods have been introduced. Service providers will then have an additional 30 days to finalise and submit data.

* Reporting period 1 runs from 1 July – 31 December (and is closed 30 days later on 30 January).
* Reporting period two runs from 1 January to 30 June (and is closed 30 days later on 30 July).

Service providers can choose to enter data any time within a reporting period. Once a reporting period has closed (30 January and 30 July) this data will not be able to be submitted to the Department, excepted under exceptional circumstances following consultation with Grant Agreement Managers.

## 8.3 Flexible ways to transmit data

Service providers funded to deliver programme activities that are in-scope for the *DSS Data Exchange* must provide their data to DSS through an approved mechanism. The *DSS Data Exchange Framework* allows for three different ways that service providers can transmit their data into the *DSS Data Exchange*.

#### Free Web Based Portal

Service providers may use the *DSS Data Exchange* web based portal to submit their data. This system can be used like a free case management system. This option may be most relevant to service providers who do not have their own propriety software to collect client level data, or if their existing system cannot accommodate the requirements to submit data through either system to system transfers or bulk upload.

This application collects the data requirements set out in this document and is available to service providers funded to deliver an in-scope programme activity. The *priority requirements* of the *DSS Data Exchange* *Framework* are now available to be captured through the *DSS Data Exchange* web-based portal. The extended data set in the *partnership approach* will be available in March 2015.

For service providers choosing to use the free *DSS Data Exchange* web-based portal, access is gained via an AUSkey account. AUSkey is a secure login that identifies you when you use participating government online services on behalf of a business.  All government agencies are required to implement AUSkey for all new business to government transactions. AUSkey is administered by the Australian Business Register.

Prior to requesting a *DSS Data Exchange* user account your organisation must be registered with AUSkey and individual account holders must be issued an AUSkey certificate. If your organisation is not already registered for AUSkey, further information about how to register is available on the [Australian Business Register website](https://abr.gov.au/AUSkey/).

Once your organisation is registered for AUSkey, each individual user within your organisation will need to complete the [DSS Data Exchange User Access Request Form](http://www.dss.gov.au/grants/programme-reporting/dss-data-exchange-user-access-request-form) and email the form to dssdataexchange.helpdesk@dss.gov.au.The [DSS Data Exchange User Access Request Form](http://www.dss.gov.au/grants/programme-reporting/dss-data-exchange-user-access-request-form) is available on the DSS website. Further guidance about accessing the *DSS Data Exchange* web-based portal is available in [*Task Card 1 – How to access the DSS Data Exchange System*](http://www.dss.gov.au/grants/programme-reporting/support-to-use-the-dss-data-exchange/dss-data-exchange-task-card-1-how-to-access-the-dss-data-exchange)on the DSS website.

#### System to System Transfers

Service providers with their own client management systems capable of pushing data via web services through to DSS can continue using their own case management tools to collect and transfer the data. In order for this to occur, service providers will need to make a one-off adjustment to their application in accordance with the *DSS Data Exchange Technical Specifications. The Technical Specifications* will be available on the DSS website in late September 2014.

#### Bulk XML Upload

Service providers with their own client management systems capable of creating and exporting XML files can continue using their own case management tools to collect and transfer the data. In order for this to occur, service providers will need to make a one-off adjustment to their application in accordance with the *DSS Data Exchange Technical Specifications.*

## 8.4 DSS Data Exchange user responsibilities

Every user of the *DSS Data Exchange* is bound by the *Privacy Act* and must ensure they meet these requirements at all times. *DSS Data Exchange* users must ensure they only access records they have a genuine need to access.

*DSS Data Exchange* users must use their best endeavours to ensure the data entered into the *DSS Data Exchange* is accurate and to their best knowledge up to date.

Information captured in the *DSS Data Exchange* must only be used for the purpose it was captured for and not provided to other parties in Australia or elsewhere in the world for any other purpose.

Service providers must notify DSS as soon as practical if they become aware of any security or privacy breaches.

## 8.5 For more assistance

#### Task Cards

Users of the *DSS Data Exchange* web-based portal can access self-guided training material via the [DSS website](http://www.dss.gov.au/grants/programme-reporting/support-to-use-the-dss-data-exchange). A set of task cards are now available. Each of the task cards takes users step by step through the processes required to create and manage records in the *DSS Data Exchange* web- based portal.

* [Task Card 1 - How to access the DSS Data Exchange](http://www.dss.gov.au/grants/programme-reporting/support-to-use-the-dss-data-exchange/dss-data-exchange-task-card-1-how-to-access-the-dss-data-exchange)
* [Task Card 2 – Adding a new client](http://www.dss.gov.au/grants/programme-reporting/support-to-use-the-dss-data-exchange/dss-data-exchange-task-card-2-adding-a-new-client)
* Task Card 3 – Adding a new case and sessions
* Task Card 4 – Finding viewing and editing existing clients
* Task Card 5 – Finding viewing and editing existing cases

#### The DSS Data Exchange Help Desk

A helpdesk has been set up to provide assistance to users of the *DSS Data Exchange* web-based portal.

You can contact the *DSS Data Exchange* Help Desk by:

Email: [dssdataexchange.helpdesk@dss.gov.au](http://dssdataexchange.helpdesk@dss.gov.au) or phone: 1800 020 283 (select option 5).

# Attachment 1: Standard service types

| **Service Type** | **Definition**  |
| --- | --- |
| Intake/assessment  | Intake/assessment is used where the session’s primary focus was the initial process of meeting with the client during which the organisation gathers information on the client’s needs and matches them to services available within or outside the organisations programme offer and/or assesses a clients’ eligibility for participation in a particular service. This is usually (but not limited to) the first session a client attends.  |
| Information/advice/referral  | Information/advice/referral is used where the session’s primary focus was the provision of standard advice/guidance or information in relation to a specific topic or where the service offered was primarily a referral to another service provided within or external to the organisation. Please note for Commonwealth Financial Counselling, "advice" does not refer to financial or legal advice . |
| Education and Skills training | Education and skills training is used where the primary focus of the session was to assist a client in learning or building knowledge about a topic or aimed at developing a skill, or enhancing a skill relevant to the client’s circumstance. For Community Development Financial Institutions (CDFIs) and Saver Plus this includes financial literacy training or money mentoring. |
| Child/Youth focussed groups | Child/youth focussed groups should be used where the session delivered was primarily targeted at children or youth, and delivered in a group/rather than individual basis.  Examples include playgroups, breakfast clubs and other similar services. |
| Counselling | Counselling should be used where a session is primarily aimed at working through a particular issue such as relationship concerns or financial concerns, is delivered by an industry recognised qualified staff member and is targeted to an individual or family. |
| Dispute Resolution | Dispute resolution should be used where the session is primarily focused on the resolution of a dispute between two parties. Dispute resolution is the legal name under the Family law act for services such as mediation and conciliation that help people affected by relationship issues sort out their disputes with each other including the split of financial, or non-financial assets, or custody of children. |
| Supervised change-over/contact | Supervised change-over/contact should be used where the primary focus of session is the facilitation of a safe environment for parents in conflict to exchange custodianship of their children, or the facilitation of a safe environment for parents in conflict to access their children with a neutral mediator overseeing the contact. |
| Advocacy/Support | Advocacy/support should be used where the primary focus of the session was advocating on a clients’ behalf to an entity such as a government body, or where support to the client was given in a particular circumstance, such as a court appearance. For Commonwealth Financial Counselling this category includes negotiation with, or on behalf of, the client (eg. with creditors). For Emergency Relief, this category includes intensive support (as defined in FWC Programme Information). |
| Records search | Records search should be used where a sessions primary focus was on the searching for, or provision of a client’s historic records such as birth certificates, adoption records or other historical context  |
| Community Capacity building | Community capacity building should be used where a sessions primary focus was the development of a community’s skills/cohesion or understanding of a topic or subject.  Community capacity activities are delivered to a group of people rather than an individual. |
| Outreach | Outreach should be used where a session is delivered in a locality away from the outlet recorded against the case such as an alternative site, park, home or other non-standard location. |
| Mentoring/Peer Support | Mental health peer support/mentoring is the provision of specialised support, information and role-modelling from someone who identifies with having a lived experience of a disability or mental health condition. This includes carers of a person with a disability or mental health condition. |
| Family Capacity Building | Family capacity building should be used where the session is focused on any support actions that help the family manage their lives effectively such as: relationship building, conflict resolutions and communications, home based support including assistance with developing family centred activities, establishing routines & practical help with tasks. |
| Access to money (loans) | This category should be used where the session’s focus was primarily on providing financially vulnerable people with access to safe and affordable financial products including no interest loans, low interest loans or other appropriate loans, and matched savings that are not available through mainstream providers of financial services.   |
| Food Parcels & Food Vouchers | This category should be used where the main focus of the session was the provision of material aid such as food items, food vouchers and supermarket vouchers. |
| Material Goods | This category should be used where the main focus of the session was the provision of non-food material aid, for example clothing, bedding and household items. |
| Health care assistance | This category should be used where the main focus of the session was the provision of health-related assistance, for example chemist vouchers or part payment of medical bills. |
| Transport assistance | This category should be used where the main focus of the session was assistance with transport-related costs, for example bus passes or petrol vouchers. |
| Utility bills assistance  | This category should be used where the main focus of the session was payment assistance with bills, for example gas, electricity or phone. |
| Rent/Mortgage assistance | This category should be used where the main focus of the session was payment assistance with rent or mortgage costs. |

# Attachment 2: List of data values

**Client record –mandatory priority requirements**

* Given name. Free text
* Family name. Free text
* Date of birth. Date format dd/mm/yyyy
* Estimated date of birth indicator. For DSS Data Exchange portal this field will Tick box
* Pseudonym used indicator. For DSS Data Exchange portal this field will Tick box
* Gender
	+ Male
	+ Female
	+ Intersex/indeterminate
	+ Not stated or inadequately described
* Residential address
	+ Residential address line. Suburb, State, Post code (4 digits) (mandatory)
	+ Homelessness flag
* Indigenous status
	+ Aboriginal but not Torres Strait Islander origin
	+ Torres Strait Islander but not Aboriginal origin
	+ Neither Aboriginal or Torres Strait Islander
	+ Not stated/inadequately described
	+ Both Aboriginal and Torres Strait Islander
* CALD (Country of Birth)
	+ Australia
	+ Born overseas
	+ Not stated/inadequately described
* CALD (Main language spoken at home)
	+ English
	+ A Language other than English
	+ Not stated/inadequately described
* Disability indicator
	+ Intellectual/learning
	+ Psychiatric
	+ Sensory/speech
	+ Physical/diverse
	+ No disability
	+ Not stated/inadequately described
* Client ID. Free text or if left blank a system generated number will be assigned when using the web-based portal.
* Statistical Linkages Key (SLK). A system generated code using the AIHW Key 58 algorithm.
* Programme activity specific (Family Law only)
	+ Fees charged. Appears, where applicable when a case is created. Number field (whole dollars only).
	+ Was a parenting agreement reached? Appears, where applicable when a case is created. The values are (full, partial, none).
* Programme activity specific (Financial Wellbeing and Capability only)
	+ Which Money management course was delivered? This question only appears if an applicable activity is selected when the case was created. Applicable values are:

Workshop 1 - Community Education Making Money Last Until Payday

Workshop 2 - Community Education Planning For the Future

Workshop 3 - Community Education How Can Banks Help

Workshop 4 - Community Education Internet and Phone Banking

Workshop 5 - Community Education Credit Can Be A Hazard

Workshop 6 - Community Education Money Loans Sharks and Traps

Workshop 7 - Community Education A Roof Overhead - Home Ownership

Workshop 8 - Community Education A Roof Overhead Tenancy

Workshop 9 - Community Education Managing Paperwork

Other workshop

**Linking client and service data**

**Case record details**

* Case ID. Free text. If left blank a system generated number will be generated
* Outlet. For the DSS Data Exchange web-based portal this field will automatically display via a drop down the names of all outlet locations provided to DSS. A geo-code-able physical address of the outlet location is required (but is not displayed).for each outlet location (address line, state, suburb and postcode).
* Activity. •For DSS Data Exchange portal this field will automatically display via a drop down the names of all DSS programme activities your organisation is funded to deliver under a current DSS contract schedule
* Client record •Ability to associate one or more client IDs to the case

**Session record data set**

* Session ID. Free text. If left blank a system generated number will be generated.
* Session date. Date field: dd/mm/yyyy
* Client attendance. Record for each client present at the session.
* Unidentified clients attending this session (optional). Number field. The default value is 0.

**Service type:** The number and type of service types available will vary dependant on the programme activity selected. The full list of values available is:

| * Intake/assessment
* Information/advice/referral
* Education and Skills training
* Child/Youth focussed groups
* Counselling
* Dispute Resolution
* Supervised change-over/contact
* Advocacy/Support
* Records search
* Community Capacity building
 | * Family Capacity Building
* Access to money (loans)
* Food Parcels & Food Vouchers
* Material Goods
* Health care assistance
* Transport assistance
* Utility bills assistance
* Rent/Mortgage assistance
* Outreach
* Mentoring/Peer Support
 |
| --- | --- |

**The voluntary extended data set – the partnership approach**

* Reason for seeking assistance:

| * + Physical health
	+ Mental health, wellbeing and self-care
	+ Personal and family safety
	+ Age-appropriate development
	+ Community participation and networks
 | * + Family functioning
	+ Managing money
	+ Employment, education and training
	+ Material well-being
	+ Housing
 |
| --- | --- |

* Referral source (recorded through a case record):

| * + Health agency
	+ Community services agency
	+ Education agency
	+ Legal agency
	+ Employment/job placement agency
	+ Centrelink/Department of Human Services
 | * + Other Agency
	+ Self
	+ Family
	+ Friends
	+ General Medical Practitioner
	+ Other party
	+ Not stated inadequately described
 |
| --- | --- |

* Referral type (recorded through a session record)
	+ Internal – made to another service offered within the same organisation
	+ External – made to a service that is provided by a different organisation
* Referral purpose (recorded through a session record)

| * + Physical health
	+ Mental health, wellbeing & self-care
	+ Personal and family safety
	+ Age-appropriate development
	+ Community participation & networks
 | * + Managing money
	+ Family functioning
	+ Employment, education and training
	+ Material well-being
	+ Housing
 |
| --- | --- |

* Household composition

| * + Single (person living alone)
	+ Sole parent with dependant(s)
	+ Couple
	+ Couple with dependant(s)
 | * + Group (related adults)
	+ Group (unrelated adults)
	+ Not stated or inadequately described
 |
| --- | --- |

* Main source of income

| * + No income
	+ Paid employment income or business income
	+ Private savings (savings, investments, superannuation)
 | * + Income from family and friends
	+ Income support
	+ Not stated or inadequately described
 |
| --- | --- |

* Approximate weekly gross income
	+ Number field (whole dollars only)
* Expanded CALD (Main language at home)
	+ All languages outlined in the ABS classification of languages (ASCL) 2011
* Expanded CALD (Country of birth)
	+ All categories reflected in the ABS Standard Classification of Country (SACC 2011).
* Expanded CALD (Migration visa category)
	+ Humanitarian; Family; Skilled; Other
* Expanded CALD (Date of first arrival is Australia)
	+ Date field: dd/mm/yyyy

**Standard Client/Community Outcome Reporting (SCORE)**

Circumstance, Goals, Satisfaction and Community SCOREs are each captured through a session record (associated with a case) linked to a client (or grouping of clients). A pre- and post- score (likert-scale rating) is recorded against standard outcome domains to reflect change applicable to any programme activity.

* SCORE date of assessment
	+ This is a date field: dd/mm/yyyy derived from the session date
	+ SCORE values. The scale value to reflect change is numerical and ranges from 1 (low) to 5 (high).
* Client Circumstance SCORE domains:
	+ Physical health
	+ Mental health, wellbeing and self-care
	+ Personal and family safety
	+ Age-appropriate development
	+ Community participation and networks
	+ Family functioning
	+ Managing money
	+ Employment, education and training
	+ Material well-being
	+ Housing
* Client Goal SCORE domains
	+ Changed knowledge and access to information
	+ Changed skills
	+ Changed behaviours
	+ Changed confidence to make own decisions
	+ Changed engagement with relevant support services
	+ Amelioration of the impact of the immediate crisis
* Client Satisfaction SCORE domains
	+ I am satisfied with the services I have received
	+ The service listened to me and understood my issues
	+ I am better able to deal with issues that I sought help with.
* Community SCORE domains
	+ Community structures and networks to respond to the needs of targeted clients / communities
	+ Organisation’s knowledge, skills and practices to better respond to the needs of targeted clients / communities
	+ Group / community knowledge, skills, behaviours to better address their own needs
1. The DSS Data Exchange uses the Australian Institute of Health and Welfare Statistical Linkage Key 58. [↑](#footnote-ref-1)