Family Support Program

Performance Framework Service Provider Help Guide

December 2011

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1 Background

1.1 Objectives

This help guide is designed to assist service providers to collect the client outcome information required under the Family Support Program (FSP) Performance Framework.

Client information, including demographic and client outcomes, constitutes a key component of the FSP national data collection. The purpose of the data collection is to collect and report reliable, nationally consistent information about the delivery of FSP services.

This document should be used in conjunction with other FSP documentation provided on the FaHCSIA website. It is important for service providers using this document to be familiar with the FSP Guidelines, the FSP Approval Requirements, the FSP Performance Framework and the Funding Agreement.

Note: Client outcome data will be incorporated into regular reporting requirements.

1.2 FaHCSIA Standard Performance Framework

The Standard Performance Framework aims to provide a consistent, logical and streamlined basis for monitoring and reporting FaHCSIA's performance in achieving Australian Government outcomes. Specifically, the Standard Performance Framework aims to ensure:

- there is a clear line-of-sight between monitoring and reporting the performance of individual funded activities, overall program performance and the contribution of these programs to the achievement of FaHCSIA outcomes;
- valid and comparable indicators are used to measure performance; and
- business efficiencies are achieved.

The Standard Performance Framework is focused on high-level reporting to communicate our achievements against explicit performance requirements or expectations.

The FSP Performance Framework mirrors the FaHCSIA Standard Performance Framework and aims to monitor and report the FSP's performance in achieving the program outcomes.

1.3 Development of the FSP Performance Framework

The FSP Performance Framework was designed using the FaHCSIA Standard Performance Framework.

Edition 1 of the FSP Performance Framework was developed as part of the implementation of the FSP reforms and became effective from 1 July 2011. The FSP Performance Framework is an outcomes-based approach to program reporting.

FaHCSIA developed the FSP Performance Framework in partnership with some services within the Family Support Program. Consultation and collaboration with Children and Parenting (C&P) services began in 2009, following the announcement of the FSP. The new FSP framework was built on the Family Relationships Services (FRS) Performance Framework, and has been adapted to be appropriate across the whole FSP.

All FRS were invited to participate in pilot testing of outcome data collection methods in 2010. Separate pilot testing involving selected C&P services was undertaken in 2011. FRS providers were supported by consultants to collect data on longer term client outcomes in 2010-11. These results have fed into the Performance Framework and the further development of collection methods.

As a result of the consultation and testing processes the following changes were made to the draft FSP Performance Framework and collection methods:

- inclusion of a community capacity measure as an intermediate outcome performance indicator;
- increased flexibility around measurement of immediate and intermediate outcomes (more detail in this help guide);
- development of a list of questions that can be used to measure each performance indicator (see Attachment A); and
- inclusion of partner surveys to measure the capacity of services to work together to provide better client outcomes.

For Family and Relationship Services (FaRS), Family Law Services (FLS) and Specialist Services, there are two additional changes to data collection for the FSP Performance Framework:

- the Annual Service Report will be used to submit immediate and intermediate client outcome data to FaHCSIA; and
- the FRSP Online client feedback form will no longer be used.

1.4 FSP Performance Framework Edition 1

The FSP Performance Framework is available on the FaHCSIA website. As mentioned above, Edition 1 incorporates service provider feedback from consultations and pilot testing activities on data collection methods.

To assist service providers report data for relevant FSP Performance Framework performance indicators, this help guide contains practical information, a list of questions that can be used to measure each performance indicator (Attachment A) and data collection methods (Attachment B). FaHCSIA Activity Managers will also support service providers to collect data for the new FSP Performance Framework.

Reporting against the FSP Performance Framework is a requirement under Section B.3 of the Funding Agreement Schedule and in Section 4 of the FSP Program Guidelines.

Purpose of the FSP Performance Framework

The FSP Performance Framework is one key way to demonstrate the effectiveness of the whole FSP. The FSP Performance Framework aims to:

- ensure services are clearly focussed on achieving positive outcomes for clients;
- provide a logical and consistent approach for measuring outcomes across the program; and
- link the performance reporting of specific activities to the overall program performance including the achievement of FSP outcomes.

Outcomes-based approach of the FSP Performance Framework

The FSP Performance Framework is outcomes based, meaning that it details how the FSP operates and achieves its outcomes.

The FSP Performance Framework is divided into four sections.

- Intermediate outcomes: Client and community outcomes expected from the FSP in the medium term (3-6 months after service).
- Immediate outcomes: Client outcomes expected as a result of the FSP in the short term (at the time of service). These in turn contribute to the intermediate outcomes.
- Service delivery quality: How well the service is being delivered in order to achieve the immediate outcomes (for example, to the satisfaction of clients), in collaboration with other agencies.
- Service outputs: Outputs/deliverables of the FSP services that contribute to achieving immediate outcomes (for example, number of clients, number of service sites).

In the past service reporting has largely focussed on measuring outputs and service quality, with some outcomes for clients reported through narratives or stories.

Inclusion of intermediate and immediate outcomes in the FSP Performance Framework enables measurement of how much is being done, how well it is being done and the impact service activities are having for clients.

Flexibility of the FSP Performance Framework

As reporting for the FSP Performance Framework will be required for all FSP services, some flexibility has been built into its design.

- All services will have the flexibility to choose the two intermediate (green) performance indicators most appropriate to their service.
- Flexibility has also been built into the questions used to collect information against the FSP Performance Framework. A list of questions service providers can ask clients for each performance indicator is provided at Attachment A. The list will assist service providers to select questions most appropriate to their service.
- Service providers have flexibility to select the most appropriate period in which to collect immediate and intermediate client outcomes.

A range of sample documents that may be used for data collection is provided at Attachment B. Service providers can select the method most appropriate for their clients and service type. Service Providers may also adapt their own collection methods to collect data for the performance indicators.

FaHCSIA has introduced the new data collection methods and reporting requirements to reduce the burden of collection on service providers and allow service providers to incorporate FSP data collection into their existing follow-up processes.

1.5 Ethical considerations

Service providers must collect data in accordance with the FSP Ethics Guidelines (Attachment C). These Ethics Guidelines were developed during the previous intermediate client outcomes data collection exercise undertaken by FRS service providers in 2011.

2. Data collection for immediate client outcomes

2.1 Immediate outcomes/impacts: Did we make an immediate difference?

Immediate client outcomes refer to the performance indicators coloured pink and numbered 2.1 to 2.4 in the FSP Performance Framework. There are four immediate outcomes performance indicators in Edition 1.

Note: All services are encouraged to collect feedback from clients in all locations throughout the year to assist with internal evaluation and continuous improvement of services.

Immediate client outcomes (or client feedback) should be collected at or near the time of service.

To report immediate client outcome data service providers must:

- select a 4 week period (20 consecutive representative working days);
- survey all clients from all locations attending the service/s in this period. It is expected a minimum of 50% of clients will respond; and
- where possible, collect immediate outcomes anonymously.

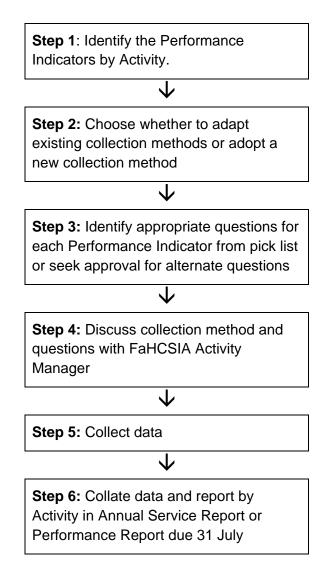
The four week period should be a period of service delivery representative of usual provision, when sufficient numbers of clients can be asked for feedback. This means that if a service is delivered only one day a week, only four days of data collection is required. If the same clients access the service on each of those four days, they will only need to be surveyed once. A different 20 day period may be used for each Activity.

Note: these data show outcomes at the service provider level and are used to assess service provider performance.

2.2 Steps in collecting immediate client outcomes data

The following diagram shows steps service providers must undertake as part of the immediate data collection process. As service providers progress through the steps it may be useful to document a data collection plan for their records. The plan may vary for each Activity.

Immediate client data collection process



These steps are expanded upon in the relevant sections below.

Step 1: Identify the relevant FSP Performance Indicators

Some of the immediate outcome performance indicators that service providers must report cross over with those listed in the Funding Agreements, while others are uniquely from the FSP Performance Framework.

There are four immediate performance indicators included in the FSP Performance Framework. The table below outlines which services should collect information against each performance Indicator.

Ref	Performance indicator	FLS, FaRS, Specialist Services	CfC	Community Playgroups
2.1	Proportion of clients with increased knowledge and skills	✓	√	✓
2.2	Proportion of clients satisfied with the service they received	✓	√	✓
2.3	Proportion of clients with improved access/engagement with services	✓	Optional 2011-12. Mandatory from 2012-13	N/A
2.4	Proportion of clients with improved family, community and economic engagement	✓	Optional 2011-12. Mandatory from 2012-13	N/A

If your service has difficulty collecting data for the required performance indicators, talk to your FaHCSIA Activity Manager.

Step 2: Adapt or adopt a collection method

The next step is to choose the data collection method. Sample questionnaires are located in Attachment B.

For immediate outcomes, the most suitable method is an anonymous survey supplied at time of service (Sample 1, Attachment B).

Service providers can use existing collection methods so that continuous monitoring is not interrupted. While anonymous data collection is preferred, in some cases, it may not be appropriate. This must first be discussed with your FaHCSIA Activity Manager.

If an anonymous survey is not used, other methods are:

- **interview** (in person or via telephone). This may be most suitable for clients with limited English or literacy. This method takes more time;
- **focus group**. It may be appropriate to ask clients for feedback as part of a group session, depending on the activity and the clients; and
- **service provider judgement**. May be used when it is inappropriate or too difficult to elicit information directly from clients. In this method, the service provider would judge client achievement of the performance indicator. Observations for all clients should be reported (this can include 'don't know'). For example, for a group of 10

clients 8 of whom increased knowledge and skills has been observed, the results reported would be total 10, 8 positive and 2 'don't know'.

Samples of these collection methods are located in Attachment B.

Step 3: Identify questions for each Performance Indicator relevant to the Activity and client/s

For each performance indicator listed in Step 1 review the pick list of questions and select those appropriate / relevant to the Activity and clients (Attachment A).

- While different questions may be used on separate occasions, each client is to be asked to respond to only one question per performance indicator. This is to avoid the difficulty of reporting where a client may respond both positively and negatively for the same performance indicator.
- The service provider can select the most relevant question or alternatively
 present a selection of questions with instruction for the client to select the
 most appropriate. The question used can vary to suit the client/s and activity.
- Questions in the immediate client data collection pick list are coloured pink.
 Alternative / modified questions to those on the pick list can be used after discussion with your FaHCSIA Activity Manager.

In addition to the pick list questions, Service Providers are encouraged to include open ended questions to collect qualitative data. Open-ended questions allow service providers to seek information on clients' opinions about what works, what doesn't work and make suggestions for improvements to the service. Service providers are not required to report to FaHCSIA on qualitative feedback from clients.

If service provider judgement has been selected as the collection method, see last page of pick list (Attachment A) and consider how clients will be assessed.

Step 4: Discuss collection method and selected questions with FaHCSIA Activity Manager

All collection methods and questions should be discussed with your FaHCSIA Activity Manager before they are used. Activity Managers will check that:

- the method is suitable;
- questions used align with the performance indicators; and
- all required performance indicators have been included.

Step 5: Collect data

Once the collection method and questions have been agreed with your FaHCSIA Activity Manager, data collection can commence.

- Immediate client data will be collected within a 20 consecutive representative
 working day period (four weeks), at any time during the financial year. The
 time of collection is chosen by the service provider. (That is, Community
 Partners can choose different 20 day periods from each other. Facilitating
 Partners will submit aggregated data for all Community Partners). The period
 must be representative of usual service delivery and may vary for each
 Activity.
- All clients from all service locations using the service during the four weeks should be given the opportunity to provide feedback. It is expected that at least 50% of clients will respond to the survey and that 80% of responses will provide a satisfactory rating.
- Each client should only respond to the survey once per Activity.

A client is a person who receives direct service delivery, excluding intake and assessment, information only, and referrals.

In some cases, services may only be delivered on a limited number of days in the collection period. If a provider delivers the service two days a week, then collection would only be needed on 8 days within the four week period.

Information must be stored as required by the Privacy Act 1998.

Step 6: Collate data and report

Service providers are required to collate all responses gathered over the 20 consecutive working day period (four weeks) for reporting at the end of the financial year. The client outcomes data requested in the Annual Service Report or the January-June Performance Report will include:

- the number of clients accessing the service during the four week period;
- the number of clients who responded to the survey; and
- the number of clients who "agree", "disagree" or "don't know" for each performance indicator.

All data must be reported for each Activity. The funded organisation must report for all sub-contracted organisations.

3. Data collection for intermediate client outcomes

3.1 Intermediate outcomes/impacts: Did we make a lasting difference?

Intermediate client outcomes refer to performance indicators coloured green and numbered 1.1 to 1.4 in the FSP Performance Framework. There are four intermediate outcome performance indicators.

Intermediate client outcomes are to be measured:

- 3 6 months after clients leave the service, or
- more than 6 months after commencing the service for clients who are still accessing services.

Under the FSP Performance Framework, service providers must report on two intermediate performance indicators.

Services should select at least two intermediate outcome performance indicators most relevant for their service.

Intermediate outcomes should only be collected from clients who have accessed services within the current financial year and who have provided consent to follow-up. Clients should be asked for consent to follow-up at the time of commencing the service.

Note: Clients must be asked for consent to follow-up to allow services to contact them at a later time. Where the client is aged under 16 years, the parent/guardian must provide consent and follow-up should be sought with this adult.

Each service provider will be required to collect intermediate client outcome data on a small sample of their clients.

- The sample size will be based on the number of clients attending the service in the June-December period.
- The number of clients to be sampled will be provided by FaHCSIA in March/April for each service type.¹
- Service providers will report their results in the Annual Service Report or six-monthly Performance Report due on 31 July each year.

Exemptions from collecting intermediate client outcomes may apply in special circumstances. Service providers should contact their Activity Managers if difficulty arises in the collection of these data.

Family Support Program Performance Framework: Service Provider Help Guide

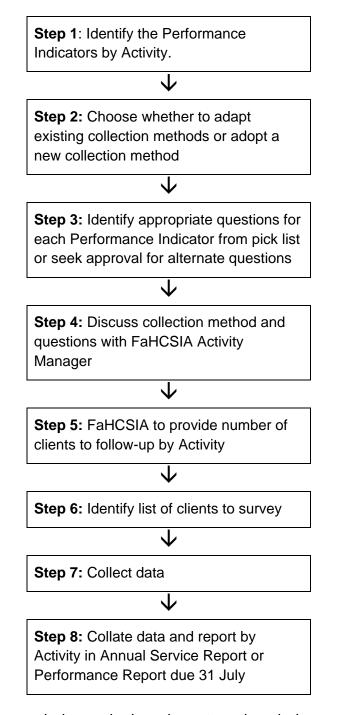
¹ The sampling will be based on FSP data at the Activity level. The sampling will be based on 5% confidence intervals with a 95% confidence level.

Note: These data show outcomes at the program level, they are not used to assess service provider performance.

3.2 Steps in collecting intermediate client outcome data

The diagram shows the steps service providers will undertake as part of the data collection process for intermediate outcomes. As service providers progress through the steps it may be useful to document a data collection plan for their records. The plan may vary for each service type provided.

Intermediate client data collection process



These steps are expanded upon in the relevant sections below.

Step 1: Identify the relevant FSP Performance Indicators

Service providers should select a minimum of two FSP Performance Framework performance indicators listed below to report for each Activity.

Performance Indicator 1.1 Proportion of clients with improved family functioning including child wellbeing.

Performance Indicator 1.2 Proportion of children with improved development

Performance Indicator 1.3 Proportion of clients that live in safer family and community environments

Performance Indicator 1.4 Proportion of clients who are included in and socially connected to the community

Service providers may select different indicators for each Activity.

Step 2: Adapt or adopt a collection method

The next step is to choose the data collection method. For intermediate outcomes, a telephone interview is the most suitable method (Sample 2, Attachment B). Service providers are able to use any question from the pick list for each performance indicator (Attachment A). Alternative questions can be used after discussion with your FaHCSIA Activity Manager.

If an interview is not appropriate, other methods are:

focus group: May be used in a situation where a group of clients is using a service for six months or more;

survey or questionnaire: This method has limited use for collection of intermediate outcomes due to low response rates for mailed surveys; and

service provider judgement. May be used where clients are still using the service six months after commencement and it is inappropriate or too difficult to elicit information directly from them. In this method, the service provider would judge client achievement of the performance indicator. For this method, a random sample of clients should still be used and reported (this can include 'don't know').

A sample of these collection methods is located in Attachment B.

Step 3: Identify questions for each Performance Indicator relevant to the Activity and client/s

For each performance indicator selected in Step 1, service providers choose a question from the pick list (Attachment A). Questions in the intermediate client outcome pick list are coloured green. Each client should respond to only one

question per performance indicator. Service providers will be following up a small number of clients and should tailor questions to best suit individual clients/the Activity.

In addition to the pick list questions, Service Providers are encouraged to include open ended questions to collect qualitative data. Open ended questions allow service providers to seek information on clients' opinions about what has worked, what didn't work and make suggestions for improvements to the service. Service providers are not required to report to FaHCSIA on qualitative feedback from clients.

Step 4: Discuss collection tools and selected questions with FaHCSIA Activity Manager

All collection methods and selected questions should be discussed with your FaHCSIA Activity Manager before they are used. FaHCSIA Activity Managers will check that:

- the method is suitable:
- questions used align with the performance indicators; and
- the required performance indicators have been included.

Step 5: Sample numbers to be provided by FaHCSIA

Intermediate client outcomes sample numbers are distributed by FaHCSIA to service providers in March/April. The number of clients to follow-up will be based on the number of clients who attended the Activity in the July-December period of that financial year.

The sample size will vary for different Activities, as it is based on the number of clients utilising the service across the FSP and will provide statistically significant results at the Activity level.

Step 6: Identify the list of clients who can be followed up

To identify appropriate clients for follow-up, check your client records for a list of clients who have:

- consented to be followed up (or parent/guardian consented where client is aged under 16 years);
- accessed the service within the required period (completed service within the last 3-6 months or receiving the service for 6 months or more);
- provided appropriate contact details; and

 no specific reasons not to follow-up (for example, mental health issues, substance abuse or could be placed at risk by contact.) see Attachment C.

Step 7: Collect data

Clients to follow-up for intermediate outcomes should be randomly selected from the list created above (for example, every third name). Where the client is aged under 18 years, follow-up should be sought from the consenting adult. Some clients may not give feedback or not be contactable. If this is the case, continue to contact clients from the list until the sample number has been reached. Since the sample number to follow-up is small, it is possible that the clients followed-up will not come from all outlets. Report data from all clients who provided feedback, both positive and negative results are expected.

Follow-up will primarily be undertaken by a person who was not involved in providing the service. However, it may be preferable for the person who provided the service to assess whether follow-up is appropriate (referring to the ethics guidelines) and in some special circumstances, conduct the follow-up themselves.

Example: For some clients / groups, using the bond or trust established between the service provider and the client may be necessary to the client providing feedback.

Random selection is an important aspect of the collection of intermediate outcomes. If a combined list of consenting clients from all activities is difficult to create, outlet/s or activities can be randomly selected. The consenting clients from these outlet/s or activities can then be selected and contacted until the sample number has been reached. Some form of random selection must also be applied if the focus group or service provider observation methods are used. This could be to randomly select the activity and clients (for example: the first 10 clients to arrive on a particular day).

Information must be stored as required by the Privacy Act 1998.

If you are unable to reach the required sample number, contact your FaHCSIA Activity Manager.

Step 8: Collate data and report

Service providers are required to collate their data in preparation for reporting at the end of financial year. The client outcomes data requested in the Annual Service Report or the January-June Performance Report will include:

- the number of clients who provided feedback; and
- the number of clients who "agree", "disagree" and "don't know" for each performance indicator.

The data must be reported for each Activity.

4. Other data collection for the FSP Performance Framework

In addition to the collection of immediate and intermediate client outcomes data, service providers will collect other forms of data for the FSP Performance Framework. The FSP Performance Framework contains two additional parts relating to Service Delivery Quality and Service Outputs. Information collected for these performance indicators is part of the existing questions in the Annual Service Report and CfC Performance Reports.

4.1 Service delivery quality: How well have we done it?

Service delivery quality performance indicators are shown in red in the FSP Performance Framework. There are three performance indicators in Edition 1.

Performance indicator 3.1 - Proportion of clients from priority groups

FaHCSIA's priorities include providing services to a number of vulnerable groups. This includes engaging disadvantaged Australians in quality services under the FSP. Most FSP services are required to have a Client Access Strategy.

FSP Services are required to collect and report data on vulnerable groups, which may include but are not limited to:

- Aboriginal and Torres Strait Islander families;
- Culturally and Linguistically Diverse families;
- · low income families; and
- young parent families.

Performance indicator 3.2 - Proportion of partner agencies reporting satisfaction with the contribution of the service providers to integrated service delivery

Each year service providers will nominate three organisations as 'partner agencies' that they work with most. (Excludes sub-contracted agencies, e.g. Community Partners and Consortia). It is recommended that service providers notify their partner agencies before this nomination and confirm contact details of the most appropriate person for FaHCSIA (or FaHCSIA contracted organisation) to contact.

The nominated partner agencies will be asked to complete a survey on how satisfied they are with their relationship with the service provider. Responses will be provided in confidence. An example of the survey used in 2010-11 is in Attachment B, Sample 6.

Details of any organisation contracted to conduct partner agency surveys will be given to service providers before the survey process commences.

Performance indicator 3.3 - Proportion of service providers that meet approval requirements

FaHCSIA will measure the number of service providers who meet the items listed in the Family Support Program (FSP) Approval Requirements which is available on the FaHCSIA website. This will be assessed through information provided in the Performance Reports or Annual Services Report and by FaHCSIA Activity Managers.

4.2 Service Outputs: How much did we do?

Service outputs performance indicators are shown in yellow in the FSP Performance Framework. There is one performance indicator listed in Edition 1.

Performance indicator 4.1 -Number of

- clients by demographic characteristics
- service events/activities
- service sites (and locations)

FaHCSIA will collate the information from all service providers to report program-wide data. This will include details on the demographic characteristics of clients including vulnerable groups, total clients assisted, service type breakdown and locations/numbers of service sites.

5 Key dates

Activity	Date
Service Provider Help Guide Released	November 2011
Collect client feedback over 20 working day period (immediate outcomes)	November 2011 to June 2012
July-December CfC Performance Report due	28 February 2012
FaHCSIA provides number of clients to follow-up	March 2012
Nominate 3 partner agencies	April 2012
Follow-up sample of clients (intermediate outcomes)	April to June 2012
Report aggregated client data in Annual Service Report or January-June Performance Report	31 July 2012
Collect client feedback over 20 working days (immediate outcomes)	July 2012 to June 2013
July-December CfC Performance Report due	28 February 2013
FaHCSIA provides number of clients to follow-up	March 2013
Nominate 3 partner agencies	April 2013
Follow-up sample of clients (intermediate outcomes)	April to June 2013
Report aggregated client data in Annual Service Report or January-June Performance Report	31 July 2013
Collect client feedback over 20 working days (immediate outcomes)	July 2013 to June 2014
July-December CfC Performance Report due	28 February 2014
FaHCSIA provides number of clients to follow-up	March 2014
Nominate 3 partner agencies	April 2014
Follow-up sample of clients (intermediate outcomes)	April to June 2014
Report aggregated client data in Annual Service Report or January-June Performance Report	31 July 2014

Attachments

Attachment A: Pick list of questions for each performance indicator

The FSP Performance Framework came into effect from July 2011. This pick list contains questions for collection of data for each of the performance indicators for intermediate (green) and immediate (pink) client outcomes.

Service providers are required to:

- select at least two intermediate (green) performance indicators to collect and report data;
- refer to the Help Guide for immediate (pink) performance indicators required to be collected and reported on; and
- select one question against each performance indicator. Alternative questions can be used for the performance indicators with approval from FaHCSIA.

Service providers may ask clients other questions in addition to those used to collect client data for their own records or to assist with continuous improvement.

PF Ref	Performance Indicator	Questions
1.1	% clients with improved family functioning including child wellbeing	As a result of the service I received Responses: disagree / agree / don't know Relationships and communication in my family are improved My relationship with my child has improved Communication in our family has improved I feel more confident as a parent My relationship with my partner/ex partner has improved My relationship with family members has improved My child's relationships with others has improved Our parenting arrangements are workable There is better communication about our children's needs My family gets along better My family talks more with each other I am able to deal with the relationship issues with my partner/ex-partner in a constructive/positive manner. My relationship with the other parent has become more relaxed during change overs

PF Ref	Performance	Questions
	Indicator	
1.2	% children with	As a result of the service I received
	improved development	Responses:
		disagree / agree / don't know
		My child's development has improved
		I interact more positively with my child
		I have and I use new ways to play with and teach my child
		I have used other service/s to help my child learn and develop
		I am better able to help my child to learn
		I have a better understanding of activities that help my child learn
		I have a stronger relationship with my child
		I have a better understanding of the role I play in my child's
		learning
		I am better able to understand reasons for my child's
		behavioural changes
1.3	% clients that live in	As a result of the service I received
	safer family and	Responses:
	community	disagree / agree / don't know
	environments	I feel safer in my own home
		I feel safer in my community
		There is less conflict in our family
		Members of our family feel safer
		My child experiences less conflict
		Attending this service makes my home life better
		I have skills to keep my child safe
		There is less conflict with my child's other parent
1.4	% clients who are	As a result of the service I received
	included in and socially	Responses:
	connected to their	disagree / agree / don't know
	community	I feel connected to my community
		I could find and go to services to help my child/family if I
		needed to in the future
		I have more contact within the community
		I feel more socially connected
		I am able to get support when I need it
		I feel more included in my community

PF Ref	Performance	Questions			
	Indicator				
Immediate outcomes/impacts					
2.1	% clients with improved	As a result of the service I received			
	knowledge and skills	Responses:			
		disagree / agree / don't know			
		I know more about how to care for and parent my child			
		I am more able to care for and parent my child			
		I know more about how to help and support my child to			
		develop			
		I know more about how to find help to support my child to			
		develop			
		I am more able to find help to support my child to develop			
		I have new skills and knowledge to use in my family			
		relationships			
		My relationships with my family have improved			
		Parenting arrangements are workable			
		I am more confident in parenting my child			
		I know what my child should do at this age			
		I know more about how to help my child do new things			
		I have new strategies to deal with conflict with my child's other			
		parent			
2.2	% clients satisfied with	As a result of the service I received			
	the service they	Responses:			
	received	disagree / agree / don't know			
	% clients reporting that	I am satisfied I received adequate information (including			
	the service was	referrals to other services) to meet my needs			
	responsive / respectful	I am satisfied with the service I received			
	of their needs and / or	I would recommend this service to others			
	cultural background	I feel I was treated with respect			
		I was clear about the expectations that my practitioner(s) and I			
		were working towards			
		The service was respectful of my cultural needs			

PF Ref	Performance	Questions
	Indicator	
2.3	% clients with improved	As a result of the service I received
	access / engagement	Responses:
	with services	disagree / agree / don't know
		I can find and go to services to help me with family issues
		when I need to
		I am able to use and get useful help from community services
		to help me with family issues
		I can find services when I need them
		I am more confident about finding and going to family services
		I am able to access community services to get help with family
		issues
		I have information about other services to meet my families
		needs
2.4	% clients with improved	As a result of the service I received
	family, community and	Responses:
	economic engagement	disagree / agree / don't know
		I will have more contact with family, friends and/or community
		members
		I am aware of more activities in my community
		My relationship with my partner has improved
		My relationship with my children has improved
		My relationship with other family members has improved
		There will be less conflict in our family
		Members of my family are safer
		I feel better able to cope or deal with my issues
		I am more connected to people
		I now help or support others in my community

Service Provider observation

For most clients, surveys to ask their experience of the service and what benefits they may have received is the best way to collect outcomes data. However, in some cases asking clients directly about outcomes from the service is not appropriate. All service providers must first discuss using observation to report on performance indicators with their FaHCSIA Activity Manager.

PF Ref	Performance Indicator	Observations		
Intermediate outcomes/impacts		As a result of the service I received		
		Responses:		
		disagree / agree / don't know		
1.1	% clients with improved family functioning including child wellbeing	The client is better able to manage family issues of concern to them		
1.2	% children with improved development	The child has demonstrated improvement in development		
1.3	% clients that live in safer family and community environments	The client's safety in family and community environments has improved		
1.4	% clients who are included in and socially connected to their community	The client is more included and socially connected to their community		
Immedia	ite outcomes/impacts	As a result of the service received		
		Responses:		
		disagree / agree / don't know		
2.1	% clients with improved knowledge and skills	The client demonstrated that they are able to apply new knowledge or skills in parenting their child		
		The client has demonstrated that they are able to apply new knowledge or skills in seeking help with their child's development		
2.2	% clients satisfied with the service they received % clients reporting that the service was responsive / respectful of their needs and / or cultural background	The client shows that they are happy with the service they received		
2.3	% clients with improved access / engagement with services	The client demonstrated that they know how to find and go to services when needed		
2.4	% clients with improved family, community and economic engagement	The client has shown an interest in becoming a volunteer or continuing to volunteer or seek/gained employment The client has shown that their relationships with their family, friends and/or community members have		
		improved after receiving the service.		

Attachment B: Sample surveys and data collection methods

SAMPLE 1 – Immediate Outcomes Data Collection

Client Survey or Interview

Your feedback is valuable to us. By providing your view on the service you have received, you will help us improve the services we provide.

No special knowledge is needed to answer these questions and there are no right or wrong answers. We are interested in your opinion. You can choose not to answer particular questions if you wish.

Your answers will be kept confidential and you will not be identified in any of the results.

How has your situation changed since you started using the service? For each of the following statements, please mark if you agree or disagree.

Disagree	Agree	Don't know
	Disagree	Disagree Agree

Thank you for your time. We value your feedback.

SAMPLE 2 – Intermediate Outcomes Data Collection

Client Survey or Interview

Hello, my name is <name following="" of="" person="" up=""> from <name of="" provider="" service="">. A few months ago you participated in <name and="" of="" or="" range="" services="">. We are currently following up some of our past clients to see whether our services make a lasting difference to families. Would you mind answering a few brief questions over the phone? It will only take a few minutes.</name></name></name>
Taking part in the interview is voluntary. If you do take part, any answers you give will be treated confidentially. The feedback you give will be analysed together with other people's feedback to give an overall picture.

How has your situation changed since you started using the service? For each of the following statements, please mark if you agree or disagree.

As a result of the help I received	Disagree	Agree	Don't know
I interact more positively with my child.			
I am able to get support when I need it.			
Any comments or suggestions?			

Thank you for your time. We value your feedback.

SAMPLE 3 – Immediate Outcomes data collection

Client Focus Group

Thank you for taking the time to participate in this focus group. My name is [insert name] and I am from [insert agency].

The purpose of this feedback is to collect your thoughts and feedback about the [insert service] which you have been involved in. We want to know how you feel the service may have helped you. We run these focus groups so that we can continue to improve our service as well as collect data to help us report back to our funder.

Please be assured that your responses will be kept confidential and you will not be identified in any of the results.

I need your consent to participate in this focus group. You are under no obligation to participate and you are not required to answer any questions you do not wish to. If you decide to leave the group part-way through, we will respect your decision. Could I please ask you indicate your consent to participate by raising your hand?

As I mentioned before, my name is [insert name]. Does everyone here know each other? If not, we may like to spend some time before we begin, by introducing ourselves to the group. (Group members may introduce themselves.)

Please note that we have a set of guidelines to help the focus group run as successfully as possible. These are:

- Do not discuss the details of the discussion once the group is finished.
- Respect others' privacy and do not repeat their comments once outside the group.
- Speak one at a time so everyone is respected and the note taker can capture the data.
- Participants should feel that they able to express opinions freely and without criticism.

How has your situation changed since you started using the service?

For each of the following statements, insert number of observations in each category.

As a result of the help I received	Disagree	Agree	Don't know
I know more about how to support my child to develop			
I can find and go to services to help me with family issues when I need to			
I have received adequate information (including referrals to other relevant services) to meet my needs			
I participate in activities in my community more often			

Any comments or suggestions?
Are there any other comments that you would like to make about the service or how it has helped
you?
Thank you again for taking the time to participate in this focus group.

SAMPLE 4 – Intermediate Outcomes data collection

Client Focus Group

Thank you for taking the time to participate in this focus group. My name is [insert name] and I am from [insert agency].

The purpose of this feedback is to collect your thoughts and feedback about the [insert service] which you have been involved in. We want to know how you feel the service may have helped you in the long term. We run these focus groups so that we can continue to improve our service as well as collect data to help us report back to our funder.

Please be assured that your responses will be kept confidential and you will not be identified in any of the results.

I need your consent to participate in this focus group. You are under no obligation to participate and you are not required to answer any questions you do not wish to. If you decide to leave the group part-way through, we will respect your decision. Could I please ask you indicate your consent to participate by raising your hand?

As I mentioned before, my name is [insert name]. Does everyone here know each other? If not, we may like to spend some time before we begin, by introducing ourselves to the group. (Group members may introduce themselves.)

Please note that we have a set of guidelines to help the focus group run as successfully as possible. These are:

- Do not discuss the details of the discussion once the group is finished.
- Respect others' privacy and do not repeat their comments once outside the group.
- Speak one at a time so everyone is respected and the note taker can capture the data.
- Participants should feel that they able to express opinions freely and without criticism.

How has your situation changed since you started using the service?

For each of the following statements, insert number of responses in each category.

As a result of the help I received	Disagree	Agree	Don't know
relationships and communication in my family have improved			
I feel safer in my community			

Any comments or suggestions?

Thank you again for taking the time to participate in this focus group.

SAMPLE 5: Integrated/Coordinated Service Delivery data collection

Partner agency nomination

We would like you to nominate up to three external organisations that you most commonly work with.

You may also identify up to three internal partner agencies that are different parts of your organisation. If so, please list these on a separate nomination form.

Please complete all the questions for each nomination.

Organisation 1				
Name of organisation				
Is this an external organisation	Internal	/	External	
(please circle one)				
Type of organisation				
(for example, . non-government, school)				
Contact name				
(this person will receive the survey by email)				
Contact email				
Contact phone				
Briefly describe for what purposes				
your organisation interacts with the				
nominated partner agency (for example				
type of relationship, frequency of contact, level				
of involvement)				

Organisation 2				
Name of organisation				
Is this an external organisation	Internal	/	External	
(please circle one)				
Type of organisation				
(for example, . non-government, school)				
Contact name				
(this person will receive the survey by email)				
Contact email				
Contact phone				
Briefly describe for what purposes				
your organisation interacts with the				
nominated partner agency (for example				
type of relationship, frequency of contact, level				
of involvement)				

Partner agency nomination

Organisation 3				
Name of organisation				
Is this an external organisation	Internal	/	External	
(please circle one)				
Type of organisation				
(for example, . non-government, school)				
Contact name				
(this person will receive the survey by email)				
Contact email				
Contact phone				
Briefly describe for what purposes				
your organisation interacts with the				
nominated partner agency (for example				
type of relationship, frequency of contact, level				
of involvement)				

SAMPLE 6: Integrated/Coordinated Service Delivery data collection

Partner agency survey

This survey is about how satisfied you are with the relationship that your organisation has with XXXXXX as part of their provision of Family Support Program services.

The survey covers the type and level of involvement that your organisation has with this organisation, as well as your satisfaction with current involvement.

1.	Which of th	e following best describe your position?
		CEO
		Senior or area manager
		Service coordinator or service manager
		Frontline worker
		Other, please describe
2.	provider (F	ne type of relationship your organisation has with the Family Support Program service or example, formal or informal partnership, consortium, Memorandum of ling, refer to and/or refer from, joint case management, etc.)
2	llow often	do activity arrangiaction base contact with this arrangiaction?
3.		does your organisation have contact with this organisation?
	•	ently – once per week or more
	Occasi	onally – once or twice per month
	Infrequ	ently – less than once or twice per month
	Never	
4.	Overall, ho organisatio	w important is it for your organisation that this organisation collaborates with your n?
	Very in	nportant
	Quite in	mportant
	Not vei	ry important
	Not at a	all important

Area of integration/ coordination

For each listed area of integration/ coordination, please indicate your level of involvement with the FSP organisation and your satisfaction with their contributions to coordination. If the listed area is an area where your organisation is not wishing to integrate or coordinate with the FSP organisation, please select 'Not applicable'.

Area of integration/ coordination	1. Low or None 2. Medium 3. High			Satisfaction with the FRS organisation's contributions 1. dissatisfied 2. tend to be dissatisfied 3. tend to be satisfied 4. satisfied 5. Don't know/ not applicable			
Shared information (for example exchanging information about projects or funding sources, joint promotional campaigns, sharing client information)	1	2	3	1	2	3□	4□
2. Joint planning (for example coordinating planning cycles or sharing membership of organisational structure	1	2	3	1	2	3	4
3. Referring clients to FSP organisation	1	2	3□	1	2	3	4
4. Receiving referrals <u>from</u> FSP organisation	1	2	3□	1	2	3	4
5. Joint service delivery	1	2	3□	1	2	3	4
6. Joint case management	1	2	3	1	2	3	4
7. Sharing costs for services provided to shared clients	1	2	3	1	2	3	4
8. Joint quality monitoring of services	1	2	3□	1	2	3	4
9. Interagency meetings	1	2	3□	1	2	3	4
10. Co-location (sharing the same premises or infrastructure)	1	2	3	1	2	3	4
11. Professional development (common staff training or joint recruitment)	1	2	3	1	2	3	4

Processes for integration / cooperation

The following questions ask about processes for cooperation and integration between your organisation and this organisation. For each statement please select the answer that most closely matches your opinion. If a statement refers to something that you have no experience with or is not relevant, select the 'Don't know / not applicable' option.

	Rating				
The FSP organisation and its staff	Agree	Tend to agree	Tend to disagree	Disagree	Don't know/ not applicable
maintains adequate contact with our agency					
responds to requests					
are cooperative					
are knowledgeable about our services					
contributes to our organisation's objectives					
5. Overall, how satisfied are you with the delivery / service coordination? Very satisfied Satisfied Unsatisfied Very unsatisfied Comments	FSP organis	sation's cont	ribution to in	tegrated ser	vice

Thank you for completing this survey.

SAMPLE 7: Data collation

Immediate Outcomes Performance Indicator ACTIVITY NAME	Total number of clients asked this question	Number of client responses for this question	%	Disagree	Agree	Don't know
% Clients with improved family knowledge and skills	For example, 20	15	0.75	2	13	0
% Clients with improved family knowledge and skills						
% Clients satisfied with the service they received						
% Clients with improved access/engagement with services						
% Clients with improved family, community and economic engagement						

Attachment C: Family Support Program Ethical Guidelines

1. The Ethics Guidelines

The Ethics Guidelines are informed by a broad risk assessment of issues likely to arise for FSP service providers when following up clients, and by known ethical dilemmas in the broad human research field.

1.1 Relationship to other guidelines, standards and principles

These ethics guidelines provide principles and specific guidance for the different FSP service types, clients and data collections. It is based on the:

- National Health and Medical Research (NHMRC), National Statement of Ethical Conduct in Human Research (2007). This document covers ethics in human research in Australia. It clarifies the responsibilities for institutions and researchers for the ethical design, conduct and dissemination of results of human research in Australia;
- NHMRC, Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research (2003);
- Australasian Evaluation Society, Guidelines for the Ethical Conduct of Evaluations (2002);
- NHMRC, Challenging ethical issues in contemporary research on human beings (2006);
- NHMRC, Australian Code for the Responsible Conduct of Research (2007);
 and
- British Association for Counselling and Psychotherapy, Ethical guidelines for researching counselling and psychotherapy (2004).

2. Ethics Guidelines for Family Support Program Services

This section provides advice for Family Support Program providers about the ethical collection of client outcomes data.

Service providers should always do a thorough risk assessment of the potential for any harm to clients, prior to collecting client outcomes data. For each significant risk the service provider should:

- gauge its probability and severity;
- assess the extent to which the risk can be minimised;
- determine if the research can be justified by potential benefits; and
- determine how the risks can be managed.

If necessary, the service should consult with relevant community groups, such as Indigenous groups, about ethical issues before following up clients who have left their service. Information must be stored as required by the Privacy Act 1998.

The following section details the general ethics principles and how they apply to the Family Support Program.

Principle 1—Research merit and integrity

Outcomes data should be collected using appropriate and sound methodology and researchers should be competent. If research does not have merit or integrity then it is unethical because of the waste of time and resources. Data should be collected in a way that means judgements/refinements to services are based on sound information. Research should be justifiable by its potential benefit—improving services.

The outcomes data are collected according to a methodology specified for the FSP Performance Framework. The data play an important role in monitoring program outcomes and in fulfilling public accountability requirements.

- 1.1. Data should be collected by someone independent of the staff involved in directly providing the FSP service to the client. This will reduce the possibility of coercion and retain confidentiality. Indigenous Parenting Services ideally should use Indigenous workers to conduct interviews with clients. If this is not possible, then the researchers should have experience in working with Indigenous people and/or appropriate cultural training.
- 1.2. Providers whose clients come from special needs groups (for example, Indigenous, CALD backgrounds) may use alternative methods for collecting data from special needs group, for example, face-to-face interviews or through key community informants. Providers will need to balance the amount of resources required to collect data from people from diverse backgrounds and getting a balance of views across all program users. We suggest providers consult with relevant local groups about the most appropriate method to obtain feedback from clients who are part of special needs groups.
- 1.3. Service providers should have processes in place to respond promptly and fairly to complaints about the research process.
- 1.4. The service should collect outcomes data that are meaningful and related to substantive activities of the service.

Principle 2—Trustworthiness

A distinct ethical dimension of counselling and psychotherapy is the trust placed by clients in practitioners and the sense of personal vulnerability that may be involved in

the process. Identifying and responding to risks associated with outcomes research are basic ethical responsibilities for services. Where the service conducting the research is also the provider of services, the service should take steps to adequately protect clients' interests and vulnerabilities in the way feedback is sought, the way responses are written up and how the findings are applied to improving services. Researchers should seek to maintain the highest possible levels of trustworthiness and integrity between themselves and those being asked for feedback.

- 2.1 The protection of personally sensitive information is an important ethical concern for all clients, but particularly for vulnerable clients or clients who have been in a counselling relationship. Honouring promises about confidentiality carries special ethical weight because it is central to maintaining trust. The standards and procedures to protect privacy should be as consistent as possible with those relevant to service provision and professional codes of conduct. The service should have a policy on the retention and storage of research data that covers:
 - how to store responses securely;
 - o anonymity of responses;
 - o the duration of storage²; and
 - secure ways to dispose of data and access to databases and archives that are consistent with confidentiality requirements, legislation and privacy rules.
- 2.2 Where services are provided in partnership with other agencies, for example where a lead agency is directly responsible to FaHCSIA and other local agencies are contracted to provide early intervention, then lead agencies should consider what research information should be shared with contracted providers. Lead agencies should develop a policy on the ownership of the data and the form that it can be shared with delivery agencies, which clearly defines what is appropriate to report. Given the data is intended to help providers improve services, it is important that information about the delivery of specific programs be shared, but this should be balanced with maintaining confidentiality for small delivery agencies. A reasonable balance may be to report across all contracted services and not by each provider.
- 2.3 In small communities (including Indigenous communities), staff and clients may have "dual relationships", where staff and clients commonly meet in situations outside the service. A person may feel that feedback is not sufficiently confidential and that there is a risk that personal information will be made known to others. If deemed necessary, service providers should contract telephone interviews to a service based in other locations. Service providers facing the

² The Australian Code for the Responsible Conduct of Research (NHMRC, 2007) page 23, recommends that institutions store primary research data for a minimum of five years but qualify this by saying it depends on the type of data and also that researchers should retain primary materials for sufficient time to allow reference to these by other interested parties.

- same dilemma could work together to conduct the interviews on each other's behalf. Alternatively, if the service is part of a larger group with sites in other locations the data could be collected by staff from another site.
- 2.4 When a service provider collates and reports its own data, a conflict with the ethical obligation to protect confidentiality may arise if the intended audience of the report includes staff within the service. Information collected through openended questions may put staff in a position to deduce the identity of individual clients. In such situations, care should be taken to protect people's identity by, for example, conflation of several experiences into one representative account, or by explicitly producing a fictional account that conveys the salient aspects of research findings.

Principle 3—Respect for the rights, privacy, dignity and entitlements of your clients or program clients

Each person must be recognised as having inherent value and everyone has a fundamental right to privacy. Each person has the right to autonomy—to determine his or her own path in life. It follows that a person must be given the opportunity to decide whether they are involved in research, and that consent must be free, informed and given prior to the research.

- Free consent is not forced, coerced or obtained by improper inducements.
- Informed consent is based on an understanding of what is to be done, why and what will happen with the results.
- Consent must be obtained before the research is begun.
- 3.1 Consent for follow-up for the collection of intermediate outcomes should initially be obtained at the time the client (guardian) commences service, however, client consent should be seen as a process, where consent is reviewed at key points, for example, when arranging and conducting interviews. At this time, the interviewer should also ensure the client understands that consent may be withdrawn at any time during the interview without consequences.
- 3.2 For providers of Indigenous Parenting Support Services, the collection of follow-up client data must respect the values, sensitivities and culture of Indigenous clients. Indigenous Australians have experienced little direct benefits in the past from participating in research and as such it will be important to inform the local community about the results of follow-up research and consult about the best ways to give feedback, which may be written or verbally.
- 3.3 Researchers should identify themselves to potential informants and advise them of the purpose of the research and identify the service commissioning/ conducting the research.

- 3.4 Some FSP clients are considered vulnerable because they are socially and economically disadvantaged, or may be in conflict and experiencing emotional distress, or in difficult situations such as domestic violence. These groups may use FSP services because they are more accessible than other services. When seeking consent, particular regard should be given to addressing potential ethical issues for vulnerable people. These are:
 - fear of being identified and reluctance to give written consent. In these cases, verbal consent should be accepted;
 - fear of losing access to services because of negative feedback. This concern should be addressed in information materials and/or when renewing consent;
 - offering incentives: it is generally not appropriate to offer incentives as a recruitment method; and
 - poor literacy skills mean that the person is not able to read or comprehend information on consent forms or formally indicate their consent using a signature. Information about the research should be explained verbally, covering all aspects of the research and verbal consent accepted.
 Consent should be confirmed by the interviewer at the time of the follow-up interview.
- 3.5 Services should be mindful of circumstances in which a commitment to confidentiality may conflict with other ethical considerations, particularly where there is potential for serious harm to the person or others. Where a researcher may discover evidence of criminal activity or serious wrongdoing they have ethical and legal obligations to reduce further harm and fulfil obligations under the law or professional codes of conduct; these obligations may conflict with confidentiality agreements. For Family Support Services, ethical issues are likely to be around how a service provider manages any disclosure of malpractice, abuse or criminal behaviour. Examples include:
 - cases where an interviewee reveals illegal activity, such as domestic or child abuse, or breaching a court order. If considered a possibility, the service should warn the person about any legal limitations to confidentiality and specifically exclude confidentiality in those matters. Research protocols should cover how to deal with such disclosures, for example, explicitly reminding the person about the terms of their consent, if needed during the interview; and
 - confidentiality versus reporting of possible misconduct in a context where there are few independent qualified persons to investigate, and where the staff member against whom the complaint is being made is a colleague of the interviewer. In this situation the interviewer should inform the person of their rights to report the matter to appropriate authorities and also details of how to do so (complaints protocols). Adults have the right to choose

whether or not to make a complaint—it is not the role of the researcher to act on the person's behalf.

Principle 4—Beneficence (doing good)

The service is responsible for ensuring the client does not come to harm due to participating in the research. The design of the research should minimise risks of harm to clients, clarify the benefits of the research and any risk of harm, and ensure the welfare of clients in the data collection process.

- 4.1 There is an ethical responsibility to ensure interviewees do not come to harm because of the interview process. Follow-up interviews may trigger unwanted emotions or stress, or a client may reveal the need for further assistance during the follow up interview. Services should assess whether this is a potential risk for the specific group and individuals being followed-up, and consider providing additional support or remedial services for clients in need.
- 4.2 The researcher doing the interviews has no specific responsibility to assist a client who requires additional assistance. The service conducting interviews should develop protocols around actions a researcher should take during and after the interview if confronted by a client requiring further assistance. The service could also consider specific training for researchers to manage such situations.

Principle 5—Justice

The benefits and burdens of the research process should be distributed fairly and the process of recruiting clients be fair.

Indigenous-specific services should reference the 'NHMRC, Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research (2003)' when applying this principle.

- 5.1 Services should use fair and defensible processes to select or exclude clients, taking into account the objectives of collecting outcomes data.
- 5.2 Consider and account for potential effects of differences and inequalities in society related to race, age, gender, sexual orientation, physical and intellectual disability, religion, socio-economic or ethnic background, in how follow-up information is collected.
- 5.3 Indigenous Australians have experienced little direct benefits in the past from participating in research and as such it will be important to share the results of the research and/or any changes needed to service delivery with the community in a manner approved by community elders or relevant community groups.
- 5.4 Ensure all clients are treated respectfully and with adequate cultural sensitivity.