

May 2024 II

Evaluation of the Services Our Way Program

Summary Report

For the New South Wales Aboriginal Housing Office



Services Our Way

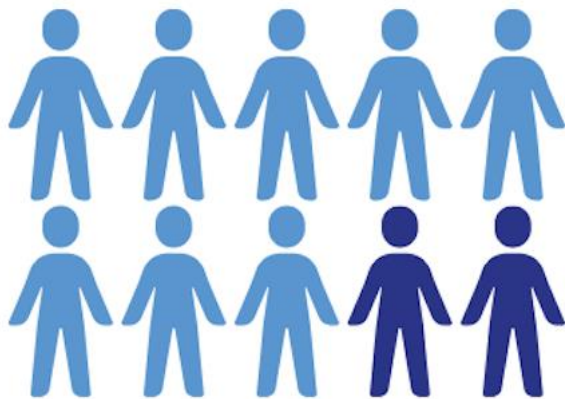
Key findings from a mixed-methods evaluation

1,405

Clients were supported across 6 SOW sites between July 1 2020 and December 31 2022

62%

Of clients were referred for support to secure stable or habitable housing

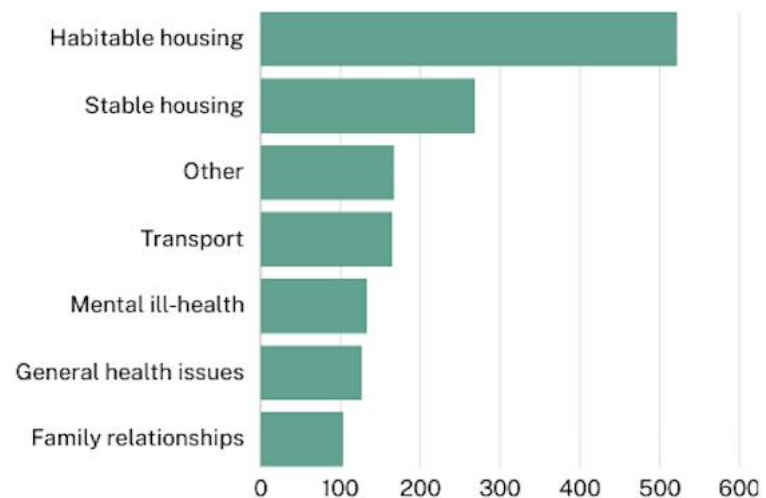


8 OUT OF 10

Clients were referred to SOW by external service providers

82%

Of clients had a **primary goal related to housing** - other common goals were related to **transport, general or mental health and family relationships**



Services Our Way

Key findings from a mixed-methods evaluation

11%

Of clients were **considered high-risk** and **required urgent support**

93%

Of clients **with self-identified goals** had **achieved these goals** when they exited the program

97%

Of clients who completed an exit survey were **very satisfied** with the service they received

Client **personal wellbeing significantly improved** after engaging with SOW - from **52.6 at baseline** to **65.5 at follow-up** on a scale from 0 - 100

An estimated

\$51

is required to provide SOW services to one client per day

SOW delivers a **positive return on investments** with an estimated

\$1.24

generated in returns for every dollar invested

Summary report

This summary report presents an overview of the findings of a mixed-method evaluation of the Services Our Way (SOW) program. SOW is an Aboriginal-led, trauma-informed care coordination service delivered by the Aboriginal Housing Office (AHO). The program is designed to support Aboriginal and Torres Strait Islander people and families who are vulnerable and have complex needs. Aboriginal staff work with clients to develop culturally appropriate and tailored support plans to assist clients to achieve their self-identified goals and improve client wellbeing. In order to achieve these outcomes, SOW offers a range of supports – including linkage with external services, advocacy support and brokerage for essential items.

In this summary report, the evaluation team – Centre for Evidence and Implementation (CEI) in partnership with Curijo and Monash University – present evidence demonstrating that the SOW program assists clients with multiple, complex needs to achieve their goals through the provision of culturally appropriate, client-centred supports. The program is highly valued by clients and stakeholders, has a significant, positive impact on client wellbeing and offers good value for money.

Evaluation design

The evaluation team undertook a mixed-methods evaluation of SOW comprised of three core components – a process evaluation, an outcomes evaluation and a cost-benefit analysis. The purpose of this evaluation was to assess the effectiveness of SOW against its stated aims and objectives with a focus on assessing the quality of its implementation, achievement of client outcomes and its value for money.

The evaluation was guided by a conceptual framework developed by CEI for evaluating complex human services interventions. The framework consists of three core domains – reach, fidelity and outcomes – and two cross-cutting factors – implementation and cultural

appropriateness. These components informed the development of a series of evaluation questions explored in this report. Broadly, this includes:

- Reach – to what extent does SOW reach its intended clients?
- Fidelity – to what extent is SOW delivered as intended?
- Outcomes – to what extent is SOW meeting the needs of its clients and achieving its intended outcomes?
- Implementation – what barriers and enablers are present across implementation and program delivery?
- Cultural appropriateness – how does SOW ensure clients receive culturally safe and appropriate support?

Findings presented in this report are derived from quantitative and qualitative data collected from various sources – these include:

- Administrative data collected by SOW staff and stored in the SOWsmart database – with the sample limited to cases with a case allocation date on or after July 1 2020 and before December 31 2022 and those without a case allocation date assigned
- Review of case file notes on 40 clients across all six SOW sites – including standard and episodic cases and active and exited cases
- Interviews and focus groups held with 81 participants – including 37 SOW clients across all SOW sites, 26 SOW staff, and 18 external stakeholders from diverse sectors
- A brief exit survey completed by 62 SOW clients on exit from the program

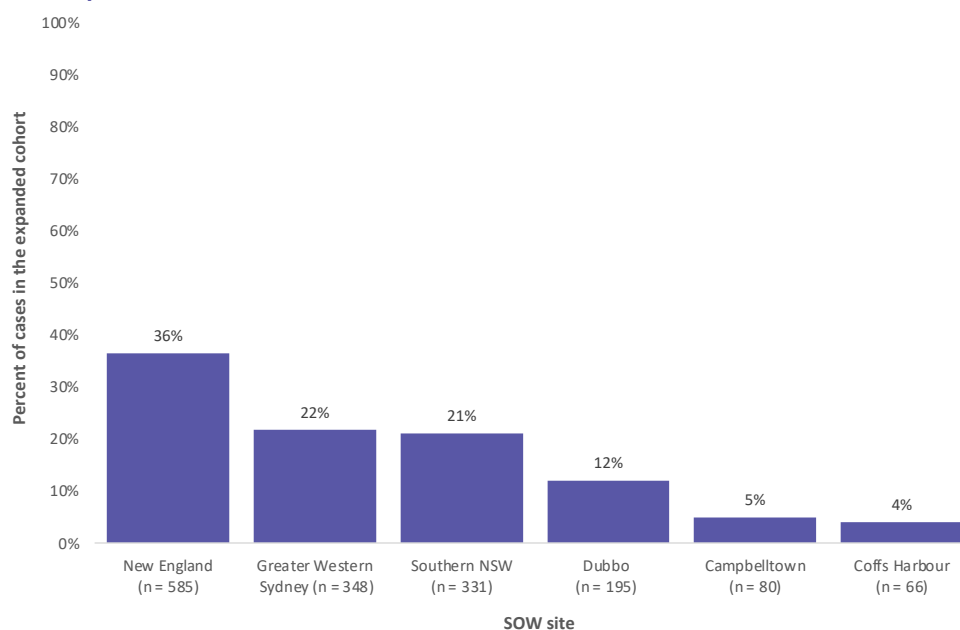
Where possible, data collected from multiple sources were triangulated to inform the key findings presented in this report.

Key findings

Key finding 1: SOW successfully reached its intended target population – however clients were predominately female and tended to be younger

Between July 1 2020 and December 31 2022, the SOW program supported a total of 1,605 cases involving 1,405 clients across six SOW sites. The distribution across sites is outlined below in Figure 1.

Figure 1 Percentage of cases in the expanded cohort by SOW site (n = 1,605)



SOW reached its intended target population – however, clients were predominately female (1,020/1,405, 73%) and tended to be younger, with an average age of 37 years – see Figure 2 and Figure 3. The tendency for SOW participants to cluster towards the younger end of the age range is likely reflective of both the age distribution of the Aboriginal population in general, and the fact that there are additional services and supports available for elders.

Figure 2 Gender of clients in the expanded cohort (n = 1,405)

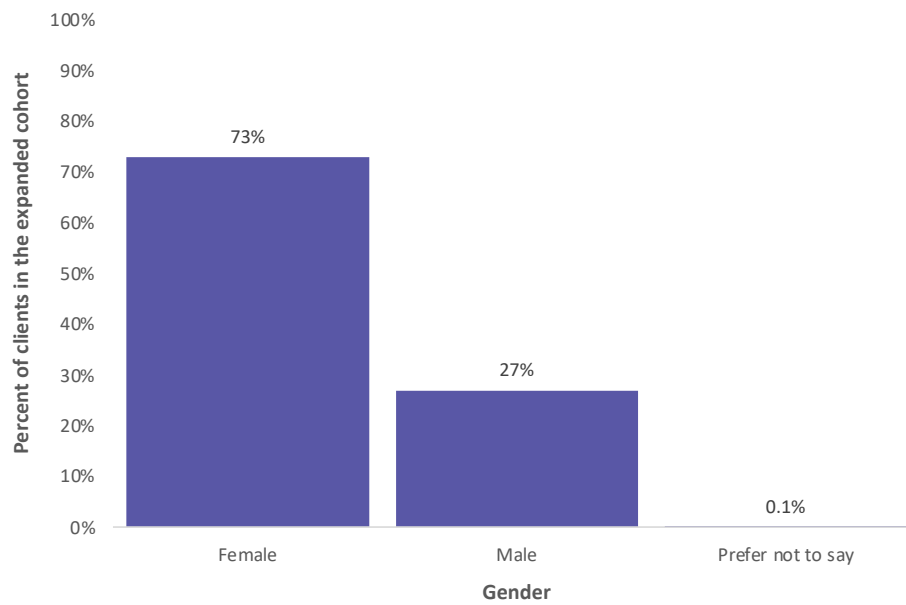
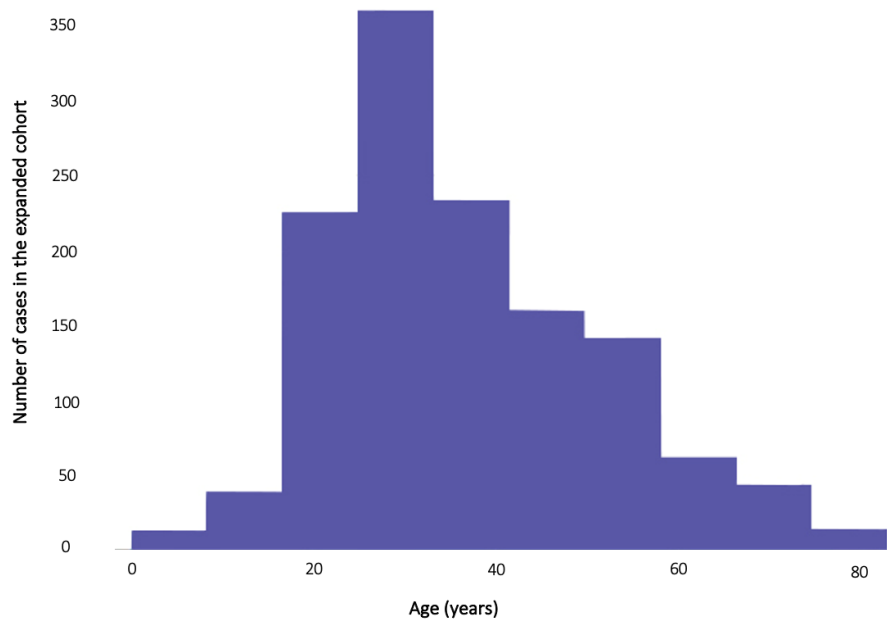


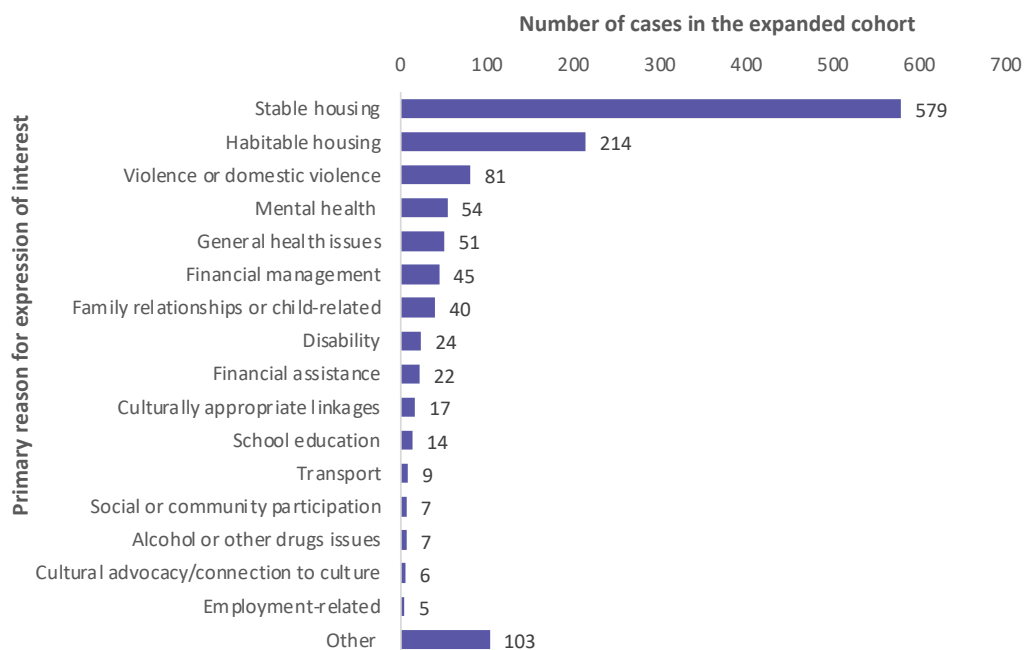
Figure 3 Age of clients in the expanded cohort at time of expression of interest



Key finding 2: Clients who presented to SOW were experiencing multiple, complex challenges and required a range of support to meet their needs

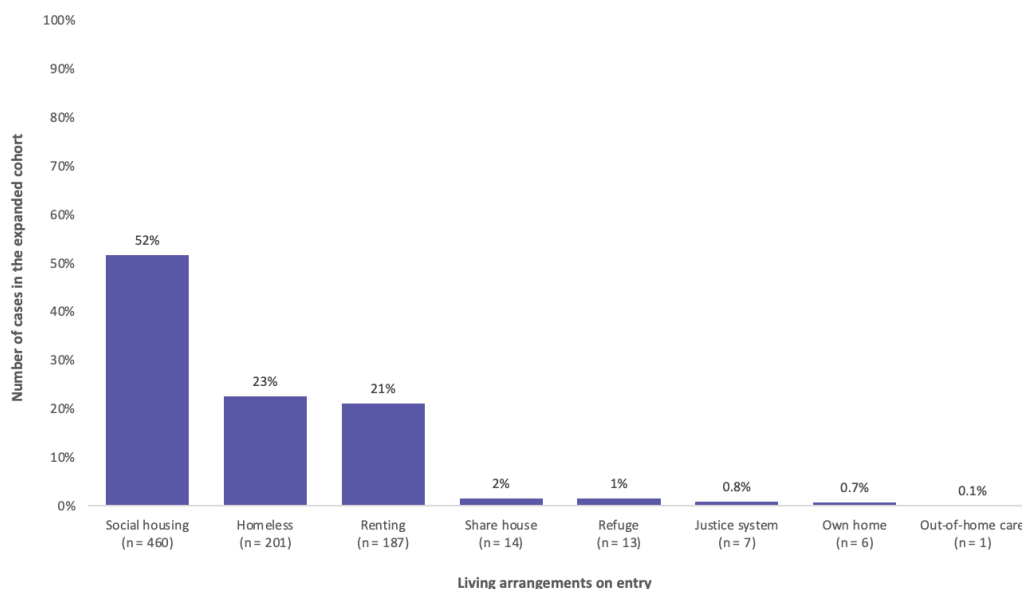
Clients were primarily referred to SOW for housing-related assistance (62%); however, clients often presented with multiple, complex needs and required a range of supports – see Figure 4.

Figure 4 Primary reason for expression of interest for cases (n = 1,278) in the expanded cohort



Clients were often living in social housing (52%) or were homeless on entry to the program (23%) – see Figure 5. Many of those who were in social housing had unstable tenancies and required support to avoid eviction or secure more stable accommodation.

Figure 5 Living arrangements on entry to SOW for clients in the expanded cohort (n = 889)

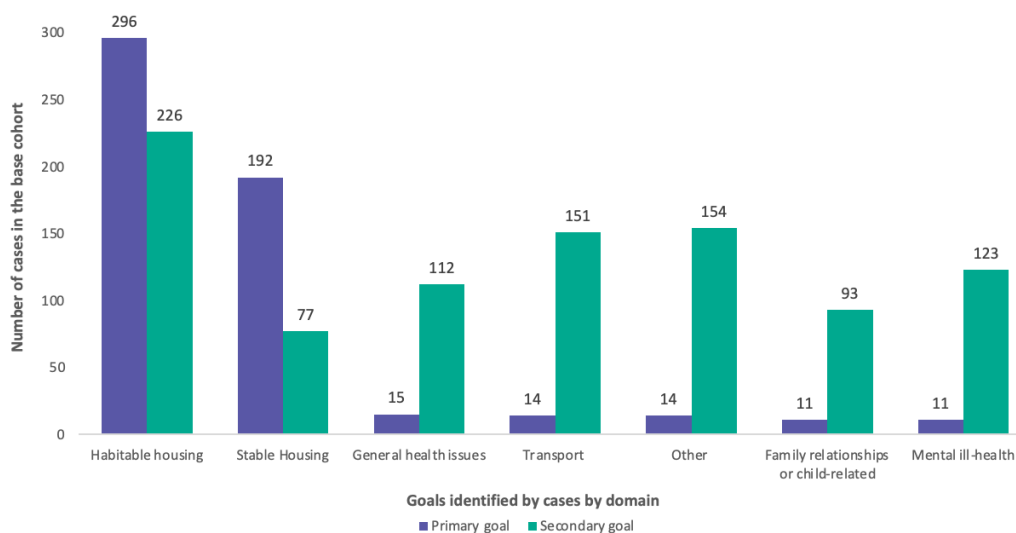


Note: A proportion of clients (n = 716) did not have living arrangements documented on entry to SOW.

Clients who were housed often required support to increase the habitability of their accommodation (50% of all goals identified by clients were related to housing habitability)

– either to reduce health and safety risks or to obtain essential household items for day-to-day living. In addition to housing-related needs, some SOW clients reported interactions with the child protection system (14%) and a proportion of cases reported previous interactions with Community Services (7%) and/or Juvenile Justice (1%). In addition, clients also reported mental health issues (19%), drug or alcohol abuse (9%) and domestic (9%) or family violence (2%). These complexities often informed the primary and secondary goals identified by clients when working with SOW staff to develop their support plans – which determined the assistance provided by SOW – see Figure 6.

Figure 6 Common primary and secondary goals identified by standard cases in the base cohort (n = 1,021)



Key finding 3: SOW provided flexible, tailored support to meet the needs and goals of clients

SOW provided a range of financial and in-kind supports to assist clients to achieve their goals and improve long-term wellbeing. The types of support offered were dependent on the needs and goals of clients and often aimed to fill gaps in support provided by other service providers. Material or financial support was primarily provided when a client experiencing significant hardship required assistance to purchase basic household items or needed support with household maintenance and/or property care. Of the 40 case files reviewed, 50% of clients were provided support to purchase basic household items and 23% were supported with household maintenance. The ability of SOW to provide financial support in a flexible, tailored way was an important feature of the program and allowed SOW to fill gaps in supports offered by other service providers.

In-kind support was often provided by SOW in the form of referrals or advocacy support. SOW helped many clients navigate the often-complex housing sector – either by supporting clients to submit housing applications or to understand and navigate the terms of their tenancy agreements. SOW staff also assisted clients by advocating on their behalf for more secure and appropriate accommodation. SOW staff spent a significant amount of time liaising with external service providers to ensure clients were supported holistically and to link clients with the wider service sector in their communities.

Key finding 4: Cultural safety was a key feature of service delivery and was embedded throughout the SOW program

SOW was delivered exclusively by Aboriginal staff – this enabled the program to adopt culturally safe and appropriate practices when working with clients. Clients reported that SOW staff created a safe and judgement-free space for them to express their needs and frustrations. As staff were well-connected within their communities, they were said to understand how to navigate cultural and community dynamics to enable effective communication and improve support provision. The ability of SOW to incorporate culturally safe and appropriate practices was noted by staff to be enhanced by having Aboriginal staff at the management level. Because Aboriginal managers understood cultural dynamics and ways of working, they were said to be better able to support staff working directly with clients. In addition, by modelling and mentoring other service providers to provide culturally appropriate support, SOW was thought by stakeholders to have had an impact on the ability of some mainstream services to work with Aboriginal clients in a culturally safe and appropriate way.

Key finding 5: Staff delivered the core elements of SOW in line with the operations manual, some adopted a flexible approach to service delivery to mitigate system-level barriers

SOW staff generally delivered the program in line with procedures outlined in the SOW operations manual – however, some staff adopted flexible approaches to service delivery in order to mitigate system-level barriers to implementation. This primarily pertained to the way in which episodic support was provided. Although episodic support was intended to be reserved for low-risk clients who required minimal support, it was sometimes used as an interim way to initiate support for clients who required longer-term assistance. This was done to navigate the high demand and long wait periods of SOW and the overburdened service sector. Wait times for entry into SOW ranged from 3 – 50 days depending on the SOW site. Providing some clients episodic support allowed SOW staff to address priority issues and commence support plans that could then be actioned while clients were waiting to receive SOW services.

Prioritisation of clients was noted by staff to become increasingly difficult as demand for SOW increased. Given the long wait times to access SOW in some sites, assigning prioritisation at the referral stage became more important to ensure clients who were most at-risk were supported first. However, the operations manual suggested prioritisation be completed after a case was made ‘active’ and some staff felt that the information provided in expression of interest (EOI) forms was often inadequate to assess priority at the referral stage. SOW staff voiced the need to update this process and upskill referrers to provide sufficient information in EOIs to enable effective prioritisation.

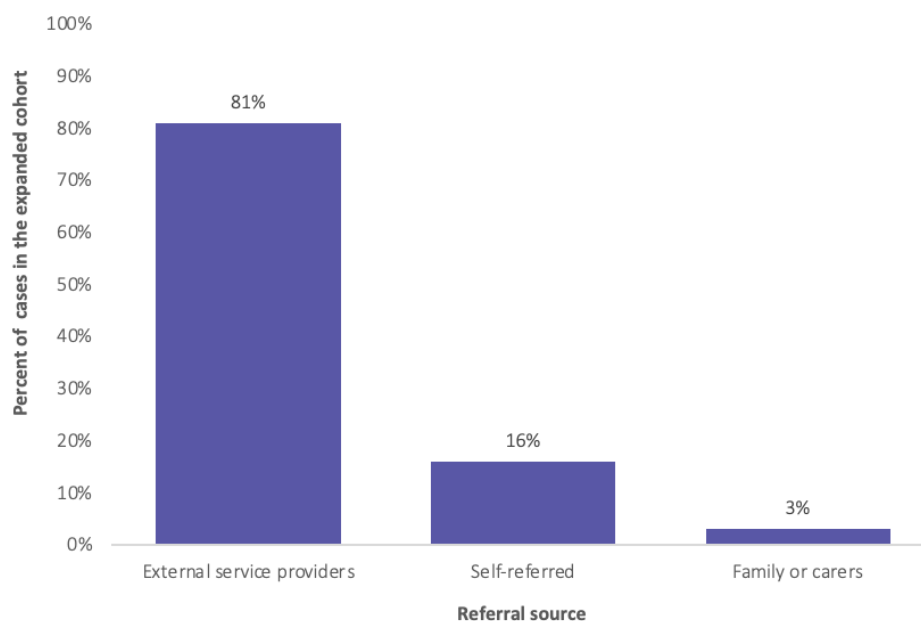
Some staff noted that other adaptations to SOW protocols made by management – including processes for gaining approval and sign-off on support plans – were not reflected in the operations manual and were not clearly communicated to staff. This was identified as a barrier to implementation as it caused confusion and inconsistencies in service delivery. Staff highlighted the need to review these processes, as well as eligibility criteria for SOW, in order to improve efficiencies and reduce barriers to client engagement.

Key finding 6: Strong partnerships with external service providers were considered vital to the successful implementation of SOW but some opportunities for improvement were identified

SOW staff and external service providers noted that they collaborated and worked in partnership to provide holistic, wraparound support to clients and their families. The effective and expansive relationships of SOW across the service sector were seen to act as a strong enabler of the successful implementation of the program. The majority of clients were referred by external organisations (81%) – see Figure 7. The external providers

interviewed understood the supports offered by SOW and appreciated the program's flexible and culturally appropriate approach to service coordination.

Figure 7 Percentage of cases in the expanded cohort presented by referral source



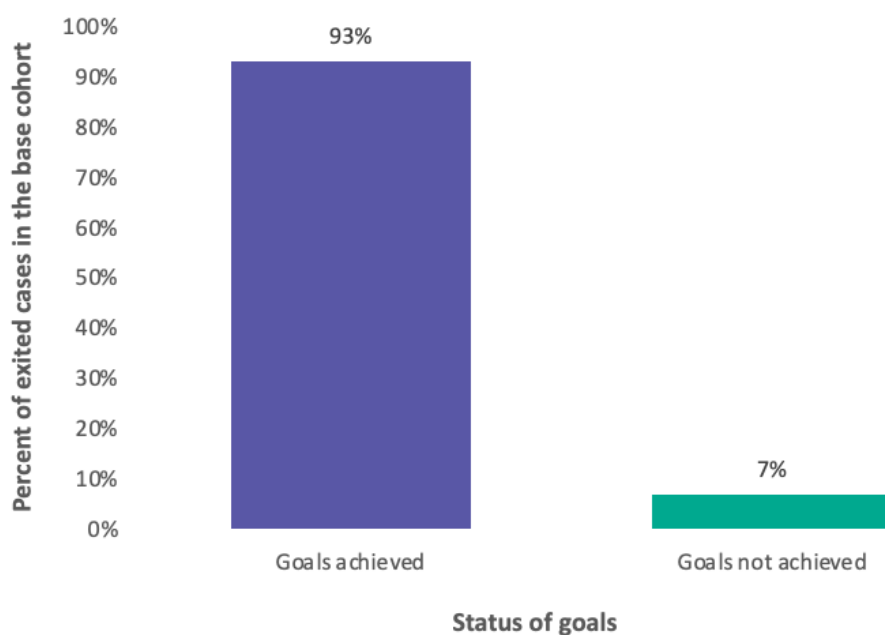
Despite these strong partnerships, limited communication between service providers and SOW sometimes challenged service integration. When present, clear and continuous communication enabled effective service delivery and prevented duplication of services. However, the high caseloads of SOW staff and a lack of quarantined time for effective communication hindered collaborative service provision at times. Furthermore, the scope of SOW was reportedly unclear to some service providers who did not understand the range of services SOW offered and how the program fit within the wider service sector. SOW staff felt that this may have negative implications on who is and is not referred to SOW.

Key finding 7: Clients were highly satisfied with supports provided by SOW, and many were assisted to achieve their goals

SOW clients valued and were highly satisfied with the supports provided by SOW. Of those who completed a brief survey on exit, almost all indicated they were 'very satisfied' with the SOW program (60/62, 97%). Clients stated that they appreciated the open, judgement-free environment created by SOW staff and felt understood and respected. Clients reported significant improvements to their overall wellbeing as a result of engaging with SOW – including reduced stress and improved physical, mental and emotional wellbeing. This was attributed to the program's flexible, client-driven, holistic and culturally safe approach to service delivery, as well as the dedication and capability of SOW staff.

The majority of clients who exited the program and had self-identified goals were supported to achieve these goals (365/392, 93%) – see Figure 8. Few clients returned to SOW after exiting the program (173/1,405, 12%) – this suggests that for most clients, SOW had a sustainable impact on goal achievement.

Figure 8 Percent of exited cases in the base cohort presented by goal achievement status (n = 392)



Key finding 8: Social and emotional wellbeing supports are now more readily available to SOW staff, but some supports are perceived as more beneficial than others

Progress has been made in improving the social and emotional wellbeing supports available to SOW staff based on recommendations outlined in the formative interim evaluation conducted by Urbis and CIR (2019). SOW staff reported that they have been offered several formalised support options – however, satisfaction with these supports varied and some staff did not find these supports beneficial. Informal supports – such as peer-to-peer debriefings and supports offered by SOW managers – were, however, highly regarded by staff. Despite these improvements, some staff reported ongoing vicarious trauma, compassion fatigue and concerns about personal safety as a result of their work with clients. Site-specific strategies have been incorporated to reduce safety risks; however, the development of program-wide strategies would be beneficial to protect staff and improve comfort when working directly with clients.

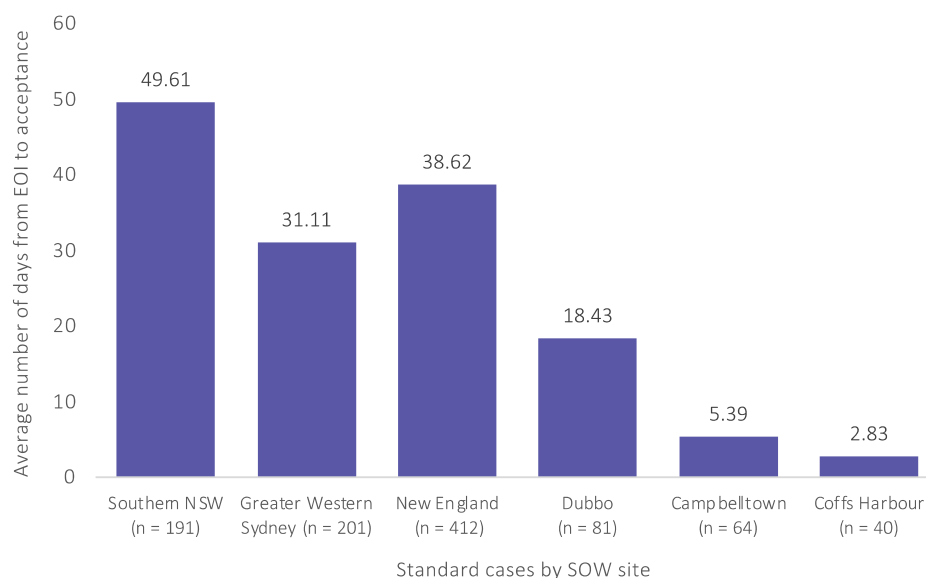
Key finding 9: The demand for SOW exceeds current staffing capacity and extends beyond the program’s catchment area

The current demand for SOW is high and the program is unable to meet this demand at current staffing levels. This has resulted in long wait times for clients to access the program at some sites. The average number of days from referral to acceptance varied by SOW site – ranging from 2.83 to 49.61 days – with smaller sites having shorter wait periods (see Figure 9). This suggests some SOW sites have insufficient resources to meet local demand despite increasing the caseloads of SOW staff and managers. Staff noted that their capacity to meet demand was exacerbated by unfilled and limited support roles designed to offset the administrative burden of staff who work directly with clients. Long wait times may be particularly detrimental for the most at-risk clients who require urgent support.

The demand for SOW was also said by SOW staff and clients to extend past the program’s current catchment area. SOW currently provides services across 27 local government areas

in NSW – however, some clients who were referred to SOW were ineligible due to living out-of-area (n = 18). SOW staff and clients suggested the demand for SOW in other areas may be far greater than what is captured in the administrative dataset as referrals may not be submitted when referrers know clients are ineligible for the program.

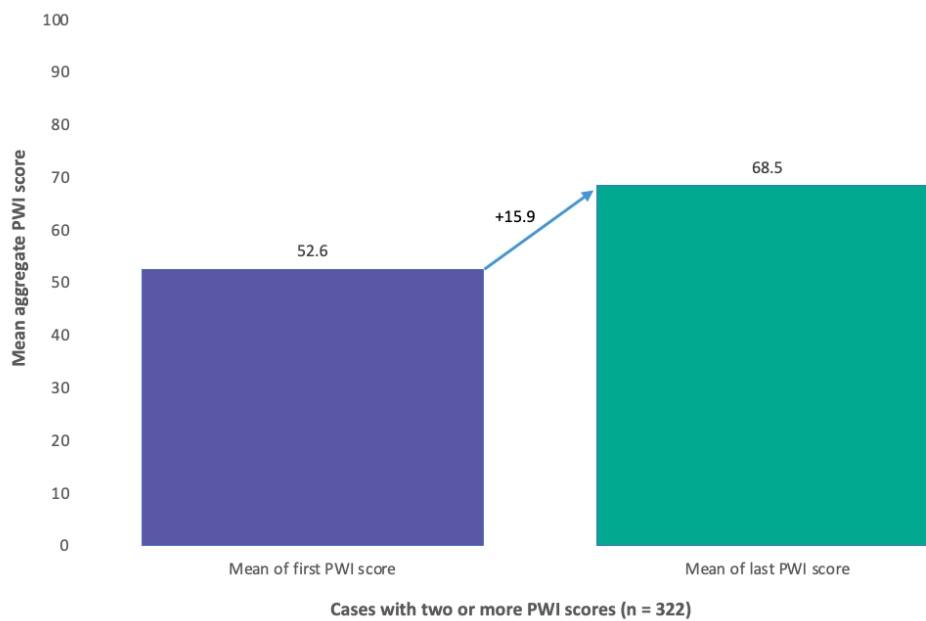
Figure 9 Average number of days for clients to transition from EOI to active status (n = 1,021)



Key finding 10: Personal wellbeing significantly increased for clients who participated in SOW

The Personal Wellbeing Index (PWI) – a measure of subjective wellbeing – was administered to SOW clients on entry to the program. The assessment was to be repeated every three months and on exit from SOW. For clients with two or more PWI assessments (n = 322), overall subjective wellbeing significantly increased after participating in the SOW program ($p < 0.001$). This was consistent across all SOW sites included in the analysis. At baseline, clients had an average overall PWI score of 52.6 – a score considered to indicate a ‘compromised’ level of personal wellbeing. This is not surprising given the complex challenges clients were facing when they entered the program. Overall personal wellbeing increased on average by 15.9 points from baseline to last PWI with a final average PWI score of 68.5 – a score just below the Australian population norm – see Figure 10. Significant improvements to personal wellbeing were also observed when analysed at the domain level ($p < 0.001$).

Figure 10 Overall mean difference of the aggregate PWI score/100 for all cases with two or more PWI assessments (n = 322)



Key finding 11: The SOW program represents good value for money

The cost-benefit analysis (CBA) suggests that the benefits of SOW outweigh the costs required to deliver the program. An estimated \$51 is required per day to provide SOW services to a single client. For every dollar invested in SOW, the program is expected to generate approximately \$1.24 in return. When considering uncertainty, the lowest estimated return is \$1.24 for every dollar invested and the highest is \$1.25. This indicates that – despite having relatively high upfront costs – the benefits accrued over time exceed these costs. These results indicate a high level of certainty that SOW delivers a positive return on investment.