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Program Specific Guidance for Commonwealth Agencies in the Data Exchange



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# Introduction

**Purpose of this document**

This document provides policy guidance on entering data into the Data Exchange in a consistent way that best reflects the program activity being delivered. It is divided into two parts:

* Program specific guidance for **Commonwealth agencies** (this document)
* Program specific guidance for **State agencies**.

These guidelines should be read in conjunction with:

* Data Exchange [Protocols](https://dex.dss.gov.au/document/81)
* Your funding agreement
* Your program guidelines
* The Task Cards and e-Learning modules available on the Data Exchange [website](https://dex.dss.gov.au/training-resources/)

**Intended use**

**Program Specific Guidance** (formerly Protocols – Appendix B) is intended to provide practical information for managers and front-line staff to better understand the data expected, and assist them in integrating SCORE outcomes and partnership data collection into existing service and administrative practices.

Additionally this guide aims to provide consistency on how program data is interpreted within program activities, and support a consistent interpretation of the Data Exchange protocols across commonly funded organisations.

This document will be periodically updated to provide more detailed guidance on questions as they arise and as new programs come on board to the Data Exchange. Users of this document are encouraged to provide feedback where further guidance related to their program activity is needed.

All resources associated with the Data Exchange are available on the Data Exchange [website](https://dex.dss.gov.au/) .

Contents

[Introduction 2](#_Toc127955810)

[DEPARTMENT OF SOCIAL SERVICES 6](#_Toc127955811)

[Outcome 2.1 – Families and Communities 6](#_Toc127955812)

[Families and Children Program 6](#_Toc127955813)

[A Better Life 7](#_Toc127955814)

[Budget Based Funded Program 10](#_Toc127955815)

[Children and Family Intensive Support 13](#_Toc127955816)

[Children and Parenting Support Services 15](#_Toc127955817)

[Children and Parenting Support Services – Ad hoc grants 18](#_Toc127955818)

[Communities for Children – Facilitating Partners 21](#_Toc127955819)

[Family and Relationship Services 26](#_Toc127955820)

[Family and Relationship Services – Specialised Family Violence Services 29](#_Toc127955821)

[Family Mental Health Support Services (FMHSS) 32](#_Toc127955822)

[Forced Adoption Support Services (FASS) 35](#_Toc127955823)

[Home Interaction Program for Parents and Youngsters (HIPPY) 38](#_Toc127955824)

[National Find and Connect 44](#_Toc127955825)

[Reconnect 47](#_Toc127955826)

[Redress Support Services 50](#_Toc127955827)

[Specialised Family Violence Services – Fourth Action Plan (SFVS-4AP) 54](#_Toc127955828)

[Financial Wellbeing and Capability (FWC) 56](#_Toc127955829)

[Commonwealth Financial Counselling and Financial Capability 57](#_Toc127955830)

[Financial Counselling Helpline (National Debt Helpline) 63](#_Toc127955831)

[Problem Gambling Financial Counselling 68](#_Toc127955832)

[Money Support Hubs 73](#_Toc127955833)

[Financial Resilience 79](#_Toc127955834)

[NILS-CV 86](#_Toc127955835)

[NILS-DV 91](#_Toc127955836)

[Financial Crisis and Material Aid – Emergency Relief 96](#_Toc127955837)

[Family Safety 99](#_Toc127955838)

[Accredited Training for Sexual Violence Responses: Recognising and Responding to Sexual Violence 100](#_Toc127955839)

[Domestic Violence Response Training (DV-alert) 103](#_Toc127955840)

[Escaping Violence Payment Trial 108](#_Toc127955841)

[Keeping Women Safe in their Homes 111](#_Toc127955842)

[Local Support Coordinators 113](#_Toc127955843)

[National Plan to Reduce Violence against Women and their Children 115](#_Toc127955844)

[Safe Technology for Women 118](#_Toc127955845)

[Protecting Australia’s Children 120](#_Toc127955846)

[Intercountry Adoptee and Family Support Service 121](#_Toc127955847)

[Social Impact Investing Initiatives 125](#_Toc127955848)

[Transition Funding for Successful Try, Test and Learn Projects 126](#_Toc127955849)

[Social Impact Investing – Payment by Outcomes Trials: PBO 1 Microenterprise Development Program 129](#_Toc127955850)

[Social Impact Investing – Payment by Outcomes Trials: Project 2 132](#_Toc127955851)

[Social Impact Investing – Payment by Outcomes Trials: PBO 3 Long-term Employment Outcomes 139](#_Toc127955852)

[Volunteering and Community Connectedness 142](#_Toc127955853)

[Be Connected 143](#_Toc127955854)

[Cashless Debit Card (CDC) Support Services / Cashless Debit Card (CDC) Support Services – Job Support Hubs 145](#_Toc127955855)

[SARC – Community Resilience 149](#_Toc127955856)

[SARC – Inclusive Communities (grants concluding 2022 or before) 151](#_Toc127955857)

[SARC – Inclusive Communities (grants commencing from 2022) 153](#_Toc127955858)

[Seniors Connected Program Village Hubs 159](#_Toc127955859)

[Outcome 3.1 – Disability, Mental Health and Carers 166](#_Toc127955860)

[Disability and Carer Support 166](#_Toc127955861)

[Digital Work and Study Service 167](#_Toc127955862)

[Disability Royal Commission - Advocacy Support 172](#_Toc127955863)

[Disability Royal Commission – Counselling Services 174](#_Toc127955864)

[ICSS Digital Counselling 177](#_Toc127955865)

[ICSS Carer Gateway service providers 180](#_Toc127955866)

[Individual Placement and Support program 188](#_Toc127955867)

[Individual Placement and Support Program: Adult Mental Health Pilot 194](#_Toc127955868)

[National Disability Advocacy Program (NDAP) 200](#_Toc127955869)

[National Disability Advocacy Program (NDAP) – Decision Support Pilot 204](#_Toc127955870)

[NDIS Appeals Program 209](#_Toc127955871)

[Tristate Carer Vocational Outcomes Program 214](#_Toc127955872)

[Young Carer Bursary Program (YCBP) 217](#_Toc127955873)

[Disability and Carer Service Improvement and Sector Support 219](#_Toc127955874)

[Disability Advocacy Support Helpline (DASH) 220](#_Toc127955875)

[Outcome 3.2 – National Disability Insurance Scheme 227](#_Toc127955876)

[NDIS Information Linkages and Capacity Building (ILC) 227](#_Toc127955877)

[Building Employer Confidence in Inclusion and Disability 228](#_Toc127955878)

[Outcome 4.1 – Housing and Homelessness 232](#_Toc127955879)

[Housing and Homelessness Service Improvement and Sector Support 232](#_Toc127955880)

[Foyer Central 233](#_Toc127955881)

[ATTORNEY GENERAL’S DEPARTMENT (AGD) 235](#_Toc127955882)

[Justice Services 235](#_Toc127955883)

[Specialist Elder Abuse Services 236](#_Toc127955884)

[Family Law Services 245](#_Toc127955885)

[Children’s Contact Services 246](#_Toc127955886)

[Family Dispute Resolution 248](#_Toc127955887)

[Regional Family Dispute Resolution 251](#_Toc127955888)

[Family Law Counselling 254](#_Toc127955889)

[Family Relationship Advice Line 257](#_Toc127955890)

[Family Relationship Centres 260](#_Toc127955891)

[Parenting Orders Program 263](#_Toc127955892)

[Supporting Children after Separation 266](#_Toc127955893)

[DEPARTMENT OF HEALTH 268](#_Toc127955894)

[Commonwealth Home Support Programme 268](#_Toc127955895)

[Assistance with Care and Housing sub-program 269](#_Toc127955896)

[Care Relationships and Carer Support sub-program 273](#_Toc127955897)

[Community and Home Support sub-program 278](#_Toc127955898)

[DEPARTMENT OF HOME AFFAIRS 287](#_Toc127955899)

[Settlement Services 287](#_Toc127955900)

[Economic Pathways to Refugee Integration 288](#_Toc127955901)

[Mutual Understanding Support, Tolerance, Engagement and Respect (managed by Department of Home Affairs) 292](#_Toc127955902)

[National Community Hubs Program 294](#_Toc127955903)

[Settlement Engagement and Transition Support (SETS) – Client Services 296](#_Toc127955904)

[Settlement Engagement and Transition Support (SETS) – Community Capacity Building 301](#_Toc127955905)

[Settlement Engagement and Transition Support (SETS) – Innovation Fund 304](#_Toc127955906)

[Youth Transition Support 307](#_Toc127955907)

[NATIONAL EMERGENCY MANAGEMENT AGENCY 310](#_Toc127955908)

[Rural Programmes 310](#_Toc127955909)

[Rural Financial Counselling Service (RFCS) 311](#_Toc127955910)

[Version History 315](#_Toc127955911)

# DEPARTMENT OF SOCIAL SERVICES

# Outcome 2.1 – Families and Communities

The Families and Communities Outcome has a number of services which provide early intervention and prevention support to families, children, young people, volunteers, refugees, migrants and other individuals with special circumstances. Priorities include activities to improve financial wellbeing and capability, strengthen communities, support migrant’s transition to life in Australia, and ensure the lifetime wellbeing of families and children.

The following pages provide practical guidance on data entry for Families and Communities program activities.

## Families and Children Program

Services and initiatives to support families, strengthen relationships, improve the wellbeing of childrenand young people, enhance family and community functioning, and build capacity within the families and communities sector.

The following program activities are included in Families and Children Program:

* A Better Life
* Budget Based Funded Program
* Children and Family Intensive Support
* Children and Parenting Support Services
* Children and Parenting Support Services – Ad hoc grants
* Communities for Children Facilitating Partners
* Family and Relationship Services
* Family and Relationship Services – Specialised Family Violence
* Family Mental Health Support Services
* Forced Adoption Support Services
* Home Interaction Program for Parents and Youngsters
* National Find and Connect
* Reconnect
* Redress Support Services.
* Specialised Family Violence Services – Fourth Action Plan (SFVS-4AP)

### A Better Life

**Description**

A Better Life (ABLe) provides increased opportunities for recovery for people aged 16 years and over whose lives are affected by mental illness. ABLe assists clients in overcoming social isolation and increases their connections to the community. Participants are supported through a recovery-focused and strengths-based approach that recognises recovery as a personal journey driven by the participant.

**Who is the primary client?**

Primary clients for this program activity are people aged 16 to 65 residing in a Cashless Debit Card locations, who have a mental illness that includes drug and alcohol misuse and/or problem gambling disorders.

**What are the key client characteristics?**

* + People aged 16 to 65 years of age, who have a mental illness that includes drug and alcohol misuse and/or problem gambling disorders
* People issued with a Cashless Debit Card or reside in a Cashless Debit Card location
  + People willing to participate in the service voluntarily, to address drug or alcohol misuse and/or problem gambling.

Priority access to the following target groups:

* + Young people aged 16 to 24 years of age
  + People who are homeless or at risk of homelessness
  + People who have previously been institutionalised (including Forgotten Australians, care leavers and child immigrants)
  + Young people leaving out-of-home care
  + People who have been previously incarcerated
  + People from a cultural and linguistically diverse background, including humanitarian entrants and recently arrived migrants and refugees
  + People identifying as Aboriginal and/or Torres Strait Islander.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families, children, parents or guardians of clients, or a carer or care recipient (who are present but not directly receiving a service).

**Should unidentified clients be recorded?**

ABLe has limited use for unidentified clients. This program provides face-to-face support where clients are known to the service, therefore it is expected that only **10 per cent** of your clients **or less** should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. However, organisations can create a separate case for each individual accessing service. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 1286. This works well for ongoing one-on-one contact with clients.

For organisations that deliver services in large group settings (such as an information session or education program), cases can also be created to record these interactions, and should be titled in a way that allows staff to easily enter data and use the case over multiple reporting periods, i.e.: Case ID = ‘Drug Rehabilitation Workshop’.

**Recording outcomes data using SCORE**

Organisations can choose to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is typically recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. If it is appropriate, you can also collect SCORE assessments periodically throughout service delivery.

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Employment * Family functioning * Housing * Financial resilience * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Personal and family safety * Physical health | All six Goals outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial meeting with a client during which the organisation gathers information on the client’s needs and matches them to services available, and/or assesses a client’s eligibility for participation in a particular service. This is usually (but not limited to) the first session a client attends. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic such as an information session on drug and alcohol awareness, referrals to another service internal or external for example housing, Drug and Rehabilitation Centres etc. |
| Education and skills training | Assisting a client in learning or building knowledge about a topic or aimed at developing a skill, such as drug and alcohol awareness and problem gambling addiction courses. This includes accessing education and training including re‑engaging with the education system. |
| Counselling | Working through a particular issue such as relationship concerns or financial concerns, personal support and family interventions and employment, as delivered by an industry recognised qualified staff member. |
| Advocacy/Support | Advocating on a client’s 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. |
| Mentoring/Peer support | Provision of specialised support, information and role-modelling from a person who identifies as having lived experience of disability and/or mental health condition, or a person who is a carer of someone with a disability and/or mental health condition.  This service type is not limited to just ABLe peer support workers but can be selected for any service where the primary goal was to provide mentoring or peer support. |
| Facilitate employment pathways | Assistance in applying for work/training courses, creating CVs/resumes/selection criteria, supporting a client at interview, career and education development, assisting with navigating employment sites, education on preparing for an interview, practice interviews. |
| Transportation services | Provision of transport to assist clients to access services and attend appointments, such as attendance at rehabilitation or other clinical services. |

### Budget Based Funded Program

**Description**

The Budget Based Funded (BBF) activity focuses on providing families with flexible, affordable and accessible adjunct care and early learning services. Early learning services should be responsive to the needs of today’s families (who do not always work the traditional nine-to-five day, five-day working week) to ensure that children are fully prepared for learning and life. The objective of BBF is the provision of quality services for families that promote positive learning and development outcomes for school readiness and allow parents to access educational and training opportunities.

**Who is the primary client?**

The child is the primary client where activities target infant- to primary-school-age children, or assist disadvantaged parents or migrant families with caring responsibilities for children.

The parents or legal guardians of children are also primary clients where activities target training for parents, parental capacity building and family counselling sessions.

**What are the key client characteristics?**

All families, however, organisations should identify and target all families in their communities who are most in need of support, which may include families:

* that arrived in Australia in the last five years
* with cultural and linguistically diverse backgrounds
* identifying as Aboriginal and/or Torres Strait Islander
* residing in communities with low Socio-Economic Indexes for Area (SEIFA) scores
* residing in rural or remote areas
* receiving government payments, pensions, allowances and/or cashless debit cards
* who are unemployed, ill, studying and/or experiencing financial distress
* unable to access services that cater for the traditional nine-to-five, five-day working week.

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include, but are not limited to, family members, guardians, carers, case workers, friends or mentors.

Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

**No more than 10 per cent** of an organisation’s clients in a reporting period should be recorded as unidentified clients. The department expects organisations to deliver services to clients who are known to their staff.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

If an organisation primarily delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

If an organisation primarily delivers services to couples or families, a case can be created for each group of individuals. This means all contact with members of a group, whether some or all, is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID.

**The partnership approach**

All organisations are required to participate in the partnership approach. For BBF, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics data from their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Family functioning * Age appropriate development * Community participation and networks * Education and skills training * Employment * Mental health, wellbeing and self-care * Personal and family safety * Physical health | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant to this program activity. | * Organisational knowledge, skills and practices * Group/community knowledge, skills, attitudes and behaviours * Social cohesion |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Carer support | Supporting carers to establish and maintain relationships with individuals and/or organisations that are able to provide support and services to maintain their own wellbeing and caring role while maintaining or improving their employment/educational opportunities. |
| Child/Youth focussed groups | Sessions targeted at children or youth, and delivered in a group setting rather than on an individual basis. Examples include school-based groups such as breakfast clubs, skill building groups and awareness raising activities for children/youth. |
| Counselling | Includes one-on-one as well as family group counselling sessions that are delivered/facilitated by a qualified practitioner. |
| Education and skills training | Assisting parents and carers (as clients) to learn or build knowledge about a topic, or develop a skill that is relevant to the client’s circumstances. This includes accessing education and training, including re-engaging with the education system. |
| Family capacity building | Service delivery to children and parents together with a focus on supports such as relationship building and communication. For example: supported and community playgroups; home-based support, including assistance with developing family-centred activities, establishing routines and practical help with tasks. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic or where a referral was made to another service provided within or external to the organisation. Examples include informal parenting advice. |
| Intake and assessment | Initial meeting with clients to gather information and match them to services. |
| Exit Interview | A client is exiting the program and will no longer be receiving services.  A SCORE assessment could be conducted at this time. Use the 'Exit Reason' field at the Case level to indicate why the client is exiting the program. |

### Children and Family Intensive Support

**Description**

Children and Family Intensive Support (CaFIS) provide support to families living in selected communities in the Northern Territory (NT) and Anangu Pitjantjatjara Yankunytjatjara (APY) Lands in South Australia so that these children are growing up strong in families and communities that are safe and nurturing. CaFIS will provide services that build on the strengths of families and communities to care for children in their culture. It will support parents and family members to develop their confidence and capability to bring children up strong, support co-ordinated services to meet the needs of families and address areas of concern that impact on children’s safety and wellbeing.

**Who is the primary client?**

Primary clients for this program activity are children, carers and families.

**What are the key client characteristics?**

Families in identified communities with children aged 0-18 years.

This may include people:

* from a cultural and linguistically diverse background
* identifying as Aboriginal or Torres Strait Islander
* residing in a regional or remote area
* under 18 years / children

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include carers of clients, mothers, partners of fathers, guardians or family members (who are present but not directly receiving a service), case or support workers.

**Should unidentified clients be recorded?**

CaFIS services have limited use for unidentified clients. This program provides face-to-face support where clients are known to the service, therefore it is expected that **no more than** **2 per cent** of your clients should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes.

**The partnership approach**

All organisations are required to participate in the partnership approach. For CaFIS, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics data from their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 50 - 60 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 50 - 60 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least 10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations should also record a SCORE assessment every 6 months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant for this program activity?**

Organisations are expected to record outcomes in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Personal and family safety | * Changed behaviours * Changed impact of immediate crisis * Changed knowledge and access to information * Changed skills * Engagement with relevant support services | * I am better able to deal with issues that I sought help with | * Group/community knowledge, skills and behaviours |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Collecting extended data**

For this program activity, organisations are encouraged to collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Session Level Data** | **Case Level Data** |
| * Homeless indicator * Main source of income * Is client a carer | * Referral out (type and purpose) * Service setting | * Attendance profile * Referral in (source and reason for seeking assistance) |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial engagement, family planning. |
| Information/Advice/Referral | Referral to other services, service planning and case work. |
| Education and skills training | Parenting and life skills training and education. |
| Advocacy/Support | Advocacy on behalf of the client, support of the client - with the clients permission, speak on behalf of the client to represent their views and needs. |
| Community capacity building | Activities that promote community relationships and awareness, group workshops/activities, provision of information/education sessions, interagency service meetings. |
| Family capacity building | Activities that promote strong family interactions, group workshops/activities. |

### Children and Parenting Support Services

**Description**

Children and Parenting Support (CaPS) focuses on early intervention and prevention services and resources aimed at improving children’s development and wellbeing, and supporting the capacity of those in a parenting role. Services actively seek to identify issues that are, or could, impact on child or family outcomes, and provide interventions or appropriate referrals before these issues escalate. Services have a primary focus on children aged 0-12 years, but may include young people up to age 18 years as necessary.

**Who is the primary client?**

Primary clients for CaPS are children aged 0-12 and those in a parenting role, but may include young people up to age 18 years as necessary.

**What are the key client characteristics?**

Children aged 0-12 years (and young people up to 18 years).

Specific groups of vulnerable and disadvantaged children, young people and families who are at risk of poor outcomes, which may include those:

* from cultural and linguistically diverse backgrounds
* identifying as Aboriginal and/or Torres Strait Islander
* identifying as having a condition, impairment or disability
* supporting children with additional needs (including children with disability or chronic medical conditions)
* who lack social supports
* experiencing mental illness, alcohol or other drug issues, or domestic violence issues

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include, but are not limited to, family members, guardians, carers, case workers, friends or mentors.

Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

**No more than 10 per cent** of an organisation’s clients in a reporting period should be recorded as unidentified clients. The department expects organisations to deliver services to clients who are known to their staff.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

If an organisation primarily delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

If an organisation primarily delivers services to couples or families, a case can be created for each group of individuals. This means all contact with members of a group, whether some or all, is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID.

**The partnership approach**

All organisations are required to participate in the partnership approach. For CaPS, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics datafrom their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least** **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least** **50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Family functioning * Age-appropriate development * Community participation and networks * Education and skills training * Employment * Material wellbeing * Mental health, wellbeing and self-care * Personal and family safety * Physical health * Housing | All six Goal outcomes are relevant to this program activity. | All three Satisfaction outcomes are relevant to this program activity. | Community structures and networks |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial meeting with clients to gather information and match them to services. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic or where a referral was made to another service provided within or external to the organisation. |
| Education and skills training | Assisting parents and carers (as clients) in learning or building knowledge about a topic, or develop a skill that is relevant to the client’s circumstances. This includes accessing education and training, including re-engaging with the education system. |
| Child/Youth focussed groups | Sessions targeted at children or youth, and delivered in a group setting rather than on an individual basis. Examples include school-based groups such as breakfast clubs, skill building groups and awareness raising activities for children/youth. |
| Counselling | Includes one-on-one as well as family group counselling sessions that are delivered/facilitated by a qualified practitioner. |
| Advocacy/Support | Advocacy on behalf of the client, or collaboration with other services and specialists, or collaboration with community stakeholders and networks. |
| Community capacity building | Targeted at building and/or strengthening a community’s skills/cohesion or understanding of a topic. Community capacity building activities are delivered to a group rather than individuals or families. |
| Family capacity building | Service delivery to children and parents together with a focus on supports such as relationship building and communication. For example: supported and community playgroups; home-based support, including assistance with developing family-centred activities, establishing routines and practical help with tasks. |
| Mentoring/Peer support | Group work offering participants support through discussion and activities. Generally includes a facilitator. |
| Exit Interview | A client is exiting the program and will no longer be receiving services.  A SCORE assessment could be conducted at this time. Use the 'Exit Reason' field at the Case level to indicate why the client is exiting the program. |

### Children and Parenting Support Services – Ad hoc grants

**Description**

Provide early intervention and prevention support to children and their families. Services seek to identify issues such as risk of neglect or abuse, within families, and provide interventions or appropriate referral(s) before these issues escalate. Children and Parenting Support Services (CaPS) – Ad hoc grants aim to improve children’s development and wellbeing, (with a focus on school-age children) and support the capacity of those in a parenting role.

Note, only the client-facing aspects of this program will report via the Data Exchange (i.e. not the development of websites, or web-based resources).

**Who is the primary client?**

Primary clients for CaPS – Ad hoc grants are children aged 0-12 and those in a parenting role, but may include young people up to age 18 years as necessary.

**What are the key client characteristics?**

* Children aged 0-12 years (and young people up to 18 years)
* Specific groups of vulnerable and disadvantaged children, young people and families who are at risk of poor outcomes, which may include those:
  + from a cultural and linguistically diverse background
  + identifying as Aboriginal and/or Torres Strait Islander
  + identifying as having a condition, impairment or disability
  + supporting children with additional needs (including children with disability or chronic medical conditions)
  + who lack social supports
  + experiencing mental illness, alcohol or other drug issues, or domestic violence issues

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/). For this program activity, support persons may include families of clients, carers, case / support workers and community leaders, mentors and informal care givers.

**Should unidentified clients be recorded?**

**No more than 10 per cent** of an organisation’s clients in a reporting period should be recorded as unidentified clients. The department expects organisations to deliver services to clients who are known to their staff.

Please refer to the Data Exchange Protocols for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program activity. If using the web-based portal, organisations should create cases in a way that work best for them and their staff, and will be useful over multiple reporting periods.

If an organisation primarily delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

If an organisation primarily delivers services to couples or families, a case can be created for each group of individuals. This means all contact with members of a group, whether some or all, is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID.

**The partnership approach**

All organisations are required to participate in the partnership approach. For CaPS – Ad hoc grants, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics datafrom their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least** **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least** **50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Education and skills training * Family functioning * Personal and Family Safety * Material wellbeing * Mental health, wellbeing and self-care * Community participation and networks * Physical health * Housing * Employment | All six Goal outcomes are relevant to this program activity. | All three Satisfaction outcomes are relevant for this program activity | * Group / community knowledge, skills, attitudes and behaviours * Community structures and networks |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| **Service Type** | **Example** |
| --- | --- |
| **Advocacy/Support** | Advocacy on behalf of the client, or collaboration with other services and specialists, or collaboration with community stakeholders and networks. |
| **Child/Youth focussed groups** | Sessions targeted at children or youth, and delivered in a group setting rather than on an individual basis. Examples include school-based groups such as breakfast clubs, skill building groups and awareness raising activities for children/youth. |
| **Community capacity building** | Targeted at building and/or strengthening a community’s skills/cohesion or understanding of a topic. Community capacity building activities are delivered to a group rather than individuals or families. |
| **Counselling** | Includes one-on-one as well as family group counselling sessions that are delivered/facilitated by a qualified practitioner. |
| **Education and skills** | Assisting parents and carers (as clients) in learning or building knowledge about a topic, or develop a skill that is relevant to the client’s circumstances. This includes accessing education and training, including re-engaging with the education system. |
| **Exit Interview** | A client is exiting the program and will no longer be receiving services.  A SCORE assessment could be conducted at this time. Use the 'Exit Reason' field at the Case level to indicate why the client is exiting the program. |
| **Family capacity building** | Service delivery to children and parents together with a focus on supports such as relationship building and communication. For example: supported and community playgroups; home-based support, including assistance with developing family-centred activities, establishing routines and practical help with tasks. |
| **Information/Advice/Referral** | Provision of standard advice/guidance or information in relation to a specific topic or where a referral was made to another service provided within or external to the organisation. |
| **Intake/Assessment** | Initial meeting with clients to gather information and match them to services. |
| **Mentoring/Peer support** | Group work offering participants support through discussion and activities. Generally includes a facilitator. |

### Communities for Children – Facilitating Partners

**Description**

Communities for Children Facilitating Partners (CfC FP) are place‑based services that develop and facilitate a whole‑of-community approach to early childhood development and wellbeing for children aged 0-12 years old (but may include young people up to 18 years old as necessary).

CfC FPs build on local strengths to meet community needs and create capability within local service systems, using strong evidence of what works in early intervention and prevention. CfC FPs collaborate with organisations and fund other organisations (known as Community Partners) to provide services including parenting support, group peer support, case management, home visiting services and other supports to promote child wellbeing.

**Who is the primary client?**

Primary clients for CfC FP are children aged 0-12 and their families, but may include young people up to 18 years old as necessary.

**What are the key client characteristics?**

Children aged 0-12 years (and young people up to 18 years old)

Specific groups of vulnerable and disadvantaged children, young people and families who are at risk of poor outcomes, which may include those:

* with children at risk of abuse or neglect
* from culturally and linguistically diverse backgrounds
* identifying as Aboriginal and/or Torres Strait Islander
* with a parent or child with disability
* who are jobless or on low incomes
* identifying as young parents or sole parents
* experiencing problems with housing, domestic violence, substance abuse, mental health or child protection.

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include, but are not limited to, family members, guardians, carers, case workers, friends or mentors.

Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

In most cases, a support person is not likely to have achieved an outcome. If outcomes are recorded for a person, that person is likely a client rather than a support person.

**Should unidentified clients be recorded?**

Some service types may include client interactions where it is not practical to collect individual details. In order to reflect the full extent of service provision to these groups, or the provision of informal events, you can record the attendees as ‘unidentified’ clients. This may include delivering services to larger groups, such as information sessions to community organisations or health care professionals.

Service types that may have ‘unidentified’ clients include: Information (as a subset of Information / Advice / Referral); Child/Youth focussed groups; Community Capability Building; Family Capability Building.

CfC FPs fund services that are client facing where ongoing relationships are formed,therefore it is expected that only **15 per cent** of your Community Partners’ clients **or less** should be recorded as unidentified clients in each reporting period.

An example of where reporting unidentified clients is appropriate would include large events attended by the general public, such as a family fun day.Group clients should not be recorded for other types of activities.

For services or events where it is not appropriate to collect individual details and attendees will be or have been recorded as ‘unidentified’ clients, organisations should report this in their Activity Work Plans (AWPs) and AWP reports.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**Is data sharing mandatory?**

Sharing data between Facilitating Partners and Community Partners is voluntary and can commence or cease at any time through the Data Exchange portal. This is a matter for delivery partners to manage.

**How should cases be set up?**

While there is no specific case structure recommended for this program, organisations should set up cases to reflect the local activity being delivered under their AWP.

If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

If an organisation primarily delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

If an organisation primarily delivers services to couples or families, a case can be created for each group of individuals. This means all contact with members of a group, whether some or all, is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID.

**The partnership approach**

All organisations are required to participate in the partnership approach. For CfC FP, participation means all organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics data from their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least** **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least** **50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Family functioning * Age-appropriate development * Community participation and networks * Education and skills training * Mental health, wellbeing and self-care * Personal and family safety * Physical health | All six Goal outcomes are relevant to this program activity. | All three Satisfaction outcomes are relevant to this program activity. | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Intake and assessment | The initial meeting with a client during which the organisation gathers information on the client’s needs, defines the outcomes sought for the client and determines the support they need. This is usually (but not limited to) the first session attended by a client.   * The primary client should be recorded as an individual client. * Other people participating in the session, including family members, can be individually recorded as support persons if appropriate. |
| Information/Advice/Referral | Providing standard advice/guidance or information relevant to a client’s immediate needs. It can include advice to a family member or support person. It also applies where the service offered was primarily a referral to another service provided within or external to your organisation.  This service type can be used for engaging with an individual client or a group of clients on a particular topic.   * The primary client should be recorded as an individual client. * If details of the primary client are not yet known, no client should be attached to the session. * Other people participating in the session, receiving advice or being referred, can be individually recorded as support persons.   Information sessions to community groups may also be reflected under this service type.   * ‘Unidentified’ clients are acceptable when the session primarily provides general information to a group, or advice to a broad audience of at-risk people. Details of these activities should be provided in AWP Reports. * Primary clients (where applicable) can also attend these sessions. |
| Education and skills training | Providing services with the intention to build knowledge about a topic or develop a skill that is relevant to the client’s circumstances. This includes accessing education and training, including re-engaging with the education system.   * The primary client should be recorded as an individual client. * Other people participating in the session, such as family members, can be individually recorded as support persons. |
| Child/Youth focussed groups | Sessions targeted at children or youth, and delivered in a group setting rather than on an individual basis. Examples include school-based groups and awareness raising activities for children/youth.   * The primary client should be recorded as an individual client. * Where consent has been gained to work with a child or young person, that child or young person should be recorded as an individual client. * ‘Unidentified’ clients are acceptable if details of the primary client are not known, such as in the case of group awareness raising activities where consent is not required. Details of these activities should be provided in AWP Reports. * Other people participating in the session, receiving advice or being referred, can be individually recorded as support persons. |
| Advocacy/Support | Advocating on a client’s behalf; helping the client access a service, or contacting an organisation on their behalf.   * The primary client should be recorded as an individual client. * You cannot advocate on behalf of unidentified clients or support persons. |
| Community capacity building | This service type should be used when organising a community event that builds and/or strengthens a community’s skills/cohesion or understanding of a topic or subject.   * Primary clients (where applicable) are recorded as individual clients. * Support persons are recorded only where they accompany the primary client to the activity. * ‘Unidentified’ clients are acceptable when the session primarily provides general information to a group, or advice to a broad audience. Details of these activities should be provided in AWP Reports. |
| Family capacity building | Provision of services to children and parents together with a focus on supports such as relationship building and communication. For example: supported and community playgroups, peer support groups; home-based support including assistance with developing family‑centred activities, establishing routines and practical help with tasks.   * Primary clients (where applicable) are recorded as individual clients. * Support persons are recorded only where they accompany the primary client to the activity. * ‘Unidentified’ clients are acceptable when the session primarily provides general information to a group, or advice to a broad audience. Details of these activities should be provided in AWP Reports. |
| Governance | **Facilitating Partners (FP) ONLY.** Used for administration of CfC sites, e.g. Committee meetings, community consultation to develop Community Strategic Plans, and advisory working groups.  **Note: this service type is being phased out and replaced with a more appropriate way to report this information. This service type will no longer be available from January 2023.** |
| Service system capability/capacity | **FP ONLY.** Strategic planning, workshops and forums. Capability building work with Community Partners, including development of evidence-based programs, training other providers or professionals, and working with networks.  **Note: this service type is being phased out and replaced with a more appropriate way to report this information. This service type will no longer be available from January 2023.** |
| Exit Interview | A client is exiting the program and will no longer be receiving services.  A SCORE assessment could be conducted at this time. Use the 'Exit Reason' field at the Case level to indicate why the client is exiting the program. |

### Family and Relationship Services

**Description**

Family and Relationship Services (FaRS) aims to strengthen family relationships, prevent breakdown and ensure the wellbeing and safety of children through the provision of broad-based counselling and education to families of different forms and sizes. Services focus primarily on early intervention and prevention, and target critical family transition points including formation, expansion of family, and separation.

**Who is the primary client?**

FaRS is a universal service that provides support for families, couples, children and individuals.

**What are the key client characteristics?**

Families, couples, children and individuals, but priority should be given to:

* couples forming long-term relationships
* families experiencing relationship issues or at risk of breakdown
* families with children at risk of abuse or neglect
* families experiencing disadvantage or vulnerability.

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include, but are not limited to, family members, guardians, carers, case workers, friends or mentors.

Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

**No more than 10 per cent** of an organisation’s clients in a reporting period should be recorded as unidentified clients. The department expects organisations to deliver services to clients who are known to their staff.

While organisations might deliver education, skills or information sessions to groups of people, they should collect client details for each individual participant and record them as individual clients in the Data Exchange, where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each couple or family unit. This means all contact with members of a group, whether some or all, is recorded in the same place and is easy to find for future use.

If an organisation delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID.

**The partnership approach**

All organisations are required to participate in the partnership approach. For FaRS, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics data from their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstances SCORE for **at least** **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least** **50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Family functioning * Age-appropriate development * Community participation and networks * Employment * Housing * Material wellbeing * Mental health, wellbeing and self-care * Personal and family safety * Physical health | All six Goal outcomes are relevant to this program activity. | All three Satisfaction outcomes are relevant to this program activity. | Community infrastructure and networks |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Providing support to a family member making an appearance in the Family Court or Children’s Courts. |
| Child/youth focussed groups | Sessions targeted at children or youth, and delivered in a group setting rather than on an individual basis. |
| Community capacity building | Developing a community’s skills in strengthening family relationships. |
| Counselling | Counselling for couples, families, children or vulnerable people experiencing relationship issues. |
| Education and skills training | Relationship education courses, or skills and education training for families, children and couples. |
| Family capacity building | Strengthening family capacity by improving communication skills between parents and children. |
| Information/Advice/Referral | Information session, brokerage to obtain other services or referral to another service (e.g. legal, mental health etc.). |
| Intake and assessment | Assessing a client in an initial session. |
| Exit Interview | A client is exiting the program and will no longer be receiving services.  A SCORE assessment could be conducted at this time. Use the 'Exit Reason' field at the Case level to indicate why the client is exiting the program. |

### Family and Relationship Services – Specialised Family Violence Services

**Description**

Family and Relationship Services (FaRS) – Specialised Family Violence Services (SFVS) is a component of FaRS. It contributes to the strategic vision of the *National Plan to Reduce Violence against Women and their Children 2010‑2022* that ‘Australian women and their children live free from violence in safe communities’, and its action plans. FaRS SFVS delivers services to support individuals, couples, children and families affected by family or domestic violence.

**Who is the primary client?**

FaRS SFVS is a universal service that provides support for families, couples, children and individuals who are experiencing, or at risk of experiencing, family or domestic violence.

**What are the key target group client characteristics?**

Families, couples, children and individuals, but priority should be given to:

* people who identify as Aboriginal and Torres Strait Islander
* people from cultural and linguistically diverse backgrounds
* women with disability
* children and young people
* LGBTIQ communities
* people who use violence.

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include, but are not limited to, family members, guardians, carers, case workers, friends or mentors.

Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

FaRS SFVS has limited use for unidentified clients.

**No more than 10 per cent** of an organisation’s clients in a reporting period should be recorded as unidentified clients. The department expects organisations to deliver services to clients who are known to their staff.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

If an organisation primarily delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

If an organisation primarily delivers services to couples or families, a case can be created for each group of individuals. This means all contact with members of a group, whether some or all, is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID.

**The partnership approach**

All organisations are required to participate in the partnership approach. For FaRS SFVS, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics data from their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstances SCORE for **at least** **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least** **50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Family functioning * Community participation and networks * Mental health, wellbeing and self-care * Personal and family safety * Physical health * Housing | All six Goal outcomes are relevant for this program activity. | All three Satisfaction outcomes are relevant for this program activity. | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so**.**

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Support to people impacted by family violence who are involved in either the Family Court or Children’s Courts. |
| Child/ Youth focussed groups | Group interventions for children and/or youth who have experienced or witnessed family or domestic violence, focusing on child therapeutic approaches. |
| Community capacity building | Capacity sessions for community organisations (e.g. sporting clubs, Men’s Sheds) to target clients who could be violent against family members. Sessions engaging clients to promote cultural change. |
| Counselling | Domestic violence counselling services. |
| Education and skills training | A program for people who have experienced abuse in their family relationships, or a behavioural change program. |
| Family capacity building | Group program to strengthen relationships between parents and their children. |
| Information/Advice/Referral | Information session, brokerage to obtain other services or referral to another service (e.g. legal, mental health, etc.) |
| Intake/Assessment | Assessing a client in an initial session. |
| Exit Interview | A client is exiting the program and will no longer be receiving services.  A SCORE assessment could be conducted at this time. Use the 'Exit Reason' field at the Case level to indicate why the client is exiting the program. |

### Family Mental Health Support Services (FMHSS)

**Description**

Family Mental Health Support Services (FMHSS) aims to improve the wellbeing and community participation of children and young people up to the age of 18 who are showing early signs of, or at risk of developing, mental illness. FMHSS provides early intervention and non-clinical community mental health support through intensive and/or immediate support to children and young people, support for their families or carers, and community outreach, mental health education and community development activities.

**Who is the primary client for this program activity?**

Primary clients for FMHSS are children and young people up to, and including, 18 years of age who are affected by, or showing early signs of, mental illness.

**What are the key client characteristics?**

Children and young people as described above.

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include, but are not limited to, family members, guardians, carers, case workers, friends or mentors.

Parents or family members of a client are considered support persons even if the client doesn’t attend a session. For example:

* A parent attends a session without their child. The session is recorded, identifying the child as the client and the parent as a ‘support person’.
* The parent is receiving support and a benefit from the service and will have a positive result, but the net effect of the parent’s improvement is having a positive effect on the child.

It is important to note that clients must have suitable adults who are willing and able to work with them and engage with services. FMHSS does not work in isolation with family members or children and young people. All assistance is provided in a whole-of-family context.

Recording support persons is voluntary. Instructions on how to record support persons in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

**No more than 10 per cent** of an organisation’s clients in a reporting period should be recorded as unidentified clients. The department expects organisations to deliver services to clients who are known to their staff.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

If an organisation primarily delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

If an organisation primarily delivers services to couples or families, a case can be created for each couple or family unit. This means all contact with members of a group, whether some or all, is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’, or an individual’s Client ID.

**The partnership approach**

All organisations are required to participate in the partnership approach. For FMHSS, participation means all organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics data from their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least** **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least** **50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant for this program activity?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Family functioning * Age-appropriate development * Community participation and networks * Education and training * Employment * Housing * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Personal and family safety * Physical health | All six Goals outcomes are relevant for this program activity. | All three Satisfaction outcomes are relevant for this program activity. | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example of service type use within this program activity |
| --- | --- |
| Intake and assessment | Initial meeting with a client in which the organisation gathers information on the client’s needs and matches them to services available, and/or assesses the client’s eligibility for participation in a particular service. This service type is usually applicable, but not limited to, the first session a client attends. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic such as an information session on grief and loss. Collaborative meetings with schools. Referrals to another service provided internally or externally, such as housing, child protection, etc. |
| Education and skills training | Assisting a client in learning/building knowledge about a topic or developing/enhancing a skill that is relevant to the client’s circumstances. This includes accessing education and training, re‑engaging with the education system, emotional wisdom skills, social skills workshops, and/or mental health awareness seminars. |
| Child/Youth focussed groups | Sessions targeted at children or youth and delivered in a group setting rather than on an individual basis. Examples include playgroups, breakfast clubs, school holiday activity groups and other similar services. |
| Counselling | Working through a particular issue such as relationship concerns or financial concerns, in-home family support, or grief and loss counselling. Counselling must be delivered by a qualified practitioner. |
| Advocacy/Support | Advocating on a client’s 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. |
| Community capacity building | Development of a community’s skills/cohesion or understanding of a topic. Community capacity activities are delivered to a group of people rather than an individual. Examples include Harmony Day, Karoonda Farm Fair, Mental Health week, RUOK?, Mental Health Awareness at schools, and Children’s week/day events. These types of activities should be for the purpose of building effective referral networks or initiating contact with potential participants. |
| Outreach | As of January 2022, this service type is no longer in use |
| Family capacity building | Provide appropriate support that helps families manage their lives effectively. For example: relationship building; conflict resolution and communication; home-based support, including assistance with developing family-centred activities; tools to increase family coping skills/knowledge, establish routines, provide practical help with tasks or improve housing stability. |
| Mentoring/Peer Support | Group work offering participants support through discussion and activities. Generally includes a facilitator. |
| Exit Interview | A client is exiting the program and will no longer be receiving services.  A SCORE assessment could be conducted at this time. Use the 'Exit Reason' field at the Case level to indicate why the client is exiting the program. |

### Forced Adoption Support Services (FASS)

**Description**

Forced Adoption Support Services provide specialist support to people affected by forced adoption. The services complement and enhance existing services funded by state and territory governments and aim to improve access to peer support, professional counselling and records/family tracing.

**Who is the primary client?**

The primary clients for this program activity include anyone affected by forced adoption policies and practices. This can include mothers, fathers, adopted people and extended family members. The priority of service should be to those directly involved. Services to extended family members can also be accessed through warm referrals on to other relevant organisations and services.

**What are the key client characteristics?**

People affected by forced adoption policies and practices.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients.

**Should unidentified clients be recorded?**

This program provides face-to-face support where clients are known to the service, therefore it is expected that **no more than 15 per cent** of your clients should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

**The partnership approach**

All organisations are required to participate in the partnership approach. For FASS, participation means all organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics data from their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least** **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least** **50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this activity it is expected that organisations collect and record SCORE assessments in the following domains.

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | * Changed knowledge and access to information * Engagement with relevant support services * Changed impact of immediate crisis | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**Collecting extended data**

For this program activity, organisations are strongly encouraged to collect the ‘service setting’ extended data item.

Collecting ‘service setting’ helps to differentiate where/how services are provided, e.g. organisation outlet/office, client’s residence, community venue, partner organisation’s facilities, telephone (including video-conferencing or online chat), or digital. ‘Service setting’ may be selected for each session with (or on behalf of) a client.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for a full description of the service setting categories

You may also record other outcomes and extended client details if you think it is appropriate for your program and for your clients to do so. See Protocols sections 6 and 11 for more information.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Discuss/assess needs and impact of forced adoption. |
| Information/Advice/Referral | Deliver information and/or advice based on individual needs of client. Deliver referral and support services. Provide warm referrals to relevant services including counselling. |
| Counselling | General counselling and emotional support – may include therapeutic counselling where services have expertise and capacity to deliver this. |
| Advocacy/Support | Advocacy on behalf of the client to an entity such as a state government body, or another service, or other support of the client including assistance with family searching and intermediary services to help find and connect with family. |
| Records search | Contact with the client regarding records and records research on behalf of the client. |
| Community capacity building | Activities targeted at building and/or strengthening community awareness, understanding, development of skills, promoting community relationships and cohesion relating to the effects of past forced adoption. Community capacity activities are delivered to a group rather than to individuals to raise community awareness, enhance group healing and build sector capacity to support people affected by past forced adoption.  Examples of activities include group and therapeutic workshops, Apology anniversary commemorations, memorials, and community events. This does not include administration of Small Grants activities as these are reported directly to the Funding Arrangement Managers. |
| Mentoring/Peer support | Group work offering reciprocal support to individuals through discussion and activities, and generally led by a facilitator. |

### **Home Interaction Program for Parents and Youngsters (HIPPY)**

**Description**

HIPPY is a two-year, home-based, early learning and parenting program for families with young children.

**Who is the primary client?**

The primary clients for this program are children aged three and four years, parents/carers and tutors (who may also be parents/carers in the program).

**What are the key client characteristics?**

Children aged three - four years old and their parents/carers:

* residing in a low Socio-economic Indexes for Areas (SEIFA) area
* residing in a rural or remote area
* identifying as Aboriginal or Torres Strait Islander, and/or
* from a cultural and linguistically diverse background

**Who might be considered ‘support persons’?**

For this program activity, support persons are not relevant.

**Should unidentified clients be recorded?**

HIPPY provides face-to-face support and group sessions where both children and their family members are known to the service.

No unidentified clients are expected to be recorded in the Data Exchange for HIPPY promotional events attended by the general public, such as information sessions and community participation sessions. Attendance at such events is to be reported via an Activity Work Plan.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

The recommended case structure for this program activity is the family unit, in order to collect demographic information for all family members and groups within the same case. Cases should include one parent and one child as a minimum.

To protect client privacy, the case identity (ID) should not contain any personal information, such as any part of a client’s first or last names, Customer Reference Numbers (CRN) or My Aged Care reference numbers. Family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 1286. This works well for ongoing one-on-one contact with clients.

**The partnership approach**

For this program, the service provider is required to participate in the partnership approach. For HIPPY, participation means the service provider must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Collection of extended demographics data from their clients is not required for this program, but the service provider may choose to do so for their own purposes.

The service provider must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for at least **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for at least **50 per cent** of identified clients.

A SCORE assessment for Circumstances and Goals is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, multiple SCORE assessments for a client can be recorded at regular intervals to track how the client’s outcomes change over time.

* Report Satisfaction SCOREs for at least 10 per cent of identified clients.

A SCORE assessment for Satisfaction must be recorded at the end of service. It is also recommended that a satisfaction SCORE assessment is completed at the end of the first year of service.

**What areas of SCORE are most relevant for this program activity?**

Organisations record client outcomes through Standard Client/Community Outcomes Reporting (SCORE). It is expected that, where practical, you collect outcomes data for the majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

The SCORE areas listed below have been identified as the most relevant for this program. In addition, organisations can choose to record outcomes against any other domains that are relevant for the client.

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Age-appropriate development * Education and skills training * Family functioning | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice & control to make own decisions * Engagement with relevant support services | * 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 |

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE scale descriptions when assessing clients in the following Circumstances domains. For those SCORE domains not shown below, organisations can record SCORE assessments as outlined in the Data Exchange Protocols.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Age-appropriate development**  (HIPPY children)  It is preferred that a validated tool be used to assess this domain | My child always struggles to achieve the language skills, cognitive skills and social skills you would expect for their age. | My child often struggles to achieve the language skills, cognitive skills and social skills you would expect for their age. | My child sometimes struggles to achieve the language skills, cognitive skills and social skills you would expect for their age. | My child rarely struggles to achieve the language skills, cognitive skills and social skills you would expect for their age. | My child never struggles to achieve the language skills, cognitive skills and social skills you would expect for their age. |
| **Education and Skills** (for tutors) | I have not yet learned any new skills and knowledge about early childhood development | I have only learned a few new skills and knowledge about early childhood development | I have learned some new skills and knowledge about early childhood development | I have learned many new skills and knowledge about early childhood development | I have learned a lot of new skills and knowledge about early childhood development |
| **Parent engagement (Family Functioning)** | I never spend time with my child(ren) on educational activities in the home. E.g. solving puzzles, playing games, reading, counting, musical games, etc. | I rarely spend time with my child(ren) on educational activities in the home E.g. solving puzzles, playing games, reading, counting, musical games, etc. | I sometimes spend time with my child(ren) on educational activities in the home E.g. solving puzzles, playing games, reading, counting, musical games, etc. | I often spend time with my child(ren) on educational activities in the home E.g. solving puzzles, playing games, reading, counting, musical games, etc. | I routinely spend time with my child(ren) on educational activities in the home. E.g. solving puzzles, playing games, reading, counting, musical games, etc. |

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains. For those SCORE domains not shown below, organisations can record SCORE assessments as outlined in the Data Exchange Protocols.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed behaviours development**  (for parents of HIPPY children) | I am not at all involved with my child’s learning.  I have no goals in place to change my behaviour. | I am not very involved in my child’s learning  I have started to identify some goals that will change my behaviour. | I am involved in some parts of my child’s learning  I am making progress towards achieving some goals to change my behaviour. | I am involved in most parts of my child’s learning  My goals are on track to be achieved as my behaviour is changing. | I am very involved in my child’s learning  I have achieved my goals and changed my behaviour. |
| **Changed knowledge and access to information**  (for parents of HIPPY children) | I know nothing about teaching my child at home.  For example I don’t read to my child | I know a little bit about what I need to enable me to teach my child at home.  For example I read to my child on 1 or 2 days a week | I have a reasonable / some knowledge of what I need to enable me to teach my child at home.  For example I read to my child on 3 or 4 days a week | I have a good knowledge of what I need to enable me to teach my child at home.  For example I read to my child on 5 or 6 days a week | I have very good knowledge of what I need to enable me teach my child at home.  I read to my child every day |
| **Changed Skills**  (HIPPY children) | My child does not have the skills to be ready for school | My child has limited skills to be ready for school | My child has some of the skills to be ready for school | My child has most of the skills to be ready for school | My child is ready for school |
| **Changed Skills** (for parents of HIPPY children) | I feel I don’t have the skills to help improve my child to achieve school readiness | I have limited skills to help improve my child to achieve school readiness | I have some of the skills needed to help improve my child to achieve school readiness | I have most of the skills needed to help improve my child to achieve school readiness | I have all the skills I need to help my child to achieve school readiness |
| **Empowerment, choice & control to make own decisions**  (for parents of HIPPY children) | I do not feel confident when speaking with teachers and other professionals about my child’s development | I rarely feel confident when speaking with teachers and other professionals about my child’s development | I sometimes feel confident when speaking with teachers and other professionals about my child’s development | I mostly feel confident when speaking with teachers and other professionals about my child’s development | I am very confident when speaking with teachers and other professionals about my child’s development |
| **Empowerment, choice & control to make own decisions**  (For Tutors) | I do not feel confident in my abilities as an early childhood support tutor to work with families in my community | I feel a little bit confident in my abilities as an early childhood support tutor to work with families in my community | I feel somewhat confident in my abilities as an early childhood support tutor to work with families in my community | I feel quite confident in my abilities as an early childhood support tutor to work with families in my community | I feel very confident in my abilities as an early childhood support tutor to work with families in my community |
| **Engagement with relevant support services** | I do not feel confident about finding information on local community services when I need them | I rarely feel confident about finding information on local community services when I need them | I sometimes feel confident about finding information on local community services when I need them | I mostly feel confident about finding information on local community services when I need them | I am very confident about finding information on local community services when I need them |

**Completing a Satisfaction SCORE assessment**

If an organisation already uses an existing outcomes measurement tool that meets their needs, they can continue to use it and translate the outcome data to SCORE, otherwise organisations can record SCORE assessments as outlined in the Data Exchange Protocols.

**For this program activity, when should each service type be used?**

**Note:** The service type describes the **main** focus for the session being delivered. As HIPPY is a two year activity involving multiple sessions, the first session should be recorded under the ‘Intake and Assessment’ service type. Do not use the ‘Intake and Assessment’ service type for any further sessions.

If a HIPPY session covers multiple service types, choose the most relevant service type. This could be what the client spent the **most time** on in a session, or the main way they **achieved an outcome**.

**Only** use the service type ‘Service Review’ when a client has completed year one of HIPPY, and ‘Core Component Completed’ when a client is ceasing or has completed their HIPPY participation.

Different service types can be used for children-focused sessions or parent/carer-focused sessions. Choose the most relevant service type for the client attending the session.

**Note:** some HIPPY parents are also HIPPY tutors. For these clients, use a service type appropriate for a parent/carer-focused session.

| **Service Type** | **Example** |
| --- | --- |
| **Intake and assessment** | This service type is only used for “Family Baseline Enrolment Journey” when the Site Coordinator meets with a HIPPY Parent/Carer/Child and completes an enrolment form and baseline journey (assessment) for measurement of the child/family and community outcomes and can be used for SCORE.  Note: also use this service type when a Tutor has a ‘Staff Demographic information’ submitted  **Note** – if a HIPPY Parent/Carer/Child is not continuing into commencement; whether because they are not sure they want to continue or their circumstances may have changed, the Coordinator may engage in additional support-related activities before delivery to support their enrolment. These are to be recorded as the Information/Advice/Referral service type, even if unsuccessful in keeping them in the program. |
| **Information/Advice/Referral** | This service type is used when a HIPPY Parent/Carer/Child receives individualised specific information or a referral/service connection as part of family engagement with HIPPY.  **Note – report HIPPY promotional events attended by the general public such as information sessions and community participation events via Activity Work Plans.** |
| **Child Focused Activity** | This service type is used for the sessions that involve activities that specifically focus on the HIPPY child, such as the delivery of HIPPY activity packs. |
| **Community capacity building** | This service type is not used.  **Note – HIPPY promotional events attended by the general public such as information sessions and community participation events are to be reported via Activity Work Plans.** |
| **Parenting Programs** | This service type is used when a HIPPY Parent/Carer attends a ‘standard’ HIPPY group meeting or gathering. |
| **Service review** | This service type is used when a HIPPY participant has completed **year one** of HIPPY, regardless of whether they continue on to year two of program or exit HIPPY at that time without completing the core components of the program.  If the HIPPY participant is exiting before commencing year two of HIPPY, an exit interview and SCORE assessment should be completed.  **Note** – **This service review requires direct contact with the client (in person, by phone, or other form of interaction). It should not be used when there has not been direct contact with the client which could enable such a review.** |
| **Core component completed** | **Completion of year two of HIPPY** - This service type is used to assess that a HIPPY participant has completed all the core components of the program at the time of the final session signifying the participant has completed **year two** of HIPPY.  **Note – This would also be the point in time where an exit interview or SCORE outcomes assessment should be completed.** |
| **Education and skills training (for Tutors)** | This service type is used when a HIPPY Tutor is undertaking education and skills training activities, including:   * tutor training (HIPPY program content/curriculum), and   supervised home visits and tutor reflection |
| **Facilitate employment pathways** | **For Tutors Only**: This service type is used when a HIPPY Tutor engages in the Pathways to Possibilities process, including:   * tutor professional development and training * Tutor Pathways to Possibilities (skills development activity) * Tutor Pathways to Possibilities (review) * Tutor Pathways to Possibilities (plan)   HIPPY tutors participate in the Pathways to Possibilities (P2P) program, which was specifically designed by HIPPY Australia to structure the coaching and mentoring provided to home tutors by site coordinators. Distinct from the training that prepares tutors to undertake home visits and deliver the integrated parental support and early learning program, P2P focuses on preparing tutors for future employment. |
| **Tutor training completed** | **For Tutors Only**: This service type is used when a HIPPY tutor has done a staff exit survey. |

### National Find and Connect

**Description**

The National Find and Connect program provides specialist counselling, referral services, education and social support to locate and access records so that Forgotten Australians and Former Child Migrants may reconnect with family members (where possible). Find and Connect includes a support service in each state and territory, a national web resource to assist with records tracing and access, and representative groups that are funded to support stakeholders and present consolidated views and advice to Government and the sector.

**Who is the primary client?**

Primary clients for this program activity are Forgotten Australians and Former Child Migrants. The majority of clients for this program activity are adults.

**What are the key client characteristics?**

Adults who are Forgotten Australians and Former Child Migrants (also known as Care Leavers) who were in institutional care as children before 1990. These people are adversely affected by past institutional and child‑welfare policies and practices.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients.

**Should unidentified clients be recorded?**

This program provides face-to-face support where clients are known to the service. It is expected that **no more than** **15 per cent** of your clients should be recordedas unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best its staff and is useful over multiple reporting periods.

**The partnership approach**

All organisations are required to participate in the partnership approach. For the Find and Connect program, participation means all organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations are **not required** to collect extended demographics data from their clients, but may choose to do so for their own purposes.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least** **50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least** **50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least** **10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this activity it is expected that organisations collect and record SCORE assessments in the following domains.

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Family functioning * Mental health, wellbeing and self-care | * Changed behaviours * Changed impact of immediate crisis * Changed knowledge and access to information * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | All four Community outcomes are relevant for this program activity |

**Collecting extended data**

For this program activity, organisations are strongly encouraged to collect the ‘service setting’ extended data item.

Collecting ‘service setting’ helps to differentiate where/how services are provided, e.g. organisation outlet/office, client’s residence, community venue, partner organisation’s facilities, telephone (including video-conferencing or online chat), or digital. ‘Service setting’ may be selected for each session with (or on behalf of) a client.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for a full description of the service setting categories

You may also record other outcomes and extended client details if you think it is appropriate for your program and for your clients to do so. See Protocols sections 6 and 11 for more information.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial meeting with clients to gather information about their circumstances and support needs. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic or where a warm referral is made to another service within or external to the organisation. |
| Education and skills training | Assisting 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. This includes life skills courses, accessing education and training including re‑engaging with the education system. |
| Counselling | Working through a particular issue such as personal relationship concerns or financial concerns, as delivered by an industry recognised qualified professional. |
| Advocacy/Support | Representation on behalf of the client. Support of the client to reconnect with family. |
| Records search | Records research on behalf of the client. Contact with the client regarding records. |
| Community capacity building | Group activities targeted at building and/or strengthening community awareness, promoting community relationships and social cohesion.  These include common interest workshops/activities, outdoor activities, events including anniversary commemorations, drop-in centre, art and crafts,  cook-ups and other social support programs. These social activities and events enhance the health and wellbeing of clients and provide a sense of community. |
| Mentoring/Peer support | Semi-structured individual and group work sessions, offering reciprocal support and encouragement to clients through discussion and activities built on shared personal experience and empathy, and generally led by a lived experience facilitator who prepares content and guides the discussion.  Sessions provide an opportunity for sharing issues within a safe environment, while working towards appropriate solutions, as well as information, resources and knowledge about relevant topics. Sessions can help clients articulate their service needs, and can bridge the gap between clinical practice and direct personal experience. These activities are designed to improve coping strategies, mental health and wellbeing of participants. |

### Reconnect

**Description**

Reconnect is a community based early intervention program for young people 12 to 18 years and their families, who are homeless or at risk of homelessness. Reconnect uses family focused early intervention strategies to help young people stabilise their living situation, achieve family reconciliation, and improve their level of engagement with work, education, training and the community. Reconnect services provide counselling, group work, mediation and practical support to the whole family to help break the cycle of homelessness, which can begin at an early age. Organisations also purchase other services to meet the individual needs of clients, such as specialised mental health services.

**Who is the primary client?**

Primary clients for this program activity are young people aged 12-18 years, or 12-21 years of age for new arrivals to Australia.

**What are the key client characteristics?**

* People aged 12-18 years (up to 21 for new arrivals)
* People on a Humanitarian visa
* People who have arrived in Australia in the last five years
* People from a cultural and linguistically diverse background
* People identifying as Aboriginal and/or Torres Strait Islander
* People living in crisis, emergency or transition accommodation and/or identifying as homeless
* People identifying as having a condition, impairment or disability.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients (especially in the instance of family mediation) or carers of clients.

**Should unidentified clients be recorded?**

Reconnect is primarily client facing where ongoing relationships are formed. As an early intervention and prevention program, Reconnect services can work with clients and potential clients through group work. It is expected that most clients recorded will be identified and provided with individual client goals, although some clients can be recorded as unidentified clients.

For this program activity, an example of where use of unidentified clients may be appropriate includes education sessions delivered in a large group setting (such as a high school year group)**.** Individual clients should be recorded in all other circumstances.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Cases should be structured to demonstrate casework for each youth client, with family members able to be recorded as support persons attached to that case, should organisations so wish.

For organisations that deliver information or education workshops to youth clients in large group settings (such as a high school year group), cases can be created to record these sessions, and should be titled in a way that allows staff to easily enter data and use the case over multiple reporting periods (i.e. Case ID =‘Love Bites’).

**The partnership approach**

It is expected that, where practical, you collect SCORE outcomes data for the majority of participants. However, it is noted that you should do so within reason and in alignment with ethical requirements.

All Reconnect Organisations are required to participate in the partnership approach. As part of the partnership approach, Organisations will be able to use the Data Exchange standard approach to record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting, which is designed to assist in measuring client change linked to service delivery over time (See Protocols, section 7).

The partnership approach also includes the ability to record an extended data set (See Protocols, section 6).

**Collecting outcomes data using SCORE**

While generally a client SCORE assessment is recorded twice – towards the beginning of a service delivery (pre‑SCORE) and again towards the end (post-SCORE), for Reconnect cases which last for over 4 months it is expected that, where practical, you also collect SCORE assessments periodically throughout service delivery.

As a minimum, it is expected that you record SCORE outcomes against the domains outlined in the table below.

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Employment * Education and skills training * Family functioning * Housing * Mental health, wellbeing and self-care | * Changed behaviours * Changed impact of immediate crisis * Changed knowledge and access to information * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills, attitudes and behaviours |

**Collecting extended data**

For Reconnect, it is expected that you collect and record details in the ‘homelessness indicator’field for your clients. You may also record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Immediate response; contact made within 24 hours of referral to Reconnect service. Assessment of individual situation (housing, accommodation, education, training, employment etc.). |
| Information/Advice/Referral | Includes an information session, brokerage to obtain other services, or referral on to another service (legal, mental health service etc.). |
| Child/Youth focussed groups | Sessions targeted at children or youth, and delivered in a group rather than individual basis. Examples include playgroups, breakfast clubs and other similar services. |
| Counselling | Includes one-on-one as well as family counselling sessions. |
| Advocacy/Support | Advocacy on behalf of the client, collaboration with other services and specialists, collaboration with community stakeholders and networks. |
| Community capacity building | Group work to increase community capacity, group visits to community services. |
| Family mediation | Mediation to achieve reconciliation, settlement or compromise. |
| Goal setting | Formal identification of issues, strategy development for addressing those issues, stocktake of progress against agreed goals. |

**Table 2: Table of scenarios for Reconnect clients**

| Example | Table of scenarios for Reconnect clients |
| --- | --- |
| Scenario 1:  Who is the Client? Recording clients and support persons. | **Scenario:** Chris is 15 years old and lives with his mum, sister and grandmother. Chris is participating in a Reconnect program and an organisation provides an intake/assessment service at his home with his family present.  **Who is the Client?** Chris is the client.  **Action:** Collect and record data on Chris in the Data Exchange, record a session with Chris as the client.  **Who is the Support Person?** Chris’s mum, sister and grandmother are the support persons.  **Action:** Collect and record their details in the Data Exchange, record a session with Chris’s mum, sister and grandmother as attending the session as ‘support persons’. |
| Scenario 2:  Who is the Client? Recording clients and support persons. | **Scenario:** Jesse is 13 years old and lives with his mum, dad, brother, uncle and cousin. Jesse has been participating in a Reconnect program and an organisation provides counselling for his mum and dad whilst Jesse is not present. Jesse’s brother, uncle and cousin are also not present for his session.  **Who is the Client?** Jesse is the client.  **Action:** Collect and record data on Jesse in the Data Exchange, record a session with Jesse as the client, even though Jesse is not in attendance at this session.  **Who is the Support Person?** Jesse’s mum and dad are the ‘support persons’.  **Action:** Collect and record data for Jesse’s mum and dad in the Data Exchange, record a session with Jesse’s mum and dad as attending the session as ‘support persons’. |

### Redress Support Services

**Description**

**Redress Support Services**

Redress Support Services provide timely and seamless access to trauma-informed and culturally-appropriate community-based support services to assist people’s engagement with the [National Redress Scheme](http://www.nationalredress.gov.au) (the Scheme) for people who experienced institutional child sexual abuse.

**Financial Counselling**

The Redress Financial Counselling service provides access to financial advice to assist participants in the Scheme to better manage their finances, including after the receipt of a redress payment.

**Who is the primary client?**

The primary client for this program (and its activities) is people who are engaging with the Scheme. Engagement with the Scheme could be at any stage throughout the process, including where a person:

* + enquires about the Scheme, or prepares to make an application
  + completes, or receives help with completing, an application for redress
  + awaits a determination on their application for redress, including completing any additional processes requested or required by the Scheme
  + receives a determination from the Scheme, including where they are considering whether to accept or decline an offer of redress, request an internal review of a determination, accept an offer of redress and accesses any of the three components of redress

**What are the characteristics of a client?**

People who experienced sexual abuse as children (under the age of 18 years) in an institutional setting before the commencement of the Scheme on 1 July 2018. The majority of clients for this program activity are now adults, but children who experienced abuse in institutional contexts who will turn 18 years before the Scheme end date of 30 June 2028 can also access support through this program activity.

**Should ‘support persons’ be recorded?**

Recording support persons is voluntary. For this program activity, support persons may include families of clients, a close friend or support worker. Instructions on how to record them in the web-based portal can be found on the Data Exchange website.

**Should unidentified clients be recorded?**

The Redress Support Services activity provides face-to-face support to clients across all stages of the Scheme, therefore, it is expected that **no more than 10 per cent** of your clients should be recorded as unidentified clients in each reporting period.

The Redress Financial Counselling service provides support and advice to clients across all stages of the Scheme. It also provides capability building support to other support services and financial counsellors. It is expected that **no more than 10 per cent** of its clients should be recorded as unidentified clients in each reporting period.

It is appropriate to record unidentified clients when providing an awareness session to share general information and advice about the Scheme to a broad audience (like a community forum) where it is impractical to collect individual details.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. If using the web-based portal, organisations should create cases in a way that work best for them and their staff.

**Recording outcomes data using SCORE**

For this program activity, all organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

Organisations must meet the following minimum requirements for SCORE data:

* Report Goal SCORE assessments for **a minimum of 10 per cent** of identified clients.
* Report a Satisfaction SCORE for **a minimum of 10 per cent** of identified clients.

A SCORE assessment is recorded **at least twice** for each client – once towards the beginning of service delivery and once again towards the end.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the **1** goal domain and **3** satisfaction domains shown below:

| **Goals** | **Satisfaction** |
| --- | --- |
| * Changed knowledge and access to information | * 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 |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge and access to information** | I know nothing about my options for Redress  The service has provided no information about my options for Redress | I have little knowledge about my options for Redress  The service has provided little information about my options for Redress | I have some knowledge about my options for Redress  The service has provided some information about my options for Redress | I have good knowledge about my options for Redress  The service has provided a good amount of information about my options for Redress | I have very good knowledge about my options for Redress  The service has provided all the information I need about my options for Redress |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | I did not feel heard and believed about my experience | I felt a little heard and believed about my experience | I felt mostly heard and believed about my experience | The service heard and believed my experience | The service proactively made me feel heard and believed my experience |
| **I am satisfied with the services I have received** | I did not feel safe and supported throughout my experience with the service | I felt a little safe and supported throughout my experience with the service | I felt mostly safe and supported throughout my experience with the service | I felt safe and supported throughout my experience with the service | I felt very safe and supported throughout my experience with the service |
| **I am better able to deal with issues that I sought help with** | The service is providing no practical and/or emotional support throughout the redress process | The service is providing minimal practical and emotional support throughout the redress process | The service is providing some practical and emotional support throughout the redress process | The service is providing good practical and emotional support throughout the redress process | The service providing strong practical and emotional support throughout the redress process |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial meeting with clients to gather information about their circumstances and their support needs. |
| Information/Advice/Referral | Provide information or advice/guidance in relation to the scheme, or provide clients with a warm referral to another service. |
| Advocacy/Support | Advocacy on behalf of the client, collaboration with other services (e.g. Centrelink) and specialists, collaboration with community stakeholders and networks.  Use this service type when assisting a client to undertake a Direct Personal Response, including preparation, attending the Direct Personal Response and debriefing. |
| Records search | Contact with a client regarding records research. Use this service type when resources are specifically allocated to help a client find and/or access records to inform their application for redress. |
| Awareness session | Holding an event or activity to promote, raise awareness, or communicate information about the scheme to the community.  Unidentified clients is acceptable here only when the session primarily provides general information or advice to a broad audience.  It should not be used where the session includes an element of counselling (e.g. group therapy sessions) or intensive support (e.g. application assistance) to a group of clients. |
| Intensive support | Provide counselling or support to assist clients to complete, or complete on their behalf, an application for redress to the scheme. Provide additional information to the Scheme as needed, and support clients to understand and respond to a determination on an application for redress. |
| Counselling | Individual or group work to assist clients with safety and wellbeing or to work through a particular issue, as delivered by an industry recognised qualified staff member. This includes support for clients before completing the application for redress, during the application process where the session is solely on managing wellbeing, and while the Scheme assesses an application.  **Use ‘Intensive Support’** service type when providing any support relating to the completion of the application form. |
| Advocacy and internal review | Once a person receives a determination on an application for redress from the Scheme, they may request the Scheme undertake an internal review of the determination.  Use this service type when providing service to a client between the time they request an internal review from the Scheme, up to the point at which the determination of that review is made known to the client where the service relates to the internal review.  **Do not** use this service type if a person has received a determination but has not requested the Scheme undertake an internal review. |

### Specialised Family Violence Services – Fourth Action Plan (SFVS-4AP)

**Description**

Specialised Family Violence Services – 4AP (SFVS-4AP) is a component of Family and Relationship Services (FaRS) Sub-Activity. It contributes to the strategic vision in the Fourth Action Plan (4AP) of the *National Plan to Reduce Violence against Women and their Children 2010-2022* that ‘Australian women and their children live free from violence in safe communities’ and its action plans. This will be achieved through delivery of specialised services that support individuals, couples, children and families who are experiencing or at risk of family or domestic violence.

**Who is the primary client?**

Primary clients for this program activity are families and children.

**What are the key target group client characteristics for this program?**

There are six priority cohorts for this program activity:

* Aboriginal and Torres Strait Islander people,
* People from culturally and linguistically diverse (CALD) backgrounds,
* Women with disability,
* Children and young people,
* Lesbian, Gay, Bisexual, Trans, Intersex and Queer (LGBTIQ) communities, and
* People who use violence.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the [Data Exchange website](https://dex.dss.gov.au/training).

For this program activity, support persons may include carers of clients, care recipients, parents/guardians, family and community members (who are present but not directly receiving a service), legal representatives, case or support workers.

**Should unidentified ‘group’ clients be recorded?**

Specialised Family Violence Services – 4AP have limited use for unidentified clients. This program provides face‑to‑face support where clients are known to the service, therefore it is expected that only **10 per cent** of your clients or less should be recorded as unidentified ‘group’ clients in each reporting period. Please refer to the [Data Exchange Protocols](https://dex.dss.gov.au/document/81) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes.

**The partnership approach**

All SFVS – 4AP organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

It is expected that, where practical, you collect outcomes data for the majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you could also collect SCORE assessments periodically throughout service delivery.

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**Collecting extended data**

For this program activity, it is recommended that you collect the following extended data items, where possible:

|  |
| --- |
| **Case Level Data** |
| * Referral source |

You may also record other details if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Support to people impacted by family violence who are involved in either the Family Court or Children’s Courts. |
| Child/ Youth focussed groups | Group interventions for children and/or youth who have experienced or witnessed family and domestic violence, focusing on child therapeutic approaches. |
| Community capacity building | Capacity sessions for community organisations (e.g. Sporting clubs, Men’s Sheds) to target clients who could be violent against family members. Sessions engaging clients to promote cultural change. |
| Counselling | Domestic violence counselling services. |
| Education and skills training | A program for people who have experienced abuse in their family relationships, or a behavioural change program. |
| Family capacity building | Group program to strengthen relationships between parents and their children. |
| Information/Advice/Referral | Information session, brokerage to obtain other services, or referral to another service (e.g. legal, mental health etc.) |
| Intake/Assessment | Assessing a client in an initial session. |

## Financial Wellbeing and Capability (FWC)

The Financial Wellbeing and Capability (FWC) activity includes services and initiatives to provide support to vulnerable individuals and families to navigate financial crises, address financial stress and hardship, and increase financial literacy for individuals and families.

The following program activities are included in Financial Wellbeing and Capability:

* Commonwealth Financial Counselling and Financial Capability
* Financial Counselling Helpline
* Problem Gambling Financial Counselling
* Money Support Hubs
* Financial Resilience
* NILS-CV
* NILS-DV
* Financial Crisis and Material Aid – Emergency Relief

### Commonwealth Financial Counselling and Financial Capability

**Description**

Please refer Commonwealth Financial Counselling and Financial Capability services are delivered by community and local government organisations to help people address their financial problems, make informed choices and build longer‑term ability to budget and manage their money. Commonwealth Financial Counselling and Financial Capability services consist of two sub-components:

1. Commonwealth Financial Counselling

Helps people address their financial problems through the provision of information, advocacy and/or negotiation on behalf of the client.

Financial counsellors provide intensive support through an in-depth assessment of a person’s financial situation to understand the extent of the person’s financial difficulties and to identify options to address these. They encourage the person to participate in the planning and decision-making process. Financial counsellors may also refer clients to other sources of support and assistance, such as addiction support services, as necessary.

1. Financial Capability

Helps people to build longer-term capability to budget and manage their money better and make informed financial decisions. These services provide:

* financial literacy education
* one-on-one budgeting support to individuals
* non-accredited financial literacy community education workshops to eligible people

Financial Capability services supports eligible people with employment readiness through improving financial knowledge, skills and capabilities to assist them to achieve employment. Financial Capability helps people to build longer-term financial capability to budget and manage their money and to make informed choices about their money in the future. Financial Capability workers deliver basic financial literacy education, information and coaching. They maintain a strong focus on supporting clients to change their behaviour and ‘learn by doing’.

**Who is the primary client?**

Primary clients for this program activity are vulnerable people and those most at risk of financial exclusion and disadvantage.

**What are the key client characteristics?**

Client eligibility to receive Commonwealth Financial Counselling services is restricted solely to people unable to pay their bills or at imminent risk of not being able to do so.

Client eligibility to receive Financial Capability services is restricted to:

* those in receipt of a Commonwealth social security benefit, allowance or payment
* newly arrived migrants / non-citizens (priority to be given to newly arrived refugees)
* women experiencing family violence for the purpose of assisting these women to become financially independent

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website.](https://dex.dss.gov.au/)

For this program activity, support persons may include a case or support worker.

**Should unidentified clients be recorded?**

Commonwealth Financial Counselling and Financial Capability services provides face-to-face support where clients are known to the service and ongoing relationships are formed,therefore **no more than** **5 per cent** of clientsshould be recorded as unidentified.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes.

**The partnership approach**

All organisations are required to participate in the partnership approach. For Commonwealth Financial Counselling and Financial Capability, participation means organisations **must** record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstance SCORE for **at least 50 per cent** of identified clients
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients
* Report satisfaction SCOREs for **at least 10 per cent** of identified clients

It is a requirement of your grant agreement that you collect and report outcomes data for a majority of your clients. For organisations not already doing so, from 1 July to 31 December 2022, you are encouraged to report outcomes data for **50 per cent** of your clients. From 1 January 2023, should you not provide this data for **at least 50 per cent** of your clients it may impact future program and/or organisation funding.

A client SCORE assessment is to be recorded at least twice – towards the beginning of the client’s service delivery and once again towards the end. Where practical, organisations should record a SCORE assessment every six months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, organisations are required to collect and record SCORE assessments in the following domains as per the above guidance:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Financial resilience * Material wellbeing and basic necessities | * Changed knowledge * Changed skills * Changed behaviours * Empowerment, choice and control to make own decisions * Engagement with support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Financial resilience** | I am experiencing financial hardship. I feel like I cannot recover financially from this. | I am experiencing financial hardship. I feel I could recover financially from this but it will be difficult. | I am experiencing financial hardship but I am making some progress towards recovering financially. | I am or were experiencing financial hardship and have made good progress towards recovering financially. | I am no longer experiencing financial hardship and have recovered financially. |
| **Material wellbeing and basic necessities** | I always go without the basic things\* I need to live.  I do not participate in any of the things I would like to because I have no spare money. | I often go without the basic things\* I need to live.  I rarely participate in any of the things I would like to because I hardly ever have spare money. | I sometimes go without the basic things\* I need to live.  I sometimes participate in the things I would like to if I have spare money. | I rarely go without the basic things\* I need to live.  I often participate in the things I would like to because I usually have spare money. | I never go without the basic things\* I need to live.  I always participate in the things I would like to because I consistently have spare money. |

\*Basic things include food, housing, appropriate clothing for the climate, healthcare and security (protection from danger)

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge** | I know nothing about the issues I sought help with or how to improve my current circumstances. | I know a little about the areas I need to meet my needs and improve my current circumstances. | I have reasonable knowledge in the areas I need to meet my needs and improve my current circumstances. | I have good knowledge in the areas I need to meet my needs and improve my current circumstances. | I have very good knowledge in the areas I need to meet my needs and improve my current circumstances. |
| **Changed skills** | I have very poor skills in the areas I need to meet my needs and improve my current circumstances. | I have poor skills in the areas I need to meet my needs and improve my current circumstances. | I have reasonable skills in the areas I need to meet my needs and improve my current circumstances. | I have good skills in the areas I need to meet my needs and improve my current circumstances. | I have very good skills in the areas I need to meet my needs and improve my current circumstances. |
| **Changed behaviours** | My behaviour makes it very hard for me to improve my circumstances. | My behaviour makes it hard for me to improve my circumstances. | My behaviour makes it a little hard to improve my circumstances, but not always. | My behaviour generally allows me to improve my circumstances. | My behaviour allows me to improve my circumstances. |
| **Empowerment, choice and control to make own decisions** | I have no confidence to make decisions that improve my circumstances. | I have limited confidence and limited power to make decision that improve my circumstances. | I have some confidence and some control in making decisions that improve my circumstances. | Most of the time I have high confidence and feel better empowered to make decisions that improve my circumstances. | I have very good confidence and feel empowered to make decisions that improve my circumstances. |
| **Engagement with support services** | I have a lot of difficulty engaging and working with services to help me improve my circumstances. | I have some of difficulty engaging and working with services to help me improve my circumstances. | I occasionally have difficulty engaging and working with services to help me improve my circumstances. | I hardly ever have difficulty engaging and working with services to help me improve my circumstances. | It is easy to work with services to help me improve my circumstances. I rarely have difficulties. |
| **Changed Impact of immediate crisis** | Right now, I am facing a crisis that I struggle to cope with and this has an impact on my life. | The immediate crisis I am facing is difficult and has an impact on my life. I am interested in improving this. | The immediate crisis I am facing is sometimes difficult but I am working with a service to improve this. | The crisis I am facing is lessening and the service I am working with has helped me improve this. | I am no longer facing an immediate crisis and the service helped me manage this. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing community groups in the following Community domains.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | No change in community infrastructure / networks to respond to the needs of targeted clients / communities | Limited change in community infrastructure / networks–but emerging engagement of community networks | Limited change in community infrastructure / networks – but strong engagement of community networks | Moderate change in community infrastructure / networks | Significant positive change in community infrastructure / networks to better respond to the needs of targeted clients / communities |
| **Group/ community knowledge, skills, attitudes and behaviours** | No change in knowledge, skills, attitudes, behaviours | Limited change in knowledge, skills, attitudes, behaviours – but emerging engagement | Limited change in knowledge, skills, attitudes, behaviours – but strong engagement | Moderate change in knowledge, skills, attitudes, behaviours | Significant positive change in knowledge, skills, attitudes, behaviours |
| **Organisational knowledge, skills and practices** | No change in organisational knowledge, skills, practices to respond to the needs of targeted clients / communities | Limited change in organisational knowledge, skills, practices – but emerging engagement | Limited change in organisational knowledge, skills, practices – but strong engagement | Moderate change in organisational knowledge, skills, practices | Significant positive change in organisational knowledge, skills, behaviours to better respond to the needs of targeted clients / communities |

**Collecting extended data**

For this program activity, it is expected that organisations collect the following extended data items for all clients.

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Homeless indicator * Highest level of education/qualification * Employment status * Income (frequency and approximate gross income) * Main source of income | * Reason for seeking assistance * Client exit reason | * Referral type * Referrals to other services |

You may also record other details or SCORE domains if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type describes the main focus for the session being delivered. Where 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Gathering information on a client’s needs, assessing eligibility, matching clients to services available, initial assessment of an individual’s financial literacy/ability to budget. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic, such as consumer rights, fee free bank accounts, online financial literacy training, whether a financial counsellor may be required, and/or hardship programs.  Please note for Commonwealth Financial Counselling, ‘advice’ does not refer to financial or legal advice. |
| Education and skills training | Assisting clients in learning or building knowledge and skills about a topic, such as one-to-one and group financial literacy training, workshops, budget development training, workshops aimed to build self-confidence in speaking effectively with creditors. |
| Counselling | Working with clients to improve particular issues such as relationship or financial concerns. |
| Advocacy/Support | Advocating on a client’s behalf to another entity such as a government body or other organisation. This could include assistance in completing a hardship application form, searching for an appropriate bank account, providing support to a client self-advocating, advocating on behalf of a client to a bank, debt collector or energy company. |
| Community capacity building | Development of a community’s skills or understanding on topics (i.e., consumer rights, fee free banking, payday lenders), running community education workshops, community engagement activities with gambling venues and other community services. |
| Access to money (Loans) | Providing access for vulnerable people to safe and affordable financial products. For use when assisting an individual to complete a No Interest Loans Scheme (NILS) form to be submitted to a NILS provider or assisting the families or partners of problem gamblers to access safe finance such as NILS. Note: NILS organisations should report against this service type under the separate Financial Resilience – Microfinance program activity. |

### Financial Counselling Helpline (National Debt Helpline)

**Description**

The Financial Counselling Helpline, also known as the National Debt Helpline, helps eligible people to address their financial problems, make informed choices and build longer-term capability to budget and manage their money.

These services help people address their financial problems through the provision of information, advocacy and/or negotiation on behalf of the client.

Financial counsellors provide intensive support through an in-depth assessment of a person’s financial situation to understand the extent of the person’s financial difficulties and to identify options to address these. They encourage the person to participate in the planning and decision-making process. Financial counsellors may also refer clients to other local sources of support and assistance, such as addiction support services, as necessary.

**Who is the primary client?**

Primary clients for this program activity are vulnerable people and those most at risk of financial exclusion and disadvantage.

**What are the key client characteristics?**

Client eligibility is restricted to people unable to pay their bills or at imminent risk of not being able to do so.

**Who might be considered ‘support persons’?**

Support persons are not applicable for calls to the Financial Counselling Helpline.

**Should unidentified clients be recorded?**

The Financial Counselling Helpline provides a variety of services. Where clients are known to the service, registration of some kind is taken, and ongoing relationships are formed, these clients should have a client record created within the Data Exchange. Where clients are unknown to the service, such as instances of calling in for a quick referral/enquiry or phone number, these calls can be captured as unidentified clients.

Unidentified clients should be avoided where possible, as they only provide an aggregate count and have no related information such as cultural and linguistic, indigenous, or disability demographics. Therefore it is expected that **no more than** **20 per cent** of clients would be recorded as unidentified in any reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. However, organisations may wish to create cases that reflect services delivered via the CFC Helpline, for example, ‘Quick Referrals’.

**The partnership approach**

All organisations are required to participate in the partnership approach. For Financial Counselling Helpline, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstance SCORE for **at least 50 per cent** of identified clients
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients
* Report satisfaction SCOREs for **at least 10 per cent** of identified clients

It is a requirement of your grant agreement that you collect and report outcomes data for a majority of your clients. For organisations not already doing so, from 1 July to 31 December 2022, you are encouraged to report outcomes data for **50 per cent** of your clients. From 1 January 2023, should you not provide this data for **at least 50 per cent** of your clients it may impact future program and/or organisation funding.

A client SCORE assessment is to be recorded at least twice – towards the beginning of the client’s service delivery and once again towards the end. Where practical, organisations should record a SCORE assessment every six months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, organisations are required to collect and record SCORE assessments in the following domains as per the above guidance:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Financial resilience * Material wellbeing and basic necessities | * Changed knowledge * Changed skills * Changed behaviours * Empowerment, choice and control to make own decisions * Engagement with support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Financial resilience** | I am experiencing financial hardship. I feel like I cannot recover financially from this. | I am experiencing financial hardship. I feel I could recover financially from this but it will be difficult. | I am experiencing financial hardship but I am making some progress towards recovering financially. | I am or were experiencing financial hardship and have made good progress towards recovering financially. | I am no longer experiencing financial hardship and have recovered financially. |
| **Material wellbeing and basic necessities** | I always go without the basic things\* I need to live.  I do not participate in any of the things I would like to because I have no spare money. | I often go without the basic things\* I need to live.  I rarely participate in any of the things I would like to because I hardly ever have spare money. | I sometimes go without the basic things\* I need to live. I sometimes participate in the things I would like to if I have spare money. | I rarely go without the basic things\* I need to live. I often participate in the things I would like to because I usually have spare money. | I never go without the basic things\* I need to live. I always participate in the things I would like to because I consistently have spare money. |

\*Basic things include food, housing, appropriate clothing for the climate, healthcare and security (protection from danger)

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge** | I know nothing about the issues I sought help with or how to improve my current circumstances. | I know a little about the areas I need to meet my needs and improve my current circumstances. | I have reasonable knowledge in the areas I need to meet my needs and improve my current circumstances. | I have good knowledge in the areas I need to meet my needs and improve my current circumstances. | I have very good knowledge in the areas I need to meet my needs and improve my current circumstances. |
| **Changed skills** | I have very poor skills in the areas I need to meet my needs and improve my current circumstances. | I have poor skills in the areas I need to meet my needs and improve my current circumstances. | I have reasonable skills in the areas I need to meet my needs and improve my current circumstances. | I have good skills in the areas I need to meet my needs and improve my current circumstances. | I have very good skills in the areas I need to meet my needs and improve my current circumstances. |
| **Changed behaviours** | My behaviour makes it very hard for me to improve my circumstances. | My behaviour makes it hard for me to improve my circumstances. | My behaviour makes it a little hard to improve my circumstances, but not always. | My behaviour generally allows me to improve my circumstances. | My behaviour allows me to improve my circumstances. |
| **Empowerment, choice and control to make own decisions** | I have no confidence to make decisions that improve my circumstances. | I have limited confidence and limited power to make decision that improve my circumstances. | I have some confidence and some control in making decisions that improve my circumstances. | Most of the time I have high confidence and feel better empowered to make decisions that improve my circumstances. | I have very good confidence and feel empowered to make decisions that improve my circumstances. |
| **Engagement with support services** | I have a lot of difficulty engaging and working with services to help me improve my circumstances. | I have some of difficulty engaging and working with services to help me improve my circumstances. | I occasionally have difficulty engaging and working with services to help me improve my circumstances. | I hardly ever have difficulty engaging and working with services to help me improve my circumstances. | It is easy to work with services to help me improve my circumstances. I rarely have difficulties. |
| **Changed Impact of immediate crisis** | Right now, I am facing a crisis that I struggle to cope with and this has an impact on my life. | The immediate crisis I am facing is difficult and has an impact on my life. I am interested in improving this. | The immediate crisis I am facing is sometimes difficult but I am working with a service to improve this. | The crisis I am facing is lessening and the service I am working with has helped me improve this. | I am no longer facing an immediate crisis and the service helped me manage this. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing community groups in the following Community domains.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | No change in community infrastructure/ networks to respond to the needs of targeted clients / communities | Limited change in community infrastructure / networks – but emerging engagement of community networks | Limited change in community infrastructure/ networks – but strong engagement of community networks | Moderate change in community infrastructure / networks | Significant positive change in community infrastructure / networks to better respond to the needs of targeted clients / communities |
| **Group/ community knowledge, skills, attitudes and behaviours** | No change in knowledge, skills, attitudes, behaviours | Limited change in knowledge, skills, attitudes, behaviours – but emerging engagement | Limited change in knowledge, skills, attitudes, behaviours–but strong engagement | Moderate change in knowledge, skills, attitudes, behaviours | Significant positive change in knowledge, skills, attitudes, behaviours |
| **Organisational knowledge, skills and practices** | No change in organisational knowledge, skills, practices to respond to the needs of targeted clients / communities | Limited change in organisational knowledge, skills, practices – but emerging engagement | Limited change in organisational knowledge, skills, practices – but strong engagement | Moderate change in organisational knowledge, skills, practices | Significant positive change in organisational knowledge, skills, behaviours to better respond to the needs of targeted clients / communities |

**Collecting extended data**

For this program activity, it is expected that organisations collect the following extended data items for all clients.

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Homeless indicator * Highest level of education/qualification * Employment status * Income (frequency and approximate gross income) * Main source of income | * Reason for seeking assistance * Client exit reason | * Referral type * Referrals to other services |

You may also record other details or SCORE domains if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type describes the **main** focus for the session being delivered. Where 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Gathering information on clients' needs, assessing eligibility, matching clients to services available, initial assessment of client’s financial literacy and ability to budget. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic, such as consumer rights, hardship programs, suggestions of an initial approach to address immediate financial crisis, and/or advice on where to find more information. |
| Education and skills training | Assisting a client in learning or building skills, such as a budget development, one-to-one budget training, or self-advocacy to speak effectively to creditors. |
| Counselling | Working with clients to improve financial concerns. |
| Advocacy/Support | Advocating on a client’s behalf to another entity such as a government body or other organisation. For Financial Counselling this could include advocating with creditors including banks, debt collectors and energy companies. |
| Community capacity building | Development of a communities skills or understanding on topics such as consumer rights, fee free banking and payday lenders. |

Problem Gambling Financial Counselling

**Description**

The Problem Gambling activity provides specialist financial counselling for those affected by problem gambling and their families.

**Who is the primary client?**

Primary clients for this activity are people (individuals and family members) with financial issues as a result of problem gambling.

**What are the key client characteristics?**

Client eligibility is restricted to people unable to pay their bills or at imminent risk of not being able to do so.

**Who might be considered ‘support persons’?**

Support persons are unlikely to be relevant for the Problem Gambling activity.

**Should unidentified clients be recorded?**

The Problem Gambling activity provides face-to-face support where clients are known to the service and ongoing relationships are formed, therefore **5 per cent of clients or less** should be recorded as unidentified.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes.

**The partnership approach**

All organisations are required to participate in the partnership approach. For Problem Gambling Financial Counselling, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstance SCORE for **at least 50 per cent** of identified clients
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients
* Report satisfaction SCOREs for **at least 10 per cent** of identified clients

It is a requirement of your grant agreement that you collect and report outcomes data for a majority of your clients. For organisations not already doing so, from 1 July to 31 December 2022, you are encouraged to report outcomes data for **50 per cent** of your clients. From 1 January 2023, should you not provide this data for **at least 50 per cent** of your clients it may impact future program and/or organisation funding.

A client SCORE assessment is to be recorded at least twice – towards the beginning of the client’s service delivery and once again towards the end. Where practical, organisations should record a SCORE assessment every six months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, organisations are required to collect and record SCORE assessments in the following domains as per the above guidance:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Financial resilience * Material wellbeing and basic necessities | * Changed knowledge * Changed skills * Changed behaviours * Empowerment, choice and control to make own decisions * Engagement with support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Financial resilience** | I am experiencing financial hardship. I feel like I cannot recover financially from this. | I am experiencing financial hardship. I feel I could recover financially from this but it will be difficult. | I am experiencing financial hardship but I am making some progress towards recovering financially. | I am or were experiencing financial hardship and have made good progress towards recovering financially. | I am no longer experiencing financial hardship and have recovered financially. |
| **Material wellbeing and basic necessities** | I always go without the basic things\* I need to live.  I do not participate in any of the things I would like to because I have no spare money. | I often go without the basic things\* I need to live.  I rarely participate in any of the things I would like to because I hardly ever have spare money. | I sometimes go without the basic things\* I need to live.  I sometimes participate in the things I would like to if I have spare money. | I rarely go without the basic things\* I need to live.  I often participate in the things I would like to because I usually have spare money. | I never go without the basic things\* I need to live.  I always participate in the things I would like to because I consistently have spare money. |

\*Basic things include food, housing, appropriate clothing for the climate, healthcare and security (protection from danger)

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge** | I know nothing about the issues I sought help with or how to improve my current circumstances. | I know a little about the areas I need to meet my needs and improve my current circumstances. | I have reasonable knowledge in the areas I need to meet my needs and improve my current circumstances. | I have good knowledge in the areas I need to meet my needs and improve my current circumstances. | I have very good knowledge in the areas I need to meet my needs and improve my current circumstances. |
| **Changed skills** | I have very poor skills in the areas I need to meet my needs and improve my current circumstances. | I have poor skills in the areas I need to meet my needs and improve my current circumstances. | I have reasonable skills in the areas I need to meet my needs and improve my current circumstances. | I have good skills in the areas I need to meet my needs and improve my current circumstances. | I have very good skills in the areas I need to meet my needs and improve my current circumstances. |
| **Changed behaviours** | My behaviour makes it very hard for me to improve my circumstances. | My behaviour makes it hard for me to improve my circumstances. | My behaviour makes it a little hard to improve my circumstances, but not always. | My behaviour generally allows me to improve my circumstances. | My behaviour allows me to improve my circumstances. |
| **Empowerment, choice and control to make own decisions** | I have no confidence to make decisions that improve my circumstances. | I have limited confidence and limited power to make decision that improve my circumstances. | I have some confidence and some control in making decisions that improve my circumstances. | Most of the time I have high confidence and feel better empowered to make decisions that improve my circumstances. | I have very good confidence and feel empowered to make decisions that improve my circumstances. |
| **Engagement with support services** | I have a lot of difficulty engaging and working with services to help me improve my circumstances. | I have some of difficulty engaging and working with services to help me improve my circumstances. | I occasionally have difficulty engaging and working with services to help me improve my circumstances. | I hardly ever have difficulty engaging and working with services to help me improve my circumstances. | It is easy to work with services to help me improve my circumstances. I rarely have difficulties. |
| **Changed Impact of immediate crisis** | Right now, I am facing a crisis that I struggle to cope with and this has an impact on my life. | The immediate crisis I am facing is difficult and has an impact on my life. I am interested in improving this. | The immediate crisis I am facing is sometimes difficult but I am working with a service to improve this. | The crisis I am facing is lessening and the service I am working with has helped me improve this. | I am no longer facing an immediate crisis and the service helped me manage this. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing community groups in the following Community domains.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | No change in community infrastructure/ networks to respond to the needs of targeted clients / communities | Limited change in community infrastructure / networks–but emerging engagement of community networks | Limited change in community infrastructure/ networks–but strong engagement of community networks | Moderate change in community infrastructure/ networks | Significant positive change in community infrastructure / networks to better respond to the needs of targeted clients / communities |
| **Group/ community knowledge, skills, attitudes and behaviours** | No change in knowledge, skills, attitudes, behaviours | Limited change in knowledge, skills, attitudes, behaviours – but emerging engagement | Limited change in knowledge, skills, attitudes, behaviours – but strong engagement | Moderate change in knowledge, skills, attitudes, behaviours | Significant positive change in knowledge, skills, attitudes, behaviours |
| **Organisational knowledge, skills and practices** | No change in organisational knowledge, skills, practices to respond to the needs of targeted clients / communities | Limited change in organisational knowledge, skills, practices – but emerging engagement | Limited change in organisational knowledge, skills, practices – but strong engagement | Moderate change in organisational knowledge, skills, practices | Significant positive change in organisational knowledge, skills, behaviours to better respond to the needs of targeted clients / communities |

**Collecting extended data**

For this program activity, it is expected that organisations collect the following extended data items for all clients.

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Homeless indicator * Highest level of education/qualification * Employment status * Income (frequency and approximate gross income) * Main source of income | * Reason for seeking assistance * Client exit reason | * Referral type * Referrals to other services |

You may also record other details or SCORE domains if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type describes the **main** focus for the session being delivered. Where 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Gathering information on clients' needs, matching clients to services, initial assessment of financial literacy/ability to budget or assess the seriousness of their situation. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic, such as one-to-one budget development, accessing hardship programs, and budget management training, and information about services in gambling venues. |
| Education and skills training | Assisting a client in learning or building skills about a topic, such as budget development training and self-advocacy. |
| Counselling | Working with clients to improve financial concerns or supporting the families or partners of problem gamblers. |
| Advocacy/Support | Advocating on a client’s 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. This category includes negotiation alongside, or on behalf of, the client (e.g. with creditors). |
| Community capacity building | Development of a community’s skills /understanding on topics such as consumer rights, fee-free banking, and payday lenders. Includes community education workshops, and working with gaming venues and state and territory funded problem gambling services. |
| Access to money (Loans) | Providing access for vulnerable people to safe and affordable financial products not available through mainstream organisations. Assisting the families or partners of problem gamblers to access safe finance such as No Interest Loans Scheme (NILS). |

Money Support Hubs

(Formerly known as ‘Financial Counselling and Financial Capability - IM Hubs’, and ‘Financial Counselling and Financial Capability – Cape York’)

**Description**

Money Support Hubs provide integrated Commonwealth Financial Counselling and Financial Capability services, and in some instances Emergency Relief services and access to Microfinance products, in Income Management and Cashless Debit Card locations. Services are provided to people from all communities that lie within each organisation’s coverage areas, including small outstations or communities, either through a permanent presence or outreach.

Money Support Hub services consist of two sub-components:

1. Commonwealth Financial Counselling

Commonwealth Financial Counselling helps eligible people to address their financial problems through the provision of information, advocacy and/or negotiation on behalf of the client.

Financial counsellors provide intensive support through an in-depth assessment of a person’s financial situation to understand the extent of the person’s financial difficulties and to identify options to address these. They encourage the person to participate in the planning and decision-making process. Financial counsellors may also refer clients to other sources of support and assistance, such as addiction support services, as necessary.

2. Financial Capability

Financial Capability services help eligible people to build longer-term capability to budget and manage their money better and make informed financial decisions.

These services provide:

* financial literacy education
* one-on-one budgeting support to individuals
* non-accredited financial literacy community education workshops to eligible people

Financial Capability services support eligible people with employment readiness through improving financial knowledge, skills and capabilities to assist them to achieve employment.

**Who is the primary client?**

Primary clients for this program activity are vulnerable people and those most at risk of financial and social exclusion and disadvantage.

**What are the key client characteristics?**

Client eligibility to receive Commonwealth Financial Counselling services is restricted solely to people unable to pay their bills or at imminent risk of not being able to do so.

Client eligibility to receive Financial Capability services is restricted to:

* those in receipt of a Commonwealth social security benefit, allowance or payment
* newly arrived migrants /non-citizens (priority to be given to newly arrived refugees)
* women experiencing family violence for the purpose of assisting these women to become financially independent

**Who might be considered ‘support persons’?**

Support persons are not applicable for Money Support Hubs.

**Should unidentified clients be recorded?**

Money Support Hubs provides support where clients are known to the service and ongoing relationships are formed, therefore **no more than** **5 per cent** of clientsshould be recorded as unidentified.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes.

**The partnership approach**

All organisations are required to participate in the partnership approach. For Money Support Hubs, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstance SCORE for **at least 50 per cent** of identified clients
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients
* Report satisfaction SCOREs for **at least 10 per cent** of identified clients

It is a requirement of your grant agreement that you collect and report outcomes data for a majority of your clients. For organisations not already doing so, from 1 July to 31 December 2022, you are encouraged to report outcomes data for **50 per cent** of your clients. From 1 January 2023, should you not provide this data for **at least 50 per cent** of your clients it may impact future program and/or organisation funding.

A client SCORE assessment is to be recorded at least twice – towards the beginning of the client’s service delivery and once again towards the end. Where practical, organisations should record a SCORE assessment every six months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, organisations are required to collect and record SCORE assessments in the following domains as per the above guidance:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Financial resilience * Material wellbeing and basic necessities | * Changed knowledge * Changed skills * Changed behaviours * Empowerment, choice and control to make own decisions * Engagement with support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Financial resilience** | I am experiencing financial hardship. I feel like I cannot recover financially from this. | I am experiencing financial hardship. I feel I could recover financially from this but it will be difficult. | I am experiencing financial hardship but I am making some progress towards recovering financially. | I am or were experiencing financial hardship and have made good progress towards recovering financially. | I am no longer experiencing financial hardship and have recovered financially. |
| **Material wellbeing and basic necessities** | I always go without the basic things\* I need to live.  I do not participate in any of the things I would like to because I have no spare money. | I often go without the basic things\* I need to live.  I rarely participate in any of the things I would like to because I hardly ever have spare money. | I sometimes go without the basic things\* I need to live.  I sometimes participate in the things I would like to if I have spare money. | I rarely go without the basic things\* I need to live.  I often participate in the things I would like to because I usually have spare money. | I never go without the basic things\* I need to live.  I always participate in the things I would like to because I consistently have spare money. |

\*Basic things include food, housing, appropriate clothing for the climate, healthcare and security (protection from danger)

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge** | I know nothing about the issues I sought help with or how to improve my current circumstances. | I know a little about the areas I need to meet my needs and improve my current circumstances. | I have reasonable knowledge in the areas I need to meet my needs and improve my current circumstances. | I have good knowledge in the areas I need to meet my needs and improve my current circumstances. | I have very good knowledge in the areas I need to meet my needs and improve my current circumstances. |
| **Changed skills** | I have very poor skills in the areas I need to meet my needs and improve my current circumstances. | I have poor skills in the areas I need to meet my needs and improve my current circumstances. | I have reasonable skills in the areas I need to meet my needs and improve my current circumstances. | I have good skills in the areas I need to meet my needs and improve my current circumstances. | I have very good skills in the areas I need to meet my needs and improve my current circumstances. |
| **Changed behaviours** | My behaviour makes it very hard for me to improve my circumstances. | My behaviour makes it hard for me to improve my circumstances. | My behaviour makes it a little hard to improve my circumstances, but not always. | My behaviour generally allows me to improve my circumstances. | My behaviour allows me to improve my circumstances. |
| **Empowerment, choice and control to make own decisions** | I have no confidence to make decisions that improve my circumstances. | I have limited confidence and limited power to make decision that improve my circumstances. | I have some confidence and some control in making decisions that improve my circumstances. | Most of the time I have high confidence and feel better empowered to make decisions that improve my circumstances. | I have very good confidence and feel empowered to make decisions that improve my circumstances. |
| **Engagement with support services** | I have a lot of difficulty engaging and working with services to help me improve my circumstances. | I have some of difficulty engaging and working with services to help me improve my circumstances. | I occasionally have difficulty engaging and working with services to help me improve my circumstances. | I hardly ever have difficulty engaging and working with services to help me improve my circumstances. | It is easy to work with services to help me improve my circumstances. I rarely have difficulties. |
| **Changed Impact of immediate crisis** | Right now, I am facing a crisis that I struggle to cope with and this has an impact on my life. | The immediate crisis I am facing is difficult and has an impact on my life. I am interested in improving this. | The immediate crisis I am facing is sometimes difficult but I am working with a service to improve this. | The crisis I am facing is lessening and the service I am working with has helped me improve this. | I am no longer facing an immediate crisis and the service helped me manage this. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing community groups in the following Community domains.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | No change in community infrastructure / networks to respond to the needs of targeted clients / communities | Limited change in community infrastructure / networks–but emerging engagement of community networks | Limited change in community infrastructure / networks–but strong engagement of community networks | Moderate change in community infrastructure / networks | Significant positive change in community infrastructure / networks to better respond to the needs of targeted clients / communities |
| **Group/ community knowledge, skills, attitudes and behaviours** | No change in knowledge, skills, attitudes, behaviours | Limited change in knowledge, skills, attitudes, behaviours–but emerging engagement | Limited change in knowledge, skills, attitudes, behaviours–but strong engagement | Moderate change in knowledge, skills, attitudes, behaviours | Significant positive change in knowledge, skills, attitudes, behaviours |
| **Organisational knowledge, skills and practices** | No change in organisational knowledge, skills, practices to respond to the needs of targeted clients / communities | Limited change in organisational knowledge, skills, practices – but emerging engagement | Limited change in organisational knowledge, skills, practices – but strong engagement | Moderate change in organisational knowledge, skills, practices | Significant positive change in organisational knowledge, skills, behaviours to better respond to the needs of targeted clients / communities |

**Collecting extended data**

For this program activity, it is expected that organisations collect the following extended data items for all clients.

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Homeless indicator * Highest level of education/qualification * Employment status * Income (frequency and approximate gross income) * Main source of income | * Reason for seeking assistance * Client exit reason | * Referral type * Referrals to other services |

You may also record other details or SCORE domains if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type describes the **main** focus for the session being delivered. Where 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Gathering information on clients' needs, eligibility, matching clients to services, initial assessment of client’s financial literacy and ability to budget. |
| Information/Advice/Referral | Provision of standard advice on a specific topic, guidance or information on a specific topic (consumer rights, fee free banking, online financial literacy, hardship programs etc.), advice on addressing a client’s immediate crisis, referrals to another service such as financial counselling, emergency relief, Centrelink etc. |
| Education and skills training | Assisting a client in learning or building skills, delivery of financial literacy training or workshops and IHOME training, one-on-one budget training development, budget management training, building confidence to self-advocate and speak effectively to creditors. |
| Counselling | Delivered by an industry recognised, qualified staff member. Provision of counselling to individuals and families in relation to financial and relationship concerns. |
| Advocacy/Support | Advocating on a client’s behalf to another entity such as a bank or government body, supporting individuals to self-advocate (e.g. when making a phone call), assisting a person to complete application forms such as hardship applications or bank account forms. |
| Community capacity building | Delivery of information sessions designed to inform communities about topics such as consumer rights, fee free banking and payday lenders. |
| Access to money (Loans) | Providing financially vulnerable people with access to safe and affordable financial products including no interest loans.  Assisting individuals to complete a No Interest Loans Scheme (NILS) form to be submitted to a NILS provider. Note: NILS providers should report against this service type under the separate Financial Resilience – Microfinance program activity. |

### **Financial** **Resilience**

**Description**

Financial Resilience, or microfinance, provides financially vulnerable people with access to safe and affordable financial products including no interest loans, microenterprise development support and loans, and matched savings that are not available through mainstream organisations of financial services. These products are offered as an alternative to other high risk, high interest products such as payday loans. These products are provided in conjunction with financial literacy training to improve capacity and self-reliance; assisting clients to build assets, savings and commence on pathways to financial inclusion.

**Who is the primary client?**

Primary clients for this program activity are vulnerable people and those most at risk of financial and social exclusion and disadvantage.

**What are the key client characteristics?**

Client eligibility for **Community Development Financial Institutions** (CDFI) services is restricted solely to:

* People requiring assistance to improve their financial knowledge, skills and capabilities in relation to loans provided to them by a bank.
* People in receipt of an unemployment benefit to support them to enhance their workforce participation through increased business planning and workforce skills, development of sustainable microenterprises and creating opportunities for employment including self-employment.
* Women experiencing family violence, for the purpose of assisting these women to become financially independent.

Client eligibility for the **No Interest Loan Scheme** (NILS) is restricted solely to:

* People and couples with income/s at or below the income test applicable for the single or partnered pension rate, where the person/s is otherwise unable to meet their immediate and basic needs and has no other capacity to obtain financial support to satisfy their basic needs.
* Women experiencing family violence, to support them to become financially independent.
* Parents and guardians on a low income with dependent children to ensure an adequate standard of living for their children.
* People with disabilities or their family members who are on a low income, to support them with disability-related expenses.

Client eligibility for **Saver Plus** is restricted solely to those in receipt of a Commonwealth social security benefit, allowance or payment to assist them to manage their social welfare payment.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families or children of clients who are present but not directly receiving a service.

**Should unidentified clients be recorded?**

Financial Resilience provides personal support, either by face-to-face, telephone or online support where clients are known to the service and ongoing relationships are formed, therefore **no more than** **5 per cent** of clients should be recorded as unidentified.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. However, organisations can create a separate case for each individual accessing service. This means if a client accesses one or more services (such as NILS and Saver Plus) all sessions related to that individual are recorded within a case assigned to them. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g: 1286.

**The partnership approach**

All organisations are required to participate in the partnership approach. For Financial Resilience, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstance SCORE for **at least 50 per cent** of identified clients
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients
* Report satisfaction SCOREs for **at least 10 per cent** of identified clients

It is a requirement of your grant agreement that you collect and report outcomes data for a majority of your clients. For organisations not already doing so, from 1 July to 31 December 2022, you are encouraged to report outcomes data for **50 per cent** of your clients. From 1 January 2023, should you not provide this data for **at least 50 per cent** of your clients it may impact future program and/or organisation funding.

A client SCORE assessment is to be recorded at least twice – towards the beginning of the client’s service delivery and once again towards the end. Where practical, organisations should record a SCORE assessment every six months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, organisations are required to collect and record SCORE assessments in the following domains as per the above guidance:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Financial resilience * Material wellbeing and basic necessities | * Changed knowledge * Changed skills * Changed behaviours * Empowerment, choice and control to make own decisions * Engagement with support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Financial resilience** | I am experiencing financial hardship. I feel like I cannot recover financially from this. | I am experiencing financial hardship. I feel I could recover financially from this but it will be difficult. | I am experiencing financial hardship but I am making some progress towards recovering financially. | I am or were experiencing financial hardship and have made good progress towards recovering financially. | I am no longer experiencing financial hardship and have recovered financially. |
| **Material wellbeing and basic necessities** | I always go without the basic things\* I need to live.  I do not participate in any of the things I would like to because I have no spare money. | I often go without the basic things\* I need to live.  I rarely participate in any of the things I would like to because I hardly ever have spare money. | I sometimes go without the basic things\* I need to live.  I sometimes participate in the things I would like to if I have spare money. | I rarely go without the basic things\* I need to live.  I often participate in the things I would like to because I usually have spare money. | I never go without the basic things\* I need to live.  I always participate in the things I would like to because I consistently have spare money. |

\*Basic things include food, housing, appropriate clothing for the climate, healthcare and security (protection from danger)

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge** | I know nothing about the issues I sought help with or how to improve my current circumstances. | I know a little about the areas I need to meet my needs and improve my current circumstances. | I have reasonable knowledge in the areas I need to meet my needs and improve my current circumstances. | I have good knowledge in the areas I need to meet my needs and improve my current circumstances. | I have very good knowledge in the areas I need to meet my needs and improve my current circumstances. |
| **Changed skills** | I have very poor skills in the areas I need to meet my needs and improve my current circumstances. | I have poor skills in the areas I need to meet my needs and improve my current circumstances. | I have reasonable skills in the areas I need to meet my needs and improve my current circumstances. | I have good skills in the areas I need to meet my needs and improve my current circumstances. | I have very good skills in the areas I need to meet my needs and improve my current circumstances. |
| **Changed behaviours** | My behaviour makes it very hard for me to improve my circumstances. | My behaviour makes it hard for me to improve my circumstances. | My behaviour makes it a little hard to improve my circumstances, but not always. | My behaviour generally allows me to improve my circumstances. | My behaviour allows me to improve my circumstances. |
| **Empowerment, choice and control to make own decisions** | I have no confidence to make decisions that improve my circumstances. | I have limited confidence and limited power to make decision that improve my circumstances. | I have some confidence and some control in making decisions that improve my circumstances. | Most of the time I have high confidence and feel better empowered to make decisions that improve my circumstances. | I have very good confidence and feel empowered to make decisions that improve my circumstances. |
| **Engagement with support services** | I have a lot of difficulty engaging and working with services to help me improve my circumstances. | I have some of difficulty engaging and working with services to help me improve my circumstances. | I occasionally have difficulty engaging and working with services to help me improve my circumstances. | I hardly ever have difficulty engaging and working with services to help me improve my circumstances. | It is easy to work with services to help me improve my circumstances. I rarely have difficulties. |
| **Changed Impact of immediate crisis** | Right now, I am facing a crisis that I struggle to cope with and this has an impact on my life. | The immediate crisis I am facing is difficult and has an impact on my life. I am interested in improving this. | The immediate crisis I am facing is sometimes difficult but I am working with a service to improve this. | The crisis I am facing is lessening and the service I am working with has helped me improve this. | I am no longer facing an immediate crisis and the service helped me manage this. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing community groups in the following Community domains.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | No change in community infrastructure/ networks to respond to the needs of targeted clients / communities | Limited change in community infrastructure / networks–but emerging engagement of community networks | Limited change in community infrastructure/ networks–but strong engagement of community networks | Moderate change in community infrastructure/ networks | Significant positive change in community infrastructure/ networks to better respond to the needs of targeted clients / communities |
| **Group/ community knowledge, skills, attitudes and behaviours** | No change in knowledge, skills, attitudes, behaviours | Limited change in knowledge, skills, attitudes, behaviours–but emerging engagement | Limited change in knowledge, skills, attitudes, behaviours–but strong engagement | Moderate change in knowledge, skills, attitudes, behaviours | Significant positive change in knowledge, skills, attitudes, behaviours |
| **Organisational knowledge, skills and practices** | No change in organisational knowledge, skills, practices to respond to the needs of targeted clients / communities | Limited change in organisational knowledge, skills, practices – but emerging engagement | Limited change in organisational knowledge, skills, practices – but strong engagement | Moderate change in organisational knowledge, skills, practices | Significant positive change in organisational knowledge, skills, behaviours to better respond to the needs of targeted clients / communities |

**Collecting extended data**

For this activity, it is expected that organisations collect the following extended data items for all clients:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Homeless indicator * Highest level of education/qualification * Employment status * Income (frequency and approximate gross income) * Main source of income | * Reason for seeking assistance * Client exit reason | * Referral type * Referrals to other services |

You may also record other details or SCORE domains if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type describes the **main** focus for the session being delivered. Where 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Microfinance loan interview for No Interest Loans Scheme (NILS), enrolment with Saver Plus and assessment of eligibility, initial meeting with a Community Development Financial Institution (CDFI) and pre-business planning. |
| Information/Advice/Referral | Provision of standard advice, guidance or information on a specific topic, referrals on to another service such as financial counselling, emergency relief, Centrelink etc.  Includes following up existing loans that are not currently being paid.  Includes following up people who have stopped saving for a period of time or stopped attending MoneyMinded training.  For CDFIs, includes providing clients with information or advice on certain business topics such as tendering, staffing etc. and referrals on to specialist services (accounting, legal, insurance and telecommunications). |
| Education and skills training | Building knowledge or skills about a topic relevant to the client's circumstance, such as financial literacy training, MoneyMinded sessions, one-on-one business education or group training workshops as well as assisting clients in re-engaging with the education system. For CDFIs, includes development of business skills such as cash flow planning, record and book keeping. |
| Advocacy/Support | Advocating on behalf of a client to a government body or other organisation such as Centrelink or real estate company, supporting a client in a particular circumstance such as negotiating with a supplier to improve their ability to apply for and service a NILS loan. |
| Mentoring/Peer support | For Saver Plus, this includes additional support and encouragement to save. For CDFIs, this includes business mentoring provided to vulnerable individuals throughout the development of a microenterprise, including business review and post establishment. |
| Access to money (Loans) | Provide access to a NILS loan for material goods /household items, healthcare or educational expenses. This service type should only capture signing a loan contract for a new loan; the follow up of a loan should be recorded as information/advice/referral. This service type includes repeat borrowers accessing new loans for essential goods or services.  This service type does not apply to matched savings payments for Saver Plus.  This service type does not apply to following up on existing loans that are not currently being paid.  This service type does not cover business loans for microenterprise development. |
| Facilitate employment pathways | Referring clients to employment providers (such as job active), employment opportunities, assisting clients to move into employment, including self-employment. |
| Access to money – Matched savings | In relation to Saver Plus, the issuing of a matched savings payment. |
| Access to money – Business Loan | Includes business loans for microenterprise development, facilitating access to a business loan. This only captures signing a loan contract for a new loan; the follow up of a loan should be recorded as information/advice/referral. This service type includes repeat borrowers accessing new loans for microenterprise development. |
| Business planning | Includes development and/or review of a business plan and related items, such as Australian Business Name and name registration, governance, risk analysis and development of a marketing plan. |

### **NILS-CV**

**Description**

The NILS-CV program provides a safe and affordable solution in the form of a no interest loan to meet the financial needs of people impacted by unemployment or loss of income due to the Coronavirus pandemic.

**Who is the primary client?**

Primary clients for this program activity are unemployed persons, or persons suffering from financial hardship.

**What are the key client characteristics?**

Client eligibility for the **NILS-CV** program:

* Income of <$60k gross (singles) or <$100k gross (couples /families) at the time they use the service
* Income affected by COVID

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families or children of clients, parents / guardians of clients or carers of clients / care recipients who are present but not directly receiving a service.

**Should unidentified clients be recorded?**

NILS-CV provides personal support, either by face-to-face, telephone or online support where clients are known to the service and ongoing relationships are formed, therefore **no more than** **5 per cent** of clients should be recorded as unidentified.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. However, organisations can create a separate case for each individual accessing a service. To protect client privacy, the case identity (ID) should not contain any personal information, such as any part of a client’s first or last names, Customer Reference Numbers (CRN) or My Aged Care reference numbers. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 1286.

**The partnership approach**

All organisations are required to participate in the partnership approach. For NILS-CV, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstance SCORE for **at least 50 per cent** of identified clients
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients
* Report satisfaction SCOREs for **at least 10 per cent** of identified clients

It is a requirement of your grant agreement that you collect and report outcomes data for a majority of your clients. For organisations not already doing so, from 1 July to 31 December 2022, you are encouraged to report outcomes data for **50 per cent** of your clients. From 1 January 2023, should you not provide this data for **at least 50 per cent** of your clients it may impact future program and/or organisation funding.

A client SCORE assessment is to be recorded at least twice – towards the beginning of the client’s service delivery and once again towards the end. Where practical, organisations should record a SCORE assessment every six months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, organisations are required to collect and record SCORE assessments in the following domains as per the above guidance:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Financial resilience * Material wellbeing and basic necessities | * Changed knowledge * Changed skills * Changed behaviours * Empowerment, choice and control to make own decisions * Engagement with support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Financial resilience** | I am experiencing financial hardship. I feel like I cannot recover financially from this. | I am experiencing financial hardship. I feel I could recover financially from this but it will be difficult. | I am experiencing financial hardship but I am making some progress towards recovering financially. | I am or were experiencing financial hardship and have made good progress towards recovering financially. | I am no longer experiencing financial hardship and have recovered financially. |
| **Material wellbeing and basic necessities** | I always go without the basic things\* I need to live.  I do not participate in any of the things I would like to because I have no spare money. | I often go without the basic things\* I need to live.  I rarely participate in any of the things I would like to because I hardly ever have spare money. | I sometimes go without the basic things\* I need to live.  I sometimes participate in the things I would like to if I have spare money. | I rarely go without the basic things\* I need to live.  I often participate in the things I would like to because I usually have spare money. | I never go without the basic things\* I need to live.  I always participate in the things I would like to because I consistently have spare money. |

\*Basic things include food, housing, appropriate clothing for the climate, healthcare and security (protection from danger)

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge** | I know nothing about the issues I sought help with or how to improve my current circumstances. | I know a little about the areas I need to meet my needs and improve my current circumstances. | I have reasonable knowledge in the areas I need to meet my needs and improve my current circumstances. | I have good knowledge in the areas I need to meet my needs and improve my current circumstances. | I have very good knowledge in the areas I need to meet my needs and improve my current circumstances. |
| **Changed skills** | I have very poor skills in the areas I need to meet my needs and improve my current circumstances. | I have poor skills in the areas I need to meet my needs and improve my current circumstances. | I have reasonable skills in the areas I need to meet my needs and improve my current circumstances. | I have good skills in the areas I need to meet my needs and improve my current circumstances. | I have very good skills in the areas I need to meet my needs and improve my current circumstances. |
| **Changed behaviours** | My behaviour makes it very hard for me to improve my circumstances. | My behaviour makes it hard for me to improve my circumstances. | My behaviour makes it a little hard to improve my circumstances, but not always. | My behaviour generally allows me to improve my circumstances. | My behaviour allows me to improve my circumstances. |
| **Empowerment, choice and control to make own decisions** | I have no confidence to make decisions that improve my circumstances. | I have limited confidence and limited power to make decision that improve my circumstances. | I have some confidence and some control in making decisions that improve my circumstances. | Most of the time I have high confidence and feel better empowered to make decisions that improve my circumstances. | I have very good confidence and feel empowered to make decisions that improve my circumstances. |
| **Engagement with support services** | I have a lot of difficulty engaging and working with services to help me improve my circumstances. | I have some of difficulty engaging and working with services to help me improve my circumstances. | I occasionally have difficulty engaging and working with services to help me improve my circumstances. | I hardly ever have difficulty engaging and working with services to help me improve my circumstances. | It is easy to work with services to help me improve my circumstances. I rarely have difficulties. |
| **Changed Impact of immediate crisis** | Right now, I am facing a crisis that I struggle to cope with and this has an impact on my life. | The immediate crisis I am facing is difficult and has an impact on my life. I am interested in improving this. | The immediate crisis I am facing is sometimes difficult but I am working with a service to improve this. | The crisis I am facing is lessening and the service I am working with has helped me improve this. | I am no longer facing an immediate crisis and the service helped me manage this. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing community groups in the following Community domains.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | No change in community infrastructure / networks to respond to the needs of targeted clients / communities | Limited change in community infrastructure / networks–but emerging engagement of community networks | Limited change in community infrastructure / networks–but strong engagement of community networks | Moderate change in community infrastructure / networks | Significant positive change in community infrastructure / networks to better respond to the needs of targeted clients / communities |
| **Group/ community knowledge, skills, attitudes and behaviours** | No change in knowledge, skills, attitudes, behaviours | Limited change in knowledge, skills, attitudes, behaviours – but emerging engagement | Limited change in knowledge, skills, attitudes, behaviours – but strong engagement | Moderate change in knowledge, skills, attitudes, behaviours | Significant positive change in knowledge, skills, attitudes, behaviours |
| **Organisational knowledge, skills and practices** | No change in organisational knowledge, skills, practices to respond to the needs of targeted clients / communities | Limited change in organisational knowledge, skills, practices – but emerging engagement | Limited change in organisational knowledge, skills, practices – but strong engagement | Moderate change in organisational knowledge, skills, practices | Significant positive change in organisational knowledge, skills, behaviours to better respond to the needs of targeted clients / communities |

**Collecting extended data**

For this activity, it is expected that organisations collect the following extended data items for all clients:

|  |  |
| --- | --- |
| **Client Level Data** | **Session Level Data** |
| * Employment status * Income (frequency and approximate gross income) * Main source of income | * Referral out (type and purpose) |

You may also record other details or SCORE domains if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type describes the **main** focus for the session being delivered. Where 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial interview and/or assessment for a NILS-CV loan. |
| Information/Advice/Referral | Provision of standard advice, guidance or information on a specific topic, referrals on to another service such as financial counselling. This service type includes information and/or advice to clients on current loans, or follow up sessions. |
| Counselling | Administration of a ‘financial conversation’ to check on a client’s wellbeing and develop a case plan. |
| Access to money (Loans) | Provide access to a NILS-CV loan for rent, mortgage or utility bill payments. This service type should only capture signing a loan contract for a new loan. The follow up of a loan should be recorded as Information/Advice/Referral. This service type includes repeat borrowers accessing new loans. |

### **NILS-DV**

**Description**

The NILS-DV program aims to increase the economic empowerment of women experiencing domestic and family violence by providing safe, affordable credit in the form of a no interest loan.

**Who is the primary client?**

Primary clients for this program activity are women experiencing family and domestic violence.

**What are the key client characteristics?**

Client eligibility for the **NILS-DV** program is restricted solely to:

* Women affected by family or domestic violence in the last 10 years
* Must be able to service the loan

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families or children of clients or a case/support worker who are present but not directly receiving a service.

**Should unidentified clients be recorded?**

NILS-DV provides face-to-face and phone support where clients are known to the service and ongoing relationships are formed, therefore **no more than 5 per cent** of clients should be recorded as unidentified.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. However, organisations can create a separate case for each individual accessing service. To protect client privacy, the case identity (ID) should not contain any personal information, such as any part of a client’s first or last names, Customer Reference Numbers (CRN) or My Aged Care reference numbers. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 1286.

**The partnership approach**

All organisations are required to participate in the partnership approach. For NILS-DV, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

Organisations must meet the following minimum requirements:

* Report an initial and at least one subsequent Circumstance SCORE for **at least 50 per cent** of identified clients
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients
* Report satisfaction SCOREs for **at least 10 per cent** of identified clients

It is a requirement of your grant agreement that you collect and report outcomes data for a majority of your clients. For organisations not already doing so, from 1 July to 31 December 2022, you are encouraged to report outcomes data for **50 per cent** of your clients. From 1 January 2023, should you not provide this data for **at least** **50 per cent** of your clients it may impact future program and/or organisation funding.

A client SCORE assessment is to be recorded at least twice – towards the beginning of the client’s service delivery and once again towards the end. Where practical, organisations should record a SCORE assessment every six months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, organisations are required to collect and record SCORE assessments in the following domains as per the above guidance:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Financial resilience * Material wellbeing and basic necessities | * Changed knowledge * Changed skills * Changed behaviours * Empowerment, choice and control to make own decisions * Engagement with support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Financial resilience** | I am experiencing financial hardship. I feel like I cannot recover financially from this. | I am experiencing financial hardship. I feel I could recover financially from this but it will be difficult. | I am experiencing financial hardship but I am making some progress towards recovering financially. | I am or were experiencing financial hardship and have made good progress towards recovering financially. | I am no longer experiencing financial hardship and have recovered financially. |
| **Material wellbeing and basic necessities** | I always go without the basic things\* I need to live.  I do not participate in any of the things I would like to because I have no spare money. | I often go without the basic things\* I need to live.  I rarely participate in any of the things I would like to because I hardly ever have spare money. | I sometimes go without the basic things\* I need to live.  I sometimes participate in the things I would like to if I have spare money. | I rarely go without the basic things\* I need to live.  I often participate in the things I would like to because I usually have spare money. | I never go without the basic things\* I need to live.  I always participate in the things I would like to because I consistently have spare money. |

\*Basic things include food, housing, appropriate clothing for the climate, healthcare and security (protection from danger)

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge** | I know nothing about the issues I sought help with or how to improve my current circumstances. | I know a little about the areas I need to meet my needs and improve my current circumstances. | I have reasonable knowledge in the areas I need to meet my needs and improve my current circumstances. | I have good knowledge in the areas I need to meet my needs and improve my current circumstances. | I have very good knowledge in the areas I need to meet my needs and improve my current circumstances. |
| **Changed skills** | I have very poor skills in the areas I need to meet my needs and improve my current circumstances. | I have poor skills in the areas I need to meet my needs and improve my current circumstances. | I have reasonable skills in the areas I need to meet my needs and improve my current circumstances. | I have good skills in the areas I need to meet my needs and improve my current circumstances. | I have very good skills in the areas I need to meet my needs and improve my current circumstances. |
| **Changed behaviours** | My behaviour makes it very hard for me to improve my circumstances. | My behaviour makes it hard for me to improve my circumstances. | My behaviour makes it a little hard to improve my circumstances, but not always. | My behaviour generally allows me to improve my circumstances. | My behaviour allows me to improve my circumstances. |
| **Empowerment, choice and control to make own decisions** | I have no confidence to make decisions that improve my circumstances. | I have limited confidence and limited power to make decision that improve my circumstances. | I have some confidence and some control in making decisions that improve my circumstances. | Most of the time I have high confidence and feel better empowered to make decisions that improve my circumstances. | I have very good confidence and feel empowered to make decisions that improve my circumstances. |
| **Engagement with support services** | I have a lot of difficulty engaging and working with services to help me improve my circumstances. | I have some of difficulty engaging and working with services to help me improve my circumstances. | I occasionally have difficulty engaging and working with services to help me improve my circumstances. | I hardly ever have difficulty engaging and working with services to help me improve my circumstances. | It is easy to work with services to help me improve my circumstances. I rarely have difficulties. |
| **Changed Impact of immediate crisis** | Right now, I am facing a crisis that I struggle to cope with and this has an impact on my life. | The immediate crisis I am facing is difficult and has an impact on my life. I am interested in improving this. | The immediate crisis I am facing is sometimes difficult but I am working with a service to improve this. | The crisis I am facing is lessening and the service I am working with has helped me improve this. | I am no longer facing an immediate crisis and the service helped me manage this. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing community groups in the following Community domains.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | No change in community infrastructure / networks to respond to the needs of targeted clients / communities | Limited change in community infrastructure / networks–but emerging engagement of community networks | Limited change in community infrastructure / networks–but strong engagement of community networks | Moderate change in community infrastructure/ networks | Significant positive change in community infrastructure / networks to better respond to the needs of targeted clients / communities |
| **Group/ community knowledge, skills, attitudes and behaviours** | No change in knowledge, skills, attitudes, behaviours | Limited change in knowledge, skills, attitudes, behaviours–but emerging engagement | Limited change in knowledge, skills, attitudes, behaviours–but strong engagement | Moderate change in knowledge, skills, attitudes, behaviours | Significant positive change in knowledge, skills, attitudes, behaviours |
| **Organisational knowledge, skills and practices** | No change in organisational knowledge, skills, practices to respond to the needs of targeted clients / communities | Limited change in organisational knowledge, skills, practices – but emerging engagement | Limited change in organisational knowledge, skills, practices – but strong engagement | Moderate change in organisational knowledge, skills, practices | Significant positive change in organisational knowledge, skills, behaviours to better respond to the needs of targeted clients / communities |

**Collecting extended data**

For this activity, it is expected that organisations collect the following extended data items for all clients:

|  |  |
| --- | --- |
| **Client Level Data** | **Session Level Data** |
| * Employment status * Income (frequency and approximate gross income) * Main source of income | * Referral out (type and purpose) |

You may also record other details or SCORE domains if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type describes the main focus for the session being delivered. Where 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial interview and/or assessment for a NILS-DV loan. |
| Information/Advice/Referral | Provision of standard advice, guidance or information on a specific topic, referrals on to another service such as financial counselling. This service type includes information and/or advice to clients on current loans, or follow up sessions. |
| Counselling | Administration of a ‘financial conversation’ to check on a client’s wellbeing and develop a case plan. |
| Access to money (Loans) | Provide access to a NILS-DV loan for rent, rental bond, relocation, travel costs or essential goods. This service type should only capture signing a loan contract for a new loan. The follow up of a loan should be recorded as Information/Advice/Referral. This service type includes repeat borrowers accessing new loans. |

### **Financial Crisis and** Material **Aid – Emergency Relief**

**Description**

Emergency Relief (ER) services help people address immediate basic needs by providing immediate financial or material aid to people. ER can act as a safety net for people experiencing financial distress or hardship, and who have limited means or resources to help them ease their financial crisis. The type of assistance offered by each organisation varies and may include: food, clothing, household items, vouchers (for example supermarket/utilities), budgeting assistance; and/or referrals to other services that help to address underlying causes of financial crisis. ER services are delivered by community organisations.

**Who is the primary client?**

Primary clients for this program activity are vulnerable people and those most at risk of financial exclusion and disadvantage.

**What are the key client characteristics?**

Client eligibility is restricted solely to people unable to pay their bills or at imminent risk of not being able to do so.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include children of clients (who are present but not directly receiving a service), or a case or support worker.

**Should unidentified clients be recorded?**

Emergency Relief provides face-to-face support where clients are known to the service and ongoing relationships are formed,therefore **no more than** **5 per cent of clients** should be recorded as unidentified.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations should create cases that reflect their own administrative processes. A separate case can be created for each activity delivered, for example:

Case ID = Food Vouchers

For organisations with large numbers of clients, a further month range can be specified for easier navigation of the web-based portal, for example: Case ID = Food Vouchers – January

**The Partnership Approach**

For this program, organisations are strongly encouraged to participate in the partnership approach by submitting SCORE outcomes data for as many clients as is practical.

Organisations will be able to use the Data Exchange standard approach to record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting, which is designed to assist in measuring client change linked to service delivery over time. By recording outcomes data, you can:

* demonstrate the positive changes you are making to people’s lives
* prioritise and allocate resources where they are most needed or can make the most difference, and modify your service delivery as needed
* know that you are making a difference to your clients and the community

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Education and skills training * Employment * Family functioning * Financial resilience * Housing * Personal and family safety * Physical health * Material wellbeing and basic necessities | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

**Note:** The service type 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.

| **Service Type** | **Example** |
| --- | --- |
| **Accommodation assistance** | Providing short term accommodation (e.g. for victims of domestic violence, people at risk of homelessness or who are homeless) |
| **Advocacy/Support** | Supporting clients on an immediate needs basis. For services providing intensive support this may include help filling out forms. For Emergency Relief, this category includes intensive support (as defined in FWC Program Information) |
| **Community capacity building** | Provision of Emergency Relief to help strengthen communities. Community capacity activities are delivered to a group of people rather than an individual. |
| **Education and skills training** | Basic help with how to manage money e.g. delivering budgeting sessions or running cooking classes so clients don’t rely on take away food. |
| **Food parcels & food vouchers** | Provide food parcels, food vouchers and supermarket vouchers to clients. |
| **Health care assistance** | Assistance to help pay for medical bills and/or chemist vouchers for medication. |
| **Information/Advice/Referral** | Information and/or general advice relevant to the clients’ needs, provide information about and/or referral of clients to other services such as financial counselling, problem gambling help, drug and alcohol counselling, mental health services, Centrelink, housing services etc. |
| **Intake and assessment** | Initial contact to discuss and assess the clients’ needs. |
| **Intensive support** | Where a client is being case managed or receiving intensive support services. |
| **Material aid** | Where multiple forms of aid are provided in the one session, including food parcels, vouchers, clothing bedding and/or household items. |
| **Material goods** | Provide help with non-food material aid such as clothing, bedding and household items. |
| **Transport assistance** | Provide bus, train, fuel vouchers. |
| **Utility bills assistance** | Help with payment of bills such as gas, electricity, water and telephone. |

## Family Safety

The Family Safety Initiatives aim to achieve positive outcomes for families, women and their children by working across sectors to improve the safety and wellbeing of children, advancing gender equality and reducing violence against women and their children. This activity also recognises the support to eligible victims of human trafficking, slavery and slavery-like practices including forced labour and marriage.

The following program activities are included in National Initiatives:

* Accredited Training for Sexual Violence Responses: *Recognising and Responding to Sexual Violence*
* Domestic Violence Response Training (DV-alert)
* Escaping Violence Payment
* Keeping Women Safe in Their Homes
* Local Support Coordinators
* National Plan to Reduce Violence Against Women and their Children
* Safe Technology for Women
* Temporary Visa Holders Experiencing Violence Pilot

### Accredited Training for Sexual Violence Responses: Recognising and Responding to Sexual Violence

**Description:**

Accredited Training for Sexual Violence Responses: Recognising and Responding to Sexual Violence is a nationally accredited vocational education course to build capability and capacity of the service system by training frontline workers to better recognise and respond to all people who experience sexual violence. A rigorous evidence base ensures the package is trauma informed, culturally appropriate, and responsive to the diverse needs of the community.

The course aims to develop frontline workers’ capacity and improve their ability to recognise and respond to disclosures of sexual violence. The intention of the training is to increase frontline workers awareness and understanding of sexual violence including: what constitutes sexual violence; indicators of sexual violence; perpetrator behaviours; escalation of violence; and its impacts on the individual and the wider community.

**Who is the primary client?**

The target cohort of frontline workers is broad, but includes community and welfare services workers (social workers, youth workers, Indigenous frontline workers), education professionals (teachers, school counsellors), police and corrections staff, psychologists, counsellors, disability workers, legal professionals, aged care workers (non-nursing), not-for-profit support organisation staff, community and faith leaders, and HR professionals.

**Should unidentified clients be recorded?**

This activity has limited use for unidentified clients. Clients are required to register for training and are known to the service, therefore, it is expected that **no clients (0 per cent)** are recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange Protocols for further guidance on appropriate use of unidentified clients.

**How could cases be set up?**

There is no formal case structure recommended for this activity. The provider can create cases that reflect individual activities. A possible structure is name of training, unit, core competency, month and year. To protect client privacy, names should never be used in the Case ID field.

**The partnership approach**

All organisations are required to participate in the partnership approach. For Accredited Training for Sexual Violence Responses: *Recognising and Responding to Sexual Violence*, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

A SCORE assessment for a client should be recorded at least twice; once at the start of a unit, and once upon completion of the unit.

It is expected that, where practical, organisations collect outcomes data for **at least 50 per cent** of participants.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Goals** |
| --- |
| * Changed knowledge * Changed skills |

The service provider can also choose to record outcomes for the client against the following additional domains that have been identified as relevant to the program:

| **Circumstances** | **Satisfaction** |
| --- | --- |
| * Education and skills training | * I am satisfied with the services I have received * I am better able to deal with issues I sought help with |

If you record a SCORE assessment for a client, you **must** also record ‘Assessed by’ at the SCORE level to capture who completed the SCORE assessment.

**Completing a SCORE assessment**

For this program activity, you must use the following question and SCORE descriptions when assessing clients in the Goals domains “Changed Knowledge” and “Changed skills”.

| Goals | 1 | 2 | 3 | 4 | 5 |
| --- | --- | --- | --- | --- | --- |
| Changed Knowledge:  “Before completing/ as a result of completing this DFV training, I rate my knowledge level as:” | I have no knowledge in this area. | I have little knowledge in this area. | I have some knowledge in this area. | I have good knowledge in this area. | I have extensive knowledge in this area. |
| Changed Skills:  “Before completing/ as a result of completing this DFV training, I rate my skill level as:” | I have no skills in this area. | I have little skills in this area. | I have some skills in this area. | I have good skills in this area. | I have extensive skills in this area. |

For all other SCORE domains, you can record SCORE assessment as outlined in the Data Exchange Protocols.

**Collecting extended data**

For this program activity, the following additional data fields have been identified as most relevant:

|  |
| --- |
| **Client Level Data** |
| * Employment status * Highest level of education / qualification |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

Sessions of training is delivered online (including via Zoom) and must be captured using the below service types.

| Service Type | Example |
| --- | --- |
| Awareness Session | **VET Unit One – Develop Knowledge on the impacts of sexual violence**  Attend an online workshop as a part of the Accredited training.  All participants enrolled in the VET course must complete Unit One, as this is a core unit and a prerequisite for Unit Two. Unit Two is optional. This flexibility is to allow for frontline workers current work functions and experience. |
| Educations and skills training | **VET Unit Two – Respond to disclosures of sexual violence**  Attend an online workshop as a part of the Accredited training.  All participants enrolled in the VET course must complete Unit One, as this is a core unit and a prerequisite for Unit Two. Unit Two is optional. This flexibility is to allow for frontline workers current work functions and experience. |

### Domestic Violence Response Training (DV-alert)

**Description:**

The Domestic Violence Response Training (DV-alert) program provides free, national, accredited training to community frontline workers to improve their ability to recognise and respond to signs of domestic violence, as well as refer people to the most appropriate services. The program also offers free non-accredited awareness sessions to people who provide direct service and support to the community and to members of the public.

**Who is the primary client?**

Primary clients for accredited training are health, allied health and community frontline workers assisting people in the community who are experiencing, or at risk of, domestic or family violence. Primary clients for DV-alert awareness sessions are members of the public or organisations. The Brothers Standing Tall awareness session on family violence is specifically for Aboriginal and / or Torres Strait Islander men (sessions are tailored to the specific community).

**What are the key client characteristics?**

Accredited Training

Primary clients for accredited training are health, allied health and community frontline workers assisting people in the community who are experiencing, or at risk of, domestic or family violence.

Awareness Sessions

Primary clients for DV-alert awareness sessions are members of the public or organisations. The Brothers Standing Tall awareness session on family violence is specifically for Aboriginal and / or Torres Strait Islander men (sessions are tailored to the specific community).

**Who might be considered ‘support persons’?**

Support persons are not applicable for DV-alert.

**Should unidentified clients be recorded?**

This program has limited use for unidentified clients. This program provides face-to-face training where clients are known to the service, therefore, it is expected that **less than 5 per cent** DV-alert clients should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How could cases be set up?**

There is no formal case structure recommended for this program activity. Providers can create cases that reflect individual project activities on the ground. A possible structure is State, name of training, month and year.

**What areas of SCORE are most relevant?**

Service providers can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Education and skills training * Employment * Personal and family safety | * Changed behaviours * Changed impact of immediate crisis * Changed knowledge and access to information * Changed skills * Engagement with relevant support services | * I am satisfied with the services I have received * I am better able to deal with issues I sought help with | * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| General workshop | **General DV-alert workshops (two days, accredited)** are designed to build the knowledge and capacity of community frontline workers in Australia to provide appropriate support to women and children experiencing violence in Australia.  General Workshops involve attending a two-day practical workshop where participants will learn how to recognise the signs of domestic and family violence, how to respond to someone experiencing domestic and family violence and what best practice methods should be used to refer people to the most appropriate support service.  To be eligible to attend, participants must work or volunteer in a community frontline capacity supporting the general community. |
| Multicultural workshop | **Multicultural DV-alert workshops (two days, accredited)** are designed to build the knowledge and capacity of community frontline workers supporting multicultural communities to provide appropriate support to women and children experiencing violence in Australia.  While taking into account the unique issues and contexts faced by multicultural communities in Australia, participants will learn how to recognise the signs of domestic and family violence, how to respond to someone experiencing domestic violence, and what best practice methods should be used to refer people on to the most appropriate support service.  To be eligible to attend, participants must work or volunteer in a community frontline capacity supporting Multicultural communities. |
| Indigenous workshop | **Indigenous DV-alert workshops (two days, accredited)** are designed to build the knowledge and capacity of community frontline workers supporting Aboriginal and / or Torres Strait Islander communities to provide appropriate support to women and children experiencing violence in Australia.  While taking into account the unique contexts of Aboriginal and / or Torres Strait Islander communities, participants will learn how to recognise the signs of domestic and family violence, how to respond to someone experiencing domestic violence, and best practice methods that should be used to refer people on to the most appropriate support service. Lifeline engages and consults with the communities' Council of Elders, Indigenous peak organisations, and community service providers before conducting any Indigenous Workshop. Indigenous Workshops are co‑delivered with recognised Indigenous trainers.  To be eligible to attend an Indigenous workshop, participants must work or volunteer in a community frontline capacity supporting Aboriginal and / or Torres Strait Islander communities. |
| Settlement services workshop | **Settlement Services DV-alert workshops (two days, accredited)** are designed to build the knowledge and capacity of community frontline workers in  the settlement services sector supporting refugee / humanitarian communities to provide appropriate support to women and children experiencing violence in Australia.  Settlement Workshops involve attending a two-day practical workshop where participants learn how to recognise the signs of domestic and family violence, how to respond to someone experiencing domestic and family violence and what best practice methods should be used to refer people on to the most appropriate support service.  To be eligible to attend, participants must work or volunteer in the settlement services sector supporting refugee / humanitarian communities in Australia. |
| Disability workshop | **Disability DV-alert workshops (two days, accredited)** are designed to build the knowledge and capacity of community frontline workers supporting disability communities to provide appropriate support to women and children experiencing violence in Australia.  Disability Workshops involve attending a two-day practical workshop where participants learn how to recognise the signs of domestic and family violence, how to respond to someone experiencing domestic and family violence and what best practice methods should be used to refer people on to the most appropriate support service.  To be eligible to attend a Disability Workshop, participants must work or volunteer in a community frontline capacity supporting Disability communities. |
| Awareness session – 2 hours | **DV-aware is a 2-hour (non-accredited) awareness session** that helps raise the awareness of the public around the issue of domestic and family violence.  Participants will gain some basic knowledge and tools to recognise the signs of domestic and family violence and provide an opportunity to reflect on what they can do as an individual or group to prevent family violence. |
| Awareness session – 1 day | **One-Day DV-aware is a one-day (non-accredited)** awareness session that is available to the public or organisations to provide a more in depth awareness session around the issue of domestic and family violence.  Participants will gain some basic knowledge and tools to recognise the signs of domestic and family violence and provide an opportunity to reflect on what they can do as an individual or group to prevent family violence. |
| Awareness session – Brothers Standing Tall | **Brothers Standing Tall is a 2-hour (non-accredited) awareness session** on family violence specifically for Aboriginal and / or Torres Strait Islander men (sessions are tailored to the specific community). The session provides a space for Indigenous men to learn and talk about family violence and its impact on Indigenous families and start reflecting on what they can do to prevent family violence in their community  Participants will gain some basic knowledge and tools to recognise the signs of domestic and family violence and provide an opportunity to reflect on what they can do as an individual or group to prevent family violence. |
| E-learning online workshop | **DV-alert E-Learning (accredited)** is for community frontline workers in Australia who are not able to attend a two-day face-to-face general workshop. DV-alert aims to build the knowledge and capacity of community frontline workers to provide appropriate support to women and children experiencing violence in Australia.  Over a period of up to nine weeks, participants will work at their own pace to learn how to recognise the signs of domestic and family violence, respond to someone experiencing domestic and family violence, and know about the best practice methods that should be used to refer people on to the most appropriate support service. |
| Interpreter workshop | **DV-alert Interpreter Workshops (one day, non-accredited)** are designed to build the knowledge and capacity of community frontline workers working with interpreters to provide appropriate support to women and children experiencing, or at risk of, domestic and family violence in Australia.  Across the one-day face to face workshop, participants will learn how to work with interpreters to recognise the signs of domestic and family violence; how to respond to someone experiencing domestic and family violence; and what best practice methods should be used to refer people to the most appropriate support service. Participants will also learn the role of interpreters, barriers to effective interpreting, assessing the need for an interpreter, safety strategies, and learn about cultural values that may influence communication.  To be eligible to attend, participants must have successfully completed one of the accredited DV-alert workshops. |
| Specialist support | Use this service type for the **DV-alert Complex Forms of Violence Workshop**. This is a one-day (non-accredited) workshop with online resources that aims to build the knowledge and capacity of frontline workers working with cohorts experiencing, or at risk of, complex forms of domestic and family violence such as female genital mutilation/cutting, forced marriage, human trafficking/slavery (domestic servitude) and dowry abuse.  To be eligible for this training, participants must successfully complete either the accredited two-day multicultural or settlement services workshop to ensure they have a baseline knowledge about DFV. |
| Information/Advice/Referral | Use this service type for the **DV-alert Recognising, Responding to and Referring Men Who Use Violence Workshop**. This is a one-day (non-accredited) workshop that provides advice and information to build the knowledge and capacity of frontline workers to recognise when violence is being used, respond appropriately and refer to support services.  To be eligible for this training, participants must successfully complete an accredited DV-alert workshop to ensure they have a baseline knowledge about DFV. |
| Disability eLearning | The **DV-alert Disability eLearning module (accredited)** is for community frontline workers in Australia who are not able to attend a two-day face-to-face Disability Workshop. The aim is to provide an accessible accredited learning package to frontline workers in the disability sector.  Over a period of up to nine weeks, participants will learn to recognise and respond to the signs of domestic and family violence against women with disability, and best practice methods to refer individuals to the most appropriate support service. Participants will learn about the additional barriers faced by people with disability in seeking help and finding pathways to safety.  To be eligible for this training, participants must work or volunteer in a community frontline capacity in the disability sector. |

### Escaping Violence Payment Trial

**Description**

The two-year Escaping Violence Payment trial will provide eligible individuals leaving a violent relationship with access of up to $5,000 in financial assistance. This includes a cash payment of up to a maximum of $1,500 and the remainder in goods, services and supports from a community service provider or other items needed to establish a home free from violence.

**Who is the primary client?**

The primary client is eligible women who need financial assistance to leave a violent relationship.

**What are the key client characteristics?**

Key clients may include people:

* with cultural and linguistically diverse backgrounds
* identifying as Aboriginal and/or Torres Strait Islander
* identifying as LGBITQ+
* living in crisis, emergency or transition accommodation and/or who identify as homeless
* identifying as having a condition, impairment or disability
* residing in communities with low Socio-Economic Indexes for Area (SEIFA) scores
* residing in rural or remote areas
* receiving government payments, pensions, allowances and/or cashless debit cards
* who are unemployed, ill, studying and/or experiencing financial distress

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include, but are not limited to, friends, family members including children, case workers, legal representatives, community leaders or mentors.

Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

The Escaping Violence Payment Trial provides individual support, where clients are known to the service. Therefore, it is expected that **no clients (0 per cent**) should be recorded as unidentified clients for this program.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

Where an organisation primarily delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID

**The partnership approach**

All organisations are required to participate in the partnership approach. For the Escaping Violence Payment Trial, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting. Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least 10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end. Where practical, organisations can record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Employment * Housing * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Financial resilience * Personal and family safety * Physical health | * Changed impact of immediate crisis * Changed knowledge and access to information * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant to this program activity. | None of the community outcomes are relevant for this program activity |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Session level data** | **Case level data** |
| * Employment status * Homeless indicator * Household composition * Income (frequency and approximate gross income) * Main source of income | * Interpreter present * Service setting | * Attendance profile * Referral in (source and reason for seeking assistance) |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Accommodation Assistance | Providing short term crisis accommodation (e.g. for victims of domestic violence, people at risk of homelessness or who are homeless). This could include hotel, refuge, payment of longer-term rental bond or mortgage payments. |
| Information/advice/referral | Provision of standard advice, guidance or information on a specific topic, referrals on to another service such as financial counselling, emergency relief, Centrelink etc. |
| Specialist Support | Working with specialist support, a suitably qualified worker – in some cases this will involve engaging/employing specialist services for a fee to work with the person more intensively, where these services can't be engaged any other way, or in a timely manner. Specialist services in this type are focused on sexual violence support services, drug and/or alcohol services, intellectual and or physical disability services, and problem gambling services. |
| Domestic and Family Violence support | Specialist support services for Domestic and Family violence services including counselling, mediation, having a case worker engaged with the family more intensively and receive specialist care due to trauma and crisis of FDV including financial abuse or coercive control. |
| Material aid (multiple items, parcels or vouchers) | Where multiple forms of aid are provided in the one session, including food parcels, gift/food vouchers, clothing, bedding and/or household items, whitegoods cash/cash equivalent. |
| Counselling | Counselling for couples, families, children or vulnerable people experiencing issues, financial counselling. |
| Health Care Assistance | Provide health-related assistance such as chemist vouchers or part payment of medical bills. |
| Transportation Assistance | Provide bus, train, fuel vouchers |
| Fundamental life skills | Support for fundamental life skills are sourced or delivered directly, based on identified interests and needs of participants. This skills training can include but is not limited to Legal Aid, Financial Budgeting, how to open a bank account and how to apply for a tax file number. |
| Intake/assessment | Initial interview/assessment. Conducting a needs based assessment, gathering information on clients' needs, eligibility, matching clients to services |

### Keeping Women Safe in their Homes

**Description**

Keeping Women Safe in their Homes is a program designed to undertake risk assessment, safety planning and security upgrades for women and children experiencing domestic and family violence so they can stay safe in their own homes, or a home of their choice.

**Who is the primary client?**

Primary clients for this program activity are women and children experiencing domestic and family violence.

**What are the key client characteristics?**

* Women experiencing domestic and family violence
* Women from a cultural and linguistically diverse background
* Women identifying as Aboriginal and/or Torres Strait Islander
* Women identifying as having a condition, impairment or disability

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families or children of clients who are present but not directly receiving a service.

**Should unidentified clients be recorded?**

This program has limited use for unidentified clients. This program provides face-to-face support where clients are known to the service, therefore it is expected that **only 10 per cent** of your clients **or less** should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect individual project activities on the ground.

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Employment * Family functioning * Financial resilience * Housing * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Personal and family safety * Physical health | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | None of the Community outcomes are relevant for this program activity |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial assessment as part of program including risk assessment. |
| Information/Advice/Referral | Information/advice/referral as part of program case management. |
| Education and skills training | Advise clients of risk assessment outcomes and provide information on the use and safety of newly installed personal and home security equipment. |
| Counselling | Working through a particular issue such as domestic violence, as delivered by an industry recognised qualified staff member. |
| Advocacy/Support | As required with partner agencies and external providers. |
| Outreach | 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. |
| Family capacity building | 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 and practical help with tasks. |
| Facilitate employment pathways | Assisting clients to become ‘job ready’ by building capabilities in employment and education and linking clients with mainstream employment. |
| Basic home security upgrades | Improvements to make the home more secure, such as window and door locks, screens, lighting and improving visibility. |
| Technological safety upgrades | Provision of technology to improve personal or home safety such as CCTV, monitored alarms and personal safety devices. |

### Local Support Coordinators

**Description**

Local Support Coordinators deliver support and services for women affected by domestic and family violence. This program is designed to help women navigate the service system by providing case management and facilitating the integration of the support service network.

**Who is the primary client?**

Primary clients for this program activity are women and children experiencing domestic and family violence.

**What are the key client characteristics?**

* Women experiencing domestic and family violence
* People from a cultural and linguistically diverse background
* People identifying as Aboriginal and/or Torres Strait Islander
* People identifying as having a condition, impairment or disability

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families or children of clients who are present but not directly receiving a service.

**Should unidentified clients be recorded?**

Local Support Coordinators have limited use for unidentified clients. This program provides face-to-face support where clients are known to the service, therefore it is expected that **no more than 10 per cent** of your clients should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect the activities of the local support coordinator.

**What areas of SCORE are most relevant for this program activity?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Employment * Family functioning * Financial resilience * Housing * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Personal and family safety * Physical health | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | None of theCommunity outcomes are relevant for this program activity |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial assessment as part of program. |
| Information/Advice/Referral | Information/advice/referral as part of program case management. |
| Education and skills training | Assisting 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. This includes accessing education and training including re-engaging with the education system. |
| Counselling | Working through a particular issue such as relationship concerns or financial concerns, as delivered by an industry recognised qualified staff member. |
| Advocacy/Support | As required with partner agencies and external organisations. |
| Outreach | 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. |
| 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. |
| Material goods | Providing women with brokerage for immediate assistance such as moving costs, emergency accommodation and personal items. |

### National Plan to Reduce Violence against Women and their Children

**Description**

The National Plan to Reduce Violence against Women and their Children focuses on reducing violence, increasing support, prevention measures, and supporting women who have experienced violence to rebuild their lives as quickly as possible as part of a community‐wide initiative.

**Who is the primary client?**

Primary clients for this program activity are women and families who have experienced violence, particularly domestic violence, and their children.

**What are the key client characteristics?**

* Women who have experienced violence, particularly domestic violence, and their children (aged 14 to 24)
* People who have arrived in Australia in the last five years
* People on a Humanitarian visa
* People receiving government payments, pensions allowances and/or cashless debit card holders
* People from a cultural and linguistically diverse background
* People identifying as Aboriginal and/or Torres Strait Islander
* People identifying as having a condition, impairment or disability.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families or children of clients who are present but not directly receiving a service.

**Should unidentified clients be recorded?**

This program has limited use for unidentified clients. This program provides face-to-face support where clients are known to the service, therefore it is expected that **no more than 10 per cent** of your clients should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations should structure their cases in line with the following Program activity components:

**Respect and Responsibility Project**: no recommended case structure.

**Three E’s to Freedom**: a separate case should be created for each activity. In the instance of ongoing one-on-one mentoring with an individual client, a separate case should be created for each client using the client’s ID number e.g.: 1286.

**Building Resilience Project**: a separate case should be created per group.

**Resource Development Project**: a separate case should be created for each organisation working in partnership to best demonstrate the contact had with each of these external organisations.

**Support for Family Safety in the Kimberley Project**: a separate case should be created per group (such as a forum or a support group session).

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| **Respect and Responsibility Project**:   * Community participation and networks * Education and skills training * Employment | **Respect and Responsibility Project**:   * Empowerment, choice and control to make own decisions * Changed skills | **Respect and Responsibility Project**:   * I am satisfied with the services I have received | **All projects:**   * Community infrastructure and networks |
| **Three E’s to Freedom**:   * Community participation and networks * Education and skills training * Employment * Family functioning | **Three E’s to Freedom**:   * Changed knowledge and  access to information * Changed skills * Empowerment, choice and control to make own decisions | **Three E’s to Freedom**:   * I am satisfied with the services I have received |
| **Building Resilience Project**:   * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | **Building Resilience Project**:   * Changed behaviours * Changed knowledge and access to information * Engagement with relevant support services | **Building Resilience Project**:   * I am better able to deal with issues that I sought help with |
| **Support for Family Safety in the Kimberley Project:**   * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | **Support for Family Safety in the Kimberley Project:**   * Changed behaviours * Changed skills | **Support for Family Safety in the Kimberley Project:**   * I am better able to deal with issues that I sought help with |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | A session’s primary focus was an initial meeting with a client during which the organisation gathers information on the client’s needs and matches them to services available, 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 | Provision of standard advice/guidance or information in relation to a specific topic or where a referral was made to another service provided within or external to the organisation. |
| Education and skills training | Leadership courses, pilot programs. |
| Counselling | Working with clients to improve particular issues or concerns, as part of a pilot program. **This service type is only to be used by the “Support for Family Safety in the Kimberley” Project.** |
| Mentoring/Peer support | Industry mentors. |
| Advocacy/Support | Individual case manager support. |
| Community capacity building | Information resources on preventing violence, development of social media resources on respectful relationships. |
| Family capacity building | Support actions and activities that promote strong family interactions, such as communications, relationship building and conflict resolution. **This service type is only to be used by the “Support for Family Safety in the Kimberley” Project**. |
| Facilitate employment pathways | Vocational education, support to obtain a driver’s license, work fitness, communications, IT and job seeking training, advanced life skills, social skills. |
| Resource development | Developing resources internally or in partnership with other organisations to encourage cultural change and reduce violence. |

### Safe Technology for Women

**Description**

The Safe Technology for Women program trains frontline services in how best to distribute smartphones to women experiencing domestic or family violence as part of the Safe Connections partnership program. The program trains workers and clients about how smartphones can be misused as well as how to use them safely, and even as a means to collect evidence to hold their abusers accountable.

**Who is the primary client?**

Primary clients for this program activity are frontline services who assist women and children experiencing domestic and family violence.

**What are the key client characteristics?**

* Organisational staff delivering services to women experiencing domestic violence and their children
* Organisational staff delivering services to women from a cultural and linguistically diverse background
* Organisational staff delivering services to women identifying as Aboriginal and/or Torres Strait Islander
* Organisational staff delivering services to women identifying as having a condition, impairment or disability.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

Safe Technology for Women has limited use for unidentified clients. This program provides face-to-face support where clients are known to the service, therefore it is expected that only a limited number of your clients would be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each individual accessing services. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 128. This works for ongoing one-on-one contact with clients.

For organisations that deliver services in large group settings (such as a forum or social support group), cases can also be created to record these interactions, and should be titled in a way that allows staff to easily enter data and use the case over multiple reporting periods, i.e.: Case ID = ‘Monday Women’s Group’

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Education and skills training * Employment | * Changed behaviours * Changed knowledge and access to information * Empowerment, choice and control to make own decisions | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial contact to discuss and assess the client’s needs. |
| Information/Advice/Referral | Information/advice/referral as part of program case management. May also include providing safe technology information to women. |
| Education and skills training | Providing frontline services with training on technology facilitated abuse in relation to smartphones, and new and emerging technologies associated with smartphones. |
| Material goods | Providing frontline services that assist women with new smartphones for distribution. |

## Protecting Australia’s Children

Protecting Australia’s children includes strategies focused on national efforts to improve the wellbeing of Australia’s children.

The following program activities are included in Protecting Australia’s Children:

* Intercountry Adoptee and Family Support Service

### Intercountry Adoptee and Family Support Service

**Description**

The Intercountry Adoptee and Family Support Service (ICAFSS) provides free, national intercountry adoption-specific support, including counselling, information and education, to all members of the intercountry adoption community.

The main components of the program are to provide accessible support to the intercountry adoption community via therapeutic care, community capacity building and a Small Grants and Bursaries Program.

**Who is the primary client?**

All members of the intercountry adoption community, including: young and adult adoptees, adoptive parents and adoptive siblings, prospective adoptive parents, members of the community formed through expatriate adoptions and partners and children of adoptees where their need for support relates to the adoptee’s experience of intercountry adoption.

**What are the key client characteristics?**

Young adoptees, adult adoptees, adoptive parents, adoptive siblings, prospective adoptive parents, partner of adoptee and children of adoptee.

Members of the intercountry adoption community may also include the following who have had an adoption experience:

* + Persons who have arrived in Australia in the last five years
  + People from a cultural and linguistically diverse background
  + Persons living in crisis, emergency or transition accommodation and/or identify as homeless
  + People identifying as having a condition, impairment or disability
  + People residing in a rural or remote area
  + Persons and families who are unemployed, ill, studying and/or experiencing financial distress
  + Persons under 18 years / children.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients, carers of clients/care recipients, case/support workers, parents/guardians of clients, legal representatives of clients, children of clients and community leaders/mentors/informal care givers.

**Should unidentified clients be recorded?**

The Intercountry Adoptee and Family Support Service is a combination of face-to-face, phone and online supports. Where it is practical and possible to collect client level data, this should be collected and reported into the Data Exchange.

It is expected the Intercountry Adoptee and Family Support Service will report in each reporting period **no more than 10 per cent** of clients as ‘unidentified clients’.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes.

To protect client privacy, the case identity (ID) should not contain any personal information, such as any part of a client’s first or last names.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach by submitting additional client data. The partnership approach also includes the ability to record an extended data set. It is expected that, where practical, you collect outcomes data for **at least half (50-60 per cent**) of clients.

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE). A client SCORE assessment is to be recorded at least three times; near the beginning of the client’s service delivery, at the mid-point and again towards the end of service delivery. Where appropriate, you can also collect an additional SCORE assessment at stages during service delivery; for example when a significant shift has occurred for the client, when goals have changed, or when there has been no change where one would have been expected.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Community participation and networks * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | * All six Goal outcomes are relevant for this program activity | * All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours |

**Collecting extended data**

For this program activity, organisations are encouraged to collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Session level data** | **Case level data** |
| * First arrival in Australia (year and month) * Visa Type * Ancestry**[[1]](#footnote-1)** | * Referral out (type and purpose) * Interpreter present * Service setting | * Attendance profile * Referral in (source and reason for seeking assistance) |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| General Workshop | Group Work:  This item should be used to report group work.  Support children, young people and adult members (including, but not limited to, adoptees and prospective/adoptive parents) of the community by offering participants support through discussion, workshops and activities in a group setting.  **Delivery method:** can include face-to-face and/or online or phone support.  **Relationship type:** group activities between trained/supported mentors, facilitators or professionals to support members of the community. |
| Community capacity building | Development of a communities’ skills/cohesion or understanding of a topic or subject. Community capacity activities are delivered to a group of people rather than an individual.  Can include activities that promote community relationships and awareness, group workshops/activities, provision of information/education sessions or interagency service meetings.  Activities include:   * Development of guidance resources for the community. * Development and coordination of intercountry-informed resources for parents, schools and allied health professionals. * Development of education and training for practitioners to become more intercountry adoption aware. * Training and resources for adoptees and adoptive families in mentoring and peer support. |
| Counselling | Counselling for all members of the intercountry adoption community, including individuals, couples and families. |
| Family capacity building | Supports and activities that promote strong family interactions and help the family to manage their lives effectively, such as relationship building, conflict resolution and communication. Can also include home-based support such as assistance with developing family centred activities, establishing routines and practical skills-building or help with tasks. |
| Information/advice/referral | Provision of standard advice, guidance or information on a specific topic and/or where a referral was made to another service within or external to the organisation. |
| Intake/assessment | Assessing a client in an initial session, or re-assessment throughout engagement based on the client’s progress and needs. |
| Mentoring/peer support | Support provided to individual members of the community or community groups through peer to peer discussion and activities with those with lived experienced, who are also trained and supported as mentors or in peer support.  **Delivery method:** can include face-to-face and/or online or phone mentoring and support. May include a facilitator.  Includes training and resources for adoptees and adoptive families in mentoring or peer support.  Includes training, assessment and screening of facilitators and mentors.  **Relationship type:** one-to-one or group peer/mentoring sessions with trained and supported mentors with lived experience. |
| Records search | **Search Support**: Provide practical and emotional support for search and reunion, including preparation, planning and post-tracing and reunion support. |
| Specialist support | Specialist support is delivered by a suitably qualified worker. In some cases this will involve engaging or employing specialist services for a fee to work with the family more intensively, where these services can't be engaged any other way, or in a timely manner. Services may include alcohol or other drug services, intellectual and or physical disability services, family mediation, problem gambling services and domestic violence and sexual assault support services.  Please note –providers should confirm with their DSS Funding Arrangement Manager the need for specialist support, prior to engaging a specialist. |
| Supported playgroups | Supported playgroups for intercountry adoptive parents are an opportunity to share experiences and learn new parenting skills while being supported by workers who coordinate activities. |

## Social Impact Investing Initiatives

Social impact investing (SII) aims to achieve measurable positive social outcomes while delivering a financial return. It brings together governments, service providers, investors and philanthropists to create innovative responses to complex social issues.

The following program activities are included in Social Impact Investing Initiatives:

* Transition Funding for Successful Try, Test and Learn Projects
* Social Impact Investing – Payment by Outcomes Trials: PBO 1 Microenterprise Development Program
* Social Impact Investing – Payment by Outcomes Trials: Project 2
* Social Impact Investing – Payment by Outcomes Trials: PBO 3 Long-term Employment Outcomes

### Transition Funding for Successful Try, Test and Learn Projects

**Description**

The Transition Funding for Successful Try, Test and Learn Projects program will run over two years across 2021‑2022 and 2022-2023. The purpose of the program is to continue to support vulnerable cohorts most at risk of long-term unemployment and long term welfare dependence into employment during Australia’s economic recovery and also to an outcomes-focussed funding approach.

Projects will transition to outcomes based funding across the life of the program allowing evidence to continue to be generated on successful policy and project intervention. Evidence gathered through this program will contribute to policy development across the Commonwealth and help minimise the long-term negative effects of the economic shocks of 2020.

**Who is the primary client?**

The primary clients for this program include at-risk young people, migrants and refugees, older job seekers, women, working-age carers and young parents.

**What are the key client characteristics?**

Key clients may include people:

* who have arrived in Australia in the last five years
* on a Humanitarian visa
* with cultural and linguistically diverse backgrounds
* identifying as Aboriginal and/or Torres Strait Islander
* living in crisis, emergency or transition accommodation and/or who identify as homeless
* identifying as having a condition, impairment or disability
* residing in communities with low Socio-Economic Indexes for Area (SEIFA) scores
* residing in rural or remote areas
* receiving government payments, pensions, allowances and/or cashless debit cards
* who are unemployed, ill, studying and/or experiencing financial distress
* who are under 18 years

**Client eligibility to be counted towards a project outcome**

Clients who participated in the Try, Test and Learn Fund program are not eligible to be counted towards an outcome in this program.

Only clients who received a service under the Transition Funding for Successful Try, Test and Learn Projects program after an agreed start date of a project are eligible to be counted towards a project outcome.

Only the clients that meet these criterion should be included in the DEX reporting.

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include parents or guardians of clients, a friend or family member nominated by the client to help them achieve their goals, or a case/support worker.

Recording the details of support persons is voluntary but should be reported where relevant. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

The Transition Funding for Successful Try, Test and Learn Projects program provides individual, face to face support, where clients are known to the service. Therefore, it is expected that **no clients (0 per cent**) should be recorded as unidentified clients for this program.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

Where an organisation primarily delivers one-on-one services, it can create a case for each individual client. This means all contact with a specific client is recorded in the same place and is easy to find for future use.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Advocacy/support | Advocating on a client’s 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, interview or application. |
| Financial assistance | Financial assistance can be carer support aimed at improving health and wellbeing outcomes for carers / parents.  For instance, supporting carers / parents to establish and maintain relationships with individuals and/or organisations that are able to provide support and services to maintain their own wellbeing and caring role while maintaining/ improving their employment/ educational opportunities.  Examples include helping pay for the cost of childcare onsite while the participant undertakes activities, facilitating childcare placements or care placement services.  Financial assistance can also be health care assistance to help pay for medical bills, such as psychology or drug rehabilitation. |
| Counselling | Counselling, emotional and psychological support services delivered to participants by accredited professionals who have Australian-recognised qualifications in psychology, social work, occupational therapy or mental health nursing and current registrations with the relevant Australian registration authorities. |
| Education and skills training | Assisting a client in learning or building knowledge on a topic, or in developing a skill. Examples include career and education development, education on preparing for an interview, CV writing, vocational training, job readiness training etc.  This can also include activities that facilitate pathways to improved English language and literacy, English conversation groups, and group information sessions on accessing formal English language and literacy programs. |
| Facilitate employment pathways | Individual activities or group information sessions focussed on employment opportunities. Examples include mentoring programs, consideration of employment history, production of an achievement plan, activities required to achieve employment goals, planning education and training, monitoring progress to date, work trials, industry matching sessions, or connecting with networks, contacts, references and other relevant supports. |
| Information/advice/referral | Provision of information or standard advice, or requesting information from the client. This service type also includes referring a client to another service or following up with the client.  Examples include providing the client with a website link or a form, having a short phone call, referring client to another service or following up with a client to ascertain if a client wishes to continue participating in the project.  Referrals can be to another service, such as financial, problem gambling or drug and alcohol counselling, mental health services, Centrelink, housing services, employment services provided by another organisation, etc.  This service type does not count as a ‘support session’ for the purpose of including participants in the ‘evaluation group’ for outcome measurement, as explained in the grant payment schedule. |
| Intake/assessment | This service type must only be used **ONCE** for the initial intake meeting with a new participant.  During this first meeting, the organisation completes registration forms with the client, gathers information on the client’s need and matches them to services available, and/or assesses a clients’ eligibility for participation in a particular service.  This service type does not count as a ‘support session’ for the purpose of including participants in the ‘evaluation group’ for outcome measurement, as explained in the grant payment schedule. If support is provided to the client on the same day as the initial intake, then an additional service session should be recorded. |
| Mentoring/peer support | Specialised or individual support, client mentoring, peer support, information and role modelling. This may include online access to peer-support forums, and sessions with a mentor, buddy or coach. |
| Community capacity building | **Only to be used by project: Work Work**  This service type is only recorded when a project participant is employed on an ongoing basis as a staff member at Two Good Foundation.  This service type is not applicable to the paid on the job training completed by participants during their participation in the project. |

### Social Impact Investing – Payment by Outcomes Trials: PBO 1 Microenterprise Development Program

**Description**

The PBO 1 Microenterprise Development Program aims to assist people on working age or parenting payments to establish their own business to increase their financial independence and decrease their welfare dependence.

**Who is the primary client?**

Primary participants are people who:

* are aged between 21 and 55 years (inclusive)
* are currently receiving a Working Age Welfare Payment or Parenting (Partnered or Single) Payment
* have received a Working Age Welfare Payment or Parenting (Partnered or Single) Payment for 13 or more fortnights in the 26 fortnights immediately prior to Enrolment,
* intend to establish a business within the next 12 months,
* have not previously been supported by Many Rivers to establish a business.

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

Microenterprise Development Program provides face to face support, where clients are known to the service. Therefore, it is expected that **no clients (0 per cent)** should be recorded as unidentified clients.

**How should cases be set up?**

Organisations should use the Many Rivers Business ID as the Data Exchange Case ID. There should be one business per case. A case should have one client attached to it and record any business partners as support persons.

To protect client privacy, names should never be used in the Case ID field.

Organisations should use the Many Rivers client ID as an individual’s Client ID.

**The partnership approach**

For this program activity, organisations are required to collect some extended client level data under the partnership approach. Organisations are **not required** to report outcomes information using the Standard Client Outcomes Reporting (SCORE) tool but may choose to do so.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, organisations may collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Employment * Financial resilience | * Empowerment, choice and control to make own decisions | All three Satisfaction outcomes are relevant to this program activity. |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |
| --- | --- |
| **Session level data** | **Case level data** |
| * Referral out (type and purpose) * Service setting | * Attendance profile * Exit reason * Referral in (source and reason for seeking assistance) |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Intake/Assessment | Assessing business idea and potential participant’s eligibility for enrolment in the PBO 1 project. |
| Business planning | Developing a business plan including cash flow analysis, marketing plan, regulatory requirements and risk analysis.  1st session is the Enrolment Date for outcomes measurement purposes (Outcome 2). |
| Education and skills training | Supporting skills development in operating a sustainable business such as invoicing, recordkeeping and hiring staff. |
| Access to money – Business loan | Date the business loan is approved. |
| Mentoring/Peer support | General catch-up to provide support, encouragement and review progress. |
| Core component complete | Date Business Establishment is confirmed though the Many Rivers approval/confirmation process.  Used once for outcome measurement purposes (Outcome 1). |
| Service review | Used to record SCORE ratings provided through the COMPASS survey or other assessment process. |
| Exit Interview | Date the participant exited the program. To be used in conjunction with Exit Reason at the case level.  Exit Reasons to be used are:  **Exit Reason - Client no longer requires assistance**   * Meaning an Enrolled Participant withdraws their consent to share their personal information through the Data Exchange (DEX) and is an Eligible Exclusion and can be replaced in the Measurement Group.   **Exit Reason – Service unable to provide assistance**   * Meaning an Enrolled Participant presents a significant risk to the safety of Many Rivers’ staff or clients (Incident Report to be kept on file) and is an Eligible Exclusion and can be replaced in the Measurement Group.   **Exit Reason – Client died**   * Meaning an Enrolled Participant is deceased and is an Eligible Exclusion and can be replaced in the Measurement Group.   **Exit Reason – None of the above**   * Meaning an Enrolled Participant has decided they will not establish a business or has decided to close the business. Cannot be replaced in the Measurement Group. |

### Social Impact Investing – Payment by Outcomes Trials: Project 2

**Description**

Payment by Outcomes Trials: Project 2 is designed to support pre-school aged children from financially disadvantaged families in South-East Tasmania to engage in early childhood education and be school ready.

**Who is the primary client?**

The primary client is a child who is aged 3 at the closest 1 January of their Enrolment Date (DEX Service Type: Intensive Support) and:

* + - Intends to enrol in a Specified School in Tasmania (with **no more than 10 per cent** of the total Measurement Group residing outside the catchment area of a Specified School)
* Has a parent who has a current Concession Card (includes Health Care Card, Pensioner Concession Card and Low Income Health Care Card)
* Attends **no more than 10 hours** of childcare per week, on average.
* Is not enrolled in the Tasmanian Government Department of Education Working Together program.

The parents or caregivers of the child are also entered as DEX clients.

**Who might be considered ‘support persons’?**

A Support Person may be a person supporting a child or parent or guardian but is not receiving a service. For example a caseworker, school teacher or Allied Health Professional.

**Should unidentified clients be recorded?**

Payment by Outcomes Trials: Project 2 provides face-to-face support and all clients are known to the service; **no clients (0 per cent)** should be recorded as unidentified clients.

**Outlets**

Each Specified School will be an Outlet in the Data Exchange. For Cohort 1 and 2, Specified Schools are:

* Austins Ferry Primary School
* Blackmans Bay Primary School
* Clarendon Vale Primary School
* Dodges Ferry Primary School
* East Derwent Primary School
* Fairview Primary School
* Franklin Primary School
* Gagebrook Primary School
* Glen Huon Primary School
* Glenorchy Primary School
* Goodwood Primary School
* Herdsmans Cove Primary School
* Huonville Primary School
* Illawarra Primary School
* Kingston Primary School
* Lindisfarne North Primary School
* Margate Primary School
* Moonah Primary School
* New Norfolk Primary School
* Risdon Vale Primary School
* Rokeby Primary School
* Snug Primary School
* Sorell Primary School
* Warrane Primary School

Cohorts 2 and 3 Specified Schools will be determined in August 2022 and 2023.

**How should cases be set up?**

A case is a family consisting of at least one child and at least one parent or guardian.

To protect client privacy, client names should never be recorded in the Case ID field.

**The partnership approach**

For this program activity, organisations are required to collect some extended client level data under the partnership approach. Organisations are **not required** to report outcomes information using the Standard Client Outcomes Reporting (SCORE) tool but may choose to do so.

If SCORE Circumstances are reported, the assessment tools are the Child Neglect Index or the Personal Wellbeing Index (refer to the [SCORE Translation Matrix](https://dex.dss.gov.au/document/121)).

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Case Level Data** | **Fields and Meaning** | |
| * Reason for seeking assistance | For this program, all referrals are for **Age-appropriate development**. | |
| * Referral source | Health Agency | E.g. Allied Health Professional, Early Childhood Intervention Service (ECIS), Child and Family Centre, Parenting Centre. |
| Community services agency | E.g. non-government family support services, supported playgroup |
| Educational agency | E.g. school, Kindergarten, Launching Into Learning. |
| Employment/job placement agency | Government funded Employment Support Service i.e. ParentsNext, JobActive |
| Centrelink | Centrelink |
| Other Agency | Department of Communities e.g. Child Safety Service, Family Violence Counselling and Support Service, Youth Justice Service, Housing Tasmania, Tasmanian Autism Diagnostic Service (TADS). |
| Self | Parent/caregiver |
| Family | Family of parent/caregiver |
| Friends | Friends of parent/caregiver |
| General Medical Practitioner | General Medical Practitioner |
| * Referral to other service (purpose) | Physical health | General Medical Practitioner (not for a Mental Health Plan), dietician, dentist, maternal child health nurse. |
| Mental health, wellbeing & self-care | General Medical Practitioner for the purpose of a Mental Health Plan, Psychologist/counsellor. |
| Personal and family safety | Child Safety Services, Family Violence Counselling and Support Service |
| Age-appropriate development | Early Childhood Intervention Service (ECIS) or Tasmanian Autism Diagnostic Service (TADS). |
| Community participation & networks | Volunteering, social or special interest groups (i.e. AA, hiking, craft, play group for fathers). |
| Financial Resilience | Financial counselling, Centrelink, Microenterprise Development Program |
| Family functioning | Specialist family support service, family and relationship counselling. |
| Employment | Employment Support Service (JobActive, ParentsNext) |
| Education and skills training | Allied Health Professional |
| Material wellbeing and basic necessities | No-interest Loans Scheme, Emergency Relief |
| Housing | Supported Accommodation Program, Community Housing, Social Housing, Housing Connect. |
| Support to caring role | In-home support, respite. |
| Other |  |
| * Attendance profile | Parents or guardians and children are a ‘family’ | |

|  |  |  |
| --- | --- | --- |
| * Service setting | Organisation outlet/office | SCA premises |
| Clients residence | Child’s home |
| Community venue | P2L venue |
| Partner organisation | Family support service or other caseworker/case coordinator, family and relationship counselling service etc. |
| Telephone | Conversation on phone |
| Video | Contact through zoom, teams etc. using camera function |
| Online service | Contact through email, text etc. |
| Healthcare facility | Early Childhood Intervention Service (ECIS) or Tasmanian Autism Diagnostic Service (TADS), General Practitioner, Hospital, Allied Health Professional etc. |
| Education facility | Launching into Learning site, Kindergarten, School |
| Justice facility | Youth or adult justice service (community or detention) |
| * Exit reason | Add Exit Reason to the case level when Service Type - **Exit Interview** is used. Refer to Exit Interview and Table A or B below for further guidance. | |

You may record and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Intake/Assessment | Gather and assess information to confirm referred child and parent or guardian’s suitability and eligibility prior to enrolment (Stage 2 and 3 of intake process).  When used after the child’s Enrolment Date (DEX Service Type: Intensive Support), a PICCOLO (Parent Interactions with Children – Checklist of Observations Linked to Outcomes) assessment undertaken with a parent or guardian. |
| Intensive Support | Enrolment Date - referred child and parent(s) are enrolled in the Payment by Outcomes Trials: Project 2.  Privacy Notice and Consent form is signed. |
| Goal Setting | Case Plan Development/Review - formal identification of issues, strategy development for addressing those issues, stocktake of progress against agreed goals. |
| Supported playgroup | Attendance at a P2L supported playgroup.  Supported playgroups are an opportunity for parents to share experiences of parenting and learn new parenting skills while being supported by workers who coordinate the activities. Recorded as a group session with identified clients. |
| Child Focused Activity | Child Focused Activity is to be used when the purpose of the interaction is to promote the child’s healthy development through activities with the child in line with the development gaps identified through the ASQ, for example:   * Developing language & confidence so that a child can predict and understand, ask questions, respond to questions, speak with greater fluency * Engage in imaginative play such as drawing * Recognise own name in print and counting from 1 to 5 * Separate comfortably from parent/carer * Toilet independently * Cooperate with other children in extended play situations. |
| Family Capacity Building | Support to enhance parents’ skills and confidence to ensure their children meet their developmental milestones, this may include support with:   * Setting bedtime & meal routines * Managing challenging behaviour * Reading/playing with children * Build attachment and bonding * Parental emotional regulation. |
| Developmental Assessments | An ASQ (Ages and Stages Questionnaire) assessment undertaken with the child. |
| Education Engagement | First day a child attends Kindergarten. |
| Exit Interview | * **No Enrolment Date** (Service Type: Intensive Support): a child was not enrolled and case is closed. * **Exit Reason** Refer to Exit Reason Table A – Person not enrolled after intake process. * **An Enrolment Date** (Service Type: Intensive Support): a child was exited from Payment by Outcomes Trials: Project 2. Refer to Exit Reason Table B – Allowable exclusions |

**Table A – Child is not enrolled after intake process**

**DEX Exit Reason for exits during Intake: Stage 2 and 3 referrals only**

Stage 1: Referrals received from referring agency. Where Payment by Outcomes Trials: Project 2 is not the most suitable program, the practitioner will provide advice to the referring agency and the referring agency will inform the family and provide alternative options.

Stage 2: Phone screening with referred parent or guardian. Where Payment by Outcomes Trials: Project 2 is not the most suitable program, the practitioner informs the family and provides them with alternative options for support.

Stage 3: Practitioners undertake an initial face to face home visit for assessment. Where Payment by Outcomes Trials: Project 2 is not the most suitable program, the practitioner will provide a warm handover to alternative support services.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Reason family is not enrolled** | **DEX Exit Reason** | | | | | |
| Note: Exit Reason is reported against the child | Client has moved out of area | Client no longer eligible | Client now requires higher level of care | Service unable to provide assistance | Client died | None of the above |
| Family does not reside in a Specified School catchment area. | **x** |  |  |  |  |  |
| Child is the subject to a Care and Protection Order (up to 12 months) or an Assessment Order of 4 or 8 weeks under the *Children, Young Person’s and their Families Act 1997* (Tasmania). |  | **x** |  |  |  |  |
| Child has been diagnosed with a medical condition, disability or significant atypical development that has a high probability of contributing to a long-term developmental delay. |  |  | **x** |  |  |  |
| Parent or guardian does not have a current Concession Card. |  |  |  | **x** |  |  |
| Child is not the right age. |  |  |  | **x** |  |  |
| Child is attending more than 10 hours of childcare or is currently enrolled in the Working Together program. |  |  |  | **x** |  |  |
| Parent or guardian does not provide consent for personal information to be shared and used for stated purposes. |  |  |  |  |  | **x** |

**Table B – Child is exited during their Program Period**

**DEX Exit Reason for Approved Eligible Exclusions**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Exit Reason** | **DEX Exit Reason** | | | | | |
| Note: Exit Reason is reported against the child | Client has moved out of area | Client no longer eligible | Client now requires higher level of care | Service unable to provide assistance | Client died | None of the above |
| Family moves outside T2S catchment area but remains in Tasmania during Program Period (time dependent – refer to Operations Manual). | **x** |  |  |  |  |  |
| Families moves interstate or overseas during Program Period. | **x** |  |  |  |  |  |
| Child is the subject to a Care and Protection Order (up to 12 months) or an Assessment Order of 4 or 8 weeks under the *Children, Young Person’s and their Families Act 1997* (Tasmania) (time dependent – refer to Operations Manual). |  | **x** |  |  |  |  |
| Child is diagnosed with a medical condition, disability or significant atypical development that has a high probability of contributing to a long-term developmental delay. |  |  | **x** |  |  |  |
| Extended illness (e.g. sectioned or hospitalised) of child or parent or guardian (time dependent – refer to Operations Manual). |  |  |  |  |  | **x** |
| Imprisonment of carer or guardian. |  |  |  |  |  | **x** |
| Death of child or parent or guardian. |  |  |  |  | **x** |  |
| Parent or guardian withdraws consent for personal information to be shared and used for stated purposes. |  |  |  | **x** |  |  |

### Social Impact Investing – Payment by Outcomes Trials: PBO 3 Long-term Employment Outcomes

**Description**

The PBO 3 Long-term Employment Outcomes trial aims to provide employment opportunities with wrap around support services in Participating Social Enterprises for people with a disability and significant disadvantage in the labour market.

**Who is the primary client?**

Primary clients (PBO 3 Trial participants) are mainly people with disability and who:

* are aged between 16 and 59 years (inclusive)
* are currently receiving an income support payment
* are receiving a Disability Support Payment or are eligible for the Disability Employment Program or the Community Development program,
* were unemployed for at least 19 of the 26 fortnights immediately prior to their employment date,
* have been employed by a Participating Social Enterprise for a maximum period of 2 Fortnights prior to their Enrolment Date in the trial, and
* are approved by the department to be an Eligible Person in accordance with the Operations Manual

**What are the key client characteristics?**

Key clients may include persons:

* identifying as having a condition, impairment or disability
* receiving government payments and/or disability support pension allowances

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include carers of clients and care recipients, family members, guardians, and legal representatives of clients.

Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

The PBO 3 Long-term Employment Outcomes trial provides face to face support, where clients are known to the service. Therefore, it is expected that **no clients (0 per cent)** should be recorded as unidentified clients.

**How should cases be set up?**

For PBO3, a single case must be allocated to each individual client/participant. This means all contact with a specific client is recorded in the same place and is easy to find for future use. Cases are to be closed if a client/participant exits the trial, stops working or transitions to another employer.

To protect client privacy, names should never be used in the Case ID field.

**The partnership approach**

For this trial activity, organisations are required to collect some extended client level data under the partnership approach. Organisations are **not required** to report outcomes information using the Standard Client Outcomes Reporting (SCORE) tool but may choose to do so.

If you choose to record a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Collecting extended data**

For this trial activity, it is expected organisations collect and record the following additional data field:

|  |
| --- |
| **Case level data** |
| * Exit reason |

**For this trial activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Intake/Assessment | The participant commences their paid employment in the trial. Use this service type to record the date of commencement. |
| Facilitate employment pathways | Records participants’ fortnightly pay dates and wages. Enter this service for each of the participants’ fortnightly pay dates.  ‘Total cost’ data field   * In the ‘total cost’ field, enter the total value the participant receives as wages payment from the social enterprise (excluding superannuation) every fortnight, rounded to the nearest dollar. |
| Service transition | The date of the participant’s last paid day of work with the social enterprise before moving to other employment, or the date of the last day of work where they are employed exclusively by the social enterprise.  If the participant is leaving the trial without transitioning to any other employment, do not use this service type. Use ‘Exit interview’ below. |
| Exit interview | The participant is exiting the trial. This means the participant is leaving the trial without transitioning to any other employment.  Record the last day of paid employment before a participant exits from the trial. An exit is leaving the trial without transitioning to any other employment.  This service type is to be used in conjunction with Exit Reason at the case level. Exit Reasons to be used are:   * **Exit reason - Service unable to provide assistance** Use when an allowable exclusion has been agreed because a participant has developed an unforeseen physical, intellectual or psychiatric condition. * **Exit reason – Client has moved out of area** Use when an allowable exclusion has been agreed because a participant has moved more than 1 hour in travel time from the Participating Social Enterprise. * **Exit reason – Client terminated the service** Use when client leaves employment (but not due to an allowable exclusion). * **Exit reason – Client died** Use when an allowable exclusion has been agreed because a participant has died * **Exit reason – Client no longer eligible** Use when a client achieves all retention outcomes and remains employed in the social enterprise * **Exit reason – Client needs have been met** Use when a client transitions to a competitive employer * **Exit reason – None of the above**  Use when a client withdraws consent |

## Volunteering and Community Connectedness

The Volunteering and Community Connectedness activity includes services and initiatives to strengthen communities and promote inclusion and participation in community life.

The following program activities are included in Volunteering and Community Connectedness:

* Be Connected
* Cashless Debit Card (CDC) Support Services / Cashless Debit Card (CDC) Support Services – Job Support Hubs
* SARC - Community Resilience
* SARC - Inclusive Communities
* Seniors Connected Program Village Hubs

### Be Connected

**Description**

Be Connected, aims to improve the skills, confidence and online safety of older Australians in using digital technology.

The program adopts a family and community-centred approach to supporting and coaching older Australians, while at the same time helping them to realise the relevance and value of being connected online and access to appropriate learning support. Learning and exposure to computers and the internet will be through one‑on‑one, face-to-face, self‑paced learning with the help of family and friends at home, carers in aged care facilities or tutors/mentors in local community-based groups such as libraries, community centres, community clubs, etc.

**Who is the primary client?**

Anyone aged 50 years and over who has low or no engagement with digital technology.

**What are the key client characteristics?**

* + People from a culturally and linguistically diverse background
  + People identifying as Aboriginal and/or Torres Strait Islander
  + People identifying as having a condition, impairment or disability
  + People in a low Socio-economic Indexes for Area (SEIFA)
  + People residing in a rural or remote area.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients, carers of clients/ care recipients, children of clients, community leaders/mentors/informal care givers. .

**Should unidentified clients be recorded?**

Be Connected is a combination of face-to-face and online support activities. It is therefore expected that the majority of online clients, recorded through the learning portal, should be recorded as unidentified clients in each reporting period. Where it is practical and possible to collect client level data, this should be collected and reported into the Data Exchange.

Where face-to-face support is provided, and clients are known to the service, it is expected organisations will report **only 25 per cent** **or less** of clients as unidentified in each reporting period.

Where online learning portal support is provided, and [clients](https://dex.dss.gov.au/document/326) are registered and known to the service, it is expected organisations will report client level data in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each course. To protect client privacy, family names or other identifying information should never be recorded in the Case ID field.

**What areas of SCORE are most relevant?**

Organisations can record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Personal and family safety | * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions | * I am satisfied with the services I have received | * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Fundamental life skills | Includes, but not limited to, the following topics:   1. The absolute basics 2. Getting to know your device 3. Getting started online 4. Safety first |
| Social participation | Includes, but not limited to, the following topics:   1. More online skills 2. Connecting to others 3. What is data? 4. What is Wi-Fi? 5. Online hobbies 6. Apps – little programs that do a lot 7. Introduction to buying and selling online 8. Social media apps 9. Introduction to smart homes 10. Introduction to mobile banking 11. Booking online travel 12. Find my smart device / cloud |
| Education and skills training | Includes activities in the following areas:   * ‘Digital playground’, a practice area involving instructional videos, printable instructional text, and interactive practice activities. * ‘Games’, to practice mouse dexterity, keyboard skills, and gain computer confidence. |
| Specialist support | Includes content related to Phase 3 activities, including setting up and getting started with different mobile and desktop devices (both new and second-hand). |

### Cashless Debit Card (CDC) Support Services / Cashless Debit Card (CDC) Support Services – Job Support Hubs

**Description**

Cashless Debit Card (CDC) Support Services aim to support vulnerable and disadvantaged people on pathways to self-reliance and empowerment through local community-driven solutions that strengthen economic participation.

For more information about the reporting requirements for this program, please refer to *CDC Support Services – DEX Program Specific Data Recording Guidelines*.

**Who is the primary client?**

The primary clients for this program activity are Cashless Debit Card participants in Ceduna; East Kimberley; the Goldfields; Bundaberg and Hervey Bay; and the Northern Territory.

**What are the key client characteristics?**

Key clients groups include:

* + People aged 16 to 65 years of age receiving a working age payment. Note: an Age limit of 35 or under applies to Bundaberg/Hervey Bay region.
  + People issued with a Cashless Debit Card (CDC) and people in the NT transitioning from Income Management to the CDC
  + People willing to participate in the service voluntarily, to seek assistance from support services into pathways to employment
  + People willing to participate in the service voluntarily, to seek assistance from support services into pathways to employment
  + Young people aged 16 to 24 years of age
  + People who are homeless or at risk of homelessness
  + People from a cultural and linguistically diverse background
  + People identifying as Aboriginal and/or Torres Strait Islander.
  + People identifying as having a condition, impairment or disability
  + People who are residing in a low SEIFA area
  + People residing in a rural or remote area

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record support persons in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families, children, parents or guardians of clients, or a carer or care recipient (who are present but not directly receiving a service).

**Should unidentified clients be recorded?**

The department expects organisations to deliver services to people who are verified as CDC participants, and who are known to service provider staff. Therefore, **no clients (0 per cent)** should be recorded as unidentified.

**How should cases be set up?**

A separate case should be created for each CDC participant accessing the service/s. This means that every time the client uses the service further information can be recorded in the same in place making it easy to find information in the future.

Where group sessions or workshops are conducted separate cases should be created for each participant. It is recognised that only basic information may be recorded (for example, name and address) and that further information will be recorded when and if the client makes subsequent contact with the service. In order to easily recall the client record for future use a workshop reference may be entered into the Client ID field for example, a financial literacy workshop held on 1 April 2022 might be entered as FINLIT 010422.

When a case is created and where a reference number is not entered by staff, the system will automatically create a Client ID.

*Note: To protect client privacy, family names should never be recorded in the Case ID field nor should a person’s Centrelink Customer Reference Number be recorded in the Case ID field.*

**The partnership approach**

All organisations are required to record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

Organisations must meet the following minimum requirements for SCORE data:

* Report three circumstance SCORES for **at least 90 per cent** of CDC participants who engage with the service in either the June or September Quarter of 2022 and continue with the service in the June Quarter of 2023.
* Report an initial and at least one subsequent Goals SCORE for **at least 90 per cent** of CDC participants who engage with the service in either the June or September Quarter of 2022 and continue with the service in the June Quarter of 2023.
* Reporting against the Satisfaction and Community SCOREs is **not required**.

It is expected that a SCORE assessment is completed **up to four times** over a 12 month period:

* once at the initial intake/assessment stage;
* whenever the service checks-in with a CDC participant, where a significant event or a significant change in their situation occurs, for example:
  + the person completes a long training course
  + the person receives assistance in overcoming a significant barrier, such as a program of therapy to overcome trauma
* as a precursor to closing a client case at the end of the project

**What areas of SCORE are most relevant?**

For this activity, it is expected that organisations record SCORE against the following domains:

| **Circumstances** | **Goals** |
| --- | --- |
| * Age-appropriate development * Community participation and networks * Employment * Education and skills training * Family functioning * Housing * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Financial resilience * Personal and family safety * Physical health | * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services * Changed impact of immediate crisis |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Session level data** | **Case level data** |
| * Employment Status * Highest level of education / qualification * Homeless indicator * Household composition * Is client a carer | * Service setting | * Referral in (type and purpose) * Exit Reason |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Assessing a client’s circumstances to determine what assistance will have the most impact to help the client navigate a reasonable pathway to employment.  This includes listening to a client’s story, establishing rapport and capturing client data.  An initial SCORE assessment **must be** completed at this time.  This assessment is required prior to preparing an individualised case plan reviewed (see **Goal Setting** and **Service Review**, respectively). |
| Goal Setting | Preparing an individualised case plan for a client based on their circumstances, needs and the barriers they face (see **Intake and assessment** above). |
| Service review | Reviewing a client’s individualised case plan.  A review may occur when a client presents after receiving assistance either directly from the provider from another, external provider. For example, after attending a referral or starting a training course.  The purpose of this is to review the most recent assessment, (see **Intake and Assessment** above) and update the client’s individualised case plan if necessary.  This is also the time to organise what further assistance should be provided to assist the client on their pathway to employment. |
| Counselling | Assistance delivered to the client by an appropriately qualified staff member to help the person work through a particular issue.  This may be personal or family counselling to address:   * trauma * relationship issues * financial issues * underlying mental health concerns |
| Advocacy/Support | Providing intensive support to help a client navigate the service provider, welfare and employment systems so they receive the assistance they need to progress on their pathway to employment.  This may include:   * accompanying a client to their initial appointment with a service provider * contacting a client after their appointment to check in and provide support |
| Transport assistance | Assistance provided to a client to enable them to attend an appointment, training course or interview.  For example; purchasing bus tickets. |
| Literacy and Oral Communication Skills Building | Assisting a client to improve their literacy and/or oral communication skills.  This may include training in:   * understanding instructions on forms and how to fill in forms * preparing and responding to emails * interview preparation including mock interviews (video or face to face) |
| Financial Literacy Building | Building a client’s basic budgeting and bank account management skills.  This may include:   * how to prepare a budget * understanding you bank balance * making you money go further   **For NT Support Services ONLY**:  This may also include:   * understanding the benefits of the CDC * getting on to the CDC * getting the most from your CDC |
| Digital Literacy Building | **For NT Support Services ONLY**:  Building a client’s digital literacy.  This may include:   * keeping your ID/CDC safe * safely using the CDC app on your mobile phone * using the phone help service |
| Pre-employment checks | Assisting a client to obtain pre-employment checks.  For example, Working With Children check, Police check, ID documents. |
| Pre-employment – Clothing and other | Assisting a client to present for a job interview.   * This may include: * providing appropriate clothing * preparing a CV * other purchases to help with the first day on the job |
| Pre-employment – Driver’s License | Assisting a client to obtain a driver’s licence.  This may include:   * contributing to a driver training course * assisting the client to sit for their driver’s license test |
| Rehabilitation Program | Assisting a client to access and undergo a program of rehabilitation to address an addiction. |

### SARC – Community Resilience

**Description**

Community Resilience activities aim to build strong, resilient and cohesive communities to help make Australia more secure and harmonious as a whole. Community Resilience grants will address issues in communities that show potential for or early signs of low social cohesion, and/or racial, religious or cultural intolerance.

**Who is the primary client?**

The primary clients for this program activity include anyone affected by issues in communities that can affect social cohesion. This can include adults, children, carers, care recipients, families and seniors.

**What are the key client characteristics?**

* People who have arrived in Australia in the last five years
* People on a Humanitarian visa
* People from a cultural and linguistically diverse background
* People identifying as Aboriginal or Torres Strait Islander
* People identifying as having a condition, impairment or disability
* People residing in a low Socio-Economic Indexes for Area (SEIFA)
* People residing in a rural or remote area
* People and families who are unemployed, ill, studying and/or experiencing financial distress
* People under 18 years.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include carers of clients, care recipients, parent/guardians of clients, or community leaders.

**Should unidentified clients be recorded?**

This program provides face-to-face support where clients are known to the service, therefore it is expected that only **40 per cent** of your clients **or less** should be recorded as unidentified clients in each reporting period.

Examples of where the use of unidentified clients may be appropriate include: large group information sessions; community capacity building workshops to inform development and planning of a Community Resilience project; and community events such as a Harmony Day or multicultural event. However, organisations should aim to collect individual client details for each participant/attendee where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program activity. Organisations should create cases in a way that works best for them and their staff.

**What areas of SCORE are most relevant?**

Organisations can record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Employment * Material wellbeing and basic necessities * Personal and family safety | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | All four Community outcomes are relevant for this program activity |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial meeting with client to gather information and discuss needs. |
| Information/Advice/Referral | Provision of information or advice through community workshops or forums, provision of information and advice online, or referral to another service. |
| Education and skills training | Assisting a person to learn or build knowledge about a topic aimed at developing a skill, or enhancing a skill relevant to addressing barriers to social and economic participation in the community. |
| Child/Youth focussed group | Activity that provides children and youth with services that increase their community participation. Examples include providing youth with access to services that aim to build trust and increase community participation, or addressing racial, cultural or religious tensions through educational, cultural or sporting activities. |
| Community capacity building | Activity that is targeted at building and strengthening social cohesion by providing local solutions to address issues specific to the local community, or building a person’s leadership skills to foster greater community cohesion. |
| Family capacity building | Early intervention or crisis prevention to support children and parents. |
| Community engagement | Provision of a Harmony Day, multicultural arts or festival event or other activity that promotes social participation and community cohesion by bringing people from different backgrounds together. |

### SARC – Inclusive Communities (grants concluding 2022 or before)

**Description**

Inclusive Communities activities aim to increase the social and economic participation of vulnerable and disadvantaged individuals and families within their communities and enhance their lifetime wellbeing and sense of community belonging.

**Who is the primary client?**

The primary clients for this program activity include any vulnerable and disadvantaged individuals and families needing assistance to improve their social and economic participation, and their sense of belonging. This can include adults, children, carers, care recipients, families and seniors.

**What are the key client characteristics?**

* People who have arrived in Australia in the last five years
* People on a Humanitarian visa
* People from a cultural and linguistically diverse background
* People identifying as Aboriginal or Torres Strait Islander
* People identifying as having a condition, impairment or disability
* People residing in a low Socio-Economic Indexes for Area (SEIFA)
* People residing in a rural or remote area
* People and families who are unemployed, ill, studying and/or experiencing financial distress
* People under 18 years.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include carers of clients, care recipients, parent/guardians of clients, or community leaders.

**Should unidentified clients be recorded?**

This program provides face-to-face support where clients are known to the service, therefore it is expected that **no more than 30 per cent** of your clientsshould be recorded as unidentified clients in each reporting period.

Examples of where the use of unidentified clients may be appropriate include: large group information sessions; community capacity building workshops to inform development and planning of an Inclusive Communities project; and community events or festivals. However, organisations should aim to collect individual client details for each participant/attendee where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?** There is no specific case structure recommended for this program activity. Organisations should create cases in a way that works best for them and their staff.

**What areas of SCORE are most relevant?**

Organisations can record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Employment * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Personal and family safety | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial meeting with client to gather information and discuss needs. |
| Information/Advice/Referral | Provision of information or advice through community workshops or forums, provision of information and advice online, or referral to another service. |
| Education and skills training | Assisting a person to learn or build knowledge about a topic aimed at developing a skill, or enhancing a skill relevant to the client’s circumstances, for example leadership training activities to empower newly arrived women. |
| Child/Youth focussed group | Sessions targeted at children and/or youth under the age of 18, and delivered in a group, rather than on an individual basis. Examples include early intervention, mentoring, recreational and peer support activities. |
| Community capacity building | Activity that is targeted at building and/or strengthening a community’s skills or understanding of a topic or subject to build social cohesion and support the social and economic participation of people in the local community. |
| Family capacity building | Early intervention or crisis prevention to support children and their parents. |
| Facilitate employment pathways | Provision of technical, vocational guidance and/or training to improve a person’s job skills and employment opportunities. |
| Mentoring/Peer support | Provision of mentoring or peer support to increase a person’s social and economic participation in the community. |
| Community engagement | Provision of a Harmony Day, multicultural arts or festival event, or other activity that promotes social participation and community cohesion by bringing people from different backgrounds together. |

### SARC – Inclusive Communities (grants commencing from 2022)

**Description**

Strong and Resilient Communities Activity – Inclusive Communities aims to support vulnerable and disadvantaged people on pathways to self-reliance and empowerment through local community-driven solutions that support them to participate socially and economically.

**Who is the primary client?**

The primary clients for this program activity include young people, people without employment and their families, vulnerable and disadvantaged women and people with disability or mental health issues.

**What are the key client characteristics?**

Key clients may include:

* young people aged 12 to 18 years
* persons who are unemployed
* persons who identify as having a condition, impairment or disability
* women experiencing disadvantage

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange website.

For this program activity, support persons may include carers of clients/carer recipient, families or guardians, case and support workers, legal representatives, community leaders, mentors and informal care givers.

**Should unidentified clients be recorded?**

Strong and Resilient Communities Activity – Inclusive Communities imposes a limit on group activity with unidentified clients, therefore it is expected that **no more than** **30 per cent** of your clients should be recorded as unidentified clients in each reporting period.

Unidentified clients may be appropriate for large group information sessions and events; however, organisations should aim to collect individual client details for each client where possible.

Please refer to the Data Exchange Protocols for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. The organisation should create cases that reflect their own administrative processes.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **80 – 90 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **80 – 90 per cent** of identified clients.
* Report a Satisfaction SCORE for **at least 10 per cent** of identified clients.
* The Community SCORE can only be recorded when the service is delivered as a group activity, where individual reporting is not possible.

A SCORE assessment is recorded **at least twice** for each client – once towards the beginning of service delivery and once again towards the end.

Where practical, organisations should also record a SCORE assessment every 6 months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in at least one circumstance, one goal and one satisfaction domain shown below.

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Community participation and networks * Employment * Education and skills training * Mental health, wellbeing and self-care * Personal and family safety * Physical health | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | * I am better able to deal with issues that I sought help with | * Community infrastructure and networks * Group / community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices * Social cohesion |

When recording a SCORE assessment for a client, you must also record ‘**Assessed by**’ at the SCORE level to capture who has completed the assessment.

**Completing a Circumstances SCORE Assessment**

For this program activity, all funded organisations must use the following SCORE scale descriptions when assessing clients in the following Circumstance domains. For those SCORE domains not shown below, organisations can record a SCORE assessment as outlined in the [Data Exchange Protocols.](https://dex.dss.gov.au/document/81)

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Age-appropriate development** | Compared to other people the same age, I struggle to learn and use the skills or knowledge they seem to know, | Compared to other people the same age, I have learned and can use some skills or knowledge. | Compared to other people the same age, I know many of the same skills and knowledge | Compared to other people the same age, I have learned and can use most of the skills and knowledge others know. | Compared to other people the same age, my skills and knowledge are well developed |
| **Community participation & networks** | I feel very isolated. I have no contact with family, friends or my community. I have no support. | I feel fairly isolated. I have little contact with family, friends or my community. I have little support. | I feel somewhat connected. I have some contact with family friends, or my community. I have some support. | I feel reasonably connected. I have a reasonable amount of contact with family, friends or my community. I have good support. | I feel very connected. I have a lot of contact with family, friends or my community. I have great support. |
| **Employment** | I have no work and this has a negative impact on my daily life. | I have some short-term work but I’d like to work more. | Sometimes I have work and my ability to find work is improving. | I am in work that is suitable in most ways. | I am in work that is very suitable in all ways. |
| **Education and skills training** | I have a lot of difficulty finding or remaining in education or training. | I have some difficulty finding and remaining in education or training. | I occasionally have difficulty finding and remaining in education. | I am in education or training that is suitable in most ways. | I am in education or training that is very suitable in all ways. |
| **Mental health, wellbeing and self-care** | My mental health and well-being is very poor. | My mental health and well-being is somewhat poor. | My mental health and well-being is okay. | My mental health and well-being is quite good. | My mental health and well-being is very good. |
| **Personal and family safety** | I don’t feel safe at all. | I don’t feel completely safe. | I feel my personal safety has improved, but I don’t always feel safe. | I feel safe in the short term. | I feel safe almost all the time. |
| **Physical health** | My physical health is very poor. | My physical health is somewhat poor. | My physical health is okay. | My physical health is quite good. | My physical health is very good. |

**Completing a Goals SCORE assessment**

For this program activity, all funded organisations must use the following SCORE descriptions when assessing clients in the following Goals domains. For those SCORE domains not shown below, organisations can record a SCORE assessment as outlined in the Data Exchange Protocols.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed behaviours** | I have no goals in place to change the behaviours that aren’t helping me to improve my situation. | I have identified my goals to help me change the behaviours that aren’t helping me to improve my situation. | I am starting to make progress towards achieving my goals and can see that my situation is/will improve. | I am making good progress towards achieving my behaviour goals. My situation is improving. | I have/almost achieved my goals. My changed behaviours are really helping to improve my situation. |
| **Changed knowledge and access to information** | I have no plans to increase my knowledge about the issues I have sought help with.  I am not accessing any information to support me. | I want to increase my knowledge about the issues I have sought help with and have started to access information to help me. | My knowledge is increasing in the areas relevant to the issues I have sought help with. I am accessing information to help me. | I have good knowledge in the areas relevant to the issues I sought help with. The information I am accessing has been helpful. | I have very good knowledge in the areas relevant to issues I sought help with. The information I have accessed has been very helpful in supporting me to achieve my goals. |
| **Changed skills** | I have no goals in place to develop or improve the skills I need to help improve my situation. | I want to develop or improve my skills and have a plan to help me achieve my goals. | My am starting to develop and improve my skills. | I have good skills in the areas I need to be able to improve my current situation. | I have very good skills in the areas I need to be able to improve my current situation. |
| **Empowerment, choice and control to make own decisions** | I am not empowered to make my own choices or have control over decisions that affect my life.  I would like to become more empowered. | I have limited empowerment to make my own choices and have very little control to make decisions that affect my life.  I have started making progress towards achieving my goals. | I am empowered to make some of my own choices and have some control over decisions that affect my life.  I am making progress towards achieving my goals. | I am empowered to make most of my own choices and have control over most of the decisions that affect my life.  I am making good progress towards achieving my goals. | I am empowered to make all of my own choices and have control to make my own decisions on things that affect my life.  I am close to or have achieved my goals. |
| **Engagement with relevant support services** | I have made enquires to support services I believe will help me improve my situation. | I have started working with a support service. | I am working with a support service and I am making some progress towards improving my situation. | I am working with a support service and I am making good progress towards improving my situation. | My situation has improved because I engaged with a support service that helped me.  I will access support services in the future because of my experience. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Satisfaction domain. For those SCORE domains not shown below, organisations can record a SCORE assessment as outlined in the Data Exchange Protocols.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **I am better able to deal with issues that I sought help with.** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing group clients in the following Community domains. This set of domains is only relevant to unidentified group activities and not individual support.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | There is no community infrastructure in place, nor any community networks that targeted clients could participate in. | Community infrastructure and community networks available to targeted clients are weak and few. | There are some elements of community infrastructure and some community networks that targeted clients could participate in. | Community infrastructure and networks are strong and readily accessible to targeted clients. | Community infrastructure and networks are plentiful, accessible and exceptionally strong and targeted clients can participate easily. |
| **Group / community knowledge, skills, attitudes and behaviours** | Group / community knowledge and skills are very poor, and attitudes and behaviours are negative/ harmful to clients. | Group / community knowledge and skills are poor and attitudes and behaviours are poor towards clients. | Group / community knowledge and skills are fair, and attitudes and behaviours towards clients are satisfactory | Group / community knowledge and skills are good, and attitudes and behaviours towards clients are positive/helpful | Group / community knowledge and skills are very good, and attitudes and behaviours towards targeted clients are proactive and inclusive |
| **Organisational knowledge, skills and practices** | Organisational knowledge, skills and practices are very poor and do not meet the needs of clients. | Organisational knowledge, skills and practices are poor and rarely meet the needs of clients. | Organisational knowledge, skills and practices are satisfactory and generally meet the needs of clients. | Organisational knowledge, skills and practices are good and usually meet the needs of clients. | Organisational knowledge, skills and practices are very good and meet the needs of clients |
| **Social cohesion** | Social cohesion is poor with group members not interacting with each other. | Social cohesion is growing with group members starting to interact with each other | Social cohesion is satisfactory with some group members interacting well | Social cohesion is very good with most of the group members interacting well. | Social cohesion is excellent with all of the group members interacting well. |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the additional data fields outlined in the below table.

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Session level data** | **Case level data** |
| * Employment status * NDIS eligibility | * Referral out (type and purpose) | * Attendance profile * Referral in (source and reason for seeking assistance) * Exit reason |

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Intake/Assessment | An initial meeting to gather information on a clients' needs, eligibility for participation in the project and matching clients to services.  A SCORE assessment should be conducted at this time. |
| Exit Interview | A client’s final session with the program.  A SCORE assessment should be conducted at this time. Use the 'Exit Reason' field at the Case level to indicate why the client is exiting the program. |
| Counselling | Counselling for couples, families, children or vulnerable people. This may include using cognitive behavioural therapies. |
| Developmental Assessments | Assessment of a client’s development. |
| Domestic and Family Violence Support | Supporting a client experiencing domestic and family violence. |
| Education and skills training | Assisting a client in learning or building knowledge about a topic or aimed at developing or enhancing a skill relevant to the client’s circumstances, including life skills. This may be online or in person. |
| Education Engagement | Assisting a client to engage with all levels of education. This may include developing a vocational plan. |
| Employer Engagement | Contact between an employer or potential employer and a client or service provider. |
| Facilitate Employment Pathways | Assisting clients to become ‘job ready’ by building capabilities in employment skills and linking clients with opportunities that will further develop work skills. |
| General Workshop | Workshops where clients learn the practical application of a wide range of skills, knowledge and behaviours.  This may include; wilderness treks, yoga, arts and crafts, and English language classes. Workshops can be online or in person, one-on-one or in groups. |
| Goal Setting | Formal identification of issues, strategy development for addressing those issues, stocktake of progress against agreed goals. |
| Indigenous Social Participation | Initiate or facilitate social activities for Indigenous communities. |
| Information/Advice/Referral | Provision of standard advice, guidance or information on a specific topic, and referrals on to another service. |
| Mentoring / Peer Support | Support group sessions offering clients support through discussion and activities. This generally includes a facilitator. |
| Service Review | Reviewing the services provided with the client. **Note**: this requires direct contact with the client. |
| Social Participation | Activities, groups or events that provide social support. This may include activities that increase community engagement, community connectedness, social networks, belonging, social wellbeing, and reducing isolation. |
| Transportation Services | **Breakaway Aboriginal Corporation only:**  Provision of transport to assist clients to access services and attend appointments. |

### Seniors Connected Program Village Hubs

**Description**

The Seniors Connected Program, Village Hubs Activity, aims to support the establishment and operation of community-based organisations offering social, physical and other activities or opportunities to older Australians living in their community, to contribute to positive mental and physical wellbeing by addressing loneliness and social isolation.

The Village Hubs Activity involves a ‘National Grants Manager’ organisation that administers grant funding on behalf of Government to the community-based organisations that will establish and operate new Village Hubs across Australia.

The Village Hubs Activity is part of the Seniors Connected Program, which was established to implement the Government’s 2019 election policy: ‘More Support for Older Australians’. The Seniors Connected Program terminates on 30 June 2024.

**Who is the primary client?**

The primary clients are Australians aged 55 years and over (or Indigenous Australians aged 50 or over) who are living in their community.

**What are the key client characteristics?**

Key clients may include people:

* with cultural and linguistically diverse backgrounds
* identifying as Aboriginal and/or Torres Strait Islander
* identifying as LGBITQ+
* identifying as having a condition, impairment or disability

**Who might be considered ‘support persons’?**

A support person is anyone who attends a session with a client but is not directly receiving services. Support persons may include, but are not limited to, guardians or family members including parents and children, carers or informal care givers, case workers, community leaders or mentors.

Recording the details of support persons is voluntary. Instructions on how to record support persons in the web‑based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

Volunteers are not considered Support Persons. The definition of Volunteer for this activity is a person (over 18 years of age) who willingly gives their time without financial gain to contribute to the running of the Village Hub, including coordination of Village Hub activities. A Volunteer may also be a Member. Activities undertaken in the volunteering capacity should not be recorded in DEX.

**Should unidentified clients be recorded?**

The Village Hubs program provides individual face to face or digital support, where clients are known to the service and ongoing relationships are formed.

These participants should have a ‘client’ record created within the Data Exchange. Where participants are unknown to the service, e.g. a community event, **a small percentage (30%)** of unknown participants may be recorded as unidentified ‘group clients’.

Unidentified group clients should be avoided where possible, as they only provide an aggregate count and have no related information such as cultural and linguistic, indigenous, or disability demographics.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

There is no specific case structure recommended for this program. If an organisation uses the web-based portal, it should create cases in a way that works best for its staff and is useful over multiple reporting periods.

To protect client privacy, names should never be used in the Case ID field; organisations should use other identifying nomenclature such as ‘FamilyA24’, ‘Couple 26’ or an individual’s Client ID

**The partnership approach**

All organisations are required to participate in the partnership approach. For the Village Hubs, participation means organisations must record extended data and client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

It is expected that, where practical, organisations:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 70-80 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 70-80 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least 10 percent** of identified clients.

A SCORE assessment for a client should be recorded a minimum of three times – at the start of a client’s interaction with the Village Hub, 6 month after their initial interaction, and then at the end of their interaction with the Village Hub. Ideally, additional SCORE assessments should be conducted every 6 months.

Given the nature of service delivery within this program it is likely SCORE assessments will be recorded at greater intervals, subject to practical application by participating organisations. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Mental health, wellbeing and self‑care * Physical health | * Changed knowledge and access to information * Changed skills * Changed behaviours * Empowerment, choice and control to make own decisions | * I am satisfied with the services I have received | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Social cohesion |

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community participation & networks** | Almost all of the time I feel disconnected from the people in my community and/or feel alone. | Most of the time I feel disconnected from the people in my community and/ or feel alone. | Some of the time I feel disconnected from the people in my community and/ or feel alone. | Rarely do I feel disconnected from the people in my community and/ or feel alone. | I almost never feel alone and/or disconnected from the people in my community. |
| **Mental health, wellbeing & self-care** | My mental health stops me from doing almost all the things I want to do. | My mental health stops me from doing most of the things I want to do. | My mental health stops me from doing some of the things I want to do. | My mental health rarely stops me from doing the things I want to do. | My mental health almost never stops me from doing the things I want to do. |
| **Physical Health** | My physical health stops me from doing almost all the things I want to do. | My physical health stops me from doing most of the things I want to do. | My physical health stops me from doing some of the things I want to do. | My physical health rarely stops me from doing the things I want to do. | My physical health almost never stops me from doing the things I want to do. |

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

For guidance translating Village Hub participants goals to the Goals domains, please refer to the Village Hubs Goals Translation Matrix at [**Table 1**](#_Table_1:_Village).

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge and access to information** | I have no goals in place to increase my knowledge about the issues I have sought help with. | I want to increase my knowledge about the issues I have sought help with. | My knowledge is increasing in the areas relevant to the issue have sought help with. | I have good knowledge in the areas relevant to the issues I sought help with. | I have very good knowledge in the areas relevant to issues I sought help with. |
| **Changed skills** | I have no goals in place to develop or improve the skills I need to help to help me achieve my goals. | I want to develop or improve my skills and have a plan to help me achieve my goals. | I am following my plan and have developed and improved some of my skills. | I am following my plan and have good skills to help me achieve my goals. | I have very good skills in the areas I need to help me achieve my goals. |
| **Changed behaviours** | I have no goals in place to change the behaviours that aren’t helping me to improve my situation. | I have identified goals to help me change the behaviours that aren’t helping me to improve my situation. | I am starting to make progress towards achieving my behaviour goals that help me to improve my situation. | I am making good progress towards achieving my behaviour goals that help me to improve my situation. | I have/almost achieved my goals that help me to improve my situation. |
| **Empowerment, choice & control to make own decisions** | I have no control over decisions that affect my life.  I would like to become more empowered. | I have a little control to make decisions that affect my life.  I have started making progress towards achieving my goals. | I have some control over decisions that affect my life.  I am making progress towards achieving my goals. | I have control over most of the decisions that affect my life.  I am making good progress towards achieving my goals. | I have control to make my own decisions on things that affect my life.  I am close to or have achieved my goals. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the satisfaction domain.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **I am satisfied with the services I have received** | I am very unsatisfied. | I am a little unsatisfied. | I am somewhat satisfied. | I am mostly satisfied. | I am very satisfied. |

**Completing a Community SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing community groups in the Community domains.

| **Community** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community infrastructure and networks** | The community is not engaged with changing the infrastructure and/or networks that support the community. | The community has started to engage with progressing changes in infrastructure and/or networks. At present, the community has made limited changes. | The community is strongly engaged with progressing changes in infrastructure and/or networks. At present, the community has made limited changes. | The community is strongly engaged with progressing changes in infrastructure and/or networks. At present, the community has made moderate changes. | The community is strongly engaged with progressing changes in infrastructure and/or networks. At present, the community has made significant changes. |
| **Group/ community knowledge, skills, attitudes and behaviours** | The community has not yet made any progress toward improving their knowledge, skills, attitudes or behaviours. | The community has started to engage with the issues that affect them and has made limited progress toward improving their knowledge, skills, attitudes or behaviours. | The community has strong engagement with the issues that affect them. At present the community has made limited progress toward improving their knowledge, skills, attitudes or behaviours. | The community has strong engagement with the issues that affect them. At present the community has made moderate progress toward improving their knowledge, skills, attitudes or behaviours. | The community has strong engagement with the issues that affect them. At present the community has made significant progress toward improving their knowledge, skills, attitudes or behaviours. |
| **Social Cohesion** | The community has not yet made any progress towards demonstrating greater community cohesion. | The community has started to engage with the issues that affect them and has made limited progress towards greater community cohesion and social harmony. | The organisation has strong engagement with the issues that affect them.  At present the organisation has made limited progress towards greater community cohesion and social harmony. | The community has strong engagement with the issues that affect them.  At present the community has made moderate progress toward greater community cohesion and social harmony. | The community has strong engagement with the issues that affect them.  At present the community has made significant progress toward greater community cohesion and social harmony. |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |  |
| --- | --- | --- | --- |
| **Client Level Data** | **Session Level Data** | **Case Level Data** | **SCORE Level Data** |
| * Household composition | * Referral in (source and reason for seeking assistance) | * Referral out (type and purpose) | * Assessed by |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

A service type describes the **main** focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Community capacity building | Implementation of activities for Village Hub participants / leaders, targeted at building and strengthening community cohesion by providing local solutions to address issues specific to the local community, or by building a Village Hub’s leadership skills to foster greater community cohesion.  Consultation between Village Hub participants / leaders and community groups to identify common goals, interests and needs with a view to developing community strategies and plans that will assist communities to establish groups and/or informal associations.  Supporting Village Hub participants / leaders to strengthen relationships with key stakeholders who are integral to providing holistic and quality services. |
| Community sector planning | Planning activities to assist Village Hub participants / leaders to support their communities to achieve outcomes.  Examples include:   * representation/advocacy * brokering partnerships * networking * research and evaluation * policy advice |
| Core component completed | Assessing that the participant has completed core components of the project at the time of the session.  This would also be the point in time where one or more of the following would take place: an exit interview, a SCORE outcomes assessment and offer of participation in the final participant survey.  Village Hub participants will undertake surveying when they join the Village Hub and then periodically thereafter. |
| General workshop | Workshops involve attending practical sessions where Village Hub participants learn through discussion and action, the practical application of skills, knowledge and behaviours related to a specific topic.  Sessions allow for 2 way interaction between the participant(s) and presenter. |
| Governance | Training on organisational governance for Village Hub organisations, and community leaders (including assisting Village Hub to become incorporated organisations if required).  Support the development of Village Hub participant’s administrative and operational skills, including in applying for and managing government funding, such as outlining requirements, record keeping and financial accountability requirements for government grants. |
| Indigenous community engagement | Activities, events or festivals that support or promote Indigenous community issues and engagement. |
| Indigenous healing workshops | Activities which facilitate healing for Indigenous communities, families or individuals.  Examples could include: grief and loss workshops. |
| Indigenous social participation | Activities for Indigenous communities that are in line with Village Hub outcomes.  This could include:   * social, cultural, recreational, art or language activities * workshops * linking up members of a community around a shared issue * memorial days * reconciliation activities * erecting plaques or monuments |
| Information/advice/referral | Provision of standard advice, guidance or information on a specific topic, referrals to another service such as financial counselling, emergency relief, Centrelink etc. |
| Intake/assessment | Intake survey and assessment to gather information on participants' needs eligibility and matching to services and activities. |
| Mentoring/Peer support | Support group work offering Village Hub participants support through discussion and activities, generally involving a facilitator. |
| Social participation | Groups activities (including buddy activities) that provide a variety of social support for participants. |

**Table 1: Village Hubs Goals Translation Matrix**

Use this matrix to determine which DEX Goals Domain to select when assessing a Village Hub Goal.

When assessing a Goals domain, it is expected that you **also** assess the client against the relevant Circumstance domain.

| **DEX Goal Domain** | **Village Hub Goals terminology** | **Relevant Circumstance domain** |
| --- | --- | --- |
| **Changed skills** | I want to learn new skills. | Village Hub should determine the most suitable Circumstances domain based on the new skills. |
| **Changed knowledge and access to information** | I want to improve my knowledge and access to information. | Community participation and networks |
| **Empowerment, choice and control to make own decisions** | I want to increase a sense of empowerment and control over my own life. | Community participation and networks.  **OR**  Mental health wellbeing and self-care. |
| **Changed behaviours** | I want to stay socially connected (meet new people, interact with others, etc.). | Community participation and networks. |
| I want to improve my physical health. | Physical health. |
| I want to improve my mental health and well-being. | Mental health, wellbeing and self-care. |
| I want to learn new ways of doing things (changing behavioural patterns). | Village Hub should determine the most suitable Circumstances domain based on the new skills. |
| I want opportunities to share my passion/knowledge/skills with others. | Community participation and networks. |

## Outcome 3.1 – Disability, Mental Health and Carers

The Disability, Mental Health and Carers outcome provides support and community-based initiatives for people with disability, mental illness and carers, so they can develop their capabilities and actively participate in community and economic life. The program aims to provide a foundation for integrated, community led program delivery that understands and meets local needs and promotes innovation and collaboration.

The following pages provide practical guidance on data entry for Disability, Mental Health and Carers activities.

## Disability and Carer Support

The Disability and Carer Support program aims to improve access, support and services for people with disability and carers. This includes appropriate means of self-reliance, communication, education services and advocacy by providing stakeholder engagement and improving access to services and support.

The following program activities are included in Disability and Carer Support:

* Digital Work and Study Service
* Disability Royal Commission – Advocacy Support
* Disability Royal Commission – Counselling Services
* ICSS Digital Counselling
* ICSS Carer Gateway service providers
* Individual Placement and Support Program
* Individual Placement and Support Program: Adult Mental Health Pilot
* National Disability Advocacy Program (NDAP)
* NDIS Appeals
* Tristate Carer Vocational Outcomes Program
* Young Carer Bursary Program (YCBP)

### Digital Work and Study Service

**Description**

The Digital Work and Study Service (DWS) provides work and study support via a digital platform, integrated with clinical mental health services, to young people aged 15–25 years old.

**Who is the primary client?**

Young people aged 15 and 25 years with mental illness.

**What are the key client characteristics?**

* young people (15 to 25 years) in regional areas
* early school leavers, and
* persons identifying as Aboriginal or Torres Strait Islander

**Who might be considered ‘support persons’?**

For this program activity, support persons may include carers of clients, families of clients, case/support workers, parents/guardians of clients and community leaders, mentors or informal care givers.

Recording support persons is voluntary. Staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

DWS predominantly provides individual support where clients are known to the service. This service has a higher number of unidentified clients due to online delivery and client’s ability to access headspace digital services anonymously. Therefore, up to 20% of clients should be recorded as unidentified for this program activity.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. However, organisations can create a separate case for each client accessing services. To protect client privacy, family names should never be recorded in the Case ID field.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. For DWS, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting as well as an extended data set.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least 10 per cent** of identified clients.

A client SCORE assessment is recorded at least twice for each client – once towards beginning of the client’s service delivery and once again towards the end of service delivery. Organisations can choose to record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time.

A client SCORE assessment is to be recorded at the following times:

* near the beginning of the client’s service delivery
* as a minimum, every six months throughout service delivery (where support is provided for longer than six months), and
* towards the end of service delivery

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Education and skills training * Employment * Mental health, wellbeing and self-care | * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions | * 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 have sought help with |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Education and Skills** | The client’s current education/ training level has a significant negative impact on their life | The client’s current education/ training level has a negative impact on their life | The client’s current education /training level is okay and only sometimes has a negative impact on their life | The client’s current education/ training level is suitable and rarely (if ever) has a negative impact on their life | The client’s current education/ training level is very suitable and tends to have a positive impact on their life |
| **Employment** | The client’s employment situation is having a significant negative impact on their life | The client’s employment situation is having a negative impact on their life | The client’s employment situation is okay and only sometimes has a negative impact on their life | The client’s employment situation is suitable and rarely (if ever) has a negative impact of their life | The client’s employment situation is very suitable and tends to have a positive impact on their life |
| **Mental health, wellbeing and self-care** | The individual’s mental health is very poor and this has a very negative impact on their daily life | The individual’s mental health is poor and this has a negative impact on their daily life | The individual’s mental health is okay and it only sometimes impacts negatively on their daily life | The individual’s mental health is good and it only occasionally impacts negatively on their daily life | The individual’s mental health is very good and rarely (if ever) impacts negatively on their daily life |

**Completing a Goals SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Goals domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge and access to information** | The client has very limited knowledge of career pathways, employment opportunities and/or study options | The client has limited knowledge of career pathways, employment opportunities and/or study options | The client has reasonable knowledge of career pathways, employment opportunities and/or study options | The client has good knowledge of career pathways, employment opportunities and/or study options | The client has very good knowledge of career pathways employment opportunities and/or study options |
| **Changed skills** | The client has very limited study, job seeking and/or employability skills | The client has limited study, job seeking and/or employability skills | The client has reasonable study, job seeking and/or employability skills | The client has good study, job seeking and/or employability skills | The client has very good study, job seeking and/or employability skills |
| **Empowerment, choice and control to make own decisions** | The client has very limited confidence to make the decisions needed to improve their study, job seeking and/or employability situation | The client has limited confidence to make the decisions needed to improve their study, job seeking and/or employability situation | The client has reasonable confidence to make the decisions needed to improve their study, job seeking and/or employability situation | The client has good confidence to make the decisions needed to improve their study, job seeking and/or employability situation | The client has very good confidence to make the decisions needed to improve their study, job seeking and/or employability situation |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Goals domains.

| Satisfaction | 1 | 2 | 3 | 4 | 5 |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues** | Disagrees that the service listened to me and understood my issues | Tends to disagree that the service listened to me and understood my issues | Neither agrees nor disagrees that the service listened to me and understood my issues | Tends to agree that the service listened to me and understood my issues | Agrees that the service listened to me and understood my issues |
| **I am satisfied with the services I have received** | I am not satisfied with the services I have received | Tends to disagree that I was satisfied with the services I have received | Neither agrees nor disagrees that the services listened to me and understood my issues | Tends to agree that I was satisfied with the services I received | I am satisfied with the services I have received |
| **I am better able to deal with issues that I sought help with** | Disagrees that I am better able to deal with my issues | Tends to disagree that I am better able to deal with my issues | Neither agrees no disagrees that I am better able to deal with my issues | Tends to agree that I am better able to deal with my issues | Agrees that I am better able to deal with my issues |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Session level data** | **Case level data** |
| * Employment status * Highest level of education / qualification * Main source of income | * Service setting | * Referral in (source and reason for seeking assistance) * Exit reason |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake / Assessment | Initial meeting with a client where information is gathered on the client’s needs and they are matched to services available, and/or assessment of a client’s needs/eligibility for participation in a particular service.  This is usually the first session a client attends. |
| Advocacy / support | Advocating on a client’s behalf to an entity, such as an employer or government body, or where support to the client was given in a particular circumstance, for example, providing support at an interview.  Engagement with the client is required. |
| Counselling | Counselling and personal support of clients. |
| Education and skills | Assisting 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 circumstances, including (but not limited to):   * career planning * assistance in applying for training courses, including enrolment and assistance with accessing study assistance * organisational skills * exam stress reduction and study skills assistance, and * updates to vocational support plan (education focus). |
| Facilitate employment pathways | Employment activities focussed on employment, including (but not limited to):   * career and education development, assisting with navigating employment sites * assistance in looking and applying for work, such as job search and canvassing, CV / resume / application writing * assistance in preparing for interview, such as practice interviews * career planning, including updates to vocational support plan (employment focus), and * assistance with benefits. |
| Information / Advice / Referral | Provision of standard advice, guidance or information in relation to a specific topic (where it can be expected to lead to a measurable outcome) or where a referral was made to another service provided, within or external to, the organisation.  Examples include assisting with issues, working through options, or referrals to other services.  Remember, the interaction must lead to a measurable outcome in order for it to be recorded in the Data Exchange. |

### Disability Royal Commission - Advocacy Support

**Description**

Eligible National Disability Advocacy Program (NDAP) organisations will provide targeted advocacy support in their services areas for the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with a Disability. NDAP organisations will be funded in all states and territories.

**Who is the primary client?**

Primary clients for this program activity are people with disability and others (such as parents and carers) who are affected by the Disability Royal Commission.

**What are the key client characteristics?**

People affected by the Disability Royal Commission:

* identifying as having a condition, impairment or disability
* who are carers or family members of people with disability
* from a culturally and linguistically diverse background
* who identify as Aboriginal or Torres Strait Islander

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families, children, parents or guardians of clients, or a carer or care recipient (who are present but not directly receiving a service). A support person may also include a legal representative.

**Should unidentified clients be recorded?**

This program activity is primarily client based where ongoing relationships are formed,therefore it is expected that only **5 per cent** of your clients **or less** be recorded as unidentified clients in any reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each individual carer or care recipient accessing the service. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers, e.g.: 1286

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set. See Protocols (sections 6 and 11) for more information.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

The SCORE areas listed below have been identified as the most relevant for this program. In addition, organisations can choose to record outcomes against any other domains that are relevant for the client.

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * None of the Circumstances outcomes may be relevant for this program | * Changed knowledge & access to information * Changed impact of immediate crisis * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills, attitudes and behaviours |

**Collecting extended data**

For this program activity, it is required that you collect the following extended data items, where possible:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Homeless indicator * NDIS eligibility | * Referral in (source) * Reason for seeking assistance | * Referral out (type) * Referral purpose * Interpreter present * Service setting |

You may also record other details if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial meeting with clients to gather information. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic or where a referral was made to another service within or external to the organisation. |
| Education and skills training | Assisting 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. This includes accessing education and training including re-engaging with the education system. |
| Advocacy/Support | Representation in conjunction with the client to assist them to participate in the Disability Royal Commission. This includes assisting people engaging with the Disability Royal Commission to deal with other related issues e.g. finding housing, making complaints, or accessing services |
| Community capacity building | Some organisations have peer and social support programs, providing a sense of community for clients. |

### Disability Royal Commission – Counselling Services

**Description**

The Disability Royal Commission Counselling Services provide counselling support for people affected by the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with a Disability (Disability Royal Commission). Services provided will take into account not only that the recipient may have experienced profound trauma, but also that the services will need to be disability accessible and suitable for the range of people affected in a variety of residential settings (including closed institutions such as gaols and mental health facilities).

The target group to access and receive these services is highly diverse, and includes particularly vulnerable groups of people who may face complex barriers and other difficulties engaging with the Disability Royal Commission. This includes, but is not limited to, those with intellectual disability, acquired brain injury and mental illness. The services will also extend to families, carers, friends and support workers of people with disability.

Counselling Services are delivered in two ways:

* A counselling and referral **telephone line** that offers ad hoc and short counselling sessions and referral to in person and other services as required; and
* **Frontline** counselling services that will provide face-to-face medium term counselling support and referral to other services if more intensive and non-related therapies and support is required. Frontline services include services delivered in-person, for example an organisation’s outlet, a client’s residence, or via a video call.

**Who is the primary client?**

Primary clients for this program activity are people with disability and others (such as parents and carers) who are affected by the Disability Royal Commission.

**What are the key client characteristics?**

* People identifying as having a condition, impairment or disability, their families and carers;
* People affected by the Disability Royal Commission

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families, children, parents or guardians of clients, or a carer or care recipient (when present but not directly receiving a service). Case/support workers and informal care givers and friends may also be recorded as support persons.

**Should unidentified clients be recorded?**

* **Phone line services** are providing ad hoc counselling and referral to people affected by the Disability Royal Commission.

Due to the nature of this service (in the context of the Disability Royal Commission) it is expected that a number of clients will have experienced profound trauma. Some clients contacting the service may also have severe disabilities. Therefore full client details may not always be able to be provided. Clients should be provided every opportunity to provide their details, and it is suggested that around **50 per cent** of your clients **or less** be recorded as unidentified clients in any reporting period. However this is not a specific target or requirement, and organisations should use appropriate care and judgment when asking for client details.

* **Frontline counselling services** are primarily client based where ongoing relationships are formed,therefore it is expected that only **5 per cent** of your clients **or less** be recorded as unidentified clients in any reporting period. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/https:/dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes. If using the web-based portal, organisations should create cases in a way that work best for them and their staff, and will be useful over multiple reporting periods.

To protect client privacy, family names or other identifying information should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

As part of the partnership approach, organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE). The partnership approach also includes an extended data set.

* For **Phone line services**, organisations are not required to report outcomes information using SCORE but may choose to do so. They can also choose to record additional extended data.
* For **Frontline services**, all organisations are required to participate in the partnership approach. Organisations are expected to record SCORE for **at least** **50-60 per cent** of their clients. The partnership approach also includes the ability to record an extended data set.

See [Protocols](https://dex.dss.gov.au/data-exchange-protocols/https:/dex.dss.gov.au/data-exchange-protocols/) (sections 6 and 11) for more information.

**Recording outcomes data using SCORE**

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

For **Frontline Services** it is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

For this program activity, it is expected organisations delivering **Frontline Services** collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Mental health and wellbeing and self-care | * Changed knowledge & access to information * Engagement with relevant support services | * I am satisfied with the services I have received |

**Collecting extended data**

To indicate how you conducted the counselling session, organisations can record the service setting. You may record any service setting that is relevant to your program based on the service delivered. Descriptions of all service settings can be found in the [Protocols](https://dex.dss.gov.au/data-exchange-protocols) (Section 6.14).

For **phone line** services, you must record the service setting as:

* Telephone

For **Frontline** counselling services, record the service setting that best matches where the service was delivered:

* Organisation outlet/office
* Client’s residence
* Community venue
* Partner organisation
* Healthcare facility
* Justice facility
* Telephone
* Video
* Online services

You may record other extended client details, if it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Information Advice Referral | Provision of advice, guidance or information to people affected by the Disability Royal Commission, and/or enabling access and providing referral to another support service for further assistance.   * The **Phone line** provides warm transfers to the Royal Commission, and to advocacy and legal support services. It constitutes a gateway to the Frontline face-to-face counselling services, and provides information and referrals to services that are outside the scope of their own service delivery; * The **Frontline services** provide warm transfers to the Royal Commission, to Royal Commission specific and other required support services. It constitutes a gateway to more specialised or intensive support as required, and provides information and referrals to services that are outside the scope of their own service delivery. |
| Counselling | Provision of accessible, client-focused and trauma-informed counselling support to people affected by the Disability Royal Commission.   * The **Phone line** provides ad hoc counselling sessions and support over the telephone by suitably trained allied health professionals, such as counsellors and psychologists. * The **Frontline services** provide medium-term face-to-face counselling and support by suitably trained allied health professionals, such as counsellors and psychologists. Social and practical support can be provided in collaboration with appropriate external services. |

### ICSS Digital Counselling

**Description:**

The Digital Counselling Service is a free short-term counselling service for carers having trouble with anxiety, stress, low mood or depression. It is delivered through a combination of digital channels, including telephone and online. The service will help carers to manage their own health so they can remain effective in their caring role and avoid crisis events.

**Who is the primary client?**

Primary clients for this program activity are carers who meet the definition under the *Carer Recognition Act 2010*. Carers must be 18 years or older to access the service.

**What are the key client characteristics?**

The key client characteristic is any carer who requires support around stress or mental health issues. All carers are eligible, including:

* young carers (aged 18–25)
* carers who identify as lesbian, gay, bisexual, transgender and intersex
* carers from a cultural and linguistically diverse background
* carers who identify as Aboriginal and/or Torres Strait Islander.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

The Digital Counselling Service provides individual support, where clients are known to the service. Therefore, it is expected that **no clients (0 per cent)** should be recorded as unidentified clients for this program activity.

**How could cases be set up?**

Organisations should create a separate case for each individual carer accessing the service. To protect client privacy, family names or other identifying information should never be recorded in the ‘Case ID’ field.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. ICSS services should use the standard Data Exchange approach to record client outcomes – known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

A client Circumstances SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery. A client Satisfaction SCORE assessment may be recorded just once (after service delivery) or multiple times when appropriate (such as after further service delivery),

Instructions on how to record outcomes in the Data Exchange can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Mental health, wellbeing and self-care | * This program activity does not require Goals outcomes to be measured. | * I am better able to deal with issues that I sought help with * I am satisfied with the services I have received * The services listened to me and understood my issues | * None of the Community outcomes are relevant for this program activity |

**Collecting extended data**

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service type | Example |
| --- | --- |
| Information/Advice/Referral | This service type should be used when providing information, advice or referral to an existing client of Digital Counselling.  This service type can be used when:   * a carer has completed their Digital Counselling sessions and requires help considering further supports and/or services * referral is provided to other services that may benefit the carer * a carer finds the online or phone format difficult to follow and would like to discuss other services instead * a carer requests specific information about their case. |
| Intake and assessment | For this program, ‘Intake and assessment’ is a defined **counselling needs assessment process** of the carer performed by an accredited professional.  The carer would have previously registered their interest, either online or by phone. The assessor determines whether Digital Counselling would be clinically suited to their needs (and if the carer would benefit from other practical support and/or services). This assessment can take place in the following settings:   * in the **telephone** setting, the assessor is able to question the carer during a phone conversation * in the **digital** setting, the assessor studies the responses previously provided online by the carer. |
| Service review | This service type should be used for the phone call to the carer to tell them the outcome of their counselling needs assessment. The caller will need to accurately and professionally:   * explain Digital Counselling * explain suitability or unsuitability with empathy, possibly outlining reasons which may be sensitive or clinical in nature * explain other services, within ICSS and beyond (e.g. NDIS).   Where appropriate, the caller will also need to record new information that may be raised by the carer about their situation during this call. |
| Counselling | For this program, counselling must be conducted by an accredited professional.  Counselling should only be used when the ‘intake and assessment’ process indicated that the service is appropriate to the carer’s clinical needs.  There may be multiple sessions of this activity for each case. Sessions can be delivered by phone and/or through a digital channel – whichever is most convenient to the carer.  The service setting (‘**telephone**’ or ‘**digital**’) should be used to indicate how the counselling session was conducted.  Counselling should cease after the carer has received the ‘therapeutic dose’ as identified in the ‘counselling’ needs assessment. |

**Service settings and other context details**

For Digital Counselling, it is expected that organisations use the following service settings:

* To indicate whether the interaction with the client took place online or over the phone, one of the following service settings should be selected for each session with a carer:
* **Telephone** (for phone sessions)
* **Digital** (for online sessions).
* At the client record level, select **‘Yes’** in response to the question ’Is the client a carer?’

You may also record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

### ICSS Carer Gateway service providers

**Description:**

Carer Gateway service providers provide a range of services to meet the needs of carers throughout their service area. They are the primary source of information and assistance for carers, and a crucial source of information for the Department of Social Services through the provision of carer and service data. Carer Gateway service providers will:

* manage calls and enquiries received via the national 1800 number and call-backs requested on the Carer Gateway website
* support carers with intake, registration, needs assessment and support planning processes, and develop an Action Plan for the carer
* coordinate and broker access to ICSS services
* review carers’ wellbeing.

Carer Gateway service providers are funded to deliver the following face-to-face ICSS services:

* Carer-Directed Support
* Emergency Respite Care
* In-Person Counselling
* In-Person Peer Support
* Carer Coaching (in the face-to-face facilitated format).

**Who is the primary client?**

Primary clients for this program activity are individual carers who meet the definition of the *Carer Recognition Act 2010*.

When clients present to a service provider as a group of carers, all are eligible for services based on their individual needs. The ICSS service design prioritises carers who have primary care responsibility, but other relevant factors may also be taken into consideration (please refer to the Carer Gateway Service Provider Operating Manual for more information).

**What are the key client characteristics?**

All carers are eligible clients, including:

* young carers (aged under 25)
* carers who identify as lesbian, gay, bisexual, transgender and intersex
* carers from a cultural and linguistically diverse background
* carers identifying as Aboriginal and/or Torres Strait Islander.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. In this program activity the ‘support person’ may be the care recipient, another carer to the same care recipient (who may be receiving carer services themselves), another family member or a friend.

Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

Carer Gateway service providers provide individual support, where clients are known to the service. Therefore, it is expected that clientsare recorded as identified clients for all services, with the exception of information/advice/referral, which may be delivered to an unidentified client (i.e. a caller who is not registered, but is seeking information only). When a service provider delivers services for a group of carers (e.g. delivering a peer support forum for a group of carers), providers should record all clients present at the session.

**How could cases be set up?**

Service providers should create a **separate** case for each individual carer accessing the service. When an organisation is working with more than one individual, such as a carer couple or group, these clients can be grouped together in a case.

A case set up for the ‘In-Person Peer Support Service’ or ‘Counselling (group)’ can also have more than one client attached to it.

To protect client privacy, family names or other identifying information should never be recorded in the ‘Case ID’ field.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. Carer Gateway service providers should use the standard Data Exchange approach to record client outcomes – known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

A client Circumstances SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery. A client Satisfaction SCORE assessment may be recorded just once (after service delivery) or multiple times when appropriate (such as after further service delivery),

Service providers should use Carers StarTM to measure a carer’s wellbeing, reporting this into the Mental health, wellbeing and self-care Circumstances domain. For instructions on how to translate Carers StarTM into the Circumstances domain, refer to the [Data Exchange Translation Matrix](https://dex.dss.gov.au/score-translation-matrix-2/). Instructions on how to record outcomes in the Data Exchange can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Satisfaction** |
| --- | --- |
| * Mental health, wellbeing and self-care | * I am better able to deal with issues that I sought help with * I am satisfied with the services I have received * The services listened to me and understood my issues |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Is the client a carer? * Household composition * Main source of income | * Reason for seeking assistance * Referral source | * Referral type * Referral purpose * Service setting, where appropriate for the service type used (see below) |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service type | Example |
| --- | --- |
| Information/Advice/Referral | This service type should be used when providing information, advice or referral to an existing client, or may be used to provide information to a caller who is not current a client of the service provider (e.g. an unidentified client).  This service type can be used when:   * a registered carer is referred to an external service (for example, My Aged Care or NDIS) * a phone enquiry from an unidentified caller results in the provision of information/advice/referral without intake and assessment. |
| Material Goods | This service type should be used for instances of purchasing material goods as a One-off Practical Support for a Carer (under the Carer Directed Support Service).  If multiple goods are provided, a session should be recorded in the Data Exchange when each instance of support is provided.  ‘Total cost’ data field   * In the ‘Total cost’ field, enter the total value of the support that the client receives in the session, rounded to the nearest dollar. Do not enter any client contribution amounts. * Refer to the examples below.   Scenario 1 The provider delivers to the carer a laptop costing $500 (including GST) to assist with school work. The next day the provider delivers to the carer a printer costing $100 (including GST) to enable the carer to print their school work.  In this instance, the provider would create one session in the Data Exchange for the delivery of the laptop, and one session for the delivery of the printer. Each cost would be entered for the corresponding session and the carer is linked to both.   * Session 1: Cost reported as $500 and the carer is linked to the session. * Session 2: Cost reported as $100 and the carer is linked to the session.   Scenario 2: The provider buys the carer a laptop costing $500 (including GST) to assist with school work, and at the same time buys the carer a printer costing $100 (including GST).  In this instance, the provider would create one session in the Data Exchange for the delivery of the laptop and the printer together.  Session: Cost reported as $600, and the carer is linked to the session. |
| Carer support | This service type should be used for instances of providing **services** (such as vocational training or driving lessons) as a **One-off Practical Support** to a Carer (under the **Carer Directed Support Service)**.  If multiple services are provided, a session should be recorded in the Data Exchange for each instance of service.  **‘Total cost’ data field**   * In the ‘Total cost’ field, enter the **total value** of the support that the client receives in the session, rounded to the nearest dollar. Do **not** enter any client contribution amounts. * Refer to the example below.   **Scenario 1:** The provider agrees to pay for a cooking course for the carer to attend, which will help them in their caring role. The cost of the course is $100 (including GST).  The provider would create one session in the Data Exchange for the delivery of the course and the cost of services would be reported under that session.   * Session 1: Cost reported as $100 and the carer is linked to the session. |
| Respite | This service type should be used for instances of **planned respite (direct or indirect)** as a part of a **Carer Directed Package** (under the **Carer Directed Support Service)**.  If episodes of respite are provided, a session should be recorded in the Data Exchange for each instance of respite that is provided.  **‘Hours/Minutes’ and ‘Total cost’ data fields**   * Enter the **number of hours and minutes** that the Respite Care Service provides the service to the carer. Exclude travel times for the carer, care recipient or workers. In cases when multiple care recipients have co-located normal living arrangements and their replacement care overlaps, this should be entered as part of the same instance of Respite Care. * In the ‘Total cost’ field, enter the **total value** of the Respite Care (inclusive of transport costs)that the carer receives in the session, rounded to the nearest dollar. Do **not** enter any carer contribution amounts. * Refer to the examples below.   Service setting:  One of the following service settings should be selected for each session with a carer:   * **‘Client’s residence’**, when the care recipient(s) were provided replacement care in the carer’s home * Another appropriate service setting, when the care recipient(s) were cared for in a location other than their home.   **Scenario 1:** Under the Carer Directed Support Service,the provider delivers planned respite services valued at $800 (including GST) split over eight weeks, in order to allow the carer to undertake a coaching course. These planned respite services deliver in-home care for the care recipient, while the carer is away.  The provider creates sessions in the Data Exchange for each instance of service that is delivered. The cost for each session is reported against that session.   * Session 1: Planned respite costs are reported as $100, time is reported as 2:00 hours, and the carer is linked to the session. * Session 2: Planned respite costs are reported as $100, time is reported as 2:00 hours, and the carer is linked to the session. * Session 3: Planned respite costs are reported as $100, time is reported as 2:00 hours, and the carer is linked to the session.   For sessions 4–8 (and any further services provided thereafter) the provider continues to create sessions in the same way.  **Scenario 2:** The provider delivers planned respite services costing $900 (including GST) to a carer to relieve them of their caring duties for two days and nights (48 hours in one session) while renovations are conducted on the carer’s home. For these planned respite services, the carer’s care recipient is cared for in an external facility.  The provider would create one session in the Data Exchange for the delivery of the planned respite services and the cost of services would be reported under that session.   * Session 1: Costs are reported as $900, the time is reported as 48:00 hours, and the carer is linked to the session.   **Scenario 3:** The service provider delivers planned respite services costing $600 (including GST) to a carer to relieve them of their caring duties for two days (split into two 12-hour sessions) while renovations are conducted on the carer’s home. For these planned respite services, the carer’s care recipient is cared for in an external facility.  The service provider would create two sessions in the Data Exchange for the delivery of the planned respite services. The costs for each session of planned respite are reported against each session.   * Session 1: Costs are reported as $300, the time is reported as 12:00 hours, and the carer is linked to the session. * Session 2: Costs are reported as $300, the time is reported as 12:00 hours, and the carer is linked to the session. |
| Specialist Support | This service type should be used for instances of purchasing **services or material goods** (such as a laptop, cleaning services or transport) as a part of **a Carer Directed Package** (under the **Carer Directed Support Service)**.  If multiple services are provided, a session should be recorded in the Data Exchange for each instance of service when support is provided.  **‘Total cost’ data field**   * In the ‘Total cost’ field, enter the **total value** of the support that the client receives in the session, rounded to the nearest dollar. Do **not** enter any client contribution amounts. * Refer to the example below.   **Scenario 1:** The provider agrees to provide a cleaning service to the carer over three weeks. The package includes one cleaning service per week. The cost to provide the service package is $600 (including GST).  The provider would create three sessions in the Data Exchange for each instance of cleaning that is delivered to the carer and enter the cost for each session as $200.   * Session 1: Cleaning package costs are reported as $200, and the carer is linked to the session. * Session 2: Cleaning package costs are reported as $200, and the carer is linked to the session. * Session 3: Cleaning package costs are reported as $200, and the carer is linked to the session. |
| Counselling | This service type should be used for sessions of **In-Person Counselling**, performed with an accredited professional counsellor. Sessions are delivered in-person.  There may be multiple sessions of this activity for each case.  For instances of Group Counselling, multiple carers will be assigned to a single case, which reflects the group format of the service.  Non-carer participants in Group Counselling sessions may be recorded as ‘support persons’. |
| Education and skills training | This service type should be used for the **Coaching Service** delivered in the facilitated format.   * Note the self-guided format is an online version (not reported in the Data Exchange).   There may be multiple sessions of this activity for each case.  **Service setting:**  One of the following service settings should be selected for each session with a carer:   * In-person * Telephone |
| Intake and assessment | This service type should be used when the service provider takes the carer through the **Carer Support Planning Process,** to access Carer Gateway services. This includes:   * Intake * Registration * Needs assessment, which includes completing the Carers StarTM for the first time * Service planning, includes completing an Action Plan for the first time.   If, due to urgency, a carer is provided with Emergency Respite Care immediately then no ‘Intake and assessment’ session should be created in the Data Exchange until a carer has the opportunity to complete their Carers StarTM.  This service type should be used when a carer transfers from any other service provider without an Action Plan.  Service setting:  One of the following service settings should be selected for each intake and assessment session with a carer:   * In-person * Telephone. |
| Mentoring/Peer support | This service type should be used when a carer joins an **In-Person Peer Support** group session.This service type should only be used for instances of peer support with a record of the carer being present.  Note that sessions can only be recorded when they are facilitated or organised by the service provider.  For this service type, multiple carers will be assigned to a single case – which reflects the group format of this service. |
| Emergency Respite | This service type should be used when the **Emergency Respite Care service** cares for the care recipient(s) in an emergency situation.  **‘Hours/Minutes’ and ‘Total cost’ data fields**   * Enter the **number of hours and minutes** that the Emergency Respite Care Service provides the service to the carer. Exclude travel times for the carer, care recipient or workers. In cases when multiple care recipients have co‑located normal living arrangements and their replacement care overlaps, this should be entered as part of the same instance of Emergency Respite Care. * In the ‘Total cost’ field, enter the **total value** of the Emergency Respite Care (inclusive of transport costs)that the carer receives in the session, rounded to the nearest dollar. Do **not** enter any carer contribution amounts. * Refer to the examples below.   Service setting:  One of the following service settings should be selected for each session with a carer:   * **‘Client’s residence’**, when the care recipient(s) were provided replacement care in the carer’s home * Another appropriate service setting, when the care recipient(s) were cared for in a location other than their home.   **Scenario 1:** The provider delivers in-home **Emergency Respite Care** to the care recipient for 48 hours while the carer is unexpectedly admitted to hospital. The total cost to provide the services is $3200 (including GST). The carer offered to contribute $400 and made this payment to the provider. The care is delivered on the last day of the current DEX reporting period, and first day of the next DEX reporting period.  The provider would create two sessions in the Data Exchange. The cost would be entered as $3200, and the duration would be entered as 24:00 hours for each session.   * Session 1: Cost reported as $1600, the time is reported as 24:00 hours, and the carer is linked to the session. This is reported in the current DEX reporting period. * Session 2: Cost reported as $1600, the time is reported as 24:00 hours, and the carer is linked to the session. This is reported in the following DEX reporting period.   **Scenario 2:** The provider delivers two instances of in-home **Emergency Respite Care** to the carer’s care recipient while the carer in unexpectedly admitted to hospital on two separate occasions. Both instances are for 24 hours. The cost to provide the services is $3200 (including GST). The carer offered to contribute $400 and made this payment to the provider.  The provider would create two sessions in the Data Exchange. The cost per session would be entered as $1600, and the duration would be entered as 24:00 hours per session.   * Session 1: Cost reported as $1600, the time is reported as 24:00 hours, and the carer is linked to the session. * Session 2: Cost reported as $1600, the time is reported as 24:00 hours, and the carer is linked to the session.   **Scenario 3:** The provider delivers **Emergency Respite Care** to the carer’s care recipient at an external facility for 12 hours while the carer is unexpectedly admitted to hospital. The cost to provide the service is $400 (including GST). The care recipient’s transportation took an additional one hour each way and cost $100 (including GST).  The provider would create one session in the Data Exchange. The cost would be entered as $500, as it includes both the service and travel costs, excluding any carer contribution. The duration would be entered as 12:00 hours (not including the travel time).   * Session: Cost is reported as $500, the time is reported as 12:00 hours and the carer is linked to the session. |
| Service review | This service type should be used when reviewing a carer’s situation, including:   * reviewing and/or re-completing the Carers StarTM * reviewing and/or re-completing an Action Plan.   This service type should be used in the following situations:   * when some ICSS services have already been delivered to the carer * when there is an unexpected change in a carer’s circumstances * for the completion of second and subsequent Action Plans * when a carer transfers from another service provider with a Carers StarTM or Action Plan and needs this to be reviewed.   Service setting:  One of the following service settings should be selected for each session with a carer:   * In-person * Telephone |

### Individual Placement and Support program

**Description:**

Through early intervention, the Individual Placement and Support (IPS) program aims to assist young people aged up to 25 years with mental illness to achieve and maintain sustainable participation in competitive employment and vocational education.

In order to enhance the IPS program, funding was received as part of the 2021-2022 Mental Health and Suicide Prevention budget package to conduct an IPS Vocational Peer Support (VPS) pilot.

The objective of the VPS pilot is to assess whether IPS participants achieve better employment and educational outcomes with peer support in place.

The VPS pilot will fund a full-time equivalent Vocational Peer Support Worker per site in six IPS sites. Vocational Peer Support Workers (PSW) work collaboratively with headspace staff, young people, their families, other health workers, and members of the local community.

**Who is the primary client?**

Young people aged 12–25 with mental illness.

**What are the key client characteristics?**

Young people with employment and education needs.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the [Data Exchange website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients, carers of clients/care recipients, Case/Support workers, Parents/Guardians of clients and community leaders, mentors or informal care givers.

**Should unidentified clients be recorded?**

The Individual Placement and Support Program provides individual, face-to-face support, where clients are known to the service. Therefore, it is expected that **no clients (0 per cent)** should be recorded as unidentified clients for this program activity.

**How should cases be set up?**

A case should be created for each individual accessing the service. To protect privacy, personal information should never be recorded in the Case ID field, such as family names or other identifying information.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach by submitting additional client data. The partnership approach also includes the ability to record an extended data set. It is expected that, where practical, you collect outcomes data for all clients where possible **(95-100 per cent).** However, it is noted that you should do so within reason and in alignment with ethical requirements.

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE). A client SCORE assessment is to be recorded at the following times:

* Near the beginning of the client’s service delivery
* As a minimum, every six months throughout service delivery (where support is provided for longer than six months)
* Towards the end of service delivery

**What areas of SCORE are most relevant?**

For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Employment * Education and skills training * Mental health, wellbeing and self-care | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | * 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 |

**Completing a Circumstances SCORE assessment**

For this program activity, all organisation must use the following SCORE scale descriptions when assessing clients in the following Circumstances domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Education and Skills** | The individual has a lot of difficulty finding or remaining in education or training courses. | The individual has some difficulty finding or remaining in education or training courses. | The individual occasionally finds it difficult to find or remain in education or training courses. | The individual has commenced / recommenced education or training that is suitable in most ways. | The individual has completed (or completed at least one semester) in education or training that is suitable in most ways |
| **Employment** | The individual has no work | The individual has some casual work | The individual has some part-time work | The individual has full-time employment | The individual has sustained ongoing employment |
| **Mental health, wellbeing and self-care** | The individual’s mental health is very poor and this has a very negative impact on their daily life. | The individual’s mental health is poor and this has a negative impact on their daily life. | The individual’s mental health is okay and it only sometimes impacts negatively on their daily life. | The individual’s mental health is good and it only occasionally impacts negatively on their daily life. | The individual’s mental health is very good and rarely (if ever) impacts negatively on their daily life. |

**Completing a Goals SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Goals domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed Knowledge** | The individual has had no progress in increasing my knowledge/skills in employment and/or education options. | The individual has had limited progress achieving knowledge/skills in employment and/or education options. | The individual has had some progress in achieving knowledge/skills in employment and/or education options. | The individual has had good progress in achieving knowledge/skills in employment and/or education options. | The individual has achieved my goals knowledge/skills in employment and/or education options. |
| **Changed Skills (education)** | The individual has had no progress in reaching education or training goals. | The individual has had limited progress in reaching my education or training goals. | The individual has had some progress in reaching my education or training goals. | The individual has had good progress in reaching my education or training goals. | The individual has had very good progress in reaching my education or training goals. |
| **Changed behaviours (work)** | The individual has no work. | The individual is about to or have commenced work (< 4 weeks). | The individual has been employed for a minimum of 4 weeks. | The individual has been employed for a minimum of 13 weeks. | The individual has been employed for a minimum of 26 weeks. |
| **Empowerment, choice and control to make own decisions** | The individual has no confidence to make the decisions needed to improve their job-seeking, employability, or study situation. | The individual has limited confidence to make the decisions needed to improve their job-seeking, employability, or study situation. | The individual has some confidence to make the decisions needed to improve their job-seeking, employability, or study situation. | The individual has good confidence to make the decisions needed to improve their job-seeking, employability, or study situation | The individual is confident and feels empowered to make the decisions needed to improve their job-seeking, employability, or study situation. |
| **Engagement with relevant support services** | The individual has had no progress in engaging and working with services to help me improve my circumstances. | The individual has had limited progress in engaging and working with services to help me improve my circumstances. | The individual has had some progress in engaging and working with services to help me improve my circumstances. | The individual seldom has difficulty engaging and working with services to help me improve my circumstances. | The individual finds it is easy to work with services to help improve their circumstances (they rarely have difficulties) |

**Completing a Satisfaction SCORE assessment**

If an organisation already uses an existing outcomes measurement tool that meets their needs, they can continue to use it and translate the outcome data to SCORE, otherwise organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

**Collecting extended data**

For this program activity, it is expected organisations collect and record the additional data fields outlined in the below table.

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case level data** | **Session level data** |
| * Employment status * Highest level of education / qualification * Main source of income | * Referral in (source and reason for seeking assistance) * Exit Reason | * Referral out (type and purpose) * Service setting |

For Referrals source, use ‘Community services agency’ for referrals from headspace.

For Reason for seeking assistance, use:

* ‘Employment’ (for clients who are primarily seeking assistance for **employment** goals); and/or
* ‘Education and skills training’ (for clients who are primarily seeking assistance for **education or study** goals.

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

In order for a Session and Service Type to be recorded in the Data Exchange, interaction with the client must take place and the interaction must lead to a measurable outcome.

More information on Service Types can be found in the *Data Exchange Protocols.*

| Service Type | Example |
| --- | --- |
| Intake / Assessment | Initial meeting with a client where information is gathered on the client’s needs and they are matched to services available, and/or assessment of a client’s needs/eligibility for participation in a particular service. This is usually (but not limited to) the first session a client attends. |
| Vocational support plan – Education | Assisting a client by developing a vocational support plan that has an education focus and engaging with the client to explain the plan (two-way engagement with the client is required).  NOTE: This Service Type should not be used for updates to the plan. |
| Vocational support plan – Employment | Assisting a client in the development of a vocational support plan that has an employment focus and engaging with the client to explain the plan (two-way engagement with the client is required).  NOTE: This Service Type should not be used for updates to the plan. |
| Education and skills | Assisting 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 circumstances, including (but not limited to):   * career planning * assistance in applying for training courses, including enrolment and assistance with accessing study assistance * organisational skills * exam stress reduction and study skills assistance * updates to vocational support plan (education focus). |
| Exit interview | To be used when a young person is Exiting IPS.  This would also be the point in time where one or more of the following would take place:   * a SCORE outcomes assessment * final participant survey.   The circumstances surrounding the ending of a client’s relationship with a case can be captured when filling in Exit Reasons:   * **Client needs have been met:** Used when a young person is exiting IPS and who has reached one/some/all of the milestones below and: * IPS staff are still in touch with the young person at the time of Exit and as far as the IPS staff member is aware, the young person has not lost the placement/ended it early, **or** * IPS staff have been unable to make contact with the young person at the time of Exit, but as far as the IPS staff member is aware, the young person has not lost the placement/ended it early.   Milestones:   * For employment: gaining an employment placement, 4, 13 and 26 weeks in the employment * For education: gaining an education placement, one semester of education or short course completed. * **Client no longer requires assistance:** Used when a young person is exiting IPS and has either: * Not obtained an employment or educational placement during their episode, **or** * Lost/ended a work or educational placement that they achieved during the episode.   An exit interview, SCORE assessment and offer of participation in client survey may also occur.  For those Exit Reason not shown above, organisations can record Exit Reasons as outlined in the *Data Exchange Protocols*. |
| Post placement support - Education | To be used when a client achieves an education placement and it has been identified that additional support or mentoring is suitable following the placement, including at the key milestone point (i.e. when the young person has completed one semester of study or a short course has been completed, or when an education placement ends early). |
| Post placement support - Employment | To be used when a young person achieves an employment placement and it has been identified that additional support or mentoring is suitable following the placement, including at the key milestone points (i.e. when a young person has completed 4, 13, 26 week milestones, or when an employment placement ends early). |
| Facilitate employment pathways | Employment activities focussed on employment, including (but not limited to):   * career and education development, assisting with navigating employment sites. * assistance in looking and applying for work, such as job search and canvassing, CV / resume / application writing * assistance in preparing for interview, such as practice interviews) * career planning, including updates to vocational support plan (employment focus).   Also includes providing assistance with benefits. |
| Information / Advice / Referral | Provision of standard advice, guidance or information in relation to a specific topic (where it can be expected to lead to a measurable outcome) or where a referral was made to another service provided, within or external to, the organisation.  Remember, the interaction must lead to a measurable outcome in order for it to be recorded in the Data Exchange. |
| Advocacy / support | Advocating on a client’s behalf to an entity, such as an employer or government body, or where support to the client was given in a particular circumstance, for example, providing support at an interview.  Due to the nature of advocacy, this Service Type does not require the client to be physically present, however it only applies if a substantive effort was put into providing the service and the client is directly benefiting from the service. |
| Mentoring/Peer support | Client mentoring, support and role modelling |
| IPS Peer Work Pilot | **For Vocational Peer Support Pilot sites only:**  To be used by a Peer Support Worker only to capture the sessions they have delivered at Vocational Peer Support Pilot sites, including introductions, and informal catch-ups. |

### Individual Placement and Support Program: Adult Mental Health Pilot

**Description**

The objective of the Individual Placement and Support Program (IPS) Adult Mental Health pilot is to improve the employment and vocational education outcomes of adults with mental illness.

**Who is the primary client?**

Adults with mental illness.

**What are the key client characteristics?**

Adults with mental illness who are seeking to enter, or remain in employment or education.

**Who might be considered ‘support persons’?**

For this program activity, support persons may include carers of clients, families of clients, case/support workers, and community leaders, mentors or informal care givers.

Recording support persons is voluntary. Staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

The IPS Adult Mental Health pilot provides individual, face-to-face services, where all clients are known to the service. Therefore, it is expected that **no clients (0 per cent)** should be recorded as unidentified clients for this program activity.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. However, organisations can create a separate case for each client accessing services. To protect client privacy, family names should never be recorded in the Case ID field.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. Organisations collect client outcomes through Standard Client/Community Outcomes Reporting (SCORE). The partnership approach also includes an extended data set.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least 10 per cent** of identified clients.

A client SCORE assessment is recorded at least twice for each client – once near beginning of the client’s service delivery and once again near the end of service delivery. Organisations can choose to record multiple SCORE assessments for a client at regular intervals to track how the client’s outcomes change over time.

For this program activity a client SCORE assessment is to be recorded at the following times:

* near the beginning of the client’s service delivery
* every month throughout service delivery, and
* towards the end of service delivery

**What areas of SCORE are most relevant?**

For this program activity, all organisations are expected to collect and record a SCORE assessment for the mental health, wellbeing and self-care domain. Organisations are also expected to collect and record SCORE assessments for either the Employment or Education domain, or both where appropriate.

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Employment * Education and skills training * Mental health, wellbeing and self-care | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | * 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 |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Education and Skills** | The client has a lot of difficulty finding or remaining in education or training courses. | The client has some difficulty finding or remaining in education or training courses. | The client occasionally finds it difficult to find or remain in education or training courses. | The client has commenced / recommenced education or training that is suitable in most ways. | The client has completed (or completed at least one semester) in education or training that is suitable in most ways |
| **Employment** | The client currently has no work. | The client currently has casual work. | The client has part-time work. | The client has full time employment. | The client has sustained their ongoing employment goal. |
| **Mental health, wellbeing and self-care** | The client’s mental health is very poor and this has a very negative impact on their daily life. | The client’s mental health is poor and this has a negative impact on their daily life. | The client’s mental health is okay and it only sometimes impacts negatively on their daily life. | The client’s mental health is good and it only occasionally impacts negatively on their daily life. | The client’s mental health is very good and rarely (if ever) impacts negatively on their daily life. |

**Completing a Goals SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge** | The client has had no progress in increasing their knowledge/skills in employment and/or education options. | The client has had limited progress increasing their knowledge/skills in employment and/or education options. | The client has had some progress in increasing their knowledge/skills in employment and/or education options. | The client has had good progress in increasing their knowledge/skills in employment and/or education options. | The client has achieved their goals for increased knowledge/skills in employment and/or education options. |
| **Changed Skills (education)** | The client has had no progress in reaching their education or training goals. | The client has had limited progress in reaching their education or training goals. | The client has had some progress in reaching their education or training goals. | The client has had good progress in reaching their education or training goals. | The client has had very good progress in reaching their education or training goals. |
| **Changed behaviours (work)** | The client has no work. | The client is about to or have commenced work (< 4 weeks). | The client has been employed for a minimum of 4 weeks. | The client has been employed for a minimum of 13 weeks. | The client has been employed for a minimum of 26 weeks. |
| **Empowerment, choice and control to make own decisions** | The client has no confidence to make the decisions needed to improve their job-seeking, employability, or study situation. | The client has limited confidence to make the decisions needed to improve their job-seeking, employability, or study situation. | The client has some confidence to make the decisions needed to improve their job-seeking, employability, or study situation. | The client has good confidence to make the decisions needed to improve their job-seeking, employability, or study situation | The client is confident and feels empowered to make the decisions needed to improve their job-seeking, employability, or study situation. |
| **Engagement with relevant support services** | The client has had no progress in engaging and working with services to help improve their circumstances. | The client has had limited progress in engaging and working with services to help improve their circumstances. | The client has had some progress in engaging and working with services to help improve their circumstances. | The client has had good progress in engaging and working with services to help improve their circumstances. | The client finds it is easy to work with services to help improve their circumstances. They rarely have difficulties. |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Session level data** | **Case level data** |
| * Employment status * Highest level of education / qualification * Main source of income | * Referral out (type and purpose) * Service setting | * Referral in (source and reason for seeking assistance) * Exit reason |

For Referrals source, use ‘Community services agency’ for referrals from Head to Health centres.

For Reason for seeking assistance, use:

* ‘Employment’ (for clients who are primarily seeking assistance for employment goals); and/or
* ‘Education and skills training’ (for clients who are primarily seeking assistance for **education or study** goals).

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake / Assessment | Initial meeting with a client where information is gathered on the client’s needs and they are matched to services available, and/or assessment of a client’s needs/eligibility for participation in a particular service. This is usually (but not limited to) the first session a client attends. |
| Information / Advice / Referral | Provision of standard advice, guidance or information in relation to a specific topic (where it can be expected to lead to a measurable outcome) or where a referral was made to another service provided, within or external to, the organisation.  Examples include assisting with issues, working through options, or referrals to other services.  Remember, the interaction must lead to a measurable outcome in order for it to be recorded in the Data Exchange. |
| Advocacy / support | Advocating on a client’s behalf to an entity, such as an employer or government body, or where support to the client was given in a particular circumstance, for example, providing support at an interview. Engagement with the client is required. |
| Education and skills | Assisting 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 circumstances, including (but not limited to):   * career planning * assistance in applying for training courses, including enrolment and assistance with accessing study assistance * organisational skills * exam stress reduction and study skills assistance   updates to vocational support plan (education focus) |
| Exit interview | To be used when a client is exiting the program.  This would also be the point in time where one or more of the following would take place:   * a SCORE outcomes assessment * final client survey   The circumstances surrounding the ending of a client’s relationship with a case can be captured when filling in Exit Reasons:   * **Client needs have been met:** Used when a client is exiting IPS and who has reached one/some/all of the milestones below and: * IPS staff are still in touch with the client at the time of Exit and as far as the IPS staff member is aware, the client has not lost the placement/ended it early, **or** * IPS staff have been unable to make contact with the client at the time of Exit, but as far as the IPS staff member is aware, the client has not lost the placement/ended it early.   Milestones:   * For employment: gaining an employment placement, 4, 13 and 26 weeks in the employment * For education: gaining an education placement, one semester of education or short course completed. * **Client no longer requires assistance:** Used when a client is exiting IPS and has either: * Not obtained an employment or educational placement during their episode, **or** * Lost/ended a work or educational placement that they achieved during the episode.   An exit interview, SCORE assessment and offer of participation in client survey may also occur.  For those Exit Reason not shown above, organisations can record Exit Reasons as outlined in the *Data Exchange Protocols*. |
| Facilitate employment pathways | Employment activities focussed on employment, including (but not limited to):   * career and education development, assisting with navigating employment sites * assistance in looking and applying for work, such as job search and canvassing, CV / resume / application writing * assistance in preparing for interview, such as practice interviews * career planning, including updates to vocational support plan (employment focus) * assistance with benefits |
| Post placement support - Education | To be used when a client achieves an education placement and when support is provided following the placement, including at the key milestone point (i.e. when the client has completed one semester of study or a short course has been completed, or when an education placement ends early). |
| Post placement support - Employment | To be used when a client achieves an employment placement, and when support is provided following the placement, including at milestone points (4, 13, 26 weeks or when a placement ends). |
| Vocational support plan – Education | Assisting a client by developing a vocational support plan that has an education focus and engaging with the client to explain the plan (two-way engagement with the client is required).  **NOTE**: This service type should not be used for updates to the plan. To update the plan use service type **Education and Skills.** |
| Vocational support plan – Employment | Assisting a client by developing a vocational support plan that has an employment focus and engaging with the client to explain the plan (two-way engagement with the client is required).  **NOTE**: This service type should not be used for updates to the plan. To update the plan use service type **Facilitate employment pathways**. |

### National Disability Advocacy Program (NDAP)

**Description**

This program provides people with disability with access to effective disability advocacy that promotes, protects and ensures their full and equal enjoyment of all human rights enabling community participation.

[Operational Guidelines](https://www.dss.gov.au/disability-and-carers-programs-services-for-people-with-disability/national-disability-advocacy-program-ndap-operational-guidelines) have been developed, as an adjunct to the DSS’ Program Specific Guidance, for the NDAP and these guidelines provide more detailed information about the program.

**Who is the primary client?**

Primary clients for this program activity are people with a disability and others (such as their families, and carers) who are beneficiaries of advocacy support services.

**What are the key client characteristics?**

People identifying as having a condition, impairment or disability.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families, children, parents or guardians of clients, or a carer or care recipient (who are present but not directly receiving a service). A support person may also include a community leader, mentor, legal representative or a case or support worker.

**Should unidentified clients be recorded?**

The NDAP is primarily client based where ongoing relationships are formed,therefore it is expected that **only 5 per cen**t of your clients **or less** be recorded as unidentified clients in any reporting period.

For this program activity, applicable examples of where use of unidentified clients may be appropriate is in the instance of anonymous callers to a counselling crisis line.Group clients should not be recorded under all other circumstances.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each individual carer accessing the service. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers, e.g.: 1286

The care recipient may be included in cases alongside their carer; however under this program activity should only be recorded as ‘support people’ in sessions.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you could also collect SCORE assessments periodically throughout service delivery.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the Goals domain ‘**Empowerment, choice and control to make own decisions’** and at least **one** Circumstance domain that relates to the issue(s) for which the client sought advocacy support.

| **Goals** | **Circumstances** |
| --- | --- |
| * Empowerment, choice and control to make own decisions | * Physical health * Mental health, wellbeing & self-care * Personal and family safety * Age-appropriate development * Community participation & networks * Family functioning * Financial resilience * Employment * Material wellbeing and basic necessities * Housing |

When recording a SCORE assessment for a client, you must also record ‘**Assessed by**’ at the SCORE level to capture who has completed the assessment.

You can also choose to record outcomes for the client against the following additional domains and extended client demographic fields if you think it is appropriate for your program and for your clients to do so.

| **Goals** | **Satisfaction** |
| --- | --- |
| * Changed knowledge and access to information * Changed behaviours * Changed skills * Engagement with relevant support services * Changed impact of immediate crisis | * 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 |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Intake/ assessment is used where the session’s primary focus was the initial process of meeting or talking 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 program and 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 should be used where the session’s primary focus was the provision of standard advice/guidance or information in relation to a specific topic. It is also applicable where the service offered was primarily a referral to another service provided within or external to the organisation. |
| 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. This includes assisting clients to access education and training including re-engaging with the education system. For Disability Advocacy agencies this includes delivering group training on topics such as human rights, making complaints etc. |
| Advocacy/ support | Advocacy provided by a funded organisation should be recorded in the Data Exchange. Advocacy provided by a non-funded organisation should not be recorded. A session should be recorded when the advocacy occurred on behalf of the client (person with disability) regardless if the client was in attendance or not (e.g. an advocate making phone calls or enquiries on behalf of a client). A volunteer advocate is not a client. |
| 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. |
| Advocacy – Internal review | All advocacy matters in relation to a client filing a request for a review of a reviewable decision with the NDIA. This may be referred to as a “review of a reviewable decision”. Any person directly affected by a decision of the NDIA can request for a review of a decision (or an internal review). An internal review must be requested within three months of the initial NDIA decision and an internal review must be completed before making an application for an external review at the AAT. |
| Systemic advocacy\* – Local | Acting upon systemic issues identified at a local level. This can include submission writing, meetings with decision makers or attending inquires or commissions. |
| Systemic advocacy\* – State | Acting upon systemic issues identified at a state level. This can include submission writing, meetings with decision makers or attending inquires or commissions. |
| Systemic advocacy\* – National | Acting upon systemic issues identified at a national level. This can include submission writing, meetings with decision makers or attending inquires or commissions |

**\* Specific guidance on ‘systemic advocacy’ service types**

* **Clients:** Given that systemic advocacy does not relate to an individual client, the ‘unidentified/group client’ option should be used for systemic advocacy projects.
* **Cases:** Organisations can decide if they would like to use one case for all systemic sessions, or multiple cases for various systemic projects;
* **Session attendances:** Number of clients recorded should only reflect any individuals that were directly assisted through this work. For systemic advocacy projects it is not possible to know the number of clients benefitting directly from this service. To avoid affecting data quality in the Data Exchange, a ‘1’ should be entered in the ‘unidentified/group client’ field for each session.

**Activity Specific Requirements of the NDAP program**

Once a service type is selected, a user must select a topic from the following options (see below) to demonstrate the intent of the service type delivered.

| Topic | Example |
| --- | --- |
| Abuse/Neglect/Violence | Issues related to abuse, neglect or violence |
| Access to non NDIS services | Issues related to access to non-National Disability Insurance Scheme (NDIS) services |
| Child protection | Issues related to child protection |
| Community inclusion – Social/Family | Issues related to community inclusion in social or family contexts. This can include issues about recreation/leisure |
| Disability services | Issues related to disability services complaints |
| Discrimination/rights | Issues related to discrimination/rights |
| Education | Issues related to education |
| Employment | Issues related to employment |
| Equipment/aids | Issues related to equipment/aids |
| Finances | Issues related to finances excluding government payments |
| Government payments | Issues related to Government payments such as Centrelink payments |
| Health/Mental health | Issues related to health or mental health |
| Housing/Homelessness | Issues related to housing and/or homelessness |
| Legal/Access to justice | Issues related to accessing justice through legal and justice systems, including engagement with lawyers, police and courts |
| NDIS – Internal review | Issues related to assisting someone to request and manage a review of decision with National Disability Insurance Agency (NDIA) |
| NDIS – Access/Planning | Issues related to making a request to access the NDIS and assistance to develop a plan |
| NDIS – Support implementing plan/Accessing services | Providing support to implement an NDIS plan or access disability services that are included in a NDIS plan |
| Other | Issues related to any other issues |
| Physical access | Issues related to physical access to buildings, transport, community venues etc. |
| Transport | Issues related to transport |
| Vulnerable/Isolated | Issues related to vulnerable and/or isolated people with disability |

### National Disability Advocacy Program (NDAP) – Decision Support Pilot

**Description**

The NDAP Decision Support Pilot (the Pilot) provides decision-making support for potential and current National Disability Insurance Scheme (NDIS) participants with limited decision making capacity and no other appropriate decision making supports. The Pilot supports clients with key interactions with the NDIS, including providing decision support around NDIS access and planning.

**Who is the primary client?**

Potential and current NDIS participants, over the age of 18, with limited decision-making capacity and no other appropriate decision-making support.

**What are the key client characteristics?**

People identifying as having a condition, impairment or disability.

**Who might be considered ‘support persons’?**

Support persons are not applicable for this program activity.

**Should unidentified clients be recorded?**

The Pilot is primarily client based where ongoing relationships are formed,therefore it is expected that **no clients (0 per cent)** should be recorded as unidentified clients.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each individual carer accessing the service. To protect client privacy, client names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers, e.g.: 1286.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

A client SCORE assessment is recorded a **minimum of three times** – at the start of a client’s interaction with the Pilot, mid-way in their interaction and then at the end of their interaction with the Pilot.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 80 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 80 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least 50 per cent** of identified client

**What areas of SCORE are most relevant?**

For this program activity, it is expected the organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Community participation & networks * Housing * Material wellbeing and basic necessities * Mental health, wellbeing & self-care * Personal and family safety * Physical health | * Changed knowledge and access to information * Empowerment, choice and control to make own decisions * Engagement with relevant support services | * 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. |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment

**Completing a Circumstances SCORE Assessment**

For this program activity, all organisation must use the following SCORE scale descriptions when assessing clients in the following Circumstances domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community participation & networks** | I feel very isolated. I have no contact with family, friends or my community. I have no support. | I feel fairly isolated. I have little contact with family, friends or my community. I have little support. | I feel somewhat connected. I have some contact with family friends, or my community. I have some support. | I feel fairly connected. I have a reasonable amount of contact with family, friends or my community. I have pretty good support. | I feel very connected. I have a lot of contact with family, friends or my community. I have great support. |
| **Housing** | I have no housing, or am living in housing that is overcrowded or has structural problems. | I am living in housing that is unsuitable or short term. | I am living in housing that is adequate. | I am living in housing that is suitable in some ways. | I am living in housing that is very suitable in all ways. |
| **Material wellbeing and basic necessities** | I have no access to the basic material resources I need things like food, clothes, transport or keeping warm. | I have access to some of the basic material resources I need, but sometimes I need to decide which resources to go without. | I think I am ‘getting along’ and generally I have access to most of the basic material resources I need. | I think I am ‘reasonably comfortable’ and have access to the material resources I need. I don’t go without resources such as food, clothes, transport or keeping warm. | I think I am ‘very comfortable’ and that I have access to all the material resources I need. |
| **Mental health, wellbeing and self-care** | My mental health is very poor. | My mental health is quite poor. | My mental health is okay. | My mental health is quite. | My mental health is very good. |
| **Personal and family safety** | I do not feel that I am safe. | I do not feel that I am completely safe. | I feel progress towards improving my personal safety, but do not always feel that I am safe. | I feel I am safe in the short term. | I feel that my I am safe and I have ongoing personal safety. |
| **Physical safety** | My physical health is very poor. | My physical health is quite poor. | My physical health is okay. | My physical health is quite good. | My physical health is very good. |

**Completing a Goals SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Goals domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge and access to information** | I know nothing about the issues I sought help with or how to improve my current circumstances. I do not have any access to information to support me. | I know a little about the areas relevant to meeting my needs and improving my current circumstances. I have little access to information to support me. | I have reasonable knowledge in the areas relevant to meeting my needs and improving my current circumstances. I have some access to information to support me. | I have good knowledge in the areas relevant to meeting my needs and improving my current circumstances. I have good access to information to support me. | I have very good knowledge in the areas relevant to meeting my needs and improving my current circumstances. I have very good access to information to support me. |
| **Empowerment, choice and control to make own decisions** | I am not supported to make my own decisions. This lack of support and choice has profound negative impacts. | I have limited support to make my own decisions. This lack of support and choice has a negative impacts. | I have some support to make my own decisions. At times a lack of support or choice has a negative impact. | I have good support to make my own decisions. | I have very good support to make my own decisions. |
| **Engagement with relevant support services** | I need a lot of support to engage with the NDIS and NDIS services to help me improve my circumstances. | I need moderate support to engage with the NDIS and NDIS services to help me improve my circumstances. | I need some support to engage with the NDIS and NDIS services to help me improve my circumstances. | I need minimal support to engage with the NDIS and NDIS services to help me improve my circumstances. | I rarely need support to engage with the NDIS and NDIS services to improve my circumstances. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Satisfaction domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues.** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received.** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with.** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client level data** | **Session level data** | **Case level data** |
| * NDIS eligibility | * Referral out (type and purpose) * Interpreter present * Service setting | * Attendance profile * Referral in (source and reason for seeking assistance) * Exit reason |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy / support | Advocacy / support in this context refers to decision support has been offered under the Pilot. Decision support provided by a funded organisation should be recorded in the Data Exchange. A session should be recorded when the funded organization has provided decision support to the client (person with disability) regardless if the client was in attendance or not (e.g. an advocate making phone calls or enquiries on behalf of a client). |
| Information/Advice/Referral | Information/Advice/Referral should be used where the session’s primary focus was the provision of standard advice/guidance or information in relation to a specific topic. It is also applicable where the service offered was primarily a referral to another service provided within or external to the organisation. |
| Intake and assessment | Intake and assessment is used where the session’s primary focus was the initial process of meeting or talking 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 program and 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. |
| 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. |

**Activity Specific Requirements of the Decision Support Pilot**

Once a service type is selected, a user must select a topic from the following options (see below) to demonstrate the intent of the service type delivered.

| Topic | Example |
| --- | --- |
| Access to non NDIS services | Issues related to access to non-NDIS |
| NDIS – Access/Planning | Issues related to making a request to access the NDIS and assistance to develop a plan |
| NDIS – Support implementing plan/Accessing services | Providing support to implement an NDIS plan or access disability services that are included in a NDIS plan |
| Other | Issues related to any other issues |

### NDIS Appeals Program

**Description**

The NDIS Appeals Program provides assistance to NDIS applicants, and others affected by [reviewable decisions](http://www.aat.gov.au/applying-for-a-review/national-disability-insurance-scheme-applicants) of the National Disability Insurance Agency (NDIA). The program is designed to support clients to navigate external merits review process in the [Administrative Appeals Tribunal](http://www.aat.gov.au/applying-for-a-review/national-disability-insurance-scheme-applicants) (AAT) or agreed alternative dispute resolution pathways that support resolution of disputes arising from NDIA decisions.

[Operational Guidelines](https://www.dss.gov.au/disability-and-carers-programs-services-for-people-with-disability/ndis-appeals-operational-guidelines) have been developed, as an adjunct to the DSS’ Program Specific Guidance, for the NDIS Appeals program, and these guidelines provide more detailed information about the program.

**Who is the primary client?**

The primary clients for this program activity are people with disability and other people affected by reviewable decisions of the NDIA.

**What are the key client characteristics?**

* People with disability (and / or their carers or family members) who have applied for NDIS and have been declined.
* People participating in NDIS who disagree with a National Disability Insurance Agency reviewable decision about their funding and/or support after the decision has been through the internal review process.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families, carers, parents or guardians, or legal representatives of clients (who are present but not directly receiving a service).

**Should unidentified clients be recorded?**

For this program activity, applicable examples of where use of unidentified clients may be appropriate are large education and awareness community events**.** Group clients should not be recorded under all other circumstances.Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations are advised to create a separate case for each individual accessing the service with the following convention:

NDIS Appeals – [Client ID] – [Month/Year of when client became an NDIS Appeals client]

= NDIS Appeals – 1286 – 04/16

For community events or group work, organisations should name cases to reflect the activity delivered, i.e.: ‘NDISAppeals Education – Expo’, or ‘NDISAppeals Ed – [Name] Presentation’.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE). The partnership approach also includes the ability to record an extended data set.

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you could also collect SCORE assessments periodically throughout service delivery.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for a minimum of 50 per cent of identified clients.
* Report an initial and at least one subsequent Goals SCORE for minimum of 50 per cent of identified clients
* Report a Satisfaction SCORE for at least 10 per cent of identified clients, at the end of service delivery.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments at least one circumstance, one goal and one satisfaction domain shown below.

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Age-appropriate development * Community participation and networks * Education and skills training * Employment * Family functioning * Financial resilience * Housing * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Personal and family safety * Physical health | * Changed impact of immediate crisis * Changed knowledge and access to information * Empowerment, choice and control to make own decisions * Engagement with relevant support services | * I am better able to deal with issues that I sought help with * I am satisfied with the services I have received * The service listened to me and understood my issues |

**Completing a Circumstances SCORE Assessment**

For this program activity, all funded organisations must use the following SCORE scale descriptions when assessing clients in the following Circumstance domains. For those SCORE domains not shown below, organisations can record a SCORE assessment as outlined in the [Data Exchange Protocols.](https://dex.dss.gov.au/document/81)

| Circumstance | 1 | 2 | 3 | 4 | 5 |
| --- | --- | --- | --- | --- | --- |
| Age-appropriate development  (for children) | I find most of the activities we do in class very hard to understand and complete on my own. | I find many of the activities we do in class hard to understand and complete on my own. | I find some of the activities we do in class hard but others I find I can understand and complete on my own. | I find many of the activities we do in class I understand and can complete on my own. | I can understand and complete almost all of the activities we do in class on my own. |
| Age-appropriate development  (for parents or carers of children) | When learning the same skills and knowledge, my child struggles all of the time compared to other children their age. | When learning the same skills and knowledge, my child struggles most of the time compared to other children their age. | When learning the same skills and knowledge, my child struggles some of the time compared to other children their age. | When learning the same skills and knowledge, my child struggles a little of the time compared to other children their age. | When learning the same skills and knowledge, my child rarely struggles compared to other children their age. |
| Community participation & networks | I always feel alone and disconnected from the people within my community. | I often feel alone and disconnected from the people within my community. | I sometimes feel alone and disconnected from the people within my community. | I rarely feel alone and disconnected from the people within my community. | I never feel alone and disconnected from the people within my community. |
| Education & training | I have not completed any education or training in the areas I am interested in. | I have enrolled in an education and/or training program in an area I am interested in. | I have started attending an education and/or training program in an area I am interested in. | I am part way through an education and/or training program in an area I am interested in. | I have completed an education and/or training program in an area I am interested in. |
| Employment | I am not employed which is not suitable for my current situation. | I am in work that is not suitable for my current situation. | I am in work that is suitable for my current situation in some ways. | I am in work that is suitable for my current situation in most ways. | I am in work that is very suitable for my current situation in all ways. |
| Family Functioning  (for a child over the age of 14 only) | I do not talk to my family about the things that matter to me. | I find it difficult to talk to my family about the things that matter to me. | I can talk to my family about some of the things that matter to me. | I can talk to my family about most of the things that matter to me. | I can talk to my family about all of the things that matter to me. |
| Family Functioning  (for parents or carers of children) | My family does not get along. | My family rarely gets along or communicates well. | Sometimes my family does not get along or communicate well. | My family gets along and communicates well most of the time. | My family gets along and communicates well. |
| Financial Resilience | I am experiencing financial hardship  I feel like I cannot recover financially. | I am experiencing financial hardship  I have started making progress towards | I am experiencing financial hardship  I feel I am making some progress towards recovering financially. | I am almost out of financial hardship.  I feel I am making good progress towards recovering financially. | I am no longer in financial hardship and I feel I have recovered financially. |
| Housing | I am homeless today. | I am living in housing that is unsuitable to my needs. | I am living in housing that is partially appropriate to my needs. | I am living in housing that is mostly appropriate to my needs. | I am living in housing that is appropriate to my needs. |
| Material well-being | I always go without the basic things I need to live | I often go without the basic things I need to live | I sometimes go without the basic things I need to live | I rarely go without the basic things I need to live | I never go without the basic things I need to live |
| Mental health, wellbeing & self-care | My mental health stops me from doing all of the things I want to do. | My mental health stops me from doing most of the things I want to do. | My mental health stops me from doing some of the things I want to do. | My mental health rarely stops me from doing the things I want to do. | My mental health almost never stops me from doing the things I want to do. |
| Personal & family safety | I do not feel safe where I live. | I rarely feel safe in where I live. | I sometimes feel safe where I live. | I feel safe where I live most of the time. | I feel safe where I live. |
| Physical Health | My physical health stops me from doing almost all of the things I want to do. | My physical health stops me from doing most of the things I want to do. | My physical health stops me from doing some of the things I want to do. | My physical health rarely stops me from doing the things I want to do. | My physical health never stops me from doing the things I want to do. |

**Completing a Goals SCORE assessment**

For this program activity, all funded organisations must use the following SCORE descriptions when assessing clients in the following Goals domains. For those SCORE domains not shown below, organisations can record a SCORE assessment as outlined in the Data Exchange Protocols.

| Goal | 1 | 2 | 3 | 4 | 5 |
| --- | --- | --- | --- | --- | --- |
| Changed impact of immediate crisis | Right now, I am facing a crisis that I am struggling to cope with. | The immediate crisis I am facing is difficult and has an impact on my life. I am interested in improving my situation. | The immediate crisis I am facing is sometimes difficult but I am working to improve my situation. | The crisis I am facing is lessening and I have begun to improve my situation. | I am no longer facing an immediate crisis and I have improved my situation |
| Changed knowledge and access to information | I have no goals in place to increase my knowledge about the issues I have sought help with. | I want to increase my knowledge about the issues I have sought help with | My knowledge is increasing in the areas relevant to the issue have sought help with | I have good knowledge in the areas relevant to the issues I sought help with | I have very good knowledge in the areas relevant to issues I sought help with |
| Empowerment, choice & control to make own decisions | I have no control over decisions that affect my life.  I would like to become more empowered | I have a little control to make decisions that affect my life  I have started making progress towards achieving my goals | I have some control over decisions that affect my life.  I am making progress towards achieving my goals | I have control over most of the decisions that affect my life  I am making good progress towards achieving my goals | I have control to make my own decisions on things that affect my life.  I am close to or have achieved my goals |
| Engagement with relevant support services | I am not working with any support services that could help me improve my situation. | I have started working with a support service to improve my current situation. | I am working with a support service and I am making some progress towards improving my situation. | I am working with a support service and I am making good progress towards improving my situation. | I am fully engaged with a support service, and have improved my situation. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Satisfaction domain. For those SCORE domains not shown below, organisations can record a SCORE assessment as outlined in the Data Exchange Protocols.

| Satisfaction | 1 | 2 | 3 | 4 | 5 |
| --- | --- | --- | --- | --- | --- |
| The service listened to me and understood my issues | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues most of the time. | The service always listens to me and understands my issues. |
| I am satisfied with the services I have received | I am very unsatisfied. | I am a little unsatisfied. | I am somewhat satisfied. | I am mostly satisfied. | I am very satisfied. |
| I am better able to deal with issues that I sought help with | I cannot deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Collecting extended data**

You may also record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial appointment and intake. |
| Information/Advice/Referral | Information sessions for individuals, referral to other services, and referral to central assessment provider (CAP). |
| Education and skills training | Self-advocacy support for individuals, self-advocacy group sessions. |
| Advocacy - External review | Where the client has lodged an appeal with the Administrative Appeals Tribunal (AAT). This is likely to include the completion of an application for funding through the Central Assessment Provider (CAP), assisting the client with any conciliation hearings, meeting with legal representation etc. An application to the AAT must be filed within 28 days of the internal review decision of the NDIA. |
| Advocacy - Internal review | All advocacy matters in relation to a client filing a request for a review of a reviewable decision with the NDIA. This may be referred to as a “review of a reviewable decision”. Any person directly affected by a decision of the NDIA can request for a review of a decision (or an internal review). An internal review must be requested within three months of the initial NDIA decision and an internal review must be completed before making an application for an external review at the AAT. |
| Community capacity building | NDIS Appeals networking sessions, education presentations. |
| Outreach | Stalls at expos and events. |
| Family capacity building | Information sessions to people with disability, carers and families at venues. |
| Dispute resolution | Where the client receives advocacy support for the review of an NDIA decision through approved alternative dispute resolution mechanisms such as the Independent Expert Review (IER) Program. |

### Tristate Carer Vocational Outcomes Program

**Description**

The purpose of the grant is to provide a pilot program of supported vocational training to carers in order to enhance carer employment outcomes. The program will deliver face-to-face and online training, to help carers who are looking for work gain vocational education qualifications that will help them build careers, primarily in the health care and social assistance sector.

It will target people who provide care and support for an elderly relative or friend, or someone with disability, mental illness or a long-term health condition, and who are interested in training and seeking employment.

**Who is the primary client?**

Carers in specific areas of South East Queensland, South Australia and Tasmania

**What are the key client characteristics?**

* Carers

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange website.

It is not expected support persons would be recorded for this program activity.

**Should unidentified clients be recorded?**

No – this program activity provides face-to-face support where clients are known to the service and would not be ‘unidentified’.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes. If using the web-based portal, organisations should create cases in a way that work best for them and their staff, and will be useful over multiple reporting periods.

To protect client privacy, family names or other identifying information should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you should also collect SCORE assessments periodically (six monthly) throughout service delivery.

The partnership approach also includes the ability to record an extended data set (See Protocols, section 6)

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Employment * Education and skills training | * Changed skills | * I am satisfied with the services I have received | * n/a |

**Collecting extended data**

For this program, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Employment status * Highest level of education / qualification * Income (frequency and appropriate gross income) * Main source of income * Is client a carer | * Referral in (source and reason for seeking assistance) | * Referral out (type and purpose) * Service Setting |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type 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.

| **Service Type** | **Example** |
| --- | --- |
| **Intake and assessment** | An initial meeting with a client during which the organisation gathers information on the client’s vocational training needs, and/or assesses a clients’ eligibility for participation in vocational training, and determining if the client is accessing Carer Gateway services. This is usually the first session a client attends. This service type should also be used for the creation of a vocational outcomes plan. |
| **Information/Advice/Referral** | Referral of client to Carer Gateway service providers for additional services and support. |
| **Education and skills training** | Enrolling the client in a soft skills, accredited skills short course or certificate or diploma. Client builds knowledge or develops a skill identified in their vocational outcomes plan.  A client may be enrolled in multiple courses throughout their service delivery period. A new session is to be created each time the organisation enrols the client in a course on their behalf. |
| **Facilitate employment pathways** | Placement of carer in work experience or volunteer experience position, for exposure and practical skills development in line with their vocational goals.  A carer can be placed on multiple sessions of work experience during their service delivery period. A new session should be recorded for each work experience placement. |
| **Service Review** | Vocational Coach establishes that the carer will no longer be considered an active participant even though core components of the project have not been completed. An exit interview, and SCORE assessment may also occur.  This service review requires direct contact with the carer (in person, by phone, or other form of interaction). It should not be used when there has not been direct contact with the carer which could enable such a review. |
| **Core Component completed** | Client has completed core components of the vocational outcomes plan. This would also be the point in time where one or more of the following would take place: a post participation interview, and a SCORE outcomes assessment.  This service type can be used multiple times if the client completes more than one course. |
| **Mentoring/Peer Support** | Vocational coach monitors achievement of milestone activities, facilitates scheduled meeting/touch points to ensure person-centred vocational support, and reviews and adjusts vocational outcomes plan.  Levels of intensity for 'Mentoring / Peer Support': • Low: A brief interaction with the coach (less than 20 minutes)  • Medium: A longer meeting/coaching session or interaction with the coach (20-60 minutes)  • High: An extended meeting, session or interaction with the coach (more than 1 hour). |

### Young Carer Bursary Program (YCBP)

**Description**

The Young Carer Bursary Program assists eligible young carers aged 25 years and under to continue or return to study. The Program aims to relieve the financial pressure on young carers to undertake part-time work in addition to their educational and caring responsibilities.

**Who is the primary client?**

Primary clients for this program activity are young carers 25 years or younger, studying an approved course either full or part-time.

**What are the key client characteristics?**

* Carers aged 25 years or younger and assessed as being greatest in need
* Carers from a cultural and linguistically diverse background
* Carers identifying as Aboriginal and/or Torres Strait Islander.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include care recipients of clients.

**Should unidentified clients be recorded?**

The Young Carer Bursary Program is primarily client facing where ongoing relationships are formed,therefore it is expected that **no more than 5 per cent** of your clients be recorded as unidentified clients in any reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each individual accessing the service. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 1286

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Family functioning * Material wellbeing and basic necessities * Mental health, wellbeing and self-care | * Changed knowledge and access to information * Changed skills | * I am satisfied with the services I have received | * Community infrastructures and networks |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Application and assessment process including: receipt and initial assessment of applications; recommendations made to Independent Selection Panel for final decision; and verification and selection of successful applicants. |
| Information/Advice/Referral | Provision of standard advice/guidance or information in relation to a specific topic or where a referral was made to another service provided within or external to the organisation. |
| Education and skills training | Assisting 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. This includes accessing education and training including re-engaging with the education system. |
| Child/Youth focussed groups | Sessions targeted at children or youth, and delivered in a group, rather than individual basis. Examples include playgroups, breakfast clubs and other similar services. |
| Counselling | Working through a particular issue such as relationship concerns or financial concerns, as delivered by an industry recognised qualified staff member. |
| Advocacy/Support | Advocating on a client’s 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. |
| Community capacity building | Development of a communities skills/cohesion or understanding of a topic or subject. Community capacity activities are delivered to a group of people rather than an individual. |
| Outreach | Targeted advertising and promotion, including website. |
| Mentoring/Peer support | Provision of specialised support, information and role-modelling. Mental health peer support/mentoring from someone who identifies as having a lived experience of disability and/or mental health condition. This includes carers of a person with a disability or mental health condition. |
| Family capacity building | 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 centered activities; and establishing routines and practical help with tasks. |
| Carer support | Awarding of Young Carer Bursaries. |

## Disability and Carer Service Improvement and Sector Support

The Disability and Carer Service Improvement and Sector Support program aims to provide opportunities to people with disability, carers, policy makers, researchers, national organisations, service providers, business and community organisations to undertake work to improve the lives of people with disability and carers.

The following program activities are included in Disability and Carer Service Improvement and Sector Support:

* Disability Advocacy Support Helpline (DASH)

### Disability Advocacy Support Helpline (DASH)

**Description**

The Disability Advocacy Support Helpline (DASH) provides individual advocacy support via the phone for people with disability, and referrals to in-person advocacy and related supports. Individuals access the DASH by calling the Disability Gateway telephone line. The DASH works in partnership with existing National Disability Advocacy Program providers to help meet demand for individual advocacy services and expand service delivery to hard-to-reach regional and remote locations. The provision of advocacy services via telephone also provides people with disability greater flexibility and choice about how they receive advocacy support.

**Who is the primary client?**

Primary clients for this program activity are people with disability.

**What are the key client characteristics?**

Key clients may include people:

* identifying as having a condition, impairment or disability
* residing in a rural or remote area
* receiving government payments or persons experiencing homelessness

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange website.

For this program activity, support persons may include carers of clients or a carer recipient (when present but not directly receiving a service), their families or guardians, case and support workers, legal representatives, community leaders, mentors and informal care givers.

**Should unidentified clients be recorded?**

The DASH is client and referral based, therefore it is expected that only **5 per cent** of your clients or less be recorded as unidentified clients in any reporting period.

Clients who contact the DASH seeking anonymous information or advice can be recorded as unidentified group clients, however you should collect client data wherever possible. Group clients should not be recorded under any other circumstances.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. The organisation should create cases that reflect their own administrative processes.

**The Partnership Approach**

For this program activity, the delivery organisation is required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting.

The partnership approach also includes the ability to record an extended data set.

Organisations are expected meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 50 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 50 per cent** of identified clients.
* Report a Satisfaction SCORE for **at least 10 per cent** of identified clients.

A client SCORE assessment is recorded at least twice; once towards the beginning of the client’s service delivery and once, towards the end of service delivery. This may include after the end of the service as part of a follow-up.

**What areas of SCORE are most relevant?**

For this program activity, it is expected that providers collect and report SCORE assessments in at least one of each of the following domains:

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Community participation and networks * Employment * Education and skills training * Family functioning * Housing * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Financial resilience * Personal and family safety * Physical health | * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | * 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. |

When recording a SCORE assessment for a client, you must also record ‘**Assessed by**’ at the SCORE level to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE scale descriptions when assessing clients in the following Circumstances domains. For those SCORE domains not shown below, organisations can record SCORE assessments as outlined in the Data Exchange Protocols.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Community participation & networks** | I feel alone and disconnected from the people within my community | I feel alone and disconnected from the people within my community most of the time | I feel alone and disconnected from the people within my community some of the time | I rarely feel I am alone and disconnected from the people within my community | I never feel alone and disconnected from the people within my community |
| **Education and skills training** | I have a lot of difficulty finding or remaining in education or training. | I have some difficulty finding and remaining in education or training. | I occasionally have difficulty finding and remaining in education. | I am in education or training that is suitable in most ways. | I am in education or training that is very suitable in all ways. |
| **Employment** | I am not employed which is not suitable for my current situation | I am in work that is not suitable for me | I am in work that is suitable in some ways | I am in work that is suitable in most ways | I am in work that is very suitable in all ways |
| **Family Functioning** | My family does not get along | My family has difficulty getting along and communicating | Sometimes my family does not get along or communicate well | My family gets along and communicates well most of the time | My family gets along and communicates very well |
| **Financial Resilience** | I am experiencing financial hardship  I feel like I cannot recover financially from this | I am experiencing financial hardship I feel I can recover financially | I am experiencing financial hardship, I am making some progress towards recovering financially | I am or were experiencing financial hardship I feel I am making good progress towards recovering financially | I am no longer experiencing financial hardship and I have recovered financially |
| **Housing** | I have no housing today | I am living in housing that unsuitable to my needs | I am living in housing that is partially appropriate to my needs | I am living in housing that is mostly appropriate to my needs | I am living in housing that is appropriate to my needs |
| **Material wellbeing and basic necessities** | I always go without the basic things I need to live  I do not participate in any of the things I would like to because I have no spare money | I often go without the basic things I need to live  I rarely participate in any of the things I would like to because I hardly ever have spare money | I sometimes go without the basic things I need to live  I sometimes participate in the things I would like to if I have spare money | I rarely go without the basic things I need to live  I often participate in the things I would like to because I usually have spare money | I never go without the basic things I need to live  I always participate in the things I would like to because I consistently have spare money |
| **Mental health, wellbeing and self-care** | My mental health stops me from doing all the things I want to do | My mental health stops me from doing most of the things I want to do | My mental health stops me from doing some of the things I want to do | My mental health rarely stops me from doing the things I want to do | My mental health never stops me from doing the things I want to do |
| **Personal and family safety** | I do not feel safe where I live | I rarely feel safe in where I live | I sometimes feel safe where I live | I feel safe where I live most of the time | I feel safe where I live |
| **Physical health** | My physical health stops me from doing all the things I want to do | My physical health stops me from doing most of the things I want to do | My physical health stops me from doing some of the things I want to do | My physical health rarely stops me from doing the things I want to do | My physical health never stops me from doing the things I want to do |

**Completing a Goals SCORE assessment**

For this program activity, all funded organisations must use the following SCORE descriptions when assessing clients in the following Goals domains. For those SCORE domains not shown below, organisations can record a SCORE assessment as outlined in the Data Exchange Protocols.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed behaviours** | I have no goals in place to change the behaviours that aren’t helping me to improve my situation. | I have identified my goals to help me change the behaviours that aren’t helping me to improve my situation. | I am starting to make progress towards achieving my goals and can see that my situation is/will improve. | I am making good progress towards achieving my behaviour goals. My situation is improving. | I have/almost achieved my goals. My changed behaviours are really helping to improve my situation. |
| **Changed knowledge and access to information** | I have no plans to increase my knowledge about the issues I have sought help with.  I am not accessing any information to support me. | I want to increase my knowledge about the issues I have sought help with and have started to access information to help me. | My knowledge is increasing in the areas relevant to the issues I have sought help with. I am accessing information to help me. | I have good knowledge in the areas relevant to the issues I sought help with. The information I am accessing has been helpful. | I have very good knowledge in the areas relevant to issues I sought help with. The information I have accessed has been very helpful in supporting me to achieve my goals. |
| **Changed skills** | I have no goals in place to develop or improve the skills I need to help improve my situation. | I want to develop or improve my skills and have a plan to help me achieve my goals. | My am starting to develop and improve my skills. | I have good skills in the areas I need to be able to improve my current situation. | I have very good skills in the areas I need to be able to improve my current situation. |
| **Empowerment, choice and control to make own decisions** | I am not empowered to make my own choices or have control over decisions that affect my life.  I would like to become more empowered. | I have limited empowerment to make my own choices and have very little control to make decisions that affect my life.  I have started making progress towards achieving my goals. | I am empowered to make some of my own choices and have some control over decisions that affect my life.  I am making progress towards achieving my goals. | I am empowered to make most of my own choices and have control over most of the decisions that affect my life.  I am making good progress towards achieving my goals. | I am empowered to make all of my own choices and have control to make my own decisions on things that affect my life.  I am close to or have achieved my goals. |
| **Engagement with relevant support services** | I have made enquires to support services I believe will help me improve my situation. | I have started working with a support service. | I am working with a support service and I am making some progress towards improving my situation. | I am working with a support service and I am making good progress towards improving my situation. | My situation has improved because I engaged with a support service that helped me.  I will access support services in the future because of my experience. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Satisfaction domains. For those SCORE domains not shown below, organisations can record a SCORE assessment as outlined in the Data Exchange Protocols.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **I am better able to deal with issues that I sought help with.** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |
| **The service listened to me and understood my issues** | The service does not listen or understand my issues at all | The service listens a little bit or understands some of my issues | The service sometimes listens or understands my issues | The service listens to me and understands my issues a lot of the time | The service always listens to me and understands my issues |
| **I am satisfied with the services I have received** | I am very unsatisfied | I am a little unsatisfied | I am somewhat satisfied | I am mostly satisfied | I am very satisfied |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the additional data fields outlined in the below table:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Session level data** | **Case level data** |
| * Is client a carer * NDIS eligibility | * Referral out (type and purpose) * Interpreter present | * Referral in (source and reason for seeking assistance) * Exit reason |

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Advocacy | Providing advocacy on behalf of the client (person with disability).  For example an advocate making phone calls or enquiries on behalf of a client. |
| Education and Skills Training | Assisting 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.  This may include assisting clients to access education and training, and re-engaging with the education system. |
| Information/Advice/Referral | Giving a client advice/guidance or information in relation to a specific topic.  OR referring a client to another service provided internal or external to the organisation.  **Note**: Only this service type can be used for unidentified clients |
| Intake and assessment | The initial process of meeting or talking with the client, including gathering information on the client’s situation and advocacy requirements and assessing a clients’ eligibility for participation in the service.  This is usually (but not limited to) the first session a client attends. |

**Activity Specific Requirements of the Disability Advocacy Support Helpline**

Once a service type is selected, a user must select a topic from the following options (see below) to demonstrate the intent of the service type delivered.

| Service Type | Example |
| --- | --- |
| Abuse/Neglect/Violence | Issues related to abuse, neglect or violence |
| Access to non NDIS services | Issues related to access to non-National Disability Insurance Scheme (NDIS) services |
| Child protection | Issues related to child protection |
| Community inclusion – Social/Family | Issues related to community inclusion in social or family contexts. This can include issues about recreation/leisure |
| Disability services | Issues related to disability services complaints |
| Discrimination/rights | Issues related to discrimination/rights |
| Education | Issues related to education |
| Employment | Issues related to employment |
| Equipment/aids | Issues related to equipment/aids |
| Finances | Issues related to finances excluding government payments |
| Government payments | Issues related to Government payments such as Centrelink payments |
| Health/Mental health | Issues related to health or mental health |
| Housing/Homelessness | Issues related to housing and/or homelessness |
| Legal/Access to justice | Issues related to accessing justice through legal and justice systems, including engagement with lawyers, police and courts |
| NDIS – Internal review | Issues related to assisting someone to request and manage a review of decision with National Disability Insurance Agency (NDIA) |
| NDIS – Access/Planning | Issues related to making a request to access the NDIS and assistance to develop a plan |
| NDIS – Support implementing plan/Accessing services | Providing support to implement an NDIS plan or access disability services that are included in a NDIS plan |
| Other | Issues related to any other issues |
| Physical access | Issues related to physical access to buildings, transport, community venues etc. |
| Transport | Issues related to transport |
| Vulnerable/Isolated | Issues related to vulnerable and/or isolated people with disability |

# Outcome 3.2 – National Disability Insurance Scheme

The National Disability Insurance Scheme (NDIS) aims to improve the wellbeing and social and economic participation of people with disability, and their families and carers, by building a NDIS that provides funds to people with significant and permanent disability to purchase reasonable and necessary supports through an insurance approach. The program also includes funding for existing Commonwealth programs that are transitioning into the NDIS in a phased approach and the Jobs and Market Fund.

## NDIS Information Linkages and Capacity Building (ILC)

ILC provides funding to organisations to deliver projects in the community that benefit all Australians with disability, their carers and families. These projects create connections between people with disability and the communities they live in. Projects aim to build the knowledge, skills and confidence of people with disability, and improve their access to community and mainstream services

The following program activities are included in ILC:

* Building Employer Confidence in Inclusion and Disability

### Building Employer Confidence in Inclusion and Disability

**Description**

The Building Employer Confidence in Inclusion and Disability (BEC) program aims to help build the confidence and ability of employers to hire, support and retain employees with disability and create inclusive workplaces by breaking down attitudinal barriers about people with disability.

By improving the confidence of employers, the program supports people with disability to gain employment and improve their overall wellbeing.

To support people with disability to gain employment and improve their overall wellbeing, the aim of this grant opportunity is to:

* build the confidence and ability of employers to hire, support and retain employees with disability
* create inclusive workplaces by breaking down attitudinal barriers about people with disability

**Who is the primary client?**

Primary clients for this program activity are employers who need support related to employing people with disability.

**What are the key client characteristics?**

* Employers who have expressed an interest in employing, or employing more people with disability but need support to get started
* Employers in one (or more) of the growth industries who have, or are expected to have significant workforce demands and/or known vacancies that could be filled by people with disability
* Employers, with networks of employees, seeking increased confidence in inclusive recruitment and hiring practices

**Who might be considered ‘support persons’?**

Support persons are not the focus of the BEC grant, so are not applicable for the purposes of DEX reporting.

**Should unidentified group clients be recorded for this program?**

This program provides support where employers have been previously identified through stakeholder engagement. However it is acknowledged that some activities may involve larger group activities with unidentified clients where it is not possible to record all participants. Therefore, no more than **20 per cent** of clients should be recorded as unidentified.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on recording unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. The organisation should create cases that reflect their own administrative processes.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes recording an extended set of data.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **all clients where possible** (95 ‑ 100 per cent) of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **all clients where possible** (95‑100 per cent) of identified clients.
* Report a Satisfaction SCORE for **at least 10 per cent** of identified clients.

A SCORE assessment is recorded at least twice for each client – once towards the beginning of service delivery and once again towards the end.

Where practical, organisations should also record a SCORE assessment every 6 months to track how the client’s outcomes change over time. Please refer to the Data Exchange Protocols (section 7) for more information.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in at least one Circumstance, one Goal and one Satisfaction domain listed below:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Employment * Education and skills training | * Changed behaviours * Changed knowledge and access to information | * I am better able to deal with issues that I sought help with * I am satisfied with the services I have received | * Group / community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

When recording a SCORE assessment for a client, you must also record ‘**Assessed by**’ at the SCORE level to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisation must use the following SCORE scale descriptions when assessing clients in the following Circumstances domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| Circumstances | 1 | 2 | 3 | 4 | 5 |
| --- | --- | --- | --- | --- | --- |
| **Community participation & networks** | I do not have a network available to support my capability to employ people with disability | I have little network support available to support my capability to employ people with disability | I have some network support available to support my capability to employ people with disability | I have good network support available to support my capability to employ people with disability | I have very good network support available to support my capability to employ people with disability |
| **Employment**  **(creating an inclusive workplace environment)** | My organisation is not ready to employ people with disability  Education and training is required to break down barriers and understand how the organisation can support people with disability | My organisation is working towards employing people with disability  An education and training program is about to begin which will help to break down barriers and help us better understand how we can support people with disability | My organisation is ready to start employing people with disability  Education and training is underway and some changes have been implemented to create a more inclusive work environment | My organisation is actively recruiting  Initial education and training has been completed and many changes have been implemented to create an inclusive workplace environment | My organisation has employed at least one person with disability  Our workplace is inclusive and staff are confident they can support people with disability |
| **Education & training** | My organisation has not engaged in any specific education or training regarding the employing of or working with people with disability in the past | My organisation has arranged an education and training program to be delivered that will focus on working with people with disability | My organisation is part way through an education and training program focussed on working with people with disability | My organisation has almost completed an education and training program focussed on working with people with disability | My organisation has completed an education and training program focussed on working with people with disability |

**Completing a Goals SCORE assessment**

For this program activity, all organisation must use the following SCORE scale descriptions when assessing clients in the following Goals domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| Goals | 1 | 2 | 3 | 4 | 5 |
| --- | --- | --- | --- | --- | --- |
| **Changed Knowledge** | I have a very low level of knowledge about employing or working with people with disability | I have a low level of knowledge about employing or working with people with disability | I have a moderate level of knowledge about employing or working with people with disability | I have a good level of knowledge about employing or working with people with disability | I have a very good level of knowledge about employing or working with people with disability |
| **Changed Behaviours** | I am very hesitant about employing or working with people with disability  I am not confident in my ability to manage and/or support a staff member with disability | I am hesitant about employing or working with people with disability  I have little confidence in my ability to manage and/or support a staff member with disability | I am somewhat hesitant about employing or working with people with disability  I feel my confidence in my ability to manage and/or provide support to a staff member with disability is growing | I am fairly confident about employing or working with people with disability  I am fairly confident in my ability to manage and/or provide support to  a staff member with disability | I am confident about employing or working with people with disability  I am confident in my ability to manage and/or support a staff member with disability |

**Completing a Satisfaction SCORE assessment**

If an organisation already uses an existing satisfaction measurement tool that meets their needs, they can continue to use it and translate the outcome data to SCORE, otherwise organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

**Completing a Community SCORE assessment**

For this program activity, all organisation must use the following SCORE scale descriptions when assessing clients in the following Community domains. For those SCORE domains not shown below, organisations can record SCORE assessment as outlined in the Data Exchange Protocols.

| Community | 1 | 2 | 3 | 4 | 5 |
| --- | --- | --- | --- | --- | --- |
| **Group/ community knowledge, skills, attitudes behaviours** | No change in knowledge, skills, attitudes, behaviours | Limited change in knowledge, skills, attitudes, behaviours–but emerging engagement | Limited change in knowledge, skills, attitudes, behaviours–but strong engagement | Moderate change in knowledge, skills, attitudes, behaviours | Significant positive change in knowledge, skills, attitudes, behaviours |
| **Organisational knowledge, skills and practices** | No change in organisational knowledge, skills, practices to respond to the needs of targeted clients/ communities | Limited change in organisational knowledge, skills, practices–but emerging engagement | Limited change in organisational knowledge, skills, practices, but strong engagement | Moderate change in organisational knowledge, skills, practices | Significant positive change in organisational knowledge, skills, behaviours to better respond to the needs of targeted clients/ communities |

**For this program activity, when should each service type be used?**

A service type describes the main focus of a session with one or more clients. If a session covers multiple service types, the person delivering the session should record only the most relevant service type, which is typically the one that required the most amount of time or contributed most significantly to an outcome.

| Service Type | Example |
| --- | --- |
| Disability eLearning | Disability eLearning module or course completed at own pace. |
| Disability Workshop | A workshop to build the knowledge and capacity of employers to support their ability to employ people with disability. |
| Education and Skills Training | Assisting employers in learning or building knowledge about a topic or aimed at developing, or enhancing a skill relevant to the employer’s circumstances. |
| E-Learning Online Workshop | Sessions delivered online where interaction between the presenter and other employers occurs. |
| Employer engagement | Contact between an employer or potential employer and a client or service provider. |
| Facilitate employment pathways | Assisting employers by building their capability to employ people with disability and linking employers with opportunities that will further develop their skills. |
| Resource development | Development of resources in consultation with employers. This can be done in partnership with other organisations to build the capacity of employers. |
| Tailored workshops | A workshop to build knowledge and capacity on specific issues. |

# Outcome 4.1 – Housing and Homelessness

This outcome includes programs that aim to provide support for affordable housing and homelessness prevention initiatives, including the design and implementation of innovative early stage projects.

## Housing and Homelessness Service Improvement and Sector Support

The following program activities are included in the Housing and Homelessness Service Improvement and Sector Support Program:

* Foyer Central

### Foyer Central

**Description**

Foyer Central is a purpose-built centre located in central Sydney, offering young out-of-home care leavers a safe and affordable place to live while they engage in education, training and employment. The project is funded by the New South Wales (NSW) Government through a Social Impact Bond, and delivered by Uniting NSW.ACT and St George Community Housing. The Department of Social Services has partnered with the NSW Government in the project through the Commonwealth State Agreement on Social Impact Investing as part of the Australian Government’s Social Impact Investing State Partnership Trial.

**Who is the primary client?**

Young out-of-home care leavers living in NSW and aged 18-22 years who are homeless or at risk of homelessness.

**What are the key client characteristics?**

* + Persons living in crisis, emergency or transition accommodation and/or identifying as homeless or at-risk of homelessness
  + Aged 18-22 years and have been in out-of-home care in NSW

**Who might be considered ‘support persons’?**

Support persons are not relevant for this program activity.

**Should unidentified clients be recorded?**

Foyer Central provides face-to-face support where clients are known to the service; therefore, it is expected that **no clients (0 per cent)** should be recorded as unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes. To protect client privacy, client names should never be recorded in the Case ID field.

**The partnership approach**

For this program activity, organisations are required to collect some extended client level data under the partnership approach. Organisations are **not required** to report outcomes information using the Standard Client Outcomes Reporting (SCORE) tool.

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

| **Client Level Data** | **Meaning** |
| --- | --- |
| * Income (frequency and approximate gross income) * Main source of income | **Government payments/pensions/allowances** means the client is receiving a payment from the NSW Government (for example Rent Start) that is to be included as income in the assessment of a Successful Outcome.  The gross value of the NSW Government payment(s) based on whether it is paid weekly, fortnightly etc. |
| * Exit Reason   1. Service unable to provide assistance | Support ended by Uniting NSW.ACT.  Examples:   * Foyer Deal has been breached * Foyer tenant presents an unacceptable risk to the safety and wellbeing of staff and/or other tenants |
| * 1. Client has moved out of area | Tenancy ended by housing provider.  Examples:   * Not paying rent * Property damage |
| * 1. Client terminated the service | Foyer tenant has decided to leave Foyer Central before graduating. |
| * 1. Client died | Person is deceased |
| * 1. Client no longer eligible | A person who was a Foyer tenant:   * used an excluded form of accommodation * has a child who enters out-of-home care * receives a custodial sentence during their Measurement Period and is not eligible for a Successful Outcome. |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake/Assessment | Gathering information on clients’ needs, eligibility, matching clients to services (decision making process on whether the person will be a Foyer tenant). |
| Accommodation assistance | Start of Foyer Central tenancy. |
| Fundamental life skills | Date the Foyer tenant completed the Life Skills Course. |
| Core component completed | End of Foyer Central tenancy. Measurement Period commences on the next calendar day. |
| Service review | New Measurement Period approved. Start date of new Measurement Period. |

# ATTORNEY GENERAL’S DEPARTMENT (AGD)

# Justice Services

The following program activities are included in Justice Services:

* Specialist Elder Abuse Services

### Specialist Elder Abuse Services

The More Choices for a Longer Life - Protecting the Rights of Older Australians program - Elder Abuse Service Trials (the program) ran over four years from 2018-19 to 2021-22. Following a positive evaluation outcome, further funding was provided to continue the Specialist Elder Abuse Services for a further four years from 2022-23.

**Description**

The objective of the Specialist Elder Abuse Services is to improve the government’s knowledge of, and expand its options to respond to, elder abuse in a variety of forms. The program will increase access to services and support options for those directly experiencing or at risk of elder abuse.

The intended outcome of the program is to reduce the incidence and severity of elder abuse through the provision of information and support (including social, legal and potentially other forms of support, such as counselling) which is designed to meet the specific needs of the individual or couple being assisted. It will achieve this through continuing to support existing elder abuse services

Although services delivered may involve family members (depending on the particular circumstances) the focus of the program is to improve outcomes for the person experiencing, or at risk of, elder abuse. This may initially include liaising with a family member(s) to determine if abuse is occurring.

Eligibility for this program is determined by the age criteria **and** the risk or experience of abuse. Additionally, the eligible person must consent to participate in the program.

**Who is the primary client?**

Primary clients for this program activity are Australians aged 65 and over, and First Nations Australians aged 50 and over, who are at risk of, or are experiencing, elder abuse.

For this program activity, it is expected that you establish direct contact as soon as possible with the older person or couple who will be the beneficiary of the service delivery. If you are unable to contact the older person, or obtain consent to participate in the program within an agreed timeframe, you cannot continue to deliver services within this program, although you may be able to refer the family to appropriate alternative services.

Organisations must adhere to the notification and consent arrangements regarding the collection and storage of personal information, as identified in the Data Exchange Protocols. In some circumstances it may be appropriate to seek consent from a guardian or carer (see Protocols, section 4 for more information).

There may be situations where a support person engages with a service provider on behalf of a primary client, but the primary client does not attend a particular session with the service provider. This could be for a range of reasons, such as the primary client being incapacitated, or the situation being stressful to the older person. The client could in some cases still be attached to a session even if they were not physically present, provided the client:

1. has given consent to participate in the program,
2. is directly benefitting from the service delivery, and
3. is expected to achieve a measurable outcome as a result.

For information on how to record services delivered in circumstances where the client is not physically present please refer to the **service type** and **scenario** sections below.

**What are the key client characteristics?**

Clients are older Australians who are experiencing, or who are at risk of experiencing, elder abuse. This can include physical, sexual, psychological/emotional or financial abuse, and neglect.

**Who might be considered ‘support persons’?**

When recording client level data in the Data Exchange you have the option to record details relating to the support person(s) who may be present at a session. For information on how to record them, please refer to the ‘service type’ section below.

Support persons may include family members who assist the client to attend the session (through transport, translating or other assistance).

There may be instances where a family member initially presents to an organisation seeking advice on alleged elder abuse. In this situation the family member is still considered a support person.

For this program activity, ‘support persons’ could potentially include family members who are in dispute with the older person (primary client) and/or other family members. It may also include legal representatives, community leaders or a case/support worker. Where organisations are delivering case management and mediation services to the primary client, family members are recorded as support persons.

Instructions on how to record support persons in the web-based portal are on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should ‘unidentified’ clients be recorded?**

The program is primarily focused on developing relationships with individual primary clients, although there may be instances where a family member / support person is the person initially contacting an organisation to seek advice on alleged elder abuse. In these circumstances, where the details of the client are not yet known, the older person must be attached to the case as an ‘unidentified client’, and the support person is also attached to this case. Examples of when and how to record ‘unidentified’ clients are provided in the service type descriptions/scenarios.

Depending on the service type being provided, you may be delivering services to larger groups, such as information sessions to community organisations or health care professionals. In these circumstances, or where it is not practical to collect individual details, you should record the attendees as ‘unidentified’ clients.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of ‘unidentified’ clients.

**How could cases be set up?**

All cases must have an eligible (unidentified or identified) primary client attached to them; that is, there can be no ‘support person only’ cases.

Where the primary client’s details are not initially known, attach an unidentified client to the case. Once you have obtained the primary client’s details attach this person to the case and remove the unidentified client.

A case should be created for each primary client/couple experiencing abuse, except for instances of awareness sessions or community engagement events, where a separate case must be created to record these events.

* For primary client couples, if the abuser is not the same, a separate case must be created for each primary client.
* Where a case is created for an awareness or community engagement session, the attendance profile selected must be either ‘community event’ or ‘peer support group’.

To protect client privacy, family names or other identifying information should never be recorded in the Case ID field. To easily navigate cases, you should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach.

As part of the partnership approach, organisations will be able to use the Data Exchange standard approach to record primary client outcomes known as Standard Client/Community Outcomes Reporting (SCORE).

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of primary clients. However, you should do so within reason and in alignment with ethical requirements.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Family Functioning * Financial Resilience * Housing * Material well-being and self-care * Mental health, wellbeing and self-care * Personal and family safety * Physical health | * Changed knowledge and access to information * Changed behaviours * Changed skills * Empowerment, choice & control to make own decisions * Engagement with relevant support services * Changed impact of immediate crisis | * 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 |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Household composition | * Reason for seeking assistance * Referral source * Attendance profile | * Referral type * Referral purpose |

You may record other outcomes and extended client details, if you think it is appropriate for your program and clients to do so.

**For this program activity, when should each service type be used?**

The service type describes the **main** focus of 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.

The table below describes when to use a particular service type.

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf to an entity such as a government agency, bank or in a family care conference (in the case of health justice partnerships); helping the client access a service, or contacting an organisation on their behalf - for example working with the Public Trustee and Guardianship Tribunal to intervene early in a financial abuse situation. It could also include negotiating with a bank in relation to a loan and mortgage or assistance with completing documents.   * The primary client should be recorded as an individual client for this service type. * You cannot advocate on behalf of unidentified clients or support persons. * Where you have already engaged with the primary client, they can sometimes be attached to a session even if they were not physically present, provided they are directly benefitting from the advocacy/support and are expected to achieve a measurable outcome as a result of the session. |
| Awareness session | Raising awareness about elder abuse by giving a session to a community group, or to a group of health professionals on, for example, how to identify elder abuse or how to access support services.   * ‘Unidentified’ clients are acceptable when the session primarily provides general information to a group, or advice to a broad audience of at-risk people. * Primary clients (where applicable) can also attend these sessions.   Separate cases must be created for awareness sessions. The attendance profile selected for these cases must be either ‘community event’ or ‘peer support group’. |
| Counselling | Provision of counselling services based on the need to work through and resolve relationship issues (including domestic violence, mental health or financial concerns) affecting the older person who is at risk of or experiencing elder abuse, as well as providing emotional and psychological support to the primary client.   * The primary client should be recorded as an individual client. * If details of the primary client are not yet known, no client should be attached to the session. * Other people participating in the mediation, such as family members, should be individually recorded as support persons. |
| Community engagement | This service type, should be used when organising a community event, or other activity that helps a person or a group of individuals affected by elder abuse to reconnect with others in the community. Although it is not expected that many organisations will select community engagement as a service type for this program, when used:   * Primary clients (where applicable) are recorded as individual clients. * Support persons would be recorded only where they accompany the older person to the activity. * Unidentified clients are acceptable when the session primarily provides general information to a group, or advice to a broad audience of at-risk people.   Separate cases must be created for community engagement sessions. The attendance profile selected for these cases must be either ‘community event’ or ‘peer support group’.  **Information sessions to community groups should be recorded as ‘awareness sessions’**. |
| Dispute resolution | Helping the client to resolve a dispute with another person or persons. Examples include financial arrangements or property issues. This can involve helping the client work through particular issues with family members to avoid legal action. This service type is more likely to apply to Specialist Elder Abuse Units and Health Justice Partnerships, though it may apply to some Case Management and Mediation Services.   * The primary client should be recorded as an individual client. * If details of the primary client are not yet known, no client should be attached to the session. * Other people participating in the dispute resolution process, such as family members, should be individually recorded as support persons. |
| Family mediation | This service type is likely to apply to mediation between the older person and their family to achieve reconciliation, settlement or compromise. The focus is on achieving a positive outcome for the primary client. This service type is more likely to apply to case management and mediation services, but may be present in other service types.   * The primary client should be recorded as an individual client. * If details of the primary client are not yet known, no client should be attached to the session. * Other people participating in the mediation, such as family members, should be individually recorded as support persons.   Where you have already engaged with the primary client they can sometimes be attached to a session, even if they were not physically present, provided they are directly benefitting from the family mediation and are expected to achieve a measurable outcome as a result of the session. |
| Information/Advice/Referral | Providing standard advice, guidance or information relevant to a client’s immediate needs, such as advice on how to safeguard against abuse or advice about legal or financial options. It can also include advice to a family member or friend who suspects elder abuse. It also applies where the service offered was primarily a referral to another service provided within or external to your organisation, such as legal advice, financial assistance, health services or social work support.  This service type can also be used for engaging with an individual client or a group of clients on a particular topic. Examples include managing finances, preparing wills or raising awareness of how to avoid abuse.   * The primary client should be recorded as an individual client. * If details of the primary client are not yet known, no client should be attached to the session. * Other people participating in the session, receiving advice or being referred, can be individually recorded as support persons.   **Information sessions to community groups should be classified as ‘awareness raising’.** |
| Intake and assessment | The initial meeting with a client during which your organisation gathers information on the client’s need, defines the outcomes sought for the client and determines the support they need. This is usually (but not limited to) the first session a client attends.   * The primary client should be recorded as an individual client. * If details of the primary client are not yet known, no client should be attached to the session. * Other people participating in the session, such as family members, can be individually recorded as support persons. |
| Specialist support | The client receives specialist services from a lawyer or financial advisor. This could include assistance with complex litigation, legal advice, representation at tribunals and courts, preparing guardianship orders, or advice from a financial advisor on how manage finances to avoid financial abuse.   * The primary client should be recorded as an individual client. * If details of the primary client are not yet known, no client should be attached to the session. * Other people participating in the session, such as family members, can be individually recorded as support persons. |

| Scenarios | Specialist Elder Abuse Services – Recording clients and support persons |
| --- | --- |
| Scenario 1:  Older person participating in the program  Client and support person both present at the session. | **Scenario:** Alice is 75 years old and lives with her husband Mark. Alice has agreed to participate in the Specialist Elder Abuse Services and your organisation provides an *intake/assessment service* at her home with her husband present.  **Who is the client?** Alice is the client.  **Action:** Collect and record data on Alice in the Data Exchange, create a case with Alice as the client, then record a session with Alice as the client.  **Who is the support person?** Alice’s husband Mark is the support person.  **Action:** Collect and record Mark’s details in the Data Exchange, attach Mark to the session for Alice, and note him as attending the session as a ‘support person’. |
| Scenario 2:  Older person is participating in the program, but not present at the session  No support person at the session. | **Scenario:** Fred is 94 years old and lives with his daughter Sue. Fred is participating in the Specialist Elder Abuse Services. After the initial intake meeting, the organisation *advocates* on Fred’s behalf to a Government agency. Fred is not physically present whilst the advocacy is occurring.  **Who is the client?** Fred is the client, and a case has been created for him and his family members.  **Action:** Collect and record data on Fred in the Data Exchange at the intake meeting. Record a session of Advocacy/Support with Fred as the client.  **Who is the support person?** Not applicable, as the organisation is advocating on Fred’s behalf and not on behalf of his daughter, Sue.  **Action:** No additional action required. |
| Scenario 3:  Older person is participating in the program  Only support persons present at the session. | **Scenario:** Jessie is a 53-year old Ngunnawal woman who has been participating in the Specialist Elder Abuse Services. Your organisation provides family mediation for her son and daughter whilst Jessie is not present.  **Who is the Client?** Jessie is the client.  **Action:** Client data would already have been recorded on Jessie in the Data Exchange, and she remains the client in the case record.  **Who is the support person?** Jessie’s son and daughter are the support persons.  **Action:** Collect and record data for Jesse’s son and daughter in the Data Exchange, record a session with Jessie’s son and daughter as attending the session as ‘support persons’. Jessie is part of the case, but is not recorded at this session, as she doesn’t attend. |
| Scenario 4:  Older person is not present and is unable to consent  Support person has authority to consent on behalf of the older person  Client does not attend the session. | **Scenario:** Bob is 77 years old and lives with his son, Tim. Tim attends an initial meeting on behalf of Bob for the Specialist Elder Abuse Services. Bob is unable to provide informed consent on his own, but Tim does have authority to provide consent on Bob’s behalf. Tim provides your organisation with Bob’s personal details, and agrees on Bob’s behalf to participate in the program.  **Who is the client?** Bob is the client.  **Action:** Create a case with Bob as the client. Collect and record Bob’s data in the Data Exchange as provided by Tim. Create a case with Bob as the client. Create a session with Bob as the client, even though he is not in attendance at this session.  **Who is the support person?** Tim is the support person.  **Action:** Collect and record data for Tim in the Data Exchange, and attach him to the session as a support person.  **Note –** Should Tim not provide consent for Bob to participate in the program, and Bob himself cannot provide informed consent, the case must be closed, as no further participation in the program is possible. |
| Scenario 5:  Older person not present  Support person does not have authority to consent on behalf of the older person  Older person provides consent and personal details via telephone. | **Scenario:** Jill is 95 years old and has a daughter Mary, who is 67 years old. Mary attends an initial Specialist Elder Abuse Service on behalf of Jill, but does not have authority to provide consent on Jill’s behalf. While Mary is at your office, your organisation contacts Jill via phone and she provides her consent and personal details. During the phone call Jill has an initial discussion regarding her concerns.  **Who is the client?** Jill is the client. Mary would not meet the eligibility criteria to be a client even though she is over 65, as she is not the one experiencing or at risk of abuse.  **Action:** Create a case with Jill as the client. Collect and record Jill’s data in the Data Exchange. Record a session with Jill as the client, even though Jill is not physically in attendance at this session.  **Who is the support person?** Mary is the support person.  **Action:** Collect and record data for Mary in the Data Exchange. Attach Mary to the session created for Jill, and note Mary as attending the session as a support person. |
| Scenario 6:  Older person not present  It has not yet been established whether there is abuse, nor whether there is a willingness to participate  One family member has power of attorney but does not provide consent  Another family member is seeking assistance for the older person, but does not have authority. | **Scenario:** Ethel is 80 years old and lives with her son Bob, who has power of attorney. Ethel’s daughter Jane contacts your Specialist Elder Abuse Service on behalf of her mother Ethel, claiming financial abuse by her brother Bob. However, Jane does not have authority to provide consent on Ethel’s behalf. When contacted, Bob refuses to provide consent, and will not allow contact with his mother. Your organisation provides initial counselling and advice to Jane, and later meets with Bob separately.  **Who is the client?** Ethel is the client.  **Action:** A case is created with Ethel as an ‘unidentified’ client, as no individual details are available. Record sessions with one or more support persons until you are able to establish contact with Ethel, ascertain her personal details and willingness to participate in the program. At that point:   * create a client record for Ethel, and * remove the unidentified client from the case.   **Who is the support person?** Jane and Bob are the support persons for the purposes of the Data Exchange.  **Action:** Collect and record data for Jane and Bob in the Data Exchange. Attach the attending family member(s) as support persons at the relevant sessions.  **Note –** if, within agreed timeframes, no contact with the client can be made, and there is no reasonable prospect of obtaining consent for the primary client to participate in the program, family members are no longer eligible to participate in this program, but may be referred to other services or programs for further support and assistance. |
| Scenario 7:  A couple of older persons, initially not present, and no power of attorney is provided  One family member initiates contact with the service  Both older persons’ details are later recorded  It turns out the abuse is perpetrated by different people. | **Scenario A:** Fred (82 years old) and Wilma (79 years old) are married and live together in a nursing home. Their daughter Cynthia contacts your organisation seeking assistance for her parents who are allegedly both being abused by another relative (Mark). Cynthia provides her details and books an initial meeting with your organisation, but neither parent is present on that occasion.  **Who is the client?** Fred and Wilma are the clients.  **Action:** A case is initially created with both Fred and Wilma as ‘unidentified’ clients, as no individual details are available. Record sessions with one or more support persons until you are able to establish contact with Fred and Wilma, ascertain their personal details and willingness to participate in the program. At that point:   * create two client records, for Fred and Wilma respectively, and * remove the two unidentified clients from the case.   **Who is the support person?** Cynthia is the support person. (Mark may later also be recorded as a support person).  **Action:** Collect and record data for Cynthia (and Mark) in the Data Exchange. Attach the attending support person(s) to the relevant sessions.  **Scenario B:** It later turns out that Mark is indeed abusing Fred (financially), but also that Fred is abusing his wife Wilma (emotionally and physically).  **Action:** As there are now two separate elder abuse situations, a new case needs to be created. From this point, if Fred or Wilma both attend a session, the type of service delivered at that session would determine whether they attended as a client or a support person on that occasion. |

# Family Law Services

Family Law Services aims to improve family relationships in the best interests of children by providing alternatives to formal legal processes for families who are separated, separating or in dispute.

The following program activities are included in Family Law Services:

* Children’s Contact Services
* Family Dispute Resolution
* Regional Family Dispute Resolution
* Family Law Counselling
* Family Relationship Advice Line
* Family Relationship Centres
* Parenting Orders Program
* Supporting Children After Separation Program.

### Children’s Contact Services

**Description**

Children’s Contact Services enable children of separated parents to have safe contact with the parent they do not live with, in circumstances where parents are unable to manage their own contact arrangements. Where parents are not able to meet without conflict, Children’s Contact Services provide a safe, neutral venue for the transfer of children between separated parents. Where there is a perceived or actual risk to the child, this program provides supervised contact between a child and their parent or other family member. Parents may be ordered to attend a Children’s Contact Service by a court to facilitate changeover or have supervised visits with their children.

**Who is the primary client?**

This program is a universal service that provides support to separated families and children where high conflict, family violence, child safety or high risks are factors. Clients may include grandparents and other extended family members who care for children.

**What are the key client characteristics?**

Separating and separated couples, and family members, with children and young people in their care.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients; parents, guardians or nominated representatives (who are present but not directly receiving a service), case or support workers.

**Should unidentified clients be recorded?**

This program provides face-to-face support where clients are known to the service and safety is a priority, therefore it is expected that **5 per cent** of clients **or less** should be recorded as unidentified clients in each reporting period. This program may include group education, skills or information sessions as part of meeting the needs of separated parents in their community. However, organisations should collect registration details for each individual participant and record them as individual clients.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each family group. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate Cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills and behaviours |

**Collecting extended data**

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf or supporting a client in a particular circumstance. |
| Education and skills training | Assisting a client to learn or build knowledge about a topic or to develop and/or enhance a skill relevant to the client’s circumstance, such as parenting and communication skills. |
| Information/Advice/Referral | Provision of information about post-separation parenting where there is high conflict, family violence and/or safety concerns. Provision of referrals to relevant services, especially the Parenting Orders Program, Supporting Children After Separation Program and specialist family violence services. |
| Intake and assessment | Assessing a client in an initial session to determine needs and undertaking screening and risk assessment, including discussing the impact of family violence, safety concerns, and the need for a safety plan. Orientation sessions for parents and children are included in this service type. |
| Supervised change-over/contact | Supervised visits of children by a parent, guardian or carer, or the changeover of children to spend time with each parent, guardian or carer. |

**Specific Family Law Services data fields:**

| Specific family law field name | Description |
| --- | --- |
| Fees charged | Fees charged but not necessarily collected. If no fees were charged, enter a zero (0) amount. |

### Family Dispute Resolution

**Description**

Family Dispute Resolution services assist families to reach agreement and to resolve their disputes related to family law issues outside of the court system, including but not limited to: separation and divorce; children; and property. This includes assistance in improving post-separation relationships.

**Who is the primary client?**

This program activity is a universal service that assists families who are separating, separated or in dispute. Clients may include grandparents and other extended family members affected by family separation.

**What are the key client characteristics?**

Separating and separated couples, including those with or without children and young people in their care.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients or nominated representatives (who are present but not directly receiving a service), or legal representatives of clients.

**Should unidentified clients be recorded?**

Family Dispute Resolution provides support to clients who are known to the service, therefore it is expected that only **10 per cent of clients** **or less** should be recorded as unidentified clients in each reporting period. This program may include group education, skills or information sessions as part of meeting the needs of separated parents in their community, however, organisations should collect registration details for each individual participant and record them as individual clients where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each family group. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate Cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills and behaviours |

**Collecting extended data**

You may record extended client details, if you think it is appropriate for your program and for your clients to do so. See Protocols sections 6 and 11 for more information.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf or supporting the client in a particular circumstance. |
| Child/Youth focussed groups | Group work to assist the children and young people of separating parents. |
| Dispute resolution | Services helping families affected by separation to resolve their parenting disputes about post separation arrangements for children. This may include a child inclusive practice session. |
| Education and skills training | Workshops and training to educate separating families about post-separation parenting, conflict, dispute resolution and communication skills, and improving post-separation relationships. |
| Information/Advice/Referral | Provision of information about post-separation parenting.  Provision of referrals to another Family Law Service or other relevant service. |
| Intake and assessment | Assessing a client in an initial session to determine needs, undertaking screening and risk assessment and discussion around confidentiality. |
| Property mediation | Services helping families affected by separation to resolve arrangements for the splitting of their property, including finances. |

**Specific Family Law Services data fields:**

| Specific family law field name | Description |
| --- | --- |
| Parenting agreement  reached: full | Any parenting agreement reached, whether oral or written, where the parties have agreed all parenting matters in dispute. This can include a formal parenting plan signed and dated by both parents in compliance with the Family Law Act section 63C. Agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Parenting agreement reached: partial | A written or oral agreement between the parties of some of the parenting matters in dispute. Can include a parenting plan, where some of the matters in dispute are agreed upon between the parties, but not all issues are resolved. |
| Parenting agreement: not reached | Where the parenting matter/s in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial parenting agreement. |
| Did a legal practitioner assist in parenting mediation sessions? | Where a legal practitioner is present and participates in parenting mediation sessions (legally-assisted family dispute resolution). |
| Section 60I certificate type | Please use the certificate categories in the Family Law (Family Dispute Resolution Practitioners) Regulations 2008 Regulation Schedule 1 (a) to (e). |
| Date of certificate issued | This item is related to the Section 60(I) certificate question and records the date the Section 60(I) certificate was issued. |
| Property agreement reached: full | Any property agreement reached, whether written or oral, where the parties have agreed all property matters in dispute. Written agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Property agreement reached: partial | A written or oral agreement between the parties of some of the property matters in dispute. Not all property matters in dispute are resolved. |
| Property agreement reached: not reached | Where the property matters in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial property agreement. |
| Did a legal practitioner assist in property mediation sessions? | Where a legal practitioner is present and participates in property mediation sessions (legally-assisted property mediation). |
| Fees charged | Fees charged but not necessarily collected for family dispute resolution or property mediation. If no fees were charged, enter a zero (0) amount. |

### Regional Family Dispute Resolution

**Description**

Regional Family Dispute Resolution services assist families to reach agreement and to resolve their disputes related to family law issues outside of the court system, including but not limited to; separation and divorce, children, and property. This may also include the provision of counselling and group work as part of meeting the needs of separated families in their community.

**Who is the primary client?**

This program activity is a universal service that assists families who are separating, separated or in dispute. Clients may include grandparents and other extended family members affected by family separation.

**What are the key client characteristics?**

* Separating and separated couples with children and young people in their care, and
* Families in regional, rural and remote areas.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients or nominated representatives (who are present but not directly receiving a service), or legal representatives of clients.

**Should unidentified clients be recorded?**

Regional Family Dispute Resolution provides support to clients who are known to the service, therefore it is expected that **10 per cent** of clients **or less** should be recorded as unidentified clients in each reporting period. This program may include group education, skills or information sessions as part of meeting the needs of separated parents in their community, however, organisations should collect registration details for each individual participant and record them as individual clients where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each family group. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate Cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

The SCORE areas listed below have been identified as the most relevant for this program. In addition, organisations can choose to record outcomes against any other domains that are relevant for the client.

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills and behaviours |

**Collecting extended data**

You may record extended client details, if you think it is appropriate for your program and for your clients to do so. See Protocols sections 6 and 11 for more information.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf or supporting the client in a particular circumstance. |
| Child/Youth focussed groups | Group work to assist children and young people in separating families. |
| Counselling | Working through a particular issue such as relationship, separation and parenting concerns, as delivered by a person authorised to provide ‘family counselling’ as defined under the Family Law Act. |
| Dispute resolution | Services helping families affected by separation to resolve their parenting disputes about post separation arrangements for children. This may include a child inclusive practice session. |
| Education and skills training | Workshops and training to educate separating families about post separation parenting, conflict, dispute resolution and communication skills, improving post-separation relationships and other relevant skills. |
| Information/Advice/Referral | Provision of information about post-separation parenting.  Provision of referrals to another Family Law Service or other relevant service. |
| Intake and assessment | Assessing a client in an initial session to determine needs, undertaking screening and risk assessment, and discussion around confidentiality. |
| Property mediation | Services helping families affected by separation to resolve arrangements for the splitting of their property, including finances. |

**Specific Family Law Services data fields:**

| Specific family law field name | Description |
| --- | --- |
| Parenting agreement reached: full | Any parenting agreement reached, whether oral or written, where the parties have agreed all parenting matters in dispute. This can include a formal parenting plan signed and dated by both parents in compliance with the Family Law Act section 63C. Agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Parenting agreement  reached: partial | A written or oral agreement between the parties of some of the parenting matters in dispute. Can include a parenting plan, where some of the matters in dispute are agreed upon between the parties, but not all issues are resolved. |
| Parenting agreement: not reached | Where the parenting matter/s in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial parenting agreement. |
| Did a legal practitioner assist in parenting mediation sessions? | Where a legal practitioner is present and participates in parenting mediation sessions (legally-assisted family dispute resolution). |
| Section 60I certificate type | Please use the certificate categories in the Family Law (Family Dispute Resolution Practitioners) Regulations 2008 Regulation Schedule 1 (a) to (e). |
| Date of certificate issued | This item is related to the Section 60(I) certificate question and records the date the Section 60(I) certificate was issued. |
| Property agreement reached: full | Any property agreement reached, whether written or oral, where the parties have agreed all property matters in dispute. Written agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Property agreement reached: partial | A written or oral agreement between the parties of some of the property matters in dispute. Not all property matters in dispute are resolved. |
| Property agreement reached: not reached | Where the property matters in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial property agreement. |
| Did a legal practitioner assist in property mediation sessions? | Where a legal practitioner is present and participates in property mediation sessions (legally-assisted property mediation). |
| Fees charged | Fees charged but not necessarily collected for family dispute resolution or property mediation. If no fees were charged, enter a zero (0) amount. |

### Family Law Counselling

**Description**

Family Law Counselling services help people with relationship difficulties better manage their personal or interpersonal issues, relating to children and family during marriage, separation and divorce.

**Who is the primary client?**

This program activity is a universal service for family members with intact relationships, separated families, extended family members, individuals, children and young people, couples and significant others such as grandparents and kinship carers who have caring or other relationship responsibilities.

**What are the key client characteristics?**

Separating and separated couples, including those with or without children and young people in their care.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients or nominated representatives (who are present but not directly receiving a service), or a case or support worker.

**Should unidentified clients be recorded?**

Family Law Counselling provides face-to-face support where clients are known to the service, therefore it is expected that only **5 per cent** of clients **or less** should be recorded as unidentified clients in each reporting period. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each family group. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate Cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

The SCORE areas listed below have been identified as the most relevant for this program. In addition, organisations can choose to record outcomes against any other domains that are relevant for the client.

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills and behaviours |

**Collecting extended data**

You may record extended client details, if you think it is appropriate for your program and for your clients to do so. See Protocols sections 6 and 11 for more information.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf or supporting the client in a particular circumstance. |
| Child/Youth focussed groups | Group work to assist children and young people in separating families. |
| Counselling | Working through a particular issue such as relationship, separation and parenting concerns, as delivered by a person authorised to provide ‘family counselling’ as defined under the Family Law Act. |
| Dispute resolution | Services helping families affected by separation to resolve their parenting disputes about post separation arrangements for children. This may include a child inclusive practice session. |
| Education and skills training | Assisting a client to learn or build knowledge about a topic or to develop and/or enhance a skill relevant to the client’s circumstance, such as parenting and communication skills. |
| Information/Advice/Referral | Provision of information about a family or relationship issue.  Provision of referrals to another Family Law Service, such as family dispute resolution, or other relevant services. |
| Intake and assessment | Assessing a client in an initial session to determine needs, undertaking screening and risk assessment. |
| Property mediation | Services helping families affected by separation to resolve arrangements for the splitting of their property, including finances. |

**Specific Family Law Services data fields:**

| Specific family law field name | Description |
| --- | --- |
| Parenting agreement reached: full | Any parenting agreement reached, whether oral or written, where the parties have agreed all parenting matters in dispute. This can include a formal parenting plan signed and dated by both parents in compliance with the Family Law Act section 63C. Agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Parenting agreement  reached: partial | A written or oral agreement between the parties of some of the parenting matters in dispute. Can include a parenting plan, where some of the matters in dispute are agreed upon between the parties, but not all issues are resolved. |
| Parenting agreement: not reached | Where the parenting matter/s in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial parenting agreement. |
| Did a legal practitioner assist in parenting mediation sessions? | Where a legal practitioner is present and participates in parenting mediation sessions (legally-assisted family dispute resolution). |
| Section 60I certificate type | Please use the certificate categories in the Family Law (Family Dispute Resolution Practitioners) Regulations 2008 Regulation Schedule 1 (a) to (e). |
| Date of certificate issued | This item is related to the Section 60(I) certificate question and records the date the Section 60(I) certificate was issued. |
| Property agreement reached: full | Any property agreement reached, whether written or oral, where the parties have agreed all property matters in dispute. Written agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Property agreement reached: partial | A written or oral agreement between the parties of some of the property matters in dispute. Not all property matters in dispute are resolved. |
| Property agreement reached: not reached | Where the property matters in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial property agreement. |
| Did a legal practitioner assist in property mediation sessions? | Where a legal practitioner is present and participates in property mediation sessions (legally-assisted property mediation). |
| Fees charged | Fees charged but not necessarily collected for family dispute resolution or property mediation. If no fees were charged, enter a zero (0) amount. |

### Family Relationship Advice Line

**Description**

The Family Relationship Advice Line is a national, telephone-based service which aims to help families at all stages of their lives. It provides a range of information and advice on maintaining healthy relationships, family separation, the impacts of conflict on children and developing workable parenting arrangement after separation. This program also provides family dispute resolution, simple legal advice and referrals to a range of services.

**Who is the primary client?**

This program is a universal service that supports anyone affected by family relationship or separation issues and difficulties including parents, grandparents, carers, children, young people, step-parents and/or friends.

**What are the key client characteristics?**

People affected by family relationship or separation issues and difficulties including parents, grandparents, carers, children, young people, step-parents and/or friends.

**Who might be considered ‘support persons’?**

Support persons are unlikely to be relevant for calls to the Family Relationship Advice Line.

**Should unidentified clients be recorded?**

Unidentified clients should be limited for the Family Relationship Advice Line. However, unidentified clients may be recorded for calls where collecting individual client level data is not possible. It is expected that **10 per cent** of your clients **or less** should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. The organisation should create cases that reflect their own administrative processes.

**The partnership approach**

For the **telephone and online dispute resolution** component of this activity, participation in the “partnership approach” is a requirement of funding. Organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports. For other components of this program, participation in the partnership approach is voluntary.

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

Organisations can choose to record outcomes against any domains that are relevant for the client; however the Family Relationship Advice Line is more likely to influence shorter term outcomes for clients (Goal SCORE) with regards to their knowledge and access to information, rather than longer term changes to their circumstances.

For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | None of the Community outcomes are relevant for this program activity |

**Collecting extended data**

You may record extended client details, if you think it is appropriate for your program and for your clients to do so. See Protocols sections 6 and 11 for more information.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf, or supporting the client in a particular circumstance. |
| Counselling | Working through a particular issue such as relationship concerns or financial concerns, as delivered by a person authorised to provide ‘family counselling’ as defined under the Family Law Act. |
| Dispute resolution | Telephone and Online Dispute Resolution Service. Services helping families affected by separation to resolve their parenting disputes about post separation arrangements for children. May include a child inclusive practice session. |
| Information/Advice/Referral | Provision of advice and guidance. Provision of referrals to other Family Law Services and other relevant services. |
| Intake and assessment | Assessment of the client and gaining understanding of which Family Law Services may be useful for them. Screening and Risk Assessment. |
| Legal advice | Provision of legal advice on family law issues (parenting and/or property issues), including advice to family law services practitioners. |
| Property mediation | Services helping families affected by separation to resolve arrangements for the splitting of their property, including finances. |

**Specific Family Law Services data fields:**

| Specific family law field name | Description |
| --- | --- |
| Parenting agreement reached: full | Any parenting agreement reached, whether oral or written, where the parties have agreed all parenting matters in dispute. This can include a formal parenting plan signed and dated by both parents in compliance with the Family Law Act section 63C. Agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Parenting agreement  reached: partial | A written or oral agreement between the parties of some of the parenting matters in dispute. Can include a parenting plan, where some of the matters in dispute are agreed upon between the parties, but not all issues are resolved. |
| Parenting agreement: not reached | Where the parenting matter/s in dispute are not resolved |
| Date of agreement | The date when the parties reached either the full or partial parenting agreement. |
| Did a legal practitioner assist in parenting mediation sessions? | Where a legal practitioner is present and participates in parenting mediation sessions (legally-assisted family dispute resolution). |
| Section 60I certificate type | Please use the certificate categories in the Family Law (Family Dispute Resolution Practitioners) Regulations 2008 Regulation Schedule 1 (a) to (e). |
| Date of certificate issued | This item is related to the Section 60(I) certificate question and records the date the Section 60(I) certificate was issued. |
| Property agreement reached: full | Any property agreement reached, whether written or oral, where the parties have agreed all property matters in dispute. Written agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Property agreement reached: partial | A written or oral agreement between the parties of some of the property matters in dispute. Not all property matters in dispute are resolved. |
| Property agreement reached: not reached | Where the property matters in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial property agreement. |
| Did a legal practitioner assist in property mediation sessions? | Where a legal practitioner is present and participates in property mediation sessions (legally-assisted property mediation). |
| Fees charged | Fees charged but not necessarily collected for family dispute resolution and property mediation. If no fees were charged, enter a zero (0) amount. |

### Family Relationship Centres

**Description**

Family Relationship Centres enable families to access information about family relationships at all stages – forming new relationships, overcoming relationship difficulties or dealing with separation. Family Relationship Centres also refer families to other services that help people deal with a wide range of family issues.

Family Relationship Centres provide intact families with assistance with relationship and parenting skills through appropriate information and referral, and assist separating families to achieve workable parenting arrangements (outside the court system) by providing information, support, referral and dispute resolution services; delivering high‑quality, timely, safe and ethical services.

**Who is the primary client?**

This program is a universal service that supports anyone affected by family relationship or separation issues and difficulties including parents, grandparents, carers, children, young people, step-parents and/or friends.

**What are the key client characteristics?**

Separating and separated couples, including those with or without children and young people in their care.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients or nominated representatives (who are present but not directly receiving a service), or a case or support worker.

**Should unidentified clients be recorded?**

Family Relationship Centres provide support to clients who are known to the service, therefore it is expected that only **10 per cent** of clients **or less** should be recorded as unidentified clients in each reporting period.

This program may include group education, skills or information sessions as part of meeting the needs of separated parents in their community, however, organisations should collect registration details for each individual participant and record them as individual clients where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each family group. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate Cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills and behaviours |

**Collecting extended data**

You may record extended client details, if you think it is appropriate for your program and for your clients to do so. See Protocols sections 6 and 11 for more information.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf, or supporting the client in a particular circumstance. |
| Child/Youth focussed groups | Sessions targeted at children or young people, and delivered in a group, rather than individual basis. |
| Community capacity building | Sessions delivered to large groups/community groups to improve understanding of a topic or to develop referral networks, relationships of trust and cooperation with local communities. |
| Dispute resolution | Services helping families affected by separation to resolve their parenting disputes about post separation arrangements for children. May include a child inclusive practice session. |
| Education and skills training | Workshops and training to educate separating families about post separation parenting, conflict, dispute resolution and communication skills, improving post separation relationships and other relevant skills. |
| Information/Advice/Referral | Provision of information about post-separation parenting. Provision of referrals to another Family Law Service or other relevant service. |
| Intake and assessment | Assessing a client in an initial session to determine needs, undertaking screening and risk assessment, and discussion around confidentiality. |
| Property mediation | Services helping families affected by separation to resolve arrangements for the splitting of their property, including finances. |

**Specific Family Law Services data fields:**

| Specific family law field name | Description |
| --- | --- |
| Parenting agreement reached: full | Any agreement reached, whether oral or written, where the parties have agreed all the parenting matters in dispute. This can include a formal parenting plan, signed and dated by both parents in compliance with the Family Law Act section 63C. Agreements where the parties are in full agreement but do not sign and date it should also be included here. |
| Parenting agreement reached: partial | A written or oral agreement between the parties of some of the parenting matters in dispute. Can include a parenting plan, where some of the matters in dispute are agreed upon between the parties, but not all issues are resolved. |
| Parenting agreement: not reached | Where the parenting matter/s in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial parenting agreement. |
| Did a legal practitioner assist in parenting mediation sessions? | Where a legal practitioner is present and participates in the parenting mediation sessions (legally-assisted family dispute resolution). |
| Section 60I certificate type | Please use the certificate categories in the Family Law (Family Dispute Resolution Practitioners) Regulations 2008 Regulation Schedule 1 (a) to (e). |
| Date of certificate issued | This item is related to the Section 60(I) certificate question and records the date the Section 60(I) certificate was issued. |
| Property agreement reached: full | Any property agreement reached, whether written or oral, where the parties have agreed all property matters in dispute. Written agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Property agreement reached: partial | A written or oral agreement between the parties of some of the property matters in dispute. Not all property matters in dispute are resolved. |
| Property agreement reached: not reached | Where the property matters in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial property agreement. |
| Did a legal practitioner assist in property mediation sessions? | Where a legal practitioner is present and participates in property mediation sessions (legally-assisted dispute resolution). |
| Fees charged | Fees charged but not necessarily collected for family dispute resolution or property mediation.If no fees were charged, enter a zero (0) amount. |

### Parenting Orders Program

**Description**

The Parenting Orders Program assists separated families in high conflict to work out parenting arrangements in a manner which encourages consideration of what is in a child’s best interests. The program allows the establishment or maintenance of relationships while also ensuring the safety of all parties. It helps parents understand the effect their conflict is having on their children, and how to develop strategies to constructively develop and manage parenting arrangements.

**Who is the primary client?**

Primary clients for this program activity are children and families. The Parenting Orders Program uses a variety of child-focused and child inclusive interventions and works where possible with all members of the family.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients who are present but not directly receiving a service.

**Should unidentified clients be recorded?**

The Parenting Orders Program provides face-to-face support where clients are known to the service, therefore it is expected that only **5 per cent** of clients **or less** should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each family group. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate Cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

Organisations can choose to record outcomes against any domains that are relevant for the client; however the Family Relationship Advice Line is more likely to influence shorter term outcomes for clients (Goal SCORE) with regards to their knowledge and access to information, rather than longer term changes to their circumstances.

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills and behaviours |

**Collecting extended data**

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf, or supporting the client in a particular circumstance. |
| Child/Youth focussed groups | Group work to assist the children and young people of separating parents. |
| Counselling | Working through a particular issue such as relationship, separation and parenting concerns, as delivered by a person authorised to provide ‘family counselling’ as defined under the Family Law Act. |
| Dispute resolution | Services helping families affected by separation to resolve their parenting disputes about post separation arrangements for children. This may include child inclusive practice session. |
| Education and skills training | Workshops and training to educate separating families about post separation parenting, conflict and dispute resolution, communication skills, and improving post separation relationships. |
| Intake and assessment | Assessing a client in an initial session to determine needs, undertaking screening and risk assessment and discussion around confidentiality. |
| Information/Advice/Referral | Provision of information about post-separation parenting. Provision of referrals to another Family Law service or other relevant service. |
| Property mediation | Services helping families affected by separation to resolve arrangements for the splitting of their property, including finances. |

**Specific Family Law Services data fields:**

| Specific family law field name | Description |
| --- | --- |
| Parenting agreement reached: full | Any parenting agreement reached, whether oral or written, where the parties have agreed all the parenting matters in dispute. This can include a formal parenting plan, signed and dated by both parents in compliance with the Family Law Act section 63C. Agreements where the parties are in full agreement but do not sign and date it should also be included here. |
| Parenting agreement reached: partial | A written or oral agreement between the parties of some of the parenting matters in dispute. Can include a parenting plan, where some of the matters in dispute are agreed upon between the parties, but not all issues are resolved. |
| Parenting agreement: not reached | Where the parenting matter/s in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial parenting agreement. |
| Did a legal practitioner assist in parenting mediation sessions? | Where a legal practitioner is present and participates in the parenting mediation sessions (legally-assisted family dispute resolution). |
| Section 60I certificate type | Please use the certificate categories in the Family Law (Family Dispute Resolution Practitioners) Regulations 2008 Regulation Schedule 1 (a) to (e). |
| Date of certificate issued | This item is related to the Section 60(I) certificate question and records the date the Section 60(I) certificate was issued. |
| Property agreement reached: full | Any property agreement reached, whether written or oral, where the parties have agreed all property matters in dispute. Written agreements where the parties are in full agreement but do not sign and date should also be included here. |
| Property agreement reached: partial | A written or oral agreement between the parties of some of the property matters in dispute. Not all property matters in dispute are resolved. |
| Property agreement reached: not reached | Where the property matters in dispute are not resolved. |
| Date of agreement | The date when the parties reached either the full or partial property agreement. |
| Did a legal practitioner assist in property mediation sessions? | Where a legal practitioner is present and participates in property mediation sessions (legally-assisted dispute resolution). |
| Fees charged | Fees charged but not necessarily collected for family dispute resolution or property mediation. If no fees were charged, enter a zero (0) amount. |

### Supporting Children after Separation

**Description**

The Supporting Children after Separation Program aims to support the wellbeing of children under the age of 18 years experiencing separated or separating families, and difficult family relationships. The program helps children to address relationship issues arising from these circumstances and provides opportunities for them to participate in decisions that impact upon them.

The Supporting Children after Separation Program provides a range of age-appropriate interventions including individual counselling and group work for children. Services can also facilitate access for families to child inclusive practice as a component of family dispute resolution where assessed as appropriate.

**Who is the primary client?**

Primary clients for this program activity are children of separated parents and their families.

**What are the key client characteristics?**

* Children of separating and separated couples.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients (who are present but not directly receiving a service), or a case or support worker.

**Should unidentified clients be recorded?**

The Supporting Children after Separation Program provides face-to-face support where clients are known to the service, therefore it is expected that **10 per cent** of clients **or less** should be recorded as unidentified clients in each reporting period.

This program may include the provision of group work for children; however organisations should collect individual client details where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations can create a separate case for each family group. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate Cases, organisations should use other identifying descriptions, such as ‘FamilyA24’ or ‘Family Group 26’.

**The partnership approach**

For this program, all organisations are required to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

Organisations can choose to record outcomes against any domains that are relevant for the client; however the Family Relationship Advice Line is more likely to influence shorter term outcomes for clients (Goal SCORE) with regards to their knowledge and access to information, rather than longer term changes to their circumstances.

For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Age-appropriate development * Family functioning * Mental health, wellbeing and self-care * Personal and family safety | All six Goal outcomes are relevant for this program activity | All three Satisfaction outcomes are relevant for this program activity | * Group/community knowledge, skills and behaviours |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Advocating on a client’s behalf or supporting the client in a particular circumstance. |
| Child/Youth focussed groups | Group work to assist the children and young people of separating parents. |
| Counselling | Working through a particular issue such as relationship, separation and parenting concerns, as delivered by a person authorised to provide ‘family counselling’ as defined under the Family Law Act. |
| Education and skills training | Workshops and training to educate separating families about post separation parenting, conflict, dispute resolution and communication skills, and improving post separation relationships. |
| Information/Advice/Referral | Provision of information about post-separation issues. Provision of referrals to another Family Law service or other relevant service. |
| Intake and assessment | Assessing a client in an initial session to determine needs, undertaking screening and risk assessment and discussion around confidentiality. |

**Specific Family Law Services data fields:**

| Specific family law field name | Description |
| --- | --- |
| Fees charged | Fees charged but not necessarily collected for family dispute resolution or property mediation. If no fees were charged, enter a zero (0) amount. |

# DEPARTMENT OF HEALTH

# Commonwealth Home Support Programme

The Commonwealth Home Support Programme (CHSP) includes four distinct sub-programs. These are based on the program’s four target groups:

* Assistance with Care and Housing – Hoarding and Squalor
* Care Relationships and Carer Support
* Community and Home Support, and
* Sector Support and Development\*

Each sub-program has its own objective, eligibility criteria and service types. This approach helps to target services and supports and enable grant recipients to respond more flexibly to their clients’ needs.

Under the CHSP Whole of Government Grant Agreement, grant recipients receive funding to deliver specified outputs against one or a combination of service types under each sub-program. More information about these sub-programs is available in the [CHSP Manual](https://agedcare.health.gov.au/ageing-and-aged-care-publications-and-articles-fact-sheets/commonwealth-home-support-programme-programme-manual-2015).

The following pages provide practical guidance on data entry for CHSP activities. General information on how to report under the Data Exchange, including how to report client or outlet information, information on how to upload your data, privacy and technical specifications are outlined in the Data Exchange Protocols.

\*The fourth sub-program ‘Sector Support and Development’ does not use the Data Exchange for performance reporting, and therefore is not included in the above list or subsequent information.

### Assistance with Care and Housing sub-program

**Description**

ACH – Hoarding and Squalor supports older Australians who are at risk of homelessness, to access appropriate support services, specifically targeted at avoiding homelessness or enabling them to receive the aged care services they need.

**Who is the primary client?**

The target population is frail older, or prematurely aged, people who meet each of the following three criteria:

1. On a low income.
2. Living with hoarding behaviour and/or in a squalid living environment.
3. At risk of homelessness and/or unable to receive the aged care services they need.

**What are the key client characteristics?**

* Frail older people aged 65 years and over (or 50 years and over for those that identify as Aboriginal and/or Torres Strait Islander).
* Prematurely aged people are those aged 50 years and over (or 45 years and over for those that identify as Aboriginal and/or Torres Strait Islander) whose life course such as active military service, homelessness or substance abuse, has seen them age prematurely.

The person being assessed for assistance under the sub-program, and who must meet the sub-program eligibility requirement is regarded as the Principal Client. Refer to the CHSP Manual for more information on sub-program eligibility and co-habiting clients.

**Who might be considered ‘support persons’?**

Support persons are not in-scope for this sub-program.

**Should unidentified clients be recorded?**

The ACH – Hoarding and Squalor sub-program has limited use for unidentified clients. This sub-program provides face-to-face support where clients are known to the service, therefore it is expected that **no more than 5 per cent** of your clients should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**Is there a recommended naming convention for outlets?**

There is no recommended naming convention for outlets under this program activity; however, Organisations can align their outlets to those listed in the My Aged Care service finder. When creating, naming or renaming/maintaining your outlets, please consider guidelines stated in the Data Exchange Protocols.

**How should cases be set up?**

There is no formal case structure recommended for this sub-program activity. However, organisations can create a separate case for each individual accessing services. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 1286. This works well for ongoing one-on-one contact with clients.

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Education and skills training * Employment * Housing * Financial resilience * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Personal and family safety | * Changed knowledge and access to information * Changed behaviours * Changed skills * Empowerment, choice & control to make own decisions * Engagement with relevant support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

Each session recorded can only have one service type. Select the service type that best reflects the intent of the session, or the primary focus of that session. Each service type is listed in Appendix A of the Data Exchange [Protocols](https://dex.dss.gov.au/policy-guidance/dex_data_exchange_protocols/), and further defined in the [CHSP Manual](https://agedcare.health.gov.au/ageing-and-aged-care-publications-and-articles-fact-sheets/commonwealth-home-support-programme-programme-manual-2015). The Data Exchange is designed to capture client-facing services and interactions, therefore outputs reported should not include outputs multiplied by the number of attendees, should more than one client attend the session.

Note: The Data Exchange calculates outputs by clients in attendance, as such only the actual hours and minutes delivered in real time should be recorded. See notes and working examples at Table 2.

**Table 1: Example of service type use within this sub-program activity**

| Service Type | Examples of service types used for this sub-program activity and measures reported |
| --- | --- |
| Assistance with Care and Housing | Hoarding and squalor.  Measure reported: time (recorded in hours and minutes) as actually delivered.  **Note: reporting Assessment – referrals, advocacy – Financial, Legal will no longer be available from 1 January 2023.** |
| Domestic assistance (ACH) | General House Cleaning, Unaccompanied Shopping (delivered to home), Linen Services.  Measures reported: Time (recorded in hours and minutes) as actually delivered. |
| Goods, equipment and assistive technology (ACH) | Car Modifications, Communication Aids, Medical Care Aids, Reading Aids, Self-Care Aids, Support and Mobility Aids.  This is an emergency provision only. CHSP service providers should not report Goods, Equipment and Assistive Technology outputs under the Assistance with Care and Housing Sub-Program unless directed by the Department of Health.  Personal alarms and home monitoring devices should be captured using the Other Goods and Equipment service type.  Measures reported: Quantity – number of items purchased or loaned; Cost in dollars – of the amount service provider spent (general cap of $1000 per client per year. Refer to the CHSP Manual for more information); Client contribution amount (recorded in Fees field).  Additional notes: Each time an item of equipment or goods is provided to the client, it should be recorded under the relevant sub-service type (e.g. Other Goods and Equipment, etc.). It does not matter if the organisation lends or purchases the item for the client it will still be recorded using these categories. |
| Social support - Individual (ACH) | Visiting, Telephone/Web Contact, Accompanied Activities such as shopping or appointments.  Measures reported: Time (recorded in hours and minutes) as actually delivered. |
| Meals (ACH) | Meals prepared and delivered to client’s at home; Meals provided at Centre or other setting.  Measures reported: Quantity – Number of meals provided.  Additional note: The term ‘Meals’ recognises and includes all varieties of service models in operation, including the provision of main meals such as two and three course lunches and dinners and complementary meal options such as breakfast and snack packs.  For example, if a provider delivered a two-course meal (e.g. a main and dessert) this would be considered as one meal, even if the client chooses to eat the meal at separate occasions or on different days. Similarly, if a provider delivered a larger portion to a client, but it was still intended to be a part of the same meal, for reporting purposes, this would also be counted as one meal.  By contrast, if a provider delivered dinners intended for two meals across the week, this would be considered two meals. |

**Table 2: Worked examples of reporting outputs and client contributions**

| Example | Worked examples of reporting outputs and client contributions |
| --- | --- |
| Scenario 1:  Individual session | **Scenario:** Margo assists one of her clients for assistance with Hoarding and Squalor. Margo undertakes a 1 hour session for one client. In this instance, Margo can create 1 session.  **Session 1:** Time entered as 1 hour; 1 client linked to this session  **Total outputs reflected in the CHSP Organisation Overview Report for this session: 1 hour, 0 minutes.** |
| Scenario 2:  Session with multiple clients – same amount of time spent delivering services for each client | **Scenario:** Margo assists 3 clients in a day and spent an equal amount of time for each client. In total the session went for 1 hour, 30 minutes (or 30 minutes per client). In this instance, Margo can create 1 session as the duration spent assisting each client was the same within the session.  Session 1: Time entered as 30 minutes; 3 clients linked to the session  **Total outputs reflected in the CHSP Organisation Overview Report for this session: 1 hour, 30 minutes.**  Alternatively, Margo could enter 3 sessions – one foreach client:  Session 1: Time entered as 30 minutes; 1 client linked to this session  Session 2: Time entered as 30 minutes; 1 client linked to this session  Session 3: Time entered as 30 minutes; 1 client linked to this session  **Total outputs reflected in the CHSP Organisation Overview Report for the three sessions: 1 hour, 30 minutes.** |
| Scenario 3:  Session with multiple clients – different amount of time spent delivering services for each client | **Scenario:** Margo assisted 3 clients in a day but spent different amounts of time advocating for each client, ranging from 30 minutes to 2 hours. In this instance, Margo **cannot** create 1 session as the time spent for each client varied within the same session.  Session 1: Time entered as 30 minutes; 1 client linked to this session  Session 2: Time entered as 1 hour; 1 client linked to this session  Session 3: Time entered as 2 hours; 1 client linked to this session  **Total outputs reflected in the CHSP Organisation Overview Report for the three sessions: 3 hours, 30 minutes.** |

### Care Relationships and Carer Support sub-program

**Description**

The Care Relationships and Carer Support sub-program supports and maintains care relationships between carers and client, through providing good quality respite care for frail, older people so that regular carers can take a break.

**Who is the primary client?**

Frail, older clients aged 65 years and over (or 50 years and over for Aboriginal and/or Torres Strait Islander people) will be the recipients of planned respite services, providing their carers with a break from their regular caring duties.

From January 2022, carers will have better access to early intervention support (via Carer [Gateway](https://www.carergateway.gov.au/)) and access to additional CHSP respite services (Flexible respite and Centre-based respite). These additional services will help to reduce carer stress and support the care relationship.

Services offered through Carer Gateway, which is funded through the Department of Social Services, focus on early-intervention and, preventative and skills building supports. Carer Gateway aims to improve well-being and long-term outcomes of the care relationship, as well as crisis support when needed.

**What are the key client characteristics?**

* People aged 65 years and over (or 50 years and over for those that identify as Aboriginal and/or Torres Strait Islander).

**Who might be considered ‘support persons’?**

Support persons are not in-scope for this sub-program.

**Should unidentified clients be recorded?**

The Care Relationships and Carer Support sub-program has limited use for unidentified clients. This sub-program provides face-to-face support where clients are known to the service, therefore it is expected that **no more than 5 per cent** of your clients should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/policy-guidance/dex_data_exchange_protocols/) for further guidance on appropriate use of unidentified clients.

**Is there a recommended naming convention for outlets?**

There is no recommended naming convention for outlets under this program activity; however, Organisations can align their outlets to those listed in the My Aged Care service finder. When creating, naming or re-naming/maintaining your outlets, please consider guidelines stated in the Data Exchange Protocols.

**How should cases be set up?**

There is no formal case structure recommended for this sub-program activity. However, organisations can create a separate case for each individual accessing services. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 1286. This works well for ongoing one-on-one contact with clients.

For organisations that deliver services in group settings (such as centre-based respite or a community access group), cases can also be created to record these interactions, and should be titled in a way that allows staff to easily enter data and use the case over multiple reporting periods, e.g. Case ID = ‘Drop in centre-based respite’.

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant for the client. For this sub‑program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and training * Employment * Family functioning * Mental health, wellbeing and self-care * Personal and family safety * Physical health | * Changed knowledge and access to information * Changed behaviours * Changed skills * Empowerment, choice & control to make own decisions * Engagement with relevant support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

Each session recorded can only have one service type. Select the service type that best reflects the intent of the session, or the primary focus of that session. Each service type is listed in Appendix A of the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/), and further defined in the [CHSP Manual](https://agedcare.health.gov.au/ageing-and-aged-care-publications-and-articles-fact-sheets/commonwealth-home-support-programme-programme-manual-2015).

The Data Exchange is designed to capture client-facing services and interactions, therefore outputs reported should not include outputs that have been multiplied by the number of attendees (should more than one client attend the session).

Note: The Data Exchange calculates outputs by clients in attendance, as such only the actual hours and minutes delivered in real time should be recorded. See notes and working examples at Table 2.

**Table 1: Example of service type use within this sub-program activity**

| Service Type | Examples of service type use for this sub-program activity and measures reported |
| --- | --- |
| Flexible Respite | Community Access – Individual Respite, Host Family day Respite, Host-Family Overnight Respite, In-Home Day Respite, Mobile Respite, Other Planned Respite  Measures reported: time (recorded in hours and minutes) as actually delivered; Fees Received (recorded as whole dollars). |
| Centre Based Respite | Centre-Based Day Respite, Community Access – Group, Residential Day Respite  Measures reported: time (recorded in hours and minutes) as actually delivered; Fees Received (recorded as whole dollars). |
| Cottage Respite | Overnight community respite  Measures reported: Time (recorded in hours and minutes delivered in a night) as actually delivered; Fees Received (recorded as whole dollars). |
| Domestic assistance (Respite) | This is an emergency provision only. CHSP service providers should not report Domestic Assistance outputs under the Care Relationships and Carer Support Sub-Program unless directed by the Department of Health.  Unaccompanied Shopping (delivered to home).  Measures reported: Time (recorded in hours and minutes) as actually delivered; Client contribution amount (recorded in Fees field). |
| Goods, equipment and assistive technology (Respite) | Car Modifications, Communication Aids, Medical Care Aids, Reading Aids, Self-Care Aids, Support and Mobility Aids.  This is an emergency provision only. CHSP service providers should not report Goods, Equipment and Assistive Technology outputs under the Care Relationships and Carer Support Sub-Program unless directed by the Department of Health.  Personal alarms and home monitoring devices captured using the Other Goods and Equipment service type.  Measures reported: Quantity – number of items purchased or loaned; Cost in dollars – of the amount service provider spent (general cap of $1,000 per client per year. Refer to the CHSP Manual for more information); Client contribution amount (recorded in Fees field).  Additional notes: Each time an item of equipment or goods is provided to the client, it should be recorded under the relevant sub-service type (e.g. Other Goods and Equipment, etc.). It does not matter if the organisation lends or purchases the item for the client it will still be recorded using these categories. |
| Social support - Individual (Respite) | This is an emergency provision only. CHSP service providers should not report Social Support Individual outputs under the Care Relationships and Carer Support Sub-Program unless directed by the Department of Health.  Telephone/Web Contact.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Client contribution amount (recorded in Fees field). |
| Meals (Respite) | This is an emergency provision only. CHSP service providers should not report meals outputs under the Care Relationships and Carer Support Sub-Program unless directed by the Department of Health.  Meals prepared and delivered to client’s at home; Meals provided at Centre or other setting.  Measures reported: Quantity – Number of meals provided; Client contribution amount (recorded in Fees field).  Additional note: The term ‘Meals’ recognises and includes all varieties of service models in operation, including the provision of main meals such as two and three course lunches and dinners and complementary meal options such as breakfast and snack packs.  For example, if a provider delivered a two-course meal (e.g. a main and dessert) this would be considered as one meal, even if the client chooses to eat the meal at separate occasions or on different days. Similarly, if a provider delivered a larger portion to a client, but it was still intended to be a part of the same meal, for reporting purposes, this would also be counted as one meal.  By contrast, if a provider delivered dinners intended for two meals across the week, this would be considered two meals. |

**Table 2: Worked examples of reporting outputs and client contributions**

| Example | Worked examples of reporting outputs and client contributions |
| --- | --- |
| Scenario 1:  Individual session of respite spanning 2 dates (overnight stay) | **Scenario:** One client came to Georgia’s centre for overnight respite. The client arrived at 4pm Thursday and left at 11am the next day.  The session is recorded as the date the client ‘checked in’ for their stay. Georgia calculates the total amount of time that each client accessed respite for as 19 hours. In this instance, Georgia creates 1 session.  Session 1: Time entered as 19 hours; The client is linked to this session  **Total outputs reflected in the CHSP Organisation Overview Report for the session: 19 hours.**  Note: Any meals provided to the client during overnight respite should be included as part of your normal respite outputs, and not under the meals service type. |
| Scenario 2:  Multiple clients attend a respite session spanning 2 dates  (overnight stay) | **Scenario:** One client came to Georgia’s centre for overnight respite. The client arrived at 4pm Thursday and left at 11am the next day.  The session is recorded as the date the client ‘checked in’ for their stay. Georgia calculates the total amount of time that each client accessed respite for as 19 hours. In this instance, Georgia creates 1 session.  Session 1: Time entered as 19 hours; The client is linked to this session  **Total outputs reflected in the CHSP Organisation Overview Report for the session: 19 hours.**  Note: Any meals provided to the client during overnight respite should be included as part of your normal respite outputs, and not under the meals service type. |
| Scenario 3:  Individual session of respite spanning 3 dates and longer  (multiple nights) | **Scenario:** Two clients came to Georgia’s centre for overnight respite. They arrived at 4pm Thursday and left at 11am the next day.  The session is recorded as the date the client ‘checked in’ for their stay. Georgia calculates the total amount of time that each client accessed respite for as 19 hours. In this instance, Georgia can create one session.  Session 1: Time entered as 19 hours; The two clients are linked to this session.  **Total outputs reflected in the CHSP Organisation Overview Report for the session: 38 hours.**  Note: If the clients attended the session of respite for different durations, two sessions need to be created in the Data Exchange. |
| Scenario 4:  Individual session of respite that spans multiple nights with breaks in-between | **Scenario:** Often Georgia has clients that come to stay at the centre for multiple nights. For example, one client ‘checked in’ on a Thursday at 1pm and stayed until Monday, 10am.  In this instance, Georgia would record one session, and include the date of service delivery as the Thursday, as this is when the client arrived. She would then calculate the total amount of hours spent with that client until their departure.  1pm Thurs – 10am Mon = 93 hours 0 minutes  Session 1: Time entered as 93 hours; The client is linked to the session.  **Total outputs reflected in the CHSP Organisation Overview Report for the session: 93 hours.** |
| Fees/Client contribution  Scenario 1:  Individual session | **Scenario:** One of Georgia’s colleagues stayed overnight with a client on a Tuesday at the client’s place of residence (in-home respite). The next day (Wednesday), this staff member left in the morning and a separate staff member returned in the afternoon to provide respite for a second evening. Respite was provided for 18 hours on both the Tuesday and Wednesday.  In this instance, two sessions would be created in the Data Exchange. The overnight stay for the Tuesday would be recorded on that date, with total number of hours and minutes spent. The Wednesday would be recorded as a separate session with total number of hours and minutes.  Session 1 (Tuesday): Time entered as 18 hours 0 minutes; the client is linked to this session.  **Total outputs reflected in the CHSP Organisation Overview Report for Session 1: 18 hours**  Session 2 (Wednesday): Time entered as 18 hours 0 minutes; The client is linked to this session.  **Total outputs reflected in the CHSP Organisation Overview Report for Session 2: 18 hours** |
| Fees/Client contribution scenario 2:  Group session | **Scenario:** A client is charged and pays a fee/client contribution of $25 dollars for a session of respite, based on the provider’s client contribution policy. The provider enters the fees/client contributions received for the session as $25. |

### Community and Home Support sub-program

**Description**

The Community and Home Support sub-program provides entry-level support services to assist frail and older people to live independently at home and in the community.

**Who is the primary client?**

The primary clients for this sub-program activity include frail, older people aged 65 years and over (or 50 years and over for people that identify as Aboriginal and/or Torres Strait Islander) who need assistance with daily living to remain living independently at home and in the community.

**What are the key client characteristics?**

* People aged 65 years and over (or 50 years and over for those that identify as Aboriginal and/or Torres Strait Islander).

**Who might be considered ‘support persons’?**

Because of the significant role of family members and carers in supporting older Australians, often family members and carers access services that lead to a measurable outcome. In these instances, these persons should be recorded as ‘support persons’.

Services delivered to support persons that involve CHSP funding are to be reported in the Data Exchange, and are reflected in the CHSP Organisation Overview Report. More information on support persons and how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this sub-program activity, support persons may include the following:

* Carers of clients/Care recipients
* Families of clients
* Children of clients
* Community Leaders/Informal Care Givers.

More information on support persons and how to record them in the web-based portal can be found on the Data Exchange website.

**Should unidentified clients be recorded?**

The Community and Home Support sub-program has limited use for unidentified clients. This sub-program provides face-to-face support where clients are known to the service, therefore it is expected that **no more than 5 per cent** of your clients should be recorded as unidentified clients in each reporting period.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**Is there a recommended naming convention for outlets?**

There is no recommended naming convention for outlets under this sub-program activity; however, Organisations can align their outlets to those listed in the My Aged Care service finder. When creating, naming or re‑naming/maintaining your outlets, please consider guidelines stated in the Data Exchange Protocols.

**How should cases be set up?**

There is no formal case structure recommended for this sub-program activity. However, organisations can create a separate case for each individual accessing services. To protect client privacy, family names should never be recorded in the Case ID field. To easily navigate cases, organisations should use other identifying descriptions, such as Client ID numbers. e.g.: 1286. This works well for ongoing one-on-one contact with clients.

For organisations that deliver services in group settings (such as a forum, social support group or promotional community event), cases can be created to record these interactions and can link the client ID of regular attendees to the case. These cases, should be titled in a way that allows staff to easily enter data and use the case over multiple reporting periods, e.g. ‘Monday afternoon social support group’.

**What areas of SCORE are most relevant?**

Organisations participating in the partnership approach can choose to record outcomes against any domains that are relevant for the client. For this sub-program, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and training * Employment * Material wellbeing and basic necessities * Mental health, wellbeing and self-care * Personal and family safety * Physical Health | * Changed knowledge and access to information * Changed behaviours * Changed skills * Empowerment, choice & control to make own decisions * Engagement with relevant support services * Changed impact of immediate crisis | * 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 | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**For this sub-program, when should each service type be used?**

Each service type is listed in Appendix A of the Data Exchange [Protocols](https://dex.dss.gov.au/policy-guidance/dex_data_exchange_protocols/), and further defined in the [CHSP Manual](https://agedcare.health.gov.au/ageing-and-aged-care-publications-and-articles-fact-sheets/commonwealth-home-support-programme-programme-manual-2015).

Each session recorded can only have one service type. Select the service type that best reflects the intent of the session, or the primary focus of that session.

The Data Exchange is designed to capture client-facing services and interactions, therefore outputs reported should not include:

* Time spent travelling to and from clients’ homes while delivering services
* Time spent in administration or planning
* Outputs that have been multiplied by the number of people that attended the session (should more than one client attend the session).

Note: The Data Exchange multiplies the outputs entered for a session by the number of clients and/or support people in attendance. As such, only the actual hours and minutes delivered in real time, or the quantity of units received by each individual, should be recorded. See worked examples at Table 2.

**Table 1: Example of service type use within this sub-program activity**

| Service Type | Examples of service type use for this sub-program activity and measures reported |
| --- | --- |
| Domestic assistance | General House Cleaning, Unaccompanied Shopping (delivered to home), Linen Services.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Client contribution amount (recorded in Fees field). |
| Personal care | Assistance with Self-care, Assistance with client self-administration of medicine.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Client contribution amount (recorded in Fees field). |
| Social support - Individual | One-on-one assistance provided by a companion (paid worker or volunteer) to an individual, either within the home environment or while accessing community services such as visiting, Telephone/Web Contact, Accompanied Activities such as shopping or appointments.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Client contribution amount (recorded in Fees field). |
| Other food services | Food Advice, Lessons, Training, Food Safety, Assistance with food preparation in the home.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Client contribution amount (recorded in Fees field). |
| Nursing | Clinical care provided by a registered or enrolled nurse.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Client contribution amount (recorded in Fees field). |
| Allied health and therapy services | Podiatry, Occupational Therapy, Physiotherapy, Hydrotherapy, Social Work, Speech Pathology, Dietitian or Nutritionist, Aboriginal and Torres Strait Islander Health Worker, Psychologist, Ongoing Allied Health and Therapy Services, Restorative Care Services, Diversional Therapy, Exercise Physiologist, Other Applied Health and Therapy Services.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Type of care (Ongoing Allied Health and Therapy Services and/or Restorative Care Services); Client contribution amount (recorded in Fees field). |
| Social support - Group | Clients attend and participate in social interactions which are conducted away from the client’s home and in, or from, a fixed base facility or community based settings.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Client contribution amount (recorded in Fees field).  If a service provider provides transport to/from a centre and receives funding to deliver both CHSP Transport and Social Support Group, they should record the transport to/from the centre separately to the Social Support Group activity. |
| Home modifications | Provide changes to a client’s home to increase or maintain the person’s functional independence.  Measures reported: Total Cost to provider; Commonwealth contribution capped to $10,000 per client per financial year; Client contribution amount (recorded in Fees field). |
| Home maintenance | Focus on repairs or maintenance of the home and garden to improve safety, accessibility and independence. Minor and major maintenance and Repairs, Garden Maintenance.  Measures reported: Time (recorded in hours and minutes) as actually delivered; Total Cost – the total amount spent by the service provider; Client contribution amount (recorded in Fees field). |
| Goods, equipment and assistive technology | Self-care aids, Support and mobility aids, Medical care aids, Communication aids, other goods and equipment, Reading aids, Car Modifications.  Measures reported: Quantity – number of items purchased or loaned;  Cost in dollars – of the amount service provider spent (noting the cap of $1,000 applies per client per year). Cost is total amount for ALL items per client. Client contribution amount (recorded in Fees field).  Hours of Allied Health and Therapy Services delivered or purchased must be reported as such and not as GEAT in the Data Exchange. |
| Meals | Meals prepared and delivered to client’s at home; Meals provided at Centre or other setting. ‘Meals’ recognises and includes all varieties of service models in operation, including the provision of main meals such as two and three course lunches and dinners and complementary meal options such as breakfast and snack packs.  Measures reported: Quantity – Number of meals provided; Client contribution amount (recorded in Fees field).  Providers receiving meals via a meals distribution centre (meals hub) must report within the Data Exchange when the meal is delivered to the client.  The meals hub provider must not report any meals within the Data Exchange, unless the meal is provided directly to the client. |
| Transport | Direct transport (driver is a volunteer or worker) and in-direct transport. Including trips provided through vouchers.  Measures reported: total number of one-way trips; client contribution amount (recorded in Fees field).  Service providers are to count clients and carers separately when reporting outputs within the Data Exchange. |
| Specialised support services | Specialised or tailored services living at home with a particular condition such as dementia, vision impairment, continence advisory, hearing, other support services and client advocacy.  Measures reported: time (recorded in hours and minutes) as actually delivered; client contribution amount (recorded in Fees field). |

**Table 2: Worked examples of reporting outputs and client contributions**

| Example | Worked examples of reporting outputs and client contributions |
| --- | --- |
| Scenario 1:  Individualised session – Time to be reported | **Scenario:** Graham delivers a range of CHSP services. Graham delivered 90 minutes of a domestic assistance to a CHSP client. In this instance, Graham would create one session in the Data Exchange.  Session 1: Time entered as 1 hour, 30 minutes; The client is linked to the session.  **Total outputs reflected in the CHSP Organisation Overview Report for this session: 1 hour, 30 minutes.** |
| Scenario 2:  Session with multiple clients – Time to be reported | **Scenario:** Justine is an Exercise Physiologist. Justine delivers a weekly group exercise physiology targeting fall prevention on Wednesdays. The program goes for five weeks and there are 10 clients that usually attend.  In week 1 of the program, all 10 clients attended the one-hour session. In this instance, Justine creates one session.  Session 1: Time entered as one hour, 0 minutes. The 10 clients are linked to the session.  **Total outputs reflected in the CHSP Organisation Overview Report for Session 1: 10 hours.**  In week 2 of the program, only eight clients attended the one-hour session. In this instance, Justine can create a copy of last week’s session, and update the session to correct the date of the session and to remove the two clients that could not attend.  Session 2: Time entered as one hour, 0 minutes; The eight clients are linked to the session.  **Total outputs reflected in the CHSP Organisation Overview Report for Session 2: 8 hours.** |
| Scenario 3:  Shared services – Time to be reported | **Scenario:** Husband (Charles) and wife (Jody) are both eligible to receive CHSP-funded assistance. Currently they share the benefits of one hour of domestic assistance each week. In this instance, there are two ways the provider can enter the data into the Data Exchange as Charles and Jody share the benefits of the domestic assistance.  Session 1: Time entered as 0 hours, 30 minutes; The client records for Charles and Jody are linked to the session.  **Total outputs reflected in the CHSP Organisation Overview Report for the session: 1 hour**  Alternatively the data could be entered as:  Session 1: Time entered as 1 hour, 0 minutes; The client records for either Charles or Jody are linked (only 1 record is linked).  **Total outputs reflected in the CHSP Organisation Overview Report for the session: 1 hour.** |
| Scenario 4:  Individual session – Quantity to be reported | **Scenario a:** Jamie has recently been referred for CHSP meals as he is unable to cook while he is recovering from a hand injury. Jamie receives one meal per week from his local meals provider. His family are able to support Jamie throughout the week. In this instance, the meals provider creates a session for Jamie.  Session 1: Quantity of meals entered as 1; Jamie’s client record is linked to the session.  **Total quantity of outputs reflected in the CHSP Organisation Overview Report for the session: 1 (meal).**  **Scenario b:** Jamie’s family are unable to cook for him during the week because they are going on vacation for a week. The local meals provider has arranged to deliver five meals on Monday to Jamie that he can freeze and reheat for the week his family are away. In this instance, the meals provider would create a single session, and include the date of service delivery as the Monday.  Session 1: Quantity of meals entered as 5; Jamie’s client record is linked to the session.  **Total quantity of outputs reflected in the CHSP Organisation Overview Report for the session: 5 (meals).** |
| Scenario 5:  Individual session – Quantity to be reported | **Scenario a** – Meals provided in the client’s home where the carer/support person is present  **Example:** The service provider delivers a meal to the client in their home. The client’s carer/support person is also present, and is not themselves a CHSP client. The client receives a meal funded though the CHSP. The carer/support person has also requested a meal from the provider. Under this service, where meals are provided in the client’s home, meals to a carer/support person must not be purchased using CHSP funds. The carer/support person and the provider must make their own arrangements regarding the cost of the meal. Under the CHSP only the client is counted as receiving the meal.  **Session 1:** ‘Amount of Assistance’ quantity 1, client record is linked to the session any fees paid by the client should be entered into the ‘fees charged’ section. The Data Exchange report will calculate the quantity of outputs which would be reflected as 1 meal. The meal provided to the carer/support person is not counted.  **Total quantity of outputs reflected in the CHSP Organisation Overview Report for he session: 1** |
| Scenario 6:  Session with multiple clients – Quantity to be reported | **Scenario a:** James is a local transport provider and provides group transport sessions. Today there were 15 CHSP clients that he drove from their homes to the shops. Each client is considered to have received 1 trip.  Session 1: Quantity of trips entered as 1; The 15 clients are linked to the session.  **Total quantity of outputs reflected in the CHSP Organisation Overview Report for the session: 15 (trips).**  **Scenario b:** Mary-Anne accesses CHSP transport services from James. She has recently had a fall and has lost her confidence in walking in shopping centres. Mary-Anne’s husband (Dave) is her primary carer and is accompanying Mary-Anne on the bus and on her shopping outings, while she regains her confidence. In this instance, the provider enters the group session. Five clients (in addition to Mary-Anne) were driven from their homes to the local shopping centre.  Session 1: Quantity of trips entered as 1; The 6 clients in total are linked to the session as a client. Dave’s record is attached to the session as a support person.  **Total quantity of outputs reflected in the CHSP Organisation Overview Report for the session: 6 (trips).** |
| Scenario 7:  Session with multiple clients – Quantity to be reported | **Scenario a** – Meals and Social Support Group provided  **Scenario:** David runs a Social Support Group activity run through the local senior citizens’ club, where attendees are often accompanied by their carers. The activity involves a group excursion which returns to the centre late in the afternoon (meals are not provided as part of the excursion). David is also funded to provide meals. Upon return from the activity, the client and their carer are provided with a meal in the centre.  As David is funded for both Social Support Group and Meals, then these activities should be reported separately.  **Total quantity of outputs reflected in the CHSP Organisation Overview Report for the Social Support Group Activity,** session quantity entered as 1, sum of all client contributions entered; clients’ and support persons’ records are linked to the session.  **Total quantity of outputs reflected in the CHSP Organisation Overview Report for the Meals services**, ‘Amount of assistance provided’ quantity entered as 1, sum of all client contributions entered; clients’ and support persons records’ are linked to the session. The Data Exchange report will then calculate the quantity of outputs which would be reflected as two meals (plus any additional attendees receiving meals as part of the same session). |
| Scenario 8:  Session with multiple clients – Quantity to be reported | **Scenario b – Social Support Group and light snacks provided**  **Scenario:** Maude runs a Social Support Group activity run through the local senior citizens’ club, at which attendees are often accompanied by their carers. The activity is a fitness class run entirely within the centre, with participants having some light snacks during a break, provided by the centre. The activity runs for 1 hour.  **Session** **1:** Time entered as 1 hour, 0 minutes for Social Support Group activity. The sum of all client contributions entered; clients’ and support persons records’ are linked to the session and is reported as a Social Support Group. Quantity of meals entered as 0.  **Total quantity of outputs reflected in the CHSP Organisation Overview Report for the session:** 1 (Social Support Group), plus any additional attendees involved in the group activity at the centre as part of the same session. |
| Scenario 9:  Individual session – Cost to be reported | **Scenario:** Ben provides home modification services under the CHSP. Ben has recently installed a handrail for a client (Suzanne). The rail cost $35 and the cost of labour was $50. Suzanne’s paid a contribution of $15 towards the cost of the rail.  Ben creates a session in the Data Exchange and ticks the extra item detail for “Handrails”.  Session 1: Cost reported as $85; Suzanne’s client record is attached to the session. The fees are entered as $15.  **The total cost reflected in the CHSP Organisation Overview Report for this session is: $85.** |
| Fee/Client contribution Scenario 1:  Individual session | **Scenario:** Mary pays $10 towards the cost of a personal care session. For the session being reported, the provider enters the fees/client contributions as $10. |
| Fee/Client contribution Scenario 2:  Group session | **Scenario:** Twelve clients attend a social support – group session. The clients that attended the group session may or may not pay the same client contribution, based on the provider’s client contribution policy. The sum of the fees/client contributions received for the session is reported against the session.  For example, 10 clients paid $3 and 2 clients did not pay a contribution for a session, based on the provider’s client contribution framework. The total fees/client contributions reported would be $30 (as this is the sum of the fees/client contributions received). |
| Fee/Client contribution Scenario 3:  Individual session | **Scenario:** James provides 1 hour for the home maintenance service type of garden maintenance under the CHSP. James has recently mowed the lawn for a client (Leonie). The cost of the lawn mowing was $20. Leonie has paid $15 towards the cost of the lawn mowing service.  **Session 1:** Total cost reported as $20; Leonie’s client record is attached to the session. The fees charged are entered as $15.  **The total cost as reflected in the CHSP Organisation Overview Report for this session is: $20** |
| Fee/Client contribution Scenario 4:  Individual session | **Scenario:** Sally provides 1 hour of gardening services under the home maintenance CHSP service type. Sally has recently mowed the lawn and trimmed the vegetation for a client (Jimmy) and will dispose of the garden cuttings at the rubbish tip. The cost of the lawn mowing and garden work was $30. Jimmy has paid a fee/client contribution of $10 towards the cost of the lawn mowing and gardening service plus $5 to pay for the tip fee.  The tip fee of $5 is added to the cost of $30 making it $35. All contributions made by the client must be recorded.  **Session 1:** Total cost reported as $35. Jimmy’s client record is attached to the session. The fees charged are entered as $15.  **The total cost as reflected in the CHSP Organisation Overview Report for this session is:** $35 |
| Fee/Client contribution Scenario 5:  Individual session | **Scenario:** Angelo provides 1 hour of pressure cleaning to client’s (Edward) veranda. The cost of the service is $20. Included in this service is an additional $5 to cover the cost of petrol and maintenance of the pressure cleaner.  In this instance, the service is $20 and the additional $5 for petrol and maintenance. The total cost of the service is $25.  Edward pays a fee/client contribution of $10 dollars based on the provider’s client contribution policy. The provider enters the fees/client contributions received for the session as $10. |
| Fee/Client contribution Scenario 6: Single fee for multiple sessions | **Scenario:** Under an organisation’s client contribution policy, they charge a fee/client contribution, and clients receive a combination of services, such as a meal and transport. When reporting the fees/client contributions for the different service types delivered, the provider should allocate the fees/client contributions received with consideration to their contribution toward the cost of the service delivered.  For example, if the $10 fee/client contribution notionally contributes $6 towards the meal, and $4 towards the transport, the fees/client contribution reported would reflect this breakdown under the two sessions reported.  Alternatively, if the notional allocation of the client contribution is unknown in this scenario, organisations can divide the contribution by the number of services being received and report this amount against each service (e.g. $5 towards the meal and $5 towards transport). |
| Fee/Client contribution Scenario 7:  Multiple service offering | **Scenario:** Under an organisation’s client contribution policy, they charge a weekly $10 rate, and clients receive a combination of services, such as a meal and transport. When reporting the fees/client contributions for the different service types delivered, the provider should allocate the fees/client contributions received with consideration to their contribution toward the cost of the service delivered.  For example, if the $10 fee/client contribution notionally contributes $6 towards the meal, and $4 towards the transport, the fees/client contributions reported would reflect this breakdown under the two sessions reported. |

# DEPARTMENT OF HOME AFFAIRS

# Settlement Services

Settlement Services delivers core settlement support for humanitarian entrants and other eligible migrants in their first five years of life in Australia. The broad aim of the Settlement Services Activity is to deliver services to migrants and humanitarian entrants that will assist them to become self-reliant and participate equitably in Australian society, with a focus on fostering social participation, economic wellbeing, independence, personal wellbeing and community connectedness.

The following program activities are included in Settlement Services:

* Economic Pathways to Refugee Integration
* Mutual Understanding Supp Tol Eng & Resp
* National Community Hubs Program
* Settlement Engagement and Transitions Support (SETS) – Client Services
* Settlement Engagement and Transitions Support (SETS) – Community Capacity Building
* Settlement Engagement and Transitions Support (SETS) – Innovation Fund
* Youth Transition Support

### Economic Pathways to Refugee Integration

**Description**

The Economic Pathways to Refugee Integration (EPRI) program activity seeks to increase the number, type, efficiency and effectiveness of pathways to economic participation for refugee and humanitarian entrants with low skills and/or low English language proficiency.

EPRI aims to develop the skills, qualifications and experience; including English language skills, to increase economic participation for these refugees and humanitarian entrant in areas that are experiencing workforce shortages.

EPRI provides:

* work experience and on the job training
* supplementary English and other skills training and qualifications
* case management, business mentoring and advice
* direct placement into ongoing employment

**Who is the primary client?**

The primary client for this program activity are refugees and humanitarian entrants with low skill level and/or low English language proficiency.

**What are the key client characteristics?**

* Persons who have arrived in Australia in the last five years
* Persons on a Humanitarian visa
* Persons from a cultural and linguistically diverse background, and
* Persons and families who are unemployed, ill, studying and/or experiencing financial distress.

**Who might be considered ‘support persons’?**

Support persons are not applicable for this program activity.

**Should unidentified group clients be recorded?**

This program provides face-to-face support where clients are known to the service, therefore has limited use for unidentified group clients. It is expected that no more than **5 per cent** of your clients are recorded as unidentified clients in each reporting period.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. However, organisations can create a separate case for each client accessing services. To protect client privacy, family names should never be recorded in the Case ID field.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. For EPRI, participation means organisations must record client outcomes, known as Standard Client/Community Outcomes Reporting (SCORE) reporting as well as an extended data set.

Organisations must meet the following minimum requirements for SCORE data:

* Report an initial and at least one subsequent Circumstances SCORE for **at least 95 per cent** of identified clients.
* Report an initial and at least one subsequent Goals SCORE for **at least 95 per cent** of identified clients.
* Report Satisfaction SCOREs for **at least 95 per cent** of identified clients.

A client SCORE assessment should be recorded at the following times:

* near the beginning of the client’s service delivery
* approximately every six months throughout service delivery (where support is provided for longer than six months), and
* towards the end of service delivery

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** |
| --- | --- | --- |
| * Employment * Education and skills training * Financial Resilience | * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions | * I am better able to deal with issues that I sought help with * I am satisfied with the services I have received |

When recording a SCORE assessment, it is expected that you also record the ‘Assessed by’ field to capture who has completed the assessment.

**Completing a Circumstances SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Circumstances domains.

| **Circumstances** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Employment** | I am not employed which is not suitable for my current situation. | I am in work that is not suitable for me. | I am in work that is suitable in some ways | I am in work that is suitable in most ways. | I am in work that is very suitable in all ways. |
| **Education and skills training** | I am looking at what training or education programs are available to help me develop or improve the skills and knowledge I need to gain suitable employment | I am enrolled and about to start in a training or education program that will help me develop or improve the skills and knowledge I need to gain suitable employment | I am currently attending a training or education program. I have learned some of the skills and knowledge I need to gain suitable employment | I am currently attending a training or education program. I have learned many of the skills and knowledge I need to gain suitable employment | I am completed or am close to completing the training or education program. I have learned most of the skills and knowledge I need to gain suitable employment |
| **Financial Resilience** | I am experiencing financial hardship that I feel I cannot recover from, and I am dependent on welfare payments | I am experiencing financial hardship that I feel I can recover from. Whilst recovering, I am dependent on welfare payments | I am experiencing financial hardship, and I am making progress towards no longer being dependent on welfare payments | I am or was experiencing financial hardship and I feel I am making good progress towards no longer being dependent on welfare payments | I am no longer experiencing financial hardship and no longer dependent on welfare payments. |

**Completing a Goals SCORE assessment**

For this program activity, all organisations must use the following SCORE descriptions when assessing clients in the following Goals domains.

| **Goals** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Changed knowledge and access to information** | I have no goals in place to increase my knowledge about the issues I have sought help with  I am not accessing any information to support me | I want to increase my knowledge about the issues  I have sought help with and have started to access information to help me achieve my goals | My knowledge is increasing in the areas relevant to the issue  I am accessing information to help me achieve my goals | I have good knowledge in the areas relevant to the issues I sought help with  The information I am accessing has been helpful in supporting me to achieve my goals | I have very good knowledge in the areas relevant to issues I sought help with  The information I have accessed has been very helpful in supporting me to achieve my goals |
| **Changed Skills** | I have no goals in place to develop or improve the skills I need to help improve my situation. | I want to develop or improve my skills and have a plan to help me achieve my goals. | I am starting to develop and improve my skills. | I have good skills in the areas I need to be able to improve my current situation. | I have very good skills in the areas I need to be able to improve my current situation. |
| **Empowerment, choice and control to make own decisions** | I am not confident or in control to make my own decisions and rely on others to do this for me. | I have very little confidence and control to make my own decisions and often rely on others to do this for me. | I have some confidence and control to make my own decisions and sometimes rely on others to do this for me. | I am mostly confident and in control to make my own decisions. I rarely rely on others to do this for me. | I am confident and in control to make all of my own decisions. I do not rely on others to do this for me. |

**Completing a Satisfaction SCORE assessment**

For this program activity, all organisation must use the following SCORE descriptions when assessing clients in the following Satisfaction domains.

| **Satisfaction** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **The service listened to me and understood my issues.** | The service does not listen or understand my issues at all. | The service listens a little bit or understands some of my issues. | The service sometimes listens or understands my issues. | The service listens to me and understands my issues a lot of the time. | The service always listens to me and understands my issues. |
| **I am satisfied with the services I have received.** | I am not satisfied. | I am a little satisfied. | The service was ok. | I am mostly satisfied. | I am very satisfied. |
| **I am better able to deal with issues that I sought help with.** | My ability to deal with the issues I sought help with is the same. | I can occasionally deal with the issues I sought help with. | Sometimes I can deal with the issues I sought help with. | Most often I am able to deal with the issues I sought help with. | I am always able to deal with the issues I sought help with. |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

| **Client Level Data** | **Session level data** | **Case level data** |
| --- | --- | --- |
| * Employment status * Highest level of education / qualification * Household composition * Income (frequency and approximate gross income) * Main source of income * First arrival in Australia (year and month) * Visa type * Ancestry | * Referral out (type and purpose) * Interpreter present * Service setting | * Attendance profile * Referral in (source and reason for seeking assistance) * Exit reason |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and Assessment | Gathering information on clients' needs, eligibility, matching clients to services |
| Education and skills training | Participants completing training courses and / or obtaining qualifications, for example, vocational certificates. |
| Facilitate Employment Pathways | Work experience and on the job training sessions attended by participants. |
| Facilitate English Learning Pathways | Facilitating opportunities to support a client’s English language learning. |
| Business Planning | Business mentoring and advice, such as assisting with development of a business plan. |
| Employer Engagement | Direct placement into ongoing employment |
| Exit interview | A client’s final session with a provider. Accompanied by the ‘Exit reason’ field at the case level and may include a SCORE assessment. |

### Mutual Understanding Support, Tolerance, Engagement and Respect (managed by the Department of Home Affairs)

Displaying in the Data Exchange as ‘Mutual Understanding Supp Tol Eng & Resp’

**Description**

Mutual Understanding, Support, Tolerance, Engagement and Respect (MUSTER) is split into two separate program activities. The grants for one being managed by Department of Social Services, and the other managed by Department of Home Affairs.

MUSTER aims to build community resilience through grants that increase the ability of communities to connect and support each other.

MUSTER takes a place-based approach and is targeted to communities in need.

**Who is the primary client?**

The primary clients for this program activity include anyone affected by issues in communities that can impact social cohesion. This can include adults, children, carers, care recipients, families and seniors.

**What are the key client characteristics?**

* People who have arrived in Australia in the last five years
* People on a Humanitarian Visa
* People from a cultural and linguistically diverse background (CALD)
* People identifying as Aboriginal or Torres Strait Islander
* People identifying as having a condition, impairment or disability
* People residing in a low Socio-Economic Indexes for Area (SEIFA)
* People residing in a rural or remote area
* People and families who are unemployed, ill, studying and/or experiencing financial distress
* People under 18 years.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include carers of clients, care recipients, parent/guardians of clients, or community leaders.

**Should unidentified clients be recorded?**

This program provides face-to-face support where clients are known to the service, therefore it is expected that only **40 per cent** of your clients **or less** should be recorded as unidentified clients in each reporting period.

Examples of where the use of unidentified clients may be appropriate include: large group information sessions; and community sporting events or multicultural events. However, providers should aim to collect individual client details for each participant/attendee where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

Some MUSTER organisations may receive grant funding for non-client facing services. In such cases, alternative reporting requirements will be set out in their funding agreement.

**How should cases be set up?**

There is no specific case structure recommended for this program activity. To protect client privacy, the case identity (ID) should not contain any personal information, such as any part of a client’s first or last names, Customer Reference Numbers (CRN) or My Aged Care reference numbers.

Organisations should create cases in a way that works best for them and their staff.

**What areas of SCORE are most relevant?**

Organisations can record outcomes against any domains that are relevant for the client. For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Employment * Family functioning * Material wellbeing and basic necessities * Personal and family safety | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group / community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices * Social Cohesion |

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial meeting with client to gather information and discuss needs. |
| Information/Advice/Referral | Provision of information or advice through community workshops or forums, provision of information and advice online, or referral to another service. |
| Education and skills training | Assisting a person to learn or build knowledge about a topic aimed at developing a skill, or enhancing a skill relevant to addressing barriers to social and economic participation in the community. |
| Child/Youth focussed group | Activity that provides children and youth with services that increase their community participation. Examples include providing youth with access to services that aim to build trust and increase community participation, or addressing racial, cultural or religious tensions through educational, cultural or sporting activities. |
| Community capacity building | Activity that is targeted at building and strengthening social cohesion by providing local solutions to address issues specific to the local community, or building a person’s leadership skills to foster greater community cohesion. |
| Facilitate English learning pathways | Provision of opportunities to support English language learning to increase a person’s social and economic participation in the community. |
| Facilitate employment pathways | Provision of technical, vocational guidance and/or training to improve a person’s job skills and employment opportunities. |
| Family capacity building | Early intervention or crisis prevention to support children and parents. |
| Community engagement | Provision of a Harmony Day, multicultural arts or festival event or other activity that promotes social participation and community cohesion by bringing people from different backgrounds together. |
| Mentoring/Peer Support | Provision of mentoring or peer support to increase a person’s social and economic participation in the community. |

### National Community Hubs Program

**Description**

The National Community Hubs Program (NCHP) (also referred to as Community Hubs) provides tailored, in‑community support to migrants and humanitarian entrants, with a focus on helping women and their families.

The Community Hubs model uses familiar and culturally safe community facilities, usually schools, to create spaces to:

* improve access and engagement with existing services, such as language, employment, skills development and health, for migrant families and individuals;
* increase learning outcomes for children;
* contribute to social cohesion by enhancing the capacity of community organisations and service providers to reach out to migrant communities
* improve language, literacy and learning outcomes for migrants, including for isolated migrant mothers and provide early learning activities for their children
* improve pathways to employment for migrants through educational and social programs.

**Who is the primary client?**

Primary clients for this program activity are humanitarian entrants and other vulnerable migrant women living in Australia.

**What are the key client characteristics?**

* The key client characteristics are: Mothers, with primary school aged children, from a cultural and linguistically diverse background, including humanitarian entrants and recently arrived migrants.
* People, particularly migrant women, who cannot speak English well.
* People, particularly migrant women, needing support to connect to their local community.
* People, particularly migrant women, with employment, education or training goals who face barriers to achieving these goals.
* People, particularly migrant women, living in targeted Local Government Areas (LGAs) (generally in a low Socio-Economic Indexes for Area (SEIFA) area with a high migrant population).
* Young children of migrant families.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training).

It is not expected that for this program activity, support persons would be recorded.

**Should unidentified ‘group’ clients be recorded?**

Community Hubs is primarily a group based support activity. It is therefore expected that the majority of the clients should be recorded as unidentified clients in each reporting period. Where it is practical and possible to collect client level data, this should be collected and reported into the Data Exchange.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations should create cases to reflect the main types of activities as set out in their Activity Work Plan. To protect client privacy, the case identity (ID) should not contain any personal information, such as any part of a client’s first or last names, Customer Reference Numbers (CRN) or My Aged Care reference numbers.

**What areas of SCORE are most relevant?**

Organisations can choose to record outcomes against any domains that are relevant.

For this program activity, the following SCORE areas have been identified as most relevant:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| None of the Circumstances outcomes are relevant for this program activity | None of the Goals outcomes are relevant for this program activity | None of the Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours |

**For this program activity, when should each service type be used?**

The service type 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.

| Service Type | Example |
| --- | --- |
| Information/Advice/Referral | Provision of information or advice through group information sessions or workshops (e.g. information on health, parenting skills, housing), or referral to another service. |
| Education and skills training | Assisting a person to learn or build knowledge about a topic aimed at developing a skill, or enhancing a skill relevant to the client’s circumstances, for example leadership training activities to empower newly arrived women. |
| Child/Youth focussed groups | Sessions targeted at children or youth, and delivered in a group, rather than individual basis. Examples include playgroups, breakfast clubs and other similar services. |
| Community Capacity building | Activities targeted at building and/or strengthening community relationships and cohesion, peer and social support programs providing a sense of community for clients, volunteering opportunities. |
| Facilitate employment pathways | Provision of technical, vocational guidance and/or training to improve a person’s job skills and employment opportunities. |
| Facilitate English learning pathways | Activities that facilitate pathways to improved English language and literacy, English conversation groups, and group information sessions on accessing formal English language and literacy programs. |

### Settlement Engagement and Transition Support (SETS) – Client Services

SETS is an early intervention program that equips and empowers eligible clients and communities to address their identified settlement needs in order to improve social participation, economic wellbeing, independence, personal wellbeing and community connectedness.

**Description**

The objective of SETS – Client Services is to equip humanitarian entrants and other vulnerable migrants in their first five years in Australia with the knowledge and skills to identify, understand and take action to address their identified settlement needs. Services will be delivered in accordance with a needs-based approach. Clients will be provided with settlement-related information, advice, advocacy, and assistance to access mainstream and other relevant services. Clients may also be provided high quality casework to address issues arising during their settlement experience. Typically client needs will align with the nine priority areas identified in the National Settlement Framework.

**Who is the primary client?**

Primary clients for this program activity are eligible humanitarian entrants and other vulnerable migrants in their first five years of life in Australia, within the categories set out below under ‘what are the key client characteristics?’ A priority is youth within these categories.

**What are the key client characteristics?**

Clients can be humanitarian entrants, family stream migrants with low English language proficiency, dependants of skilled migrants in rural and regional areas with low English language proficiency, selected temporary residents (Prospective Marriage and Provisional Partner visa holders and their dependants) in rural and regional areas with low English.

Clients may be experiencing one or more barriers impacting on their social and economic participation.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families, children, parents, or carers of clients (who are present but not directly receiving a service), legal representatives, community leaders, mentors, informal care givers or a case/support worker.

**Should unidentified clients be recorded?**

SETS – Client Services is primarily client facing where ongoing relationships are formed,therefore it is expected that **25-40 per cent** of your clients **or less** should be recorded as unidentified clients in each reporting period. A specific percentage will be specified in each organisation’s Activity Work Plan.

For this program activity, applicable examples of where use of unidentified clients may be appropriate include large group information sessions and events; however organisations should aim to collect individual client details for each participant/attendee where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations should create cases to reflect the main types of activities that are funded under SETS – Client Services, as set out in their Activity Work Plan.

**The partnership approach**

All SETS Organisations are required to participate in the partnership approach. As part of the partnership approach, Organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

It is expected that, where practical, you collect outcomes data for **50 - 60 per cent** of all participants.

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you should also collect SCORE assessments periodically throughout service delivery.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * All eleven Circumstance outcomes are relevant for this program activity | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | * None of the Community outcomes are relevant for this program activity. |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Month of first arrival in Australia * Year of first arrival in Australia * Visa Type * Ancestry | * Reason for seeking assistance * Referral source | * Referral type * Referral purpose |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type 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.

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Provide advocacy and support to assist clients to access mainstream and other relevant services. This may include working closely with mainstream Organisations to develop partnership approaches to enhance a holistic approach to client services, and promoting services to disengaged clients and assisting organisations to build cultural awareness. |
| Child/Youth focussed groups | Youth specific services may include, but are not limited to:   * Providing flexible education and/or employment support options to meet the varying needs of those who experience disruption to schooling. * Providing opportunities or support to young people to access volunteering opportunities, internships or work experience, to improve their employability. * Working with young people to think about and articulate their goals for the future. * Supporting family members to understand and support a young person’s goals and pathways, including understanding the Australian education and employment system. |
| Domestic and Family Violence support | Individual and/or group activities may include the following:   * Services for individual clients including crisis intervention measures. * Education for women about options and available services. * Appropriate referrals, including to specialist family violence, family relationship services, counselling, emergency housing, legal assistance and other mainstream services. * Assistance to apply for social housing/rental assistance for longer term accommodation. * Assistance with reporting incidences of violence * Group information sessions covering topics relevant to reduction of domestic violence, for example healthy vs. unhealthy relationships, family safety, respectful relationships for men and Australian law. |
| Education and skills training | Individual or group activities may include the following:   * Develop awareness and understanding of the Australian educational system requirements including enrolment, compulsory attendance, school curriculum and other requirements of an age-based education system. * Undertake early intervention approaches to retain students at risk of disengagement including referral to community learning, mentoring programs, counselling services, and highlighting the importance of education in gaining employment. |
| Facilitate employment pathways | Activities may include providing information to individuals or groups on:   * Suitable employment readiness programs to improve employment outcomes, including orientation to work, job searching and applying for jobs, preparing resumes and responses to selection criteria, interview techniques, workshops, and advice on suitable workplace attire. * Access to coaching, mentoring programs, volunteering, career advice, pre-vocational training, bridging courses, work experience and internship opportunities. * Information about point of access for overseas skills/qualifications recognition. * Information about Australian workplace systems and culture. * Encouraging career counselling or advice to assist people in choosing a realistic career path and pursuing appropriate educational, training and work experience opportunities. * Information and support to access mainstream employment providers or other employment agencies. |
| Facilitate English learning pathways | SETS does not fund English language training, rather it supports the acquisition of English language skills. Individual or group activities may include:   * Reinforcing the value of utilising English language classes, including awareness of available English language programs, how to access them and the importance of regular attendance. * Opportunities to practice English skills in group work, conversational and practical settings. * Referral to the Adult Migrant English Program (AMEP), the Skills for Education and Employment (SEE) program and/or other suitable programs, and support to remain engaged. * Information on the availability of interpreting and translation services and how to access these. |
| Information/Advice/Referral | Provide **low-intensity casework** support to clients requiring minimal assistance to meet their settlement needs and achieve their goals. The client may present at the service only once or at infrequent intervals, and may not see the same caseworker. This includes warm referrals where possible. |
| Information/Advice/Referral – Medium intensity | Provide **medium-intensity casework** support to clients who are identified as requiring this through the needs assessment, which targets individual needs. This includes assigning a case worker to the client to ensure continuity of support, developing a case plan to identify the actions, responsibilities and timeframes needed to achieve identified outcomes, warm referrals to mainstream and other relevant services, and regular contact with the client until needs are met. |
| Intake and assessment | Deliver intake services that provide the opportunity for an initial needs-based assessment to be undertaken that determines the level of support required by the client. |
| Settlement services workshops | Address client needs through targeted group sessions that align with the nine priority areas identified in the National Settlement Framework (excluding employment, education and training, and assistance with English language as these are covered in separate service types), including:   * One-off or ongoing information sessions, for example, inviting an expert to provide information on a specific topic. * One-off or ongoing workshops, for example ‘Life Skills’ sessions. * Structured groups that meet regularly on an ongoing basis. |
| Social participation | Groups that provide social support, such as men’s, women’s or parenting groups. |

### Settlement Engagement and Transition Support (SETS) – Community Capacity Building

SETS is an early intervention program that equips and empowers eligible clients and communities to address their identified settlement needs in order to improve social participation, economic wellbeing, independence, personal wellbeing and community connectedness.

**Description**

Some relatively new and emerging communities may lack capacity or capability to develop information networks and require support to maximise social inclusion and participation. The objective of SETS-Community Capacity Building is to empower new and emerging community groups and organisations to support their specific communities towards collectively increasing the social participation, economic and personal wellbeing of community members, to ensure that positive settlement outcomes are sustained in the long term. Support may include development of leadership and governance skills, linkages to the broader community, interaction with government and local stakeholders, and access to resources and facilities.

**Who is the primary client?**

Primary clients for this program activity are new and emerging ethno-specific communities, community leaders and emerging community representatives and new and emerging ethno-specific organisations with limited corporate capacity.

**What are the key client characteristics?**

Clients can be leaders and representatives of new and emerging ethno-specific organisations, whose members have arrived in Australia in the last five years and/or who are from a culturally and linguistically diverse background.

Clients may be experiencing one or more barriers impacting on their ability to support their specific communities to increase social and economic participation.

**Who might be considered ‘support persons’?**

Support persons are unlikely to be relevant for this program activity.

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

**Should unidentified clients be recorded?**

SETS – Community Capacity is likely to involve work with individuals and communities.

* Where services are delivered directly to individuals, it is expected that **5 per cent** of clientsshould be recorded as unidentified clients in each reporting period;
* Where services are delivered to leaders or representatives of the community/other organisations, it is expected that **25-40 per cent** of clients **or less** should be recorded as unidentified clients in each reporting period (a specific percentage will be negotiated and included in Activity Work Plans, as per funding agreements).

For this program activity, applicable examples of where use of unidentified clients may be appropriate include training, information sessions and consultation; however providers should aim to collect individual client details for each participant/attendee where possible. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations should create cases to reflect the main types of activities that are funded under SETS – Community Capacity Building, as set out in their Activity Work Plan.

**The partnership approach**

All SETS organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

It is expected that, where practical, you collect outcomes data for **the majority of all participants**.

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you could also collect SCORE assessments periodically throughout service delivery.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Employment * Education and skills training * Material wellbeing and basic necessities * Financial Resilience | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Group/community knowledge, skills, attitudes and behaviours * Organisational knowledge, skills and practices |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Client Level Data** | **Case Level Data** | **Session Level Data** |
| * Month of first arrival in Australia * Year of first arrival in Australia * Visa Type * Ancestry | * Reason for seeking assistance * Referral source | * Referral type * Referral purpose |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type 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.

| Service Type | Example |
| --- | --- |
| Advocacy/Support | Provide opportunities for small ethno-specific groups to participate in the broader community and interact with different levels of government and engage with local stakeholders on settlement issues.  Assist community groups to access community resources and facilities to support their capacity to self-organise. |
| Community engagement | Undertake consultation with ethno-specific community groups to identify common goals, interests and needs with a view to developing community settlement strategies and plans that will assist communities to establish groups and/or informal associations.  Establish effective links and connections that facilitate referrals from a range of sources (self-referral; non-government community agencies; legal services; other government departments; or within the organisation).  Strengthen relationships with key stakeholders who are integral to providing holistic and quality services. Establish and maintain partnerships and links with other relevant agencies. |
| Education and skills training | Provide training, leadership skills and mentoring to community leaders.  Develop project management skills in ethno-specific community groups and organisations with a view to sustaining such groups and organisations in the longer term. |
| Governance | Provide training on organisational governance for organisations, community groups and community leaders (including assisting ethno-specific groups to become incorporated organisations).  Support the development of administrative and operational skills, including in applying for and managing government funding, such as outlining requirements, record keeping and financial accountability requirements for government grants. |
| Mentoring/Peer support | Support leaders/staff of community organisations to establish and maintain relationships with individuals and / or other organisations that are able to provide support and services. |

### Settlement Engagement and Transition Support (SETS) – Innovation Fund

SETS is an early intervention program that equips and empowers eligible clients and communities to address their identified settlement needs in order to improve social participation, economic wellbeing, independence, personal wellbeing and community connectedness.

**Description**

The Settlement Engagement and Transition Support (SETS) Innovation grant opportunity funds innovative projects that support and/or enhance employment for migrants and refugees.

**Who is the primary client?**

Primary clients for this program activity are SETS eligible adult clients who are unemployed or underemployed.

**What are the key client characteristics?**

There are four priority cohorts for this program activity:

* Adult persons who have arrived in Australia in the last five years
* Persons from a cultural and linguistically diverse background
* Persons with low English language proficiency
* Persons and families who are unemployed or underemployed.

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training).

For this program activity, support persons may include family members, legal representatives, community leaders, mentors, or a case/support worker.

**Should unidentified ‘group’ clients be recorded?**

This program has limited use for unidentified clients. It is expected that **less than 5 per cent** of clients should be recorded as unidentified clients in each reporting period.

For this program activity, applicable examples of where use of unidentified clients may be appropriate include training, information sessions and consultation; however providers should aim to collect individual client details for each participant/attendee where possible. Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations should create cases to reflect the main types of activities, as set out in their Activity Work Plan.

**The partnership approach**

All SETS organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record client outcomes known as Standard Client/Community Outcomes Reporting (SCORE) reporting. The partnership approach also includes the ability to record an extended data set.

It is expected that, where practical, organisations will collect SCORE outcomes data for all participants.

While generally a client SCORE assessment is recorded twice – towards the beginning of the client’s participation in the project (Pre-SCORE) and again towards the end of their participation in the project (Post-SCORE), a SCORE assessment can be conducted at additional points if it is seen as beneficial to the client or the project.

As a minimum, it is expected that you record SCORE outcomes against the domains outlined in the table below.

**What areas of SCORE are most relevant?**

For this program activity, it is expected organisations collect and record SCORE assessments in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Employment * Education and skills training | * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | All three Satisfaction outcomes are relevant for this program activity | None of the Community outcomes are relevant for this program activity |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |
| --- |
| **Client Level Data** |
| * Employment status * Highest level of education / qualification * Income (frequency and approximate gross income) * Main source of income * First arrival in Australia (year and month) * Visa Type * Ancestry |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

The service type 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Initial assessment of a client and their needs |
| Facilitate employment pathways | Assisting clients to become ‘job ready’ by building capabilities in employment skills and linking clients with opportunities that further develop work skills.  Work experience placements, job readiness preparation and employment mentoring.  Securing permanent employment (full-time, part-time or casual). |
| Education and skills training | Assisting a person to learn or build vocational, technical and work readiness skills to improve job skills in preparation for participation in the workplace. |
| Facilitate English learning pathways | Linking English language acquisition with greater employment and entrepreneurial options. This may include partnering with an employer for a client to improve their English language proficiency as part of employment “on-the-job”. |

### Youth Transition Support

**Description**

The Youth Transition Support Pilot builds on services provided under the Settlement Grants Youth Settlement Services component to address disengagement and marginalisation, and promote social cohesion in locations of high need. Organisations deliver a suite of services that provide early intervention assistance and addresses barriers to participation in education and employment that are specific to young humanitarian entrants and other vulnerable young migrants under 25 years of age.

**Who is the primary client?**

Primary clients for this program activity are young refugees and other vulnerable migrants eligible for Settlement Grants under the age of 25.

**What are the key client characteristics?**

Humanitarian entrants and other eligible migrants aged under 25 who have arrived in Australia in the last five years (clients outside this time period with complex needs may also be considered).

**Who might be considered ‘support persons’?**

Recording support persons is voluntary; staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients (who are present but not directly receiving a service), legal representatives, community leaders, mentors, or informal care givers.

**Should unidentified clients be recorded?**

Youth Transition Support is primarily client facing where ongoing relationships are formed,therefore it is expected that **no more than 20 per cent** of your clients should be recorded as unidentified clients in each reporting period.

For this program activity, applicable examples of where use of unidentified clients may be appropriate include large group information sessions and events. However, organisations should aim to collect individual client details for each participant/attendee where possible.

Please refer to the Data Exchange [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) for further guidance on appropriate use of unidentified clients.

**How should cases be set up?**

Organisations should set up cases to reflect the four pillars for Youth Transition Services, as well as case work:

* Education
* Employment
* Vocational support
* Sports
* Case work.

Where Organisations are delivering specific activities, the case name should include the pillar activity followed by the local activity name. For example:

Sports – Tuesday Soccer Club

Where Organisations are working one-on-one with an individual, the case name should include the pillar activity followed by a client’s ID number. For example: Case work – 1a7h52

**The partnership approach**

For this program, all organisations are strongly encouraged to participate in the partnership approach by submitting additional client data, in return for access to extra reports.

The partnership approach also includes the ability to record an extended data set. See [Protocols](https://dex.dss.gov.au/data-exchange-protocols/) (sections 6 and 11) for more information.

**Recording outcomes data using SCORE**

Organisations are able to record client outcomes through Standard Client/Community Outcomes Reporting (SCORE).

A client SCORE assessment is recorded at least twice – towards the beginning of the client’s service delivery and again towards the end of service delivery. Where practical, you can also collect SCORE assessments periodically throughout service delivery.

It is expected that, where practical, you collect outcomes data for a majority of clients.

**What areas of SCORE are most relevant?**

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Community participation and networks * Education and skills training * Employment | * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions | All three Satisfaction outcomes are relevant for this program activity | * Community infrastructure and networks * Organisational knowledge, skills and practices |

**For this program activity, when should each service type be used?**

The service type 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.

| Service Type | Example |
| --- | --- |
| Intake and assessment | Casework – initial assessment of a client and their needs. |
| Information/Advice/Referral | Ongoing casework, referrals to other service, youth forums on a broad range of topics such as employment, education and other participation pathways. |
| Education and skills training | School mentoring (e.g. tutoring and homework support groups), vocational training, school support groups, youth forums focussed on education, driver education. |
| Child/Youth focussed groups | Sessions targeted at children or youth, and delivered in a group, rather than individual basis. Examples include playgroups, breakfast clubs and other similar services. |
| Advocacy/Support | Youth advisory committees. |
| Community capacity building | Life skill information workshops or mentoring (e.g. building confidence, leadership skills, working in teams, etc.).  Leadership camps. |
| Outreach | School based casework and group activities (e.g. mobile hub services). |
| Facilitate employment pathways | Work experience placements, social enterprise partnerships, job readiness workshops, skills recognition, employment mentoring, youth forums focussed on employment. |
| Social participation | Sporting activities, youth forums focussed on other participation pathways. |
| Facilitate English learning pathways | Activities that facilitate pathways to improved English language and literacy, English conversation groups, and group information sessions on accessing formal English language and literacy programs. |

# NATIONAL EMERGENCY MANAGEMENT AGENCY

# Rural Programmes

The following program activities are included in Rural Programmes:

* Rural Financial Counselling Service (RFCS)

### Rural Financial Counselling Service (RFCS)

**Description**

The Rural FCS program is an Australian Government initiative that provides free and independent financial counselling to eligible farmers, fishers, foresters and small related enterprises who are experiencing, or at risk of, financial hardship.

Australian primary producers operate in volatile market and environmental conditions. Many small to medium sized enterprises are more susceptible to these shocks, often due to, lower financial capability, delayed decision-making and attitudinal factors.

The program aims to drive behavioural change, helping these primary producers to make positive changes to their financial situation that result in financial self-sufficiency―either by improving the businesses finances, or their business or exiting the industry through the sale of assets or implementing succession plans.

While the RFCS assists in transactional activities, the primary form of engagement should be extensive case management to meet the client’s needs and therefore the program objectives.

**Who is the primary client?**

Primary producers who are experiencing, or who are at risk of financial hardship.

**What are the key client characteristics?**

Primary producers who are experiencing, or at risk of financial hardship.

This may also include:

* + Persons and families who are financial distress
  + Persons receiving government payments and allowances
  + Persons residing in a rural or remote area

**Who might be considered ‘support persons’?**

Recording support persons is **not required**, however staff can record support persons if they feel it is relevant. Instructions on how to record them in the web-based portal can be found on the Data Exchange [website](https://dex.dss.gov.au/training-resources/).

For this program activity, support persons may include families of clients, case/support workers, parents/guardians of clients, and legal representatives of clients.

**Should unidentified clients be recorded?**

Rural Financial Counselling Service provides face-to-face support where clients are known to the service, therefore it is expected that **zero clients** would be recorded as unidentified clients for this activity.

**How should cases be set up?**

There is no formal case structure recommended for this program activity. Organisations should create cases that reflect their own administrative processes.

To protect client privacy, the case identity (ID) should not contain any personal information, such as any part of a client’s first or last names.

**The partnership approach**

For this program activity, all organisations are required to participate in the partnership approach. As part of the partnership approach, organisations record participant outcomes through the ‘Standard Client/Community Outcomes Reporting’ (SCORE). The partnership approach also includes the ability to record an extended data set.

It is expected that, where practical, you collect outcomes data for all case managed clients. However, it is noted that you should do so within reason and in alignment with ethical requirements.

Organisations record client outcomes through Standard Client/Community Outcomes Reporting (SCORE). A client SCORE assessment is recorded at least twice - near the beginning of the client’s service delivery, and again towards the end of service delivery. In addition, you should also collect additional SCORE assessments at the point when a client moves between case management stages as defined in the RFCS program logic.

**What areas of SCORE are most relevant?**

For this program activity, organisations must collect and record SCORE assessment in the following domains:

| **Circumstances** | **Goals** | **Satisfaction** | **Community** |
| --- | --- | --- | --- |
| * Education and skills training * Mental health, wellbeing and self-care * Financial resilience | * Changed behaviours * Changed knowledge and access to information * Changed skills * Empowerment, choice and control to make own decisions * Engagement with relevant support services | * I am better able to deal with the issues that I sought help with * I am satisfied with the services I have received * The service listened to me and understood my issues | * None of the Community outcomes are relevant for this program activity |

**Collecting extended data**

For this program activity, it is expected organisations collect and record the following additional data fields:

|  |  |  |
| --- | --- | --- |
| **Case level data** | **Session level data** | **SCORE level Data** |
| * Referral in (source) * Referral in (source and reason for seeking assistance) * Agricultural business type * Exit reason | * Referral out (type and purpose) * Hardship (if applicable, see Rural Financial Counselling Specific Fields) * External referral destination | * Assessed by |

You may record other outcomes and extended client details, if you think it is appropriate for your program and for your clients to do so.

**For this program activity, when should each service type be used?**

| Service Type | Example |
| --- | --- |
| Case managed - Intake | Initial meeting with a client during which the organisation gathers information on the client’s needs and matches them to services available, and/or assesses a client’s eligibility for participation in a particular service and formalises case management.  This is usually (but not limited to) the first session a client attends.  An additional mandatory field, **Hardship,** will be required for completion upon selecting this service type. Organisations must provide the relevant hardship reason for the client accessing the service. |
| Case Managed – FHA | Client is being case managed.  Record this as a service type where: client has been referred by Services Australia as part of their Farm Financial Agreement or attends a joint appointment with Farm Household Case Officer or discussing or applying for Farm Household Allowance (FHA). |
| Case Managed – RIC | Client is being case managed.  Record this service type if the interaction involves discussing or applying for Regional Investment Corporation (RIC) loan products, including undertaking the necessary financial assessments and risk and business planning. |
| Case managed – State government | Client is being case managed.  Record this service type if the interaction involves discussing or applying for state government assistance. |
| Case managed - Other | Client is case managed.  Record this service type if the interaction is not specified in ‘service type’ list. |
| Transactional - Intake | Initial meeting with a client during which the organisation gathers information on the client’s needs and matches them to services available, and/or assesses a client’s eligibility for participation in a particular service.  This is usually (but not limited to) the first session a client attends. Assistance is limited to determining eligibility and applying for other types of support e.g. applying for Farm Household Allowance or RIC loans.  An additional mandatory field, **Hardship,** will be required for completion upon selecting this service type. Organisations must provide the relevant hardship reason for the client accessing the service. |
| Transactional – FHA | Client is transactional.  Record this service type if the interaction involves discussing or applying for FHA or completing the FHA Farm Financial Assessment. |
| Transactional – RIC | Client is transactional.  Record this service type if the interaction involves discussing or applying for RIC loan products, including undertaking the necessary financial assessments and risk and business planning. |
| Transactional – State government | Client is transactional.  Record this service type if the interaction involves discussing or applying for state government assistance. |
| Transactional - Other | Client is transactional.  Record this service type of the interaction is not specified in list. |
| Debt Mediation | Client is case managed.  Record this service type if the interaction involves discussing, assisting, or attending debt mediation with financial institution. |
| Exit Interview | Client is transactional or case managed.  Record this service type when client exits the RFCS |
| Service Review | Client is transactional or case managed.  Record this service type when undertaking ongoing eligibility and general assessments, e.g. eligibility checks, SCORE assessments for case managed clients. |
| Service Transition | Client is transactional and agrees to be case managed.  Record this service type if the interaction involves formalising a client’s case management.  An additional mandatory field, **Hardship,** will be required for completion upon selecting this service type. Organisations must provide the relevant hardship reason for the client accessing the service. |
| Succession planning | Client is case managed.  Record this service type if the interaction involves discussing and planning a client’s succession plan, including referrals to professional third party advice. |

**Rural Financial Counselling Specific Fields**

| **Field** | **Description and examples** |
| --- | --- |
| **Agriculture Business Type** | Record the business type indicated by the client, which has generated more than **50 per cent** of the client’s income over the last three years.  A list of values is based on the Australian Bureau of Statistics **Agriculture, Forestry and Fishing** Division of the [Australian and New Zealand Standard Industrial Classification (ANZSIC)](https://www.abs.gov.au/AUSSTATS/abs@.nsf/mf/1292.0). |
| **Hardship** | ‘Hardship’ is used to indicate the client’s primary cause of difficulty or concern affecting their business.  ‘Hardship’ must be recorded for all Sessions where an intake Service Type is selected.  These include:   * Case managed – Intake * Transactional – Intake * Service Transition   Refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) for a full list of the Hardship categories. |
| **External Referral Destination** | ‘External Referral Destination’ is used to describe a client’s referral to another service from the Rural Financial Counselling Service.  ‘External Referral Destination’ must be recorded for all sessions in which you refer a client to another service.  Refer to the Data Exchange [Protocols](https://dex.dss.gov.au/document/81) for a full list of the External Referral Destination categories. |

# Version History

#### Version date 27 February 2023

Programs added:

* Building Employer Confidence in Inclusion and Disability
* Disability Advocacy: National Advocacy Phone Line (DASH)
* Disability Advocacy: NDIA Appeals
* Economic Pathways to Refugee Integration

Programs modified / changes to service types:

* Assistance with Care and Housing (ACH) – Hoarding and Squalor sub-program – sub-program name updated, service type group descriptions updated to remove ‘Assessment: referrals, Financial: advocacy and Advocacy’ from Assistance with Care and Housing. Scenarios also updated to reflect this change.
* Digital Work and Study Service – modified guidance
* Disability Royal Commission – Counselling Services – modified guidance on service settings
* Elder Abuse Services – program activity changed from a trial to an ongoing activity. The name of the activity changed to ‘Specialist Elder Abuse Services’. Updated guidance to reflect the changes.
* Home Interaction Program for Parents and Youngsters (HIPPY) – modified guidance on SCORE rubric
* Individual Placement and Support Program – modified guidance and added a new service type
* NDIS Appeals – added SCORE rubric and ‘Dispute Resolution’ service type
* Redress Support Services – modified guidance on SCORE rubric
* Rural Financial Counselling Service (RFCS) – Agency ownership updated to National Emergency Management Agency
* Seniors Connect Program Village Hub – modified guidance on SCORE rubric and service types and service types
* Social Impact Investing – Payment by Outcomes Trials: PBO 3 Long-term Employment Outcomes – modified guidance for the primary client to reflect program eligibility changes

Programs removed:

* Family and Relationship Services - Inter-country Adoption
* Intensive Family Support Services
* Volunteer Management Activity
* Youth Hubs Trial

#### Version date 18 August 2022

Programs added:

* Cashless Debit Card (CDC) Support Services / Cashless Debit Card (CDC) Support Services – Job Support Hubs
* Digital Work and Study Service
* Individual Placement and Support Program: Adult Mental Health Pilot
* National Disability Advocacy Program (NDAP) – Decision Support Pilot
* Social Impact Investing – Payment by Outcomes Trials: PBO 3 Long-term Employment Outcomes
* Temporary Visa Holders Experiencing Violence Pilot
* SARC – Inclusive Communities (Grants commencing from 2022)

Program modified / changes to service types:

* Communities for Children- Facilitating Partners - modified service types
* Financial Wellbeing and Capability – modified guidance:
  + Commonwealth Financial Counselling and Financial Capability
  + Financial Counselling Helpline
  + Problem Gambling
  + Money Support Hubs
  + Financial Resilience
  + NILS-CV
  + NILS-DV
  + Financial Crisis and Material Aid – Emergency Relief
* National Disability Advocacy Program (NDAP) – modified guidance
* Seniors Connected Program Village Hubs – modified service types
* Individual Placement Support Trial – superseded by Digital Work and Study Services
* Social Impact Investing – Payment by Outcomes Trials: Project 2 – modified guidance
* Youth Hubs Trial – added note that this program activity has ceased.
* Home Interaction Program for Parents and Youngsters (HIPPY) – modified guidance

#### Version dated 25 February 2022

Please note the Program Specific Guidance layout and the order of some programs had been updated in this edition to reflect the Portfolio Budget Statement.

Program removed/expired:

* MUSTER - The Mutual Understanding, Support, Tolerance, Engagement and Respect initiative (managed by Department of Social Services)

Programs added:

* Children and Family Intensive Support
* Accredited Training for Sexual Violence Responses: Recognising and Responding to Sexual Violence
* Escaping Violence Payment Trial
* Transition Funding for Successful Try, Test and Learn Projects
* Social Impact Investing – Payment by Outcomes Trials: PBO 1 Microenterprise Development Program
* Social Impact Investing – Payment by Outcomes Trials: Project 2

Program modified / changes to service types:

* Communities for Children – Facilitating Partners – removed expired service type
* Family Mental Health Support Services – removed expired service type
* National Find and Connect – removed expired service type
* The Fathering Project – renamed the program to *Children and Parenting Support Services – Ad hoc grants* and modified guidance content.
* Domestic Violence Response Training (DV-alert) – removed expired service types
* Seniors Connected Program Village Hubs – modified guidance content

#### Version dated 27 August 2021

Please note the Program Specific Guidance layout and the order of some programs has been updated to reflect the Portfolio Budget Statement.

Program removed/expired:

* Try Test and Learn – tranche 1
* Try Test and Learn – tranche 2

Programs added:

* Intercountry Adoptee and Family Support Service
* Individual Placement and Support Program
* Foyer Central
* Rural Financial Counselling Service (RFCS)

Program name changes:

* Community Mental Health, Early Intervention for Children, Young people and their Families (Family Mental Health Support Services(FMHSS)) – now: Family Mental Health Support Services

Programs modified / changes to service types:

* Forced Adoption Support Service (FASS) – modified guidance content
* National Find and Connect – removed expired service type
* Redress Support Services – modified guidance content
* Settlement Engagement and Transition Support (SETS) – Client Services – service type added
* A Better Life – modified guidance content
* Budget Based Funded Program - modified guidance content
* Children and Parenting support services - modified guidance content
* Communities for Children- Facilitating Partners - modified guidance content
* Family and Relationship Services - modified guidance content
* Family and Relationship Services- Specialised Family Violence Services - modified guidance content
* Family Mental Health Support Services - modified guidance content
* Domestic Violence Response Training (DV-alert) – modified guidance content

#### Version dated 21 April 2021

Programs added:

* Seniors Connected – Village Hubs National Grants Manager

Programs modified / changes to service types:

* Be Connected – modified guidance content
* ICSS Carer Gateway service providers – modified guidance content
* National Disability Advocacy Program (NDAP) – modified guidance content
* NDIS Appeals – modified name and guidance content
* Budget Based Funding – modified guidance content

#### Version dated 4 January 2021

Programs removed/expired

* Legally Assisted and Culturally Appropriate Family Dispute Resolution
* Carer information and support service
* Commonwealth respite and Care link Centres
* Consumer directed respite care
* Counselling, support, information and advocacy
* Dementia education training for carers programme
* National carer counselling programme
* Mental health respite carer support
* Settlement Grants

Programs added:

* SETS – Innovation fund

Programs modified / changes to service types:

* Family Law Services – addition of Property Agreement fields (several programs) for incoming February 2021 changes.

#### Version dated 14 August 2020

Programs added:

* Specialised Family Violence Services – Fourth Action Plan (SFVS-4AP)
* Mutual Understanding Supp Tol Eng & Resp

Programs modified / changes to service types:

* Assistance with Care and Housing – Added 4 new Service Type categories and descriptions
* Care Relationships and Carer Support – Added 4 new Service Type categories and descriptions
* National Find and Connect – One additional service type, and one removed service type. Addition of Recording outcomes data using SCORE, and Collecting extended data
* National Disability Advocacy Program (NDAP) – Partnership Approach added, additional SCORE domains added to guidance
* NDIS Appeals – Partnership Approach added, additional SCORE domains added to guidance
* Disability Royal Commission - Advocacy Support - additional SCORE domain added to guidance
* Family Law Services (9 programs) moved from DSS-Outcome 2.1 – Families and Communities to AGD-Family Law Services

#### Version dated 25 May 2020

Programs removed/expired:

* Emergency Relief - Service Continuity
* Commonwealth Financial Counselling and Capability - Service Continuity
* Financial Counselling Helpline - Service Continuity
* Personal Helpers and Mentors

Programs added:

* Tristate Carer Vocational Outcomes Program
* Youth Hubs trial
* NILS – CV
* NILS - DV

Programs modified / changes to service types:

* ICSS Carer Gateway service providers (formerly Integrated Carer Support Services (ICSS) Carer Gateway regional delivery partners) - modified name and guidance content
* Try Test and Learn – tranche 1 – two additional services types
* Home Interaction Program for Parents and Youngsters (HIPPY) – two additional service types
* MUSTER - The Mutual Understanding, Support, Tolerance, Engagement and Respect initiative – three additional service types
* Family Law Services – addition of Fees Charged (several programs)
* National Community Hubs Program- four removed service types and other content updates

#### Version dated 20 December 2019

Programs removed/expired:

* Career Pathways Pilot for Humanitarian Entrants
* Carers and Work

Programs added:

* Disability Royal Commission – Advocacy
* Disability Royal Commission – Counselling Services

Advance notification of upcoming changes:

* Family Law Services programs (several programs)

**Note** – minor changes to this document were made on 10 January 2020 to rectify publishing errors (affecting the Index and DRC Advocacy pages)

#### Version dated 24 April 2019

Programs removed/expired:

* Building Capacity in Australian Parents (BCAP)

Programs added:

* MUSTER - The Mutual Understanding, Support, Tolerance, Engagement and Respect initiative
* Elder Abuse Service Trials

Programs modified / changes to service types:

* Try Test and Learn – tranche 2
* DV-Alert

Advance notification of upcoming changes:

* Community Mental Health, Early Intervention for Children – Removal of ‘Mentoring/Peer Support’
* NDIS Appeals – removal of ‘Advocacy/Support’
* Family Law Services – removal of ‘Outreach’ (several programs)

#### Version dated 14 February 2019

Programs modified / changes to service types:

* Forced Adoption Support Services: changes to service type definitions.

#### Version dated 31 January 2019

Program removed/expired:

* Royal Commission Support Services

Programs added:

* Settlement Engagement and Transitions Support (SETS) – Client Services
* Redress Support Services

Programs modified / changes to service types:

* Financial Wellbeing and Capability:
  + Commonwealth Financial Counselling and Financial Capability
  + Financial Counselling Helpline
  + Problem Gambling
  + Financial Crisis and Material Aid – Emergency Relief
  + Financial Resilience
  + Money Support Hubs (formerly known as ‘Financial Counselling and Financial Capability - IM Hubs’, and ‘Financial Counselling and Financial Capability Cape York’).
* CHSP: Changes to some examples and descriptions in the following sub-programs:
  + Community and Home Support

#### Version dated 3 January 2019

Programs added:

* Financial Crisis and Material Aid - Emergency Relief - Service Continuity
* Commonwealth Financial Counselling and Financial Capability - Service Continuity
* Financial Counselling Helpline - Service Continuity

#### Version dated 19 December 2018

Programs reinserted:

* Try Test and Learn (TTL) – Tranche 2.

#### Version dated 10 December 2018

Programs removed/expired:

* Try Test and Learn (TTL) – Tranche 2 Batch 1.

#### Version dated 3 December 2018

The only change is the splitting of the Data Exchange program specific guidance into two documents:

* Appendix B - Commonwealth Agencies (this one), and
* Appendix B - State Agencies (see separate volume).

Future changes and additions will be noted in the version history of the respective documents.

#### Version dated 15 November 2018

Programs added:

* Try Test and Learn (TTL) – Tranche 2 (the first of five ‘batches’ of projects)
* Stayin Kinnected - NSW Government - Family and Community Services

Programs modified / changes to service types:

* Be Connected: additional modules, and changes to service types/module groupings.
* ICSS – Digital Counselling: change to minimum age of carers from 14 to 18 years.

Advance notification of upcoming changes:

* Forced Adoption Support Services: changes to service types from February 2019.

#### Version 1.9, 20 August 2018

Programs removed/expired:

* Royal Commission Support Services NT

Programs added:

* Integrated Carer Support Services (ICSS) – Digital Counselling

Programs modified / changes to service types:

* Money Support Hubs – name change, and now also incorporates ‘Financial Counselling and Financial Capability - Cape York’
* Family & Relationship Services (FARS) – removed two service types
* FARS – Specialised Family Violence – removed two service types
* Financial Crisis and Material Aid – Emergency Relief – one additional service type
* Settlement Services (4 programs) - one additional service type
* Integrated Carer Support Services (ICSS) – Digital Counselling - one additional service type

Introduction of ‘service settings’

Changes to the SCORE outcomes framework, including:

* split of the Employment, Education and Training domain into two separate domains
* a new Community SCORE of ‘Social inclusion’
* minor changes to other SCORE domain names or descriptions

#### Version 1.8, 13 July 2018

Programs added:

* Budget Based Funded Program (BBF)

Programs modified / changes to service types:

* Reconnect – added Collecting extended data
* Money Support Hubs – name change (formerly known as Financial Counselling and Financial Capability – IM Hubs)

#### Version 1.7, 23 May 2018

Programs added:

* Strong and Resilient Communities (SARC) – 2 program activities
* Try, Test and Learn (TTL Tranche 1) – 14 projects.

Programs modified / changes to service types:

* National Disability Advocacy Program (NDAP) - to provide additional guidance around systemic advocacy;
* Family Mental Health program (FMHSS) - to reflect the incorporation of this activity into Community Mental Health, Early Intervention for Children, Young People and their Families activity; and
* Volunteer Management - to provide additional guidance through scenarios.

Advance notification of upcoming changes:

* Family and Relationship Services
* Emergency Relief
* Settlement Services

#### Version 1.6, 7 March 2018

Complete reformatting of Appendix B: Changes include the removal of diagrams, the listing of each program activity within a group, changes to the layout for SCORE information, simplified and standardised headings.

Two program activities have been added: “**Be Connected**” and “**Volunteer Management**”. A new project has been added to the “National Plan to Reduce Violence against Women and their Children”: “**Support for Family Safety in the Kimberley Project**”.

Other changes include a scenario table added for the Reconnect activity; a new service type added for the National Disability Advocacy Program; and a correction to the timeframes for the ‘Advocacy External Review’ service type in NDIS Appeals.

#### Version 1.5, October 2017

Information and counting rules updated for the Commonwealth Home Support Programme.

#### Version 1.4, 18 July 2017

Additional programs added: **Building Capacity in Australian Parents**, **Domestic Violence Response Training**, **National Disability Advocacy Program** and **Community Inclusion and Capacity Development**.

Amendments made to Career Pathways Pilot for Humanitarian Entrants. Amendments made to the National Initiatives diagram to reflect changes.

Two service types added to National Disability Insurance Scheme Appeals. New program activity for ‘Family Relationship Centres – Legally Assisted and Culturally Appropriate Family Dispute Resolution’.

New diagram added for National Disability Insurance Agency for the Community Inclusion and Capacity Development program. Update to the Disability and Carer diagram to reflect changes.

Additional paragraph added for Individual Placement and Support Trial.

#### Version 1.3, 20 March 2017

Service types to be removed in February extracted from listing. Updates to the following programs: ‘Commonwealth Home Support Program (CHSP)’ regarding fees charged as a mandatory field and ‘Safe Technology for Women’ key target groups. Addition of new program ‘Family Relationship Centres – Legally Assisted and Culturally Appropriate Family Dispute Resolution’.

#### Version 1.2, 20 January 2017

General Data Exchange items including Aboriginal, Torres Strait islander, disability and cultural and linguistic diversity removed from target groups under Settlement Grant services. Addition of new program ‘Royal Commission Support Services NT’.

#### Version 1.1, 21 December 2016

Acronyms removed and review of material of the following programs: ‘A Better Life’, ‘Carers and Work’, ‘Family Mental Health Support Services’ and ‘Individual Placement and Support Trial’.

#### Version 1, December 2016

First publication and release of document.

1. Whilst the collection of Ancestry is strongly encouraged, we acknowledge the sensitivities for intercountry adoptees associated with the collection of this information. Organisations are encouraged to use their discretion when collecting this data item. [↑](#footnote-ref-1)