

# Program Specific Guidance for Outcome 3.1 Disability and Carers Program in the Data Exchange

Version dated 1 August 2023



## Introduction

#### The Program Specific Guidance

The Program Specific Guidance assists service providers on entering data into the Data Exchange in a consistent way that best reflects the program activity being delivered.

#### Purpose of this document

This document provides policy guidance on entering data into the Data Exchange for activities funded under **Outcome 3.1 – Disability and Carers Program** by the **Department of Social Services**.

These guidelines should be read in conjunction with:

- Data Exchange <u>Protocols</u>
- Your funding agreement
- Your program guidelines
- The task cards and e-Learning modules available on the Data Exchange website

#### **Intended Use**

The **Program Specific Guidance** is intended to provide practical information for managers and front-line staff to better understand the data expected for their program. It also assists them in integrating Standard Client/Community Outcome Reporting (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.

The Program Specific Guidance for Commonwealth-funded programs was formerly published as:

- Protocols Appendix B
- Program Specific Guidance for Commonwealth Agencies in the Data Exchange

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## Outcome 3.1 – Disability 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
- Support and connection for young children with disability or developmental concerns
- Supports for parents and carers of young children with disability or developmental concerns
- 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 <u>website</u>.

#### 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
<ul> <li>Education and skills training</li> <li>Employment</li> <li>Mental health, wellbeing and self-care</li> </ul>	<ul> <li>Changed knowledge and access to information</li> <li>Changed skills</li> <li>Empowerment, choice and control to make own decisions</li> </ul>	<ul> <li>The service listened to me and understood my issues</li> <li>I am satisfied with the services I have received</li> <li>I am better able to deal with issues that I have sought help with</li> </ul>

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

Circumstances	1	2	3	4	5
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
<ul> <li>Employment status</li> <li>Highest level of education / qualification</li> <li>Main source of income</li> </ul>	<ul> <li>Service setting</li> </ul>	<ul> <li>Referral in (source and reason for seeking assistance)</li> <li>Exit reason</li> </ul>

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.

Service Type	Example
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.
	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):
Education and skills	<ul> <li>career planning</li> <li>assistance in applying for training courses, including enrolment and assistance with accessing study assistance</li> <li>organisational skills</li> <li>exam stress reduction and study skills assistance, and</li> </ul>
	<ul> <li>updates to vocational support plan (education focus).</li> </ul>
	Employment activities focussed on employment, including (but not limited to):
Facilitate employment pathways	<ul> <li>career and education development, assisting with navigating employment sites</li> <li>assistance in looking and applying for work, such as job search and canvassing, CV / resume / application writing</li> <li>assistance in preparing for interview, such as practice interviews</li> <li>career planning, including updates to vocational support plan (employment focus), and</li> <li>assistance with benefits.</li> </ul>
Information / Advice /	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.
Referral	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 <u>website</u>.

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 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.

Goals	Satisfaction	Community
<ul> <li>Changed knowledge &amp; access to information</li> <li>Changed impact of immediate crisis</li> </ul>	<ul> <li>The service listened to me and understood my issues</li> <li>I am satisfied with the services I have received</li> </ul>	<ul> <li>Group/community knowledge, skills, attitudes and behaviours</li> </ul>
<ul> <li>Empowerment, choice and control to make own decisions</li> <li>Engagement with relevant support services</li> </ul>	<ul> <li>I am better able to deal with issues that I sought help with.</li> </ul>	

#### **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
<ul><li>Homeless indicator</li><li>NDIS eligibility</li></ul>	<ul> <li>Referral in (source)</li> <li>Reason for seeking assistance</li> </ul>	<ul> <li>Referral out (type)</li> <li>Referral purpose</li> <li>Interpreter present</li> <li>Service setting</li> </ul>

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.

Service Type	Example
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 <u>website</u>.

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 <u>Protocols</u> 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 (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
<ul> <li>Mental health and wellbeing and self-care</li> </ul>	<ul> <li>Changed knowledge &amp; access to information</li> <li>Engagement with relevant support services</li> </ul>	<ul> <li>I am satisfied with the services I have received</li> </ul>

#### **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 <u>Protocols</u> (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	<ul> <li>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.</li> <li>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;</li> <li>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 services.</li> </ul>
Counselling	<ul> <li>Provision of accessible, client-focused and trauma-informed counselling support to people affected by the Disability Royal Commission.</li> <li>The Phone line provides ad hoc counselling sessions and support over the telephone by suitably trained allied health professionals, such as counsellors and psychologists.</li> <li>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.</li> </ul>

## **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 <u>website</u>.

#### 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 <u>website</u>.

#### 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
<ul> <li>Mental health, wellbeing and self-care</li> </ul>	<ul> <li>I am better able to deal with issues that I sought help with</li> </ul>
	<ul> <li>I am satisfied with the services I have received</li> </ul>
	<ul> <li>The services listened to me and understood my issues</li> </ul>

#### **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	<ul> <li>This service type should be used when providing information, advice or referral to an existing client of Digital Counselling.</li> <li>This service type can be used when: <ul> <li>a carer has completed their Digital Counselling sessions and requires help considering further supports and/or services</li> <li>referral is provided to other services that may benefit the carer</li> <li>a carer finds the online or phone format difficult to follow and would like to discuss other services instead</li> <li>a carer requests specific information about their case.</li> </ul> </li> </ul>
Intake and assessment	<ul> <li>For this program, 'Intake and assessment' is a defined counselling needs assessment process of the carer performed by an accredited professional.</li> <li>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: <ul> <li>in the telephone setting, the assessor is able to question the carer during a phone conversation</li> <li>in the digital setting, the assessor studies the responses previously provided online by the carer.</li> </ul> </li> </ul>
Service review	<ul> <li>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: <ul> <li>explain Digital Counselling</li> <li>explain suitability or unsuitability with empathy, possibly outlining reasons which may be sensitive or clinical in nature</li> <li>explain other services, within ICSS and beyond (e.g. NDIS).</li> </ul> </li> <li>Where appropriate, the caller will also need to record new information that may be raised by the carer about their situation during this call.</li> </ul>

Service type	Example
	For this program, counselling must be conducted by an accredited professional.
	Counselling should <u>only</u> be used when the 'intake and assessment' process indicated that the service is appropriate to the carer's clinical needs.
Counselling	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 (' <b>telephone</b> ' or ' <b>digital</b> ') 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.

#### Should unidentified clients be recorded?

Carer Gateway service providers provide individual support, where clients are known to the service. Therefore, it is expected that clients are 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 Star<sup>™</sup> 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 Star<sup>™</sup> into the Circumstances domain, refer to the <u>Data Exchange Translation Matrix</u>. Instructions on how to record outcomes in the Data Exchange can be found on the Data Exchange <u>website</u>.

#### 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
<ul> <li>Mental health, wellbeing and self-care</li> </ul>	<ul> <li>I am better able to deal with issues that I sought help with</li> <li>I am satisfied with the services I have received</li> <li>The services listened to me and understood my issues</li> </ul>

#### **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
<ul> <li>Is the client a carer?</li> <li>Household composition</li> <li>Main source of income</li> </ul>	<ul> <li>Reason for seeking assistance</li> <li>Referral source</li> </ul>	<ul> <li>Referral type</li> <li>Referral purpose</li> <li>Service setting, where appropriate for the service type used (see below)</li> </ul>

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:
	<ul> <li>a registered carer is referred to an external service (for example, My Aged Care or NDIS)</li> <li>a phone enquiry from an unidentified caller results in the provision of information/advice/referral without intake and assessment.</li> </ul>

Service type	Example
	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.
	<ul> <li>'Total cost' data field</li> <li>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.</li> <li>Refer to the examples below.</li> </ul>
	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.
Material Goods	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.
	<ul> <li>Session 1: Cost reported as \$500 and the carer is linked to the session.</li> </ul>
	• 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.
	This service type should be used for instances of providing <b>services</b> (such as vocational training or driving lessons) as a <b>One-off Practical Support</b> to a Carer (under the <b>Carer Directed Support Service)</b> .
	If multiple services are provided, a session should be recorded in the Data Exchange for each instance of service.
Carer support	<ul> <li><b>'Total cost' data field</b></li> <li>In the 'Total cost' field, enter the <b>total value</b> of the support that the client receives in the session, rounded to the nearest dollar. Do <b>not</b> enter any client contribution amounts.</li> <li>Refer to the example below.</li> </ul>
	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).

Service type	Example
	<ul> <li>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.</li> <li>Session 1: Cost reported as \$100 and the carer is linked to the session.</li> </ul>
	This service type should be used for instances of <b>planned respite (direct or indirect)</b> as a part of a <b>Carer Directed Package</b> (under the <b>Carer Directed Support Service)</b> .
	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
	<ul> <li>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.</li> </ul>
	<ul> <li>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.</li> </ul>
	<ul> <li>Refer to the examples below.</li> </ul>
	Service setting:
	One of the following service settings should be selected for each session with a carer:
Respite	<ul> <li>'Client's residence', when the care recipient(s) were provided replacement care in the carer's home</li> </ul>
	<ul> <li>Another appropriate service setting, when the care recipient(s) were cared for in a location other than their home.</li> </ul>
	<b>Scenario 1:</b> 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.
	<ul> <li>Session 1: Planned respite costs are reported as \$100, time is reported as 2:00 hours, and the carer is linked to the session.</li> </ul>
	<ul> <li>Session 2: Planned respite costs are reported as \$100, time is reported as 2:00 hours, and the carer is linked to the session.</li> </ul>
	<ul> <li>Session 3: Planned respite costs are reported as \$100, time is reported as 2:00 hours, and the carer is linked to the session.</li> </ul>
	For sessions 4–8 (and any further services provided thereafter) the provider continues to create sessions in the same way.
	<b>Scenario 2:</b> 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

Service type	Example
	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.
	<ul> <li>Session 1: Costs are reported as \$900, the time is reported as 48:00 hours, and the carer is linked to the session.</li> </ul>
	<b>Scenario 3:</b> 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.
	<ul> <li>Session 1: Costs are reported as \$300, the time is reported as 12:00 hours, and the carer is linked to the session.</li> <li>Session 2: Costs are reported as \$300, the time is reported as</li> </ul>
	12:00 hours, and the carer is linked to the session.
	This service type should be used for instances of purchasing <b>services or</b> <b>material goods</b> (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
	<ul> <li>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.</li> </ul>
	<ul> <li>Refer to the example below.</li> </ul>
Specialist Support	<b>Scenario 1:</b> 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.
	<ul> <li>Session 1: Cleaning package costs are reported as \$200, and the carer is linked to the session.</li> </ul>
	<ul> <li>Session 2: Cleaning package costs are reported as \$200, and the carer is linked to the session.</li> </ul>
	<ul> <li>Session 3: Cleaning package costs are reported as \$200, and the carer is linked to the session.</li> </ul>

Service type	Example
	This service type should be used for sessions of <b>In-Person Counselling</b> , performed with an accredited professional counsellor. Sessions are delivered in-person.
Counselling	There may be multiple sessions of this activity for each case.
Counsening	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'.
	This service type should be used for the <b>Coaching Service</b> delivered in the facilitated format.
	<ul> <li>Note the <u>self-guided</u> format is an online version (<u>not</u> reported in the Data Exchange).</li> </ul>
Education and skills training	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:
	<ul> <li>In-person</li> <li></li></ul>
	Telephone
	This service type should be used when the service provider takes the carer through the <b>Carer Support Planning Process</b> , to access Carer Gateway services. This includes:
	<ul> <li>Intake</li> </ul>
	<ul> <li>Registration</li> </ul>
	<ul> <li>Needs assessment, which includes completing the Carers Star<sup>™</sup> for the first time</li> </ul>
	<ul> <li>Service planning, includes completing an Action Plan for the first time.</li> </ul>
Intake and assessment	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 Star <sup>™</sup> .
	This service type should be used when a carer transfers from any other service provider <u>without</u> an Action Plan.
	Service setting:
	One of the following service settings should be selected for each intake and assessment session with a carer:
	<ul> <li>In-person</li> </ul>
	Telephone.
	This service type should be used when a carer joins an <b>In-Person Peer</b> <b>Support</b> group session. This service type should only be used for instances of peer support with a record of the carer being present.
Mentoring/Peer support	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.

Service type	Example
Emergency Respite	<ul> <li>Example</li> <li>This service type should be used when the Emergency Respite Care service cares for the care recipient(s) in an emergency situation.</li> <li>'Hours/Minutes' and 'Total cost' data fields</li> <li>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.</li> <li>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.</li> <li>Refer to the examples below.</li> <li>Service setting:</li> <li>One of the following service settings should be selected for each session with a carer:</li> <li>'Client's residence', when the care recipient(s) were provided replacement care in the carer's home</li> <li>Another appropriate service setting, when the care recipient(s) were cared for in a location other than their home.</li> <li>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 would create two sessions in the Data Exchange. The cost would be entered as \$2200, and the duration would be entered as 24:00 hours, and the carer is linked to the session. This is reported in the following DEX reporting period.</li> <li>Seession 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 following DEX reporting period.</li> <li>Seession 1: Cost reported as \$1600, the time is reported as 24:00 hours. The cost would be entered as</li></ul>

Service type	Example
	<b>Scenario 3:</b> The provider delivers <b>Emergency Respite Care</b> 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).
	<ul> <li>Session: Cost is reported as \$500, the time is reported as 12:00 hours and the carer is linked to the session.</li> </ul>
	This service type should be used when reviewing a carer's situation, including:
	<ul> <li>reviewing and/or re-completing the Carers Star<sup>™</sup></li> </ul>
	<ul> <li>reviewing and/or re-completing an Action Plan.</li> </ul>
	This service type should be used in the following situations:
	<ul> <li>when some ICSS services have already been delivered to the carer</li> </ul>
Service review	<ul> <li>when there is an unexpected change in a carer's circumstances</li> </ul>
Service review	<ul> <li>for the completion of second and subsequent Action Plans</li> </ul>
	<ul> <li>when a carer transfers from another service provider <u>with</u> a Carers Star<sup>™</sup> or Action Plan and needs this to be reviewed.</li> </ul>
	Service setting:
	One of the following service settings should be selected for each session with a carer:
	<ul> <li>In-person</li> </ul>
	<ul> <li>Telephone</li> </ul>

### **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 <u>Data Exchange website</u>.

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
<ul> <li>Employment</li> <li>Education and skills training</li> <li>Mental health, wellbeing and self-care</li> </ul>	<ul> <li>Changed behaviours</li> <li>Changed knowledge and access to information</li> <li>Changed skills</li> <li>Empowerment, choice and control to make own decisions</li> <li>Engagement with relevant support services</li> </ul>	<ul> <li>I am satisfied with the services I have received</li> <li>The service listened to me and understood my issues</li> <li>I am better able to deal with issues that I sought help with</li> </ul>

#### 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
<ul> <li>Employment status</li> <li>Highest level of education / qualification</li> </ul>	<ul> <li>Referral in (source and reason for seeking assistance)</li> <li>Exit Reason</li> </ul>	<ul><li>Referral out (type and purpose)</li><li>Service setting</li></ul>
<ul> <li>Main source of income</li> </ul>		

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.

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	<ul> <li>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):</li> <li>career planning</li> <li>assistance in applying for training courses, including enrolment and assistance with accessing study assistance</li> <li>organisational skills</li> </ul>			

More information on Service Types can be found in the Data Exchange Protocols.

Service Type	Example
	<ul> <li>exam stress reduction and study skills assistance</li> <li>updates to vocational support plan (education focus).</li> </ul>
Exit interview	<ul> <li>To be used when a young person is Exiting IPS.</li> <li>This would also be the point in time where one or more of the following would take place: <ul> <li>a SCORE outcomes assessment</li> <li>final participant survey.</li> </ul> </li> <li>The circumstances surrounding the ending of a client's relationship with a case can be captured when filling in Exit Reasons: <ul> <li>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: <ul> <li>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</li> </ul> </li> </ul></li></ul>
	<ul> <li>placement/ended it early, or</li> <li>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.</li> <li>Milestones: <ul> <li>For employment: gaining an employment placement, 4, 13 and 26 weeks in the employment</li> <li>For education: gaining an education placement, one semester of education or short course completed.</li> </ul> </li> <li>Client no longer requires assistance: Used when a young person is exiting IPS and has either: <ul> <li>Not obtained an employment or educational placement during their episode, or</li> <li>Lost/ended a work or educational placement that they achieved during the episode.</li> </ul> </li> <li>An exit interview, SCORE assessment and offer of participation in client survey may also occur.</li> </ul>
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).

Service Type	Example
Facilitate employment pathways	<ul> <li>Employment activities focussed on employment, including (but not limited to):</li> <li>career and education development, assisting with navigating employment sites.</li> <li>assistance in looking and applying for work, such as job search and canvassing, CV / resume / application writing</li> <li>assistance in preparing for interview, such as practice interviews)</li> <li>career planning, including updates to vocational support plan (employment focus).</li> <li>Also includes providing assistance with benefits.</li> </ul>
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	<b>For Vocational Peer Support Pilot sites only:</b> 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.

#### 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
<ul> <li>Employment</li> <li>Education and skills training</li> <li>Mental health, wellbeing and self-care</li> </ul>	<ul> <li>Changed behaviours</li> <li>Changed knowledge and access to information</li> <li>Changed skills</li> <li>Empowerment, choice and control to make own decisions</li> <li>Engagement with relevant support services</li> </ul>	<ul> <li>I am satisfied with the services I have received</li> <li>The service listened to me and understood my issues</li> <li>I am better able to deal with issues that I sought help with</li> </ul>

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
<ul> <li>Employment status</li> <li>Highest level of education / qualification</li> </ul>	<ul><li>Referral out (type and purpose)</li><li>Service setting</li></ul>	<ul> <li>Referral in (source and reason for seeking assistance)</li> <li>Exit reason</li> </ul>
<ul> <li>Main source of income</li> </ul>		

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 /	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.
Referral	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.

Service Type	Example
Education and skills	<ul> <li>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):</li> <li>career planning</li> <li>assistance in applying for training courses, including enrolment and assistance with accessing study assistance</li> <li>organisational skills</li> <li>exam stress reduction and study skills assistance</li> <li>updates to vocational support plan (education focus)</li> </ul>
Exit interview	<ul> <li>To be used when a client is exiting the program.</li> <li>This would also be the point in time where one or more of the following would take place: <ul> <li>a SCORE outcomes assessment</li> <li>final client survey</li> </ul> </li> <li>The circumstances surrounding the ending of a client's relationship with a case can be captured when filling in Exit Reasons: <ul> <li>Client needs have been met: Used when a client is exiting IPS and who has reached one/some/all of the milestones below and: <ul> <li>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 <ul> <li>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.</li> </ul> </li> <li>Milestones: <ul> <li>For employment: gaining an employment placement, 4, 13 and 26 weeks in the employment</li> <li>For education: gaining an education placement, one semester of education or short course completed.</li> </ul> </li> <li>Client no longer requires assistance: Used when a client is exiting IPS and has either: <ul> <li>Not obtained an employment or educational placement during their episode, or</li> <li>Lost/ended a work or educational placement that they achieved during the episode.</li> </ul> </li> <li>An exit interview, SCORE assessment and offer of participation in client survey may also occur.</li> </ul></li></ul></li></ul>

Service Type	Example	
Facilitate employment pathways	<ul> <li>Employment activities focussed on employment, including (but not limited to):</li> <li>career and education development, assisting with navigating employment sites</li> <li>assistance in looking and applying for work, such as job search and canvassing, CV / resume / application writing</li> <li>assistance in preparing for interview, such as practice interviews</li> <li>career planning, including updates to vocational support plan (employment focus)</li> <li>assistance with benefits</li> </ul>	
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 planAssisting a client by developing a vocational support plan that has education focus and engaging with the client to explain the plan engagement with the client is required).NOTE: This service type should not be used for updates to the plan 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). <b>NOTE</b> : This service type should not be used for updates to the plan. To update the plan use service type <b>Facilitate employment pathways</b> .	

# 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.

<u>Operational Guidelines</u> 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 <u>website</u>.

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 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
<ul> <li>Empowerment, choice and control to make own decisions</li> </ul>	<ul> <li>Physical health</li> <li>Mental health, wellbeing &amp; self-care</li> <li>Personal and family safety</li> <li>Age-appropriate development</li> <li>Community participation &amp; networks</li> <li>Family functioning</li> <li>Financial resilience</li> <li>Employment</li> <li>Material wellbeing and basic necessities</li> <li>Housing</li> </ul>

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
<ul> <li>Changed knowledge and access to information</li> <li>Changed behaviours</li> </ul>	<ul> <li>The service listened to me and understood my issues</li> </ul>
<ul> <li>Changed skills</li> </ul>	<ul> <li>I am satisfied with the services I have received</li> </ul>
<ul><li>Engagement with relevant support services</li><li>Changed impact of immediate crisis</li></ul>	<ul> <li>I am better able to deal with issues that</li> <li>I sought help with</li> </ul>

# 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.

Service Type	Example
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.

Торіс	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 servicesProviding support to implement an NDIS plan or access disa 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, convenues 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 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	
<ul> <li>Community participation &amp; networks</li> </ul>	<ul> <li>Changed knowledge and access to information</li> </ul>	<ul> <li>The service listened to me and understood my issues</li> </ul>	
<ul> <li>Housing</li> <li>Material wellbeing and basic necessities</li> <li>Mental health, wellbeing &amp; self-care</li> <li>Personal and family safety</li> <li>Physical health</li> </ul>	<ul> <li>Empowerment, choice and control to make own decisions</li> <li>Engagement with relevant support services</li> </ul>	<ul> <li>I am satisfied with the services I have received</li> <li>I am better able to deal with issues that I sought help with.</li> </ul>	

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.

Circumstances	1	2	3	4	5
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.

Goals	1	2	3	4	5
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.	l 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
<ul> <li>NDIS eligibility</li> </ul>	<ul> <li>Referral out (type and</li> </ul>	<ul> <li>Attendance profile</li> </ul>
	purpose)	<ul> <li>Referral in (source and reason</li> </ul>
	<ul> <li>Interpreter present</li> </ul>	for seeking assistance)
	<ul> <li>Service setting</li> </ul>	<ul> <li>Exit reason</li> </ul>

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.

Торіс	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 <u>reviewable</u> <u>decisions</u> of the National Disability Insurance Agency (NDIA). The program is designed to support clients to navigate external merits review process in the <u>Administrative Appeals Tribunal</u> (AAT) or agreed alternative dispute resolution pathways that support resolution of disputes arising from NDIA decisions.

<u>Operational Guidelines</u> 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 <u>website</u>.

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 <u>Protocols</u> 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
<ul> <li>Age-appropriate development</li> <li>Community participation and networks</li> <li>Education and skills training</li> <li>Employment</li> <li>Family functioning</li> <li>Financial resilience</li> <li>Housing</li> <li>Material wellbeing and basic necessities</li> <li>Mental health, wellbeing and self-care</li> <li>Personal and family safety</li> <li>Physical health</li> </ul>	<ul> <li>Changed impact of immediate crisis</li> <li>Changed knowledge and access to information</li> <li>Empowerment, choice and control to make own decisions</li> <li>Engagement with relevant support services</li> </ul>	<ul> <li>I am better able to deal with issues that I sought help with</li> <li>I am satisfied with the services I have received</li> <li>The service listened to me and understood my issues</li> </ul>

# **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 <u>Data Exchange Protocols</u>.

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.

Circumstance	1	2	3	4	5
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.

Circumstance	1	2	3	4	5
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	l 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

Goal	1	2	3	4	5
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	l am very unsatisfied.	l am a little unsatisfied.	I am somewhat satisfied.	I am mostly satisfied.	l 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.

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.

Service Type	Example
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.

# Support and connection for young children with disability or developmental concerns

# Description

The Support and connection for young children with disability or developmental concerns program activity will provide regular, facilitated community-based supports, including playgroups and music programs to young children (aged 0-8 years) with disability or developmental concerns across Australia. The activity should aim to increase children's readiness for educational environments and provide opportunities for children with disability or developmental concerns to socialise with peers and their siblings in a supported, and family-centred environment. The activity will use local knowledge and networks to support connections for parents and carers and will aim to increase parental or carer capability to support their child's development and prepare them for learning environments through participation in activities.

#### Who is the primary client?

Children aged 0-8 years with a disability or a developmental concern, and their parents or carers.

#### What are the key client characteristics?

- Children aged 0-8 years with a disability or developmental concern.
- Parents and carers of children aged 0-8 years with a disability or developmental concern.

#### Who might be considered 'support persons'?

For this program activity, if the client is a child, a support person will always be involved. This may include a family member or relative, including siblings, or a parent/carer of the client.

If the client is a parent or carer, support persons are voluntary. This may include a family member or relative, carer of clients, or care recipients (who are present, but not directly receiving a service).

Instructions on how to record support persons in the web-based portal can be found on the Data Exchange <u>website</u>.

#### Should unidentified clients be recorded?

This program activity 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. 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. 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 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 50 per cent of identified clients.

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 the client's 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
<ul> <li>Age-appropriate development</li> <li>Community participation and networks</li> <li>Family functioning</li> </ul>	<ul> <li>Changed behaviours</li> <li>Changed knowledge and access to information</li> <li>Changed skills</li> <li>Engagement with relevant support services</li> </ul>	<ul> <li>The service listened to me and understood my issues</li> <li>I am satisfied with the services I have received</li> </ul>

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
Age-appropriate development (Child)	My child finds most of the activities very hard to understand and complete	My child finds many of the activities hard to understand and complete	My child finds some of the activities hard but others they can understand and complete	My child can understand and complete many of the activities	My child can understand and complete almost all of the activities
Community participation and networks (Child)	My child does not have opportunities to connect with their peers	My child rarely has opportunities to connect with their peers	My child sometimes has opportunities to connect with their peers	My child mostly has opportunities to connect with their peers	My child has lots of opportunities to connect with their peers
Family functioning (Parent)	My family does not feel equipped to support our child's development needs	My family rarely feels equipped to support our child's development needs	My family sometimes feels equipped to support our child's development needs	My family often feels equipped to support our child's development needs	My family feels equipped to support our child's development needs

# 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 behaviours (Child)	My child is not able to participate well in group activities	My child is rarely able to participate well in group activities	My child is sometimes able to participate well in group activities	My child is usually able to participate well in group activities	My child is always able to participate well in group activities
Changed knowledge and access to information (Parent)	l have no knowledge about my child's development needs	I have a little knowledge about my child's development needs	I have some knowledge about my child's development needs	I have good knowledge about my child's development needs	I have very good knowledge about my child's development needs
Changed skills (Child)	My child does not have the skills to be ready for early childhood settings or school	My child has limited skills to be ready for early childhood settings or school	My child has some skills to be ready for early childhood settings or school	My child has a good amount of skills to be ready for early childhood settings or school	My child has the skills to be ready for early childhood settings or school
Engagement with relevant support services (Parent)	I am not working with any support services that could help me improve my situation	I am working with a support service to improve my current situation but we are not working together very well	I am working with a support service to improve my current situation and we are working ok together	I am working with a support service to improve my current situation and we are working well together	I am working with a support service to improve my current situation and we are working very well together

# **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 (Child)	The service does not listen or understand my child's needs at all	The service listens a little bit or understands some of my child's needs	The service sometimes listens or understands my child's needs.	The service listens to me and understands my child's needs most of the time	The service always listens to me and understands my child's needs
I am satisfied with the services I have received (Child)	I am very unsatisfied with the services my child has received	I am a little unsatisfied with the services my child has received	I am somewhat satisfied with the services my child has received	I am mostly satisfied with the services my child has received	I am very satisfied with the services my child has received

Satisfaction	1	2	3	4	5
I am satisfied with the services I have received (Parent)	The service does not provide me with a safe and supportive space to be with my child and other families.	The service rarely provides me with a safe and supportive space to be with my child and other families	The service sometimes provides me with a safe and supportive space to be with my child and other families	The services usually provides me with a safe and supportive space to be with my child and other families	The service always provides me with a safe and supportive space to be with my child and other families

# 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	
<ul> <li>Ancestry</li> </ul>	<ul> <li>Referral out (type and purpose)</li> </ul>	<ul> <li>Attendance profile</li> </ul>	
<ul> <li>NDIS eligibility</li> </ul>	<ul> <li>Interpreter present</li> </ul>	<ul> <li>Referral in (source and reason</li> </ul>	
	<ul> <li>Service setting</li> </ul>	for seeking assistance)	
		<ul> <li>Exit reason</li> </ul>	

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
	Facilitated group music sessions undertaken to focus on children aged 0-8 years with a disability or developmental concern.
	Children with disability or developmental concerns attending Music Playgroup sessions are always clients.
Supported Music Groups	The session may include practical strategies and joint learning for parents and carers alongside their children in the group music sessions.
	The sessions may also include the provision of standard advice, guidance or information for parents and carers, relating to their child's disability or concern, or connection to other services.
	Parents or carers attending Music Playgroup sessions are clients if they participate in activities with the child and/or receive advice, guidance or referrals from the service.

Service Type	Example
	Facilitated group activities that provide opportunities for children aged 0-8 years with a disability or developmental concern to play and learn to socialise with their peers and siblings. Children with disability or developmental concerns attending
	Supported Playgroup sessions are always clients.
Supported Playgroups	They may include opportunities for parents and carers to learn to interact and support their child's development through play and music. The group activities may also include the provision of standard advice, guidance or information for parents and carers, relating to their child's disability or concern, or connection to other services.
	Parents or carers attending Supported Playgroup sessions are clients if they participate in activities with the child and/or receive advice, guidance or referrals from the service.

# Supports for parents and carers of young children with disability or developmental concerns

# Description

The support and connection for parents and carers of young children with disability or developmental concerns program activity will provide facilitated group workshops in all states and territories for parents and carers of young children (aged 0-8 years) with a newly identified disability or who have concerns regarding their child's development. These workshops should provide opportunities for families early in their journey to learn from, and connect with, evidence-based information, family-focused strategies and peers with similar experiences.

# Who is the primary client?

Primary clients for this program activity are parents, carers and other family carers of children aged 0-8 years with a disability or developmental concerns.

## What are the key client characteristics?

Parents and carers of children aged 0-8 years with a disability or developmental concerns.

## Who might be considered 'support persons'?

Support persons are not relevant for this program activity.

## Should unidentified clients be recorded?

This program activity 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. 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. 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 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 50 per cent of identified client

A client SCORE assessment is to be recorded at the following times:

- near the beginning of the client's service delivery, and
- 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.

#### 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
<ul> <li>Community participation and networks</li> <li>Family functioning</li> <li>Mental health, wellbeing and self-care</li> </ul>	<ul> <li>Changed knowledge and access to information</li> <li>Changed skills</li> <li>Engagement with relevant support services</li> <li>Empowerment, choice &amp; control to make own decisions</li> </ul>	<ul> <li>The service listened to me and understood my issues</li> <li>I am satisfied with the services I have received</li> <li>I am better able to deal with issues that I sought help with</li> </ul>

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
Community participation and networks	I always feel alone and disconnected from people who are experiencing similar things with a child with disability or developmental concerns	I often feel alone and disconnected from people who are experiencing similar things with a child with disability or developmental concerns	I sometimes feel alone and disconnected from the people who are experiencing similar things with a child with disability or developmental concerns	I rarely feel alone and disconnected from people who are experiencing similar things with a child with disability or developmental concerns	I never feel alone and disconnected from people who are experiencing similar things with a child with disability or developmental concerns
Family functioning	My family is almost never able to cope with the challenges surrounding my child's disability or developmental concern	My family is rarely able to cope with the challenges surrounding my child's disability or developmental concern	My family is sometimes able to cope with the challenges surrounding my child's disability or developmental concern	My family is usually able to cope with the challenges surrounding my child's disability or developmental concern	My family is almost always able to cope with the challenges surrounding my child's disability or developmental concern
Mental health, wellbeing and self-care	I never take time to consider my wellbeing	I rarely take time to consider my wellbeing	l occasionally take time to consider my wellbeing	l sometimes take time to consider my wellbeing	I regularly take time to consider my wellbeing

# **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 and access to information	I am never able to get information to help me better understand my child	I am rarely able to get information to help me better understand my child	I am somewhat able to get information to help me better understand my child	I am mostly able to get information to help me better understand my child	I am always able to get information to help me better understand my child
Changed skills	I never feel confident in my ability to help my child's development	I rarely feel confident in my ability to help my child's development	I feel somewhat confident in my ability to help my child's development	I feel mostly confident in my ability to help my child's development	I feel very confident in my ability to help my child's development
Engagement with relevant support services	I never tell professionals what I think about services being provided to my child	I rarely tell professionals what I think about services being provided to my child	I sometimes tell professionals what I think about services being provided to my child	I mostly tell professionals what I think about services being provided to my child	I always tell professionals what I think about services being provided to my child
Empowerment, choice & control to make own decisions	I am never able to make good decisions about what services my child needs	I am rarely able make good decisions about what services my child needs	I am somewhat able make good decisions about what services my child needs	I am mostly able make good decisions about what services my child needs	I am always able to make good decisions about what services my child needs

# 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 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	I can occasionally deal with the issues I sought help with	Sometimes I can deal with the issues I sought help with	Most of the time 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
<ul> <li>Ancestry</li> </ul>	<ul> <li>Referral out (type and</li> </ul>	<ul> <li>Attendance profile</li> </ul>
<ul> <li>Is client a carer</li> </ul>	purpose)	<ul> <li>Referral in (source and</li> </ul>
<ul> <li>NDIS eligibility</li> </ul>	<ul> <li>Interpreter present</li> </ul>	reason for seeking
	<ul> <li>Service setting</li> </ul>	assistance)
		<ul> <li>Exit reason</li> </ul>

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
Disability workshop	ENSVIAGE-Families workshops designed to build the knowledge and capacity of parents, carers and families supporting children with disability or developmental concerns. May also include provision of standard advice, guidance, information or connections to other services.
Indigenous Workshop	ENVISAGE First Peoples (E-FP) workshop, for families, parents and carers of Aboriginal and Torres Strait Islander children with developmental concerns and disability to build the knowledge and capacity related to supporting the child with disability or developmental concerns. May also include provision of standard advice, guidance, information or connections to other services.
Multicultural Workshops	ENSVIAGE workshops for carers and families from culturally and linguistically diverse communities supporting children with disability or developmental concerns. May also include provision of standard advice, guidance, information or connections to other services.

# **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 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
<ul><li>Employment</li><li>Education and skills training</li></ul>	<ul> <li>Changed skills</li> </ul>	<ul> <li>I am satisfied with the services</li> <li>I have received</li> </ul>

# 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
<ul> <li>Employment status</li> <li>Highest level of education / qualification</li> </ul>	<ul> <li>Referral in (source and reason for seeking assistance)</li> </ul>	<ul><li>Referral out (type and purpose)</li><li>Service Setting</li></ul>
<ul><li>Income (frequency and appropriate gross income)</li><li>Main source of income</li></ul>		
<ul> <li>Is client a carer</li> </ul>		

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.	

Service Type	Example
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.
Service Review	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.
	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.
Mentoring/Peer Support	<ul> <li>Levels of intensity for 'Mentoring / Peer Support':</li> <li>Low: A brief interaction with the coach (less than 20 minutes)</li> <li>Medium: A longer meeting/coaching session or interaction with the coach (20-60 minutes)</li> <li>High: An extended meeting, session or interaction with the coach (more than 1 hour).</li> </ul>

# 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 <u>website</u>.

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 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
<ul> <li>Community participation and networks</li> <li>Education and skills training</li> <li>Family functioning</li> <li>Material wellbeing and basic necessities</li> </ul>	<ul> <li>Changed knowledge and access to information</li> <li>Changed skills</li> </ul>	<ul> <li>I am satisfied with the services I have received</li> </ul>	<ul> <li>Community infrastructures and networks</li> </ul>

Circumstances	Goals	Satisfaction	Community
<ul> <li>Mental health, wellbeing and self- care</li> </ul>			

# 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
<ul> <li>Community participation and networks</li> <li>Employment</li> <li>Education and skills training</li> <li>Family functioning</li> <li>Housing</li> <li>Material wellbeing and basic necessities</li> <li>Mental health, wellbeing and self-care</li> <li>Financial resilience</li> <li>Personal and family safety</li> <li>Physical health</li> </ul>	<ul> <li>Changed knowledge and access to information</li> <li>Changed skills</li> <li>Empowerment, choice and control to make own decisions</li> <li>Engagement with relevant support services</li> </ul>	<ul> <li>The service listened to me and understood my issues</li> <li>I am satisfied with the services I have received</li> <li>I am better able to deal with issues that I sought help with.</li> </ul>

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

Circumstances	1	2	3	4	5
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 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 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.

Goals	1	2	3	4	5
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	l 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
<ul><li>Is client a carer</li><li>NDIS eligibility</li></ul>	<ul> <li>Referral out (type and purpose)</li> </ul>	<ul> <li>Referral in (source and reason for seeking assistance)</li> </ul>
	<ul> <li>Interpreter present</li> </ul>	<ul> <li>Exit reason</li> </ul>

#### 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	<ul> <li>Giving a client advice/guidance or information in relation to a specific topic.</li> <li>OR referring a client to another service provided internal or external to the organisation.</li> <li>Note: Only this service type can be used for unidentified clients</li> </ul>
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

Service Type	Example
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

# Version History

# Version 1, August 2023

First publication and release of document.

This document was detached from the previous **Program Specific Guidance for Commonwealth Agencies** based on department and outcome type.

Program activities added:

- Support and connection for young children with disability or developmental concerns
- Supports for parents and carers of young children with disability or developmental concerns