NSW GOVERNMENT | Family & Community Services

Specialist Homelessness Services

Monitoring and Evaluation Strategy

August 2015

Table of contents

Executive summary

The Specialist Homelessness Services (SHS) Program is the primary NSW Government response to homelessness. Services funded under this program help about 54,000 people each year who are homeless or at risk of becoming homeless.

SHS in NSW went through an extensive reform program between 2012 and 2014 aimed at strengthening the focus on prevention and early intervention, streamlining access to services, and recontracting based on redesigned services and redistributed resources.

Purpose of the Strategy

The SHS Monitoring and Evaluation Strategy aims to:

- monitor progress in implementing homelessness reform
- build a robust evidence base to inform policy and operational decisions in the SHS Program, including service and system quality improvement and sector and workforce development
- inform investment priorities and identify opportunities for efficiency
- meet internal and external accountability and reporting requirements to support SHS Program contract and performance management.

The Strategy complements SHS Program management activities and will inform ongoing monitoring and reporting of key program risks, operational issues and quality improvement opportunities.

Focus on outcomes

The Strategy is focused on the way in which SHS are able to respond to the needs of people experiencing homelessness, or who are at risk of homelessness, and improving outcomes for people assisted by SHS.

To maintain this focus, the Strategy is underpinned by the SHS Outcomes Framework (refer to Section 3) and plan for monitoring, evaluation and review activities. The Strategy will assess three 'levels' of outcomes:

1. **population outcomes** – reductions in the number or rate of homelessness in NSW
2. **client outcomes** – intended outcomes or beneficial effects for clients that the SHS Program is aiming to achieve
3. **system outcomes** – outcomes arising from a redesigned service system and industry.

Performance information

At each of the SHS outcome levels, monitoring and evaluation activities are designed to utilise five different types of information:

- **headline indicators** which are a small set of indicators used for summary reporting and accountability and ultimately need to be interpreted within the context of more detailed information about program implementation and outcomes

- **intermediate indicators** which refer to measures of activity or service provision which contribute to an overarching final outcome

- **program evaluations and reviews** which are quantitative and qualitative information that is used to answer program-wide evaluation questions about the implementation and outcomes of the SHS Program and reforms

- **research data** which are outputs of research data sets and specific research initiatives such as longitudinal studies

- **linked evaluations and reviews of related initiatives** which are evaluations and reviews of specific programs or activities that intersect with SHS but are not managed by the SHS team.

Summary of key performance indicators

		Headline indicators	Intermediate indicators
Client outcomes		• Reduction in repeat homelessness • Establishment of long-term accommodation • Sustaining long-term accommodation • Engagement in education and employment • Reduction in turn-aways	• Profile of client assisted • Profile of type of assistance requested/received • Reason for seeking assistance • Profile of referrals to specialist support • Average duration of assistance • Achievement of client case management goals
System outcomes	*Client-centred services*	• Client satisfaction (that services are responsive, flexible, client-centred) • Mainstream agency satisfaction (that SHS are responsive and integrated in working with joint clients) • SHS provider satisfaction (that mainstream agencies are responsive and integrated in working with joint clients)	• Uptake of common assessments • Match between identified support need and response provided • Match between identified accommodation need and response provided
	Streamlined access		• Assistance provided through Link2home • Daily updating of Vacancy Management System
	Services matched to need		• Proportion of clients receiving a local service response • Proportion of services that met Program Level Agreement (PLA) service levels – including client numbers by client groups; homelessness status; low, medium and high effort; Aboriginal client targets (if any)
	Industry development		• SHS using quality processes (i.e. quality improvement plans) • SHS reporting they have the tools and workforce to deliver quality services • SHS workforce reporting that they have the skills and support to fulfil their role
	Quality		• % of SHS providers meeting SHS Quality Assurance Standards

Monitoring and evaluation priorities

This Strategy identifies the following monitoring and evaluation priorities:

Focus	SHS monitoring and evaluation activities

Data collection, linkage and stakeholder feedback	The monitoring and evaluation activities in this Strategy will be based on:
	
	• data already collected through the Australian Institute of Health and Welfare (AIHW) SHS Data Collection and through the Client Information Management System (CIMS)
	
	• linking data between SHS and other data sets
	
	• undertaking periodic surveys of:
	    ○ clients
	    ○ SHS providers (leads and partners)
	    ○ mainstream partners
	
	• qualitative information collected through case studies, client interviews, focus groups, surveys and other methods implemented through the evaluation activities outlined below
	
	• qualitative and quantitative data from research.

Monitoring	Ongoing program and service monitoring through: • contract performance monitoring in line with the FACS contract governance guidelines • analysis of AIHW data • analysis of CIMS data a regular program performance dashboard.
Review and evaluation priorities *(these may be commissioned separately or form elements of longitudinal or formative evaluation projects)*	SHS client outcome reviews/evaluations, focused on key client groups: • women and children escaping domestic and family violence (DFV) • young people • Aboriginal and Torres Strait Islander people
	SHS system-focused evaluations focused on key service system reform elements: • access to assistance • client-centred service responses • responding locally to homelessness (place-based service responses)
	Cost-effectiveness analysis
	Triennial Program Review that consolidates the full set of monitoring and evaluation information across all client groups and all FACS districts
	Linkages with other FACS evaluation and review activities connected outside of the core SHS Program evaluations and reviews
Research	Research/longitudinal studies that will be conducted in partnership with a research or academic institution, including longitudinal client outcome case studies

Updates to the Strategy

The Strategy is a living document that will be reviewed, updated, and re-published, as required, to ensure priorities and outputs remain credible and useful to the stakeholders. Over time, additional client-focused and system-focused reviews and evaluations may be commissioned to inform ongoing design and planning of the SHS Program.

1   Introduction

The Specialist Homelessness Services (SHS) Program is the primary NSW Government response to homelessness. SHS assist around 54,000 people each year and are a vital part of the broader system that supports people who are homeless or at risk of homelessness.

While the SHS Program developed valuable and effective services over the past 25 years, the system was fragmented and needed to be strengthened.

Going Home Staying Home (GHSH) was a major reform initiative of NSW SHS that restructured the service system, streamlined access to it, redesigned services and redistributed resources.

This Strategy has been developed to guide the monitoring, review and evaluation of SHS to enable ongoing refinement, adjustment and service improvement.

The Strategy provides a framework and plan for a comprehensive suite of activities to assess the implementation, outcomes and effectiveness of the reforms and the SHS Program.

1.1 Overview of SHS in NSW

A total of 158 new services have been funded under the SHS Program to deliver core responses within the service delivery framework outlined in Figure 1.

Figure 1: Specialist homelessness service delivery framework

SHS deliver a combination of responses depending on client need. They:

- intervene early to prevent homelessness
- rapidly re-house the newly homeless
- provide crisis and transitional accommodation and support
- provide intensive responses for clients with complex needs.

They also have a strong role in collaborating with mainstream support such as health, education, income support and housing providers. Another key focus of the new service system is helping people build and maintain healthy and safe connections with family and community.

SHS are projected to assist around 54,000 clients per year from 2014–15 with the following approximate client distribution:

- 22% women (single without children)
- 29% young people (young men and women)
- 16% men (single without children)
- 33% families (including women with children).

The new services were established through the GHSH reform program that commenced in July 2012 and represented one of the most significant reforms to the specialist homelessness service system in NSW.

The GHSH Reform Plan, released in February 2013, outlined five reform objectives:

- **Designing services better** through new SHS Practice Guidelines using evidence-based and client-centred responses based around intervening early to prevent homelessness, rapidly re-housing clients, providing crisis and transitional responses where appropriate and providing intensive responses for clients with complex needs.
- **Making it easier to access services** through improvements to systems and infrastructure including a state-wide telephone information and referral service, an electronic referral system, a client information management system and supporting tools and protocols.
- **Improving planning and resource allocation** through the use of a population based resource allocation model.
- **Developing the homelessness sector and workforce** through an Industry Partnership with Homelessness NSW, Yfoundations and Domestic Violence NSW by developing an Industry Development Strategy, Workforce Development Plan and by supporting the sector with change and reconfiguration.
- **Improving service quality, consolidating contracts and implementing systems for continuous improvement** through a Quality Assurance System, program evaluation and new contract governance and management arrangements.

1.2 Complementary homelessness services

In 2014, a number of new programs were introduced to complement SHS including:

- Homeless Youth Assistance Program as a specific response for unaccompanied young people under the age of 16
- Connect 100 which provides leased housing linked to support with a focus on reducing the need for people to drift into the inner city
- Service Support Fund (SSF) providing funding to organisations that were not successful in the GHSH tender process to allow them to deliver services that complement SHS.

This Strategy does not evaluate the first two of these initiatives specifically. However, the links between them and SHS will be explored.

Most of these initiatives have, or will have, separate evaluation strategies that can offer feedback about intersections with this Strategy.

The contribution of Service Support Fund initiatives to the SHS system has been built into this Strategy.

1.3 Purpose of the Strategy

The GHSH Reform Plan[1] commits to developing an evaluation strategy to support continuous improvement of the SHS Program. It specifies that the strategy will include:

> *'regular reviews of the SHS Program as a whole against agreed client outcomes… The strategy will consider performance measures, data sources and other methods for collecting quantitative and qualitative information. These regular reviews will lead to ongoing improvements in client outcomes' (p. 25). Measures of success will be developed in consultation with the sector' (p. 7).*

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[1] NSW Department of Family and Community Services (2013). *Going Home Staying Home Reform Plan.*

The key aims of the Strategy are to:

- monitor progress in implementing the new service system
- inform ongoing system refinement and adjustment and service improvement
- build a robust evidence base to inform policy and operational decisions in the SHS Program, including service and system quality improvement and sector and workforce development
- inform investment priorities and identify opportunities for efficiency improvement
- meet internal and external accountability and reporting requirements
- support SHS Program contract and performance management.

The Strategy outlines monitoring, review and evaluation activities that will be undertaken over the next three years to assess the effectiveness of the specialist homelessness service system in NSW.

1.4 Consultation on this Strategy

This Strategy was developed with input from the Monitoring and Evaluation Advisory Group (MEAG), the Industry Partnership, City of Sydney and through focus groups with SHS providers.

The MEAG was established to support the development and implementation of the Strategy and includes representation from stakeholders across government, academia, SHS sector and consumers. A representative of the NSW Ombudsman's office has attended meetings of the MEAG as an independent observer to ensure that the advisory process is fair and transparent.

The MEAG provided expert and independent advice on the scope, design and implementation of the Strategy as well as expert advice and input into the GHSH Post Implementation Review, completed in early 2015

The MEAG is chaired by an independent party with high-level expertise in homelessness research and evaluation. Advisory Group members also bring a mix of policy, operational, content and academic expertise.

The Sector Reference Group (SRG) includes the three homelessness peaks, Homelessness NSW, Domestic Violence NSW and Yfoundations. These three peaks also form the Industry Partnership. Other peak bodies represented on the SRG are the NSW Council of Social Services, the Federation of Community Housing Associations and Shelter NSW.
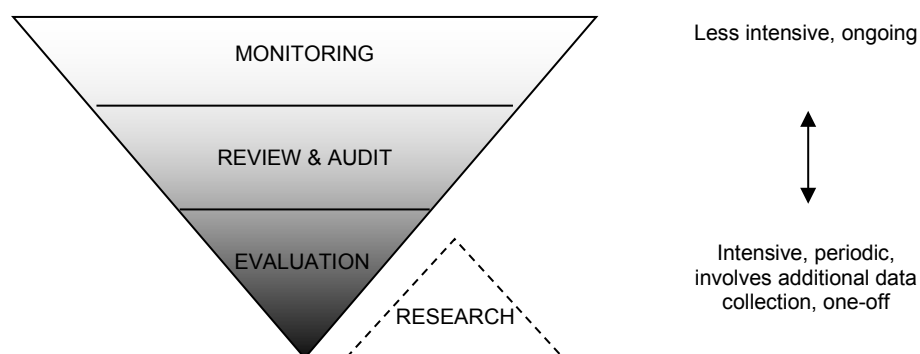
These bodies, along with SHS providers, were invited to discussions about the Strategy and helped to shape its content.

2 Approach

2.1 Elements of the Strategy

The SHS Monitoring and Evaluation Strategy aims to integrate a program of monitoring, review, evaluation and research, rather than viewing them as discrete and unrelated activities.

Figure 1: Relative scale and intensity assessment activities

Different types and combinations of activities will be used to measure performance against the outcomes and indicators. The following definitions have been used in classifying these activities.

Monitoring

Monitoring refers to the *'ongoing collection and analysis of data to determine whether expected results are being achieved.'*[2] It enables program managers to review progress, identify gaps or issues as early as possible and adjust program implementation or design in a timely way. However, it is not concerned with questions about the purpose, merit or relevance of programs.

Indicators selected for the purposes of monitoring will be used to:

- track progress in implementing the new service system

- monitor the ongoing performance of SHS services for contract management purposes (for example, reporting against KPIs or targets)

- determine whether the expected benefits of reformed services are being realised.

Monitoring data will also be used to inform evaluations and reviews.

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[2] Markiewicz A. (2014). Resource Guide for Developing Monitoring and Evaluation Frameworks. Available at: http://www.anneconsulting.com.au/index.php/resources/

Review

Program reviews are typically quicker and less rigorous than full-scale evaluations. They involve 'operational assessments' of how programs are progressing in achieving strategic objectives[3] or may be used to examine program efficiency. Reviews often occur after implementation and are useful where there is insufficient information or resources to undertake an evaluation.

Evaluation

Program evaluation is defined as a rigorous, '*systematic and objective process to make judgements about the merit or worth of an initiative, usually in relation to its effectiveness, efficiency, and appropriateness'.*[4] Evaluations are more in depth than monitoring or review activities, and often involve more intensive research methods. They typically utilise a mix of quantitative and qualitative data, with the qualitative data helping to build a contextual understanding about what is working, what is not and why. Evaluations are often used to examine the longer-term impacts of a policy or reform and whether the anticipated effects, costs and benefits have been achieved. [5] Evaluation findings can also be used to identify approaches that have worked well, unintended impacts and reasons for success or failure.

2.2 Design principles

The Strategy will be guided by the following good practice principles outlined in the NSW Government Evaluation Framework and the Department of Family and Community Services (FACS) Evaluation Policy:

- **Independence –** The design and management of activities implemented under the Strategy will reflect appropriate levels of independence so all stakeholders can be confident that the findings and recommendations are unbiased.

- **Transparency –** All activities implemented under the Strategy will be transparent and accountable.

- **Technical rigour –** All activities implemented under the Strategy will employ best practice methodologies and will be technically rigorous so they can withstand scrutiny and provide a robust evidence base to inform policy development.

- **Standards –** All activities implemented under the Strategy will be guided by professional standards, such as program evaluation standards endorsed by the Australian Evaluation Society.

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[3] NSW Department of Premier and Cabinet (2013), *NSW Government Evaluation Framework*, p.5
[4] NSW Department of Premier and Cabinet (2013), *NSW Government Evaluation Framework*, p.5
[5] HM Treasury (2011), *The Magenta Book: Guidance for Evaluation*, p. 7

- **Appropriate scale and design –** Monitoring, review and evaluation activities consume scarce resources. Decisions will be required about 'what is evaluated, when and to what depth', based on priority, feasibility and value.

- **Continuous improvement –** The Strategy will address approaches and mechanisms for sharing findings from monitoring, review and evaluation activities to inform practice and strategic decision making in service delivery.

- **Participatory approach and partnerships –** Those delivering and receiving services have an important role in contributing to the monitoring and evaluation of the SHS, including through client feedback. Key advantages of a participatory approach include:

  - ensuring stakeholder buy-in
  - building capacity, skills and organisational learning
  - supporting performance through reflection on progress and areas for continuous improvement
  - providing an opportunity to verify information and improve the quality of data
  - ensuring that data collection processes align with the information needs of key stakeholders, while ensuring they have minimal impost on the day-to-day service delivery operations of service providers.[6]

- **Timeliness –** The delivery of activities in the Strategy will be timely so they can support and inform decision making.

2.3 Minimising costs and burden for SHS providers

The design principles highlight that while monitoring, review and evaluation activities need to be based on a participatory approach, it needs to be done in a way that has minimal impost on the day-to-day service delivery operations of SHS providers.

The key strategies for ensuring a minimal impost are:
- aligning monitoring activities to indicators that can be sourced and reported directly from existing data collections – through the AIHW SHS Collection or SHS Client Information Management System (CIMS)

- ensuring commissioned evaluation studies are designed in consultation with the sector – and explicitly consider any impost of proposed activities on SHS providers

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[6] Zukosi A., & Luluquisen M. (2002). Participatory Evaluation: What is it? Why Do It? What are the Challenges? *Community-based Public Health Policy & Practice, Issue 5*, April 2002 (pp. 1-6)

Jacobs, A., C. Barnett, et al. (2010). *Three Approaches to Monitoring: Feedback Systems, Participatory Monitoring and Evaluation and Logical Frameworks*. Avail at: http://betterevaluation.org/plan/approach/participatory_evaluation

- co-ordinating existing data collection activities (such as sector surveys) to avoid 'double requests' for similar information.

2.4 Ethical and cultural considerations

This Strategy will operate within social, ethical and cultural research and evaluation standards. Ethics in program evaluation refers to the '*potential risk of harm to people participating in the evaluation, whether as informants or as evaluators*'. [7] Examples of harm can include loss of privacy, disadvantage to vulnerable groups, physical or mental harm and distress.

SHS clients may be extremely vulnerable and may also be experiencing disabilities, mental illness, drug and alcohol issues or other forms of social exclusion and disadvantage. They may also be undergoing traumatic or stressful events in their lives. Therefore, the evaluations in this Strategy will be conducted in a manner that adheres to ethical principles of evaluation and research.

Some key ethical considerations include:

- respecting the right of people to refuse to participate in evaluations without fear of retribution or loss of program benefits

- ensuring the rights and dignity of participants are respected through the evaluation

- ensuring that appropriate safeguards are used to protect confidentiality of information

- allowing family members or advocates to accompany and support participants.

Evaluations will be undertaken in a culturally appropriate manner, especially when services target minority or vulnerable groups such as young people and people from Aboriginal or culturally and linguistically diverse (CALD) backgrounds.

2.5 Limitations

There are a number of potential limitations and caveats that should be noted in relation to the monitoring and evaluation activities. The following limitations will be considered in the design and analysis of monitoring and evaluation initiatives:

- While there is good data on client outcomes that allow for a before and after reform comparison, the same level of baseline data does not exist

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[7] NSW Department of Premier and Cabinet (2013). *NSW Government Evaluation Toolkit.* Available at: http://www.dpc.nsw.gov.au/programs_and_initiatives/policy_makers_toolkit/evaluation_toolkit

at the service level. Service responses are very difficult to compare to the pre-GHSH service models because the new services are more integrated and one service package can have a number of services within it

- Measuring outcomes for clients will need to be undertaken over time (e.g. measuring the impact of greater effort in early intervention)
- Caveats should be noted in relation to attribution and causation in relation to client and system outcomes. A range of external factors and drivers may also be influencing client outcomes and demand for services
- Data quality will need to be reviewed, especially in the early stages of implementing the new system as services get adjusted to new approaches such as 'rapid re-housing' and 'no-wrong door'.

3   SHS outcomes framework

The SHS Program aims to ensure people who are homeless or at risk of homelessness are supported to achieve safe and stable housing in the community. This is in line with the whole-of-government goal of reducing the rate of homelessness in NSW.

The SHS outcomes framework was included in the GHSH Reform Plan and provides a framework for this Strategy.

The Strategy is structured to distinguish the different 'levels' of outcomes that are reflected in this framework and the different degrees of control that SHS providers have at each level.

Conceptually, monitoring and evaluation activities are designed around two different outcome levels – client outcomes and service system outcomes – within the context of broader whole-of-government population outcomes.

SHS outcomes framework

POPULATION OUTCOMES

NSW 2021 — Better protect the most vulnerable members of our community and break the cycle of disadvantage.

NAHA/NPAH[8] — People who are homeless or at risk of homelessness achieve sustainable housing and social inclusion.

Homelessness Action Plan
- People never become homeless.
- People who are homeless receive effective responses so that they do not become entrenched.
- People who have been homeless do not become homeless again.

Other NSW reforms — Reasons people become homeless are addressed through broader reforms (e.g. DFV reforms; Mental Health reforms).

CONTRIBUTES TO ⬆

CLIENT OUTCOMES

People who are homeless or at risk are supported to achieve safe and stable housing in the community.

- SHS clients who are at imminent risk of homelessness are identified and supported to remain safely in their existing housing to secure stable housing.
- SHS clients who become homeless are rapidly and safely re-housed.
- SHS clients in crisis are provided with safe and secure accommodation and supported to access stable housing.
- SHS clients who are re-housed after becoming homeless are supported to stay housed.

Headline indicators

- Proportion of daily requests to SHS where people are turned away.
- Proportion of SHS clients experiencing repeated episodes of homelessness.
- Proportion of SHS clients who established long-term accommodation.
- Proportion of SHS clients who sustained their long-term accommodation.
- Proportion of SHS clients enrolled in education during the period of assistance.
- Proportion of SHS clients entering the labour force during the period of assistance.

CONTRIBUTES TO ⬆

SERVICE SYSTEM OUTCOMES

Client-centred services
Services are responsive, flexible, client-centred, integrated, and are better able to intervene early.

Streamlined access
Services are easy to identify and to access.

Services matched to need
Supply of services are matched with need.

Effective industry
Industry capacity improves as sector organisations are able to build and maintain a stable, skilled workforce and to develop effective networks and partnerships.

Quality
All services are underpinned by quality standards.

Headline indicators

- Client satisfaction with SHS.
- Mainstream service providers agencies' satisfaction with SHS.
- SHS provider satisfaction with their impact, effectiveness and other aspects of the service system.

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[8] National Affordable Housing Agreement/National Partnership Agreement on Homelessness

4 Performance information

4.1 Data types and sources

For the purposes of this Strategy, monitoring, review, and evaluation data on the achievements of the homelessness service system objectives and outcomes are categorised as:

- **Key performance indicators –** a small number of key performance measures have been suggested as a minimum in two groups:

  Headline indicators – providing the highest level 2-3 indicators of success related to each outcome.

  Intermediate indicators – providing additional measures that can indicate the extent that an outcome is being achieved.

- **Program evaluation or review –** quantitative and qualitative information that is used to answer evaluation questions about the implementation, outcomes and effectiveness of the SHS Program and GHSH reforms.

- **Research data –** outputs of research data sets and specific research initiatives such as longitudinal studies.

- **Linkages to other data sources and evaluations –** quantitative and qualitative information that's used to answer evaluation questions about the implementation, outcomes and effectiveness of specific initiatives delivered outside the SHS Program.

There is a robust data collection system that will be sourced to support this Strategy including:
- SHS Data Collection managed and reported by the Australian Institute of Health and Welfare (AIHW)
- NSW SHS Client Information Management System (CIMS).
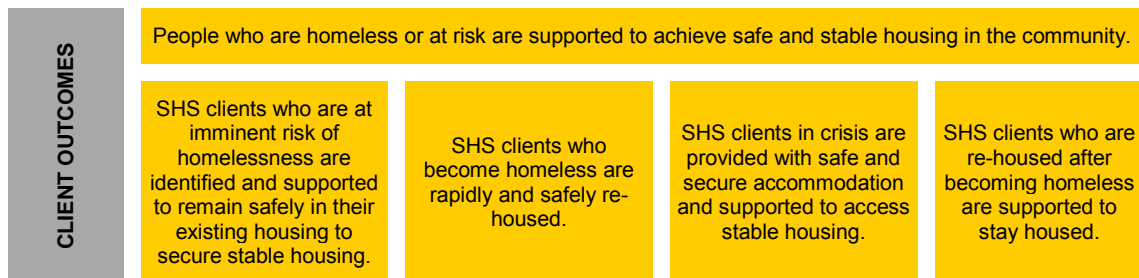
As far as possible, key indicators have focused on data that is readily available through these systems.

4.2 Client cohorts

Where the data allows and where it is relevant to the analysis and interpretation of the evidence, indicator data will be disaggregated by target client group. Key target clients groups will include (but are not limited to):

- young people aged 25 years or younger
- single men
- single women
- families (including women with children)
- Aboriginal and Torres Strait Islander People
- people from culturally and linguistically diverse backgrounds
- people experiencing or escaping domestic and family violence
- rough sleepers
- people leaving institutions
- young people leaving care
- unaccompanied young people under the age of 16
- people from sexual minorities – lesbian, gay, bisexual, transgender, intersex and queer
- people who have been diagnosed with a mental health issue
- people with a disability
- older people.

4.3 Client outcome indicators

CLIENT OUTCOMES	People who are homeless or at risk are supported to achieve safe and stable housing in the community.			
	SHS clients who are at imminent risk of homelessness are identified and supported to remain safely in their existing housing to secure stable housing.	SHS clients who become homeless are rapidly and safely re-housed.	SHS clients in crisis are provided with safe and secure accommodation and supported to access stable housing.	SHS clients who are re-housed after becoming homeless are supported to stay housed.

Factors outside the control of SHS providers can impact the lives of their clients and outcomes they achieve. However, a successful SHS system is expected to support people who are homeless or at risk of homelessness to achieve safe and stable housing in the community.

Both housing and non-housing outcomes are critical for breaking the cycle of homelessness. A set of key headline housing and non-housing indicators was agreed in the SHS Program Guidelines to demonstrate the difference that the program is making to clients' lives and to support continuous improvement of the SHS system. These are:

Headline indicator	What it measures	Targets	Data source
Proportion of daily requests to SHS where people are turned away	Proxy indicator of capacity of the service system to respond to presenting client need	Reducing from a 2011–12 baseline of 41%	AIHW Data Collection
Proportion of SHS clients experiencing repeated episodes of homelessness	Proxy indictor of success in resolving homelessness when it first occurs and avoiding the cycle of repeated episodes of homelessness	Reducing from a 2011–12 baseline of 21%	AIHW Data Collection
Proportion of SHS clients who established long-term accommodation	Indicator of success in moving people from homelessness or insecure accommodation into long-term accommodation	Increasing from a 2011–12 baseline of 58%	AIHW Data Collection
Proportion of SHS clients who sustained their long-term accommodation	Indicator of success in sustaining long-term accommodation at the end of the support period	Increasing from a 2011–12 baseline of 59%	AIHW Data Collection
Proportion of SHS clients enrolled in education during the period of assistance	Proxy indicator of addressing barriers to long-term independence through education and training	Increasing from a 2011–12 baseline of 27%	AIHW Data Collection
Proportion of SHS clients entering the labour force during the period of assistance	Proxy indicator of addressing barriers to long-term independence through employment	Increasing from a 2011–12 baseline of 15%	AIHW Data Collection

A range of other key indicators are used to provide additional quantitative information about what works for which clients and in which circumstances.

Intermediate indicators for client outcomes can be reported for individual SHS providers, FACS districts or the program as a whole. These include:

Intermediate indicator	What it measures	Targets	Data source
Number and proportion of clients requiring/receiving a specialist homelessness service	Access to services by different client cohorts, including the match between supply and demand for different client cohorts	Meet or exceed contracted minimum client numbers for women, young people, men, families and Aboriginal people	AIHW SHS Data Collection
Number and proportion of clients requiring/receiving a specialist homelessness service – by type of assistance	Extent that clients required and received: early intervention, rapid rehousing, crisis and transitional response, and intensive responses for complex clients	To be determined	AIHW SHS Data Collection/CIMS Data
Number and proportion of clients requiring/receiving a specialist homelessness service – by reasons for seeking assistance	Extent that clients required and received help to escape domestic and family violence, save their tenancy, settle after leaving an institute or care or other reason for seeking help	Maintain or increase the number of clients who received assistance where they sought that assistance due to DFV	AIHW Homelessness Data Collection/CIMS Data
Number and proportion of clients receiving/referred to specialist support	Extent that the services are connecting clients to mainstream services, e.g. mental health, drug and alcohol or family support	Increase % of clients with an identified need for psychological or mental health service who had that assistance provided/referred	AIHW Homelessness Data Collection/CIMS Data/data linkage to other agency data
Average duration of assistance by service type	Level of assistance that clients are receiving and the differences in effort between different types of assistance	To be determined	AIHW SHS Data Collection/CIMS Data
Proportion of clients achieving all their case management goals – by goal domains	Types of goals that are being met and the extent that clients are being supported to meet their goals	Increase % of clients with all their case management goals achieved	AIHW SHS Data Collection/CIMS Data

4.4 Service system outcome indicators

SERVICE SYSTEM OUTCOMES	Services are responsive, flexible, client-centred, integrated and are better able to intervene early.	Services are easy to identify and to access.	Supply of services is matched with need.	Industry capacity improves as sector organisations are able to build and maintain a stable, skilled workforce and to develop effective networks and partnerships.	All services are underpinned by quality standards.

The headline indicators focus on the experiences of SHS clients, providers and partner agencies, and their level of satisfaction with the service system.

Headline indicator	What it measures	Targets	Data source
Client satisfaction with: • their access to SHS • the responsiveness of SHS to their needs • flexibility of SHS • ability of SHS to connect them with other services • the level of safety they felt • quality and safety of their accommodation • the way SHS deals with complaints • what they achieved (for example, increased hope, wellbeing, etc.)	• How easily clients can access assistance • Quality of services • Extent that services are relevant to need • Extent that SHS listened and tailored responses to client circumstances • Extent that SHS connect clients to the other services	Increase the level of client satisfaction over time. Baseline to be determined after the first survey.	Survey of a sample of SHS clients
Mainstream service providers' satisfaction with SHS	• Capacity of SHS to utilise mainstream service resources • Extent that SHS are well connected and integrated as part of the local human services support system	Majority of mainstream agencies report that SHS are effective in working together to achieve outcomes	Survey of a sample of mainstream services that accept clients from or refer clients to SHS

SHS providers' satisfaction with: • their level of impact • the effectiveness of the services they provide • the relationships with their SHS partners/housing providers • their integration with mainstream agencies • the tools, guidelines and support they receive from FACS and their peaks • FACS contract management	• Service providers' perspective on effectiveness, integration and partner relationships • Effectiveness of tools, guidelines and support provided to SHS and gaps in these • Effectiveness of FACS in monitoring and supporting contract performance	Increase in provider satisfaction over time (baseline to be determined after the first survey)	Survey of all SHS providers/ workforce (lead and partners)

The scope, frequency and sampling of the client, providers/workforce and mainstream agency surveys will be determined in consultation with peak bodies and experts. To minimise the effect on providers, these surveys will seek to leverage existing data collection activities (such as sector surveys or existing client surveys) to avoid 'double requests' for similar information. Where possible, sector survey information will be collected through the surveys undertaken by the SHS Industry Partnership.

An initial set of intermediate indicators is proposed for each of the service system outcomes. These focus on the tools, systems and practices underpinning the achievement of these outcomes. However, further work is needed to confirm the data sources and counting rules for a number of these indicators.

System outcome 1: Services are responsive, flexible, client-centred, integrated and are better able to intervene early

Intermediate indicator	What it measures	Targets	Data source
Proportion of clients assessed as needing crisis or transitional accommodation and whether the accommodation needed was provided, referred or neither provided or referred	Capacity of the service system to meet accommodation needs	To be determined	To be determined
Proportion of clients assessed as needing long term housing and whether the SHS facilitated access to private rental or social housing	• Extent that SHS are helping to rehouse people who are homeless. • Collaboration between SHS and housing providers.	Increase from 2011-12 baseline of 61% of clients with an identified need for long term housing who had that assistance provided or referred	Client Information Management System
Proportion of clients assessed as needing help to sustain their tenancy and whether this was provided	Extent that SHS are preventing people from falling into homelessness.	To be determined	To be determined
Proportion of clients with an identified need for specialist support and whether this was provided, referred or neither provided or referred	• Extent that SHS are providing or facilitating access to specialist support services • Collaboration between SHS and mainstream services	To be determined	To be determined

System outcome 2: Services are easy to identify and to access

Intermediate indicator	What it measures	Targets	Data source
Proportion of people seeking assistance from SHS or Link2home who receive a common assessment	• Extent that clients have to retell their story • Extent that clients receive quality assessment of their need	Proportion of clients receiving a common assessment is increased over time.	Client Information Management System
Proportion of SHS clients who accessed SHS through Link2home	Extent that Link2home operates as a gateway for SHS	To be determined	Link2home data
Proportion of SHS providers updating the Vacancy Management System (VMS) daily	Extent that providers are sharing information about vacancies	100% of providers (this is a contractual requirement)	Client Information Management System
Proportion of people seeking assistance from Link2home who were turned away with no assistance	Capacity of Link2home to respond to need	Proportion of people turned away with no assistance is reduced over time	Link2home data

System outcome 3: Supply of services are matched with need

Intermediate indicator	What it measures	Targets	Data source
Proportion of clients where District of their last permanent home is the same as the District where they received a service	Extent that clients can access services locally - noting that for some clients a service in a different location is necessary for anonymity/safety (e.g. for some women escaping DFV)	Reduce the proportion of clients seeking help in the Inner City who have drifted from other Districts (specific measure to be determined)	Client Information Management System
Proportion of clients receiving assistance is consistent with contracted client mix proportions.	Extent that client outputs are consistent with projected: • client mix cohorts • mix of homeless or at risk clients • mix of low, medium and high effort cases • Aboriginal client targets (if any)	• Providers are contracted to meet a minimum client target and case mix • Some flexibility is being applied in the first year due to transition	AIHW Homelessness Data Collection Client Information Management System

System outcome 4: Industry capacity improves as sector organisations are able to build and maintain a stable, skilled workforce and to develop effective networks and partnerships

Intermediate indicator	What it measures	Targets	Data source
Proportion of the SHS workforce report they have the skills and support to fulfil their role effectively	• Workforce capability • Gaps in workforce development	Increase (baseline to be determined)	SHS provider/ workforce survey
Proportion of organisations report they have the tools and support to implement their Quality Assurance System (QAS).	• Organisational workforce capability. • Gaps in tools that enable organisations to building their capacity.	Increase (baseline to be determined)	SHS provider/ workforce survey

System outcome 5: All services are underpinned by quality standards

Intermediate indicator	What it measures	Targets	Data source
Proportion of organisations complying with the QAS	Extent that quality standards are being met	Increase the proportion of providers complying with QAS	To be determined

The Industry Partnership is currently completing an Industry Development Strategy for the homelessness sector. This will further identify key performance measures.

4.5 Research data on population outcomes

Data on the rate and profile of homelessness and the risk of homelessness across the state and within each FACS District is critical to resource allocation and service planning. However, achieving these population outcomes is dependent on the efforts of the full range of government and non-government services at the state and national level.

As such, within the SHS Monitoring and Evaluation Strategy, information related to population outcomes forms part of broader research data sets, with a focus on:

- rate of homelessness in NSW/FACS districts
- profile of people and families experiencing homelessness
- reasons people and families become homeless
- pathways and long-term outcomes for people experiencing homelessness.

Research data is obtained from existing collections (such as the Australian Census).

More broadly, there is an interest in identifying research partnerships and funding opportunities for longitudinal population research to better understand the pattern and profile of homelessness over time and for long-term outcomes for different client cohorts. This would enable in-depth analysis of the housing, health, education, and other non-accommodation issues and service system intersections.

5   Monitoring and evaluation questions

Program monitoring, evaluation and review activities will draw on quantitative and qualitative information to answer program-wide questions about the implementation, outcomes and effectiveness of the specialist homelessness service system. Feedback from the stakeholders consulted during the development of this Strategy suggested the following key questions.

5.1 Questions related to client outcomes

Key evaluation / review questions	1. **To what extent and in what ways is the SHS system better able to respond to the needs of particular client cohorts who are homeless or at risk of homelessness** – particularly in relation to:
	• changes in demand and availability of support for clients in each FACS District
	• changes in demand and availability of properties for crisis and transitional accommodation for these clients
	• changes in the number and profile of clients presenting/assisted by SHS – both as individuals and as part of families
	• changes in the type of assistance provided by SHS
	• changes in local/place-based responses to the needs of individuals and families in the client cohorts
	• extent to which the SHS assistance provided to clients is client-centred and integrated with the full range of services to comprehensively address needs (including access to specialist support such as mental health and drug and alcohol services and housing assistance)
	• extent to which cross-target group and specific target group services are able to appropriately respond to the needs of clients – particular clients with multiple and complex needs.
	2. **To what extent and in what ways is the SHS system contributing to better housing outcomes for particular client cohorts** – particularly in relation to:
	• preventing clients from becoming homeless
	• providing safe and secure accommodation to clients in crisis
	• rapidly re-housing or establishing long-term accommodation
	• providing post-crisis support to sustain long-term accommodation.
	3. **To what extent and in what ways is the SHS system contributing to improvements in non-housing outcomes for particular client cohorts** – particularly in relation to:
	• education and employment-related outcomes
	• safety outcomes
	• mental health
	• drug and alcohol misuse treatment.
	4. **What improvements are needed to the SHS system to better respond to and achieve outcomes for particular client cohorts who are homeless or at risk of homelessness** – particularly in relation to:
	• addressing barriers and service gaps
	• adopting effective practice within cross-target group and specific-target group SHS across NSW
	• adopting effective practice in working with non-SHS agencies.

	5. **To what extent and in what ways are providers funded under the Service Support Fund enhancing outcomes for client** – particularly in relation to: - addressing barriers and service gaps for particular clients - adopting effective and evidence-based practice - adopting effective practice in working with SHS and non-SHS agencies.	
Key methods *(these may be commissioned separately or form elements of a longitudinal evaluation project)*	**Analysis of monitoring data**	Trend analysis of data related to key performance indicators (pre and post GHSH) broken down for SHS clients in a particular cohort compared with all SHS clients.
	Client surveys / case studies	Survey of the experiences of individuals and families in accessing and navigating the SHS (and broader) systems. Case studies mapping the access and service pathways and housing and non-housing outcomes for a purposive sample of clients, covering: - early intervention - safe and secure accommodation for women in crisis - rapid re-housing - post-crisis support - service integration/wrap-around support - place-based responses.
	Service provider survey / case studies	Survey of the experiences of SHS providers at the district level in improving service responses for the client cohort Case studies of changes in service system responses since GHSH, covering: - cross-target group services - services specialising in DFV.
	Partner agency survey / case studies	Survey of the experiences of partner agencies in working with SHS at the district level to improve service responses for the client cohort. Case studies of changes in service system responses since GHSH, covering: - specialist DFV services - mainstream support agencies working with individuals and families in the client cohort.
	Client follow-up survey / data matching analysis	Follow-up client survey/data matching to track the sustainability of long-term accommodation after the support period has ended, covering: - stability of housing - non-housing outcomes - episodes of repeat homelessness - risks of future homelessness.
	Client outcome evaluation / reviews	SHS client outcome reviews/evaluations, focused on key client groups: - women and children escaping DFV - young people - Aboriginal and Torres Strait Islander people.

5.2 Questions related to service system outcomes

Key evaluation questions	1. **To what extent have the SHS practice guidelines and service specifications been implemented as intended** – particularly in relation to: • changes in SHS/district practices in receiving and responding to referrals and direct requests for assistance (in line with SHS Quality Standard 2) • changes in SHS/district practices in undertaking assessments, offering services and making referrals • changes in SHS/district protocols and case management practices to deliver client-centred responses (in line with SHS Quality Standard 4) • changes in SHS/district arrangements for developing effective collaborative networks and partnerships with other agencies (in line with SHS Quality Standard 5) • changes in SHS/district arrangements to develop and support the SHS workforce (in line with Quality Standard 8). 2. **To what extent and in what ways have the GHSH reforms improved the capacity of the service system to appropriately and effectively respond to homelessness –** particularly in relation to: • identification of, and engagement with, people at risk or in the earliest stage of homelessness • reducing the amount of time between requesting assistance and receiving the required SHS/non-SHS • improving the client experience of requesting assistance and receiving the required SHS/non-SHS • delivering comprehensive and integrated service responses that address the full range of client needs – not simply the presenting 'symptoms' • combining crisis responses while increasing the focus on prevention and early intervention responses, rapid rehousing and post crisis responses • combining cross-target group services with specific-target group services to provide client-centred responses across the district • responding locally to homelessness/delivering comprehensive place-based responses to homelessness (e.g. reducing inner city drift). 3. **What improvements are needed to the SHS Program resource allocation, access, delivery and partnership arrangements to continuously improve program outcomes** – particularly in relation to: • addressing access barriers and service gaps in particular locations or for particular client cohorts • resource allocation arrangements to best match supply and demand for support in each district • resource allocation arrangements to best match supply and demand for crisis accommodation properties in each district • service delivery practice within cross-target group and specific-target group SHS across NSW • adopting effective practice in working with non-SHS agencies • SHS tools and systems to support timely and client-centred decision-making about the most appropriate service responses • responding locally to homelessness.

		4. **What changes are needed to other non-SHS programs/services/policies to improve the effectiveness and efficiency of the SHS Program –** particularly in relation to: • the role of services funded under the Service Support Fund • access to specialist support services • access to housing assistance products and services • relationships with social housing providers • relationships with mental health and other specialist services • relationships between SHS and other domestic violence services • opportunities for improving service collaboration and integration.
Key methods	**Analysis of monitoring data**	Trend analysis of data related to key performance indicators (pre- and post-GHSH), for example: • number or % of people seeking assistance from SHS or Link2home who receive a common assessment • number of people receiving information and a referral through Link2home • client survey data on ease of access • mainstream partner survey data on Link2home and making and accepting referrals to SHS • % of people needing/receiving a service (by client characteristics) • % of people needing/receiving an early intervention response/rapid rehousing response/crisis accommodation response/transitional accommodation response • % of people assessed as needing/receiving an intensive response for complex needs.
	Client surveys	Survey of the experiences of clients in accessing and navigating the SHS (and broader) systems.
	Service provider survey	Survey of the experiences of SHS providers at the district level in facilitating client access to SHS.
	Partner agency survey	Survey of the experiences of mainstream partner agencies in working with SHS at the district level to improve access for common clients.
	Targeted reviews *(these may be commissioned separately or form elements of a longitudinal evaluation project)*	SHS system-focused reviews focused on key service system reform elements (refer to sections 6.4 and 6.5 for indicative scopes): • access to assistance • client-centred service responses • responding locally to homelessness (place-based service responses). These reviews may include case studies of changes in service system access since GHSH, covering: • cross-target group services • services specialising in DFV • local/district access arrangements access and service pathways.

5.3 Linkages to other data sets and evaluations

In addition to SHS Program monitoring and evaluation activities, there are a range of evaluations of other programs and services that can provide insight into the implementation, outcomes and effectiveness of homelessness services as they intersect with these other programs and services. For example, the evaluation of the Safer Pathways Domestic and Family Violence reform can provide evidence relating to the role of SHS in assisting people escaping domestic and family violence who are referred through safety action meetings.

Data linkage provides an opportunity to measure outcomes and pathways of clients of a number of different programs and services. For example, data for clients receiving assistance from both the SHS and Temporary Accommodation programs can be linked to assess the extent that clients use both services and to understand patterns of repeat usage.

Related evaluations include:

- evaluations commissioned as part of specific SHS funding initiative (e.g. Homeless Youth Assistance Program and Connect 100)
- provider or FACS-district commissioned evaluations focused on district or organisational priorities
- components of evaluations commissioned as part of broader reform initiatives (e.g. *It Stops Here* DFV reform).

5.4 Cost-effectiveness analysis

More broadly, an economic analysis of the program will be undertaken in consultation with NSW Treasury and the Monitoring and Evaluation Advisory Group and will take into consideration:

- direct recurrent and capital costs for the program
- appropriateness of the service costing model
- potential cost savings in related areas (e.g. reduced demand for Temporary Accommodation)
- cost-benefits of the program and services, for example, how cost-effective and efficient is the re-designed SHS Program? What are the costs, benefits and systems savings (cost-offsets)?

6   Priorities and implementation

6.1 On-going consultation

The design of specific monitoring and review activities and the analysis of their findings will be informed by inputs from a range of stakeholders, including independent experts, FACS districts, SHS providers and clients.

The independently chaired Monitoring and Evaluation Advisory Group will guide and provide advice on the implementation of the Strategy.

In addition, reference groups to inform and guide specific reviews may be established on a time-limited basis.

It is also planned to maximise opportunities for direct consumer input into commissioned reviews and may include:

- advice and support in designing consumer engagement methodologies that are practical and appropriate for engaging homeless people

- advice and support in collecting consumer feedback on their experiences and perceptions of the service system

- advice and support in analysing and interpreting consumer feedback gathered as part of evaluation activities.

The Industry Partnership will participate actively in the design and implementation of this Strategy and will feed into it through sector and workforce surveys.

6.2 Timeframe

The approach and timeframe to commissioning the priorities outlined in this Strategy will be discussed with the Monitoring and Evaluation Advisory Group and Industry Partnership.

The priorities outlined below reflect feedback from the stakeholder consultations. These will provide the focus for the monitoring and evaluation effort over the next three years. However, the Strategy will continue to be up-dated and refined and it is expected to have a life beyond those three years.

6.3 Monitoring and reporting

For 2014–15, the focus of monitoring activities will be on establishing data collection and collation arrangements for ongoing program monitoring. This will include counting rules and reporting frequency based on the availability of

AIHW SHS data and SHS Client Information Management System (CIMS) data.

For 2015–16 and subsequent years, program monitoring activities will include:

- Implementation and Link2home Dashboard Reports – regular (quarterly or biannual) data snapshots from the Client Information Management System and the Link2home data systems

- Client outcomes annual snapshot – annual report summarising AIHW homelessness data collection data for headline and intermediate indicators for client outcomes. These reports will be produced by December each year. These reports will include trend analysis and commentary on contextual factors that need to be considered when interpreting trends (e.g. client group, local service system)

- Survey reports – reports summarising data from periodic monitoring surveys including:

  - o client surveys (data on client feedback on their experiences of accessing and using SHS)
  - o mainstream partner agency surveys (data on mainstream agencies experiences of working with SHS)
  - o SHS sector surveys (provider and workforce).

6.4 Evaluating client outcomes

There was strong stakeholder view that evaluation activities should focus on measuring outcomes for specific groups of clients. Three groups in particular were identified as requiring special focus:
- women and children escaping domestic violence
- young people
- Aboriginal people.

An indicative scope for each of these reviews is outlined below. These may be commissioned separately or form core parts of an integrated evaluation and review project. This will be determined in consultation with sector peaks and experts.

6.4.1   Women and children escaping domestic violence

Area review	Service system responses and outcomes for women and children escaping domestic violence.
Context	- Evaluation activities should be aligned with the broader evaluation of the *It Stops Here* DFV reforms. - Evaluation assessments will focus on service system outcomes, improvements and impacts of the reform. - Evaluation assessments of client outcomes will require a mix of quantitative and qualitative methods, assessment of client outcomes will also need to take account of the wide range of contextual factors.

Indicative scope	1. Assess the extent to which the SHS service system is better able to respond to the needs of women and children escaping DFV who experience homelessness or are at risk of homelessness, particularly in relation to: • changes in demand and availability of support for women and children escaping DFV in each FACS District • changes in demand and availability of properties for crisis and transitional accommodation • changes in the number and profile of women/children presenting/assisted by SHS • extent to which the SHS assistance provided to women/children is client-centred and integrated with the full range of services to comprehensively address needs (including access to DFV counselling and housing assistance) • extent to which cross-target group and specific-target group SHS are able to appropriately respond to women and children escaping DFV. 2. Assess the extent to which the SHS service system is contributing to better housing outcomes for women and children escaping DFV, particularly in relation to: • preventing at-risk women from becoming homeless (in conjunction with broader DFV reforms) • providing safe and secure accommodation to women in crisis • rapidly re-housing or establishing long-term accommodation • providing post-crisis support to sustain long-term accommodation. 3. Assess the extent of improvements in non-housing outcomes for women and children escaping DFV who are assisted by SHS, particularly in relation to: • supporting non-housing goals in Safety Action Plans • supporting education and employment-related outcomes. 4. What improvements are needed to the SHS Program to better respond to and achieve outcomes for women and children escaping DFV who are homeless or are at risk of homelessness, particularly in relation to: • addressing barriers and service gaps • adopting effective practice within cross-target group and specific-target group SHS across NSW • adopting effective practice in working with non-SHS agencies.	
Indicative methodology	**Analysis of monitoring data**	Trend analysis of headline and interpretative indicators (pre- and post-GHSH) broken down for SHS clients escaping DFV compared with all SHS clients.
	Client surveys / case studies	Survey of the experiences of women in accessing and navigating the SHS (and broader) systems. Case studies mapping the access and service pathways and housing and non-housing outcomes for a purposive sample of women escaping DFV, covering: • early intervention • safe and secure accommodation to women in crisis • rapid re-housing • post-crisis support • service integration/wrap-around support.
	Service provider	Survey of the experiences of SHS providers at the district level in improving DFV service responses.

	survey / case studies	Case studies of changes in service system responses since GHSH, covering:
		• cross-target group services
		• services specialising in DFV.
	Partner agency survey / case studies	Survey of the experiences of partner agencies in working with SHS at the district level to improve DFV service responses.
		Case studies of changes in service system responses since GHSH, covering:
		• specialist DFV services
		• other mainstream support agencies working with women escaping DFV.
	Client follow-up survey / data matching analysis	Follow-up client survey/data matching to track the sustainability of long-term accommodation after the support period has ended, covering:
		• stability of housing
		• non-housing outcomes
		• episodes of repeat homelessness
		• risks of future homelessness.

6.4.2 Young people

Area for review	Service system responses and outcomes for young people aged 16 years and over experiencing or at risk of homelessness.
Context	• Evaluation assessments of client outcomes will need to consider that 'long-term accommodation' outcomes for young people is often based on young people returning home (where safe and appropriate) and repeat episodes of engagement (as opposed to repeat homelessness) is often a positive outcome in reducing the risk of homelessness.
	• Evaluation assessments will focus on service system outcomes that can be directly attributable to the GHSH reforms.
	• Evaluation activities should be aligned with the evaluation of the Homeless Youth Assistance Program, which is focussed on unaccompanied young people under 16 years of age.
	• Evaluation activities should be aligned with the Safe Home For Life reforms in the child protection and out-of-home care service systems.
Indicative scope	1. Assess the extent to which the SHS system is better able to respond to the needs of young people who experience homelessness or are at risk of homelessness, particularly in relation to:
	• changes in demand and availability of support for young people in each FACS District
	• changes in demand and availability of properties for crisis and transitional accommodation for young people
	• changes in the number and profile of young people assisted by SHS
	• extent to which the SHS assistance provided to young people is client-centred and integrated with the full range of services to comprehensively address needs (including education and employment services and housing assistance services)
	• extent to which cross-target group and specific-target group SHS are able to appropriately respond to young people.

		2. Assess the extent to which the SHS system is contributing to better outcomes for young people at risk of or experiencing homelessness particularly in relation to: • preventing young people from becoming homeless (including preventing family breakdown and promoting family reconciliation) • providing safe and secure accommodation to young people where it is not safe or possible to return home • rapidly re-housing or establishing long-term accommodation where it is not safe or possible to return home • providing post-crisis support to sustain a return to home or long-term accommodation. 3. Assess the extent of improvements in non-housing outcomes for young people who are assisted by SHS particularly in relation to: • supporting family functioning goals • supporting education and employment-related outcomes. 4. What improvements are needed to the SHS Program to better respond to and achieve outcomes for young people who experience homelessness or are at risk of homelessness, particularly in relation to: • addressing barriers and service gaps • adopting effective practice within cross-target group and specific-target group SHS across NSW • adopting effective practice in working with non-SHS agencies (e.g. for young people leaving care).
Indicative methodology	**Analysis of monitoring data**	Trend analysis of headline and interpretative indicators (pre- and post-GHSH) broken down for different cohorts of young people (compared with other SHS clients).
	Client surveys / case studies	Survey of the experiences of young people in accessing and navigating the SHS (and broader) service systems. Case studies mapping the access and service pathways and housing and non-housing outcomes for a purposive sample of young people, covering: • early intervention • crisis accommodation • rapid return home • rapid re-housing to long-term accommodation • post-crisis support • service integration/wrap-around support.
	Service provider survey /case studies	Survey of the experiences of SHS providers at the district level in improving service responses for young people. Case studies of changes in service system responses since GHSH, covering: • cross-target group services • services specialising in youth.
	Partner agency survey / case studies	Survey of the experiences of partner agencies in working with SHS at the district level to improve service responses for young people. Case studies of changes in service system responses since GHSH, covering: • specialist youth (non-SHS) services • other mainstream support agencies working with young people.

	Client follow-up survey / data matching analysis	Follow-up client survey and/or data matching to track the sustainability of long-term accommodation after the support period has ended, covering: • stability of housing • non-housing outcomes • episodes of repeat homelessness • risks of future homelessness.

6.4.3 Aboriginal people

Area for review	Service system responses and outcomes for Aboriginal people experiencing or at risk of homelessness.
Context	• Evaluation assessments of client outcomes will need to consider the different cultural definition and community experiences of homelessness particularly in relation to homelessness based on severe overcrowding. • Evaluation assessments will focus on service system outcomes that can be directly attributable to the GHSH reforms.
Indicative scope	1. Assess the extent to which the SHS system is better able to respond to the needs of Aboriginal people who experience homelessness or are at risk of homelessness particularly in relation to: • changes in demand and availability of support for Aboriginal people in each FACS District • changes in demand and availability of properties for crisis and transitional accommodation • changes in the number and profile of Aboriginal people assisted by SHS • extent to which the SHS assistance provided to Aboriginal people is client-centred, culturally-appropriate and integrated with the full range of non-SHS support services for Aboriginal people • extent to which cross-target group and specific-target group SHS are able to appropriately respond to the needs of Aboriginal people. 2. Assess the extent to which the SHS system is contributing to better outcomes for Aboriginal people at risk of or experiencing homelessness particularly in relation to: • preventing Aboriginal people from becoming homeless (including preventing evictions and severe overcrowding) • providing safe and secure accommodation to Aboriginal people in crisis who have nowhere safe to stay • rapidly re-housing or establishing long-term accommodation • providing post-crisis support to sustain long-term accommodation. 3. Assess the extent of improvements in non-housing outcomes for Aboriginal people who are assisted by SHS particularly in relation to: • supporting education and employment-related outcomes • supporting other wellbeing goals. 4. What improvements are needed to the SHS Program to better respond to and achieve outcomes for supporting Aboriginal people who experience homelessness or are at risk of homelessness particularly in relation to: • addressing barriers and service gaps • adopting effective practice within cross-target group and specific-target group SHS across NSW • adopting effective practice in working with non-SHS agencies.

Indicative Methodology	Analysis of monitoring data	Trend analysis of headline and interpretative indicators (pre- and post-GHSH) broken down for different cohorts of Aboriginal people (compared with non-Aboriginal SHS clients).
	Client surveys / case studies	Survey of the experiences of supporting people in accessing and navigating the SHS (and broader) systems. Case studies mapping the access and service pathways and housing and non-housing outcomes for a purposive sample of Aboriginal people, covering: • early intervention • crisis accommodation • rapid re-housing to long-term accommodation • post-crisis support • service integration/wrap-around support.
	Service provider survey / case studies	Survey of the experiences of SHS providers at the district level in improving service responses for Aboriginal people. Case studies of changes in service system responses since GHSH, covering: • cross-target group services • services specialising in service delivery for Aboriginal clients.
	Partner agency survey / case studies	Survey of the experiences of partner agencies in working with SHS at the district level to improve service responses for Aboriginal people. Case studies of changes in service system responses since GHSH, covering: • specialist Aboriginal (non-SHS) services • other mainstream support agencies working with Aboriginal people.
	Client follow-up survey / data matching analysis	Follow-up client survey/data matching to track the sustainability of long-term accommodation after the support period has ended, covering: • stability of housing • non-housing outcomes • episodes of repeat homelessness • risks of future homelessness.

6.5 Service system reviews

There was strong stakeholder view that evaluation activities should focus on measuring system outcomes with a focus on three priorities:

- client-centred responses (including service integration)
- access to assistance
- responding locally.

An indicative scope for each of these reviews is outlined below. These may be commissioned separately or form core parts of an integrated implementation review project. This will be determined in consultation with sector peaks and experts.

6.5.1   Client-centred responses

Area for review	Evaluation assessments will focus on client-centred responses ensuring services are flexible, responsive and integrated for individual client needs.
Indicative scope	1. Assess the extent to which the SHS service specifications been fully implemented as intended (in line with SHS Quality Standard 2) – particularly in relation to: • changes in SHS policies, procedures and case management practices • changes in SHS policies and procedures • changes in the number and range of agencies that SHS providers work with • changes in tools, systems and information to deliver client-centred responses • changes in district arrangements for delivering client-centred responses. 2. Assess the extent to which the SHS service specifications have changed the focus of service delivery particularly in relation to the amount of time and resources focused on: • prevention and early intervention responses • rapid re-housing responses • intensive responses for complex needs • post-crisis support responses. 3. Assess the extent to which the SHS system has been able to: • deliver comprehensive and integrated service responses that address the full range of client needs – not simply the presenting 'symptoms' • combine crisis responses with increasing the focus on prevention and early intervention responses, rapid re-housing and post-crisis responses • combine cross-target services with specific target group services to provide client-centred responses across the district.

		4. What improvements are needed to SHS Program service specifications, tools and systems to better respond to and achieve outcomes for clients particularly in relation to: • addressing barriers for particular client groups or in particular service contexts • adopting effective access practice within cross-target group and specific-target group SHS across NSW • adopting effective access practice in working with non-SHS agencies.
Indicative methodology	**Analysis of monitoring data**	Trend analysis of headline and interpretative indicators (pre- and post-GHSH): • % of people needing/receiving a service (by client characteristics) • % of people needing/receiving an early intervention response, rapid re-housing response, crisis accommodation response or transitional accommodation response • % of people assessed as needing/receiving an intensive response for complex needs.
	Client surveys / case studies	Survey of the experiences of clients in receiving SHS (and broader) services. • Clients report that they were able to access the service that was most relevant to their needs. • Clients report that services listened to them and tailored responses to their circumstances. • Clients report that services helped provide or connect them to the full range of services needed to access or sustain long-term accommodation. Case studies for a purposive sample of clients.
	Service provider survey / case studies	Survey of the experiences of SHS providers at the district level in facilitating client access to SHS. Case studies of changes in practices since GHSH, covering: • cross-target group services • services specialising in DFV.
	Partner agency survey / case studies	Survey of the experiences of mainstream partner agencies in working with SHS at the district level to improve access for common clients. • Mainstream agencies report that SHS are effective in working together to achieve outcomes for shared clients. • Mainstream agencies report that SHS are well-connected and integrated as part of the local human services support system). Case studies of local/district arrangements.

6.5.2   Access to assistance

Area for review	Evaluation assessments will focus on access to SHS and non-SHS assistance and access to the right services at the right time by the right provider.

Indicative scope	1. Assess the extent to which the GHSH/Link2home access operational guidelines and protocols have been fully implemented (in line with SHS Quality Standard 2) particularly in relation to:
	  • changes in SHS/district practices in receiving and responding to referrals and direct requests for assistance
	  • changes in SHS/district practices in undertaking assessments, offering services and making referrals
	  • alignment of SHS/district practices with local/regional arrangements for access to the full range of SHS and non-SHS human services.
	
	2. Assess the extent to which it is easier and quicker for clients to access the right services, at the right time, from the right provider particularly in relation to:
	  • changes in the identification of and engagement with people at risk or in the earliest stage of homelessness
	  • changes in the amount of time between requesting assistance and receiving the required SHS/non-SHS service
	  • changes in the client experience of requesting assistance and receiving the required SHS/non-SHS service
	  • changes in integrated working arrangements with mainstream services (including housing providers, mental health, and drug and alcohol services)
	  • changes in the pattern of referrals, presenting needs, service offers and turn-away for:
	    o different client groups
	    o different locations/FACS districts
	    o different types of providers (cross-target group and specific-target group SHS).
	
	3. What improvements are needed to SHS Program access arrangements to better respond to and achieve outcomes for clients particularly in relation to:
	  • addressing access barriers/bottle-necks for particular client groups or in particular service contexts
	  • adopting effective access practice within cross-target group and specific-target group SHS across NSW
	  • adopting effective access practice in working with non-SHS agencies.

Indicative methodology	**Analysis of monitoring data**	Trend analysis of headline and interpretative indicators (pre- and post-GHSH):
		  • number or % of people seeking assistance from SHS or Link2home who receive a common assessment
		  • number of people receiving information and a referral through Link2home
		  • client survey data on ease of access
		  • mainstream partner survey data on Link2home and making and accepting referrals to SHS.

	Client surveys / case studies	Survey of the experiences of clients in accessing and navigating the SHS (and broader) service systems. Case studies mapping the access and service pathways for a purposive sample of clients.

	Service provider survey / case studies	Survey of the experiences of SHS providers at the district level in facilitating client access to SHS. Case studies of changes in service system access since GHSH, covering: • cross-target group services • services specialising in DFV.
	Partner agency survey / case studies	Survey of the experiences of mainstream partner agencies in working with SHS at the district level to improve access for common clients. Case studies of local/district access arrangements.

6.5.3   Responding locally/place-based responses

Area for review	Evaluation assessments will focus on responding locally to homelessness and the extent that issues like 'inner city drift' and locating services as close as possible to the presenting need are being addressed.
Indicative scope	1. Assess the extent to which GHSH has improved the capacity of the SHS service system to respond locally to homelessness, particularly in relation to: • changes in the pattern between the location of where clients come from, where they seek assistance and where they receive a service • changes in the number and proportion of clients seeking assistance/receiving assistance in homelessness 'hotspots' (e.g. inner city Sydney). 2. Assess the extent to which FACS Districts are better able to respond locally to homelessness/deliver comprehensive place-based responses to homelessness for: • different client groups • different locations within the district • different types of providers • impact of place-based coordination responses. 3. What improvements are needed to SHS Program resource allocation arrangements to better respond locally to homelessness particularly in relation to: • addressing barriers for particular client groups or in particular service contexts • adopting effective access practice within cross-target group and specific-target group SHS across NSW • adopting effective access practice in working with non-SHS agencies.

Indicative methodology	**Analysis of monitoring data**	Trend analysis of headline and interpretative indicators (pre- and post-reform), including 'street counts' (e.g. City of Sydney street count).
	Client surveys / case studies	Survey of the experiences of clients in accessing services locally. Case studies mapping the access and service pathways for a purposive sample of clients.
	Service provider survey / case studies	Survey of the experiences of SHS providers at the district level in facilitating local access to SHS.
	Partner agency survey / case studies	Survey of the experiences of mainstream partner agencies in working with SHS at the district level to facilitate local access to services.

Appendix: List of abbreviations

The table below is a list of abbreviations used throughout this document.

Term	Definition
AIHW	Australian Institute of Health and Welfare
CALD	Culturally and linguistically diverse
CIMS	Client Information Management System
DFV	Domestic and family violence
FACS	Family and Community Services
HAP	Homelessness Action Plan
GHSH	Going Home Staying Home
MEAG	Monitoring and Evaluation Advisory Group
NAHA	National Affordable Housing Agreement
NPAH	National Partnership Agreement on Homelessness
QAS	Quality Assurance System
SHS	Specialist Homelessness Services
SRG	Sector Reference Group
SSF	Service Support Fund
VMS	Vacancy Management System