MEASURING OUTCOMES IN COMMUNITY MENTAL HEALTH

OPPORTUNITIES, CHALLENGES AND BARRIERS - WHERE TO FROM HERE?

Contents

Queensland Alliance for Mental Health is the peak body for the community mental health sector in Queensland. Representing more than 120 organisations and stakeholders across the State, QAMH works with our members to build capacity, promote professionalism in the sector, facilitate innovative partnerships and advocate on behalf of people experiencing mental health issues.

Summary

Late last year, Queensland Alliance for Mental Health undertook a survey of our members and the wider community mental health sector to better understand the current use of, benefits and barriers to implementing an outcome measurement framework across the sector. The results of that survey have been collated and analysed in this discussion paper.

The responses show that there is broad support for and recognition of the benefits of implementing an outcomes-focused measurement framework, but there are a number of impediments that need to be addressed before an effective framework is implemented across the entire sector.

For example, 83.5% of survey respondents agreed their organisation has increased its focus on measuring outcomes in the last five years. However, just 47% of respondents believe their organisation effectively measures outcomes. The individual responses to our survey also highlight a lack of uniformity across the sector in how staff are trained to capture data and how outcomes are measured.

Our analysis of the survey data is that these inconsistencies are largely caused by a lack of funding and resources to properly implement this approach. This is listed as the single largest barrier to the effective implementation of outcome measures by respondents. The sector is also concerned that the continued push towards outcomes will bring with it a focus on short-term results, when meaningful and impactful change takes time to deliver.

All the opportunities, challenges and barriers to measuring outcomes are explored further in this discussion paper. The paper also includes four recommendations for government to support the community mental health sector to effectively transition to this approach.

QAMH would like to thank everyone who took the time to complete the survey. It is only through your efforts that we have been able to produce a paper that is reflective of what is happening in the sector and identifies future options for delivering better outcomes for the people who access community mental health services.

Introduction

What is this project about?

The pressure to embed performance measurement frameworks has consistently been raised and discussed as a significant issue by the community mental health sector. This is reflective of a stronger emphasis on the measurement of outcomes from state and federal funding bodies.

It is clear when looking at the Queensland Government's *Performance Management Framework Policy* that it is seeking to know and to be able to demonstrate that agencies are achieving value for money by operating efficiently, effectively and economically when utilising taxpayer-funded resources (Queensland Government, 2017). At a Federal level, the Productivity Commission (2017) recommended governments develop and apply performance frameworks that are focused on service users and outcomes.

Funders are particularly interested in achieving (and demonstrating) real and meaningful outcomes. This is particularly pertinent in the Queensland context, where there has been significant investment in health and community services over the past few years. This investment has prompted legitimate questions about the outcomes associated with these funding increases (KPMG, 2017).

There is a noticeable trend in public administration towards setting a clear number of priorities and publicly reporting against related performance indicators (Easton, 2018). The Community Services Industry Alliance (2018) also identifies that competing demands for investment and the growth of both need and investment options over time has led to calls for greater efficiency in how social service dollars are spent and better metrics for measuring the value of that spend.

The continued evolution in performance management frameworks and the drive towards outcomes has implications for the community mental health sector. This discussion paper investigates those implications and looks at the opportunities, challenges and barriers to implementing this type of approach. It is informed by the results of a sector wide survey to measure the current usage of outcome measures, the views of sector professionals and what they believe is required to facilitate a successful transition to an effective outcomes measurement framework.

What are outcome measures?

According to Mosby's Medical Dictionary (2013) an outcome measure "is a measure of the quality of care, the standard against which the end result of the intervention is assessed".

When looking at the delivery of publicly-funded services, the definition of an outcome is linked to the impact that a particular activity has on society (Seivwright et al, 2016).

The consensus definition of an outcome measurement for the community sector is the measurement of the difference that an initiative, program or organisation makes to the lives of people they engage with

(Seivwright et al, 2016). To measure this *difference*, services capture data at the entry-point of care and continue to capture data, mapping experience throughout service duration.

Social Ventures Australia's (SVA) guide to outcomes identifies that changes can include attitudes, behaviours, values and conditions and can be short-term, medium-term and long-term:

- **Short term outcomes** are the most direct result of an intervention
- **Medium term** outcomes link an intervention's short-term outcomes to long term outcomes
- **Long term** outcomes are the result of achieving the short and medium-term outcomes and are usually evident beyond the timeframe of the episode of care

Outputs and Outcomes: It is important to distinguish between outcomes and outputs. Outputs are the direct activity or direct deliverables provided (for example the number of services delivered) and the outcomes are the measurement of what has changed as a result of outputs (SVA, 2017).

Outcomes Framework: An outcomes framework identifies the outcome measures that are chosen for each outcome and how the data are collected (Productivity Commission, 2017).

What are the challenges to implementing this approach?

Measuring social problems is inherently complex for a number of reasons, including the diversity in organisations, services, funders and policy priorities. This makes it difficult to obtain clear measurement of outcomes and impact (Seivwright et al, 2016).

These difficulties were highlighted in a KPMG report on performance management and service delivery, commissioned by the Queensland Government, which identified that a performance mechanism will only ever be an imperfect model, due to the huge complexities of public policy and the external factors influencing outcomes. However, as an evidence base is established and the causal links between inputs and outcomes are developed, a performance framework will become more robust (KPMG, 2017).

Queensland provides a particularly complex jurisdiction for effectively and equitably measuring outcomes, given the decentralisation of services, a proportionally higher Aboriginal and Torres Strait Islander population, a large number of rural and remote communities and an ageing population (KPMG, 2017).

The University of Western Australia Centre for Social Impact identifies the importance of defining the social outcomes you are seeking to achieve and working backwards to design and implement services that reflect these defined goals. However, silos continue to exist across services and sectors and within services and sectors. QAMH's experience is that models of shared outcomes are reactively being implemented to maintain contractual and funding requirements rather than being captured to measure against defined goals.

Organisational challenges

While outcomes measurement offers valuable information on the impact and effectiveness of a service, it also presents challenges for organisations in that it is resource intensive, is dependent on the availability of reliable evidence and data capture tools and may be challenged by system and organisational complexity (Council to Homeless Persons, 2018). Put simply, it is difficult for organisations to provide the training and invest in the resources and infrastructure to effectively map progress towards achieving outcomes. System complexity and the variability in what organisations are being asked to capture across different contracts is another challenge.

The research shows effective outcomes measurement needs to form part of a broader organisation-wide process of embedding systems of performance and evaluation across all levels of the organisation. To achieve a systemic approach to the measurement of outcomes across the community managed mental health sector, the use of outcomes measures must be understood as a part of both strategy and quality and safety within an organisation. This means the use of outcome measurements are embedded in the purpose and intent of the organisation, they are connected and they inform performance management strategy (Seivwright et al, 2016).

What are the opportunities?

From our scoping of the research and policy documents relating to this topic, the emerging focus on outcomes provides an opportunity to:

- Deliver greater impact: An outcomes-focused approach encourages organisations to define what impact they want to achieve and test, review and evaluate service effectiveness (SVA, 2017). This creates a culture of innovation and shared goals, which leads to better outcomes
- Better measure service effectiveness to meet client goals and needs
- Encourage organisations to look at evidence and find new ways of addressing challenging problems
- Support collaboration: By engaging individuals with complex needs and requiring organisations to work collaboratively to improve outcomes.

Survey method

Queensland Alliance for Mental Health developed a survey based off similar research conducted by the University of Western Australia Centre for Social Impact. While targeted at QAMH member organisations, the survey was open to non-member organisations who provide services in the community mental health sector. It was conducted between 13 August and 13 September 2018. One of the crucial aspects of the survey was breaking down survey responses according to staff profile, to be able to better analyse the insights and views across the different professional roles in the sector.

The following questions were asked (each question was multiple choice, with the order of the responses randomised):

1) **Which staff profile best identifies your current role?**
   - Executive/CEO/General Manager
   - Senior manager
   - Team leader/manager
   - Frontline (direct clients, service provision)
   - Administration
   - Governance/quality and safety/research/policy

2) **Do you believe your organisation effectively measures outcomes?**
   - Yes
   - No
   - Unsure

3) **Has your organisation put more of its focus on measuring outcomes over the last five years?**
   - Yes
   - No
   - Unsure

4) **Which option best describes your organisation's approach to outcomes measurement?**
   - It does not measure outcomes
   - It measures outcomes for only a small amount of services
   - It measures outcomes for around half its services
   - It measures outcomes for most services
   - It measures outcomes for all services

5) **Does your organisation provide? (you can choose more than one)**
   - Induction and orientation on how to use outcome measures
   - Training and development on the use of outcome measures in service delivery
   - Access to quality data and reports that relate to my role

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree

6) **Your organisation measures outcomes for the following reasons (you can choose more than one):**
   - To improve services to clients
   - To inform recovery/treatment planning for clients
   - To inform planning and strategy
   - To improve internal decision making
   - External reporting
   - It is a funding requirement
   - To assist with performance management of staff
   - To measure the impact of services on the community

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree

7) **What is the biggest barrier to the effective implementation of outcomes measurement at your organisation? (you can choose more than one)**
   - Lack of funding and resources to implement measures
   - Lack of established methodology or tools
   - Lack of support from senior management and above
   - Diversity in clients and services provided
   - Getting buy in from all the staff
   - Getting participation from the clients receiving services
   - Access to aggregated data

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree

8) **Do you agree/disagree with the following statements? (you can choose more than one)**
   - The public isn't interested in measuring outcomes
   - Measuring outcomes directs resources away from more important service delivery areas
   - The need for data collection impacts the client relationship
   - We don't need outcomes measures to know our approach is working
   - There are more accurate and viable ways of measuring the effectiveness of a service
   - It is important to use outcome measures to inform service design

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree

9) **What are the biggest challenges to the mental health sector in effectively implementing outcomes measurement? (you can choose more than one)**
   - Lack of funding and access to resources to implement this approach
   - Lack of established methodology or tool for measuring this approach
   - Pressure on organisations to deliver outcomes in the short-term when real change requires a long-term approach
   - Organisations not wanting to report negative outcomes for fear of losing funding
   - Getting buy in from smaller organisations with more constrained resources
   - Staff engagement and lack of understanding

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree

10) What recommendations would you make to improve outcomes measurement across the sector? (rank from top to bottom)
- Having standard language and concepts
- Sharing best practice
- Guidance on using tools and methods
- Open data in government
- Making outcomes measurement an external reporting requirement
- Specification of client/consumer outcomes in funding contracts
- Full funding for outcomes measurement in contracts
- Infrastructure for data collection and data reporting
- Eliminating differences in reporting between funders
- Collaborative projects with shared outcomes

11) How does your organisation fund its outcomes measures activities?
- Externally – we apply for specific purpose grants
- Externally – we build it as a line item into our contracts
- Internally – using general funds
- A mixture of both
- I do not know

Open-ended questions:

12) What tools does your organisation use to measure outcomes?

13) Is your organisation increasingly using outcomes measures and, if so, what is driving this push?
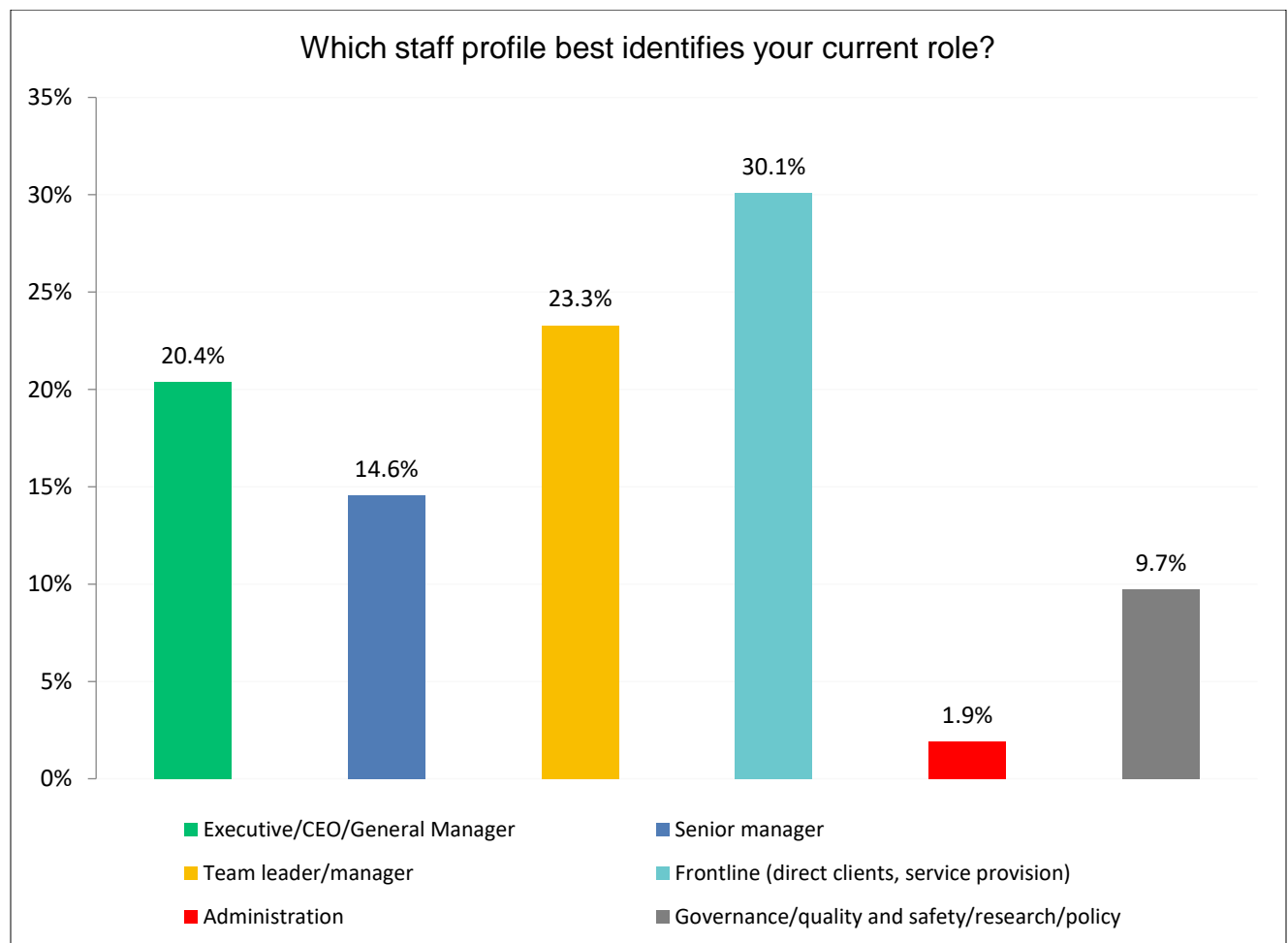
14) If yes: Do you think the increased focus on outcomes measures is improving your organisation's performance/delivery of services?

15) When you started working at your organisation, were you informed about outcomes measures and how they were assessed?

Survey results – Q1

Frontline staff (30%) made up the largest proportion of respondents to the survey, followed by team leaders (23%). It is important to note that responses from the following staffing cohorts were higher than their overall representation within the sector: CEO/general managers; senior managers; and governance, quality and safety and research positions. However, these positions are more aware of the utilisation of outcomes measures across organisations. For example, the scope of practice for quality and safety positions is embedded in the use of data and measurement of activity of services provided. Due to the small proportion of administrative staff, individual analysis of the results for this staffing cohort has not been detailed in the below results.

Question: Which staff profile best identifies your current role?

Which staff profile best identifies your current role?

- Executive/CEO/General Manager — 20.4%
- Senior manager — 14.6%
- Team leader/manager — 23.3%
- Frontline (direct clients, service provision) — 30.1%
- Administration — 1.9%
- Governance/quality and safety/research/policy — 9.7%

Survey results – Q2

Question: Do you believe your organisation effectively measures outcomes?
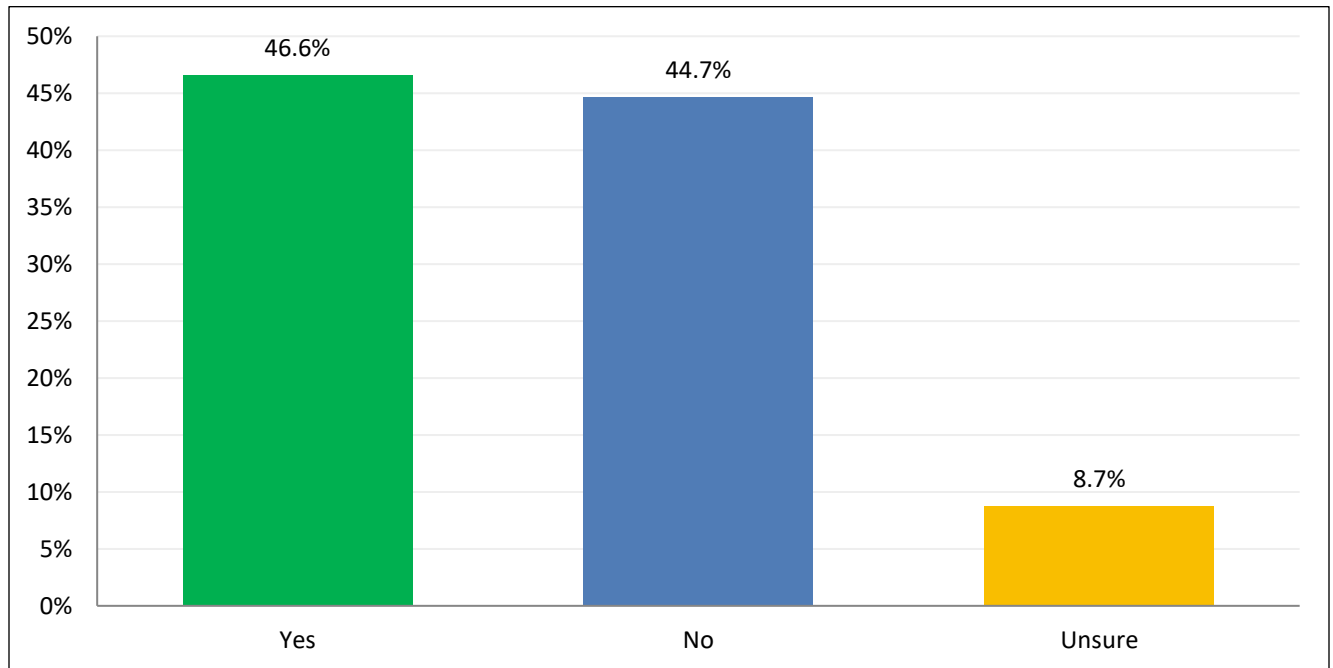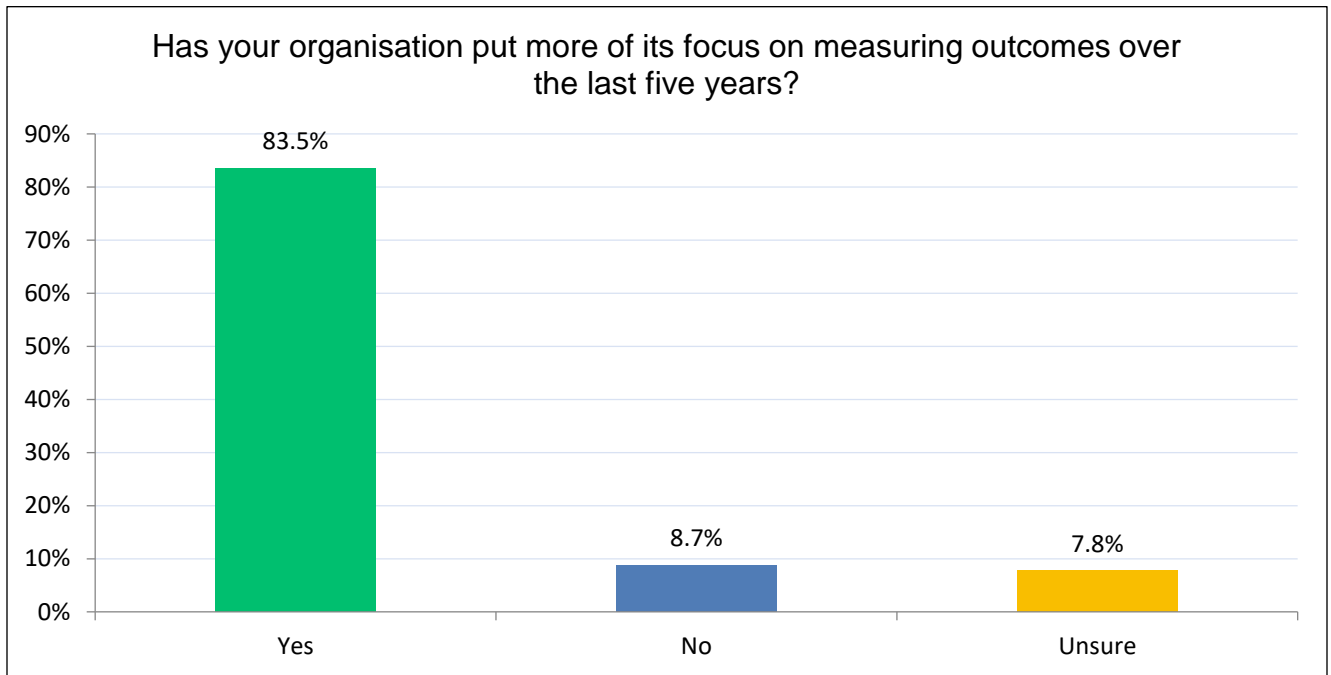

Insights:

The results indicate a balanced response to this question. However, when the data is broken down by staffing profile there are interesting differences. Respondents from governance, quality and safety and research positions had the highest no response rate of all cohorts, with 60% answering that they do not believe their organisation effectively measures outcomes. Just 43% of executive management level staff surveyed believe their organisation effectively measured outcomes, while a majority of senior managers and frontline staff answered positively to the above question.

The data demonstrates a disparity in responses between managers and team leaders/frontline staff. This could indicate gaps in the level of information being provided around performance and activity to client-facing staff. The responses to this question are particularly interesting when considered alongside the responses to question three (see page 11). The increasing focus and push towards measuring outcomes does not mean it is being done effectively across the sector.

Further information detailing responses across different staff profiles is available at Appendix A (page 32).

Survey results – Q3

Question: Has your organisation put more of its focus on measuring outcomes over the last five years?

Has your organisation put more of its focus on measuring outcomes over the last five years?

	Yes	No	Unsure
	83.5%	8.7%	7.8%

Insights:

The above responses indicate the focus from all levels of government on performance frameworks has had a cascading impact on the community mental health sector and QAMH members. Responses to the survey show that many organisations are reacting to or looking to pre-empt future requirements from funding bodies.
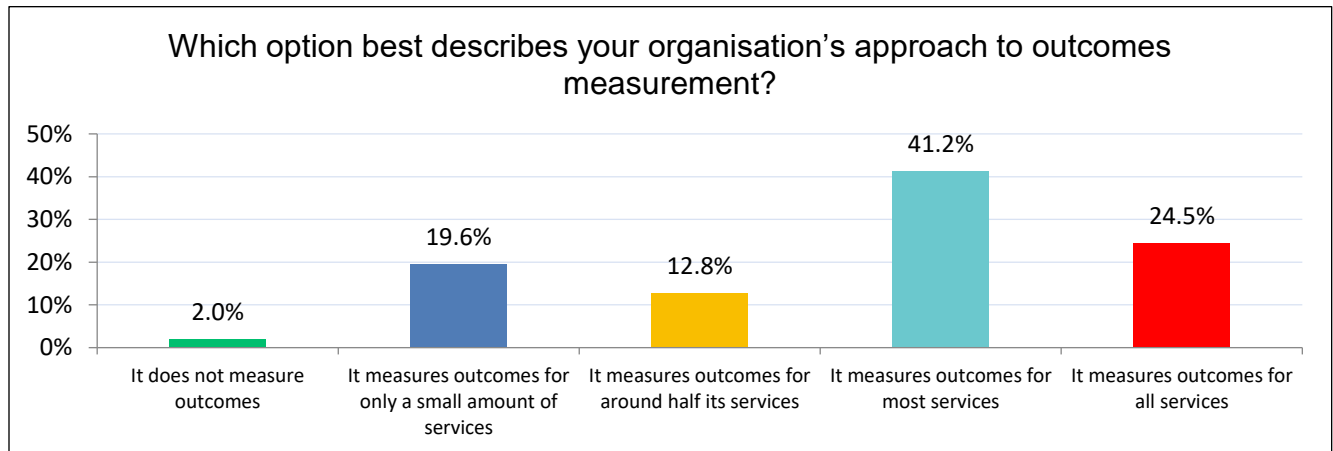
While there was only a minor variation across the different staffing cohorts, the responses from executives and senior managers particularly highlight a perception that the focus on outcomes from funding partners will continue for the foreseeable future.

Clearly, organisations are changing to meet perceived expectations, but the responses to the survey show variability in how individual organisations are responding, how data is being captured and the understanding of outcome measures across different staff profiles.

It is also important to highlight that funders expectations and requirements in relation to outcomes measures have, so far, remained relatively stable. However, we have seen an increase in contractual obligations to capture data on outputs. This could indicate a lack of clarity and understanding of outcomes measures across parts of the community mental health sector.

Survey results – Q4

Question: Which option best describes your organisation's approach to outcomes measurement?

Which option best describes your organisation's approach to outcomes measurement?

- It does not measure outcomes: 2.0%
- It measures outcomes for only a small amount of services: 19.6%
- It measures outcomes for around half its services: 12.8%
- It measures outcomes for most services: 41.2%
- It measures outcomes for all services: 24.5%

Insights:

More than 65% of respondents indicated their organisation measures outcomes for most or all of its services. Only a minor number of respondents answered their organisation does not measure outcomes. The responses indicate the vast majority of organisations measure outcomes in some way.

Analysis by staff profile shows:

- 81% of <u>frontline staff</u> answered their organisation measures outcomes for most or all services
- 67% of <u>senior managers</u> answered their organisation measures outcomes for most or all services
- 60% of <u>CEOs/executives</u> answered their organisation measures outcomes for most or all services
- 58% of <u>team leaders</u> answered their organisation measures outcomes for most or all services
- 40% of <u>governance/quality and safety/research staff</u> answered their organisation measures outcomes for most or all services

The divergence in answers across the various staffing profiles is particularly interesting. Those respondents dealing directly with clients are most of the belief that their organisation is measuring outcomes for a majority of the services being delivered. However, CEOs and executive managers involved with the overall operations of the organisations provided different responses. This could again highlight a gap in the level of information being provided around performance and activity to client-facing staff. Seemingly, frontline staff are capturing data and reporting against it, but it is unclear whether information on performance and activity is being provided back to them.

The response also shows a distinct variability in how data on outcomes is captured and mapped across the sector. While a majority of organisations are measuring outcomes for most, if not all, services, it is a much smaller focus for other organisations, with some respondents indicating outcome measurement data is not captured at all.

Survey results – Q5

Question: Does your organisation provide?
- **Induction and orientation on how to use outcome measures**
- **Training and development on the use of outcome measures in service delivery**
- **Access to quality data and reports that relate to my role**

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree

Does your organisation provide?
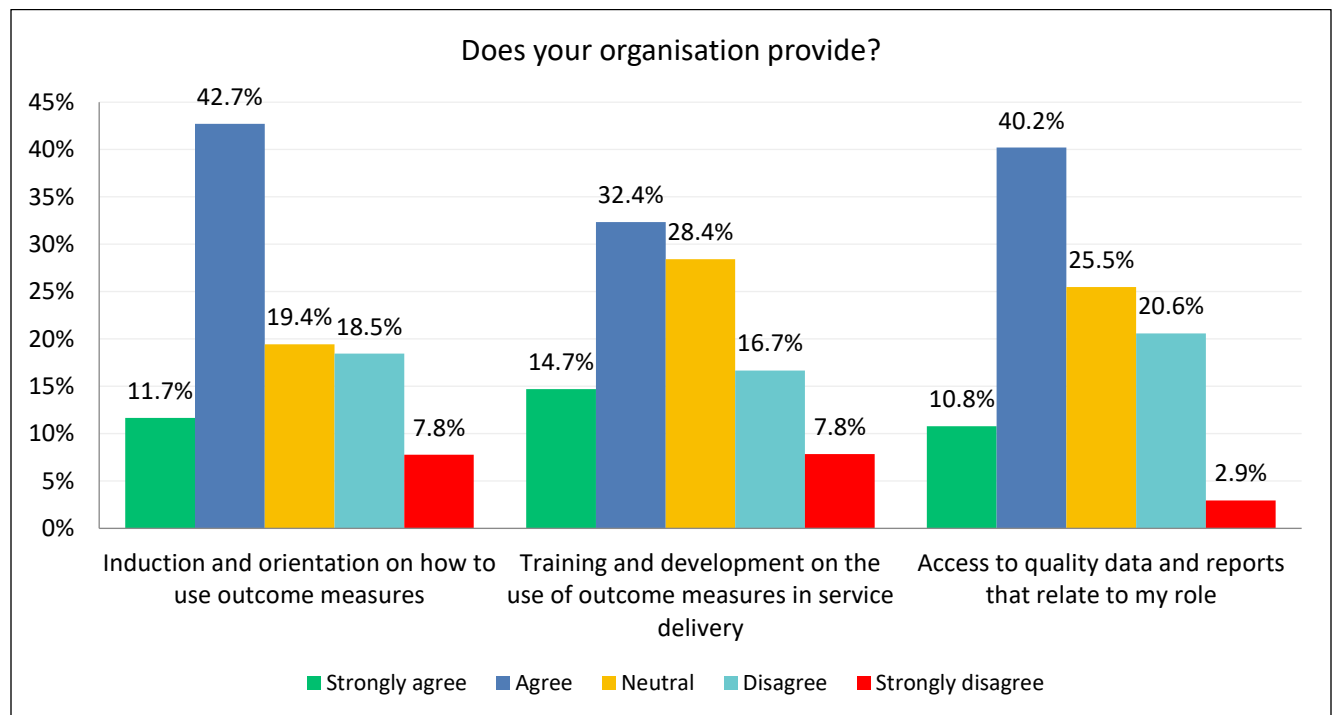
Insights:

The purpose of this question is to capture the current practices used across organisations to support the use of outcome measures. The results demonstrate that half of all respondents agree they work in organisations that support staff in the use of outcome measures at commencement and throughout employment. Over half of all respondents report they have access to quality data and reports that relate to their role. However, there was still a significant number of respondents who either disagreed or strongly disagreed that they were supported in the use of outcomes measures in their organisations. This illustrates that induction, staff development and access to quality data and reports is not standard practice across the sector. It also validates some of the insights identified in earlier questions around potential gaps in information being provided to client-facing staff.

Survey results – Q6

Question: Your organisation measures outcomes for the following reasons?
- **To improve services to clients**
- **To inform recovery/treatment planning for clients**
- **To inform planning and strategy**
- **To improve internal decision making**
- **External reporting**
- **It is a funding requirement**
- **To assist with performance management of staff**
- **To measure the impact of services on the community**

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree
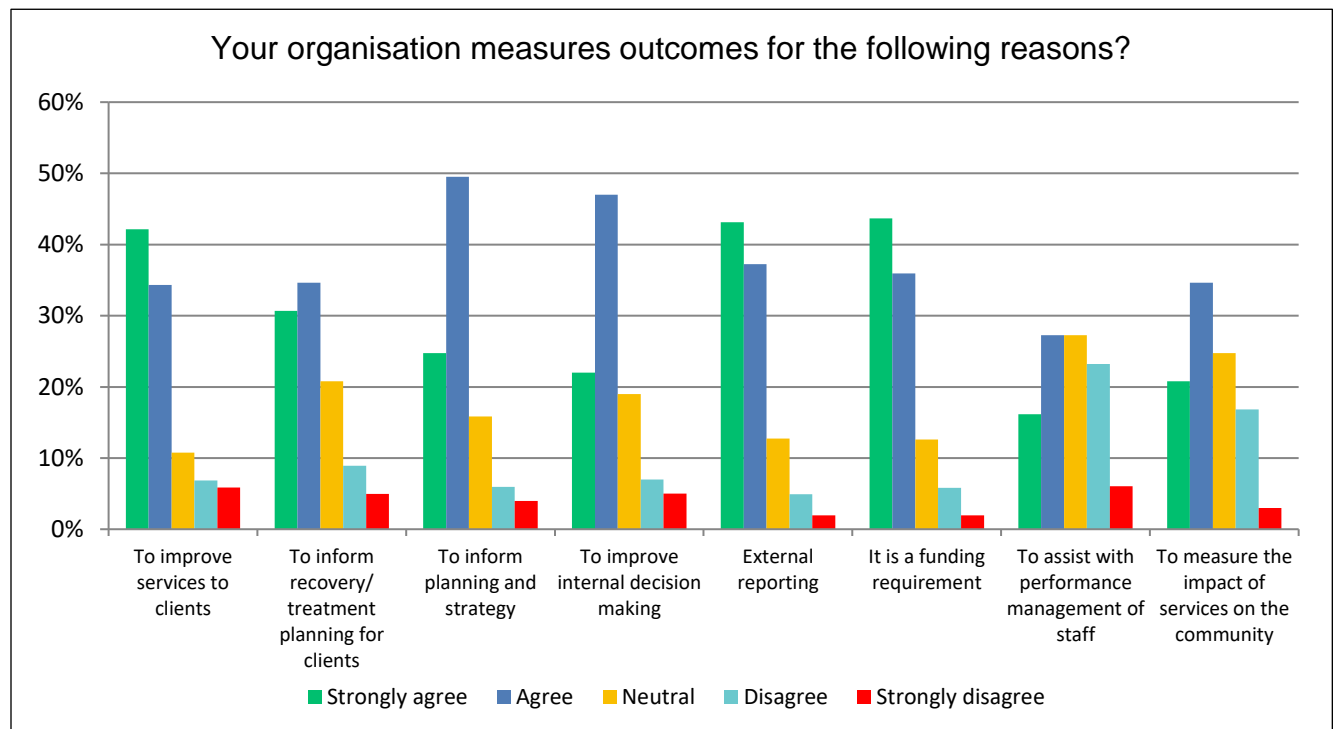
Insights:

The response demonstrates that the use of outcomes to measure the impact of services/programs is being carried out for many reasons. The two options to have the strongest response (those surveyed who agreed or strongly agreed) were: that outcomes were measured for external reporting purposes (80.4%); and because it is a requirement of funding (79.6%). However, there was also broad agreement that outcomes were measured to improve services to clients (76.5% agreed or strongly agreed) and to inform planning and strategy (74.3% agreed or strongly agreed). The results show the lowest priority reason for measuring outcomes was to assist with performance and management of staff.

Ranked reasons for measuring outcomes at organisations

1.	External Reporting
2.	It is a funding requirement
3.	To inform planning and strategy
4.	To improve services to clients
5.	To improve internal decision making
6.	To inform recovery/treatment planning for clients
7.	To measure the impact of services on the community
8.	To assist with performance management of staff

The results indicate a recognition of the benefits of measuring outcomes, such as improving services to clients and helping to inform the strategic directions of the organisation, but the primary concern and reason for implementing an outcomes framework is to meet reporting and funding requirements of partners.

The results also demonstrate a divergence in opinion across different staffing cohorts. At the executive level, there is a view that outcomes are being measured to help assist clients and inform service delivery. For senior managers, the main reasons for measuring outcomes are to improve internal decision-making and for external reporting. Those respondents at the team leader and frontline staff level had the majority view that outcomes are being measured as a funding requirement. These differences across different cohorts provide interesting insights to the views of outcomes measures and how they are perceived at various levels of the community mental health sector.

See Appendix B for more information on the responses by staff profile (pages 33-34).

Survey results – Q7

Question: What is the biggest barrier to the effective implementation of outcomes measurement at your organisation?
- **Lack of funding and resources to implement measures**
- **Lack of established methodology or tools**
- **Lack of support from senior management and above**
- **Diversity in clients and services provided**
- **Getting buy in from all the staff**
- **Getting participation from the clients receiving services**
- **Access to aggregated data**

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree
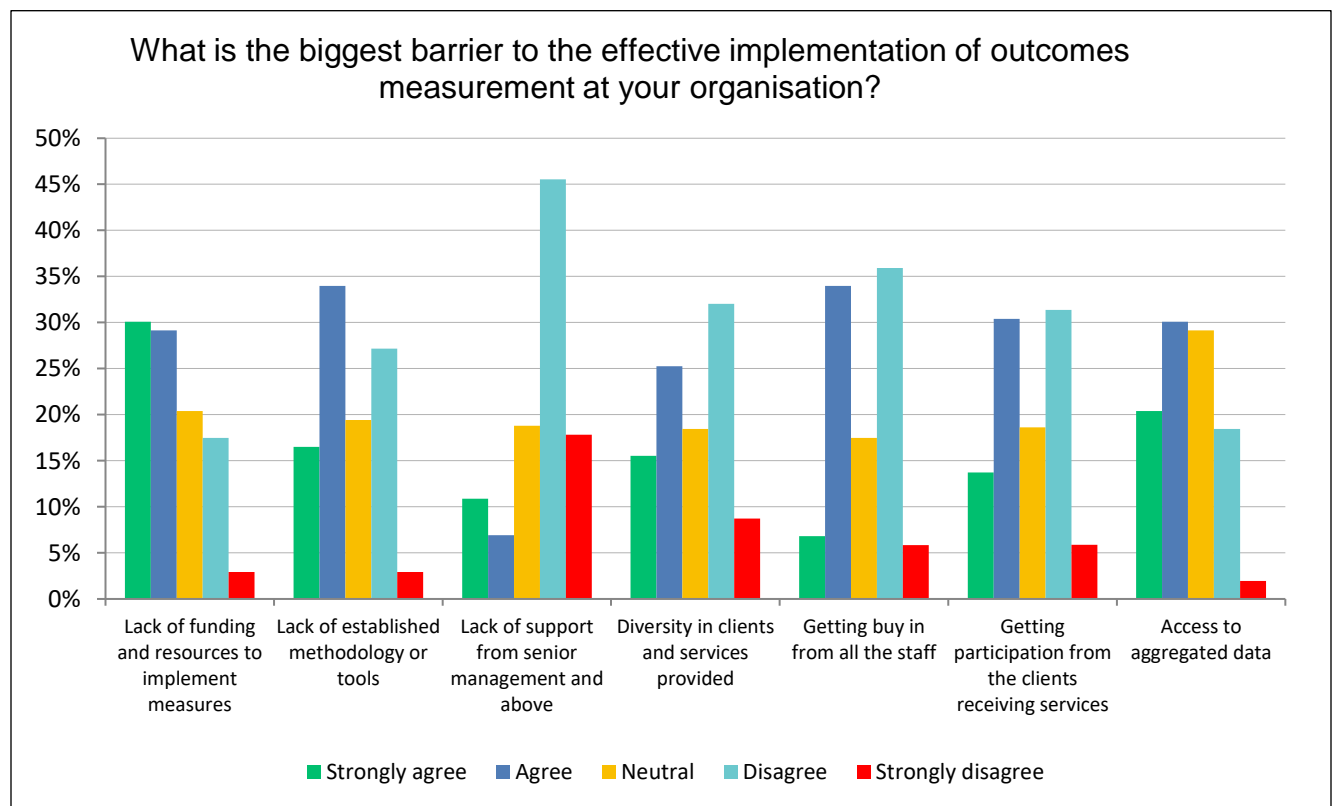
Insights:

Respondents identified that the lack of funding and resources to implement measures are the single largest barrier to the effective implementation of outcome frameworks. This was followed by access to aggregated data and lack of established methodology or tools. The responses also demonstrate that support from senior management is not an impediment to the implementation of outcomes measures across community mental health organisations.

Ranked barriers to the effective implementation of outcomes at organisations

1.	Lack of funding and resources to implement measures
2.	Access to aggregated data
3.	Lack of established methodology or tools
4.	Getting participation from the clients receiving services
5.	Diversity in clients and services provided
6.	Getting buy in from all the staff
7.	Lack of support from senior management and above

While there was strong agreement across all staffing profiles that lack of funding and resources was a significant barrier, there were interesting variations within each staff profile. At the CEO and executive manager level there was a particular concern about access to aggregated data and strong disagreement that staff buy-in, client participation and organisational leadership were barriers. Senior managers were also concerned about access to aggregated data, but identified client diversity, the lack of a consistent methodology and difficulties in getting participation from clients as other barriers. For team leaders, the second largest barrier (behind the lack of funding) was the difficulty in getting buy in from staff, while for frontline workers the ability to get participation from clients and service users was identified as the second largest barrier. Unsurprisingly, governance and quality and safety staff listed access to data and lack of consistent methodology as their main concerns.

The individual cohort results are further outlined at Appendix C (page 35).

There is a view in the sector that the push towards outcomes is a result of contractual and reporting requirements from funding partners (see results from question six). The above responses show organisations need further resourcing and access to aggregated data to properly implement these frameworks.

Survey results – Q8

Question: Do you agree/disagree with the following statements?
- **The public isn't interested in measuring outcomes**
- **Measuring outcomes directs resources away from more important service delivery areas**
- **The need for data collection impacts the client relationship**
- **We don't need outcomes measures to know our approach is working**
- **There are more accurate and viable ways of measuring the effectiveness of a service**
- **It is important to use outcomes measures to inform service design**

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree
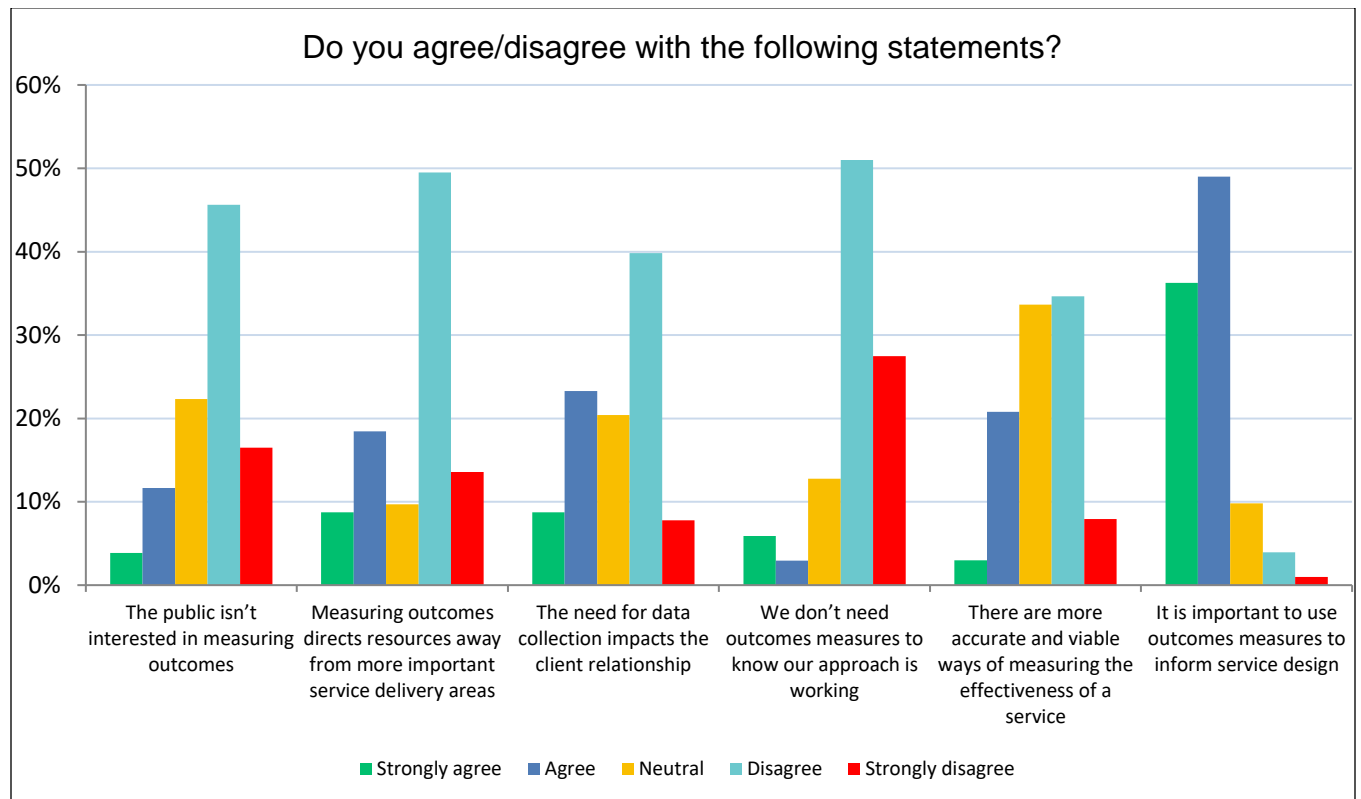
Insights:

The results indicate there is support across the sector for the continued use of outcome measures as a way of mapping service impact and effectiveness. Respondents overwhelmingly disagreed that outcome measures were not needed to know that the approach taken at their organisation was working. Similarly, there was strong support for the statement that outcomes measures are an important component of service design. This clearly demonstrates that within organisations there is an appreciation of the benefits of using outcomes measures to improve performance. The responses also showed that a majority of people disagreed that measuring outcomes directs resources away from more important service delivery

areas and that capturing data impacts the client relationship. The sector also recognises that the public is interested in understanding the impact of and outcomes achieved through publicly-funded services.

The below table provides interesting insights across the different staffing profiles. It measures the **net rating** (*that is, the number of people strongly agreeing or agreeing against the number of people disagreeing or strongly disagreeing*) for each question option by individual staff cohort (*a negative response indicates a majority of respondents disagree with the statement and vice versa*).

Senior managers were less concerned than other cohorts around the impact of outcomes on client relationships and resourcing. At the team leader and frontline level, we see a view that there are other ways of mapping the effectiveness of the service delivered beyond outcomes measures. Unsurprisingly, frontline staff were particularly concerned with the impact data collection has on their relationships with the individuals they provide services to.

Do you agree/disagree with the following statements?	Overall	Executive manager	Senior manager	Team leader	Frontline	Governance
The public isn't interested in measuring outcomes	-46.6%	-38.1%	-86.7%	-50.0%	-25.8%	-70.0%
Measuring outcomes directs resources away from more important service delivery areas	-35.9%	-38.1%	-80.0%	-16.7%	-25.8%	-50.0%
The need for data collection impacts the client relationship	-15.5%	-23.8%	-86.7%	-8.3%	22.6%	-30.0%
We don't need outcomes measures to know our approach is working	-69.6%	-81.0%	-100.0%	-54.2%	-50.0%	-90.0%
There are more accurate and viable ways of measuring the effectiveness of a service	-18.8%	-30.0%	-40.0%	4.2%	-3.3%	-60.0%
It is important to use outcomes measures to inform service design	80.4%	76.2%	86.7%	75.0%	80.0%	90.0%

Survey results – Q9

What are the biggest challenges to the mental health sector in effectively implementing outcomes measurement?
- **Lack of funding and access to resources to implement this approach**
- **Lack of established methodology or tool for measuring this approach**
- **Pressure on organisations to deliver outcomes in the short-term when real change requires a long-term approach**
- **Organisations not wanting to report negative outcomes for fear of losing funding**
- **Getting buy in from smaller organisations with more constrained resources**
- **Staff engagement and lack of understanding**

Options under each section. Strongly agree, agree, neutral, disagree, strongly disagree

What are the biggest challenges to the mental health sector in effectively implementing outcomes measurement?
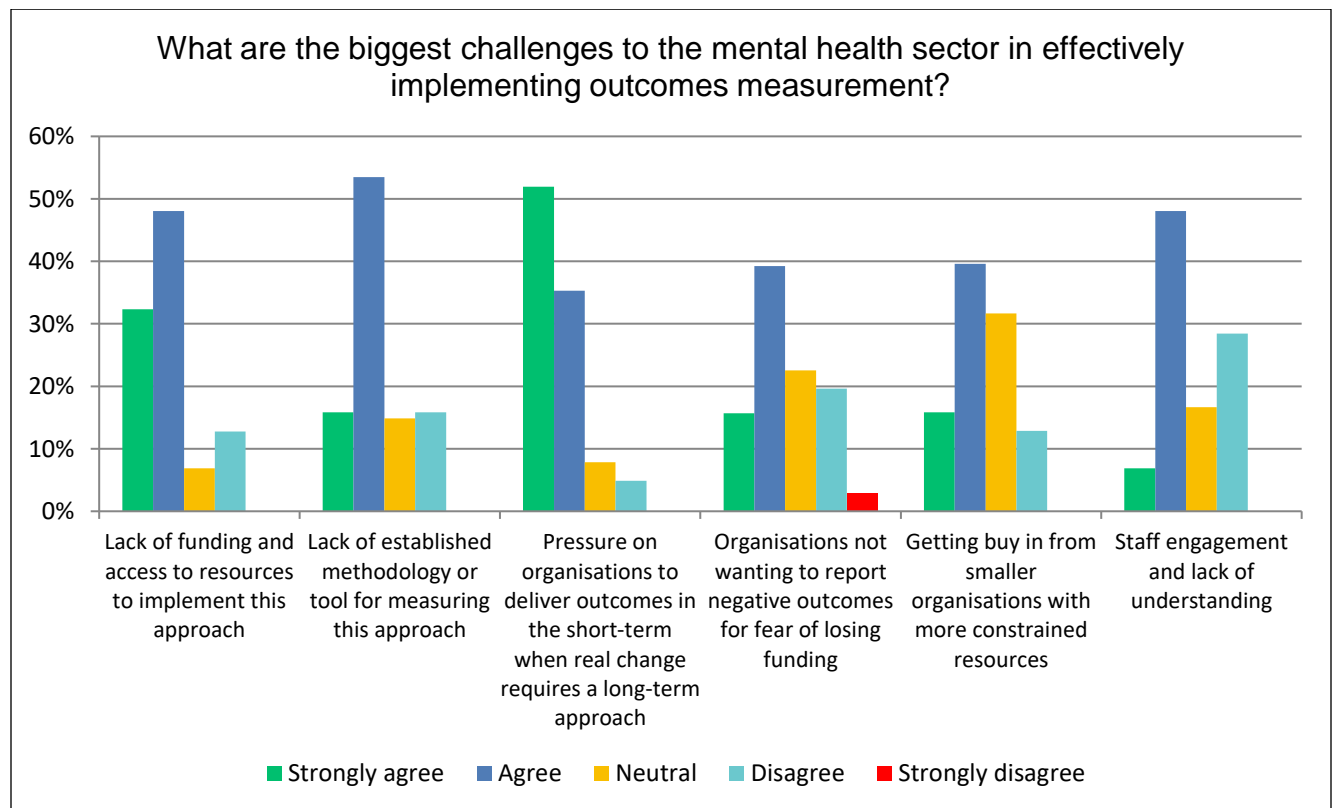
INSIGHTS:

The results show that the biggest challenge to effectively implementing outcomes measurement across the sector is seen to be the pressure on organisations to deliver impact over the short-term, when real and meaningful change takes time. Governments rightly want to be able to quantify and demonstrate the benefits of any public investment, but this can also lead to unfair pressure on organisations to substantiate the value of the service delivered when client needs are complex and the recovery journey is a long

process. If governments are committed to the increasing use of outcomes measures, this must come with a recognition that these types of frameworks take time to properly implement and that the benefits of this approach may not be immediately evident. Similarly, constant changes in the policy landscape can impact service continuity and the type of service delivered in the community, which can impact the end outcome achieved. The mental health sector has an added challenge in that it can be difficult to attribute outcomes to service providers that are working to address complex social problems. There can be many factors other than service provision that contribute to changes in a person's wellbeing (Productivity Commission, 2017).

Another key challenge identified by respondents is the need for organisations to be adequately funded and provided with the resources to properly implement an outcomes framework. The results from survey question 11 show that 50% of organisations are funding outcomes measures using internal allocations only and a further 26% are using both internal and external funds (this is explored in further detail at page 23). Service providers are under immense financial pressures, with many struggling to remain viable. The latest National Disability Services (NDS) State of the Disability Sector Report showed 31% of surveyed organisations are operating at a loss (NDS, 2018). The impacts of the transition to the NDIS, changes to quality and safeguarding frameworks and the potential introduction of new arrangements such as a portable long service leave scheme in Queensland will all bring further pressures to service providers. Governments need to recognise the financial pressure organisations are under and ensure they are properly funded and adequately resourced to deliver impactful change.

Ranked major challenges to implementing outcome measures across the sector

1.	Pressure on organisations to deliver outcomes in the short-term when real change requires a long-term approach
2.	Lack of funding and access to resources to implement this approach
3.	Lack of established methodology or tool for measuring this approach
4.	Getting buy in from smaller organisations with more constrained resources
5.	Organisations not wanting to report negative outcomes for fear of losing funding
6.	Staff engagement and lack of understanding

Once again, the responses to this question by staffing profile provide interesting insights. Executive managers and senior leaders are more concerned by funding pressures, the need for established data capture tools and the pressure to deliver outcomes in the short-term. For client facing staff these are all still concerns, but this cohort is generally less worried about these pressures.

Information on the different trends across the staffing profiles is available at Appendix D (page 36).

Survey results – Q10

What recommendations would you make to improve outcomes measurement across the sector?
- **Having standard language and concepts**
- **Sharing best practice**
- **Guidance on using tools and methods**
- **Open data in government**
- **Making outcomes measurement an external reporting requirement**
- **Specification of client/consumer outcomes in funding contracts**
- **Full funding for outcomes measurement in contracts**
- **Infrastructure for data collection and data reporting**
- **Eliminating differences in reporting between funders**
- **Collaborative projects with shared outcomes**

Ranked from top to bottom

Survey results

ANSWER	SCORE	RANK
Providing full funding of outcomes measures in contracts	6.94	1
Having standard/consistent language and concepts	6.49	2
Eliminating differences in reporting between funding bodies	6.43	3
Better infrastructure for data collection and reporting	6.03	4
Identifying and sharing industry best practice	5.82	5
Better guidance on using tools and methods	5.51	6
Identification of client/consumer outcomes in funding contracts	5.03	7
Making outcomes measurement an external reporting requirement	4.77	8
Providing open data across government	4.37	9
Delivering collaborative projects with shared outcomes	4.24	10

INSIGHTS:

Each of the ten responses were given a weighting according to the rank received from individual respondents. Consistent with the responses received to other questions, the need to provide funding to organisations to properly implement outcome measures was again a critical concern and received the highest priority ranking. This again highlights the financial and administrative impact that the effective monitoring and reporting on outcome measures can have on service providers. One other consistent response that shows through in the above rankings is the need for standardised language and concepts across the sector. The need to eliminate reporting differences between funding bodies also received a significantly high ranking across our respondents.

These responses are reflective of those received for other survey questions and illustrate a theme. While the survey indicates broad support for the implementation of outcomes measures across the community mental health sector, there are a number of barriers and challenges that must be addressed to support

organisations to implement this approach. These include funding restraints, the lack of an established data capture methodology and consistency in what organisations are asked to measure in contracts and across funding bodies.

When breaking down answers to the above question by staffing profile, we can see slight differences in what is considered to be most important.

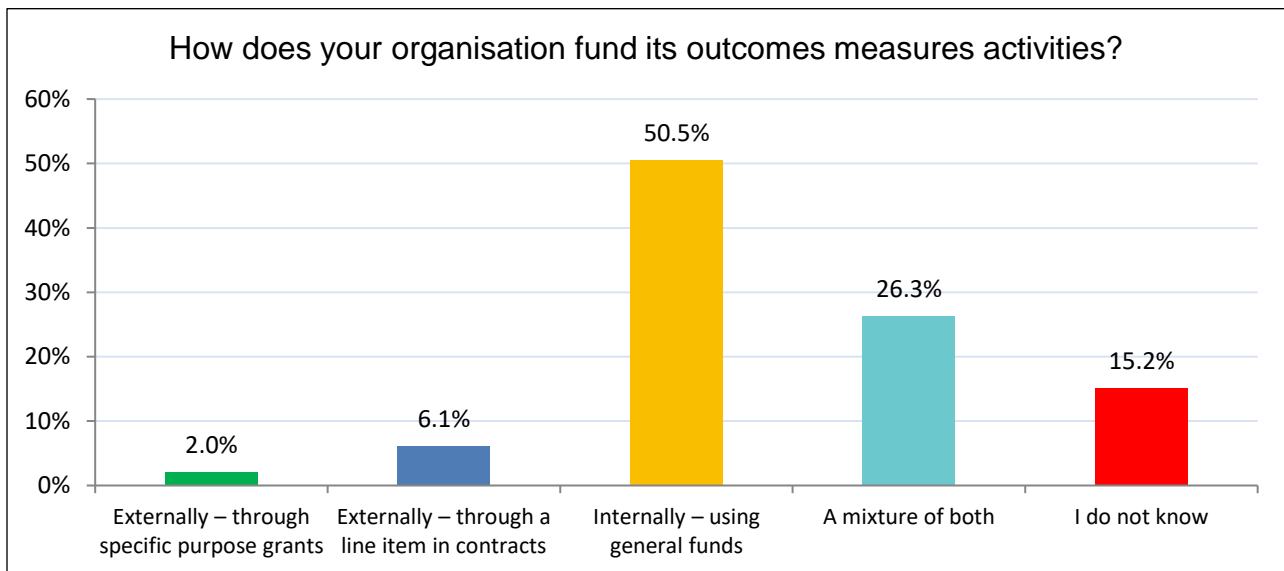Highest ranked response by staff profile:

- Executive/general manager - *Better infrastructure for data collection and reporting*
- Senior manager - *Providing full funding of outcomes measures in contracts*
- Team leader - *Providing full funding of outcomes measures in contracts*
- Frontline staff/direct clients - *Having standard/consistent language and concepts*
- Governance/quality and safety data - *Providing full funding of outcomes measures in contracts*

Further details on the different weighting provided by staff cohort is available at Appendix E (page 36).

Survey results – Q11

How does your organisation fund its outcomes measures activities?
- **Externally – we apply for specific purpose grants**
- **Externally – we build it as a line item into our contracts**
- **Internally – using general funds**
- **A mixture of both**
- **I do not know**

How does your organisation fund its outcomes measures activities?

- Externally – through specific purpose grants: 2.0%
- Externally – through a line item in contracts: 6.1%
- Internally – using general funds: 50.5%
- A mixture of both: 26.3%
- I do not know: 15.2%

INSIGHTS:

The above results highlight why appropriate funding and resourcing of organisations is such a critical concern. More than half of all people surveyed responded that outcome measures are entirely funded using internal resources. A further quarter of all respondents indicated at least some internal funding was used to maintain and measure outcomes. Organisations are under significant financial pressures and are not in a position to be able to absorb any additional costs associated with maintaining a new system or accreditation under a new service standard. This again highlights the importance of governments properly funding organisations to be able to map, measure and report against any performance measures that directly relate to outcomes.

There was a relatively large proportion of respondents who did not know the answer to the above question. It is worth noting the majority of people who answered in this way came from the frontline/direct client staffing profile. A number of team leaders were also unsure of the answer to this question. When looking at the responses of the CEO/general managers, 71.4% answered that outcomes measures were funded entirely using internal funds and 19% answered that it was funded through a mixture of internal and external funds.

Survey results – open-ended questions

Q: What tools does your organisation use to measure outcomes?

The answers indicate there is no one specific tool or method that is used across the sector to measure and map progress against achieving outcomes. Only a small number of respondents indicated their organisation is using an evidence-based outcomes measurement tool.

On reflection, these responses are consistent with answers to previous survey questions which identified the lack of an established methodology and data capture tools as some the largest barriers to implementing an effective outcomes measurement approach across individual organisations and the sector. These issues are further complicated by lack of literacy around what is an outcome and what is an output, which was evident in survey responses.

Q: Is your organisation increasingly using outcomes measures and, if so, what is driving this push?

The responses clearly indicate outcome measures are increasingly being used across the sector. Consistent with the answers to the multiple-choice survey questions, funding and contract requirements were the prevailing cause.

One thing that came through in the responses is the lack of literacy around outcomes and outputs, with many respondents linking outcomes to activities rather than the impact (or outcome) of the activity.

The transition towards the NDIS has also prompted many organisations to use outcome measures to meet the reporting requirements and principles of the NDIS and as a service planning tool.

> *(It's driven by a) need for real time data to provide to funding bodies; strategy and planning for tender and grant submissions; increase in the need to understand client outcomes; NDIS service planning.*
> **Survey response**

> *(The) uptake of outcome measures has been driven by an organisational commitment to demonstrating the excellent client outcomes achieved, which have been measured through variable means, often anecdotally. Additionally, NDIS sector reform is a driver.*
> **Survey response**

The need for evidence was another prevailing theme that came through in the survey responses. This was framed through different lenses – evidence to demonstrate value to funders and evidence to demonstrate the impact of a service. Some respondents stated that evidence was needed to be able to effectively tender for services and to demonstrate value for money to funding partners. Other respondents framed their answers around wanting evidence to show the value of the service being delivered to the community, whether organisational and individual client goals are being achieved and to inform future service delivery.

> *(There is) a want to capture tangible evidence to support that we deliver quality services and value for money options to commissioners.*
> ***Survey response***

> *It just makes sense to capture as evidence what is needed in community and success in achieving goals. Evidence is required to validate funding.*
> ***Survey response***

Q: If yes: Do you think the increased focus on outcomes measures is improving your organisation's performance/delivery of services?

Responses to this question (removing those people who were unable to answer this question) could be broken down into three areas; no; yes; and yes, but with limited impact.

Interestingly, the number of respondents answering no or in a negative way matched the number of people who answered yes. The reasons provided for a negative answer to this question include: the stress it has placed on providers and staff; the subsequent change in focus away from other core service delivery areas; the resourcing issues organisations and staff face in funding and delivering outcome measures; and the complexity of being able to measure and show the tangible outcome achieved.

> *I feel it's causing further stress to effective service delivery.*
> ***Survey response***

> *It is a complex thing to measure.*
> ***Survey response***

> *(It hasn't helped) because it has not been properly funded.*
> ***Survey response***

> *The use of outcomes measures is not happening across the organisation.*
> ***Survey response***

The respondents that answered positively to the question identified a number of benefits, such as improving services, informing best practice and identifying what supports work best for the client.

> *I think that it's providing a much clearer picture of what works and what doesn't. It means we can work with our funding bodies to provide a more tailored service that meets our client and community needs.*
> **Survey response**

> *It allows us to better understand the practice that is occurring and identify areas for improvement easily.*
> **Survey response**

> *Outcomes planning is providing a better quality of service.*
> **Survey response**

> *(Outcome measures) puts the focus on the customer.*
> **Survey response**

There was a third cohort of answers that identified positive benefits but found that these benefits had not yet been realised, or the way in which the measurement framework was implemented had impacted its effectiveness.

> *It will (provide benefits), it's just taking time and resources to get to that point.*
> **Survey response**

> *It will (provide benefits), especially if data is available for clients, staff and external stakeholders.*
> **Survey response**

> *Yes (it is helping) within the narrow scope of performance criteria. No (it is not helping) because it means the narrow focus on particular outcomes comes at the expense of other valuable outcomes.*
> **Survey response**

> *We are at the start of this journey, there is a lot to do.*
> **Survey response**

The responses to the survey multiple-choice questions indicated respondents recognised and supported the value of implementing an outcomes framework. It is arguable that the responses to this question show that while the sector is supportive of using outcomes to deliver more client-focused services and achieve meaningful results, the implementation of outcomes (both at a government and organisational level) have impacted its effectiveness.

Q: When you started working at your organisation, were you informed about outcomes measures and how they were assessed?

The responses to this question again illustrated the different practices and different approaches taken at various organisations across the sector. Some respondents answered no, other answered yes, and others answered yes, but only with a limited focus.

What's this all mean? That industry practice is not uniform. This might reflect the fact that organisations do not receive funding from government to implement this approach. Some organisations don't have the capacity to properly establish and maintain this type of approach. In the current policy and funding environment, organisations are struggling to provide training and professional development to staff. To increase the understanding and usage of outcomes-focused measurement frameworks, organisations need to be resourced appropriately and supported with the appropriate infrastructure.

Conclusion and recommendations

There is a view in the sector that the increasing push towards outcome measures is being driven by government. It is also arguable the real driver is the growing body of evidence showing the benefits of adopting this type of approach. By measuring outcomes, organisations look beyond the service being delivered and look to evaluate the program's effectiveness and impact. This can provide the basis for organisational change and improvement (Australian Research Alliance for Children and Youth, 2009), through a constant focus on client need. This approach is shown to achieve results and puts the client at the centre of service delivery.

It is the very nature of governments that they will constantly be looking to achieve real value-for-money through the public investment being made in service delivery. Governments should absolutely be aiming to ensure that public funds are directed to programs that provide outcomes for the people receiving those services. However, service delivery in the community space happens within an extremely complex environment which is complicated by many factors. Additionally, governments do not always recognise the impacts of policy changes on the organisations funded to deliver those services. These are important points to remember when reflecting on outcomes measurement.

The survey responses show the community mental health sector is supportive of adopting outcome frameworks and wants to partner with government in the delivery of outcome measures. However, there are several barriers and challenges that need to be addressed to ensure this is done properly and in a way that delivers a maximum benefit to the public.

Firstly, organisations need to be supported to implement an evidence-based outcomes framework across their operations. Any changes which require a new, different, and more intensive data capture or reporting approach come at a cost. Organisations cannot and do not have the ability to internally absorb these costs and need to be supported by government to implement this approach. The effective delivery of outcomes measurement requires appropriate infrastructure and a level of understanding across all parts of an organisation. This also comes at a cost. In recognising the benefits of the outcome measurement approach, governments must also recognise that an increased upfront investment is required to support organisations to implement it and continue to capture the data. If organisations are forced to absorb additional costs internally, the fragmented and variable approach that currently exists (as evidenced in the above survey responses) will continue.

The survey responses also illustrate there is no consistent tool that is used across the sector to capture data and measure outcomes. Some organisations use the World Health Organisation Disability Assessment Scale (WHODAS) and others use the Camberwell Assessment of Need Short Appraisal Schedule (CANSAS). Other organisations use an entirely different method. There is also no established industry-wide methodology for measuring progress against achieving outcomes. This presents an opportunity for government to step up and partner with the providers to develop a standardised set of practices. This engagement should include all levels of government, both State and Federal. This type of collaboration can provide: opportunities to reduce the financial burden on organisations; the development of standards for assessing outcomes that provide a consistent and evidence-based

approach; and allow for effective outcomes measurement approaches to be adopted across all jurisdictions.

There is also a prevailing concern across the sector that governments will want to see immediate results when the demonstrated impact/outcome of a service will take more time to be realised. Respondents are concerned that a perceived lack of results over a short timeframe will increase pressure on them and ultimately lead to a loss of funding (if unable to demonstrate results). It is imperative the government understands and recognises that real and meaningful impact takes time. This should be reflected in future funding contracts. Service providers in the community mental health space are dealing with incredibly complex clients and the benefits of the service that is delivered may not be immediately obvious. It is also important to remember there can be additional complexities in delivering services, including factors like location, age, background and level of disadvantage. While community mental health organisations are shown to support recovery and improve wellbeing, the social determinants of health are outside of their control. These added complexities, which sit outside of the control of service providers, must also be recognised in any move towards outcomes measurement.

Fundamentally, if governments are committed to implementing this change across publicly-funded services then they need to provide leadership, assist organisations to implement this approach and to recognise and understand the challenges providers face in implementing an outcomes measurement framework.

RECOMMENDATIONS:

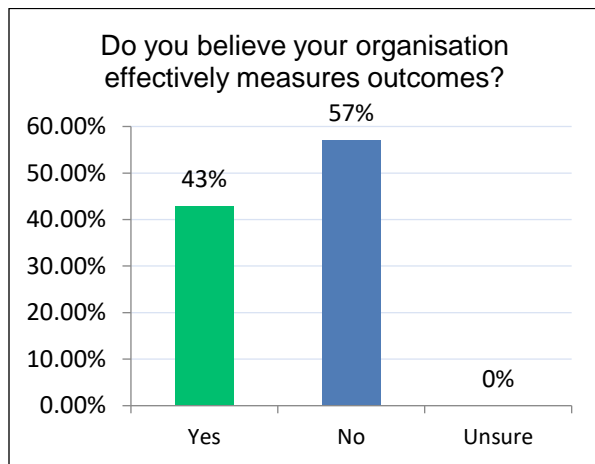**That government should consider the following actions:**

- **Reviewing procurement/commissioning strategies to support organisations to implement and maintain outcomes-focused performance management systems. This review should include costs and infrastructure establishment. Organisations should include outcomes measurement strategies and associated costs in tenders.**

- **Establishing data management systems to provide organisations with access to reported data to assist in implementing outcomes measurement. This step would require government to invest in reporting systems that allow providers to measure progress against 'like for like' providers. Sophisticated data systems also assist with the tracking of national and state reforms and allow for more accurate measurement of government priorities.**

- **Supporting providers to train and upskill staff in the data capture and reporting of outcome measures, to help remove inconsistent practices across the sector and drive more positive outcomes.**

- **Working collaboratively, and with industry, to reduce any duplication and work towards more consistency in funding contracts in relation to performance management and reporting against outcomes.**

List of references

Australian Research Alliance for Children and Youth 2009, Measuring the outcomes of community organisations, ARACY, ACT, Accessed on 28 November at <https://www.pc.gov.au/inquiries/completed/not-for-profit/submissions/subdr199-attachment.pdf>.

Community Services Industry Alliance 2018, *Commissioning for outcomes – An industry led approach*, Community Services Industry Alliance, Brisbane, accessed on 19 December 2018 at < https://csialtd.com.au/u/lib/cms/csia-commissioning-report-may-2018.pdf>

Council to Homeless Persons 2018, *Preparing for Outcome Measurement*, Council to Homeless Persons, Melbourne, accessed on 12 December 2018 at < http://chp.org.au/wp-content/uploads/2018/10/CHP-Outcomes-Position-Paper-FULL-FINAL.pdf>.

Easton, S 2018, 'Blast from the past: Palaszczuk asks 1990s public service reformer to define future state', *The Mandarin*, 23 July 2018, accessed on 15 November 2018 at <https://www.themandarin.com.au/96128-blast-from-the-past-palaszczuk-sets-targets-brings-back-1990s-public-service-reformer/>.

Queensland Government 2017, Queensland Government Performance Management Framework Policy, Queensland Government, Brisbane, accessed on 13 November 2018 at <https://www.forgov.qld.gov.au/manage-government-performance>.

KPMG 2017, *Enhancing Performance Management and Service Delivery – Final Report*, prepared for the Department of Premier and Cabinet, accessed on 13 November 2018 at <https://www.premiers.qld.gov.au/publications/categories/reports/assets/epmsd-report-final.pdf>.

Mosby's Medical Dictionary 2013, 9th edn, Mosby Elsevier, St Louis, Missouri.

National Disability Services 2018, *State of the Disability Sector Report 2018*, National Disability Services, Canberra.

Productivity Commission 2017, *Introducing Competition and Informed User Choice into Human Services: Reforms to Human Services*, Report No. 85, Canberra.

Prosser, B 2018, *Any shift to outcomes based funding for social services must proceed in partnership*, Catholic Social Services Australia, ACT, accessed on 26 November at <http://www.cssa.org.au/policy-and-publications/research/article/?id=any-shift-to-outcomes-based-funding-for-social-services-must-proceed-in-partnership>.

Seivwright, A, Flatau, P, Adams, S & Stokes, C 2016, The future of outcomes measurement in the community sector, *Bankwest Foundation Social Impact Series, No. 6*, Bankwest Foundation, Western Australia, accessed on 14 November 2018 at <https://www.csi.edu.au/media/uploads/Social_Impact_Series_6.pdf>.

Social Ventures Australia 2016, *Managing to Outcomes – A guide to developing an outcomes focus*, Social Ventures Australia, Sydney, accessed on 15 November 2018 at <https://www.socialventures.com.au/assets/SVA-Outcomes-Management-Guide.pdf>.
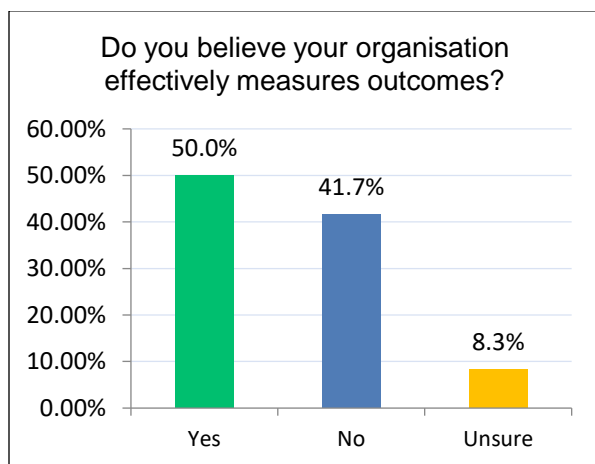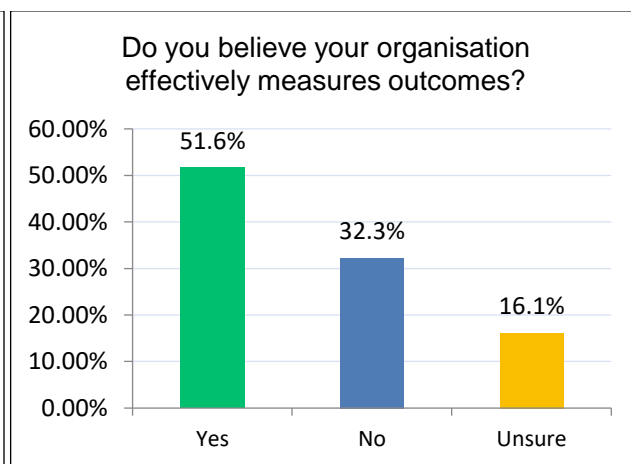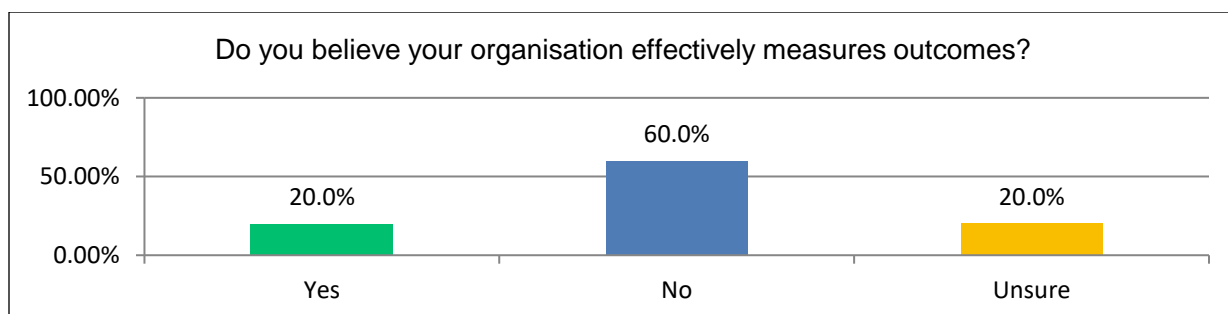
Appendix

APPENDIX A

Executive/CEO level

Do you believe your organisation effectively measures outcomes?
- Yes: 43%
- No: 57%
- Unsure: 0%

Senior Manager level

Do you believe your organisation effectively measures outcomes?
- Yes: 53.3%
- No: 46.7%
- Unsure: 0.0%

Team Leader/Manager level

Do you believe your organisation effectively measures outcomes?
- Yes: 50.0%
- No: 41.7%
- Unsure: 8.3%

Frontline Worker Level

Do you believe your organisation effectively measures outcomes?
- Yes: 51.6%
- No: 32.3%
- Unsure: 16.1%

Governance/quality and safety/research/policy

Do you believe your organisation effectively measures outcomes?
- Yes: 20.0%
- No: 60.0%
- Unsure: 20.0%

APPENDIX B

Executive/CEO/General Manager
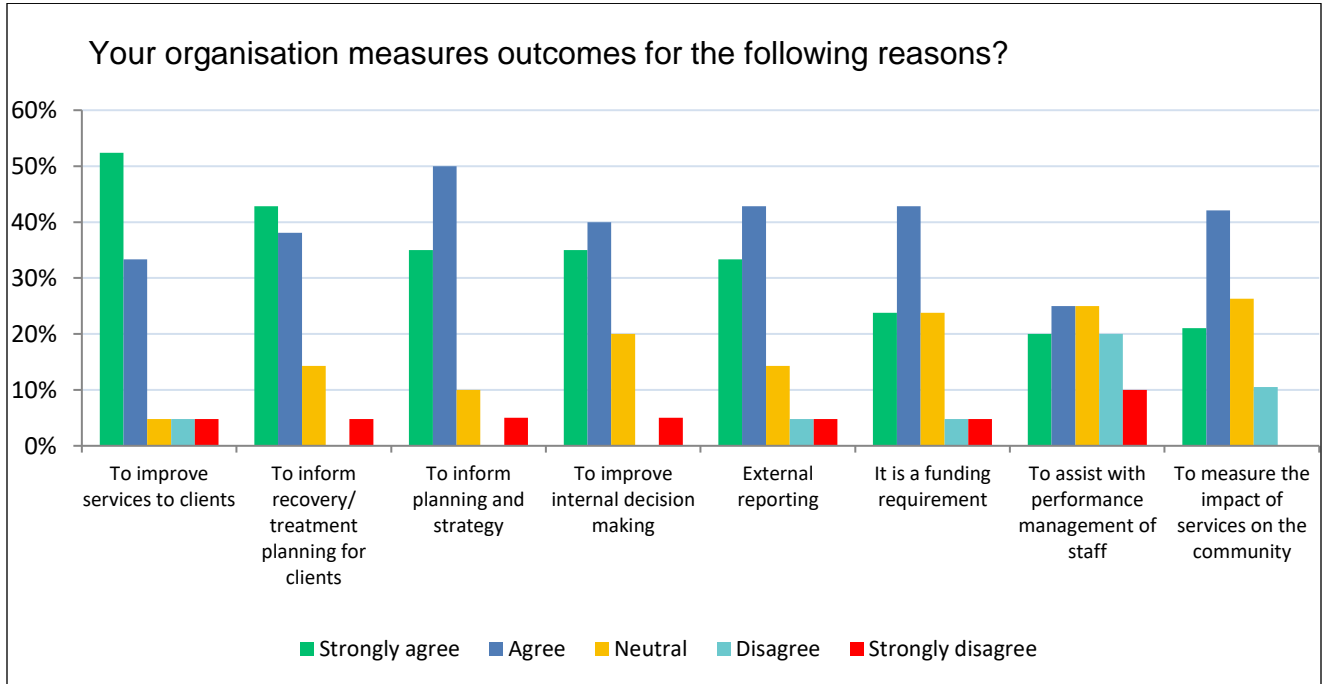
Your organisation measures outcomes for the following reasons?

Senior Manager

Your organisation measures outcomes for the following reasons?
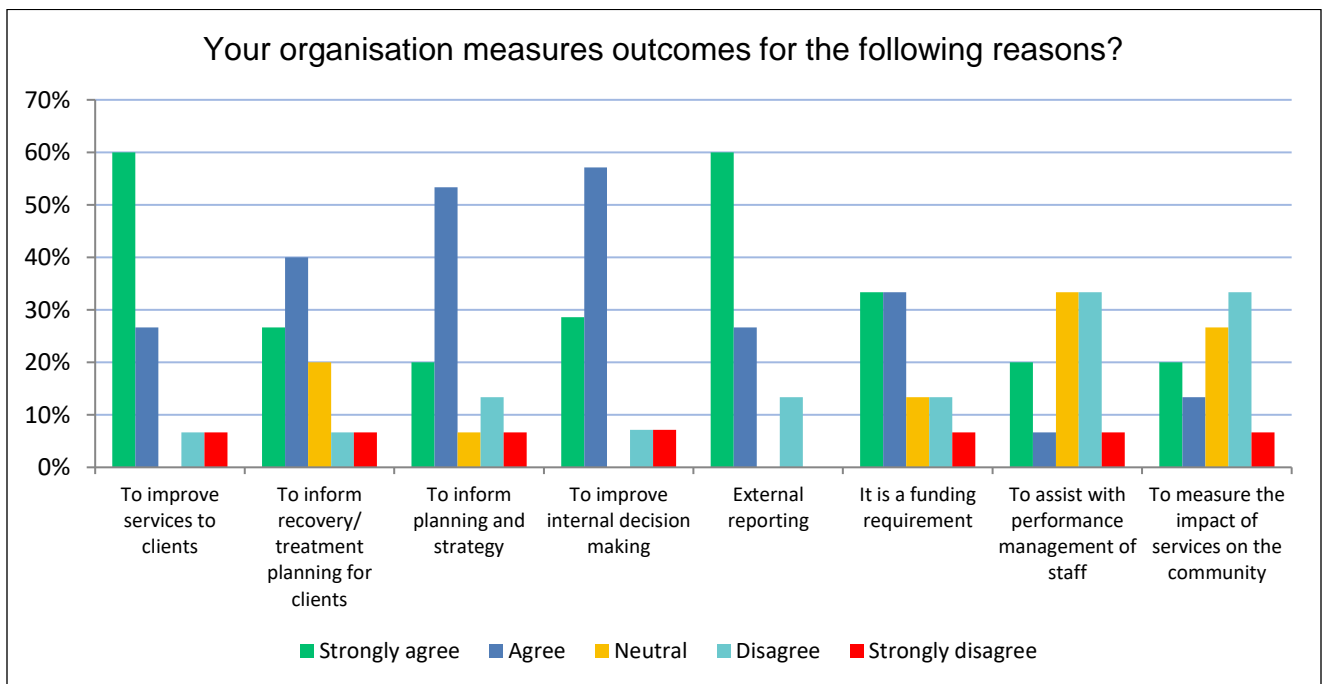
Team leader/manager
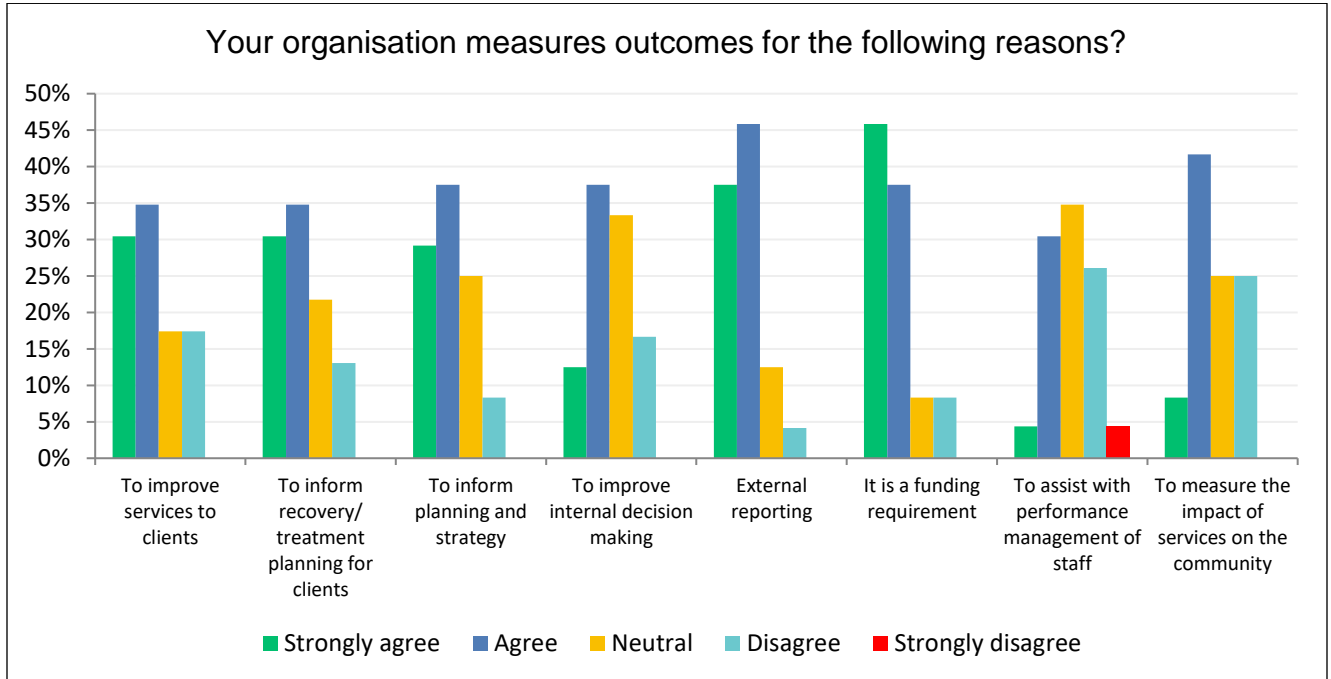
Frontline (direct clients, service provision)

APPENDIX C

What is the biggest barrier to the effective implementation of outcomes measurement at your organisation? (net rating, agree vs disagree)

Legend:
- Lack of funding and resources to implement measures
- Lack of established methodology or tools
- Lack of support from senior management and above
- Diversity in clients and services provided
- Getting buy in from all the staff
- Getting participation from the clients receiving services
- Access to aggregated data

APPENDIX D

What are the biggest challenges to the mental health sector in effectively implementing outcomes measurement? **Red** indicates a net rating below the overall average across all staff profiles and **green** indicates net rating above the average.

Net rating (approval versus disapproval)	Overall	Executive CEO	Senior manager	Team leader	Frontline	Governance
Lack of funding and access to resources to implement this approach	**67.4%**	**85.7%**	**73.3%**	**54.2%**	**56.7%**	**80.0%**
Lack of established methodology or tool for measuring this approach	**53.5%**	**61.9%**	**60.0%**	**54.2%**	**48.3%**	**30.0%**
Pressure on organisations to deliver outcomes in the short-term when real change requires a long-term approach	**82.4%**	**90.5%**	**93.3%**	**75.0%**	**70.0%**	**100.0%**
Organisations not wanting to report negative outcomes for fear of losing funding	**32.4%**	**19.1%**	**0.0%**	**37.5%**	**40.0%**	**60.0%**
Getting buy in from smaller organisations with more constrained resources	**42.6%**	**33.3%**	**46.7%**	**33.3%**	**48.3%**	**50.0%**
Staff engagement and lack of understanding	**26.5%**	**0.0%**	**46.7%**	**50.0%**	**6.7%**	**40.0%**

APPENDIX E

What recommendations would you make to improve outcomes measurement across the sector? Responses have been ranked from top to bottom, with individual rankings across each staffing profile.

RANKING	Overall	Executive CEO	Senior manager	Team leader	Frontline	Governance
Providing full funding of outcomes measures in contracts	1	2	1	1	7	1
Having standard/consistent language and concepts	2	6	3	2	1	5
Eliminating differences in reporting between funding bodies	3	3	6	3	9	4
Better infrastructure for data collection and reporting	4	1	2	6	8	6
Identifying and sharing industry best practice	5	5	4	5	2	8
Better guidance on using tools and methods	6	7	5	7	3	7
Identification of client/consumer outcomes in funding contracts	7	9	7	4	6	3
Making outcomes measurement an external reporting requirement	8	10	8	8	5	2
Providing open data across government	9	4	9	10	4	9
Delivering collaborative projects with shared outcomes	10	8	10	9	10	10