



My Choice Matters Evaluation – Fieldwork Report Stage 3

Never Stand Still

Arts & Social Sciences

Social Policy Research Centre



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SPRC
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Glossary

ADHC	NSW Department of Family and Community Services, Ageing, Disability and Home Care
BAL	Become a Leader
CALD	Culturally and linguistically diverse (background)
GMS	Get More Skills
MCM	My Choice Matters
NDIS	National Disability Insurance Scheme
NSW CID	New South Wales Council for Intellectual Disability
SHS	sight-hearing-speech (disability)
SPRC	Social Policy Research Centre

Executive summary

My Choice Matters (MCM) is a capacity building program, including workshops, grants, projects, leadership programs and more, for people with disability and their families in NSW. The program is being evaluated in four stages by the Social Policy Research Centre at UNSW Australia. This report relates to the third stage of the evaluation.

The purpose of this stage of the evaluation of MCM is to examine internal processes, procedures and governance of the MCM program organisers to gauge their effectiveness, as well as look at how the program benefits may be maintained after the program finishes.

Stage 3 of the evaluation focuses on staff, governance, structure; sustainability of the program – how will the benefits continue after June 2016; and how MCM identifies and achieves its learning outcomes. This is intended to assist the legacy process.

This part of the evaluation is based on interviews with key personnel involved in delivering the MCM program, as well as a staff workshop. This report presents the findings of this stage of the research, identifies what is working well, and makes recommendations for how to improve capacity building programs for people with disability, their families and carers. The report also identifies key steps for the fourth and final stage of the evaluation.

1 Introduction

My Choice Matters is a capacity building initiative of the NSW Council for Intellectual Disability (NSW CID), funded by the NSW Department of Family and Community Services, Ageing, Disability and Home Care (ADHC). The MCM program coincides with the launch and promotion of the National Disability Insurance Scheme (NDIS).

MCM aims to support people with disability and their families to increase their skills, knowledge and confidence in making choices and taking control over their lives. It has a particular focus on supporting people's transition to self-directed supports and individualised budgets. It funds initiatives to build the capacity of people with disability and their families through development activities and to support people to run their own projects.

MCM has application for all people with disability currently receiving formal support as well as those people who are looking for formal or informal support. The program is targeting people with disability aged 0–65 years and their carers across all demographic groups. MCM is committed to engaging with people from Indigenous or culturally and linguistically diverse backgrounds, and this is being achieved by sharing information and resources, and working in partnership with specific organisations and individuals with expertise and experience in these areas.

MCM is one of a series of programs funded by the NSW Government to deliver capacity building for people with disability in NSW. The MCM team recognises the potential overlap and is targeting their sessions so as not to duplicate or clash with the programs of other providers.

The Social Policy Research Centre (SPRC) at UNSW Australia has been tasked to evaluate the MCM program. The evaluation is being conducted in four stages:

- Stage 1 (complete) examines program reach, in particular whether the program reaches people with disability, as well as program quality and effectiveness. This was informed by observations, interviews and an online survey.
- Stage 2 (complete) examines how well MCM is working, in particular whether it meets people's needs and what changes people have made as a result, as well as program quality and effectiveness. This is informed by observations, interviews and an online survey.
- Stage 3 (this report) examines internal processes, procedures and governance to gauge their effectiveness, as well as looks at how the program benefits may be maintained after the program finishes.
- Stage 4 will examine program use over time, program quality and effectiveness, and will consider what can be learned and used in other programs.

2 Methodology

This stage used a mix of workshops and one to one interviews to answer the key research questions. A summary of the data sources are provided in Table 1.

Table 1: Summary of data sources

Data source	Number of people interviewed
Staff workshop	6
Individual interviews with MCM staff, presenters and ADHC staff members	11
NSW CID board member	1
Total number of people interviewed	14
Written material, website, Facebook	All

Note: Some workshop participants were also interviewed individually so have not been double counted.

The researchers conducted a workshop with MCM staff and conducted 11 additional interviews with MCM and ADHC staff and MCM presenters involved across the range of MCM activities and supporting activities.

The specific research questions for this stage of the evaluation were to understand:

- what is required of an organisation to deliver this program successfully
- how the program has changed over time in response to needs of the community
- whether the program has achieved it's aims
- what have been the program's main successes
- what have been the constraints or issues arising relating to the delivery of the program
- how the program identifies learning outcomes
- what people have changed in their lives as a result of MCM.

The report and analysis does not differentiate between the different elements of the MCM program unless specified. The MCM staff interviewed were limited to those still working for the program – as the program draws to a close, many staff will be leaving and it is critical to capture their learnings prior to departure.

3 Roles and responsibilities of staff

The MCM program has grown significantly both in terms of duration and reach since its inception and has delivered a large number of workshops. Throughout the evaluation, the team has noted the diversity of staff involved in delivering the program as well as changes of roles and responsibilities for many staff members. As it is still unclear whether MCM will receive funding beyond June 2016, we examine the elements that have allowed the team to function effectively and to deliver a large number of diverse programs. The evaluation team also examined areas such as continuous improvement over the life of the program, regular reviews, sustainable support and funding arrangements, and staff development. This will assist the legacy process, attempting to keep the program's lessons and resources available after the program itself concludes, and provide potential guidance to similar programs.

3.1 Roles of interviewees

The researchers spoke to a range of MCM staff members, including staff at the head office and other staff (sub-contractors) who facilitated or spoke at workshops, as well as two ADHC staff members. Most of the head office staff were able to attend the evaluation workshop held at the MCM offices in December 2015.

Staff explained the nature of their roles and the part they played in administering MCM. Roles include administration, such as workshop and event management and data analysis; communications; and more senior management roles who were responsible for setting up and developing MCM, planning and coordinating workshops, taking responsibility for evaluation requirements, and reporting on the program's progress to the Advisory Group and funding agency. The researchers also spoke to workshop facilitators, guest speakers and employees of ADHC who were involved in the oversight of MCM.

A senior staff member commented that the management team had tried to employ people with a human rights background – but not necessarily those from the disability sector – who understand the person-centric concepts upon which MCM is based.

3.2 Changes over the life of the program

Staff noted that MCM has changed significantly since its inception. It was originally intended to be a 2-year program, beginning in 2013, but the timeframe was subsequently extended until 2016. This resulted in a modification to the strategic goals of the program as MCM became significantly broader in scope than it was first designed to be. In particular, the program has become larger, administering a

greater number of workshops and grants than was originally planned. Community engagement has increased in response to identified needs, gaps have been identified and targeted, and the range and depth of program resources has expanded. This has also enabled the program to become more responsive to the needs of the target audience, especially through being able to provide additional support to Run Projects applicants and workshop participants.

I feel like it's expanded to include a lot more people, which is really important, really positive. A lot more people with disabilities, a lot more families.

Recruitment and outreach methods have also been modified over the course of the program. Some of this modification has been due to MCM staff identifying under-targeted communities, such as culturally and linguistically diverse (CALD) or regional groups, and people with specific disability types, such as those with an intellectual disability.

Going to small towns has made a huge difference for people.

Refining and improving overall communications techniques (as discussed below), and greater resourcing have expanded community reach and program capacity. Having said this, staff members commented on the fact that the demand for information was still great despite their efforts to reach as broad an audience as possible.

Most of the staff roles have also adapted and changed over the life of the program as the program itself has developed, sometimes detrimentally due to unmanageable workloads. In the area of communications, the newsletter was enhanced and a greater emphasis was placed on the program's Facebook page, significantly growing the number of Facebook group members and promoting community discussion, interaction and reflection.

That has been quite powerful for people to self-reflect, for someone to see their journey as important, to see the changes they've made. That gives people a lot of confidence too and encourages them to share with other people. [MCM has] given people a voice about their life and experience that they didn't have before.

The administration role has also expanded over the life of the program. As a result, the Administration Officer took on extra responsibilities, such as providing Run Projects support, event and workshop management and administration, resource management, and expanded data collection analysis. At times, the Administration Officer required extra assistance from an Events Officer to help plan and coordinate workshops. Another staff member also mentioned that they felt that their role was "probably more work that can be done by one full time staff member".

The role of the Run Projects coordinator also expanded significantly over the course of the program as the program itself grew and demand for funding increased. The Run Projects team itself expanded to accommodate this growth to include additional

staff members. As a consequence, the Run Projects coordinator's role changed from primarily a support role to also including staff supervision duties.

3.3 Program successes

Interviewees were asked if they thought that MCM had achieved its aims, and to discuss its main successes. Staff members who were familiar with the program's formal objectives felt that its aims had been achieved, especially in terms of building capacity and developing skills, providing information, and raising community awareness.

The main successes of the program were felt to be the connections formed with and assistance provided to program clients by staff members, helping to change individuals' attitudes, and the strength of the program resources.

Staff members commented that they were encouraged to spend as much time as necessary with clients and their family members, and were well-versed in how to assist clients with what they needed, whether that was in the form of advice or resources, or referring them to more appropriate external services. This had the effect of building trust with the clients, who felt empowered to be open about their needs and wants.

People feel listened to and think they've been heard which helps them fight their fears and they can express what they want.

One of the most important things we did to help the community get the most of individualised funding and getting more voice, choice and control was to really hear them; giving positive contact with somebody to make things clearer, simpler, and giving them the tools and programs to equip them to capacity build and develop more choice, voice and control.

The NSW CID board member agreed that the MCM staff were highly approachable and made great efforts to listen to and respect clients, noting specifically that they don't rush clients, allowing them to take their time. Staff also ensure confidentiality to further build trust with clients.

The staff are user friendly and clearly interested in people.

Interviewees also mentioned the success that MCM had had in preparing people for change, and "changing their attitudes towards change", which was often achieved by removing the fear that these people felt towards change.

You cannot move forward in the conversation until you remove fear. People need to truly believe they have the right to be in control of their future. People now may be more ready for the 'planning' conversation because that concept has become more mainstream.

MCM resources and workshops provided participants with the opportunities, motivation and information that, in many cases, led to a measurable impact on these individuals' lives.

What was critical for me was making leadership possible and accessible for people with disability, and help them to think that they can exercise leadership in their lives, no matter how small. And that they can effect change in the community.

Interview participants also commented positively on the effectiveness of MCM materials and resources, in terms of their depth and range, their content, and their accessibility.

3.4 Program challenges

MCM staff members told the researchers that the downside of allocating so much time to client and community needs, especially in a reactive sense, is that it can potentially draw staff away from other tasks and duties. So while the MCM team have prided themselves on “being everything to everyone”, it has sometimes been to the detriment of other areas of work, and can lead to stress for staff members.

Being everything for everyone is great, but it means you are waylaid a lot of the time in reacting to people's needs and taking you away from your “primary role” or core work. And this is why we've had to all become experts in everything to some degree. We're expected to help to assist people.

Run Projects was a success because of the amount of time we were able to spend with people; as much as we tried to create tools and resources to make that process more efficient, there was no substitute for that direct contact. And its successes and failures both stem from that.

It can take 30 minutes to deal with them when you're in the middle of something else. So your plans for the day can go out the window. So that can be a big frustration.

We operate 40% reactively in response to community needs and 60% in a strategically planned way, which is not always good, especially because a lot of people don't work well in that unplanned way. For example, if a community asks for a workshop in two weeks we have to just plan it and do it.

[MCM is] a bit too fly-by-the-seat-of-your-pants. Less so now, but when I started, there was less consideration of planning things when a new idea came up, in favour of just doing them. There needed to be a bit more of a bigger picture view so time and energy aren't wasted from doing that kind of thing a little too much. When we did get additional staff there was no need to do that as much but [staff] kept doing it unnecessarily.

One staff member felt that as time went by, MCM staff became more effective as they spent less time attempting to individually assist every client and instead tried to

channel them into the MCM program elements, resources, or other services that would be most helpful to them in the long term.

In some cases, service providers acting as “gatekeepers” had inhibited MCM staff member’s access to clients or potential clients, especially when they tried to recruit certain individuals or communities for workshops.

It’s been hard to get through gatekeepers who think MCM isn’t for “their guys”.

In other cases, the service providers have misunderstood the purpose of the workshop or the type of individuals for whom the workshop would be best suited, especially in the case of BAL.

Service providers at the start would get a group of their consumers and would help them apply, but it might not necessarily have come from the person themselves, so some people may not have had that individual motivation. So we have had to tell service providers what the aim is and have had to brief them better to get their buy in.

Some interview participants mentioned that internal staff recruitment had been difficult. This was due to the need to recruit staff quickly, and to the difficulty of finding people with the right skills for particular roles.

We were very, very pressured to get it off the ground; we were rushed and could have had more time. The other problem was the skills required to deliver the program successfully – skills, vision, rights-based philosophy. It was very difficult to recruit the right people – starting from the top people and the others too. I actually saw how difficult it has been to get the right people, and the frustration that there’s no one out there. It’s a precious opportunity, and we don’t want to stuff it up by recruiting the wrong people. There were people recruited who weren’t right for the role, and they were setbacks.

I would have looked at the way they employ people. The staff are great, but when you’re trying to get a message across, especially to people who are already a bit nervous, you’ve got to have people who really know what they are talking about. The [staff] could have been a bit more skilled up.

One solution to these issues was to “purchase” certain skills or resources, for example to buy resources that had been developed by outside parties or to employ individuals who could hit the ground running.

The [facilitator] that we purchased provided a fantastic start to the program. [They] did the strategic plan for the program, and so for the beginning we knew we needed to invest in various elements of the program – invest in skills, workshops in various lengths to meet people’s needs, develop workshops, share stories to increase impact of the program. The plan was a very holistic approach to community development.

Several interview participants noted the government’s poor promotion and communication of MCM and its goals.

The government wasn't providing accessible, useful and available info. NSW was committed to individualised funding but didn't have the requisite information dissemination.

The government had a lack of desire to promote us and explain our purpose, even to ADHC staff. A lot of people in government don't know we exist. Despite all of the relationships we built, we still could've built more and thereby reached more people.

ADHC has guidelines on what sort of language we can use, for example, we can't use the term "NDIS" on flyers, newsletters and official output.

Government has not chosen to invest in this is a social change or a policy way, they've chose to invest by simply giving us money; so their involvement in the project has been null and void as far as being useful.

Two MCM staff members said that MCM had "missed the mark" by not being able to recruit sufficient numbers of people with intellectual disability for the BAL courses. They put this failure down to ineffective engagement and outreach to that community, the difficulty and lack of accessibility of the BAL application process, and the lack of a full-time manager for BAL.

And finally, one interviewee felt that MCM hadn't reached CALD communities as effectively as it might have.

There needs to be targeted capacity building efforts for people from CALD backgrounds. MCM has done reasonably well in terms of reaching out to specific CALD communities but it's nowhere near enough given the level of disadvantage and complexity. The more we work with people the more we realise the extent of the need, including a huge gap left by government who refuse to recognise the specific needs of people from CALD backgrounds who make up 25% of people with disability.

4 Current and future governance

MCM's governance has evolved over the life of the program, especially in the wake of the conclusion of the Advisory Group. The researchers examined the nature of this evolution as it pertains to governance processes and roles in order to ascertain the overall effectiveness of the program's governance.

4.1 Governance

Most interview participants were unable to comment on the governance of the program because they were not involved in that aspect of MCM or were unsure about the governance structure. For example, one staff member commented that she wasn't sure what the difference was between the Board and the Advisory Group.

Comments from MCM staff members who were familiar with the governance structure suggested that it had been working soundly, with all staff reporting to the Project Manager, who reports to the Board. There had originally been an Advisory Group too which had driven a lot of the decision making around, for example, how better to engage with under-targeted communities. This Group was disbanded after its key aim of shaping the initial design of the MCM program had been substantially achieved. One staff member described the Group as "fantastically useful" in the initial set up of the program, which had proven to be particularly challenging. This staff member also said that it had been unfortunate that they couldn't find a use for the Group beyond this stage; although individual Group members have continued to provide guidance to the program.

One staff member commented that having the chair of NSW CID also chair the MCM Board Meetings has been a strength because it has helped MCM staff to better understand the needs of people with intellectual disability.

The NSW CID board member noted that MCM progress reports were regularly delivered to the NSW CID board and that this process was effective and allowed the CID board to keep up to date with MCM activities and progress.

One staff member found that governance had not been effective in the initial stages of the program due to NSW CID going through staff changes, and because the Board and Advisory Group had not been given adequate direction in how to utilise the program funding .

An ADHC staff member commented that ADHC had intentionally kept an arm's length from the MCM Board in order to allow the Board to carry out the day to day management of the program.

5 Identifying and sustaining program outcomes

5.1 Identification of learning outcomes

The main method that MCM staff have used to identify and achieve learning outcomes for participants is workshop feedback forms and the formal evaluation process, and for the staff and program itself, the formal evaluation process. The workshop feedback forms were seen as highly effective, with MCM staff attributing this to the ease of use and accessibility of the forms.

Additionally, MCM staff have a set of supervision structures in place, including fortnightly staff meetings, regular meetings between the Project Manager and, formerly the Acting Executive Director of Operations and currently the CEO of NSWCID, and internal feedback and complaints systems. There are also regular reviews of participation targets and strategic goals, and debrief sessions for BAL, RP and GMS workshops. Finally, MCM staff have compiled “good news stories” and feedback from all program elements to inform summary reports designed for marketing purposes and community feedback.

5.2 Program legacy

Interview participants felt that MCM’s resources would provide the most lasting, useful legacy for the community after MCM winds up in June 2016.

The resources are the legacy when the project itself can’t go on.

Staff and stakeholders said that the website and online resources, including My Learning Matters and BAL online, would be the most useful legacy resources due to the ease with which online resources can be stored and maintained, and the searchability and accessibility of those resources. Online forums and communities also hold the potential to sustain the MCM community and resources. The MCM website hosts a portal for graduates of the BAL program, and there are multiple Facebook groups associated with the program.

MCM staff mentioned that they had redesigned the MCM website specifically to “create longevity and to highlight things that will have longevity, for example stories and resources”. They also aimed to make the content not “system-specific” so that it will remain broadly relevant to the target audience. Staff have also investigated using alternative government hosts for the online material such as NSW CID, ADHC, and the Department of Education.

Additionally, interview participants highlighted the value of MCM's hard copy resources for sustaining the legacy of the program, particularly the program workbooks and NDIS Frequently Asked Questions. Training materials were also seen as particularly useful.

I'm hoping there might an opportunity for the training package to be purchased and used by other bodies, and there might a resource to continue to run it.

The main concern of MCM staff with regard to the legacy of the program was that they will no longer be able to assist people in person. In the meantime they have tried to direct people to the website and existing resources as much as possible.

It's so hard to know how to help these people after June [when the program finishes].

Some interviewees also commented on the self-sustainability of the community and the importance of the community in maintaining the program's legacy:

The community sustains itself in some ways as the more people we upskill and help build capacity, the more it is self-perpetuating, especially younger people.

5.3 Other comments

Staff members were asked if they had any general comments about the MCM program. Most of these interviewees stated that they felt that the effect of the program on people's lives had been profound, and that it was a much needed service for the community. However, one interviewee pointed out that despite these successes, there was still a lot of work to be done to provide information to the community and prepare people for the NDIS, especially within the CALD and Indigenous communities.

Another interviewee commented on the strength of the co-design aspect to the program, especially by including people with disabilities on the Advisory Group, and in the development of the My Leadership Matters training package. The NSW CID board member also noted that MCM staff had regularly sought input from NSW CID board members with disabilities.

One staff member thought that MCM could continue to exist by pursuing funding opportunities from other sources, including from the NDIS itself.

6 Summary

This is a formative evaluation in that the role of the evaluation team is also to help identify improvements in the process of delivering My Choice Matters to the target audience.

MCM evolved significantly over time due to the expansion on the program's scope and resources, and adjustments that resulted from feedback and community need. Staff both drove and were required to adapt to this change, and additional staff members were employed to help cope with greater demand.

The main successes of the program have been building capacity and developing skills of the target audience, as well as providing information and raising community awareness. This has primarily been achieved through devoting significant resources to community engagement and support.

However, devoting such a large amount of time to community engagement, especially through individually assisting clients, has sometimes been to the detriment of other areas of the program. Additionally, MCM staff members felt that, at times, communication issues with external service providers and government have made it difficult to reach the target audience.

Interview participants generally felt that the program's governance had been effective and had worked as it should.

MCM staff felt that the program's resources, particularly its online resources, would provide the most useful repository of program information after the program itself ceases to continue, especially in the absence of the ability to provide personal support to the community through one on one contact.

7 Final Stage

7.1 Methodology

At this stage, the MCM program is expected to end in June 2016. Stage 4 will include several elements, with a particular focus on specific program elements such as BAL and Run Projects. The planned tasks are:

- a statistical analysis of program data on the use of MCM examining whether people maintained engagement with the program, which elements they used, and their feedback from engagement
- a qualitative analysis of long term outcomes for people using the MCM program – follow-up interviews, if possible, with people interviewed in Stage 1 of the evaluation
- a survey following up many of the questions examined in Stage 2, in particular why people participated and what people did after participating in MCM, as well as new lines of inquiry specific to Run Projects and Become a Leader.
- an audit of client contact with MCM staff members to ascertain who contacts MCM, the nature of their contact, and the outcome of the contact. This task has been initiated in response to staff feedback in relation to client contact.
- cost effectiveness analysis.

7.2 Timing

Task	Timing
Survey	
Launch survey	Mid April to Mid May
Analyse survey data	End May for June report and triangulation with quant and qual data
Program data	
Review program data collected	Feb-March
Analysis plan	April
Final program data provided by MCM	Early May
Analysis of program data	End May for June report
Data for BAL/RP	
Review program data collected	Feb-March
Analysis plan	March
Analysis	March-April
Interviews	
Client and stakeholder interviews	April-May
FINAL REPORT	June