Whole of sector Outcomes Measurement Framework

Project update to SCF: March 2019

Kylie Hansen, Senior Consultant, WACOSS Sarah Norton, Director, DPC

What is an outcomes measurement framework?

- It houses, orders and 'nests' outcomes at different levels/contexts
 - Short, medium, long term
 - Population, service/organisational, individual
- Ideally provides the tools, materials, definitions and all the things required to measure outcomes

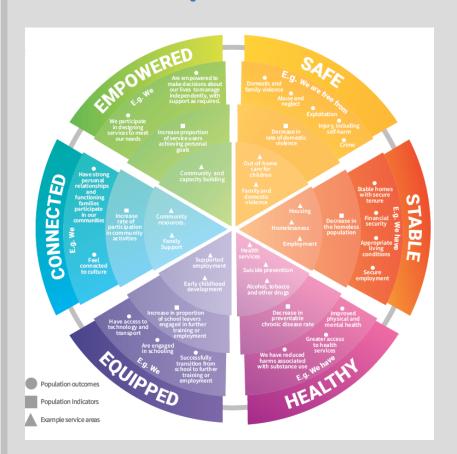
Election commitment

- Deliver an agreed-upon framework to measure outcomes across the community services sector; [and govt]
- Ensure the framework gives government a clear picture of the effectiveness of its funding, leading to improved funding decisions; [and internal services]
- Ensure the framework assists ...organisations in providing more targeted, flexible and innovative services as well as finding new opportunities to cooperate, including providing improved access to non-sensitive data from government for improved service design.

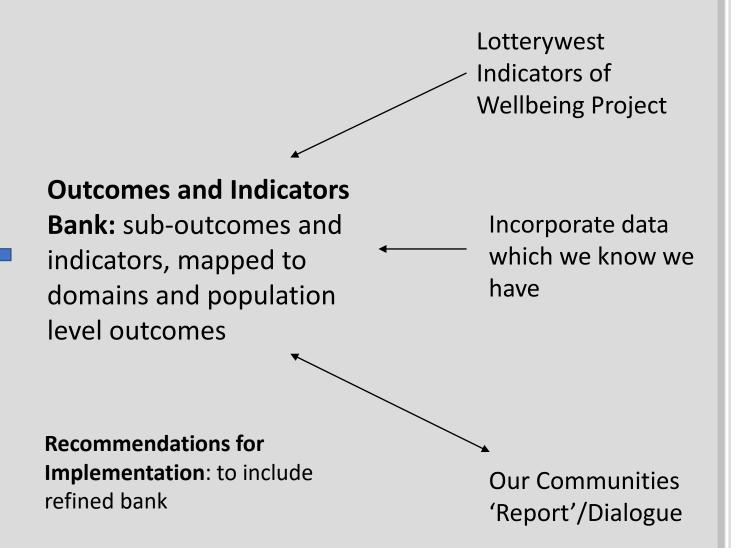
Engagement

- 95 projected total opportunities to socialise the Framework and receive feedback
- 869 people reached through these opportunities (approx., conservative)
- 7 focussed workshop consultations, including 2 x regional opportunities
- 11/15 DLGs briefed (projected)
- More than 20 Frameworks shared with us to 'map in' and draw from
- **50+ pages** of collated feedback to date
- Connection with local government
- Positive links: adopted by orgs; Depts working to it; Our Communities; Indicators of Wellbeing

Final product



Illustrative FW: highlights population level outcomes



Domain/Dept	Department of Health
	o <u>Possible measure:</u> Rates of hospitalisations for domestic violence incidents. Source: Epidemiology – possible data source Hospital Morbidity Data.
Safe	o Possible measure: Suicide rates, cause of death indicators. Source: Epidemiology – possible data source WA Department of Health Data Linkage Branch mortality data sets, there is a time lag on the data set, last set of data is from 2016 and is preliminary.
	o <u>Possible measure:</u> Suicide thoughts over past 12 months, 16 years and over. Source: Health and Wellbeing Surveillance System (HWSS) – reported annually.
	o Possible measure: Prevalence of injuries and falls in the past 12 months, 16 years and over (broken down by any injury and specific falls-related injury). Source: HWSS - reported annually.
	∘ <u>Performance indicator:</u> Percentage of admitted Aboriginal and non-Aboriginal patients who are discharged against medical advice (DAMA). Source: Health Service Performance Report (HSPR) - reported monthly, target 0.77%.
	Supporting indicator: Patient satisfaction with hospital services (broken down into adult inpatients, adult emergency departments patients and paediatric patients). Source: HSPR - reported annually (financial year), target >80% satisfaction.
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Key feedback incorporated in Prototype 4

- Our Priorities (*)
- Terminological change: 'sub-outcomes'
- Plain words say what you mean
- Aboriginal frameworks + disability frameworks
- Support for Sustainability elements (built and natural environment) → debate around where/how it sits
- Tenses: consistency across population level outcomes ('we'); but mix of first and third person across sub-outcomes and indicators
- Illustrative FW needs to include examples across lifecycle and diversity of experiences
- Shift in conceptualisation Equipped > Empowered / Maslow's Hierarchy. Addressed scope issues somewhat.

Key questions/themes

- What are the **values and principles** that underpin the FW and support the interpretation of it?
 - Person-centred
 - Strengths based
 - ...?
 - Note: consider alignment with DCSP values
- Looking to the future, what would this look like incorporated within your world (dept, sector, org?)

