

**Measuring outcomes in family support:
Practitioners' Guide**

Family worker research: Tools 5 and 6



Family Support Services
Association of NSW
www.fssansw.asn.au



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Contents

- 3 Introduction
- 7 Contact details and feedback form
- 9 Overview of Tools 5 and 6
- 11 Tool 5 Snapshot of Life (long version)
 - This can be used early in service delivery, later in service delivery and on completion.
- 21 Tool 6 Service facts and figures (Long version)
 - This is data gathered about the client (eg age, gender, type of family) and services provided (eg amount and frequency of service).

These tools are part of the *Measuring outcome in family support: Practitioners' Guide*. See the web site for further details www.mapl.com.au/support/FSSA/ .

Introduction

Measuring outcomes in family support involves families, workers, services, peak organisations, universities and government.

The following tools may be useful to family support services. There are many other tools required for other players.

Family support services are diverse. There is no one set of tools that all family support services can use and adopt.

These tools have been developed on the basis that they will be used and modified by individual family support services to meet their needs.

The tools

There are four tools that can be **used in family support services in the service delivery process** and modified as required:

Tool 1 Snapshot of Life - Client's picture

This can be used early in service delivery, later in service delivery and on completion.

Tool 2 Snapshot of life - Worker's picture

This can be used early in service delivery, later in service delivery and on completion.

Tool 3 Goals - joint client and worker picture

This can be used jointly by the client and the worker during service delivery

Tool 4 Service facts and figures

This is data gathered about the client (eg age, gender, type of family) and services provided (eg amount and frequency of service).

These four tools are available in a separate document *Family Workers: Tools 1 to 4*.

These tools help paint a picture of the client's situation, the services provided and the changes taking place in the client and their situation over time.

They can be used with individual clients. The results can also be collated and analysed to review groups of clients, eg, all the clients in a family support service.

There are two tools that are longer versions of the material in Tools 1 to 4. They are more likely to be **used in research projects or in services that have a research focus:**

Tool 5 Snapshot of life (Long Version)

Tool 6 Service facts and figures (Long Version)

Tools 5 and 6 are included in this document.

Introduction

Tool 7 includes topic tools which can be **used to explore specific topics in service delivery or research:**

Tool 7:

- Topic 1 - Social capital
- Topic 2 - Life's practicalities
- Topic 3 - Life experiences and outlook
- Topic 4 - Feelings about parenting
- Topic 5 - Relationship with spouse
- Topic 6 - Storybook reading
- Topic 7 - Children
- Topic 8 - Practical parenting
- Topic 9 - Building strengths
- Topic 10 - Significant life events
- Topic 11 - Stress
- Topic 12 - Participation in community organisations
- Topic 13 - Information
- Topic 14 - Beliefs about others
- Topic 15 - Young person's experience (12 year old or older)
- Topic 16 - Groups
- Topic 17 - Family worker services

Topics within Tool 7 can be used in a service that wishes to explore a particular topic with a group of clients.

Tool 7 is available in a separate document *Family Workers Exploring Topics: Tool 7*.

Goals for the tools

The tools are intended to be useful to:

- Family support workers working with families
- Services (to gain an overview of outcomes from their services)
- The Family Support Services Association of NSW and its members in describing what they achieve (including reporting to funding bodies)
- The Family Support Services Association of NSW and its members in researching practice issues
- Other human service organisations.

The tools have been developed with the following principles in mind:

- The tools will be holistic tools, ie tools which focus on changes in the 'whole of life' rather than specific outcomes related to each intervention.
- The tool will be designed to monitor changes in individual clients and their circumstances - the point of comparison will be the client not a population standard.

Introduction

- The data from using the tool will also be able to show changes in groups of clients, eg clients participating in a new service model.
- The clients should be involved in using the tools and reflecting in the information gathered.

Development of the tools

The tools are in the process of development. The tools in this document are Version 1. They have been through a research and piloting process.

Further research will be undertaken.

The Tools are for use with clients who are receiving services for periods longer than 8 weeks. Once these tools have been further developed other tools may be developed for short term interventions.

Using the tools

The tools will require modification to suit local services. Local services may find parts or all of the tools useful.

To use the tools appropriately requires an understanding of family support, an understanding of evaluation and an understanding of all the practical paradoxes and dilemmas associated with measuring outcomes. See the *Measuring outcomes in family support: Practitioners' Guide* for details www.mapl.com.au/support/FSSA/.

The tools in this document may be freely used by non-profit human service organisations for use in improving the quality of their services.

Commercial use is not permitted without written permission from both Paul Bullen and the NSW Family Support Services Association. Contact Paul Bullen for further details (paul.bullen@mapl.com.au).

Data collation, analysis and reporting

The tools can be used in relation to individual clients or groups of clients.

For individual clients comparisons can be made between a clients and workers answers early in the service process and on completion.

For groups of clients data will need to be collated and analysed and a report prepared.

Ideally the data from each of the tools needs to be linked together so that is possible for example to analyse the Snapshot of life data in Tools 1 and 2 in relation to the goals in Tool 3 and service usage data in Tool 4. To do this each tool will require the name of the client of a unique client number.

Examples of data analysis and reporting will be included in the June 2004 update to the site.

Introduction

Limitations

These tools are in English, using them requires sufficient literacy skills. Many clients don't speak English as their first language. Many clients have minimal literacy skills.

The tools should only be used in appropriate circumstances, eg, where people have good English skills and sufficient literacy skills.

Developing the Practitioner's guide

This guide and the tools were developed by Paul Bullen in collaboration with and for the Family Support Services Association of NSW and its members. The project received a small financial contribution from the NSW Department of Community Services which met some of the development costs.

Contact details and suggestions and comments for further development

We wish to update the tools in June 2004 based on the experiences of clients, family workers and services using the tools.

If you use the Tools please send the *Contact details and feedback form* (over page) to Paul Bullen.

To further develop the tools we need to know who is using them so we can contact users and talk through practice issues.

Contact details and feedback form

We wish to update the tools in June 2004 based on the experiences of clients, family workers and services using the tools. There may be minor revisions prior to that date.

To do this we need to know what services are using the tools so we can contact them and learn from their experiences.

If you use the tools please complete your contact details and the feedback form and send it to Paul Bullen:

Mail: Paul Bullen, PO BOX 181, Coogee, NSW 2034, Australia

Fax: Australia: 02 9315 7542
International + 61 2 9315 7542

Email: paul.bullen@mapl.com.au

Contact details

1. What are your contact details:

Name of organisation.....

Contact person

Mailing address

.....

Fax:

Telephone:

Email:

This information will be used only for the purpose of contacting users in the further development of the outcome tools. It will not be provided to any third party.

Use of background information on the web site

2. Did you use the background information on the web site?

- Yes I used it
- Yes, I used it a little
- No, not at all

The background information included topics such as: What is evaluation? How can we evaluate family support services? Where does measuring outcomes fit? What are some of the paradoxes and dilemmas in practice? How do we respond?

3. Overall was the background information on the web site useful?

- Yes very useful
- Yes, useful
- Yes, a little useful
- No, not useful

(.....continued over page)

Contact details and feedback form

Tools you are using/intend to use

4. What tools have you used/ do you intend to use?

- Tool 1 Snapshot of Life - Client's picture
- Tool 2 Snapshot of life - Worker's picture
- Tool 3 Goals - joint client and worker picture
- Tool 4 Service facts and figures
- Tool 5 Snapshot of life (Long Version)
- Tool 6 Service facts and figures (Long Version)
- Tool 7 includes topic tools which can be used to explore specific topics in service delivery or research

If you have used/intend to use topics from Tool 7 which topics?

- | | |
|--|---|
| <input type="radio"/> Topic 1 - Social capital | <input type="radio"/> Topic 10 - Significant life events |
| <input type="radio"/> Topic 2 - Life's practicalities | <input type="radio"/> Topic 11 - Stress |
| <input type="radio"/> Topic 3 - Life experiences and outlook | <input type="radio"/> Topic 12 - Participation in community organisations |
| <input type="radio"/> Topic 4 - Feelings about parenting | <input type="radio"/> Topic 13 - Information |
| <input type="radio"/> Topic 5 - Relationship with spouse | <input type="radio"/> Topic 14 - Beliefs about others |
| <input type="radio"/> Topic 6 - Storybook reading | <input type="radio"/> Topic 15 - Young person's experience (12 year old or older) |
| <input type="radio"/> Topic 7 - Children | <input type="radio"/> Topic 16 - Groups |
| <input type="radio"/> Topic 8 - Practical parenting | <input type="radio"/> Topic 17 - Family worker services |
| <input type="radio"/> Topic 9 - Building strengths | |

5. Have you/do you intend to make modifications to the tools?

- Yes, significant modifications
- Yes, some modifications
- Yes, minor modifications
- No, no or almost no modifications

6. When these materials are updated what updates would you like to see included?

.....

.....

.....

7. What other future developments of these tools would you find useful?

.....

.....

.....

If you use or intend to use the tools please send the two pages above to Paul Bullen.

Overview of Tools 5 to 6

Tool 5 - Snapshot of Life questionnaire (long version)

Introduction

The Snapshot of Life questionnaire was developed to provide a holistic view of life from the client's perspective.

It has been based on a variety of sources including focus groups with family support staff, standard tools reported in the Handbook of Family Measurement Techniques, indicators recommended by the Department of Family and Community Services in Indicators of Social and Family Functioning, Social Capital measurement tools developed by Bullen and Onyx, holistic life situation tools developed by Bullen. See the tool for further references.

The data from piloting the Snapshot of Life questionnaire in 2001 and early 2002 has been analysed and used to further develop the Tool 5.

Dimensions

The dimensions that are explored in the questionnaire are:

Networks, supports and community

- Family connections & networks
- Friends and neighbourhood connections and network
- Neighbourhood safety
- Participation in community events and organisations

Life's practicalities

- Employment, housing, education, etc

Parenting

- Relationship with my child
- Feelings about parenting
- Meeting children's material needs
- Meeting children's intellectual stimulation needs
- Meeting children's need for discipline and guidance.

Self

- Self-esteem/ value of life
- Optimistic outlook
- Stress
- Physical well being

Skills

- Organisation, budgeting, English
- Relationships with spouse/partner
- Dialogue, decision-making, practical support, etc

Overview of Tools 5 to 6

Children

- Health
- Schooling
- Relationships
- Behaviour

Reading

- Reading to children

Significant life events

- Birth of child, death in family, etc

Uses

This tool could be used as part of research exploring changing in clients over time. It could also be used to validate other tools and instruments.

The current introduction to the tool has been written for the scenario where family worker clients will complete the questionnaire at the beginning of service and on completion. The current introduction also assumes the questionnaires will be analysed by an independent consultant and individual questionnaires will not be seen by the family worker or other family support staff.

Analysis

While useful comparisons could be made between a client's first questionnaire and their second questionnaire on a client by client basis it is envisaged that the data from Tool 5 would be analysed for groups of clients in more complex ways. Technical statistical advice may be required.

Printing

The questionnaire has been designed to print as an A4 booklet (ie 3 A3 sheets of paper folder in half to make a 12 page booklet.)

Tool 6 - Service Facts and figures (Long Version)

This tool includes a longer list of data that could be included with the analysis of Tool 5.

It is envisaged that Tool 6 would be completed by staff and forwarded to an independent consultant to collate and analyse and link with the data from Tool 5.

Some questions in Tool 6 and also asked in Tool 5. This ensures that some demographic data is available and consistency between Tool 5 and Tool 6 information can be checked.

Tool 5 - Snapshot of Life (long version)

Family Support Services continually work towards improving the quality and effectiveness of their services. To do this well we need the help of parents receiving services.

We are asking each parent to complete the following questionnaire within the first 8 weeks of service and again at the end of service. This allows us to record changes over time.

So we need your help.

Could you please complete the following questionnaire and place it in the envelope provided.

The completed questionnaire will NOT be seen by your family worker. It will be forwarded to an independent consultant to collate with the questionnaires from all Family Support Services using these tools in programs across New South Wales.

Because we wish to be able to match your first questionnaire with your second questionnaire (to monitor changes over time) we need to include a local service code and a client code so that when the questionnaires are collated your first questionnaire and your second questionnaire can be matched. The independent person undertaking the analysis will not have access to any records from the local services that could be used to identify you and so your confidentiality is guaranteed.

The completed questionnaires will be used to build a state wide profile.

Individual questionnaires will not be seen by staff providing services. Local service staff will only receive collated responses for all parents participating in the local services and a state wide overview.

Thanks

Sources of questions

This questionnaire includes questions from a variety of sources including: Question 1, Bullen & Onyx, Social Capital Survey; Question 2, Bullen Social Capital Survey and Life's practicalities; Question 3, Abidin, Parenting Stress, Halverson & Duke, Parent Satisfaction, Gibaud-Wallston & Wandersman, Parenting Sense of Competence; Question 4 McMaster Family Assessment Device; Question 5, Institute of Early Childhood Studies, Department of Education and Training and Burnside, Storybook Reading; Question 6, Stephen Greenspan, University of Connecticut ; Question 7, Paul Bullen, Question 8 Paul Bullen & Department of Family and Community Services, Indicators of Social and Family Functioning. Contact Paul Bullen for full details (www.mapl.com.au).

If any of the questions are not appropriate for the age of your children mark them NA (not appropriate)

a) Are you completing this survey

- Within the first few weeks of receiving Family Support Services
- On completion of services with Family Support Services

b) What is today's date?/...../.....

1. Links with your current community

To what extent do you agree or disagree with the following statements?

<i>Please circle the most appropriate number</i>		<i>Strongly Disagree</i>				<i>Strongly Agree</i>		
a	I can get help from family when I need to	-3	-2	-1	?	+1	+2	+3
b	I help out as a volunteer	-3	-2	-1	?	+1	+2	+3
c	When I go shopping I am likely to meet friends and acquaintances	-3	-2	-1	?	+1	+2	+3
d	My local community feels like home	-3	-2	-1	?	+1	+2	+3
e	If a stranger, someone different from us, moved into my street they would be accepted	-3	-2	-1	?	+1	+2	+3
f	It is safe to walk around the neighbourhood at night	-3	-2	-1	?	+1	+2	+3
g	People in my neighbourhood are very willing to help each other out	-3	-2	-1	?	+1	+2	+3
h	Children are safe walking around the neighbourhood during the day	-3	-2	-1	?	+1	+2	+3
i	I generally trust my neighbours to look out for my property	-3	-2	-1	?	+1	+2	+3
j	People in my neighbourhood make it a difficult place to live	-3	-2	-1	?	+1	+2	+3
k	If I were caring for a child and needed to go out for a while, I would ask a neighbour for help	-3	-2	-1	?	+1	+2	+3
l	Have you visited a neighbour in the past week?	<i>No, not at all</i>				<i>Yes, frequently</i>		
		-3	-2	-1	?	+1	+2	+3
m	Do you go outside your local community to visit your family or friends?	<i>No, not much</i>				<i>Yes, nearly always</i>		
		-3	-2	-1	?	+1	+2	+3
n	Have you attended a local community event in the past 6 months (eg, church fete, school concert, craft exhibition)?	<i>No, not at all</i>				<i>Yes, lots</i>		
		-3	-2	-1	?	+1	+2	+3
o	Are you an active member of a <u>local</u> organisation (eg, sport, craft, social club craft group, church group, tenants group, P&C)?	<i>No, not at all</i>				<i>Yes, very active</i>		
		-3	-2	-1	?	+1	+2	+3

2. Snapshot of life

To what extent do you agree or disagree with the following statements?

Please circle the most appropriate number

Strongly Disagree

Strongly Agree

a	I have the amount and type of employment I want at present.	-3	-2	-1	?	+1	+2	+3
b	I am happy about my housing situation	-3	-2	-1	?	+1	+2	+3
c	I am happy with the level of education I have achieved at this point in time	-3	-2	-1	?	+1	+2	+3
d	I have OK access to transport to allow me to do the things I want to do	-3	-2	-1	?	+1	+2	+3
e	I have adequate income.	-3	-2	-1	?	+1	+2	+3
f	I like the local area where I am living	-3	-2	-1	?	+1	+2	+3
g	In general, I have excellent health	-3	-2	-1	?	+1	+2	+3
h	I often feel rushed, pressured and too busy	-3	-2	-1	?	+1	+2	+3
i	I enjoy my work - whether paid or unpaid	-3	-2	-1	?	+1	+2	+3
j	I often feel I have time on my hands that I don't know what to do with	-3	-2	-1	?	+1	+2	+3
k	I am always optimistic about my future	-3	-2	-1	?	+1	+2	+3
l	I feel that I have been really stressed out for weeks	-3	-2	-1	?	+1	+2	+3
m	If I need information to make a life decision, I know where to find that information	-3	-2	-1	?	+1	+2	+3
n	If something can go wrong for me it will	-3	-2	-1	?	+1	+2	+3
o	Overall people like me can have an impact on making the local community a better place to live	-3	-2	-1	?	+1	+2	+3
p	Up to now, I am satisfied with what my life has meant	-3	-2	-1	?	+1	+2	+3
q	I feel like a second class citizen when talking with people in government departments	-3	-2	-1	?	+1	+2	+3

3. Parenting

To what extent do you agree or disagree with the following statements?

Please circle the most appropriate number

Strongly Disagree

Strongly Agree

a	It takes a long time for parents to develop close, warm feelings for their children.	-3	-2	-1	?	+1	+2	+3
b	I expected to have closer and warmer feelings for my child than I do and this bothers me.	-3	-2	-1	?	+1	+2	+3
c	Sometimes my child misbehaves just to annoy me.	-3	-2	-1	?	+1	+2	+3
d	Since having a child I feel that I am almost never able to do things that I like to do.	-3	-2	-1	?	+1	+2	+3
e	I feel like I am working alone in trying to deal with my child's behaviour.	-3	-2	-1	?	+1	+2	+3
f	When my child misbehaves or fusses too much I feel responsible, as if I didn't do something right.	-3	-2	-1	?	+1	+2	+3
g	When I go out with friends I usually expect not to enjoy myself	-3	-2	-1	?	+1	+2	+3
h	I often have the feeling that other people my own age don't particularly like my company.	-3	-2	-1	?	+1	+2	+3
i	During the past six months I have been sicker than usual or have had more aches and pains than I normally do.	-3	-2	-1	?	+1	+2	+3
j	Child rearing is not as rewarding as I thought it would be.	-3	-2	-1	?	+1	+2	+3
k	Compared with outside employment, child rearing is more satisfying.	-3	-2	-1	?	+1	+2	+3
l	I am unhappy in the parenting role most of the time.	-3	-2	-1	?	+1	+2	+3
m	I really enjoy talking about my child(ren).	-3	-2	-1	?	+1	+2	+3
n	I feel like I should have better control over my child's behaviour.	-3	-2	-1	?	+1	+2	+3
o	A difficult problem in being a parent is not knowing whether you're doing a good job or a bad one.	-3	-2	-1	?	+1	+2	+3
p	Sometimes when I'm supposed to be in control I feel like I'm being manipulated.	-3	-2	-1	?	+1	+2	+3
q	You know, it's hard being stuck home with the children.	-3	-2	-1	?	+1	+2	+3

4. You and your spouse/partner I do not have a spouse/partner - go to question 5 below

To what extent do you agree or disagree with the following statements? *Please circle the most appropriate number*

	<i>Strongly Disagree</i>	<i>Strongly Agree</i>
a Planning family activities is difficult because we misunderstand each other.	-3 -2 -1 ? +1 +2 +3	
b In times of crisis we can turn to each other for support.	-3 -2 -1 ? +1 +2 +3	
c Making decisions is a problem in our family.	-3 -2 -1 ? +1 +2 +3	
d We are able to make decisions about how to solve problems	-3 -2 -1 ? +1 +2 +3	
e We confide in each other	-3 -2 -1 ? +1 +2 +3	
f We don't get on well together	-3 -2 -1 ? +1 +2 +3	
g Since having my child, my spouse/partner has not given me as much help and support as I expected.	-3 -2 -1 ? +1 +2 +3	
h Since having a child my spouse/partner and I don't do as many things together.	-3 -2 -1 ? +1 +2 +3	
i Since having my child, my spouse/partner and I don't spend as much time together as a family as I had expected.	-3 -2 -1 ? +1 +2 +3	

5. Storybook Reading

a Do you or other members of your household read or look at books with your child(ren)? <input type="radio"/> yes <input type="radio"/> no If NO go to the top of the next page
b How often do you read or look at books with your child(ren) in a typical week? <input type="radio"/> rarely <input type="radio"/> once <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 or more times
c Who reads or looks at books with your child(ren) at home? mother/partner <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> not applicable father/partner <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> not applicable brother/sister <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> not applicable grandparent <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> not applicable carer <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> not applicable other <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> not applicable
d How many children's books are in the home? <input type="radio"/> none <input type="radio"/> 1-10 <input type="radio"/> 10-20 <input type="radio"/> 20-40 <input type="radio"/> 40-60 <input type="radio"/> more than 60
e Do you take your child(ren) to the local library? <input type="radio"/> 1.no <input type="radio"/> 2. a few times a year <input type="radio"/> 3.once every few months <input type="radio"/> 4.once a month <input type="radio"/> 5.once a week

5. Children

How many children living in your household?

.....children

Answer the following for each child in the household:

If you have more than four children, complete the following for the four youngest children.

Child	Child 1	Child 2	Child 3	Child 4
a Year of birth
b Gender	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/> Male <input type="radio"/> Female
c Relationship to child Natural parent Foster parent Step parent Other	<input type="radio"/> Natural <input type="radio"/> Foster <input type="radio"/> Step <input type="radio"/> Other	<input type="radio"/> Natural <input type="radio"/> Foster <input type="radio"/> Step <input type="radio"/> Other	<input type="radio"/> Natural <input type="radio"/> Foster <input type="radio"/> Step <input type="radio"/> Other	<input type="radio"/> Natural <input type="radio"/> Foster <input type="radio"/> Step <input type="radio"/> Other
d Has the child a disability No Yes, an intellectual disability Yes, a physical disability	<input type="radio"/> No <input type="radio"/> Yes, int <input type="radio"/> Yes, phy	<input type="radio"/> No <input type="radio"/> Yes, int <input type="radio"/> Yes, phy	<input type="radio"/> No <input type="radio"/> Yes, int <input type="radio"/> Yes, phy	<input type="radio"/> No <input type="radio"/> Yes, int <input type="radio"/> Yes, phy
e Are any of the following significant issues for the child:	Yes A little No	Yes A little No	Yes A little No	Yes A little No
1 Health	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>
2 School attendance	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>
3 School performance	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>
4 Relationships with adults in household	Yes A little No <input type="radio"/> <input type="radio"/> <input type="radio"/>	Yes A little No <input type="radio"/> <input type="radio"/> <input type="radio"/>	Yes A little No <input type="radio"/> <input type="radio"/> <input type="radio"/>	Yes A little No <input type="radio"/> <input type="radio"/> <input type="radio"/>
5 Relationships with children in household	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>
6 Lack of friends	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>
7 Behaviour at home	Yes A little No <input type="radio"/> <input type="radio"/> <input type="radio"/>	Yes A little No <input type="radio"/> <input type="radio"/> <input type="radio"/>	Yes A little No <input type="radio"/> <input type="radio"/> <input type="radio"/>	Yes A little No <input type="radio"/> <input type="radio"/> <input type="radio"/>
8 Behaviour at school	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>
9 Behaviour elsewhere	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/>

6. Parenting

To what extent do you think the following are strengths in your family and household?

Please circle the most appropriate number

0 = Definitely not a strength 5 = going OK 10 = Definitely a big strength

	<i>Not a strength</i>	<i>OK</i>	<i>Big strength</i>
a The house is clean, tidy and organised	0	1	2 3 4 5 6 7 8 9 10
b I can organise someone else to look after my child(ren) when I go out without him/her/them	0	1	2 3 4 5 6 7 8 9 10
c I encourage my child(ren) to play and explore	0	1	2 3 4 5 6 7 8 9 10
d I take my child(ren)'s feelings seriously	0	1	2 3 4 5 6 7 8 9 10
e The kitchen and food preparation areas are clean	0	1	2 3 4 5 6 7 8 9 10
f My child(ren) get(s) plenty of exercise	0	1	2 3 4 5 6 7 8 9 10
g My child(ren) has/ve adequate clothing	0	1	2 3 4 5 6 7 8 9 10
h I can ignore minor annoyances from my child(ren)	0	1	2 3 4 5 6 7 8 9 10
i My child(ren) has/ve friends they play with	0	1	2 3 4 5 6 7 8 9 10
j When I am angry with my child(ren) I can exercise self-control and so don't take it out on him/her/them	0	1	2 3 4 5 6 7 8 9 10
k I am good at managing money	0	1	2 3 4 5 6 7 8 9 10
l I enjoy talking with my child(ren) about all kinds of things	0	1	2 3 4 5 6 7 8 9 10
m I avoid smacking my child(ren) to discipline them	0	1	2 3 4 5 6 7 8 9 10
n If my child is sick I get good medical advice	0	1	2 3 4 5 6 7 8 9 10
o When I need to I can be well planned and organised	0	1	2 3 4 5 6 7 8 9 10
p My child(ren) has/ve a wide variety of toys and objects to look at, play with and explore	0	1	2 3 4 5 6 7 8 9 10
q When disciplining my child(ren) I avoid calling him/her/them names to put them in their place.	0	1	2 3 4 5 6 7 8 9 10
r I enjoy spending time with my child(ren) doing things they like	0	1	2 3 4 5 6 7 8 9 10
s I try to avoid hurting my child(ren)'s feelings unnecessarily	0	1	2 3 4 5 6 7 8 9 10
t My child(ren) get plenty of good nutritional meals	0	1	2 3 4 5 6 7 8 9 10
u My child(ren) feel safe in our home	0	1	2 3 4 5 6 7 8 9 10
v When I set limits for my child(ren) I explain the reasons for the limits	0	1	2 3 4 5 6 7 8 9 10
w I encourage my child(ren) to develop their independence	0	1	2 3 4 5 6 7 8 9 10
x I encourage my child(ren) and praise him/her/them when they achieve things	0	1	2 3 4 5 6 7 8 9 10

7. Strengths

To what extent do you think the following are **strengths** for you, your family and household?
Please circle the most appropriate number.

0 = Definitely not a strength 5 = going OK 10 Definitely a big strength

Extended family, friends, neighbourhood and community networks											
	<i>Not a strength</i>	<i>OK</i>	<i>Big strength</i>								
1. Relationships with extended family members	0	1	2	3	4	5	6	7	8	9	10
2. Relationships with friends	0	1	2	3	4	5	6	7	8	9	10
3. Relationships with neighbours	0	1	2	3	4	5	6	7	8	9	10
4. Relationships and connections with the wider community (eg, play group, school, clubs, services)	0	1	2	3	4	5	6	7	8	9	10
Resources											
5. My education	0	1	2	3	4	5	6	7	8	9	10
6. Housing	0	1	2	3	4	5	6	7	8	9	10
7. My work/employment	0	1	2	3	4	5	6	7	8	9	10
8. Transportation	0	1	2	3	4	5	6	7	8	9	10
9. Enough money	0	1	2	3	4	5	6	7	8	9	10
10. Material resources, eg, furniture	0	1	2	3	4	5	6	7	8	9	10
Self											
11. My self esteem /self confidence	0	1	2	3	4	5	6	7	8	9	10
12. My outlook on life	0	1	2	3	4	5	6	7	8	9	10
13. My being relaxed/ not stressed out	0	1	2	3	4	5	6	7	8	9	10
14. My health	0	1	2	3	4	5	6	7	8	9	10
15. My being a parent	0	1	2	3	4	5	6	7	8	9	10
16. My personal safety	0	1	2	3	4	5	6	7	8	9	10
My skills											
17. Parenting skills	0	1	2	3	4	5	6	7	8	9	10
18. Keeping organised/ home management skills	0	1	2	3	4	5	6	7	8	9	10
19. Budgeting and financial skills	0	1	2	3	4	5	6	7	8	9	10
20. English/literacy skills	0	1	2	3	4	5	6	7	8	9	10
Relationship with partner											
21. Relationship with partner	0	1	2	3	4	5	6	7	8	9	10
Relationship with children											
22. Relationship with children	0	1	2	3	4	5	6	7	8	9	10

Children (question 7 continued)											
	<i>Not a strength</i>			<i>OK</i>			<i>Big strength</i>				
23. Children's material needs are met (eg food and clothing)	0	1	2	3	4	5	6	7	8	9	10
24. Children's intellectual stimulation needs are met (eg things to play with, people to interact and talk with)	0	1	2	3	4	5	6	7	8	9	10
25. Children's needs for discipline and guidance are met (eg. limits are set)	0	1	2	3	4	5	6	7	8	9	10
26. Children are safe	0	1	2	3	4	5	6	7	8	9	10
27. Children are attending school	0	1	2	3	4	5	6	7	8	9	10
[] Not applicable, not at school											

8. Significant life events

1. **Have any of the following events happened in your family during the past 12 months (tick all that apply)?**

Note: The term 'close family member' means a parent, child, grandparent or relative **living in the household.**

- 1. A close family member had a serious medical problem (illness or accident) and was in hospital
- 2. A close family member was badly hurt or sick (but was not in hospital)
- 3. A close family member was arrested or in jail
- 4. A child or children were consistently involved in or upset by family arguments
- 5. A parent/caregiver in the family lost his/her job or was unemployed
- 6. A close family member had an alcohol or drug problem
- 7. The family had serious financial problems
- 8. A close family member has a physical disability
- 9. Parents were separated or divorced
- 10. Birth of a child
- 11. Miscarriage or still birth
- 12. A close family member has died
- 13. It is very crowded where the family lives
- 14. A relative moved into the household
- 15. Income increased substantially (20% or more)
- 16. Income decreased substantially
- 17. Went deeply into debt
- 18. Moved to new location
- 19. Adult member got a promotion at work
- 20. Adult member began new job
- 21. Child entered new school
- 22. Domestic violence was an issue for this family
- 23. Child custody was an issue in the family

Yourself and your family

<p>1. Who do you live with?</p> <p><input type="radio"/> 1. alone</p> <p><input type="radio"/> 2. just partner</p> <p><input type="radio"/> 3. just children</p> <p><input type="radio"/> 4. partner and children</p> <p><input type="radio"/> 5. extended or blended family</p> <p><input type="radio"/> 6. friends</p> <p><input type="radio"/> 7. other</p>
<p>2. How many children are living in the client family in each of the following age ranges?</p> <p>0-5 years old children</p> <p>6-12 years old children</p> <p>13-18 years old children</p> <p>TOTAL children</p>
<p>3. How many children under 18 from this client family are in care living away from home?</p> <p>..... children</p>
<p>4. Is the mother/guardian currently:</p> <p><input type="radio"/> 1. working full-time</p> <p><input type="radio"/> 2. working part-time</p> <p><input type="radio"/> 3. on maternity leave</p> <p><input type="radio"/> 4. full-time home duties</p> <p><input type="radio"/> 5. unemployed</p> <p>[] Not applicable no mother/guardian</p>
<p>5. Is the father/guardian currently:</p> <p><input type="radio"/> 1. working full-time</p> <p><input type="radio"/> 2. working part-time</p> <p><input type="radio"/> 3. on maternity leave</p> <p><input type="radio"/> 4. full-time home duties</p> <p><input type="radio"/> 5. unemployed</p> <p>[] Not applicable no father/guardian</p>

<p>i) What is the current annual household income?</p> <p><input type="radio"/>₁ Less than \$15,000</p> <p><input type="radio"/>₂ \$15,001 to \$29,999</p> <p><input type="radio"/>₃ \$30,000 to \$44,999</p> <p><input type="radio"/>₄ \$45,000 to \$59,999</p> <p><input type="radio"/>₅ \$60,000 to \$79,999</p> <p><input type="radio"/>₆ \$80,000 to \$99,999</p> <p><input type="radio"/>₇ \$100,000+</p>
<p>6. What is the Postcode of the client family's address?</p> <p>..... postcode</p>
<p>7. Is the client family living in:</p> <p><input type="radio"/> 1. Private house or flat</p> <p><input type="radio"/> 2. Public housing</p> <p><input type="radio"/> 3. Other housing (eg, caravan, refuge)</p> <p><input type="radio"/> 4. Homeless</p>
<p>8. Is the client family renting their accommodation?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>
<p>b) What level of education do the parents have?</p> <p>F M</p> <p><input type="radio"/> <input type="radio"/>₁ Up to end of primary school</p> <p><input type="radio"/> <input type="radio"/>₂ Some secondary school</p> <p><input type="radio"/> <input type="radio"/>₃ Up to Year 10 (eg school certificate)</p> <p><input type="radio"/> <input type="radio"/>₄ Up to Year 12 / HSC (eg higher school certificate)</p> <p><input type="radio"/> <input type="radio"/>₅ Trade/apprenticeship (eg hairdresser, chef)</p> <p><input type="radio"/> <input type="radio"/>₆ Certificate/diploma (eg childcare, technician)</p> <p><input type="radio"/> <input type="radio"/>₇ University degree</p> <p><input type="radio"/> <input type="radio"/>₈ Post-graduate qualifications (eg, Grad Dip, Masters, PhD)</p>

Service code Client Code:..... To develop a state wide profile of services the information in this form needs to be matched with other forms you have completed. So a client code is included on each form. The independent person collating the forms will use the program and client code to match the different forms together but will NOT have any information which could identify you personally (eg, name, address). Your privacy and the confidentiality of the information you provide is guaranteed.

Tool 6 - Service Facts and figures (long version)

Client:.....

<i>Referral</i>
<p>1. Who referred the client to the Service</p> <p><input type="radio"/> 1. Self</p> <p><input type="radio"/> 2. Family Member/Friend</p> <p><input type="radio"/> 3. Department of Community Services</p> <p><input type="radio"/> 4. Health</p> <p><input type="radio"/> 5. Mental Health</p> <p><input type="radio"/> 6. Department of Housing</p> <p><input type="radio"/> 7. Department of Aging, Disability and Home Care</p> <p><input type="radio"/> 8. Juvenile Justice</p> <p><input type="radio"/> 9. School, Child Care Centre, Family Day Care</p> <p><input type="radio"/> 10. Non-government Community Service</p> <p><input type="radio"/> 11. Other.....</p>
Services provided by your agency
<p>2. How long has this client family been receiving services in your agency?</p> <p>..... yearsmonths</p>
<p>3. How often has this client typically been seen in recent months</p> <p><input type="radio"/> 1. More than once per week</p> <p><input type="radio"/> 2. Weekly</p> <p><input type="radio"/> 3. Fortnightly</p> <p><input type="radio"/> 4. Three weekly</p> <p><input type="radio"/> 5. Once a month</p> <p><input type="radio"/> 6. Less than once a month</p> <p><input type="radio"/> 7. Less than once every 3 months</p> <p><input type="radio"/> 8. On an irregular basis</p>
<p>4. How many hours of direct family worker service has the client typically received in each visit in recent months</p> <p>..... hours minutes</p>
<p>5. What is the total number of hours of direct family worker service the client received during the entire course of service</p> <p>..... TOTAL hours</p> <p>A good estimate will be adequate.</p>

<p>6. How often has this client typically been spoken to on the phone in recent months</p> <p><input type="radio"/> 1. More than once per week</p> <p><input type="radio"/> 2. Weekly</p> <p><input type="radio"/> 3. Fortnightly</p> <p><input type="radio"/> 4. Three weekly</p> <p><input type="radio"/> 5. Once a month</p> <p><input type="radio"/> 6. Less than once a month</p> <p><input type="radio"/> 7. Less than once every 3 months</p> <p><input type="radio"/> 8. On an irregular basis</p>
<p>7. How many hours of phone contact has the client had in total in the past month</p> <p>..... hours minutes</p>
<p>8. In addition, how much travel time has been typically used for each visit in recent months</p> <p>..... hours minutes</p>
<p>9. Did a member of this client family also attend groups while receiving family worker services?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>
<p>10. How many group sessions did an adult from this client family attend?</p> <p>..... group sessions</p>
<p>11. How many group sessions did a child from this client family attend?</p> <p>..... group sessions</p>
<p>12. Who is now typically seen each week? (tick as many as necessary).</p> <p><input type="radio"/> 1. Adult female</p> <p><input type="radio"/> 2. Adult male</p> <p><input type="radio"/> 3. Child/ren</p> <p><input type="radio"/> 4. Other</p>

<p>13. How was the decision to complete services made?</p> <p><input type="radio"/> 1. Mutual agreement of the client and the Service</p> <p><input type="radio"/> 2. Client decision - not mutual agreement</p> <p><input type="radio"/> 3. Service decision - not mutual agreement</p> <p><input type="radio"/> 4. Client unable to be contacted - no completion</p> <p><input type="radio"/> 5. Other</p>
<p>Family situation</p>
<p>14. Who does the client live with?</p> <p><input type="radio"/> 1. alone</p> <p><input type="radio"/> 2. just partner</p> <p><input type="radio"/> 3. just children</p> <p><input type="radio"/> 4. partner and children</p> <p><input type="radio"/> 5. extended or blended family</p> <p><input type="radio"/> 6. friends</p> <p><input type="radio"/> 7. other</p>
<p>15. Where applicable, what is the age in years (approx) of:</p> <p>Adult female in client family years</p> <p>Adult male in client family years</p>
<p>16. How many children are living in the client family in each of the following age ranges?</p> <p>0-5 years old children</p> <p>6-12 years old children</p> <p>13-18 years old children</p> <p>TOTAL children</p>
<p>17. How many children under 18 from this client family are in care living away from home?</p> <p>..... children</p>
<p>18. Is the mother/guardian currently:</p> <p><input type="radio"/> 1. working full-time</p> <p><input type="radio"/> 2. working part-time</p> <p><input type="radio"/> 3. on maternity leave</p> <p><input type="radio"/> 4. full-time home duties</p> <p><input type="radio"/> 5. unemployed</p> <p>[] Not applicable no mother/guardian</p>

<p>19. Is the father/guardian currently:</p> <p><input type="radio"/> 1. working full-time</p> <p><input type="radio"/> 2. working part-time</p> <p><input type="radio"/> 3. on maternity leave</p> <p><input type="radio"/> 4. full-time home duties</p> <p><input type="radio"/> 5. unemployed</p> <p>[] Not applicable no father/guardian</p>
<p>20. Do either of the parents have a special learning need, if so, what sort:</p> <p><input type="radio"/> 1. An identified/diagnosed developmental disability (ie, intellectual, physical or sensory)</p> <p><input type="radio"/> 2. An acquired brain injury (eg, caused through an accident, drug/ and alcohol misuse)</p> <p><input type="radio"/> 3. Chronic mental illness (diagnosed)</p> <p><input type="radio"/> 4. Possible (but undiagnosed) intellectual disability</p> <p><input type="radio"/> 5. Not applicable - neither parent has a special learning need.</p>
<p>21. Do any of the children have a special learning need, if so, what sort:</p> <p><input type="radio"/> 1. An identified/diagnosed developmental disability (ie, intellectual, physical or sensory)</p> <p><input type="radio"/> 2. An acquired brain injury (diagnosed) (eg, caused through an accident, drug/ and alcohol misuse)</p> <p><input type="radio"/> 3. Chronic mental illness (diagnosed)</p> <p><input type="radio"/> 4. Possible (but undiagnosed) intellectual disability</p> <p><input type="radio"/> 5. Not applicable - no child in the family has a special learning need.</p>
<p>22. Does the client speak a language other than English?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>
<p>23. What language does the client family prefer to speak at home?</p> <p><input type="radio"/> 1. English</p> <p><input type="radio"/> 2. Other</p>
<p>24. Is the client an Aboriginal or Torres Strait Islander?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>

<p>25. What is the main source of income for the client family unit?</p> <p><input type="radio"/> 1. Wages or Salary</p> <p><input type="radio"/> 2. Pension or benefit</p> <p><input type="radio"/> 3. Other</p>
<p>i) What is the current annual household income?</p> <p><input type="radio"/>₁ Less than \$15,000</p> <p><input type="radio"/>₂ \$15,001 to \$29,999</p> <p><input type="radio"/>₃ \$30,000 to \$44,999</p> <p><input type="radio"/>₄ \$45,000 to \$59,999</p> <p><input type="radio"/>₅ \$60,000 to \$79,999</p> <p><input type="radio"/>₆ \$80,000 to \$99,999</p> <p><input type="radio"/>₇ \$100,000+</p>
<p>26. What is the Postcode of the client family's address?</p> <p>..... postcode</p>
<p>27. Is the client family living in:</p> <p><input type="radio"/> 1. Private house or flat</p> <p><input type="radio"/> 2. Public housing</p> <p><input type="radio"/> 3. Other housing (eg, caravan, refuge)</p> <p><input type="radio"/> 4. Homeless</p>
<p>28. Is the client family renting their accommodation?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>
<p>b) What level of education do the parents have?</p> <p>F M</p> <p><input type="radio"/> <input type="radio"/>₁ Up to end of primary school</p> <p><input type="radio"/> <input type="radio"/>₂ Some secondary school</p> <p><input type="radio"/> <input type="radio"/>₃ Up to Year 10 (eg school certificate)</p> <p><input type="radio"/> <input type="radio"/>₄ Up to Year 12 / HSC (eg higher school certificate)</p> <p><input type="radio"/> <input type="radio"/>₅ Trade/apprenticeship (eg hairdresser, chef)</p> <p><input type="radio"/> <input type="radio"/>₆ Certificate/diploma (eg childcare, technician)</p> <p><input type="radio"/> <input type="radio"/>₇ University degree</p> <p><input type="radio"/> <input type="radio"/>₈ Post-graduate qualifications (eg, Grad Dip, Masters, PhD)</p>

<p>29. Have children in this family been reported to the Department of Community Services as being at risk?</p> <p><input type="radio"/> 1. Yes, certainly</p> <p><input type="radio"/> 2. Yes, I am reasonably sure</p> <p><input type="radio"/> 3. Unsure</p> <p><input type="radio"/> 4. No, I am reasonably sure there have been no reports</p> <p><input type="radio"/> 5. No, I am certain there have been no reports</p>
<p>30. Has your agency reported children in this family to DoCS?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p> <p>If yes, how many times?reports</p>
<p>31. Has an AVO been in place at some time during service delivery</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>
<p>32. Is (has) a child in this family been a State ward?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>
<p>33. Is (has) a child in this family (been) under a care/supervision order?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>
<p>34. Is gambling a problematic issue in this family?</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>
<p>35. Is domestic violence an issue for this family</p> <p><input type="radio"/> 1. Yes</p> <p><input type="radio"/> 2. No</p>

36. Is drug and/or alcohol a problematic issue in this family?

- 1. Yes
- 2. No

If yes, is the **principal** concern (tick more than one if necessary)

- 1. alcohol
- 2. tobacco
- 3. prescription drugs, eg, valium, tranquillizers
- 4. illicit drugs, eg, marijuana, heroin

Who is the user (tick more than one if necessary)

- 1. adult female
- 2. adult male
- 3. adult child
- 4. adolescent
- 5. under 12 year old

37. Are any of the following present?

Geographic isolation

- 1. geographic isolation

Disability

- 2. physical disability - parent
- 3. physical disability - child of family
- 4. intellectual disability - parent
- 5. intellectual disability - child of family

Abuse/neglect

- 6. physical abuse/neglect-child of family
- 7. emotional abuse - child of family
- 8. sexual abuse - child of family
- 9. past child sexual abuse of adult family member

Health

- 10. ongoing physical illness
- 11. psychiatric illness

Goals and outcomes

In the following four sets of questions

a) Use the codes on pages 7 to 9 for **priorities**

b) Use the following codes for degree of achievement

- 1 = not achieved at all
- 5 = moderately achieved
- 10 = completely achieved

Strengths

38. Where were the overall priorities for the whole of the family worker service with this client? List up to 3

To what extent were they achieved?

Priority 1 (code)
Degree of achievement (of out 10)
1 2 3 4 5 6 7 8 9 10

Priority 2 (code)
Degree of achievement
1 2 3 4 5 6 7 8 9 10

Priority 3 (code)
Degree of achievement
1 2 3 4 5 6 7 8 9 10

Children's issues

39. Where were the priorities for children's issues, if any? List up to 3

To what extent were they achieved?

Priority 1 (code)
Degree of achievement (of out 10)
1 2 3 4 5 6 7 8 9 10

Priority 2 (code)
Degree of achievement
1 2 3 4 5 6 7 8 9 10

Priority 3 (code)
Degree of achievement
1 2 3 4 5 6 7 8 9 10

General issues

40. Where were the priorities for work on general issues, if any? List up to 3

To what extent were they achieved?

Priority 1 (code)

Degree of achievement (of out 10)

1 2 3 4 5 6 7 8 9 10

Priority 2 (code)

Degree of achievement

1 2 3 4 5 6 7 8 9 10

Priority 3 (code)

Degree of achievement

1 2 3 4 5 6 7 8 9 10

Services

41. Where were the priorities for getting other services, if any? List up to 3

To what extent were they achieved?

Priority 1 (code)

Degree of achievement (of out 10)

1 2 3 4 5 6 7 8 9 10

Priority 2 (code)

Degree of achievement

1 2 3 4 5 6 7 8 9 10

Priority 3 (code)

Degree of achievement

1 2 3 4 5 6 7 8 9 10

42. Overall, how important would you consider the contribution of the agency to the level of change noted above

- 1. Major contributor
- 2. Contributor
- 3. Minor contributor
- 4. Minimal or no real contribution

43. Overall how would you consider the contribution by other parts of the service network to the level of change noted above?

- 1. Major contributor
- 2. Contributor
- 3. Minor contributor
- 4. Minimal or no real contribution

Service lacks

Sometimes the inability of clients to access services prevents them from progressing. For example clients who remain in situations of domestic violence because they are not able to be re-housed..

44. What **lack of services**, if any, is making a **major contribution to preventing this client from progressing?** (Tick more than one if necessary)

- 1. lack of child care
- 2. lack of respite care
- 3. lack of affordable child care
- 4. lack of accessible public transport
- 5. lack of affordable public transport
- 6. lack of public housing
- 7. lack of mental health services
- 8. lack of drug and alcohol services
- 9. lack of specialist counselling services
- 10. lack of other health service
- 11. lack of disability services
- 12. lack of access to education and training
- 13. lack of adequate income support
- 14. lack of adequate legal aid
- 15. lack of home care
- 16. lack of other services

The nature of the work

45. Which of the following best describes the work with this client?

- 1. Our service is **filling gaps** left by other services - we would not be providing services to this client if other more appropriate services were available.
- 2. We are the **most appropriate service** - we are not filling gaps left by others
- 3. We are **appropriate and we are also filling gaps** left by others

46. Which of the following best describes the work with this client?
- 1. We are dealing with a series of **intermittent crises**
 - 2. The work is **steady ongoing maintenance/prevention** - we don't see a lot of gains but nor do we see backwards movement
 - 3. The work is **developmental** - we see gains and we hope to see more gains

Required for more effective work

47. What is required to work more effectively **with this client**? Please rank the following in order of priority. (Put a 1 next to the most important, a 2 next to the next most important and so on. One rank those you consider have some importance.)
- a) **More time**, ie, more direct service hours available so I will have adequate time to work with this client (or more funds to do this).
 - b) Access to **practical services provision by other agencies**, (eg, meal preparation, shopping, cleaning, etc).
 - c) Access to or better individual **case supervision/case consultation** (ie, where you can receive individual supervision about your work with the client)
 - d) **Training** in the area of **individual service planning and case management skills**.
 - e) **Other training**, please specify
.....
 - f) **Better Interagency collaboration**
 - g) **Clearer agency policy** in relation to long term clients
 - h) **Other**, please specify
.....
.....

A. Building strengths codes

Extended family, friends, neighbourhood and community networks

1. Relationships with extended family members
2. Relationships with friends & or neighbours
3. Relationships and connections with the wider community (eg, play group, school, clubs)

Resources

4. Parent's education
5. Housing
6. Parent's work/employment
7. Transportation
8. Enough Money
9. Material resources, eg, furniture

Parent

10. Self esteem /self confidence
11. Outlook on life
12. Relaxed/ Not stressed out
13. Health
14. Being a parent
15. Personal safety

Parent's Skills

16. Parenting skills
17. Keeping organised/ home management skills
18. Budgeting and financial skills
19. English/literacy skills

Relationship with partner

20. Relationship with partner

Relationship with children

21. Relationship with children

Other

22. Other

B. Children's issues codes

Health

1. Health

School

2. School attendance
3. School performance

Relationships

4. Relationships with adults in household
5. Relationships with children in household
6. Lack of friends

Behaviour

7. Behaviour at home
8. Behaviour at school
9. Behaviour elsewhere

Children

10. Children's material needs are met (eg food and clothing)
11. Children's intellectual stimulation needs are met (eg things to play with, people to interact and talk with)
12. Children's needs for discipline and guidance are met (eg. limits are set)

Safety

13. Children are safe

Other

14. Other

C. General issues codes

1. Drug and/or alcohol abuse
2. Domestic violence
3. Physical and emotional abuse of children
4. Sexual abuse of children
5. Mental health of parents
6. Mental health of children
7. Gambling
8. Substitute care of children
9. Other

D. Services codes

1. Child care
2. Respite care
3. Public housing
4. Mental health services
5. Drug and alcohol services
6. Specialist counselling services
7. Other health
8. Education and training
9. Legal aid
10. Disability support service for the children
11. Disability support service for the adults
12. DoCS Caseworker
13. Home Care Service of NSW
14. Respite services for child(ren)
15. Supported employment
16. Public Guardian
17. Office of the Protective Commissioner
18. Other