



# BUILDING A COORDINATED SELF- LEARNING CHILD AND FAMILY SYSTEM

*The Outcomes Hierarchy Working Group*  
review of outcomes measurement tools

August 2020

**Safe and well**

Supporting families, protecting children



## Introduction

The CFSS Outcomes Hierarchy Working Group (the Working Group) was established early 2020 to advise on the implementation of the Child and Family Support Services (CFSS) Outcomes Hierarchy for the non-government sector and the Department of Human Services (DHS) Safer Families Programs.

The CFSS Outcomes Hierarchy has been developed to provide a framework for making collective progress toward the vision that children are safe and well at home in family, community and culture. It provides program level outcomes over the short, medium and long term for family support services (both government and non-government).

Effectively implementing the CFSS Outcomes Hierarchy will require collaborative effort across the sector and DHS. The Working Group is helping to inform and support this process.

The Working Group is chaired by Alisa Willis, Director of the Early Intervention Research Directorate (EIRD), DHS, and it comprises representatives from the non-government sector, including Aboriginal Controlled Organisations, and the Community and Family Services Division of DHS (EIRD, Safer Families and Community Services). Membership for the group remains open for all interested stakeholders.

The Working Group has prioritised the examination of outcomes measurement tools to assist services to make informed decisions in their selection of tools. It is intended tools will be identified not only measure outcomes at a program level, but at a systems level too.

Additional work to develop an Outcomes Framework specifically for Aboriginal children and families is to commence later this year, using the [Aboriginal System Design Principles \(PDF 313KB\)](#) to guide the process. This will be supported by research into Aboriginal specific outcomes measurement tools, including an Aboriginal-led project to develop a culturally informed practice tool with Flinders University (SWIRLS). This project is expected to be completed in August 2021. In the interim Aboriginal Community Controlled organisations are providing cultural advice on the suitability of outcomes, measures and tools.


This paper provides a summary of activities and research conducted to support the Working Group's program for the period February to August 2020.

## Background

In March 2019, the South Australian Government approved a strategy for a new Child and Family Support System (CFSS) to address growing rates of reported child abuse and neglect and increasing numbers of children needing to enter care. Reducing the over representation of Aboriginal children in the child protection system was identified as a top priority.

An initial co-design process for the new CFSS ran between June and October 2019. This process brought together government and non-government providers, service users, Aboriginal leaders and the broader community. The co-design process resulted in agreement on seven shared directions for the CFSS reform.

1. Designing the system with Aboriginal families and communities
2. Embedding trauma-responsive practice to create a healing system

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3. Establishing mechanisms for early help and support
  4. Ensuring equitable access for regional and rural families
  5. Supporting and strengthening our workforce
  6. \*Monitoring and evaluation
  7. \*Commissioning for outcomes

Co-designing the Child and Family Supports System Final qualitative report (2019) states:

*‘from the perspective of external consultants, it was noted at both stages one and two that there were relatively low level of confidence in talking about concepts such as outcome measurement and in being able to conceptualise a monitoring, learning and evaluation system of the future with confusion between monitoring individual family outcomes and reporting system outcomes’.*

It was further considered:

*‘a shared outcomes framework is an ideal opportunity to invest in system wide education and upskilling...’.*

The qualitative report states the purpose of a monitoring and evaluation phase is:

*‘to assess the effectiveness and value of the commissioned services whilst providing ongoing support’.*


Stakeholders also called for a greater focus on outcomes driven strengths-based measures and a focus on service users’ personal agency and a monitoring system that can capture this, not simply capturing quantitative measures’ of whether a family engages how many and how often.

The CFSS requires a more nuanced approach underpinned by a sense of relationship, clear practice guidance and learning to ensure the application of any measures upholds the deep respect we owe our support seeking families

A key goal of the CFSS reform is to build a self-learning system that has the capacity to monitor and evaluate system performance. Service providers are supportive of the process and have requested direction and clarity around the shared outcomes across the system for children and young people.

System performance monitoring is dependent on building an intelligent data infrastructure to support consistent routine collection of client and service data. Data examples include:

- Risk screening and baseline complexity
- Triage decision-making
- Process and activity measures
- Service activity measures (therapeutic dose)
- Short, medium and long-term child and family outcomes



In February 2020 the Early Intervention Research Directorate within DHS established the Working Group. Participation in the group was open to the Non-Government sector and nominated representatives from the DHS Community and Family Services Division. In addition to reviewing relevant child and family outcomes, the Working Group was tasked to explore and provide advice about the approaches, methods and tools to capture the information required for system performance monitoring.

## Approach

Several planning and infrastructure considerations influenced the priorities of the Working Group. The *Front Door* of the CFSS system and the management of referrals is undergoing substantial planning and development work. Consequently, exploring data collection related to risk screening and assessment was not initially prioritised, consideration of these data types will be framed by implementation plans once finalised. Also, the capacity to leverage existing outcomes reporting systems within DHS meant that a pragmatic first step was to focus on short and medium child and family outcomes data capture.

The System Reform Co-design (conducted during 2019) highlighted the necessity to improve the cultural responsiveness of all elements of the service system. This includes the development and adoption of an Aboriginal Outcomes Framework and specialised culturally informed data capture tools appropriate for Aboriginal families and communities. Given these are to be developed by separate Aboriginal-led processes, the focus of this paper is limited to a review of mainstream data capture tools.

## What outcomes should we measure?

The CFSS Program Level Outcomes Hierarchy was developed and distributed for consultation and subsequently signed off by NGOs. A Working Group was then established and was first tasked with defining the types of outcomes that reflected our system goals. The outcomes hierarchy aimed to reflect the broader CFSS system vision, reform agenda and the principal learnings from the sector co-design process (conducted during 2019) (see Figure 1).

**The three major themes of the outcome hierarchy were:**

1. Safe and well in families
2. Influencing decisions and reaching potential
3. Connected and supported in culture

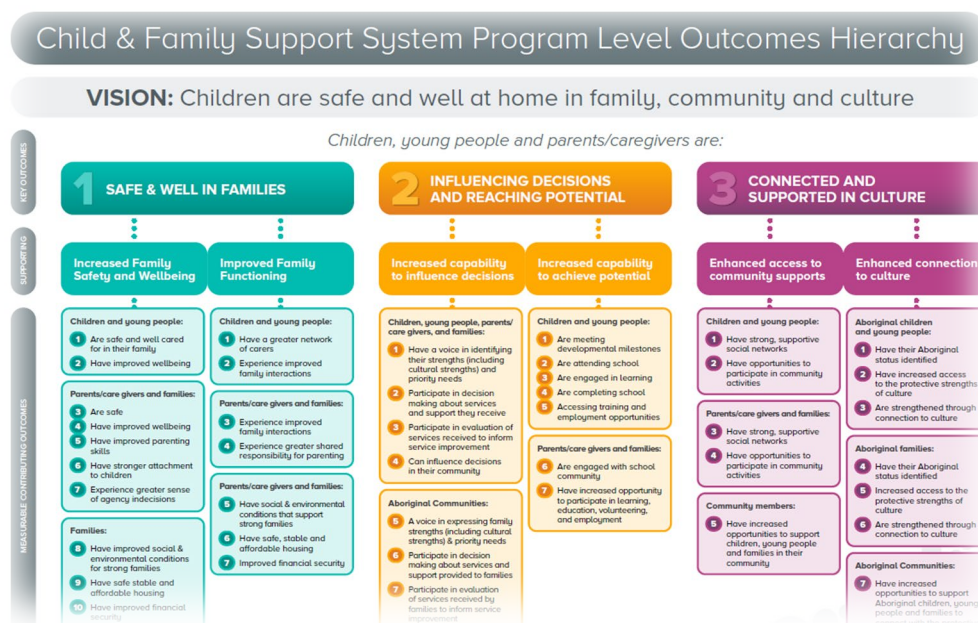


Figure 1 - CFSS Program Level Outcomes Hierarchy

## Identifying suitable outcome assessment tools

As part of the development of the Working Group a preliminary list of outcome measurement tools was developed. Members of the Working Group requested that more information be made available about assessment tools for measuring client outcomes for CFSS Services. Members requested DHS provide a list of preferred tools to assist services in their selection of tools.

The second task was to review existing data collection instruments to identify scientifically validated tools that could potentially capture the outcome domains defined in the hierarchy.

An extensive list of tools was developed from published reviews and from consultation with service providers, practitioners, and researchers.

### Tools that were considered in scope for review:

Research surveys, scales or practice tools that measured family functioning, child well-being, safety, child/family resilience, parenting capacity, psychological distress, risk/protective factors associated with child abuse and neglect, or other related domains.

### Tools that were considered out of scope:

Checklists or guides intended to solely support practice, and tools that did not capture structured data (i.e. only collected qualitative, unstructured text). Tools that could only be collected via online proprietary software.

### Review of the tools

Key information for each of the in-scope tools was collated and reported in [The Assessment Tool Summary Chart \(PDF 397 KB\)](#)

Information collated was sourced by conducting standardised searches of SCOPUS online research database. Search terms included common terms for the key domains of interest (e.g. family functioning) and the population of interest (e.g. child maltreatment). The search was limited to studies in English language published after 1990. Study protocols, case studies and commentaries were excluded. More than 1,500 articles were identified by the literature search. Abstracts were screened to identify relevant articles. Also, where possible, relevant information was extracted from user manuals and implementation guides.

For each tool included in the tool review, the *Assessment Tool Summary Chart* described the:

- key focus of the tool
- target population
- domains measured (broad description or categories of information captured by the tool)
- alignment of the tools domains with the CFSS Outcomes Hierarchy domains
- identified published studies reporting the validity and/or reliability of the tool
- identified published studies applying the tool as a pre/post assessment of a family or parenting intervention designed to prevent child maltreatment/improve parenting capability, e.g. family intervention studies
- identified published studies which applied the tool to capture a relevant outcome

The summary chart reported on a total of 42 tools, including eight tools specifically developed for Aboriginal populations. A colour coded key was used to describe alignment of the tools with the Outcomes Hierarchy. The three major outcome themes were divided into seven key sub-themes,

Figure 2 describes the categorisation of data domains by sub-theme.

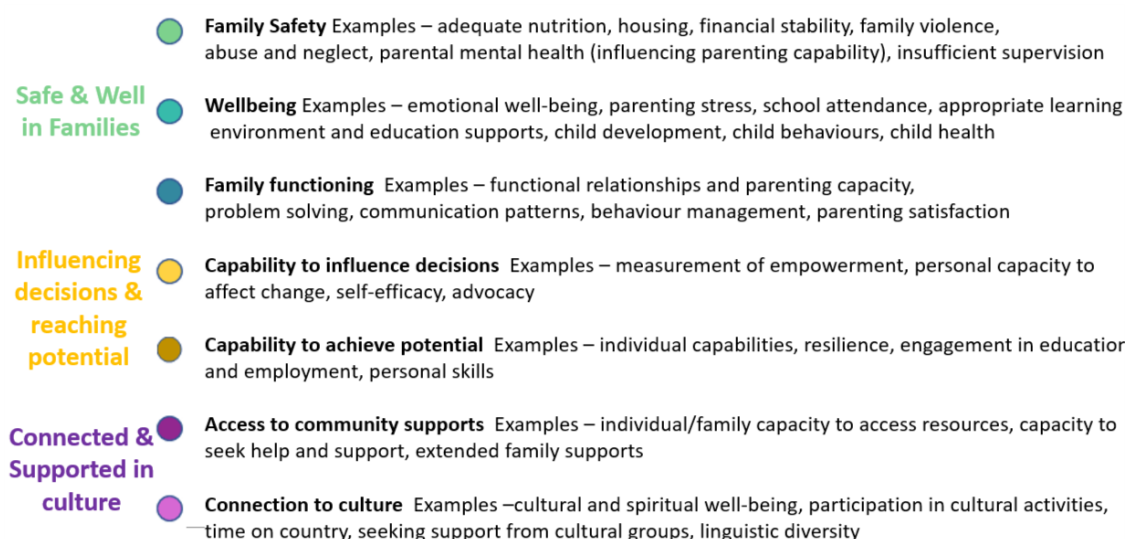


Figure 2: Assessment tool domains by outcomes hierarchy category



The summary chart reported on eight tools developed specifically for Aboriginal populations and endorsed by the Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention. These tools were largely designed to broadly assess health and well-being and did not specifically capture *Family Safety*. The well-being assessments captured in these tools were often multi-dimensional, reflecting social, emotional, ecological and cultural well-being.

The most frequently captured domain by the 34 mainstream population tools reviewed was *Wellbeing*, followed by *Family Functioning* (Figure 3). Only a third of tools measured domains categorised under the *Family Safety* outcomes, and some of these tools only captured narrow assessments of safety. For example, several of the tools captured parental mental health in relation to its impact on parenting capacity and did not capture other elements of *Family Safety* as reflected in the outcomes hierarchy.

Overall, the least captured domain was *Connection to Culture*. Although, as described above in the summary of the Aboriginal specific tools, all the Aboriginal culturally-informed tools included in the summary chart captured connection to culture.

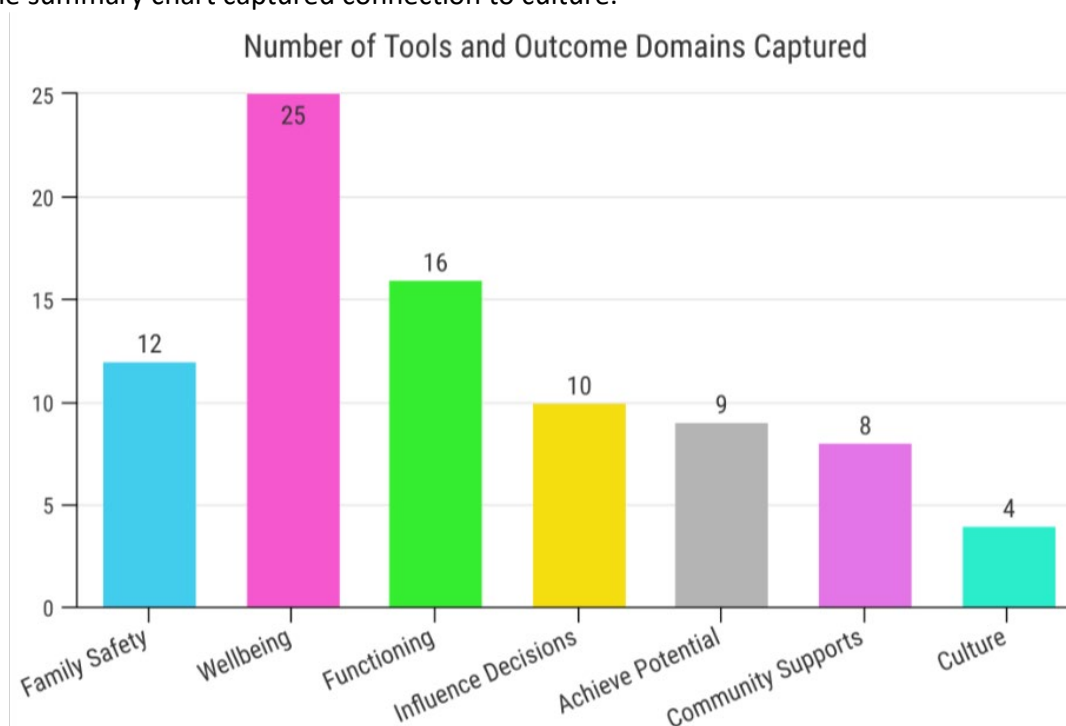


Figure 3: Frequency of outcome domains captured by assessment tools reviewed

Note: These figures do not include the eight Aboriginal specific tools included in the Assessment Tool Summary Chart, these will be reviewed in a sub-group project.

Most tools reviewed did not capture a broad range of outcomes. Just over 60% of the tools captured only one or two of the outcome domains and only a few tools capture all seven domains (Figure 4).

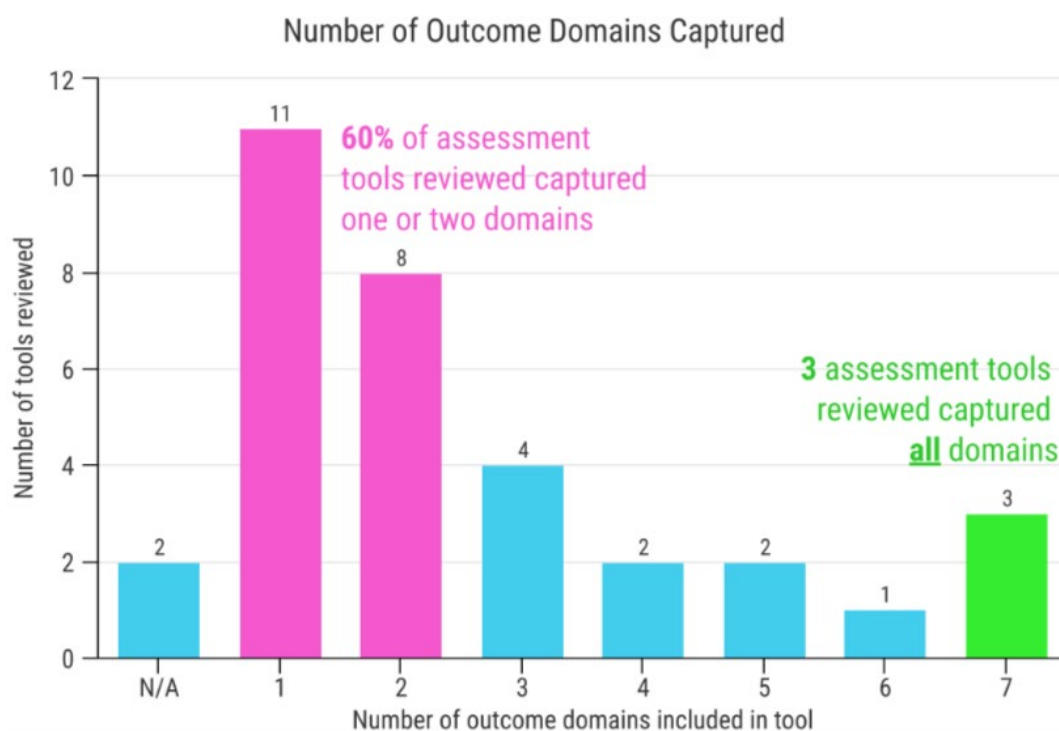


Figure 4: Number of domains captured by the assessment tools reviewed

Published validation studies were identified for most of the tools reviewed. There were only six tools assessed for which no published validity or reliability studies were identified in by the SCOPUS search.

Application of tools in an intervention study was less common. Only one-third of the tools assessed had been applied as pre- and post-measure in a family or parenting related intervention study. However, there was anecdotal information that a number of tools were routinely used as a pre- and post-effectiveness measure of family support services within Australia (e.g. Strengths and Stressors Tracking Device, Child Neglect Index, Parental Efficacy and Empowerment Measure).

## Shortlisted tools for further consideration by the Outcomes Hierarchy Working Group

The review identified many well-evidenced validated tools that had been applied across varied settings and populations. The review also highlighted that capturing all outcomes would likely require the application of several complimentary tools. Consequently, short-listing of suitable tools was determined by considering key criteria reflecting the CFSS system reform goals.

Primary considerations for selection of shortlisted tools:

1. captured the domains covered in the **safe & well in families** outcomes category
2. strengths-focused
3. privileged the parent and/or child voice
4. demonstrated capability to detect change over-time



5. brief and non-invasive to administer, limited associated costs

Applying these considerations identified a set of three validated strengths-focused tools that collectively covered all domains of the outcomes hierarchy and collectively captured caseworker, child and parent/primary carer voice.

### **Shortlisted Tool - Child and Youth Resilience Measure (CYRM)**

The Child and Youth Resilience Measure (CYRM) is a measure of youth resilience and wellbeing that accounts for cultural and contextual diversity across populations. The CYRM was developed by the Resilience Research Centre (RRC) (Canada) in the late 2000's. It assists researchers and social work practitioners to build a picture of the resources available to youth, including individual characteristics, the presence of supportive people around youth, and their access to cultural and contextual resources that support positive development.

Specifically designed for complex needs youth, it is strengths-focussed and measures resilience from a socio-ecological approach. There is a suite of assessment scales that cater to different ages and stages of development. These include the basic age appropriate versions: The CYRM-R (for 5-9 years and 10-23 years), and the ARM-R (for 18+). There are also versions with simplified language for individuals with limited comprehension/literacy.

CYRM assesses risk of maltreatment with questions specific to supervision of children, parental engagement with children's emotions, and in terms of meeting children needs for food and safety. The CYRM also considers the importance of community, peers and culture in personal resilience and acknowledgment of Cultural traditions.

The CYRM has the capacity to be further adapted to a local context by the addition of an additional eight questions. The *Person Most Knowledgeable* (PMK) version of the CYRM can be completed by an adult proxy (a person nominated by the child/young person who knows the individual respondent well).

#### **Domains:**

- Individual child characteristics, personal skills, peer support, and social skills
- Caregiver characteristics, physical and psychological caregiving
- Social ecological/context variables, spiritual, educational, and cultural support

#### **Positives:**

- Various versions that cater to a range of age groups
- Validated across many cultures and indigenous groups
- Can be customised to meet requirements of local context

#### **Concerns:**

- Limited evidence of detecting change in a short time frame
- Potentially applied as a survey of 'needs' as opposed to service effectiveness

## Shortlisted Tool - Strengths and Stressors Tracking Device (SSTD)

The SSTD was developed by Berry, Cash & Mathiesen as a multidimensional assessment specific to child welfare populations. It provides a rapid assessment of family well-being, strengths and needs of families to help guide case planning and evaluate the effectiveness of treatment.

The device assesses families from an ecological perspective in the domains of environmental conditions, social support, caregiver skills, and child well-being. It has been argued that an ecological perspective is particularly important in terms of identifying neglect.

SSTD has been used in New South Wales and has been adapted to fit different communities. It was developed to be applied as a pre/post assessment to detect change over time and can be used to support case planning. The SSTD's strengths-based and ecological approach aligns well with the goals of the CFSS.

The tool was based on the North Carolina Family Assessment Scale and aims to support inexperienced caseworkers to identify critical indicators of family wellbeing. SSTD has high internal consistency in all domains, distinguishes between physical abuse and neglect. It may be used at multiple points during treatment to assess change and takes approximately 10 to 20 minutes to complete.

### **Domains:**

- The environment domain (17-items) assesses housing stability, safety in the community, habitability of housing, income/employment, financial management, food and nutrition, personal hygiene, transportation, and learning environment.
- The social support domain (7-items) assess social relationships, access to regular services, access to emergency services, and willingness to accept support.
- The family/caregiver domain (14-items) domain assesses parenting skills, adult supervision, personal problems affecting parents, communication with child, marital relationship, expectation of the child, and mutual support.
- The child well-being domain (17-items) assesses child's physical health, mental health, sexual abuse, emotional abuse, child's behaviour, school performance, relationship with caregivers, relationship with siblings, relationship with peers, and motivation/cooperation.

### **Positives:**

- Not incident-focused or deficit-focused
- Field reports indicate that the tool detects change over-time
- Captures ecological perspective, seeks to understand the family and child environment
- Broad range of Safe and Well domains captured
- Strong focus on children's safety

### **Concerns:**

- Limited published application of the tool but used in Australia
- Some training required to ensure appropriate application

## Shortlisted Tool - Protective Factors Survey (PFS)

The PFS arose from system wide reform of American Community Based Child Abuse Prevention (CBCAP) and was developed by FRIENDS (Family Resource Information, Education, and Network Development Service) as a project of the Chapel Hill Training Outreach Project (established in 1969).

The PFS was designed to measure outcomes of community-based child abuse prevention services and captures systemic disadvantage, family functioning and the importance of attachment through a risk and protection lens. The PFS uses simple language and is a brief instrument, taking approximately 15 minutes to complete. The PFS was developed to assess effectiveness of services but can also be used to support case management and service planning. The PFS is supported by an implementation guide to ensure that data collection is conducted with respect and dignity for clients.

There are two versions of the PFS-2, a retrospective version that can be delivered after a minimum of 12 hours service, or a pre/post version and a traditional pre and post PFS. Programs using the traditional pre/post PFS may see a ceiling effect in scores due to the likelihood of participants rating themselves highly at the beginning of services (response shift bias), therefore allowing little to no room for improvement at the end of services.

The retrospective version asks respondents to report on how much change has occurred since commencing the service or program.

### **Domains:**

- Family Functioning/Resiliency: adaptive skills and strategies to persevere in times of crisis, ability to openly share positive and negative experiences and mobilize to accept, solve, and manage problems.
- Social Emotional Support: Perceived informal support (from family, friends, and neighbours) that helps provide for emotional needs.
- Concrete Support: Perceived access to tangible goods and services to help families cope with stress, particularly in times of crisis or intensified need.
- Nurturing and Attachment: The emotional tie along with a pattern of positive interaction between the parent and child that develops over time.
- Caregiver/Practitioner Relationship: The supportive, understanding relationship between caregivers and practitioners that positively affects parents' success in participating in services. (While the Caregiver/Practitioner Relationship is not often identified as a protective factor, this subscale can help service providers assess their ability to effectively engage with caregivers and support improved service delivery).

### **Positives:**

- Detects change in a relatively short time frame (after 12 hours of service provision)
- Retrospective version of the PFS, avoids ceiling-effect bias

### **Concerns:**

- Potential for recall bias not known



## Feedback

Feedback regarding the review and the shortlisted tools was due 15 August 2020 and will be reported to the Working Group at the meeting on 3 September 2020.

We look forward to ongoing conversations regarding measuring outcomes for children and families in South Australia.