

# Disability Housing– building a common outcomes framework for people with disability

---

## Background and purpose

*Starting out with common outcomes measurement for providers and funders*

December 2020

© Social Ventures Australia. The Disability Housing Outcomes Framework and supporting documentation are licensed under a Creative Commons Attribution, Non-Commercial and No-Derivatives 4.0 International licence. Permission may be granted for derivatives, please contact SVA for more information.



WE  
LIFE WITHOUT BARRIERS  
VE

arUma.

Claro  
Aged Care  
Disability Services

The logo for SVA Consulting, featuring the letters "SVA" in a bold, dark blue font, followed by the word "Consulting" in a lighter blue font. A thin yellow horizontal line is positioned beneath the "SVA" text.

The logo for BlueCHP Limited, featuring a stylized blue and grey house icon to the left of the text "BlueCHP Limited".  
BlueCHP Limited  
AFFORDABLE HOUSING- FOUNDATION FOR LIFE

HOUSING  
CHOICES  
AUSTRALIA

The logo for Good Housing, featuring a stylized house icon with a heart inside, followed by the text "Good Housing".  
Good Housing

The logo for Casa Capace, featuring a small brown square icon to the left of the text "D P N | Casa Capace".  
D P N | Casa Capace  
*Live the life you want*

## Contents

Overview.....	3
Purpose.....	3
Benefits of the Framework .....	3
Built-form housing providers .....	3
In-home support providers .....	4
Funders and investors .....	4
Key terms.....	7
The Disability Housing Outcomes Framework .....	8
An introduction to outcomes management.....	10
What are outcomes? .....	10
Why adopt an outcomes-focussed approach? .....	10
Measurement and data collection .....	10
Embedding a learning culture and continuous improvement .....	14
Getting the most out of the Framework .....	14
Building a learning culture.....	15
A collaborative sector approach to improve outcomes for people with disability .....	16
Getting started .....	18
Assessing organisational readiness .....	18
Collecting outcomes data.....	18
Tracking outputs and understanding available levers .....	21
Where to from here?.....	22
Appendix: Example data collection matrix.....	23

## Overview

### Purpose

The Disability Housing Outcomes Framework ('the Framework') aims to revolutionise the way providers of housing and in-home supports understand and benchmark their performance and create impact for people with disability.

The Framework was developed by SVA Consulting under the guidance of a Steering Committee made up of SDA and SIL providers, and in partnership with key individuals and organisations from across the sector, including people with disability, representative peak bodies, providers, funders, and academics.

The purpose of the framework is to:

- Support an improved understanding of what good looks like across disability housing, with a focus on Specialist Disability Accommodation (SDA) and in-home supports (SIL)
- Support organisations to adopt an outcomes-focused approach to disability housing
- Promote consistency in the measurement and evaluation of activities and impact, including a common language with regards to outcomes, indicators, and levers
- Facilitate a learning culture within organisations and across the sector to understand what works to guide future development of the market

### Benefits of the Framework

The Framework will support providers and funders to:

- Strengthen their engagement with people with disability by articulating activities aligned to outcomes seen as relevant and meaningful
- Identify other funder, provider, and/or government activities that are contributing to the same domain
- Identify gaps in services and strategically develop appropriate initiatives and/or partner with others to address these gaps
- Better engage with other providers, funders, and Governments on the intent and results of their activities
- Achieve better results for people with disability

### Built-form housing providers

This Framework presents an opportunity for built-form housing providers to develop an evidence base for their impact. Providers who adopt this Framework will not only be able to provide better housing based on that evidence base, but also have the tools to manage their existing properties and support the development of meaningful partnerships with funders and other providers in a way that leads to better outcomes for people with disability.

- **Deliver a sector-wide approach to outcomes:** A sector-wide approach to outcomes management and data collection has the potential to change sector practice. The data set will be comprehensive enough to support an understanding of what works, and providers that adopt the Framework will be able to guide the development of the Specialist Disability Accommodation (SDA) market in a way that leads to fit-for-purpose housing for people with disability.
- **Inform design and build:** From the data collected, developers and providers will have an improved understanding of the design and configuration that best suits different cohorts of people. The Framework provides the opportunity to incentivise going beyond compliance and minimum standards, facilitating a strong focus on creating good outcomes for people.

- **Improve organisational performance:** The Framework clearly identifies the link between the activities and decisions of providers and the outcomes created for people living in disability housing. As a result, built-form housing providers will also be able to identify when things do not go as planned, and develop an understanding of the cause/s for the discrepancy, and the best path to rectifying any issues.
- **Be part of a community of practice:** Built-form housing providers will be able to benchmark their performance using the Framework and participate in communities of practice to share and learn with peers. This will help create a learning culture across the sector from which many providers can benefit, and most importantly, will lead to better outcomes for people with disability. Providers will be able to share insights on their service delivery and how that has impacted the outcomes they achieve. This includes the opportunity to better engage with funders and other key stakeholders who align with their values and understand the impact of their investments.

### In-home support providers

Support providers that adopt this Framework have the potential to profoundly change common practice in the sector. The ways in which they will be able to change practice include:

- **Responding to changes in a timely manner:** The daily living indicators provide a pulse check and ensure the support model is meeting the daily needs of residents. Providers of in-home support can understand not only the short-term effects of their activities using this Framework, but also longer-term changes that may be occurring in the lives of people with disability as a result of the housing and in-home support.
- **Engaging and motivating staff:** Strengths-based language has been used throughout the Framework for the indicators. This will support providers to use it to motivate their workforce, drive staff engagement, and incentivise activities that lead to greater outcomes for people with disability. This in turn can lead to a more open and positive relationship between the resident and the support staff.
- **Articulate their value to current and future customers:** In-home support providers are able to use the Framework to prove their impact and articulate it to the market and potential customers.
- **Creating a healthier working relationship between providers:** The adoption of the Framework may lead to a more transparent and healthier working relationship between housing and in-home support providers. This is because providers will have a common language to discuss outcomes, as well as have a clear understanding of the influence each provider can have on these outcomes.
- **Be part of a community of practice:** In-home support providers will be able to benchmark their performance using the Disability Housing Outcomes Framework. This will help create a learning culture across the sector from which many providers can benefit, and most importantly, will lead to better outcomes for people with disability. Providers will be able to share insights on their service delivery and how that has impacted the outcomes they achieve. This includes the opportunity to better engage with built-form housing providers and other key stakeholders.

### Funders and investors

Investors and funders have been tracking the financial and environmental impact of their investment for decades now. A key challenge in social investments is understanding the social and cultural impact of the activities delivered as rigorously as financial metrics<sup>1</sup>.

<sup>1</sup> ['Methodology for Standardizing and Comparing Impact Performance'](#), Bass, R., Hand, D., Sunderji, S., Global Impact Investing Network, November 2020

- **A fit-for-purpose impact measurement framework:** A range of frameworks exist in the ecosystem to support funders and investors to understand the impact of their investments, however many are not tailored to understanding the impact of housing outcomes for people with disability within the context of the NDIS and disability housing in Australia. This Framework is based on what is meaningful for people with disability and has been developed within the context of the NDIS, providing a fit-for-purpose framework to assess the impact of disability housing and in-home support.
- **Uniform language and approach:** The Framework provides a uniform language and common set of indicators to compare the impact of different investments, as well as incentivise those investments that leads to greater outcomes for people with disability.
- **Inform investment decisions:** The Framework can support funders to work with providers that are aligned with the impact that the funders hope to have in the sector. Investors can use the Framework as decision-making criteria for selecting investments that are aligned to their values as well as to incentivise widespread change across the sector.
- **Simplify impact reporting:** Many funders need to prove the impact of their investments to investors, and the use of this Framework can simplify the reporting required. It allows organisations to track their investments consistently in a way that is meaningful for the sector, building on what matters most for people with disability.

## Outline of this document

This guide introduces the Framework and outlines key considerations and first steps to support organisations to embed the Framework in practice. The key sections in this document and their objectives are described below:

1. The Disability Housing Outcomes Framework
  - What the Framework is and why it is important
2. An introduction to outcomes management
  - What outcomes management is
  - Why focus on outcomes and how an outcomes-focussed approach works in practice
3. Embedding a learning culture and continuous improvement
  - Getting the most out of your outcomes focussed approach
  - How to build a learning culture across an organisation
4. A collaborative sector approach to improve outcomes for people with disability
  - Why collaborate?
  - How the Framework supports collaboration across the sector
  - Benchmarking opportunities
5. Getting started
  - Assessing organisational readiness
  - Collecting outcomes data
  - Tracking outputs and understanding available levers

## Key terms

TERM	DEFINITION
<b>DATA</b>	Information that has been gathered about indicators that, when analysed, shows whether progress is being made on a certain condition or circumstance.
<b>EVIDENCE</b>	Information (including analysed data) that helps to prove a fact and inform decision-making.
<b>IMPACT</b>	The longer-term social, economic, cultural and/or environmental outcomes (effects or consequences) of an intervention.
<b>INDICATORS</b>	Specific, observable, and measurable characteristics or changes that represent achievement of or progress towards the outcomes.
<b>INPUTS</b>	Resources that are used by an intervention. Examples include money, staff, time, facilities, and equipment.
<b>LEVERS</b>	The systems, tools, decisions, and activities available to providers to change or influence outcomes, above and beyond the minimum requirements.
<b>OUTCOMES</b>	<p>The changes that occur for individuals, groups, families, organisations, systems, or communities during or after an intervention. Changes can include attitudes, values, behaviours, or conditions.</p> <p>Changes can be short-, intermediate- or long-term:</p> <ul style="list-style-type: none"> <li>• Short-term outcomes – the most direct result of an activity or intervention; typically not ends in themselves, but necessary steps toward desired ends (intermediate or long-term outcomes).</li> <li>• Intermediate outcomes – link an intervention's short-term outcomes to long term outcomes; they necessarily precede other outcomes.</li> <li>• Long-term outcomes (sometimes called ultimate outcomes or impact) – result from achieving short-term and intermediate outcomes.</li> </ul>
<b>OUTCOMES MANAGEMENT</b>	The broad process of developing a theory of how change happens because of activities and gathering data to prove or disprove the theory of change and learn what works to inform better decision making. This is also referred to as an outcomes-focussed approach or managing to outcomes.
<b>OUTCOMES MEASUREMENT</b>	The process of measuring if, and how much, activities lead to certain outcomes
<b>OUTPUTS</b>	Specific, observable, and measurable characteristics that demonstrate that the levers are in place, often expressed in terms of volume or units delivered.

## The Disability Housing Outcomes Framework

The Framework considers the link between the activities of providers (levers) and the changes these facilitate for people with disability (outcomes).

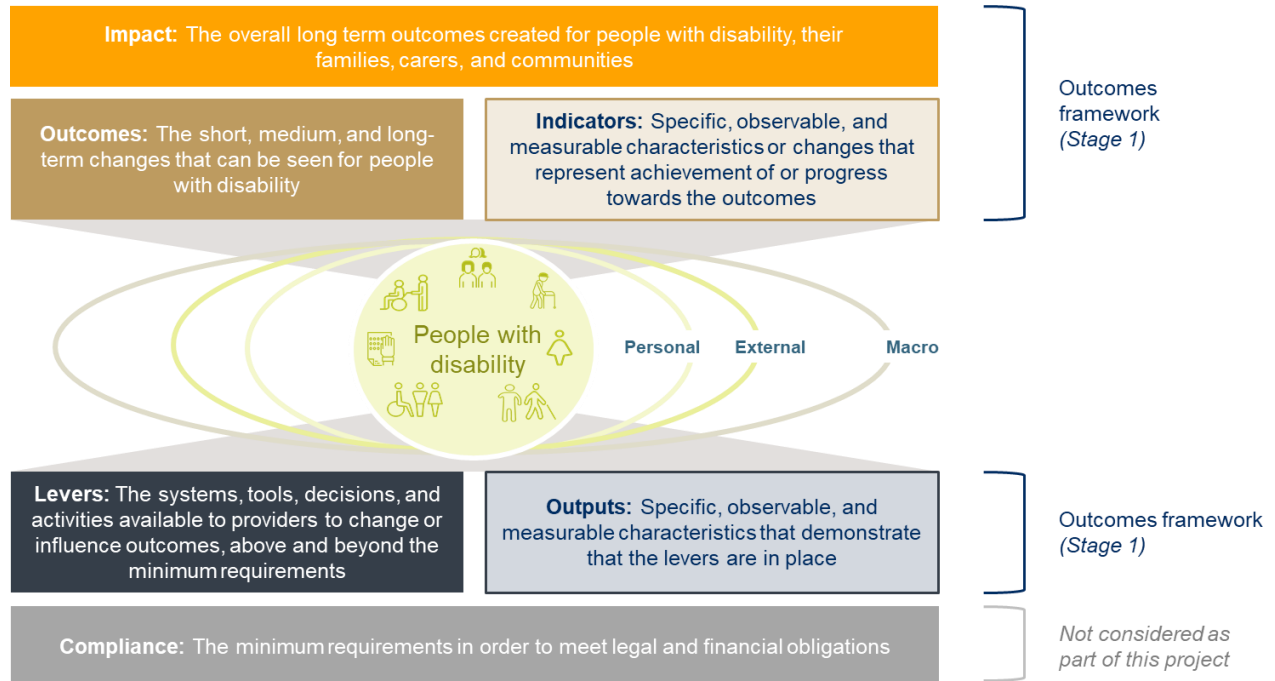


Figure 1: Disability Housing Outcomes Framework Structure

The Framework includes six outcomes and eight common indicators, as well as a larger set of additional indicators for each of the outcomes. The eight common indicators will be measured by all organisations that adopt the Framework. The additional indicators are provided for organisations that want a more robust picture of the impact they are having on each outcome domain.

It is a living framework; it will be improved and adapted over time as we learn what is, and is not, working.



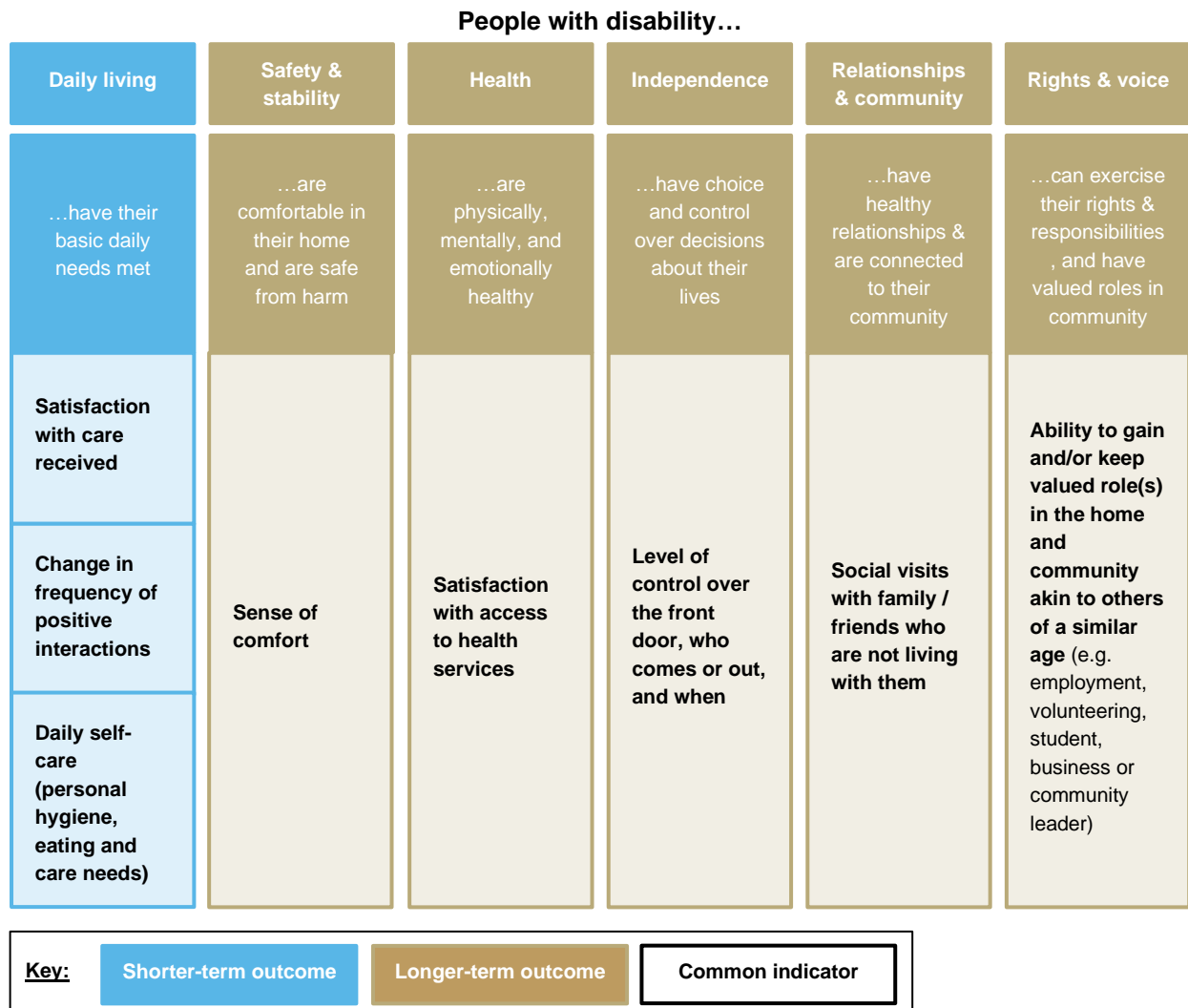


Figure 2: Disability Housing Outcomes Framework Outcomes and Indicators

## An introduction to outcomes management

### What are outcomes?

Outcomes are the changes that happen because of the program, service or activity being delivered (an 'intervention'). These changes occur for individuals, groups, families, organisations, systems, or communities during or after an activity. Changes can include attitudes, values, behaviours, or conditions.

Outcomes can be positive or negative, and can occur over the short-, intermediate-, or long-term:

- short-term outcomes are the most direct result of an intervention
- intermediate-term outcomes link an intervention's short-term outcomes to long-term outcomes
- long-term outcomes are the result of achieving the short and intermediate-term outcomes

Outcomes are different from outputs. Outputs are the things that happen due to a program or activity (for example, a person gets an automatic door in the home). Outcomes tell us about how things changed for the person (for example, the person has improved mobility in the home, has increased control over when they leave or come home, and as a result their independence increases).

### Why adopt an outcomes-focussed approach?

- **It leads to greater impact.** An outcomes-focussed approach encourages providers and funders to be clear about the impact they want to have, and then test, learn, and iterate to make sure housing, services, and supports are effective. This test, learn, and iterate process can improve service design and delivery, foster collaboration to achieve shared goals, and drive innovation, that ultimately leads to better outcomes for people with disability.
- **It is good for the people we serve.** An outcomes-focussed approach puts people's needs at the centre of design and delivery. When the focus is on the individual, service providers can work with individuals to empower them to be agents of change for themselves, their families, and their communities.
- **It supports innovation.** By building evidence about what works and why, providers and funders can find new ways of addressing challenging problems. Understanding how infrastructure and supports can be tailored to the needs of individual while also leveraging the other supports that the individual has access to, to address their unique range of needs and aspirations, based on evidence of what works can lead to new approaches.
- **It engages and refocuses teams and organisations.** Having greater clarity of the change that a staff member, board member, and organisation's work is contributing to can inspire and improve staff engagement, as well as facilitating an environment that facilitates a 'try, test, and iterate' approach to find the best ways to create impact.
- **It provides greater transparency for funders and investors.** Government agencies and other funders and investors prefer to fund programs that can demonstrate what they are doing works and is creating meaningful and lasting impact. An outcomes-focussed approach provides better information to all parties, so funders can also work with providers to make programs more effective. Providers that are better able to demonstrate their value can unlock new funding opportunities.
- **It supports collaboration.** People are complex, and often outcomes cannot be achieved through service provision that operates in siloes. Providers can facilitate better outcomes by understanding what levers they have available to change or influence outcomes, and how they can best partner with other providers to unlock and enhance impact for people with disability.

### Measurement and data collection

Outcomes data can be collected through many different methods, each with their own benefits and challenges. Some common examples are listed below.

METHOD	OVERVIEW	KEY CONSIDERATIONS
<b>SURVEYS &amp; QUESTIONNAIRES</b>	<ul style="list-style-type: none"> <li>Tools for eliciting empirical and perception-based data from clients, their families, service providers, or other stakeholders</li> <li>Completed by the respondent themselves through a series of questions such as changes in their health or wellbeing</li> <li>Surveys and questionnaires can be online, paper-based or on an app</li> </ul>	<ul style="list-style-type: none"> <li>Surveys and questionnaires enable the standardised collection of data from large samples, to build a quantitative view</li> <li>Risks include creating a data collection burden on respondents or negatively impacting client-worker relationships, both of which can undermine outcomes</li> </ul>
<b>STRUCTURED INTERVIEWS</b>	<ul style="list-style-type: none"> <li>Structured interviews collect perception-based data that are administered by service provider staff, such as a case manager or practitioner. The staff member reads out the questions in a consistent way and records responses</li> </ul>	<ul style="list-style-type: none"> <li>Administering structured interviews can make it difficult for staff to build the rapport and trust with respondents that is essential to delivering quality services and achieving outcomes. This is a particular risk if interviews are long or involve collecting sensitive information</li> <li>Structured interviews are less effective than semi-structured interviews (see below) for capturing qualitative data that can help give a fuller picture of the respondent's situation and what is changing in their life</li> </ul>
<b>SEMI-STRUCTURED INTERVIEWS</b>	<ul style="list-style-type: none"> <li>Semi-structured interviews are designed around key themes or areas of inquiry, with suggested lists of targeted and follow-up questions that staff can use to collect priority outcomes data</li> </ul>	<ul style="list-style-type: none"> <li>The qualitative data collected through semi-structured interviews can provide richer detail about what outcomes have been achieved, and deeper understanding about how and why outcomes have or have not been achieved</li> <li>Semi-structured interviews require specific skills to effectively probe, clarify answers, and guide the respondent, while maintaining a conversational flow and building rapport</li> <li>Data from semi-structured interviews can be harder to access, share, compare, and report on than structured</li> </ul>

METHOD	OVERVIEW	KEY CONSIDERATIONS
		survey or interview data; can also be more expensive
<b>CLIENT ASSESSMENT TOOLS</b>	<ul style="list-style-type: none"> <li>Client assessment tools capture staff's professional perspective and assessment of outcomes. Can also draw on data collected through structured or semi-structured interviews</li> </ul>	<ul style="list-style-type: none"> <li>Integrates data collection with service delivery functions, which can reduce the burden of data collection</li> <li>Client assessment tools emphasise the professional perspective of staff – triangulating with surveys or interviews that capture the respondent's perspective on what is changing for them may be important</li> </ul>

It is important to have clarity around how data will be collected and stored for each indicator. Data should then be compiled in one central repository so that it can be analysed and used. Below is a simple table that can help with this record-keeping.

Priority outcome	Indicator	Measure	Person you can ask the question of	Data source	Comparable data source (useful for later comparison against)	Frequency with which you will gather the data	How data will be stored
<i>e.g. Safety and stability – people with disability are comfortable in their home and safe from harm</i>	<i>e.g. Sense of comfort</i>	<i>e.g. I feel comfortable in my home (Likert scale, 1-4, strongly disagree to strongly agree)</i>	<i>e.g. Person with disability</i>	<i>e.g. Resident survey or structured interview</i>	<i>e.g. Other resident surveys internally; externally</i>	<i>e.g. Annual</i>	<i>e.g. Secure cloud-based system</i>

All new data collection systems should be pilot tested. Data collected in the first rounds of data collection should be treated with caution as the approach is tested and refined. There is also a need to consider the 'benchmark', or what you are comparing against, and test this during the piloting stage to ensure comparisons and conclusions are meaningful. Outcomes management is an iterative process, and there will be an opportunity and need to refine and improve over time.

---

*The Framework outlines suggested data collection approaches and timing for providers who wish to commence measuring against the outcomes and indicators. Subsequent stages of the Framework's development (from early 2021) will focus on the development and piloting of bespoke tools and systems for providers to measure their progress against these common indicators, and ensure the data is relevant and timely to support decision-making.*

---

## Embedding a learning culture and continuous improvement

### Getting the most out of the Framework

Within the Framework, there are eight core common indicators which all providers should measure against, including measures and timing. This will provide a platform for sharing and learning across organisations.

In addition, there are a number of other indicators which are suggested for each outcome, as well as suggested outputs to track the extent to which providers are individually or collectively using the various levers available to them to influence outcomes for people with disability. Providers may choose to track these additional indicators in order to deepen their understanding of the impact they are facilitating for people with disability, to understand particular elements within their model, and/or to understand how their model may work differently for people with different needs, aspirations, and contexts (e.g. by location, by primary disability type). Suggested measures have been included to support providers to undertake this on a regular or ad-hoc basis.

Some helpful questions for funders and providers to consider in interpreting the data are:

- **Customers and tenants:** Are you reaching the right people?
  - Are you reaching as many people as you expected? Is there something you can do to get the word out more or to increase referrals?
  - Are you reaching the types of people you expected? Is there something you can do to better reach your target group?
  - Are there other groups of people who face barriers or challenges which you could engage with to improve access to appropriate housing / support?
- **Levers:** Which levers are you delivering on and how?
  - Are you delivering your levers in a way that resonates? Is the format appropriate?
  - Are they impacting on individuals in the way you thought it would?
  - Are you facilitating the right mix of levers? Are there certain outputs that are more popular or impactful than others? Are there others you might want to stop doing?
  - How effective are the partnerships between your organisation, other providers, and other formal and informal supports?
  - Are there other barriers or challenges individuals are struggling with that need to be addressed to unlock the various features in the model? Are these something you can address or work with a partner to address?
- **Outcomes:** Are you achieving the outcomes you intended?
  - Are you achieving the outcomes you intended? If you are having mixed results with outcomes, look for the cohorts, geographies, or levers where you are doing well.

What is it that is resulting in better outcomes? Are there particular characteristics or conditions that lend themselves more readily to better outcomes?

Is it something about the way you are delivering activities in that geography, and is that something that you could replicate in areas where you might not be doing as well?

Equally, it can be helpful to ask questions about the areas where you are not doing well. What is it about those areas that are not working well?

- How are you performing relative to other providers in similar and different contexts? What can you learn or share with others to further drive improvements across the sector?

### **Building a learning culture**

Identifying what to collect does not mean that staff will collect and use that information effectively. Providers and funders should strive to develop a culture of disciplined tracking of performance against outcomes, appropriate evaluation, and informed decision-making within and across organisations and partnerships. Providers and funders with a learning culture focus on doing what they do as well as where they can improve, and continually seek to do even better.

A learning culture values honest appraisal, open dissent, and constructive feedback. It promotes intelligent risk-taking in pursuit of both insight and impact. It considers the relevant context of an assessment and makes difficult decisions based on evidence—even if that means significant strategic and/or operational changes.

There are various ways to support a learning culture, including:

- Start with small changes and build up to bigger changes. For example, measure the common indicators first.
- Clearly communicate the outcomes you are seeking to achieve to staff and customers.
- Promote and reward the use of data within the organisation to set a good example.
- Invest in infrastructure and in data collection, storage, and reporting capabilities as well as the ongoing training of staff. Management and staff must not only believe in the value of data but also have the skills to use it to improve results.
- Bring data to life by leading through example. Leaders and staff should drive continuous improvement.
- The organisation needs to have engaged leadership who are committed to achieving outcomes and support a learning and outcomes-focussed culture. Leadership must develop a deep understanding of the outcomes it aims to achieve and keep the management accountable to delivering on these outcomes.
- This kind of performance culture requires an ongoing investment into the learning and development of staff.

---

*As part of the subsequent stages of the Framework's development, SVA Consulting will continue to work closely with organisations across the sector to develop bespoke systems and tools, and pilot the implementation. This will ensure that the Framework aligns with what is most relevant and important to drive decision making, as well as ensuring organisations have the support required to effectively embed the Framework within practice.*

---

## A collaborative sector approach to improve outcomes for people with disability

The Framework presents a significant opportunity for providers to learn from each other and improve practice together. It has significant advantages for stakeholders across the sector:

STAKEHOLDER	ADVANTAGE OF A COMMON OUTCOMES FRAMEWORK
<b>PEOPLE WITH DISABILITY</b>	<ul style="list-style-type: none"> <li>• Understand provider options and performance through public reporting</li> <li>• Improved choice and control as housing is developed which reflects a diversity of housing and support options that align with what facilitates good outcomes</li> </ul>
<b>IN-HOME SUPPORT PROVIDERS (SIL); CARERS AND SERVICE TEAMS</b>	<ul style="list-style-type: none"> <li>• Better understand people's goals and facilitate the achievement of them through housing and in-home supports</li> <li>• Build a community of practice to improve the market</li> <li>• Drive better outcomes for customers and be person-centric</li> <li>• Gain a competitive edge in the market</li> <li>• Continuously improve service</li> </ul>
<b>SDA PROVIDERS AND DEVELOPERS; TENANCY AND DESIGN TEAMS</b>	<ul style="list-style-type: none"> <li>• Better understand people's goals and facilitate the achievement of them through housing and in-home supports</li> <li>• Improved design in housing stock that drives inclusion for people with disability in the broader community</li> <li>• Build a community of practice to improve the market and develop appropriate housing stock</li> <li>• Drive better outcomes for tenants and be person-centric</li> <li>• Gain a competitive edge in the market</li> <li>• Continuously improve housing and support</li> </ul>
<b>FUNDERS</b>	<ul style="list-style-type: none"> <li>• Understand impact of current and/or future investments</li> <li>• Compare investments and make decisions based on evidence</li> <li>• Encourage improvement in the market based on learnings from the sector</li> </ul>
<b>GOVERNMENTS</b>	<ul style="list-style-type: none"> <li>• Understand impact of current and/or future investments</li> <li>• Update policy in the sector as required based on evidence of what works to drive improved outcomes</li> <li>• Compare investments and make decisions based on evidence</li> <li>• Encourage improvement in the market based on learnings from the sector</li> </ul>

In providing a common set of outcomes and indicators across providers, the Framework encourages collaboration:

- **Within organisations.** An outcomes-focussed approach allows providers and funders to have greater clarity around what they want to achieve. Staff can better draw on the skills and services offered by colleagues to address the needs of the individual.



- **Between providers.** The Framework encourages providers to think about how the levers available to them facilitate or influence outcomes in partnership with those available to other providers. If all providers have a common understanding of the potential direct and indirect impact of their activities, they may discover more opportunities to support each other in achieving their goals.
- **Between funders and providers.** A focus on outcomes is a way of better aligning the objectives of those who fund providers, and those who deliver housing and supports. The Framework invites funders and service providers to work together to develop the most effective ways of achieving sustainable outcomes.
- **Between those who deliver housing and supports, and people with disability.** An outcomes-focussed approach lends itself well to co-designing services with the individual and working with that customer to achieve the outcomes that they want. It supports strengths-based, goal-oriented housing and supports which makes the person an integral part of designing their life and future. It also facilitates an understanding of what works, for whom, and when, considering the unique aspirations, needs, and context of the person.

---

*As part of the subsequent stages of the Framework's development, SVA Consulting will continue to work closely with people with disability and organisations across the sector to explore opportunities for benchmarking and the development of communities of practice to facilitate collaboration and drive a common understanding of what good looks like, and how built-form housing and in-home supports can facilitate good outcomes for people with disability.*

---

## Getting started

### Assessing organisational readiness

Embarking on the process of measuring impact against the common housing outcomes framework is an important step in understanding what good looks like when it comes to disability housing, and how your organisation's activities and decisions are contributing to better outcomes for people with disability.

Before getting started, it is important to consider your organisation and team's readiness for implementation. This may vary based on the type and size of the organisation, operating context, and familiarity with outcomes measurement.

The following questions may be helpful for you to consider:

- Why are we doing this as an organisation, and how will this feed into our decision-making processes?
  - This may be from supporting day-to-day decisions regarding care or property maintenance through to organisational strategy and funding
- Do I have buy-in from across my organisation to begin this process? E.g. from Board, leadership / management, front-line staff, customers / tenants?
- What is the level of familiarity with outcomes measurement across my organisation?
  - Some training may be helpful for some or all team members to get aligned on what outcomes management is, why it is important, and what role they have to play (e.g. collecting data, making data-informed decisions)
- Who else in my organisation needs to be involved?
  - It can be helpful to have a core individual or team driving the work and coordinating it. While some organisations may have a dedicated monitoring and evaluation team or outcomes team, in others it may be part of a person's broader role
  - In considering which indicators, levers, and outputs you will track, consider the time and resourcing available to undertake this work. Starting slow and doing a few things well is better than trying to do everything poorly
  - There is significant benefit in involving your customers / tenants and other people with disability as well as families and carers in undertaking this work where possible to ensure it aligns with what people want and need
- What resourcing is available to undertake this work? E.g. personnel, skills and capabilities, systems

Once you are comfortable with the appetite in your organisation for implementing this Framework and have the resources and time in place to ensure effectiveness, it is time to think through the measurement and data collection.

### Collecting outcomes data

The Framework defines the outcomes and indicators and so the next step is to determine the method for collecting and analysing the data.

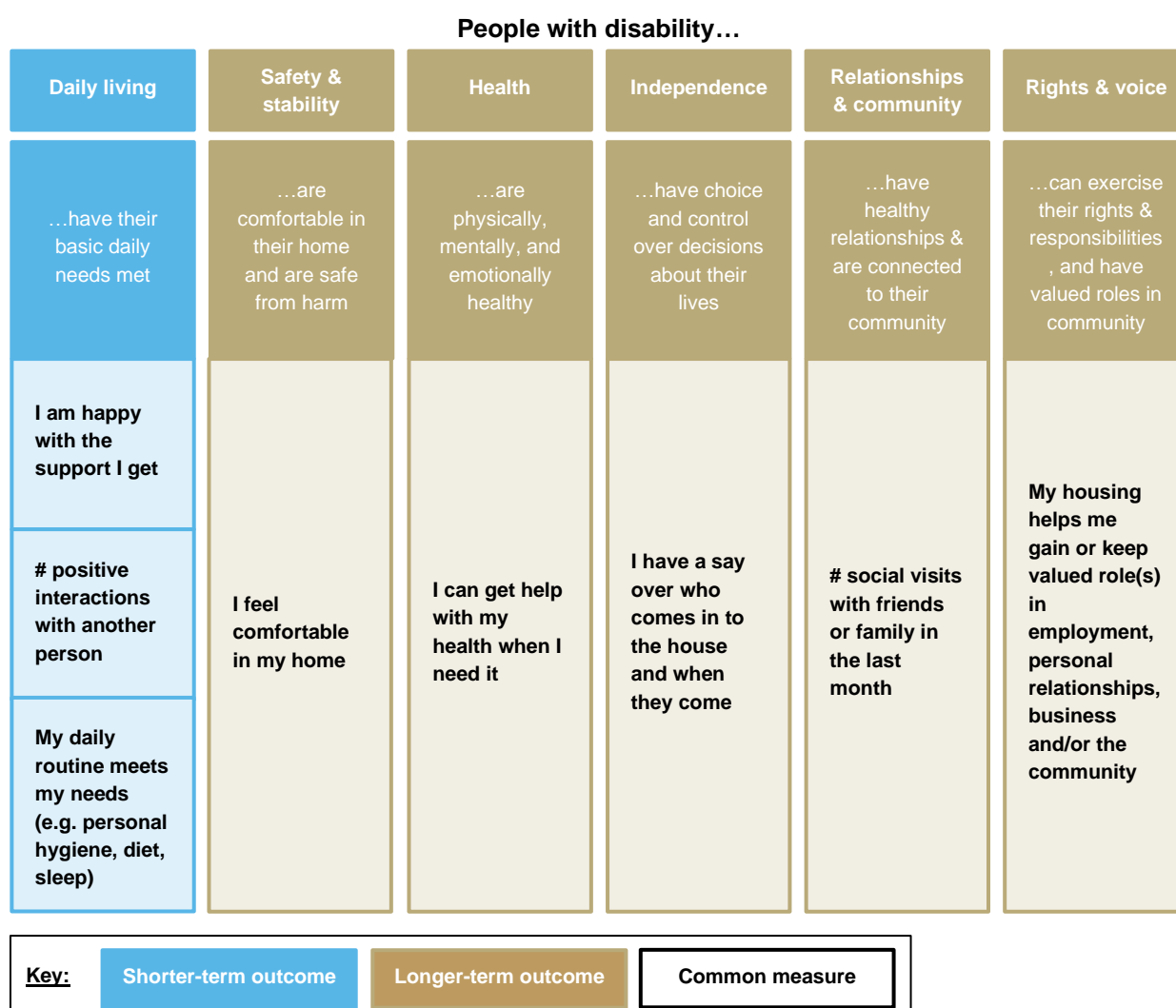


Figure 3: Disability Housing Outcomes Framework Common Measures

Some of the common indicators in the Framework are objective and observable measures whilst others are self-reported by the person with disability. The data collection method may look different between organisations of varying size, resources or the cohort being surveyed and their communication needs. All communications related to the tool should be available in Easy English and feature pictorials where appropriate so that a range of communication needs are catered for in the survey. For some, a visual rather than a numeric or written scale may be more intuitive and effective. For others, a combination of the scales may be clearer.

Figure 4 below provides examples of different representations of the scale that could be adopted depending on the communication needs of the participants. The measures and language will be revised and updated as required as the Framework is piloted and tested.

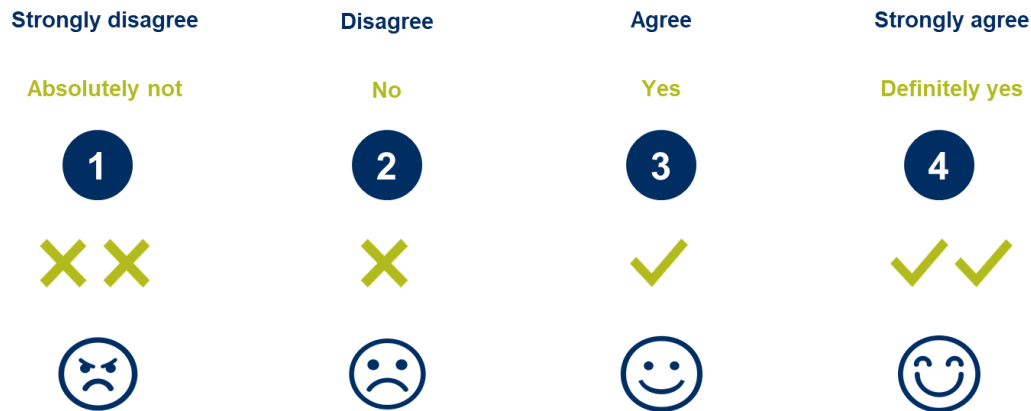


Figure 4: Examples of scales that could be used to measure outcomes

It is vital to also ensure the person responding has the capacity, time, and privacy to complete the survey or interview. This is especially important for those that may have communication difficulties and may require extra time and support to work through the questions. It is vital those administering the tool support participants and allow them to communicate with autonomy during this process. Additional capacity building support such as in supported decision making may be helpful to reduce the risk of bias in the collection of data and ensure it is meaningful. Potential options for this include:

- The use of independent informal or formal supports to help those with complex communicative or cognitive needs in person to complete the data collection. This could be in the form of a family member, community member, friend, advocate, or translator.
- The provision of different methods or formats for completing the survey. For instance, offering the option of a phone call, video call, written responses or face-to-face meeting for the provision of answers.
- Regular training of staff on the purpose of the Framework and data collection and importance of collecting unbiased information.
- The provision of training and capacity building for people with disability to learn about their rights and supported decision-making.

Once the data collection tool has been developed, it is important to consider who will collect the data, where from, how frequently, where it will be stored and how it will be analysed. An example data collection matrix has been provided in the Appendix.

## Tracking outputs and understanding available levers

Levers are the systems, tools, decisions, and activities available to providers to change or influence outcomes, above and beyond the minimum requirements. Some organisations may currently collect data related to their service delivery and outputs aligned to these levers. Understanding the extent to which particular levers are in place, and the outcomes achieved by a person living in a home, can help provide insight into how providers are facilitating good outcomes for people with disability through their model. These levers are illustrated below in Figure 5.

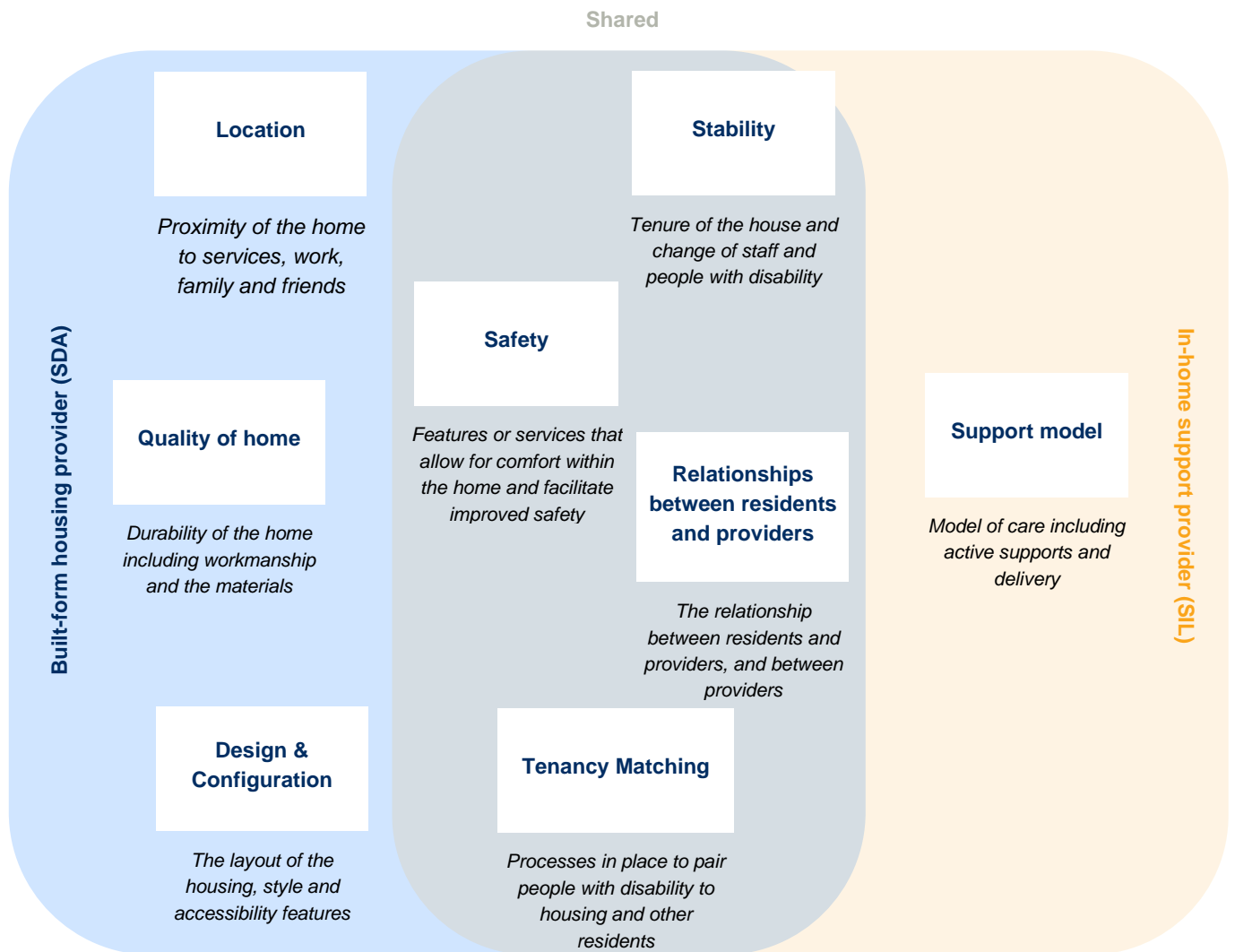


Figure 5: Disability Housing Outcomes Framework Levers

The Framework includes a list of outputs under each lever to provide a guide on what each provider can control and shared outputs. Having a clear understanding of the levers available to different providers can facilitate improved discussions and transparency between different providers, and between providers and people with disability.

The list of outputs is not extensive and is not provided to dictate how providers deliver their services. Instead, they provide examples of decisions providers can make that contribute to the achievement of the outcomes identified in the Framework.

## Where to from here?

In the subsequent stages of the Framework's development, SVA Consulting will continue to work closely with the sector to develop the data collection method and design an effective implementation process. This will include testing the Framework through a pilot.

For further information, please contact:

SVA Consulting [consulting@socialventures.com.au](mailto:consulting@socialventures.com.au)

## Appendix: Example data collection matrix

Priority outcome	Indicator	Measure	Person you can ask the question of	Data source	Comparable data source (useful for later comparison against)	Frequency with which you will gather the data	How data will be stored	Interpretation of increase/decrease
<b>Daily living</b> - people with disability are in control of their daily living routines	Change in frequency of positive interactions	Number of positive interactions with another person (Likert scale)	In-home support staff	Staff observations	Staff observations; other resident surveys	Weekly	Secure cloud-based system	<p>This indicator is intended to capture meaningful interactions with staff, friends and family, and the broader community.</p> <p>An increase is likely to indicate a positive support model and improvement across various outcomes.</p>



Priority outcome	Indicator	Measure	Person you can ask the question of	Data source	Comparable data source (useful for later comparison against)	Frequency with which you will gather the data	How data will be stored	Interpretation of increase/decrease
	Satisfaction with care received	I am happy with the support I get (Likert scale)	Person with disability	Resident survey or structured interview	Other resident surveys internally; externally	Weekly	Secure cloud-based system	A sudden or gradual decline in this metric is a flag for further inspection of the support model in the home.
	Daily self-care (personal hygiene, eating and care needs) met	My daily routine meets my needs (e.g. personal hygiene, diet, and sleep) (Likert scale)	Person with disability	Resident survey or structured interview	Other resident surveys internally; externally	Daily	Secure cloud-based system	A sudden or gradual decline in this metric may flag the need for further inspection of the support model in the home but may also indicate a decline in mental or physical health.

Priority outcome	Indicator	Measure	Person you can ask the question of	Data source	Comparable data source (useful for later comparison against)	Frequency with which you will gather the data	How data will be stored	Interpretation of increase/decrease
<b>Health</b> – people with disability feel physically, mentally, and emotionally healthy, and can access health services when needed	Satisfaction with access to health services	I can get help with my health when I need it (Likert scale)	Person with disability	Resident survey or structured interview	Other resident surveys internally; externally	Biannual	Secure cloud-based system	Help in this context refers to health practitioners. The greater the access to help through health services, the better opportunity a person has for good health. Declines in this metric may indicate barriers inside and outside the home in accessing health services. As a result, the cause for a decline should be identified.
<b>Relationships and community participation</b> – people with disability are active participants within the home and in their community	Social visits with family / friends who are not living with them	Number of social visits with family or friends in the last month (Likert scale)	In-home support staff	Staff observations or resident survey	Staff observations; other resident surveys	Biannual	Secure cloud-based system	An increase in this metric may be expected when the person first moves into a new home or if increased community participation is one of their goals. Some people may not prioritise social visits, and so this indicator would need to be considered and understood with regards to a person's individual social goals.

Priority outcome	Indicator	Measure	Person you can ask the question of	Data source	Comparable data source (useful for later comparison against)	Frequency with which you will gather the data	How data will be stored	Interpretation of increase/decrease
<b>Rights and voice</b> – people with disability can exercise their rights and responsibilities, and have valued roles in community	Ability to gain and/or keep valued roles in the home and community akin to others of a similar age (e.g. employment, volunteering, student, business or community leader)	My housing helps me gain or keep valued role(s) in employment, personal relationships, business, and/or the community (Likert scale)	Person with disability	Resident or family interview / survey  Employment / volunteer / student records Membership in advocacy groups	Other resident surveys internally; externally; population level data (employment, education, volunteering)	Annual	Secure cloud-based system	The goal is for this metric to increase or remain stable over time The types of roles may vary over a person's life based on their context and aspirations. Changes may indicate the location or configuration of the home is inappropriate for the person or issues with tenancy matching and/or the support model, and will require additional investigation.

Priority outcome	Indicator	Measure	Person you can ask the question of	Data source	Comparable data source (useful for later comparison against)	Frequency with which you will gather the data	How data will be stored	Interpretation of increase/decrease
<b>Independence</b> – people with disability exercise choice and control over decisions about their lives	Level of control over the front door of the home (who enters, when, and why)	I have a say over who comes into the house and when they come (Likert scale)	Person with disability	Resident survey or structured interview	Other resident surveys internally; externally; service agreements	Annual	Secure cloud-based system	<p>This metric is anticipated to vary depending on the circumstances of the person. While for some people, this may mean physical control over the front door and when they and others enter and exit, for others it may indicate their ability to express their preferences and have them heard regarding who enters, when and why, and their ability to leave when they choose.</p> <p>For those in shared living situations, consideration of both the front door and bedroom door may be necessary.</p> <p>A decline is a flag for further investigation into the accessibility of the home and/or support model.</p>

Priority outcome	Indicator	Measure	Person you can ask the question of	Data source	Comparable data source (useful for later comparison against)	Frequency with which you will gather the data	How data will be stored	Interpretation of increase/decrease
<b>Safety and stability</b> – people with disability are comfortable in their home and safe from harm	Sense of comfort	I feel comfortable in my home (Likert scale)	Person with disability	Resident survey or structured interview	Other resident surveys internally; externally	Annual	Secure cloud-based system	A decrease over time indicates an issue with levers – such as design and configuration, safety, stability, tenancy matching or support.