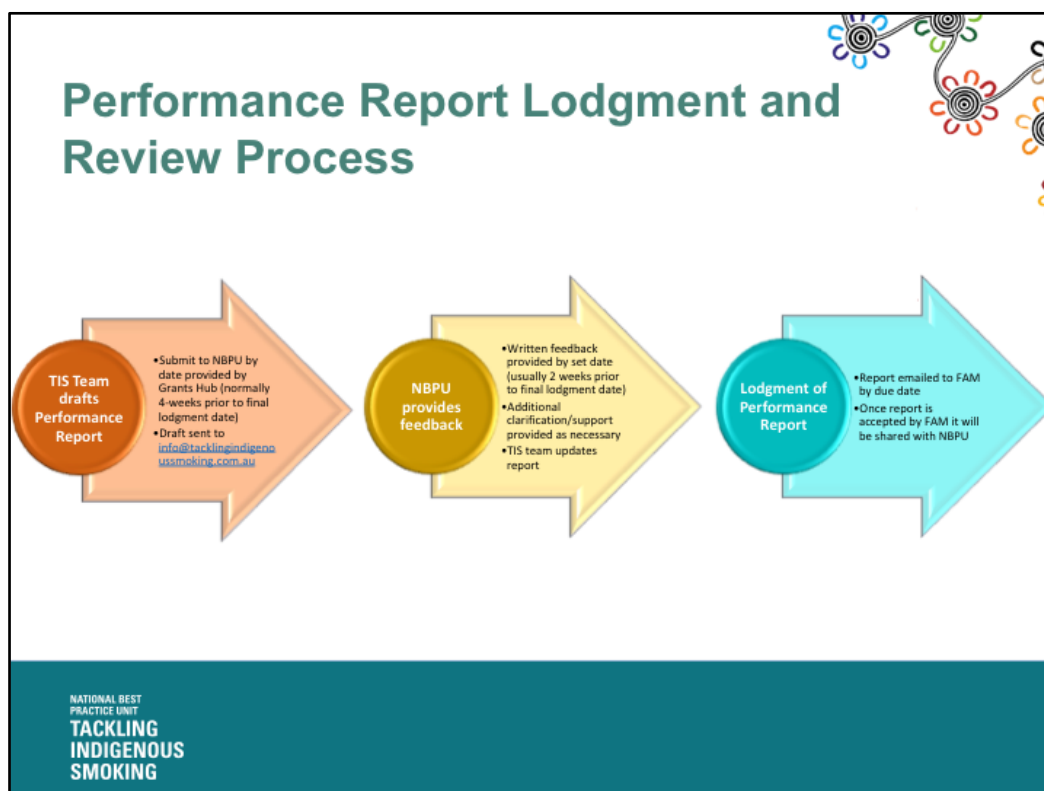


Hello TIS teams! Its reporting time again, and we are back to let you know about some of the updates to the PR that have been put in place by CIRCA – if you recall last time around we did say CIRCA were planning to overhaul the template and they have now done that and we hope those changes will make reporting easier this time around and strengthen the evaluation.

Before we begin I would like to acknowledge the Aboriginal and Torres Strait Islander people, traditional custodians of this land we are all on today. I acknowledge and respect their continuing culture, connection to country, and contribution they make to life in Australia. I pay my respects to elders past present and emerging.



1. So let's start with a reminder about the reporting process – you write your progress report then send it to us at NBPB 4 weeks before the final lodgment date. Your next draft report is due to NBPB by 31/1/21. **Can submit early if you wish, but because of staff availability we will not be able to provide feedback before 31/1**
2. We review the report and provide feedback within 2 weeks after that date, giving you another 2 weeks to make any amendments and send to the FAMs.
3. Once the report has been accepted by the FAM the report is shared with us.

For more detail around this process and the aim of support and feedback from NBPB v. FAMs please see extract from previous presentation



Performance reporting for 2020

- We recognise that the challenges carrying out activities because of COVID19 may still be relevant for this report so:
 - Report what you did
 - Explain any adapted activities
 - Account for any put on hold
 - Describe new (or extended) actions taken during this time

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As for the last PR we recognise the need to adapt plans, so once again report what you were able to do, explain any changes etc

Additional General Information Required

TACKLING INDIGENOUS SMOKING PROGRAM 6-MONTH PERFORMANCE REPORT	
General information <ul style="list-style-type: none">• Please refer to the guidelines provided for help in completing this template.• National Performance Indicators, outcomes related to each indicator and data measures are outlined at the end of this document.• Tick Yes/No boxes.• Supply numbers where you have them available and provide further explanation if required.• Additional space is provided for case studies and challenges/mitigation.• When your report is finalised, please also ensure that the Certification by Organisation form is completed.	
Name of your organisation	<input type="text"/>
Name of your TIS program	<input type="text"/>
Funding stream for TIS program (please tick one)	<input type="checkbox"/> RTCG (Regional Tobacco Control Grants), funding received in 2018 by 37 organisations <input type="checkbox"/> RPPG (Remote Priority Group Grant), funding received in 2020 by 4 organisations
Period the report applies to?	<input type="text"/>
Date the report was completed?	<input type="text"/>

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New Q on the front page asking you to indicate if you are funded under the original RTCG in 2018 or whether your are reporting on funding received under the new remote priority gran in 2020. contact us if you are not sure how to answer this question

Activity Type: Indicators 1, 5, 6

Challenge:

'Development and distribution of resources' as a single item

Solution:

Disaggregated so easier to complete and improve consistency of responses:

- Development of resources
- Social Marketing Campaigns
- Social Media activities
- Community Education
- Community Engagement (incl. event attendance/support)
- Distribution of resources not through social marketing, social media, community education, or community engagement
- Other (please specify)

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Ok so lets start with changes to reporting under each indicator. First thing to say – indicators have not changed, data you need to collect is not really different it is just that the reporting is more specific and focused (greater clarity around what you are doing and achieving)

So KPI 1 (and 5 and 6 because of overlap)

Small update to activity type – D&D was single item however as sometime you dev resources but distribute separately (eg at events) this activity has been disaggregated as you can see in the response categories for Activity Type.

Frequency responses: Indicators 1, 5, 6

Challenge:

Category choices did not cover all possible scenarios.

Solution:

Frequency category has been updated to make this easier to complete:

- Once
- Twice
- 3-4 times
- 5-7 times
- 8-12 times
- 13-18 times
- 19-24 times
- 25+ times

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Last time around we found the frequency responses for indicators 1,5,6 were challenging to apply. As promised CIRCA have adjusted these categories, to make it easier to complete and more useful for them to analyse – now just requires a simple number count

Measuring Reach: Indicators 1, 5, 6

Continue to use the usual Health Promotion definition:

The number and proportion of people willing to **participate** in activities or **engage** with the message

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So last time around there was some confusion about how to define reach and we all agreed that it should be defined using the usual health promotion definition of reach as number of people who participated/engaged with the message - for example by going up to a stall, taking brochures/written info, having a conversation etc. NOT just number who attended an event (especially if this was an event run by someone else that you attended). This continues to be the advice and....

Measuring Reach: Indicators 1, 5, 6

To help calculate proportion CIRCA would like you to indicate:

- Approximately how many community members, total, are in your TIS service delivery area (Q1)
- Approximately how many people, total, **are in that priority group population** (in your TIS service delivery region) (Q5)
- Approximately how many people, total, are in that **community member population (eg do not attend ACCHS)** within your TIS service area? (Q6)

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To help CIRCA present this in the usual format (proportion) they have introduced a new column which asks for some additional information around total population numbers on each of these indicators

New TIS map can help with finding out some of this information if you aren't sure (although we are confident you are aware of these stats given the importance for driving your activities)

Other advice re indicator 1 re definition of event and held v hosted remain the same as last time – check with the FAQs if you are not sure as we have updated these as well

Updates to Indicators 5&6



Challenge:

No space to provide evidence that you have reached a priority group or hard to reach groups such as non-ACCHS users

Difficult for CIRCA to demonstrate through the evaluation that this outcome has been achieved

Solution:

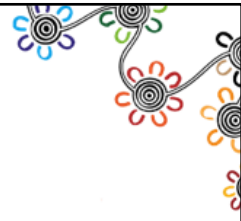
What evidence do you have for successfully reaching this priority group through this activity?

- We had informal chats with some activity participants/attendees
- We received survey responses at/after the activity
- This was a targeted event, where this priority group was the only/main audience
- We have administrative records
- Not sure
- Limited or No evidence
- Other, please specify

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so there is also a change that just applies to 5&6 not 1 –so new column Asking you to provide evidence of successfully reaching priority groups. Additional information which CIRCA can use to support evaluation outcomes and demo your success in achieving program KPIs

Updates to Indicators 6



Challenge:

Some times it is easy to forget that extending you reach is important within your funding area rather than outside of this region

Solution:

Reframing of Indicator 6 to focus on:

Increased reach into communities within your TIS service area

Includes new question about who was targeted:

- People who do not attend ACCHS
- Extending Geographical reach within your service delivery area
- Other people you don't typically reach

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and finally one update just for indicator 6 – this indicator is focused on extending your reach within your service area – so for example to people who don't usually use your service. However the previous wording of this question put the emphasis on geography making it seem that you needed to extend your reach outside of your funded region. This Q has therefore been reframed as a reminder that the funding you receive is to enable you to extend your reach across your service area, to engage communities and people who do not typically use your services or who live very remotely etc. includes a new Q

Indicator 2: Change to layout


of partnerships with other parts of your organisation or programs your organisation runs has been added to the data columns

Targeted partnerships now follows the same layout as the first question on partnerships more generally

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Indicator 2 has been updated so the layout is more consistent and clearer. First of all a new column has been added so that you can record partnerships with other services or programs within your own organisation

Secondly, the section on targeted partnerships now follows the same layout as the first section on generally partnerships. The data you need has not changed, however recoding is now more streamlined and differentiated






Targeted partnerships	Total number	No. formed in the last 6 months
Number of partnerships formed with other organisations/community leaders to assist in reaching pregnant women.		
Number of partnerships formed with other organisations/community leaders to assist in reaching other identified priority groups in your service delivery region (please also specify the priority group).		
Number of partnerships formed with other organisations/community leaders to extend geographical reach.		
Number of partnerships formed with other organisations/community leaders aimed at reaching people who do not attend ACCHS.		
Number of partnerships formed in your own organisation (for example, with other units/teams).		

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So this is how it used to look



	# of mainstream health services	# of other ACCHSs	# of schools	# of community organisations /sporting clubs	# of Government departments (local, state and federal)	# of individual community leaders	# of networks or interagency groups	# of partnerships with other parts of your organisation or programs your organisation runs	# Other (please specify)
How many organisations/community leaders have you partnered with to assist in reaching any identified priority groups in your service delivery region (e.g. pregnant women, young children, elders, etc...)? Please specify your priority group(s):									
How many of these partnerships were established in the last 6 months?									

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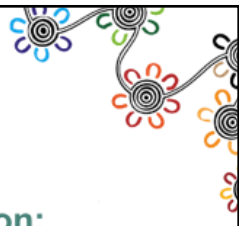
Now it looks like this – so you record the partnerships with different types of organisation for priority groups...



	# of mainstream health services	# of other ACCHSs	# of schools	# of community organisations /sporting clubs	# of Government departments (local, state and federal)	# of individual community leaders	# of networks or interagency groups	# of partnerships with other parts of your organisation or programs your organisation runs	# Other (please specify)
How many organisations/community leaders have you partnered with to assist in reaching people who do not attend ACCHSs?									
How many of these partnerships were established in the last 6 months?									

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And for reaching non-ACCHS users ...



Indicator 3: Clarifications added

Challenge:	Solution:
<p>Is this referrals made by the team or does it include those referrals made by the wider organisation?</p> <p>Gather more details in relation to the question: In the past 6 months, how many non-TIS funded staff in your organisation have undertaken Quitskills training?</p>	<p>Item now specifies that this is TIS team referrals</p> <p>Clarification question added: Of those non-TIS funded staff in your organisation who have undertaken Quitskills training, what were their roles?</p>

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A question under indicator 3 asks you to provide the number of written referrals made to Quitline in the past 6 months and last time we noted that CIRCA want to know about the number of referrals made by your team, not by your organisation. They have updated this question in line with this requirement.

They have also added to the Q about non-TIS staff doing quitskills training to find out the roles these people have in your org

THERE ARE NO CHANGES TO INDICATOR 4. SO FINALLY WE JUST WANTED TO CLARIFY SOMETHING THAT HAS PUZZLED A FEW TEAMS...

Avoiding double counting....

Important not to repeat the same data under different indicators (double counting)

But you can provide different data from the same activity under different indicators

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We noted last time that it is important to remember that the same data should not be repeated under different Indicators – only report something once. Double counting outcomes is not good evaluation practice. However as a few people have not been sure what we meant, we wanted to provide some clarity

Avoiding double counting....

You run an event and 100 people attend and engage with your health promotion activity. Some of them don't usually use the local ACCHS, but you don't record how many.

In the PR you record this under KPI 1 as reaching 100 people.

You also record this under KPI 6 as reaching 100 people

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Example 1:

Avoiding double counting....

You run an event and 100 people attend and engage with your health promotion activity. Some of them don't usually use the local ACCHS, but you don't record how many.

In the PR you record this under KPI 1 as reaching 100 people.

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So with the same data you can...

Avoiding double counting....

You run an event and 100 people attend and engage with your health promotion activity. Some of them don't usually use the local ACCHS, but you don't record how many.

In the PR you record this under KPI 6 as reaching 100 people.

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Or.....

Avoiding double counting....

You run an event and 100 people attend and engage with your health promotion activity. You record 20 of them as not usually using the local ACCHS.

In the PR you record this under KPI 1 as reaching 80 people.

And under KPI 6 as reaching 20 people.

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If we shift this example a little bit you can see how you might split the data to report under 2 indicators...

Avoiding double counting....

You run an event and 100 people attend and engage with your health promotion activity on the day. 50 of these people take a pledge at the event to have a smoke free home. On the run up to the day and during the event you use Facebook to promote the event and your TIS message. 200 people engage with your messages on social media, liking, sharing and tagging others. 20 of these people also pledge through Facebook to have a smoke-free home. When you cross check your records you find that 5 people also signed up on the day.

In the PR you record **the event** under KPI 1 as reaching 100 people.

You record the social media campaign run up to and during the event under KPI 1 as reaching 200 people.

You record the 65 pledges under KPI 4

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Alternatively you can provide different data from the same activity under different indicators, as this example demonstrates....



Thank you for listening

More information about the indicators and performance reporting is here:

<https://tacklingsmoking.org.au/monitoring-and-evaluation/reporting-tis-activities/>

and here:

<https://tacklingsmoking.org.au/monitoring-and-evaluation/tis-evaluation/>

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