**TACKLING INDIGENOUS SMOKING PROGRAM**

**6-MONTH PERFORMANCE REPORT**

**General information**

* *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.*

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| **Name of your organisation** | Click or tap here to enter text. |
| **Name of your TIS program** | Click or tap here to enter text. |
| **Funding stream for TIS program (please tick one)** | [ ] RTCG (Regional Tobacco Control Grants), *funding received in 2018 by 37 organisations*[ ] RPGG (Remote Priority Group Grant), *funding received in 2020 by 4 organisations* |
| **Period the report applies to?**  | Click or tap here to enter text. |
| **Date the report was completed?**  | Date |

# INDICATOR 1 – Implementation of evidence-based population health promotion activities aimed at preventing uptake of smoking and supporting the promotion of cessation.

**Please include details of each of the population health promotion activities you have delivered in the past 6 months.**

**NOTE:** Activities that target priority groups and have increased reach into communities should be reported on under Indicator 5 (priority groups) and Indicator 6 (reach).

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| **Type of activity** (Please choose from the drop-down list below) | **Name of population health promotion activity**  | **How many times was the activity delivered/ done in the past 6 months?** | **Location.** Include name of neighbourhood(s), postcode(s), Town(s), or region(s).N/A if activity is development of resources | **Approximately how many community members were reached by the activity?** Enter number below. N/A if activity is development of resources | **Approximately how many community members, total, are in your TIS service delivery area**? Enter a number below. |
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| **At your organisation** | **Yes/ No** |
| Have you produced at least one tobacco control poster/ banner featuring an Aboriginal and/ or Torres Strait Islander person or artwork? | Yes [ ]  | No [ ]  |
| Is there at least one tobacco control poster/ banner promoting smoke-free homes or cars in a public space in your organisation? | Yes [ ]  | No [ ]  |
| **In your service delivery region** | **Enter a number** |
| In the past 6 months, how many events have you held to support prevention of uptake of smoking and/ or smoking cessation? | Click or tap here to enter text. |
| In the past 6 months, how many community leaders have participated in population health promotion activities and events | Click or tap here to enter text. |

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| **Electronic Media** | **Yes/ No** |  |
| In the past 6 months, have you organised a broadcast on radio or television of a tobacco control advertisement?  | Yes [ ]  | No [ ]  |
| In the past 6 months, have you shared tobacco control information on social media?  | Yes [ ]  | No [ ]  |
| Does your organisation have tobacco control information on the website?  | Yes [ ]  | No [ ]  |
| Does your TIS program have its own dedicated website and/ or social media pages? | Yes [ ]  | No [ ]  |

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| **Case Study or Success Story**Please provide an example of a successful population health promotion activity you have carried out in the last 6 months. Please include how you have monitored this activity and provide any data or information that demonstrates the success of this activity against Indicator 1.  |
| Click or tap here to enter text. |
| **Description of challenges and mitigation**Please provide key challenges/ risks in delivering results against Indicator 1 and any strategies or approaches that you are using to address these.  |
| Click or tap here to enter text. |

# INDICATOR 2 – Partnerships and collaborations facilitate support for tobacco control

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|  | **# of mainstream health services** | **# of other ACCHS** | **# 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** | **# of other (please specify)** |
| How many organisations/ community leaders have you partnered with to assist in increasing the reach of TIS messages or activities to community members? | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| How many of these partnerships were established in the last 6 months? | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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|  | **# of mainstream health services** | **# of other ACCHS** | **# 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** | **# of 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, your children, elder, etc…)?Please specify your priority group(s):Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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| **Case Study or Success Story** Please provide an example of a successful population health promotion activity you have carried out in the last 6 months. Please include how you have monitored this activity and provide any data or information that demonstrates the success of this activity against Indicator 2. |
| Click or tap here to enter text. |
| **Description of Challenges and mitigation**Please provide key challenges/ risks in delivering results against Indicator 2 and any strategies or approaches that you are using to address these. |
| Click or tap here to enter text. |

# INDICATOR 3 – Increased access to Quit support through capacity building

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| **Quitline Referrals** | **Number** |
| Number of written referrals your TIS team has made to Quitline in the past 6 months. | Click or tap here to enter text. |
| Number of referrals your TIS team has made to other services for Quit support in the past 6 months, e.g. medical service, Quit support group. | Click or tap here to enter text. |

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| **Capacity building** | **Number** | **Text** |
| How many TIS funded positions does your organisation have, expressed in Full-Time Equivalency terms (FTE)?  | Click or tap here to enter text. |  |
| How many TIS funded positions does your organisation have that are currently filled, expressed in Full-Time Equivalency terms (FTE)?  | Click or tap here to enter text. |  |
| How many of the TIS funded staff positions are filled by Aboriginal or Torres Strait Islander people? | Click or tap here to enter text. |  |
| How many non-TIS funded positions with a major focus on tobacco control does your organisation have? | Click or tap here to enter text. |  |
| In the past 6 months, how many TIS funded staff within your organisation have undertaken Quitskills training?  | Click or tap here to enter text. |  |
| In the past 6 months, how many non-TIS funded staff in your organisation have undertaken Quitskills training?  | Click or tap here to enter text. |  |
| Of those non-TIS funded staff in your organisation who have undertaken Quitskills training, what were their roles? |  | Click or tap here to enter text. |
| Total number of current staff in your organisation? | Click or tap here to enter text. |  |
| In the past 6 months, how many other organisations have you assisted to establish, maintain or improve the provision of support for smoking cessation, including through providing or organising training (e.g., Quitskills)?  | Click or tap here to enter text. |  |

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| **Case Study or Success Story** Please provide an example of a successful population health promotion activity you have carried out in the last 6 months. Please include how you have monitored this activity and provide any data or information that demonstrates the success of this activity against Indicator 3. |
| Click or tap here to enter text. |
| **Description of Challenges and mitigation**Please provide key challenges/ risks in delivering results against Indicator 3 and any strategies or approaches that you are using to address these. |
| Click or tap here to enter text. |

# INDICATOR 4 – Reduced exposure to second-hand smoke

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| **How often were these aspects of smoke-free policies followed at your organisation, by staff and Board members, in the past 6 months? (Tick which applies)** | **Always** | **Often** | **Sometimes** | **Rarely** |
| No smoking indoors |[ ] [ ] [ ] [ ]
| No smoking outdoors within the boundary except in a designated smoking area (if there is one) |[ ] [ ] [ ] [ ]
| No smoking in a work vehicle | [ ]  |[ ] [ ] [ ]
| No smoking in the health service uniform  |[ ] [ ] [ ] [ ]
| No smoking in work time |[ ] [ ] [ ] [ ]

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| **Smoke-free organisations** | **Number** |
| In the past 6 months, how many organisations have you assisted to establish a smoke-free policy? | Click or tap here to enter text. |
| In the past 6 months, how many organisations have you assisted to review an existing smoke-free policy? | Click or tap here to enter text. |
| In the past 6 months, how many organisations have you helped implement an existing smoke-free policy (by, for instance, putting up or developing signage for them, finding and designating smoking areas from them, or helping them come up with and action other strategies to discourage smoking that are aligned with their existing policy)? | Click or tap here to enter text. |

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| **Smoke-free public spaces and homes** | **Number** |
| In the past 6 months, how many events in your service delivery area have you assisted to be smoke-free? | Click or tap here to enter text. |
| In the past 6 months, how many homes in your service delivery area have you supported to become smoke-free? | Click or tap here to enter text. |

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| **Case Study or Success Story** Please provide an example of a successful population health promotion activity you have carried out in the last 6 months. Please include how you have monitored this activity and provide any data or information that demonstrates the success of this activity against Indicator 4. |
| Click or tap here to enter text. |
| **Description of Challenges and mitigation**Please provide key challenges/ risks in delivering results against Indicator 4 and any strategies or approaches that you are using to address these. |
| Click or tap here to enter text. |

# INDICATOR 5 – Increased focus on priority groups, e.g. pregnant women

**Please include details of each of the population health promotion activities you have delivered in the past b6 months that have reached pregnant women and other identified priority groups in your service delivery region.**

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| **Name of Priority Group reached** **(please list only one priority group in each row)**Pregnant women, Young people, elders are noted as being key TIS priority groups but there may be other priority groups in your service region | **Name of activity**  | **Type of activity** (Please choose from the drop-down list below) | **Approximately how many people from the priority group were reached by the activity?** Enter number below. | **Approximately how many people, total, are in that priority group population (in your TIS service delivery area)?** Enter a number below. | **What Evidence do you have for successfully reaching this priority group through this activity?** (Please select all that apply below) |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item.Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | [ ]  Targeted event, where this priority group was the only/main audience[ ]  We had informal chats with some activity participants/attendees[ ]  We received survey responses at/after the activity[ ]  We have administrative records[ ]  Not sure[ ]  Limited or No evidence[ ]  Other, please specify: Click or tap here to enter text. |
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| **Case Study or Success Story** Please provide an example of a successful population health promotion activity you have carried out in the last 6 months. Please include how you have monitored this activity and provide any data or information that demonstrates the success of this activity against Indicator 5. |
| Click or tap here to enter text. |
| **Description of Challenges and mitigation**Please provide key challenges/ risks in delivering results against Indicator 5 and any strategies or approaches that you are using to address these. |
| Click or tap here to enter text. |

# INDICATOR 6 – Increased reach into communities within your TIS service area

**Please include details of each of the population health activities you have delivered in the past 6 months that have had a focus on increasing the reach of your TIS program within your TIS service area and reaching people who do not attend ACCHs.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of activity** | **Type of activity** (Please choose from the drop-down list below) | **Type of reach targeted**(Please select all that apply below) | **How many times was the activity delivered/ done in the past 6 months?**Choose from the dropdown menu | **Location** Include name of neighbourhood(s), postcode(s), town(s), or region(s). | **Approximately how many people from the priority group were reached by the activity?** Enter number below. | **Approximately how many people, total, are in that priority group population (in your TIS service delivery area)?** Enter a number below. | **What Evidence do you have for successfully reaching this priority group through this activity?** (Please select all that apply below) |
| Click or tap here to enter text. | Choose an item.Click or tap here to enter text. | [ ]  Reach to people who do not attend ACCHSs[ ]  Extending geographic reach *within* your service delivery area[ ]  Reach to other people you don’t typically reach |  Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | [ ]  Targeted event, where this priority group was the only/main audience[ ]  We had informal chats with some activity participants/attendees[ ]  We received survey responses at/after the activity[ ]  We have administrative records[ ]  Not sure[ ]  Limited or No evidence[ ]  Other, please specify: Click or tap here to enter text. |
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| **Case Study or Success Story** Please provide an example of a successful population health promotion activity you have carried out in the last 6 months. Please include how you have monitored this activity and provide any data or information that demonstrates the success of this activity against Indicator 6 |
| Click or tap here to enter text. |
| **Description of Challenges and mitigation**Please provide key challenges/ risks in delivering results against Indicator 6 and any strategies or approaches that you are using to address these. |
| Click or tap here to enter text. |

**REVIEW BY THE NATIONAL BEST PRACTICE UNIT (NBPU) – to be completed by NBPU**

|  |  |
| --- | --- |
| **Date received by NBPU** | Click or tap to enter a date. |
| **NBPU Project Officer recipient name** | Click or tap here to enter text. |
| **Date sent back to TIS team** | Click or tap to enter a date. |

**CERTIFICATION BY ORGANISATION**

|  |  |
| --- | --- |
| **Organisation name** | Click or tap here to enter text. |
| **Name and position of the person who completed the report?**  | Click or tap here to enter text. |
| **Contact email/phone for person who completed the report** | Click or tap here to enter text. |

**REPORT APPROVED FOR SUBMISSION TO THE DEPARTMENT OF HEALTH BY**

|  |  |  |
| --- | --- | --- |
|  | **Authorised Organisation Officer** | **Authorised Board Member** |
| **Name**  | Click or tap here to enter text. | Click or tap here to enter text. |
| **Position** | Click or tap here to enter text. | Click or tap here to enter text. |
| **Signature** | Click or tap here to enter text. | Click or tap here to enter text. |
| **Date** | Click or tap to enter a date. | Click or tap to enter a date. |

**Guidelines – completing the Performance Report template**

The purpose of the Performance Report template is to assist Regional Tobacco Control Grant recipients to report against consistent National TIS Performance Indicators in order to promote consistency in how performance is reported and measured. The National TIS Performance Indicators have been updated to reflect the current TIS program objectives and these indicators are specifically designed for use by and in relation to the work of the RTCG recipients. The National Performance Indicators form part of this document (see below).

**Important information**

When your report is finalised, please also ensure that the Certification by Organisation form is completed.

Each section of the report corresponds to a performance indicator. The report should be filled out with input from whole TIS team; RTCG recipients should take their time in filling out the report and data provided should be as accurate as possible.

The numbers being requested throughout the report will be used to track changes over time (not to compare performance across RTCG recipients as we are aware that the size of service delivery areas, populations and programs vary).

**General information**

* *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 in relation to each indicator.*
* *If you do not have data for a particular question, write either ‘no data available’ or ‘not applicable’.*
* *To report estimated numbers of community members or priority group members reached by an activity, please provide estimated numbers of the ‘end beneficiaries’ reached. For example, if an activity targeted the Priority Group of 'Pregnant Women' but was actually delivered to Midwives, please report the number of pregnant women those Midwives see or serve instead of the number of Midwives you reached through the activity.*
* *Numbers should represent individual community members, where possible – but when that is not possible (for social media and social marketing activities, in particular) the numbers should represent the ‘number of times people were reached’ rather than ‘estimated no. of community members reached by activity’*

**Indicator 1 –** data on a broad range of population health promotion activities you have delivered in the past 6 months.

 Projects that target priority groups and increased reach into communities should be reported under Indicator 5 (priority groups) and Indicator 6 (reach).

**Indicator 2 –** data on partnerships and increases/decreases in partnerships over time - please provide numbers requested as accurately as possible.

**Indicator 3 –** data on Quit support and capacity building in your organisation. We understand that not everyone will have accurate data on Quit referrals, but your best available data will be appreciated. We also ask about staff positions and training provided to staff as well as the training you have provided to other organisations.

**Indicator 4 –** data on smoke free policies, support for smoke free organisations, public events and homes. The questions about smoke free policies in your organisation may be difficult to answer but we would like you to make as accurate an estimate as possible, which we can track for changes over time.

**Indicator 5 –** data on increased focus on priority groups, particularly pregnant women. Include any additional groups you regard as a priority in your area. Do not repeat activities that you have already included in Indicator 1.

**Indicator 6 –** data on increased reach into communities looks at reach in terms of extending the number and types of people with whom you engage beyond those you typically reach, extending geographical reach *within* your service delivery area, and also reach in terms of people who do not currently attend ACCHS. Do not repeat activities that you have already included in Indicator 1.

**TIS National Performance Indicators**

|  |  |  |
| --- | --- | --- |
| Performance indicator | Outcomes related to indicator | Measure (data source)[[1]](#footnote-1) |
| Indicator 1:Implementation of evidence-based population health promotion activities aimed at preventing uptake of smoking and supporting the promotion of cessation | Increased community involvement in and support for initiatives to reduce the uptake of smoking and increase sustained cessation.Increased leadership and advocacy role of community leaders in tobacco control.Increased understanding by the community of the health impacts of smoking.Population health promotion activities are locally relevant and have community support. | No. and % of community members participating in population health promotion activities and events.No. and % of community leaders participating in population health promotion activities and events.No. and type of evidence-based population health promotion activities including social marketing, community education and community engagement.No. and reach as evidenced by social media analytics, other media activities, and production/distribution of health promotion materials. |
| Indicator 2: Partnerships and collaborations facilitate support for tobacco control | Collaborations and partnerships are built between TIS operations and external support for tobacco control initiatives. | No. and type of organisations involved in planning/implementing TIS activities.No. and type of collaborative projects/partnership activities.No. and type of partnerships with local service providers to enable increased geographical reach.No. and type of partnerships with local service providers to enable increased reach to priority groups. |
| Indicator 3: Increased access to Quit support through capacity building | Improved access to culturally appropriate support to quit.Increase in awareness of Quitline among community members and local health services.Increases in skills among those professionals in contact with Aboriginal and Torres Strait Islander peoples.Increases in Quitline referrals made throughout the TIS program. | No. of Quitline referrals. No. of referrals to other services for Quit support, e.g. Quit support groups.No. of FTE positions with a focus on tobacco control.No. of FTE positions with a focus on tobacco control that are currently filled.No. and type of assistance provided to organisations to establish, maintain or improve brief interventions.No. and % of staff with a major focus on tobacco control/TIS staff who have completed formal training.No. and % and role of staff who do not have a major focus on tobacco control (e.g. clinicians) who have completed formal training in brief advice, smoking cessation or tobacco control.  |
| Indicator 4:Reduced exposure to second hand smoke | Increase in smoke free homes, workplaces and public spaces. Increase in activities aimed at minimising exposure to passive smoking.  | No. and type of smoke-free policies adopted and/or reviewed by relevant organisations.No. of local events organised to be smoke-free.No. and type of assistance provided to organisations to establish, maintain or improve a smoke free policy.No. of smoke free homes and/or pledges to keep homes smoke free. |
| Indicator 5:Increased focus on priority groups, e.g. pregnant women | Evidence based approaches are being used to reach priority groups.Increase in population health promotion activities targeting priority groups, particularly pregnant women. | No. and % of people in priority groups participating in/reached by population health promotion activities.No. and type of population health promotion activities that have a specific focus on pregnant women and other identified priority groups. |
| Indicator 6Increased reach into communities  | Increase in reach (including geographical reach) of population health promotion activities.Increase in reach to community members, including those who do not attend ACCHS. | No. and location of activities conducted that extend geographical reach of activities.No. and type of population health promotion activities and partnerships that have a specific focus on people who do not attend ACCHS. |

1. Measures will also include qualitative data collected in the grant recipient performance reports and primary data collected by CIRCA as part of the evaluation. [↑](#footnote-ref-1)