



## Tips for completing your performance report

The performance report is your opportunity to show the difference your activities are making in your service area. The following tips for presenting this information should be read along with the information on the [TIS National Performance Indicators Page](#).

Please send your draft report to [Info@tacklingindigenoussmoking.com.au](mailto:Info@tacklingindigenoussmoking.com.au) by 31/1/23, copying in your NBPU TIS project officer. Remember to send us any attachments you will include in your final submission.

### General Advice

- Include the full range of information about what is changing in your region. One way to do this is to make reporting a team effort. For example, if the organisation manager or TIS Coordinator is responsible for writing the report, they could sit with the team and go through the key points before they start writing.
- You need to show how each of your activities is making a difference in the community. Think about what has changed since the last report (outcomes).
- Don't just say that something has changed, show how you know change has happened. What evidence do you have that your activities have made a difference in community? For example, feedback from community on your activities, survey data, number of pledges, etc. Please report this data in your success stories.
- Do not add photos or other images to the body of the report. The template was not designed to include photos. Add them as attachments to your report, along with examples or links to resources you have produced such as videos or posters.
- Make sure you list all of your activities under the appropriate TIS Performance Indicator. Do not report the same data from one activity under different Indicators. The following guide describes what information goes under each Indicator.

### Indicators 1, 5 & 6

Activities reported under Indicator 1 are population health promotion activities focused on broad community engagement. Activities focused on priority populations (for example work with youth or pregnant women) should be reported under Indicator 5. If the activities are designed to extend your reach into populations you don't typically work with (for example, people living in remote areas) they should be reported under Indicator 6.

Activities listed in the dropdown box under the 'Type of Activity' column for these Indicators include:

- Social marketing – tv and radio ads, billboards, printed ads (for example in the local paper)
- Social media – marketing and education campaigns on Facebook, Instagram, TikTok etc
- Community education – school programs, education sessions run with community groups (for example mums and bubs groups, men's groups etc)
- Community engagement – stall at a community event, hosting your own event (for example World No Tobacco Day (WNTD)), working with sports teams.
- Development of resources – this is the activity description to choose if you have developed/updated resources in this period but not yet had the opportunity to use them.
- Development and distribution of resources not through social media, community education etc. - Use this description if you have developed resources and distributed them by mailout, or if you have provided them to partner services/organisations to distribute.

### Useful definitions for Indicators 1, 5 & 6

- **Reach** is defined as the number and proportion of people willing to **participate** in activities or **engage** with the message. It is not just the number of people who attend an event.
- For the question that asks: *In the past 6 months, how many events have you held to support prevention of uptake of smoking and/ or smoking cessation?* 'held' means 'hosted by'. Events organised by another organisation that you participated in are not counted.

- For this question **event** means a large event: a big footy game, NAIDOC week rallies, WNTD community barbeque. Education sessions provided in schools or at community groups are not counted. Events you collaborate on with others can be counted if you are the host or co-host.

### Reporting repeated activities

If you have one activity that is repeated in different locations with people from different communities attending each time, report the activity by individual location (one row for each location). This is so CIRCA can identify differences in reach and frequency of activity in different locations in your service area. For example, if you held the same event in 2 different suburbs - Nosmokes Bay and Smokefree - which are both in the same city (Port Freetown), and only people from the suburb the event was held in attended each event, report the activity using a separate row for each location:

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.
Community Education <small>Click or tap here to enter text.</small>	No Smokes School Program	Once	Nosmokes Bay	20	1000
Community Education	No Smokes School Program	Once	Smokefree Town	15	1000

If you repeat the same activity in different locations, but know the people attending are the same because they are travelling from different communities for the event, you should report this activity in a single row as your reach is the same. For example, if you held the same event in 2 different suburbs - Nosmokes Bay and Smokefree - which are both in the local town of Port Freetown, and the same people attended both events, label the location as Port Freetown region not as Nosmokes Bay and Smokefree, but report that you held this activity twice:

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.
Community Education <small>Click or tap here to enter text.</small>	No Smokes Health Promotion stall	Twice	Port Freetown region	35	1000

### Reporting activities with a broad reach (TV and radio campaigns, social media activities)

Sometimes you might run a radio or TV campaign that covers your entire region or even reaches beyond your funding area. You should be able to get overall viewing figures for the region, but it can be hard to get more detailed data that shows where viewers are located within that region. You might be tempted to report the same data twice – once under Indicator 1 and again under Indicator 6 because you know the advert aired to people you don't often reach. However, you should not do this as it means the same data will be counted twice, and the evaluation will be less accurate. NBPU recommend using the following rule of thumb to decide where to report the data:

- If it is a local community radio or TV, report this under Indicator 1;
- A broader media reach such as regional or national station, that you know broadcasts beyond your boundaries should be reported under Indicator 6 as your reach is definitely extending out, even if we don't know by how much;
- If the ads are targeting a priority population, then the data goes under Indicator 5, whether aired locally, regionally or nationally;
- If the ads are targeting people who are hard to reach – for example people who don't usually use your service - you can report this under Indicator 6.

Campaigns run on social media have the same challenge related to reporting reach. Use the same rule about whether a campaign is targeting specific members of the population to help decide where to report your activity. For more information on how to monitor, evaluate and report your social

media activities download the narrated PowerPoint: [Monitoring and reporting on social media activities](#).

### Reporting the number of community members living in a service delivery area

Most teams get their population data from the ABS, or from their host organisation. You can also find this through the TIS interactive map on the website: <https://tacklingsmoking.org.au/about-the-tis-program/tis-teams/>

- For Indicator 1, report the total number of Aboriginal and/or Torres Strait Islander people living in your service delivery area (the number will be the same in each row);
- For Indicators 5 & 6, report the total number of people from the priority group your activity focused on, who live in your service delivery area (numbers will be the same for each priority group);

Finding data for populations that are 'hidden' or embedded across the community – such as pregnant women, LGBTQI+ population might be a challenge. This is why you are only asked to *estimate* this number.

One solution to getting local population numbers for a hidden group might be to ask a local organisation or community group who represent that population to provide you with an estimate. This might be a group you are partnered with to increase reach to this population.

It can also be difficult to know who you are not reaching in terms of Aboriginal or Torres Strait Islander people who don't usually use your service (Indicator 6). It may be tricky to identify numbers in an urban setting if people are embedded into the broader local community. In remote or regional settings where there are discrete geographically located communities, you might have a better idea of where/who your service doesn't reach. If you know how many people use your service already, subtract this number from the number of Aboriginal and Torres Strait Islander people living in your service area. The number you are left with will provide an estimate of the number of people not being reached.

### Indicator 2

Partners and collaborators are any organisation (or service) you work with on events or other activities. This includes any ongoing formal (MOU) and informal relationships with schools, other ACCHSs and other community organisations. This should be an active relationship:

- Q1 includes *all* ongoing partnerships – you only need to provide a number, not a list of organisations, except for the column 'Other' where you are asked to specify the type of organisation;
- Q2 is focused on new partnerships developed over the current reporting period (so you may have partnered on an activity during this time period or have started to plan/work together for a future activity) – as for Q1, report numbers only except for the column 'Other';
- Q3 & Q4 ask you to provide the same information but with a focus on priority groups *only* - as for Q1, report numbers only except for the column 'Other'.

#### Useful definitions for Indicator 2

Even though this Indicator talks about partnerships with **organisations**, it is better to think about this in terms of **services**. So, if you are partnered with one service in a large organisation (for example a smoking cessation clinic that you refer clients to) that is one partnership. If you then develop a partnership with a different service in the same organisation (for example a mums and bubs group) then you should record this as two partnerships, even though it is only one organisation. This will not be double counting as the responses to each question will be treated separately. There is no intention to sum these numbers.

**Community leaders** are anyone with influence in a specific community. This might include Elders, ambassadors, CEOs of organisations, young people who have done leadership courses and so on. For this question community leaders should not be double counted – so if you have already noted a partnership with an organisation under column 4 for example, don't also count the CEO separately under column 6 as this column refers to partnering with a leader as an *individual*, not as part of an organisation.

### Indicator 3

The focus of this Indicator is on building capacity in your community for tobacco control activities. The information reported under this indicator has reduced for 2022/23. This is because Quitskills

training is no longer available and TIS teams are not permitted to provide training to clinical or other staff under the current guidelines. You are only required to report:

- Number of referrals to Quitline or other smoking cessation support services;
- Information re number of staff focused on tobacco control in your organisation (TIS funded and non-TIS funded positions).

For this Indicator you should only provide numbers in the boxes labelled 'number'. You do not need to provide text. You only need to provide detailed written information in the column labelled 'Text'.

If you work as a consortium, the FTE for all of the consortium members who work on the TIS program should be presented.

There is no requirement for a case study or success story for this indicator.

#### **Indicator 4**

This Indicator covers the support you give communities to be smoke free at home and in the car, as well as to organisations to develop, review or implement smokefree policies. There is no expectation that you will be 'policing' the policies you help to review and/or update – your role is to support the organisations to make a change. The report places your own organisational policies at the top of the agenda as it is recognised that it is important for TIS funded organisations to be setting the example (Q1).

CIRCA recognises that most teams will be reviewing policies, or supporting implementation (rather than supporting policy development) because state and territory legislation for smokefree workplaces means organisations will already have a policy. It is ok if the question about developing policies is 0. This simply reflects where the program is at and the context in Australia in 2022.

#### **Success stories and case studies**

Your success stories are very important. They provide context for your activities and evidence of change and impact. Give as much detail as possible. Use the templates on the website to help you write your [success story](#) or [case study](#). Case studies and success stories are very similar. The difference is the point of view from which the story is written:

- a success story is written from your point of view as an organisation running an event
- a case study is written from the point of view of the participants.

Some tips to help you write your stories:

- Include the collaboration and engagement you do with community when planning and designing activities. It might be obvious to you that this is happening because it is just the way you work – but CIRCA will only know this if you include this information in your report;
- Report a different story for each Indicator. Even if a story only had some success but could have been improved in some way, it is important to include it;
- Make sure you focus on the part of the story that shows how your activities are making a difference to tobacco use in your community;
- When reporting numbers (quantitative data) include the total number of people you had contact with as well as the number who made a change (for example, 14 of the 20 people attending the education session pledged to be smoke free);
- Include feedback from community on your activity – what did they like, what could have been better?

#### **Challenges and Mitigation**

It is important to report the challenges you have faced for different activities and to explain how you are going to address these challenges (mitigation). Reflecting on these demonstrates involvement in the [CQI process](#).

If you planned activities, but were unable to carry them out (for example, because of COVID19 restrictions, extreme weather conditions etc.). Discuss what you did achieve in this period. You can describe what you did to plan the activity - for example, community consultation, development of resources. Then explain why the activity could not be completed and how you have addressed this – for example, it was not possible to hold the event face to face so you ran a smaller online event and will run the full event face to face once circumstances change.