



Australian Government

Department of Health

Submission to the Productivity Commission's Draft Indigenous Evaluation Strategy

Introduction

The Department of Health, (the Department) welcomes the opportunity to comment on the draft Indigenous Evaluation Strategy (the Strategy) released by the Productivity Commission (the Commission). The Department supports the aim of the evaluation: to improve the lives of Aboriginal and Torres Strait Islander people by ensuring that policy and program decisions are informed by high quality and relevant evaluation evidence.

The Strategy describes general principles of high quality evaluation and provides guidance on how these principles should be applied in the context of evaluating programs affecting Aboriginal and Torres Strait Islander people. Adopting the principles outlined will ensure that a systematic approach is taken to evaluations affecting Aboriginal and Torres Strait Islander people. It will have an impact on mainstream programs (that meet the relevant Indigenous Evaluation Threshold Assessment) in the Department. In implementing the Strategy, the Department will need to consider the implications in areas such as governance, resourcing, evaluation practices, and skills development. The Department considers it is important to adopt a maturity approach, and to empower agencies to determine evaluation priorities and Indigenous Evaluation Threshold Assessment criteria. It will also be important to clarify how each agency's performance under the Strategy will be evaluated.

The Department values the ongoing engagement of the Commission in the development of this important work.

Sector concerns

The Department is aware that the Aboriginal Community Controlled Health sector has expressed some concerns regarding the proposed actions, in particular whether these actions are consistent with a broader push by Indigenous peak bodies to streamline processes designed to improve outcomes for Aboriginal and Torres Strait Islander people. Ms Pat Turner, the CEO of the National Aboriginal Community Controlled Health Organisation and co-chair of the Coalition of the Peaks, has expressed concerns about the potential cost and administrative burden of the Strategy. The Department would therefore encourage the Commission to continue to engage with the sector prior to finalising the Strategy to ensure that these concerns are addressed.

Alignment between the Strategy and the new National Agreement on Closing the Gap

A new National Agreement on Closing the Gap (National Agreement) has now been agreed between jurisdictions and Aboriginal and Torres Strait Islander leaders. The National Agreement will include new accountability measures to be embedded across governments and systems. A stronger alignment between the Strategy and the National Agreement will enable a more consistent and streamlined approach across governments. In particular, there are opportunities to embed the monitoring and reviewing requirements of the Strategy within the reporting and accountability requirements under the National Agreement. Aligning the Strategy with the National Agreement will also foster policy cohesiveness, particularly with respect to how the principles and priorities of the Strategy link with the new Priority Reform Areas and contribute towards the collective objective to Closing the Gap.

Potential need for an iterative approach

The Department supports the maturity approach outlined in the Strategy, recognising progressive improvement in evaluation planning, practices and engagement over time and notes that progressive improvement requires both a strong focus on building evaluation/engagement capacity and ensuring that policy and program areas have access to, or are able to collect, the data they need to effectively undertake robust evaluations. While there are areas of particular strength within the Department, particularly in relation to Indigenous specific programs, a longer-term focus may be required to reach the desired levels of maturity envisaged under the Strategy.

Guiding Principles

The Department supports the Guiding Principles of the Strategy and in particular the overarching principle of centring evaluation practice in Aboriginal and Torres Strait Islander people's perspectives, priorities and knowledge. As indicated in the Department's response to the Draft Issues Paper in July 2019, these Guiding Principles have informed the approach that the Department is taking with key evaluations under the Indigenous Australians' Health Programme (IAHP) (e.g. the IAHP Primary Health Care Systems Evaluation, Australian Nurse Family Partnership Program and Tackling Indigenous Smoking). Experience from these evaluations indicates that current arrangements for ethics approval could be streamlined, particularly for national evaluations that operate across multiple jurisdictions. Consideration could be given to the establishment of a national ethics board to oversee evaluations impacting Aboriginal and Torres Strait Islander people. This could potentially be implemented through the proposed OIPE or the Indigenous Evaluation Council, but it is suggested that broad consultation would be needed to further explore this proposal should it be progressed.

Mainstream service providers

The Strategy's focus on mainstream policies and programs is critical, notwithstanding the need to adopt a maturity approach.

Mainstream services play a major role in service delivery for Aboriginal and Torres Strait Islander people, but may benefit from improved data capability to evaluate outcomes for this population. Early engagement with mainstream policy and program areas will be critical to build these areas' capability to incorporate and evaluate their services for Aboriginal and Torres Strait Islander people.

Ongoing governance measures will need to be established to coordinate the ongoing implementation of the Strategy, including but not limited to:

- the ongoing assessment of policies and programs for evaluation (Action 1), including that evaluations are planned early before policies and programs are implemented;
- development and prioritisation of an annual rolling Three Year Evaluation Forward Work Plan (Action 1);
- indigenous Evaluation Assessments are undertaken for prioritised evaluations (Action 2); and
- the publication of evaluation reports (Actions 7, 8 and 10)

It may be worth considering whether all (significant) evaluations should explicitly include a section on the potential impact on Aboriginal and Torres Strait Islander people in their evaluation plan, whether or not they meet the relevant threshold for evaluation need.

Opportunities for greater alignment of the Evaluation Strategy with the National Agreement on Closing the Gap (as mentioned above), and also the 2020-25 National Health Reform Agreement (NHRA), should be explored and leveraged wherever possible.

Through the NHRA, all governments have committed to work together to deliver safe, high quality care driven by best practice, and to a nationally coordinated program of system-wide reforms that will improve health outcomes for all Australians, and ensure the sustainability of the Australian health system. Some reform activities make provision for targeting population groups, including Aboriginal and Torres Strait Islander people. This includes a commitment that Australian governments monitor the impact of NHRA reforms through Aboriginal and Torres Strait Islander-led evaluation, including assessing the differential impact prior to and during implementation, and making appropriate changes in partnership with Aboriginal and Torres Strait Islander organisations and communities.

The Department's Response to Actions

ACTION 1	AGENCIES SHOULD SYSTEMATICALLY IDENTIFY EVALUATION PRIORITIES AND PUBLISH EVALUATION FORWARD WORK PLANS
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Response:

The Department considers that the National Agreement and the NHRA could provide key mechanisms to progress some of the intended objectives of the Evaluation Strategy. In particular, there are opportunities to embed the monitoring and reviewing requirements of the Strategy within reporting and accountability requirements under the new National Agreement the NHRA. This approach would achieve significant efficiencies, while reducing the need for additional resourcing, or significant re-distribution of existing resources from critical policies and programs.

Ongoing engagement with the Aboriginal Community Controlled Health sector will be critical to ensure that sector concerns are addressed (see overarching comments). We also note that significant involvement in evaluations may also be required by Aboriginal and Torres Strait Islander stakeholders.

The Department is undertaking a five-year (2018-19 to 2022-23) evaluation of the Australian Government's investment in Aboriginal and Torres Strait Islander primary health care under the IAHP. The evaluation will explore the barriers, enablers and changes needed in different parts of the primary health care system to improve outcomes. The evaluation will help inform future policy and program decisions and improve the system-wide understanding of Aboriginal and Torres Strait Islander primary health care needs. The evaluation will include the development of a five-year monitoring and evaluation framework (due in 2023).

We also note that while developing such a forward work plan under the IAHP is significantly aided by access to high quality existing administrative data, a focus on robust data feasibility assessments is required to identify and address data gaps and data quality in publicly available data holdings. Where administrative data may be less robust, such as in mainstream programs, the challenge of implementing Action 1 and the importance of data feasibility assessments is fundamental but likely to be higher.

ACTION 2	NEW POLICIES AND PROGRAMS AFFECTING ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE SHOULD BE SUBJECT TO AN INDIGENOUS EVALUATION THRESHOLD ASSESSMENT
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Response:

The Department supports the proposal to adopt a maturity approach, to enable progressive improvement in evaluation planning and practice overtime. In delivering Action 2, additional

resources and support will be required for line areas to ensure that the Indigenous Evaluation Threshold Assessment (IETA) is conducted in a robust and effective way.

It is recommended that the OIPE works with agencies to provide guidance, assistance and support in developing IETA criteria. Through its Evaluation Centre, the Department is continuing to build its evaluation capability across the organisation, and would welcome the opportunity to work further with the OIPE and to progress this important agenda.

It is recommended that Aboriginal and Torres Strait Islander people and Indigenous peak bodies be involved in the design, implementation and evaluation process, and form part of the IETA development process. The Department also encourages a clear, ongoing role for consumers and carers as appropriate, such as with respect to mental health system planning, design, monitoring and evaluation.

The Department supports the proposal that all New Policy and Program Proposals that would have a significant and/or differential effect on Aboriginal and Torres Strait Islander people include an appropriate proportion of funding to support evaluation functions. The Department of Finance could be consulted on an acceptable proportion of funding, but for example, between 5% -10% (or between 1% - 5% for bigger proposals) of the total program budget of each new proposal could be allocated for evaluation purposes. There should be some flexibility in type of funding to provide agencies with the option to conduct internal or external evaluations, depending on the nature of the evaluation and the skillset available.

ACTION 3	THE OFFICE OF INDIGENOUS POLICY EVALUATION SHOULD PROVIDE GUIDANCE TO AGENCIES ON CONDUCTING EVALUATION IN LINE WITH THE PRINCIPLES OF THE INDIGENOUS EVALUATION STRATEGY
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Response:

Consideration should also be given to how this guidance can best be provided for activities led by states and territories, and how the Commonwealth can work with the states where possible to embed core principles.

Another potential key role for the OIPE could be to support the establishment of a national ethics council for evaluations impacting Aboriginal and Torres Strait Islander people and communities. The absence of such a council presents both time and resource constraints for governments and stakeholders when planning and commissioning policy and program evaluations, particularly across multiple jurisdictions. Again, broad consultation would be needed to further explore this proposal should it be progressed.

Guidance will be of particular importance for mainstream program areas, where there may be a less well-developed understanding of important principles around working with Aboriginal and Torres Strait Islander people and stakeholders, more broadly and in terms of conducting evaluations.

ACTION 4	AGENCIES, SUPPORTED BY THE HEAD OF EVALUATION PROFESSION, SHOULD ENSURE THEY HAVE ACCESS TO THE SKILLS THEY REQUIRE TO UNDERTAKE OR COMMISSION EVALUATIONS THAT ARE CONSISTENT WITH THE STRATEGY
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Response:

To support high quality evaluation of programs, a wide range of skill sets will be required such as in program logic, qualitative and quantitative data, knowledge about policy and programs, research, data literacy, evaluation expertise and cultural competency. This combination of skills takes time to develop and can be resource intensive.

It is recommended that OIPE host a tender panel for agencies to source professional and skilled consultants to perform and conduct evaluations, if it is required.

It is recommended that agencies should demonstrate how they will build their evaluation capability to support high quality evaluation practices. As mentioned, the Department is committed to continuing to build its evaluation capability across the organisation and has established an Evaluation Centre that could be positioned to provide high quality and consistent advice to line areas to support implementation of the Strategy in collaboration with line areas.

The Department supports appropriate evaluation competency training for agency staff, and dedicated budgets to support capacity development.

The Department supports development of a strategy by the Head of Evaluation Profession to build a cohort of Aboriginal and Torres Strait Islander evaluators within the Australian Public Service (APS), establishing and strengthening secondment and mobility opportunities for evaluators, and facilitating an APS-wide community of practice. The Public Service Commission's Indigenous Workforce Strategy could also be leveraged to diversify and strengthen the pathways into and across the Commonwealth Public Sector for Aboriginal and Torres Strait Islander people to assist with building evaluation capability.

ACTION 5	AGENCIES SHOULD ENSURE THAT THEY HAVE ACCESS TO, OR ARE ABLE TO COLLECT, THE DATA THEY NEED TO EFFECTIVELY UNDERTAKE EVALUATIONS UNDER THE STRATEGY
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Response:

The Department acknowledges the importance of drawing on qualitative information, as well as quantitative data, to measure outcomes and accessing high quality data to effectively undertake evaluations. In delivering Action 5, engagement/appropriate partnership with Aboriginal and Torres Strait Islander peoples and stakeholders in the development, collection and use of data will support the accessibility and use of data.

Agencies should also consider having systems in place for intelligence gathered during the program and policy implementation for ongoing quality improvement purposes.

The importance of implementing automated data collection where possible, and storing data in an appropriate and agreed location should be acknowledged, and would help improve data quality and discoverability, as well as cost effectiveness of data storage.

The Department suggests that the importance of cultural safety, in order for Aboriginal and Torres Strait Islander people to feel safe to identify, also be acknowledged.

ACTION 6	A DATA DICTIONARY SHOULD BE DEVELOPED TO GUIDE AGENCIES ON COLLECTING AND USING DATA ON CORE OUTCOMES THAT ARE IMPORTANT FOR ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE
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Response:

The Department supports the Australian Institute of Health and Welfare (AIHW) as the leading agency to develop a data dictionary by working with Aboriginal and Torres Strait Islander people/Indigenous peak bodies. The Department considers that a data dictionary would be a useful tool in a broad range of contexts, and existing state and territory health data and linkage definitions may assist in informing its development.

Identification of indicators and associated data requirements will need to be based on establishment of agreed priorities and a phased approach. This action is likely to be costly and may take considerable time.

In progressing this work, the Department further recommends that the AIHW engage with consumer and carer representatives through Aboriginal and Torres Strait Islander people, the Aboriginal Community Controlled health sector/Indigenous peak bodies, as well as organisations such as the National Mental Health Consumer and Carer Forum, and Lived Experience Australia.

The Department also considers this would be a useful tool in a range of contexts, including the NHRA in developing performance measures for the healthcare pathway that specifically considers representation of Aboriginal and Torres Strait Islander peoples' experience.

ACTION 7	ALL EVALUATION REPORTS SHOULD BE PUBLISHED
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Response:

Most evaluations conducted under the IAHP have been publicly released, however the Department also notes that the decision to release evaluation reports is generally at the discretion of the Government and there may be instances where public release is not deemed to be appropriate. This can occur for a range of reasons, including where there may be particular sensitivities and/or confidentiality requirements related to organisations involved, and some policies and programs can be associated with greater risks to privacy and confidentiality. Publication should adhere to normal parliamentary protocols.

Privacy and confidentiality are an important consideration, and information that could potentially identify individuals or organisations needs to be treated with care. Consultation with communities and/or organisations is required to determine the risk.

It is recommended that there be a requirement to share findings from evaluation reports with the people/organisations involved in the evaluation initially, and prior to making the reports publicly available.

ACTION 8	AGENCIES SHOULD PUBLISH AN ACCESSIBLE EVALUATION REPORT SUMMARY
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Response:

In addition to the comment above, the Department also notes that the development of such reports will need to be built into the scope of future evaluations, and recommends that agencies work with relevant stakeholders as appropriate and required – such as with the National Mental Health Consumer and Carer Forum with regard to inclusive and culturally appropriate mental health language.

It is recommended that agencies report on evaluation outcomes and future planning to the OPIE. This will determine if the evaluation recommendations affect policy and program change.

ACTION 9	A CENTRAL EVALUATION CLEARINGHOUSE SHOULD BE ESTABLISHED
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Response:

A clearinghouse hosting a library of evaluation and studies undertaken would provide a valuable resource, noting that the scope will need to be well-defined. The Department suggests that collections of evaluations could be streamlined with a requirement for management letter summaries from agencies, and to show completion for all stages. The cost of establishment and maintenance would need to be considered, and it may also be possible to link this action to existing clearinghouse activity and capability. The Department funds the Australian Indigenous Health/InfoNet which makes available information and resources to support the delivery of, and access to, high quality, culturally appropriate health care and services to Aboriginal and Torres Strait Islander Australians. The Health/InfoNet is a Level II Research Centre within Edith Cowan University..

It should be noted that there is existing work to establish a clearinghouse for Aboriginal and Torres Strait Islander Suicide Prevention, designed to encourage and support the development and implementation of culturally safe and evidence-informed suicide prevention programs across Australia.

ACTION 10	AGENCIES SHOULD PUBLISH A RESPONSE TO EVALUATION FINDINGS
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Response:

The Department acknowledges the importance of publishing a response to evaluation findings to inform future program and policy design. In delivering Action 10, support from the Government would be required on a case-by-case basis.

Making this a blanket requirement for all evaluations disregards the potential need for consideration of risks and sensitivities. Government and Ministers would need some level of discretion with respect to whether to publish a response or not.

ACTION 11	AGENCIES PERFORMANCE AGAINST THE STRATEGY SHOULD BE MONITORED BY THE OFFICE OF INDIGENOUS POLICY EVALUATION
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Response:

The Department considers that a strong alignment between the Strategy and the New National Agreement is critical. In delivering Action 11, consideration should be given to embedding monitoring and reviewing requirements of the Strategy within the reporting and accountability requirements under the new National Agreement.

In performing this role, the Office of Indigenous Policy Evaluation (OIPE) should provide clear guidelines to Portfolio Agencies including the expectation and methodology against which performance will be assessed.

OIPE should promote good practice and work with agencies to improve performance, where required.

ACTION 12	THE STRATEGY SHOULD BE SUBJECT TO INDEPENDENT REVIEW AFTER FIVE YEARS
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Response:

This is consistent with good practice. It is suggested that an interim review be undertaken two years after implementation of the Strategy (with the endorsement by the Australian Government) to consider whether further amendments and/or improvements could be embedded within the Strategy, prior to commencement of the independent review.