CRM Fidelity Study

Part Four: LifeJet Protocol Reflections

Acknowledgments

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Exective Summary

In this report we present findings related to the use of the CRM LifeJet (LJ) protocols; The Good Life Album, Camera, Compass and Map. We explored the usefulness, quality, and completion frequency of the LifeJet processes and documentation practices.

Findings demonstrated that the LifeJet processes of identifying strengths and values identification, setting meaningful goals and action planning are seen by consumers and staff as highly valuable to supporting recovery. Moreover, consumer and staff ratings indicated that these processes are being implemented at a high level during support interactions. Feedback of consumer experiences highlighted the connection of these activities to processes asserted throughout consumer literature as being pivotal to recovery; gaining a positive sense of self (identity), hope, meaning and purpose, and enacting personal power (responsibility). Undertaking the LifeJet processes was also seen to enhance confidence, motivation and self-efficacy.

Whilst most consumers and staff rated the LifeJet processes as being valuable to recovery it was found that there are challenges to be addressed in present documentation and recording practices. Data extracted from Neami's consumer database revealed that up to 45% of consumers over the period July 2012 to June 2014 did not have one of any of the LifeJet protocol documents recorded in Carelink+ as completed. Of those recorded as completed, 62% were not recorded as being reviewed.

Completion rates compared against timeframe guidelines presented as below the expected standard. However, when considered in light of the proportion of those who had no LifeJet information recorded, fidelity to the timeframe guidelines for the work that is being recorded can be seen as proportionally high.

The findings in this report pointed to two primary sources for the disparity between implementing the LifeJet processes and completing the documentation and/or recording these in Carelink+. Firstly, Carelink+ recording systems and practices may need refinement to ensure they adequately represent the work being done. Secondly, there is a need to enhance staff and consumer engagement with documentation practices. Feedback demonstrates the need to improve the accessibility of the documents to meet the range of cultural, learning ability, language, and stage of recovery diversity needs common to consumers of Neami services.

Introduction

The CRM LifeJet Protocols and Implementation Fidelity

The CRM LifeJet protocols; Life Album, Camera, Compass and Map, have been designed to consolidate and document the core processes and activities that are undertaken between practitioners and consumers whilst using the Collaborative Recovery Model (CRM) during support interactions. Fidelity to the model entails engaging service users with the LifeJet processes and activities in a manner and time that is appropriate to a person's needs or stage of recovery. In addition to providing a document for consumers to refer to and strengthen commitment, the LifeJet protocols allow Neami National (NN) to link outcomes to practice, and provide evidence of the effectiveness of services delivered.

In the CRM Fidelity Study Part Two report (Implementation in Everyday Practice) we presented staff and consumer ratings of the frequency by which actions and processes core to the model are implemented during service delivery practices. In the Part Three report we focused on exploring consumer perspectives of CRM. In this report we look more specifically at the documentation practices that connect to these activities.

Implementation fidelity is explored in this report through the presentation of data indicating the frequency by which LifeJet documents are completed and a quality analysis of a sample of completed LifeJet protocols. To complement these results we also present consumer and staff ratings and feedback in relation to the benefits and challenges of using the LifeJet protocol documents.

Data Sources

This report draws on a range of data sources that were obtained as part of CRM Fidelity research project.

LifeJet Protocol Completion Frequency Rates (Carelink+ data)

We extracted data on how frequently the Protocols were completed from Carelink+ for consumers funded to receive NN services throughout the period from July 2011 to June 2014. Data was included from 4,088 individual consumers at 28 sites across Neami. Data was excluded for consumers linked to the following funding packages; sub-acute services, Arts, Way to Home and Shelter and Renew as these services do not utilise the LifeJet protocol documents in the same manner as regular services.

The average number of consumers actively receiving services during this time period and included in the data set was 1,895 per month. Completion frequency rates are based on the percentage of consumers who had up to date CRM LifeJet protocols as a proportion of active consumers for each month.

LifeJet Protocol Quality Evaluation (GAP IQ)

The quality of LifeJet protocol data was obtained through an analysis of completed protocols for 116 consumers who took part in the study. The analysis used the Goal and Action Planning Quality Audit Instrument (GAP IQ) to evaluate evidence of 17 implementation practices pertaining to both the guiding principles and the life planning enhancement activities that form the therapeutic structure of the CRM. Results are presented in Appendix D, Table 4.

Online Staff Survey

Service delivery staff across NN shared their views and experiences of using the CRM in their work through the completion of an online survey. Two hundred and twenty two staff from Outreach, Homelessness, Sub-Acute, Peer, Arts and PIR roles contributed; with 174 of these being from direct service delivery roles and 48 from service delivery management roles. Staff respondent demographics demonstrate a reasonable representation of service delivery staff across NN at the time the survey was completed. Demographics of staff respondents can be found in Appendix A, Table 1.

The online survey included five parts. In this report we draw on staff responses from part three of the online survey. In part three we asked staff to rate the Camera, Compass and Map according to value, enjoyment, ease of use and timing; firstly in relation to their use in work with consumers and; secondly for their use to assist their own practice development (PD) planning.

As part of the survey many staff also provided comments and feedback in relation to their experiences of using the LifeJet protocols in their practice. We include common themes that relate to use of the LifeJet protocols in this report.

Consumer Evaluation of LifeJet protocols (CEO-CRM C) and Staff Evaluation of CRM LifeJet protocols (SEO-CRM C)

Consumers and their key workers from 12 sites across NN participated in the CRM Fidelity study through the completion of a matched survey and interview. This part of the study was designed to explore the experiences and perspectives of consumers in relation to how the CRM is implemented within service delivery practices and to also compare these to staff perspectives for the same practices. For this we used parallel survey measures; the Consumer Evaluation of CRM (CEO-CRM) and the Staff Evaluation of CRM (SEO-CRM). In this report we present consumer and staff ratings and feedback for the Camera, Compass and Map. We also include qualitative feedback for consumer experiences in using the Life Album. Demographics of consumer participants and key worker participants are presented in Appendix B and C, Tables 2 and 3.

Staff Interview Feedback

To explore staff perspectives in relation to the implementation of the CRM within NN, interviews were conducted with 30 staff from varying roles across the organisation. Staff were invited to participate through email and then selected according to demographic variability. Participants interviewed included: 12 CRSW's, 4 PSW's, 2 SPL's, 5 Service Delivery Managers (across Site, Regional and State roles) and seven other roles (within community art, training, PIR, service development, and corporate services). Interviews were audio recorded and took between 30 and 50 minutes to complete. Audio recordings were transcribed and analysed for common themes. In this report we utilise interview data in relation to the benefits and challenges of using the CRM LifeJet protocols for use in work with consumers and use in PD.

Together the results in this report provide an opportunity for reflection and review towards enhancing our capacity to deliver effective services to consumers.

Results: LifeJet Protocol Completion

Documentation and Recording Practices

As a means of generating evidence for progress and outcomes linked to recovery oriented support NN initiated and trialled a process for recording information from the CRM LifeJet protocols through its client database Carelink+. Recording LifeJet protocol information within Carelink+ was formally rolled out across the organisation as a standard practice requirement between May and October 2012. Within this system, reports can be generated on a monthly basis allowing staff to see the completion status for individual consumers for the Camera, Compass and Map.

What proportion of consumers have completed *at least one* Camera, Compass or Map?

Table 1. The proportion of consumers who have completed at least one Camera, one Compass, one Map, or one of any protocol for the time period in which recording in Carelink+ became standard practice (August 2012) to June 2014. *n* = 3456.

Camera

- 47% of consumers had at least one Camera recorded in Carelink+ as being completed.
- 25% of all completed Cameras were subsequently recorded as being completed with a review.

Compass

- 41% of consumers had at least one Compass recorded in Carelink+ as being completed.
- 25% of completed Compasses were subsequently recorded as being completed with a review.

Map

- 38% of consumers had at least one Map recorded in Carelink+ as being completed.
- 28% of completed Maps were subsequently recorded as being completed with a review.

All

- 55% of consumers had at least one LJ protocol (Camera, Compass or Map) recorded in Carelink+ as being completed.
- 38% of completed protocols were subsequently recorded as being completed with a review.

Data source: Carelink+ January 2015.

Carelink+ results in Table 1 show that for the time period between August 2012 and June 2014 up to 45% of consumers did not have one of any of the LifeJet protocol documents recorded in Carelink+ as completed. Moreover, of those recorded as completed, a substantial proportion (62%) had not been subsequently completed with a review. Given the data used for these results only includes services that use the CRM in its standard format these results indicate a significant gap between implementation and use within Neami when compared to the intention of the model.

What proportion of consumers had *up to date* LifeJet protocols?

According to practice guidelines protocols are deemed up to date if they are undertaken every:

i.   CAMERA = 180 days (six months)
ii.   COMPASS = 90 days (three months)
iii. MAP = 30 days (one month)

Proportion of consumers who had at least one up-to-date LifeJet protocol
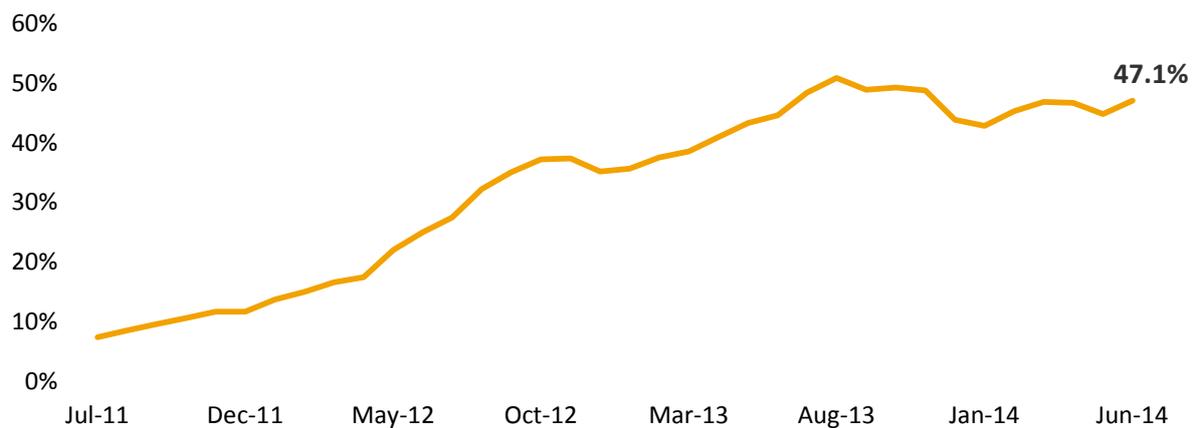
Data source: Carelink+ January 2015.

Figure 1. Percentage of consumers who had at least one up to date CRM LifeJet protocol as a proportion of consumers receiving services for period July 2011 to June 2014.

Proportion of active consumers who had an up-to-date...
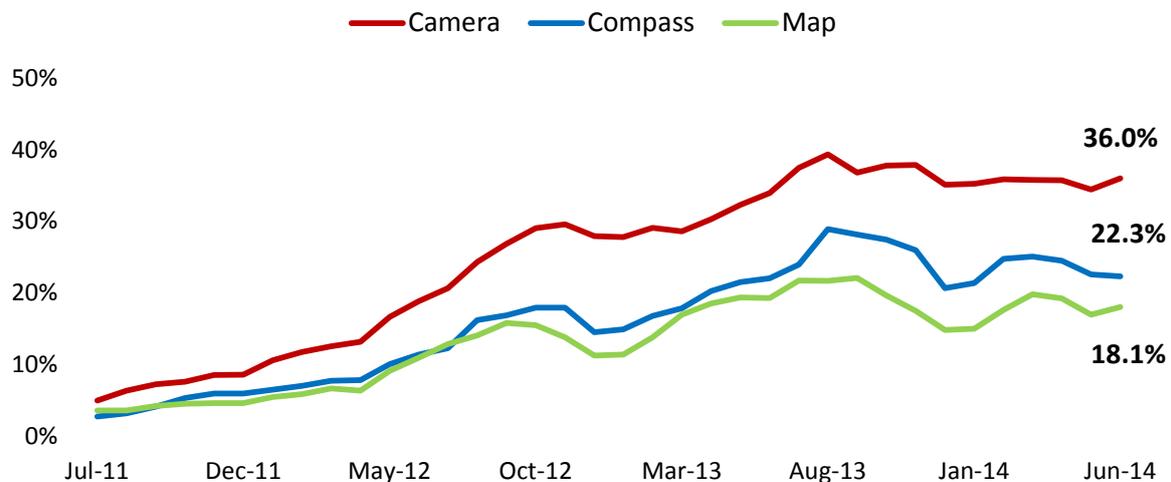
Data source: Carelink+ January 2015.

Figure 2. Proportion of consumers who had up to date CRM LifeJet protocols as a proportion of active consumers for time period July 2011 to June 2014.

Figures 1 and 2 demonstrate a marked increase in the proportion of consumers who had up to date completed LifeJet protocols entered into Carelink+ once the process became standard practice across the organisation between April to October 2012. There is a peak at approximately 12 months after roll out (August 2013) with up to date completion rates showing variability across months after this date.

Increases and decreases in completion rates tend to happen for each of the protocols at similar time points. Higher up to date completion rates for the August & September periods for 2012 and 2013 may be connected to annual file audit processes completed across NN at this time. Further audits were also completed for VIC sites in February 2014.

Whilst the proportion of up to date LifeJet protocols presents as below the expected standard these figures need to take in to consideration that up to 45% of consumers have not had Camera, Compass and Map processes or activities documented and/or recorded in Carelink+. By calculating the proportion of consumers who have at least one *up to date* protocol (47.1%) against the proportion of consumers who have eve*r completed* at least one protocol (55%) adherence to the timeframe guidelines for consumers who do have LifeJet information recorded in Carelink+ is proportionally high (up to 85%). Furthermore, these figures only represent data that has been entered into Carelink+. Camera, Compass and Map conversations may be being documented but not being recorded in Carelink+ indicating a potential gap in site systems processes.

Are LifeJet protocols being completed with quality?

In the CRM Fidelity study Part 2: Implementation in Everyday Practice report we presented data from a quality audit of completed LifeJet protocols of the 116 consumers who participated in the study. The LifeJet protocols were evaluated for evidence and quality of 17 key implementation practices. The results are presented in Appendix D, Table 4 of the appendices section at the conclusion of this report.

The protocol evaluation highlighted some areas that are highly successful and some areas that require greater attention to improve implementation fidelity and effectiveness of services. Ratings of evidence for; having an overall recovery vision, collaboration between consumer and practitioner, goal setting, and confidence rating processes are all high. Whereas ratings for actions pertaining to goal importance, setting time frames, monitoring progress, and setting dates for review reveal areas for improvement.

Discussion: LifeJet Completion Rates, Timing and Quality

In previous CRM Fidelity Study reports we have presented ratings from consumers and staff that indicate that there are high levels of Camera, Compass and Map activities being undertaken during support interactions. Taken together with the results from the Carelink+ data presented in Table 1 and Figures 1 & 2 there appears to be high level of Camera, Compass and Map conversations that are undertaken during support work that are not documented and/or not recorded in Carelink+. Review results from Carelink+ correspond to results that have emerged from other parts of this study including consumer feedback requesting more attention be paid to review processes.

Figures 1 and 2 suggest that LifeJet document recording rates are higher whilst audit processes are being carried out, pointing to the role of accountability as one method to support documentation completion and recording rates. However, the challenge here is to balance organisational requirements to provide evidence of services delivered with quality service practices that genuinely improve recovery and wellbeing outcomes for consumers.

The purpose of documenting LifeJet conversations and activities may be challenged when it is perceived as adding to administrative load without resulting in tangible outcomes or service improvements. In order to ensure the latter, a number of issues need to be considered, including; whether documentation processes and timeframe guidelines meet the diversity needs of consumers, whether recording systems are consistent at a site level, and how useful recorded information is to consumers, staff, management and funders.

> *"I feel like mainly it's around time constraints. I mean if I reflect now on the sorts of conversations I've been having, say in the last two weeks, I guess I have really used those sorts of principles and the concepts from there but obviously haven't translated them back to the documents." (CRSW)*

> *"I've had conversations with my worker about goals and barriers like working through issues with my family. I can see my worker would have followed the format of the map for those conversations."(Consumer)*

> *"Sometimes I feel like it is too much paperwork but I understand that by putting it down on paper it helps. I am more likely to do it then." (Consumer)*

Staff and consumer comments demonstrate the tension between providing services that promote quality engagement with consumers and being able to demonstrate evidence of services provided. Through an exploration of staff and consumer experiences in relation to the benefits and challenges in using the LifeJet protocols, the remainder of this report provides additional ideas that may support improvements in documentation completion and recording rates.

How did staff rate the LifeJets for supporting recovery work with consumers?

The overwhelming majority of staff rated the value of completing the Camera, Compass and Map in work with consumers positively.

Camera — 93.7% / 6.3%
Compass — 82.8% / 17.2%
Map — 93.6% / 6.4%
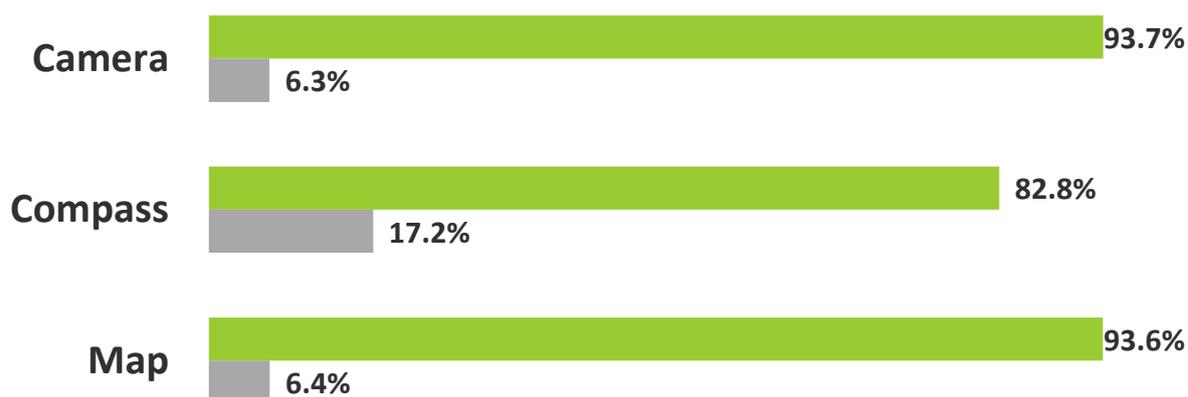
Data source: Online staff survey completed June 2014

Figure 3. Percentage agreement ratings for value of CRM LifeJet protocols; Camera, Compass and Map for use in work with consumers.

There is an overall high level of agreement from staff that the Camera, Compass and Map LifeJet protocols are valuable for use in work with consumers.

> *"It helps provide structured areas that we want to look at for the consumer so looking at what values they have, what their strengths are as a way of promoting self-belief, as well the clear direction that it's pointing into, so towards what they're going to use to move forward and achieve their goals. So I think it provides a very clear direction for us as well as very clear concepts that we use in terms of reaching those things with consumers."*

Staff and consumer feedback also supported the value of having these processes documented.

> *"I think the value behind it is that if you put it down on paper rather than say I'm going to do this and then you know, it doesn't get done, but if you've actually written it down and recorded that you would do this, and also you figured out how you're going to do it and when you're going to do it, whatever goal you've set yourself, I think that actually helps to achieve that goal."*

Staff rated the Camera and Map more positively than the Compass. Within the online survey 61% of staff disagreed with the statement that "the Compass is easy to use". Staff feedback indicates that the lower ratings for the value of the Compass may be influenced not so much by value of goal setting per se but by issues experienced in relation to navigating the multiple components involved in effective goal setting.

How did staff rate using the LifeJets for Practice Development?

As an organisational practice to promote practitioner skill, NN promotes the use of the Camera, Compass and Map as tools to support practice development (PD) processes and planning. Within the online survey, staff across NN provided ratings for the value of each of the LifeJet protocols for use in practice development planning (PD).

The majority of staff rated the value of using the Camera, Compass and Map in PD positively

Camera	86.2%
	13.8%
Compass	70.5%
	29.5%
Map	74.3%
	25.7%
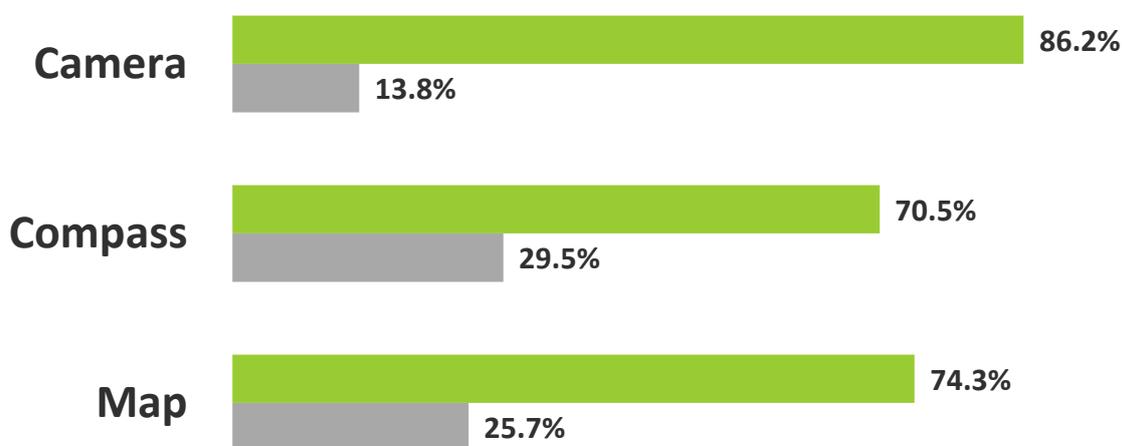
Data source: Online staff survey completed June 2014

Figure 4. Percentage agreement ratings for value of CRM LifeJet protocols; Camera, Compass and Map for use in Practice Development (PD) planning.

The majority of staff rated the LifeJet protocols as being valuable for use in practice development. Staff interview feedback demonstrated that those who use the LifeJet documents in PD valued the parallel process and how this can assist their skill development and confidence.

> *"I think it's good to have that parallel process between CRM in professional development and with consumers, and then when we speak to consumers about cameras and things we can say I've actually done one as well and I found it was useful for these reasons…"*

> *"I'm a strong believer in the parallel process, I think that the CRM model and the tools, protocols are actually really quite instrumental in being able to do what we say we do, around exploring values and meaningful goals in consumers' lives, and by doing the same with staff it actually helps us to understand the challenges consumers face."*

Camera is protocol most likely to be used in PD

Staff said that when using the Camera in PD they found it beneficial to be able to reflect on their values in relation to their work practices and gained additional ideas that helped them in their work

with consumers. The Camera is the LifeJet protocol that is most likely to be used within PD, with 92% of direct service delivery staff reporting that they had used a Camera during PD.

> "*I would probably find the most useful one is the camera… and that just keeps me focussed on things that I want to work on…*

Staff report using the Compass in PD can help increase confidence for using the Compass with consumers. A few staff reported using Part C on the staff appraisal development form, which is essentially a Compass, as being useful for their PD goals. Results showed that 78% of direct service delivery staff had used a Compass and 73% had used a Map, as part of their PD planning.

Ratings for use in PD are less positive than for use in work with consumers

A comparison of agreement ratings between figures 3 and 4 shows that staff rated the value of the LifeJet protocols for use in PD less positively than for using them in their work with consumers. Although the proportion of positive ratings were still high, feedback indicates that there is considerable variability in how the LifeJets are actually viewed and used in PD. Some staff indicated that they would like more opportunities to use the LifeJets for their own PD planning and others indicated that they did not want to use them at all in the Neami PD context.

> "*I've never actually sat down with the protocols and used them, a bit disappointed I haven't… I've always been going to*".

Across sites and across teams there is a disparity between service delivery staff in their attitudes and experiences of using the LifeJets in PD.

> "*Some of the challenges would be that I think some staff have a tendency to think that they're in the workplace and they shouldn't need to be doing these exploration of their own values and their own goals. I think others are wonderfully open to it and I guess I've seen the people that are open to it, the work that they're doing with consumers is just getting a lot more positive results for consumers, they're moving along and you can see the growth in people's lives." (manager)*

The most frequently cited barriers included ideas related to not feeling connected to the relevance of using LifeJets in a PD context. For some this appeared to be about their relationship to planning and goal setting activities. Others communicated that they did not like having to use a designated structure and/or preferred to use their own methods or just find the processes personally unnecessary for themselves. Some staff demonstrated a lack of confidence due to their own struggles with how to use or understand them effectively.

> "*For me personally though when it comes to professional development, none of it works for me, but that's only because that's not who I am, like I don't write down my goals like that, I don't follow a set structure like that, I just know in my head what I'm doing… or even if I do ever write things down, like I'll write it in my own format, so it's not in that layout*".

> "*It might be a little bit to do with how I feel about them personally but I just don't really use them and I can't really see myself needing to use them. I don't know whether that's a case of me considering myself as being more higher functioning than needing them or just I don't consider each of those things as being personally useful, like if I had a conversation with my supervisor about what my goals would be and how I would achieve them, I think*

that for me would be a fairly straightforward sort of conversation, I don't need to be guided by those things. I think if necessary I could translate them onto those but like I don't personally find it necessary to use them."

"In terms of actually using the forms in professional development, I think we did it once because we were supposed to, and then that hasn't happened again. I don't like doing forms about myself, I don't, I don't fit easily into boxes, and I don't like fitting myself into boxes, so it's – usually I know exactly what I want to talk about in supervision, and I know what I want to do, and I know what I want to figure out, or what's not sitting well with me, I'm pretty clear like – and we're also really busy here, we have a very, our office is almost always very busy."

"I don't really understand the compass; I wouldn't want to apply it to myself".

Overall feedback from the staff online survey and the in-depth interviews demonstrated that there is no singular idea or process that determines the success and likelihood of effectual use of the LifeJets in PD. Rather, feedback indicates that within PD a mix of the following variables can influence staff engagement with the LifeJet documents:

- document functionality
- connection to process and method
- supervisor/coach skill
- clarity in organisational expectations
- time/opportunity

These results show a similar parallel to the challenges that consumers and staff cite in relation to using the LifeJet documents during support interactions. When considered in the light of practice development these barriers may also influence staff confidence in using these in their work with consumers.

"…it doesn't work for me and I don't like it, and so sometimes I find it difficult to be able to do the compass with people".

Consumer and Staff experiences of using the CRM LifeJets

In this part of the report we use consumer and staff ratings along with additional feedback to explore the benefits and challenges consumers and staff experience in using the LifeJet protocols, during Flourish and individual support interactions with consumers.

Life Album Reflections

Of the 117 consumers who participated in the CRM Fidelity study only 29 had completed a Life Album. The majority (27 out of 29) of these spoke very positively about the experience of completing a Life Album and having the Life Album to refer to and add to over time. A number of consumers who had not yet completed a Life Album indicated that they thought it would be helpful to create one and would like the opportunity to do so.

What do consumers say about using a Life Album to support their recovery?

Researcher notes include observations that consumers who had completed a Life Album became enthusiastic when talking about their Life Album experiences.

"I did a life Album in Flourish - that's what I turned into my journal and I've kept it going. The journal is the core. It's my heart. Everything is in the journal. It's a collection of my values, what I've done, reflecting on my life, where I'm at."

"I do reflect on it still. It was a very positive experience. I had to do whatever I could to heal and to find out why I was unwell in the first place".

"It pulls together my journey over last two years and it's inspirational. I found this process enjoyable – it has given me something to look forward to."

"When you start, you don't realise what you want in your life. But it was fun. It tells you about your own life, but in picture form."

"Choosing the pictures was eye-opening to see what I chose, why am I choosing this? Realising things that are important came out. I found that what was important to me has changed from 10 years ago."

Consumer comments demonstrated that the form in which a Good Life Album takes is open and personal.

"I began with a folder. I called it 'What Matters'."

"We each had our own books. I enjoy sticking pictures in a book of people I like and quotes and stuff like that. I like doing creative stuff."

"I have a gratitude diary but I use it for everything, thoughts, recipes… I do drawings. It's like a reminder to keep flashing back on the positives rather than the negatives."

Given the significant benefits for consumers it is surprising that such a small proportion of consumers in this study had completed a Good Life Album. However, staff comments point to some reasons that may influence the low uptake.

…it's not a set thing, we don't record it, whereas we record all the stuff about the camera compass map and all our other assessments, but we don't actually record the good life album, so it's something that just can be forgotten about

"But it's finding the time with people to do that, when I say the time, the appropriate time, if they've got other stuff happening, it's not – you've got to be able to weave it in to where they're ready for it".

"The reason I don't use the good life album though is because we only ever touched on it in our induction, it's never been something that's ever been brought up again. I mean you hear about it and people say oh I use the good life album, but we've never really had any more training, I see that as being more something that's done in Flourish".

Staff and consumer comments regarding the Good Life Album indicate that this is a potentially under-utilised resource to support a person's recovery and wellbeing processes. In addition to having no formal recording practices to prompt staff to introduce the concept, staff comments also indicate that because there is not a set process or method to create a Good Life Album there is less confidence in knowing how to go about facilitating the process with consumers.

Camera Reflections

The process of completing a Camera is...

Rating scale: 1 – Strongly Disagree, 2 = Disagree, 3 = Slightly Disagree, 4 = Slightly Agree, 5 = Agree 6 = Strongly Agree

Data source: Consumer and Staff Evaluation of CRM (CEO-CRM & SEO-CRM) completed July to August 2014.

Figure 3. Comparison between consumer and key worker average ratings for value, enjoy-ability and ease of use of Camera.

More than 75% of consumers and 74% of key workers rated the Camera as valuable, enjoyable and easy to use. Key worker perceptions of how consumers would rate the Camera are very close to consumer ratings for value and enjoyment, however, consumers ratings for ease of use were higher than staff perceived.

What did consumers say about using the Camera to support their recovery?

Consumer interview feedback provides an informative understanding of how consumers experience the process of completing a Camera. When discussing the value of the Camera, the most frequently identified benefits consumers spoke about were in relation to gaining a positive sense of self (identity) and acquiring focus and direction (meaning and purpose). Consumer comments illustrate these concepts:

Identity

> *"It was valuable because I was at the point of thinking that I don't know who I am anymore".*

"At times I have lost myself and the Camera process has helped me to find myself because I questioned myself, my values, my self-worth, everything".

"When I look back at the completed camera I like what I see sometimes".

"It was an opportunity to express myself, like… liberating almost; to have the opportunity to express who you are".

"Just knowing how strong I can be when I put my mind to it. By looking at the Camera it helps me not to relapse".

Meaning and Purpose

"If you don't know your strengths and values where are you going to start from"?

"You can identify your values and strengths and you can use these to re-evaluate your life and where you are heading".

"It's good to see where your priorities are, what's important and what's not important".

"Helpful to think about values, easy to lose track of what you want to focus on, putting it on paper is a good way to keep track of it".

"It's like having a shopping list, you know what you have to get".

"Helped me to recognise I was doing things that I didn't really value".

"It made me set goals for myself which I hadn't done before".

What challenges do consumers identify in using the Camera?

Whilst the majority of consumers rated the process of completing a Camera as valuable a number of consumers who participated in the CRM Fidelity study demonstrated less engagement with completing a Camera as part of their recovery. At times this appeared to be in relation to their preference for action oriented support over reflective work. Others saw the Camera protocol as being useful for their worker but less relevant for themselves. Some consumers communicated that they did not like completing any paperwork in general or that they found the Camera confusing or alternatively, too simplistic. A couple of consumers had experienced the process of completing a Camera as intrusive.

I prefer the Map. I like the planning stuff better… how to do things.

"It's useful for the worker. I don't need it. I know what my plans are. I don't need to put them on a piece of paper. I want to go ahead with my life. I don't want to be stuck with conversations."

"I prefer not to do paperwork."

"It's like prying. They're "too eager to find answers" "find a solution to me" It's a bit impersonal and delving into my privacy."

"In the beginning I was a bit embarrassed."

Document Layout and Design

For the most part consumers identified the Camera protocol document as being easy to use (92% agreed and 8% disagreed) and talked about the document being straightforward, being more visual and using less text. There were also responses from consumers that demonstrate some alternative perspectives to consider. Approximately 25% of consumers commented that they were not confident about how to use the scoring component on the Camera.

> *"Because it's a picture and it's visual, it's simple to use."*

> *"It's confusing and this makes it hard for me to think."*

> *"But unfortunately I'm not very good with all the numbers in the middle. I'd rather just say it's in or out of focus."*

> *"Not as fun as the Good Life Album."*

Reflective processes not always comfortable

Consumers spoke about the process of completing a Camera as worthwhile, yet not always, or necessarily, easy in relation to how they felt whilst actually going through the process.

> *"Sometimes a little painful, not always enjoyable. It forces you to look at things and see how out of focus some things are."*

> *"It was very challenging. I did get satisfaction afterwards but the process was confronting and new."*

> *"I didn't find it unenjoyable but it caused some inner turmoil."*

> *"Thinking so hard, it can be a little unsettling."*

Stage of Recovery

Comments also illustrate that for some consumers experiencing limited hope, the process may reinforce a sense of despair.

> *"Can be a downside when it's something you already know and you go through the process and nothing has changed because there is nothing you can do to change."*

> *"There is some good in it but there can be heartache in it. Reminds you of what you know but then you find out nothing's changed."*

> *"I had a tough time doing it, it was hard to come up with. Nothing was positive at the time, it was a tough reminder."*

> *"It's easier for me to find my weaknesses than my strengths."*

What did staff say about the Camera for use in work with consumers?

Common themes from key worker and staff interview feedback indicated that staff perceive the Camera as being valuable for not only assisting consumers to clarify what is important to them but as being useful for getting to know what a consumer wants, building rapport, and creating direction and hope.

"I think it is valuable for her because it has been taking her away from the negatives and getting her to think of some positives, trying to focus on more upbeat things. "

"A Camera is useful in getting to know a consumer and get an idea what is important to them and support them in the direction of their values with the support of their strengths. It gives direction to the collaborative relationship."

"She struggles to identify her strengths so it's a good process to do. When she saw it on paper it made it more concrete."

"He has a lot of childhood trauma, his sense of self-worth is not strong. So a protocol that requires him to think and talk about his own strengths and get feedback from someone who knows him is very important.

"… I've certainly noticed people, who for the first time have seen stuff written down, and there is big value in that, you know, 'wow this is who I am'."

Staff also reflected that Camera work is not always an easy process for consumers.

"It took quite a bit of work, we had to do that very slowly, because it can be quite confronting for a lot of our consumers to be that focussed on describing themselves. That's really challenging. So it is very hard for some consumers, and there are a few that just can't cope with it, at the moment anyway."

"it's not a simple conversation with a lot of our consumers, so sometimes it's a whole teaching of new language to be able to talk about that stuff."

Several staff thought that the camera did not suit every consumer. They pointed out that the consumers who did not like filling in paper work or who were overwhelmed by illness or difficulties were not willing to complete it. However, the majority of staff provided feedback that they found the Camera very useful as long as the staff member knew how to deliver it in an engaging way. Some suggested that they would like more access to learning opportunities where they could develop their skills in engaging consumers with the Camera more effectively.

Compass Reflections

The Compass LifeJet protocol incorporates strategies based on goal setting literature to enhance visioning, commitment and achievement. Whilst guidelines propose that goal setting is formally conducted on a three monthly basis, skilful application of this competency includes purposely engaging in activities that allow for monitoring and review of progress towards goals throughout support interactions. Compass goals may also form a basis for support activity planning.

The process of completing a Compass is...
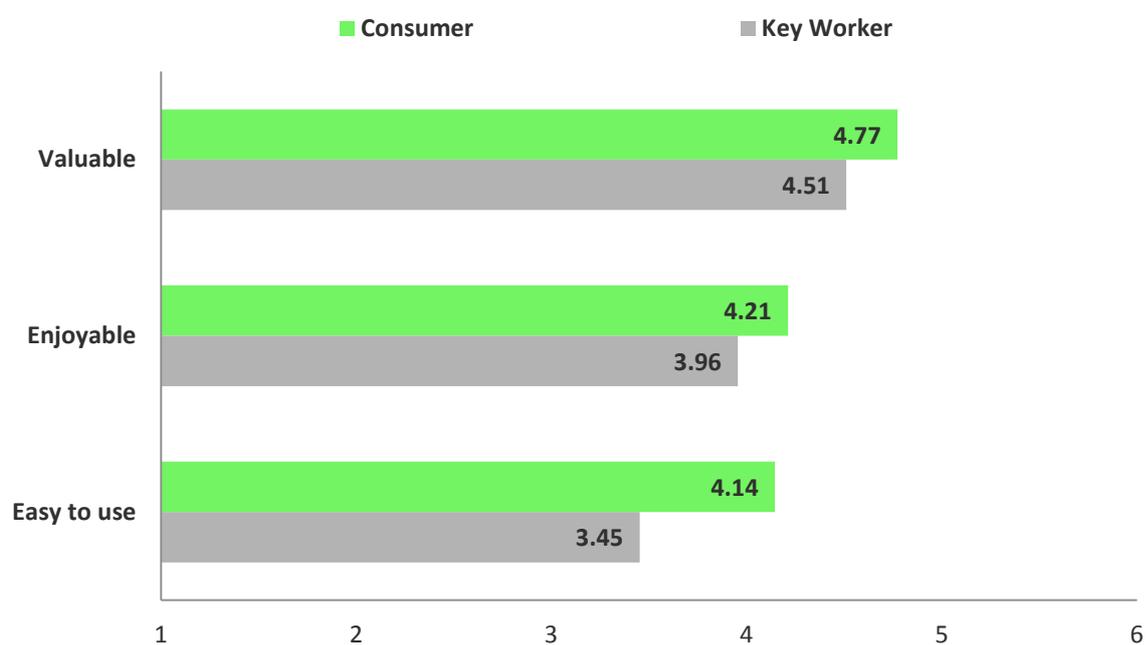
Rating scale: 1 – Strongly Disagree, 2 = Disagree, 3 = Slightly Disagree, 4 = Slightly Agree, 5 = Agree 6 = Strongly Agree

Data source: Consumer and Staff Evaluation of CRM (CEO-CRM & SEO-CRM) completed July to August 2014

Figure 5. Comparison between consumer and key worker average ratings for value, enjoy-ability and ease of use of Compass.

Consumers rate the Compass more positively on average than key workers do. In comparison to key worker expectations, consumer ratings are significantly higher than key workers when it comes to finding the Compass easy to use.

What did consumers say about using the Compass to support their recovery?

Consumers most often talked about gaining clarity and direction for what they decided to work on or head towards (meaning and purpose). Significant to processes related directly to recovery, consumers said that once they had decided on a goal and been through the goal setting process they felt more hopeful about the future and motivated to act. Importantly, consumers also spoke about the value of achieving a goal in terms of increased self-esteem, confidence building, and allowing them to gain a sense of what they are capable of (hope and self-efficacy).

Clarity and Direction

"It's valuable because it allows you to go into some more detail and a clearer idea of what each value and goal is."

"It really helps you work it all out."

"Keeps me on track.

Hope and Motivation

"When I set a goal I feel more hopeful. When I set myself something I go for it."

"It provides inspiration and motivation. Helps prioritize where to put effort."

"It's helped me to achieve some life goals like TAFE. I don't think I would have motivated myself without this."

"When I chose goals it gave me something to focus on. It lifts me up a bit."

Confidence and Self-efficacy

"I like to be able to set a goal and achieve it. It gives you the strength to want to do more."

"It gives me goals to attain... It's good towards building confidence and to see what you are capable of doing."

"It's valuable because it gets you what you want and makes you feel better."

"I enjoy when I've done the goal. It gives me self-satisfaction. It rubs off on other things in life, that confidence. I even do my own shopping now."

What challenges do consumers identify in using the Compass?

Whilst consumers strongly valued the process of identifying and setting meaningful goals many provided feedback that they struggled with the layout and some of components within the Compass protocol document. Other consumers sited issues with paperwork more generally or a dislike of engaging in planning and goal setting activities.

Document Layout and Design

More than half of consumers in this study communicated that they had not completed a Compass document, or that their key worker wrote it out for them. Of those that had completed one for themselves or worked alongside their key worker to complete, 65% sited difficulties with understanding the different components on the document. The majority of staff and consumers described the Compass as 'overwhelming', 'confusing' or 'overly complicated'.

Difficulties were often in relation to the striving pace, number of boxes and instructions, language, and the higher and lower attainment levels for goals. For some it was about not liking the idea of being 'scored'. On the other hand, some consumers indicated that they found the same components useful.

"I have no idea what they're talking about with the scoring, that throws me off immediately. I looked at this and I thought 'oh what a cumbersome document that serves the service more than the client'."

"It can give you something to do every hour/day. Goals are meaningful. Achievement is valuable. But the wording is formal and difficult."

"No it's too hard as I have limited English. It's very confusing. I talk to the workers a lot about my goals like giving up smoking but I don't like to fill out forms."

"It's a bit hard to use. Would be better if it wasn't score based - it's like an exam."

"Slightly disagree because of the way it's set out with higher and lower target goals. Could be simpler. Just get rid of them. I find it confusing."

"It's too complicated. There's lots of stuff on the page. I don't know what it's all for."

"About the scoring, it didn't make sense. I don't like being scored."

"They are effective. I can monitor myself. It gives you a minimum and a maximum requirement and an in-between."

"I don't understand the document. It seems very tedious, laborious and not relevant. Too many boxes that don't really mean that much to me

Discomfort with paperwork in general

For some consumers the idea of completing any paperwork can create discomfort. This may be due to the extensive amount of paperwork often involved when participating with services more generally or it may arise from negative past experiences in completing paperwork.

"I have set goals for myself without the pressure of paperwork. It might be a bit clinical."

"I've filled out too much paperwork under the Mental Health Act. I just want to get on with life with no more papers."

"There's too much paperwork."

Relationship to planning and goal setting activities

A sense of personal mastery can be enhanced by the identification, setting and achievement of goals. However, not all people have a positive relationship to planning activities or scheduling. For the most part this can be about having the confidence that one is able to follow through and be able to control things that may get in the way of achieving goals, or, about whether or not the goal is actually important or desirable.

For others it may be about having the ability to pay extended attention or concentrate on the finer processes involved in effective goal setting strategies. In addition, poorly executed planning and goal setting activities will often result in failure to achieve goals, thus creating an expectation that such activities will not be useful.

"I don't stick to it. Have several things going on at once. Don't enjoy sticking to the one thing."

"I'm bad at planning. Nothing I plan happens. I try to go through with it but stuff pops up making it impossible."

"I like making the plan but it doesn't go through. I have to do things there and then for any plans to happen."

"I don't find it easy to implement in real life."

"It depresses me because I don't think anything will come out of it."

What did staff say about the Compass for use in work with consumers?

Similar to consumer feedback, common themes from staff indicate that staff perceive identifying and setting goals as being a valuable process but that they often struggle with aspects of the Compass protocol document. Staff respondents echoed consumer feedback with a large proportion reporting that they found the Compass 'too complicated' and 'confusing' in relation to navigating the multiple processes within the document. More detailed staff feedback pointed to limits in being able to adapt components of the Compass document effectively to meet the range of cultural, learning, language and stage of recovery diversity needs, common to the consumers they work with.

"The idea of setting specific goals, linking these with valued directions, elaborating what it would look like to exceed or not quite make a goal and then evaluate progress is very valuable. The process is not always enjoyable for consumers as it can be quite challenging. For some consumers the actual document is too wordy."

"I often am told by consumers that this document is visually overwhelming and I question the motives around scoring. Despite such, I find it a very useful tool in providing a sense of direction for the work we do with consumers and in communicating it with other stakeholders."

"Consumer has lots of ideas. Compass has helped her to clarify what she will actually do. It's valuable because it gets the consumer to express ideas and set goals. Keeps him accountable".

"Translating the compass into something that a lot of consumers can understand is really hard work, and for some consumers I don't have the skills, and I have really good skills at this stuff, I've been doing this a long time, I know how to demystify and unpack information, and the compass is beyond me most of the time."

"I get the theory, I really do… and if I was working with middle class white men I'd be fine with it. If everybody I worked with had finished high school and maybe gone TAFE or uni, I'd have no problem, but that's not our consumer group, they're often educationally deprived, and often have some sort of cognitive impairment, either every day or when they're unwell or not so good."

"Most consumers I work with have difficulty with coming up with Life Vision".

"The compass used for flourish is better for consumers to understand".

"It is difficult to understand no matter how many times I have been shown it."

Map Reflections

Visioning is the mental process in which images of oneself carrying out an action or goal are made intensely real. Practitioner skills for effective Map completion include deliberately facilitating an act of visioning to open up strategy planning ideas and enhance motivation. This means purposely slowing down and allowing a person to tap into the sensory, emotive and practical aspects they imagine they will experience whilst working towards and completing an action.

Skilful application of this process also includes the ability to use Map strategies throughout conversation and then use the Map document to formally develop a workable strategy for actions that require deliberate consideration e.g. when a consumer has an action to complete that is new to them, or a stretch, or perhaps they have been unsuccessful in completing in the past. The Map is a way to thoroughly explore all the factors that will increase the likelihood of achieving the action.

The process of completing a MAP is...
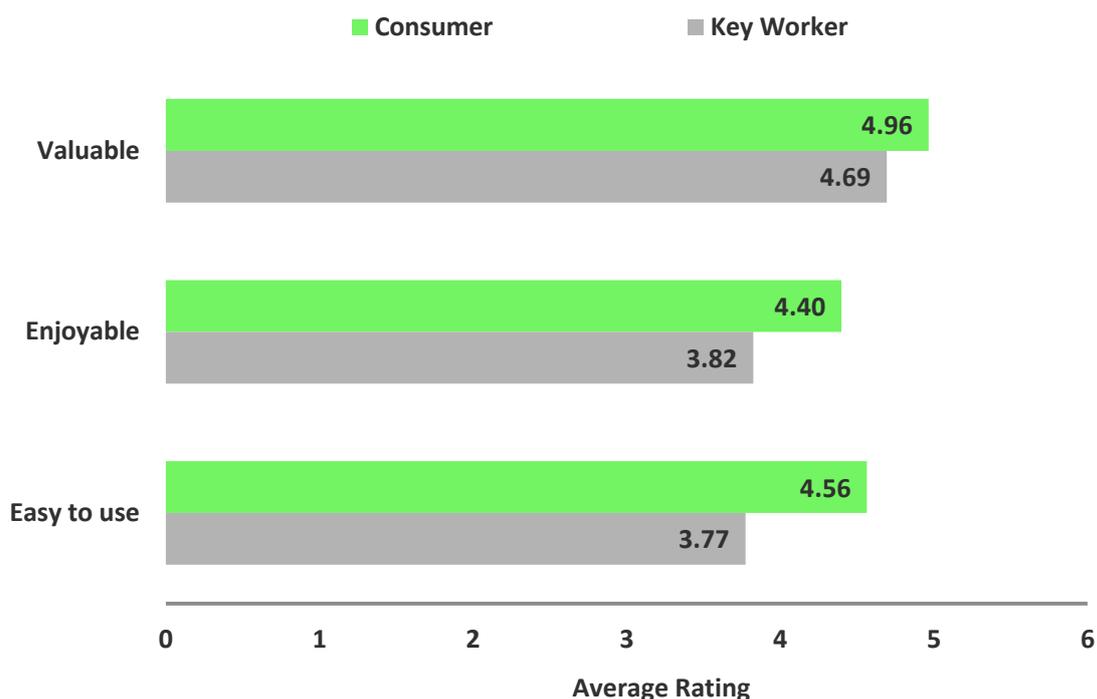
Rating scale: 1 = Strongly Disagree, 2 = Disagree, 3 = Slightly Disagree, 4 = Slightly Agree, 5 = Agree 6 = Strongly Agree

Data source: Consumer and Staff Evaluation of CRM (CEO-CRM & SEO-CRM) completed July to August 2014

Figure 7. Comparison between consumer and key worker average ratings for value, enjoy-ability and ease of use of Map.

The majority of consumers and key workers agree that the Map is valuable, enjoyable and easy to use. Key worker perceptions of how consumers would rate the Map are close for value, however consumers rate the Map higher for enjoyment and ease of use than key workers.

What did consumers say about using the Map to support their recovery?

Consumers were generally very positive about the benefits of using the Map to organise their ideas and plans, identify support resources, consider possible barriers and explore solutions to barriers, and build confidence. Consumer comments demonstrated that they were more likely to complete an activity once they had mapped out exactly how they would do it. Results reported in the *CRM Fidelity Study Part 3: Consumer Experiences Report* indicate that higher ratings for general helpfulness of sessions with Neami towards assisting recovery were correlated with higher rates of application of Map activities.

Direction and Pathways Visioning

"A map is like a tutor, when you are not sure where you are going with your goals."

"Seeing them on paper, helps to map it out at the beginning."

It's always better if you've got it written down.

"I like it how it is just the one thing. It breaks it into one task and I can focus on getting that one thing done."

"It cuts it down, breaks it down into different ways of planning your goals. It's like baby steps, so it looks achievable."

"It helps make the pathway to recovery clearer."

Confidence and Motivation

"Shows that there is light there and when you have completed the activity there is proof that you can do things."

"You realise that you can do something and Neami are going to help you with it. And it makes you happy because you feel like you can do it."

"Just achieving, seeing what you have achieved. Before I had trouble getting out of bed but now I jump out of bed looking forward to the day."

Empowerment and Achievement

"It helps me look at my back up plans i.e. who can help me, and not even necessarily who but what I can do to help myself."

"It makes me feel like I will definitely achieve something."

"It did work surprisingly. I got it done."

"The after effect was enjoyable, while I was doing it, it was challenging."

What challenges did consumers identify in using the Map?

Whilst most consumers commented that they found the Map straightforward, several consumers pointed to some difficulties that they had experienced whilst completing a Map. These were in relation to document design, understanding the purpose and process, dislike of paperwork in

general and the timing and frequency by which these are introduced and completed with key workers.

Document Layout and Design

The majority of consumers rated the Map as being easy to use. However, some consumers communicated that they found the layout complicated, particularly when they felt compelled to provide information that did not appear relevant. Approximately 30% of consumers said their key worker completed Maps whilst they talked. Often it was referred to as being harder than the Camera or easier than the Compass.

> *"When I look at it I struggle with the comprehension of the document. It's not as difficult as the Compass but it's not that easy either. It's not enjoyable to do."*

> *"It was a little more complicated, there were some areas where I thought how do I answer that or does it apply to me."*

> *"Understanding the layout of the page and what to put down, that's why the support worker does it for me. At least we get to discuss it. That's what's important to me. It's too complicated."*

> *"The confidence rating doesn't make sense."*

Process

> *"A lot of questions that I didn't know the answer to like who I could get support from. It's very confronting, because if you do a map and it doesn't come to fruition you have to re-do it again."*

> *"The only discomfort was the thought process, narrowing down what you want to do. It makes you look at yourself. It can be scarier when things are written down. And not knowing what to put down can be hard."*

Paperwork in General

> *"I'd rather not do it at all. When it comes to questions and forms I'm not keen to do it. But the government or whoever needs the reports, so whether I like it or not I have to do it."*

> *"Sometimes I feel like it is too much paperwork but I understand that by putting it down on paper it helps. I am more likely to do it then."*

Appropriate Timing

Consumer feedback suggests that there is a lack of clarity around appropriate use and timing of the Map document. Comments indicate that it can be both over-used and under-used. Moreover, it appears that at times it is inappropriately used to document service delivery actions rather than being used as a tool to support consumer confidence and self-efficacy to completing actions in line with valued goals.

> *"Way, way, way too often! It depends where you're at on the journey."*

> *"Better to review every 2 weeks, not fill in a new one."*

"I would like to use the map a little bit more, because when you find some difficulties… You can try and find a solution or work your way around it."

"I had no motivation at the time I did it. Setting task when you're not motivated is a waste of time."

"No it's frustrating, especially when I know I don't have any immediate goals and I should have and it makes me see my life is so empty."

"My worker has done all the tools at the right time, I thought the timing was good."

"I do one nearly every week. Helps keep me on track. I glue them into my Life Album. Sometimes you can be feeling negative and you look at what you've done and it gives you a focus. It gives you hope. Hope is a big thing."

What did staff say about the Map for use in work with consumers?

As with the Camera, most staff surveyed found the Map useful when working with consumers as a way of generating conversation around specific tasks. It was mostly perceived as being fairly straightforward and useful for creating a plan of how they would carry out an action.

"Helps his planning skills and to take more control of getting something done and learning the skills of planning."

"The Map gets her to narrow, focus, drill down on what's got to be done for the next week."

"The Map is excellent to identify barriers and work out how to get around them."

"Sets aside who is responsible for what - puts emphasis back on consumer to achieve goals/responsible for own wellbeing."

However, several staff also reported finding the Map confusing or difficult for consumers with the multiple titles, amount of boxes, repetitiveness, and lack of space to be flexible around how a consumer wanted to detail their action plans. Comments from staff complement consumer comments that there is a lack of clarity regarding appropriate timing and intent of the Map.

"Sometimes I wonder if she fills it out just because it's what we do."

"I don't do MAPS all the time with xxx but when there is something she wants to get done between appointments we do one. It acts as a reminder. Something to hold on to. She does keep them all. She does value them."

"But its time consuming and pointless to complete a new one every week. If her goal is to exercise every week, why do a new Map every time?"

"For bigger tasks we will talk through the process of what he wants to do and breaking it down into steps and then going through the barriers and solutions. For bigger task the Map is a valuable process for him. For smaller tasks if I suggest doing a Map he will refuse."

"This is the only protocol the consumer has refused point blank to do. We have conversations about tasks, barriers and solutions but she doesn't think this warrants paperwork."

"We're supposed to be looking at updating them every single week or fortnight or pretty much every single time that we're with a consumer, there's just so much paper wastage, and they get confusing for the consumers and for the staff as well".

"If you're going out to support someone with their grocery shopping well there should be a map associated with it"

Recommendations

Consumer and staff feedback provided for this study have provided some important insights and ideas towards how engagement with the LifeJets can be improved. Similar to staff comments in relation to using the LifeJet protocol documents in Practice Development planning, there are a number of variables that can impact on how the LifeJet documents are engaged with, for example:

- Understanding of Process and Method
- Connection to Process and Method
- Coach Skill
- Document Accessibility
- Clarity in Organisational Expectations
- Time/Opportunity

Understanding of Process and Method

The CRM is essentially a life visioning and planning process that is founded on an individual's personal vision of recovery, wellbeing and/or a good life. The model involves a number of deliberate steps or processes that typically take time to learn and adopt. Learning is facilitated through a mixture of guidance and experimentation. A layered approach to learning each of the processes, such as that undertaken in Flourish groups can also be beneficial. Along the way people generally get a deeper understanding of the benefits of the process and work out ways to make it a richer and personally relevant process.

> *"It was confusing at first but it is a useful tool once you get an understanding of it."*
>
> *"When I first started it wasn't really enjoyable but now I'm enjoying it a lot better."*
>
> *"The second time I answered a bit more deeply."*

Connection to Process and Method

This is where practitioner skill and consumer engagement can come together to ensure that the process is personally relevant. The foundation for connection comes from ensuring recovery, wellbeing, and/or a good life is the driver for any of the processes, particularly goal setting and action planning tasks. The skill is to tap into a person's individual creativity and learning styles; such as preference for visual (e.g. pictures), writing, kinaesthetic or auditory information, and to use these to create a deeper connection to the values and strengths that can facilitate change and growth.

> *"I think a lot of people get stuck on taking out the paperwork and if they mess up or get something wrong it really interferes with the way that they interact with the consumer."*

For the practitioner this means having a repertoire of creative and adaptive approaches to engage consumers with diverse needs e.g. consumers at earlier stages of recovery, managing illness, managing life events, different learning styles and abilities, cultural diversity, co-existing conditions & complex needs.

"In the beginning, we did a big workbook that took several months - identifying values - helped me to work out what I wanted from the service."

Coach Skill

There are three primary sources for effective coach skills in relation to using the LifeJet processes and documentation. Firstly, the *experiential and parallel process* of a coach undertaking the same process. This means having a knowledge and understanding of the foundational processes and the experience of translating these into a form that has personally worked.

"… others are wonderfully open to it and I guess I've seen the people that are open to it, the work that they're doing with consumers is just getting a lot more positive results for consumers, they're moving along and you can see the growth in people's lives." (staff)

Secondly, a primary coaching skill is the ability to deliberately facilitate an act of *visioning* to open up strategy planning ideas and enhance motivation. Visioning is the mental process in which images of oneself carrying out an action or goal are made intensely real. This means purposely slowing down and allowing consumers to tap into the sensory, emotive and practical aspects they imagine they will experience whilst working towards and completing an action.

Thirdly, the ability to utilise *appropriate timing and pace* means tapping into a persons' readiness to take on new challenges, or alternatively, recover from periods of intense change and growth. Forward momentum can be supported through the use of both recovery or consolidation goals interspersed with growth goals. Part of appropriate timing and pace also includes having adequate self-monitoring processes and taking the time to review and savour achievements along the way.

"I get excited about it, because my brain wants to move forward. I get wired up." (consumer)

"As long as I don't extend myself too much it gets done. Once again it's a self-esteem building exercise. When you get things done it makes you feel good. You have to make sure it's a bit of a stretch but not too much that it is a burden or pressure." (consumer)

It helped me assess if my goals were over ambitious or important - if I was planning something that was actually impossible for anyone to get done." (consumer)

Document Accessibility

Feedback from consumers and staff across the study indicate that there is potential for improvement in the design of the LifeJet protocol documentation practices.

"I'll be honest; I am disappointed with myself that I don't comprehend the documents that I've been given. It makes me feel anxious, even talking about it causes anxiety. I feel like a klutz. I am motivated to understand it, but to not understand is frustrating. I would like to be able to look at the document and understand it and know where I'm going with it… The workers need to be better trained in the delivery of it." (consumer)

The Compass document generated the most concerns.

"I think it's a really inaccessible document, it's hard to explain what the point of it is, it's got intimidating numbers and scores and scales and like nobody's ever heard of a striving pace, so you have to unpack and explain so much in the compass, that people by the time

you get to the end of the explanation have either lost interest or are completely overwhelmed, they just don't want a bar of it. So I find the compass really really problematic with a lot of our consumers. Some of them are fine, but they're not the ones I work with most of the time. It's really not accessible." (staff)

Staff experiences convey that the movement from an emotional process of ideas generation to a more cognitive process of completing documentation that involves complex processes is particularly difficult for consumers where the capacity for concentration is moderated by medication effects, symptom management or learning capacity.

"I think it takes the brain into a different space of working, I think we're talking about this meaningful stuff and then we get to a very pragmatic practical mathematical equation and it takes away from that meaningful experience that we're talking about." (staff)

"Consumers who are dealing with schizophrenia; it's like if they're having a really rough trot of it it's a lot harder to get consumers to focus on their goals. Because they're first and foremost just trying to deal with what's happening to them on a day to day basis." (staff)

Furthermore, consumer and staff feedback point to limits in the present documentation resources to meet the cultural and diversity needs of consumers.

"No it's too hard as I have limited English. It's very confusing. I talk to the workers a lot about my goals like giving up smoking but I don't like to fill out forms." (consumer)

Overall feedback from the staff and consumers demonstrate that to improve consumer engagement with the LifeJet documentation practices there is a need to improve their accessibility. Primarily, this relates to ensuring they are accessible in language, layout design, and process; flexible enough to accommodate diversity needs; and engaging for consumers to use.

Clarity in Organisational Expectations

Whilst the guiding principles underpin every engagement interaction and activity; staff feedback illustrates that there appears to be mixed messages regarding the purpose, method, and timing for documentation and recording practices. Predominantly, these may be influenced by the tension between providing quality services and being able to demonstrate evidence of the work that is being done. Feedback across this study indicates there is a need to review how our work is being recorded. Presently, Carelink+ CRM recording practices are limited to recording 'completed' and 'reviewed' Camera, Compass and Map activities. Exploration of how the finer processes can be captured may generate more attention to ensuring these activities are undertaken.

Time/Opportunity

The often competing demands on a practitioner's time can impact on the quality of support interactions. Feedback illustrates the need to constantly review and streamline processes towards those that provide the best outcomes for consumers. In relation to CRM guided practice, taking the time to create a working alliance with consumers from the outset where the goals and method of engagement can be made explicit may support practitioners to manage the competing demands of service delivery.

Conclusion

Purpose of this Report

The CRM LifeJet protocols; Life Album, Camera, Compass and Map, have been designed to consolidate and document the core processes and activities that are undertaken between practitioners and consumers whilst using the model to guide support interactions. In addition to providing a document for consumers to refer to and strengthen commitment, the LifeJet protocols allow Neami National (NN) to link outcomes to practice, and provide evidence of the effectiveness of services delivered.

This report presented results in relation to the frequency by which they are completed, the quality of how they are completed, and whether they are seen by consumers and staff as being valuable for supporting recovery. Results were drawn from consumer database records (Carelink+), an audit of consumer LifeJet records, and feedback from consumers and staff regarding their experiences of using the LifeJet protocol documents.

Value of LifeJet Processes

The LifeJet processes of strengths and values identification, setting meaningful goals and action planning were found to be seen by consumers and staff as highly valuable to supporting recovery. Consumer and staff ratings indicated that these processes are also being applied at a high level during support interactions. Feedback of consumer experiences highlighted the connection of these activities to processes asserted throughout consumer literature as being pivotal to recovery; gaining a positive sense of self (identity), hope, meaning and purpose, and enacting personal power (responsibility). Undertaking the LifeJet processes was also seen to enhance confidence, motivation and self-efficacy.

Documentation and Recording Practices

The results in this report also highlight a gap between implementing the LifeJet processes conversationally and documenting these with consumers and/or recording these in Carelink+. Broader findings point to two primary sources that may improve the connection between the work that is being done and how this is recorded.

Recommendations

Firstly, Carelink+ recording systems and practices may need refinement to ensure they adequately represent the work being done. Secondly, there is a need to enhance staff and consumer engagement with documentation practices. Feedback highlights that engagement may be improved by enhancing accessibility of the documents to meet the range of cultural, learning ability, language, and stage of recovery diversity needs, common to consumers of Neami services. Recommendations in this report also include strengthening: practitioner/coach knowledge and skills to enhance consumer learning and connection to the LifeJet processes; and clarity in organisational expectations for documentation practices related to flexibility, timing, purpose, and method.

Appendix A – Staff Online Survey Demographics

Table 1. Demographics of staff who responded to Neami National online CRM fidelity survey in June 2014.

Staff respondents by State

VIC	SA	WA	QLD	NSW	Total
75 (34.9%)	31 (14.4%)	8 (3.7%)	12 (5.6%)	89 (41.4%)	215

Length of time at Neami

Under 6 mths	6-12 mths	1-2 years	2-3 years	3-5 years	Over 5 years
26 (12%)	35 (16.2%)	49 (22.7%)	28 (13%)	47 (21.8%)	31 (14.4%)

Length of time working in Mental Health services

Under 6 mths	6-12 mths	1-2 years	2-3 years	3-5 years	Over 5 years
12 (5.6%)	25 (11.6%)	40 (18.5%)	26 (12%)	37 (17.1%)	76 (35.2%)

Service delivery type

Outreach	Homeless	Sub-Acute	Peer Support	Arts	PIR
160 (70.7%)	4 (1.1%)	23 (10.9%)	18 (9.8%)	10 (4.6%)	5 (2.9%)

No. of CRM Boosters workshops attended

0	1 Session	2-3 Sessions	4-5 Sessions	More than 5
35 (16.3%)	59 (27.4%)	97 (45.1%)	17 (7.9%)	7 (3.3%)

Age of respondents

19-29	30-39	40-49	50-59	60-69
70 (32.4%)	70 (32.4%)	46 (21.3%)	22 (10.2%)	8 (3.7%)

Education level

High-School	TAFE	Bachelor	Post Grad/Mast	PhD
5 (2.4%)	44 (21.1%)	93 (44.5%)	65 (31.1%)	2 (1%)

Appendix B - Consumer Participant Demographics

Table 2. Demographic profile of the 116 consumers who participated in the consumer evaluation of CRM (CEO-CRM).

State	Percent (%)	Frequency
NSW	34.5	40
VIC	33.6	39
SA	17.2	20
QLD	8.6	10
WA	6.0	7
Total	**100**	**116**

Age	Percent (%)	Frequency
29 years or under	13.9	16
30–39	23.5	27
40–49	37.4	43
50–59	18.3	21
60 years and over	7.0	8
Total	**100**	**115**

Mean age = 42.81. Age range = 20 to 69.

Gender	Percent (%)	Frequency
Male	55.2	52
Female	44.8	64
Total	**100**	**116**

Language	Percent (%)	Frequency
English	86.4	89
Non-English	13.6	14
Total	**100**	**103**

Indigenous	Percent (%)	Frequency
Aboriginal	6.1	7

Non-Aboriginal	93.9	108
Total	**100**	**116**

Medical condition	Percent (%)	Frequency
1 or more condition	28.4	33
No condition recorded (includes unknown)	71.6	83
Total	**100**	**116**

Primary diagnosis	Percent (%)	Frequency
Schizophrenia	41.0	43
Depression	20.0	21
Bipolar disorder	14.3	15
Schizo-affective disorder	11.4	12
Others	13.3	14
Total	**100**	**105**

18 participants had more than one primary diagnosis.

Funding length	Percent (%)	Frequency
Less than 1 year	10.4	12
1–2 years	46.1	53
2–3 years	26.1	30
3–4 years	10.4	12
5 years and over	7.0	8
Total	**100**	**115**

Unmet needs	Percent (%)	Frequency
Company	38.1	40
Daytime activities	36.2	38
Psychological distress	34.6	36
Intimate relationships	30.3	30
Physical health	28.6	30
Sexual expression	25.3	22
Money	21	22
Accommodation	17.1	18
Safety to self	14.4	15
Transport	14.4	15
Psychotic symptoms	13.5	14
Self-care	13.3	14
Looking after the home	13.2	14
Basic education	11.4	12
Food	10.4	11
Alcohol	8.7	9
Benefits	8.7	9
Information on condition and treatment	6.7	7
Child care	6.2	6
Telephone	4.8	5
Drugs	3.4	4
Safety to others	2.9	3
Average number of unmet needs per consumer	**3.2**	

Out of 116 participants 112 had a completed CANSAS (Camberwell Assessment of Need). Completion range was from March 2012 to March 2015.

Appendix C – Key Worker Participant Demographics

Table 3. Demographic profile of the 62 staff members who participated in the staff evaluation of CRM (SEO-CRM).

	SEO Average	Neami Average
Male	40%	29%
Female	60%	71%
Average Age	37	39
Years of Service	2.46 years at Neami	2.41 years at Neami

CALD	SEO Average	Neami Average
No	76%	73%
Yes	18%	19%
Unknown	6%	8%

CALD Type: African (1) Chinese (1) Danish (1) French (1) German (1) Hungarian (1) Indian (4) Maori (1) Vietnamese (1)

Aboriginal and/or Torres Strait Islander	SEO Average	Neami Average
Yes	0%	4%
No	94%	88%
Unknown	6%	8%

Aboriginal and/or Torres Strait Islander	SEO Average	Neami Average
Yes	0%	4%
No	94%	88%
Unknown	6%	8%

Previous Occupations	SEO Average	Neami Average
Admin, Finance, IT, Management	8%	7%
Comm & Welfare Services	57%	48%
Education & Training	8%	8%

Health & Medical	8%	9%
Retail/Sales/Hospitality	8%	10%
Other	11%	18%

Qualifications	SEO Average	Neami Average
Secondary	5%	7%
Certificate III, IV, Diplomaa	32%	33%
Bachelor Degree	39%	35%
Postgraduate Diploma/Certificate	13%	12%
Masters Degree	11%	12%
PhD	0%	1%

Qualification descriptions were spread over 21 fields with the highest proportion (17%) being social work.

Appendix D – GAP IQ Results

Table 4. LifeJet protocol evaluation of quality results (GAP-IQ).

n = 116						
	YES		**PARTIAL**		**NO**	
Item	**%**	**Freq**	**%**	**Freq**	**Freq**	**%**
1. Overall Recovery Vision	73%	(85)	18%	(21)	9%	(10)
2. Collaboration	96%	(111)	0%	(0)	4%	(5)
3. Goals	78%	(90)	11%	(13)	11%	(13)
4. Goal Importance	47%	(54)	3%	(4)	50%	(58)
5. Confidence	85%	(99)	2%	(2)	13%	(15)
6. Time Frames	11%	(13)	6%	(7)	83%	(96)
7. Attainment Levels	54%	(63)	28%	(32)	18%	(21)
8. Barriers Identified	59%	(69)	16%	(18)	25%	(29)
9. Social Support	55%	(64)	22%	(25)	23%	(27)
10. Monitoring	42%	(49)	31%	(36)	27%	(31)
11. Action Plans	57%	(65)	25%	(29)	18%	(21)
12. Action Description	68%	(79)	15%	(17)	17%	(20)
13. Action How Often	69%	(80)	5%	(6)	26%	(30)
14. Action When	51%	(59)	19%	(22)	30%	(35)
15. Action Where	70%	(81)	3%	(3)	28%	(32)
16. Action Confidence	66%	(77)	6%	(7)	28%	(32)
17. Action Review	25%	(29)	10%	(12)	65%	(75)
TOTAL	**59%**	**(1167)**	**13%**	**(254)**	**28%**	**(550)**

More information

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