Research & Evaluation Framework

Odyssey House Victoria Research & Evaluation Framework

Version 1.1

FEB 2023

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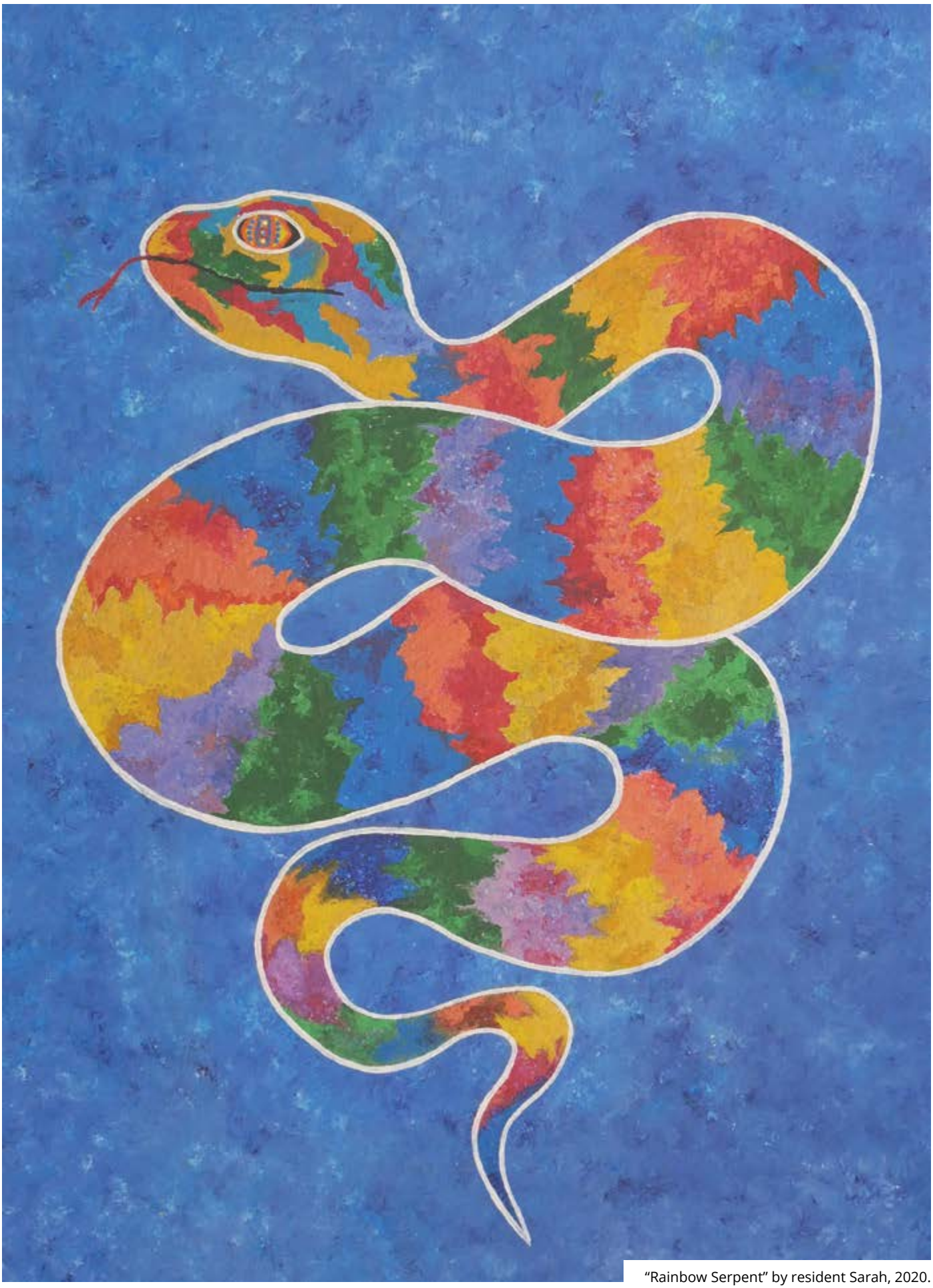


"Rainbow Serpent" by resident Sarah, 2020.

Contents

Glossary 1

Acknowledgement of Country 2

Introduction 4

- Scope & Vision ... 4
- Principles ... 4
- Priorities ... 4
- Governance & Risk Management ... 5

Research Working Group 6

- Ethics ... 6
- Review ... 6

Priority Areas

- Priority Area 1: Client Experiences and Outcomes ... 8
- Priority Area 2: Translational Research ... 8
- Priority Area 3: Diverse Communities ... 9
- Priority Area 4: AOD Workforce Development ... 9
- Priority Area 5: Engagement and Collaboration ... 9

The Strategic Plan

- Enhance Service Capacity & Outcomes ... 12
- Develop Staff and Culture ... 15
- Evaluate and Communicate Outcomes ... 16
- Emphasise Relationships & Partnerships ... 17

Internal and External Research & Evaluation Processes

- Publication ... 18

Glossary

AOD	Alcohol and Other Drugs
CALD	Culturally and Linguistically Diverse
CEO	Odyssey House Victoria's Chief Executive Officer
EMs	Odyssey House Victoria's Executive Managers
LGBTQIA+	Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Agender +
OHV	Odyssey House Victoria
RC	Odyssey House Victoria Research Coordinator
REF	Odyssey House Victoria's Research & Evaluation Framework
RWG	Odyssey House Victoria Research Working Group

Acknowledgement of Country

Odyssey House Victoria recognises, respects and values Aboriginal and Torres Strait Islander Peoples' histories and cultures, and their unique status as the traditional custodians of this land and its waters.

We acknowledge the Indigenous Peoples of Australia as belonging to the oldest continuing culture in human history. We celebrate this.

We acknowledge that sovereignty to this land and its waters was never ceded. We remind ourselves of this and walk together in reconciliation.

We also acknowledge that Aboriginal and Torres Strait Islander Peoples have suffered profound trauma as a result of Australia's laws and policies. We are sorry for this and commit ourselves to assisting in the healing that is needed.

Artwork inspired by Chris Thorne, representing the pillars of Respect, Concern, Honesty, Trust and Love on one hand.

Fire pit at the Therapeutic Community in Lower Plenty.

Introduction

Odyssey House Victoria (OHV) takes a proactive approach in undertaking and collaborating on research and evaluation projects to build an effective evidence base that supports the health and well-being needs of people who seek our support.

OHV has developed a Research & Evaluation Framework (REF) to detail the evaluation and research priorities and principles for OHV, and to help focus future research and data-gathering efforts.

The motivations for OHV research are:

- To align, where relevant, with the OHV Strategic Plan
- To inform best-practice AOD service development and program design to benefit staff, clients, and their families
- To support OHV decisions as an evidence-informed and data-driven organization
- To focus and encourage further research with collaborators and partnerships

This Framework sets out the principles, objectives, and priorities for OHV to both examine and facilitate research and evaluation activities in areas of special strength or need.

Scope & Vision

The REF applies to all internal and external research and evaluation, done with or by OHV. The REF is aligned with the OHV Strategic Framework, to build a comprehensive, reliable, and accessible evidence base for OHV to formulate policy and strategy, and to make effective service delivery decisions that support the lifetime well-being of clients with AOD issues and their families and staff.

This targeted approach to research will assist OHV to bridge gaps in our knowledge base, enabling us to better understand the needs of our staff, clients, and their families, and to anticipate future needs and the policies and services required to support them.

Principles

The research examined, undertaken, or commissioned by OHV must adhere to the following principles:

- Staff and their time will always be respected.
- Clients will be always respected.
- Clients will not be disadvantaged.
- Clients and families will be compensated for participation.
- Staff and clients can withdraw from any research and evaluation activities at any time without repercussion.
- Our goal will be to engage in research that will benefit our clients.
- All research activities will be culturally respectful.
- Produce results that we can use and repeat.
- OHV will follow ethical research guidelines

Priorities

This REF will guide the implementation of priority research areas that will align with the OHV Strategic Plan. Research and evaluation proposals must be relevant to the AOD sector and lead to an improved understanding of clients' needs or experiences, considering the health and well-being of both staff, AOD clients, and their families, or improved service delivery and outcomes.

Early stages of implementation will prioritise studies that capitalise on existing OHV data, that support horizon scanning of current and emerging issues, and that lead to further research opportunities through partnerships and collaboration.

Priority areas include:

- Client experiences and outcomes
- Translational research
- Diverse communities
- Building knowledge in the workforce
- Engagement and Collaboration

Governance & Risk Management

A governance structure supports the implementation of this REF; and continues to improve OHV research and evaluation capacity. Priority areas will be overseen by the Research Coordinator (RC) and the Research Working Group (RWG).

The RWG will oversee and monitor research activities at OHV and ensure they agree with the REF's research and evaluation priorities; this will include risk management, ethical considerations, and benefit realisation. The RWG will operate in line with its Terms of Reference (see Terms of Reference document) and will make recommendations to the OHV Executive Managers and CEO for approval.

This will include considering the overall effectiveness of the research; any financial or other resources required to conduct or implement the findings of it; including any risks to participants and/or perceived or actual conflict of interest; as well as potential reputational risks.

Research Working Group

The Research Working Group (RWG) will oversee and monitor research activities at OHV and ensure they are in line with the framework's research and evaluation priorities. The RWG is guided by the terms of reference.

A research assessment form is filled out by anyone who wants to conduct research at OHV. This assessment guide is sent to everyone in the RWG to evaluate. After this, questions are sent to the applicant for clarification. Four positive responses are required for the research to go ahead.

Access to clients and data for internal and external researchers will be assessed and need to demonstrate:

- Alignment to OHV strategic research, quality improvement, and evaluation priorities.
- Consistency between intended use and purpose for which data are being collected.
- Attainment of any relevant ethics approvals where needed.
- Intended use and planned outcomes.

The RWG currently includes:

- Research Coordinator
- Manager, Services Development
- Program Manager of Lower Plenty Therapeutic Community
- Catchment Manager Southwest Metro AOD
- Quality and Training Manager Residential Therapeutic Community

Client or data access and/or partnership opportunity requests can be made to the Research Coordinator at nesterman@odyssey.org.au or research@odyssey.org.au.

Ethics

It is essential to clearly establish the parameters for using existing data and for conducting new research projects. This is to ensure a clear understanding of the rationale for use of any data and to maintain trust with our AOD clients and their families, as well as OHV staff and the AOD community. When researchers recruit OHV clients for a study, they must comply with ethical requirements detailed by the Victorian Human Research Ethics Committee, or other relevant ethics boards.

Other studies that do not recruit participants, but that use client data or are supported by OHV, also need to be conducted ethically, and may require Human Research and Ethics Committee ethics approval.

Review

The Research Priorities outlined within this REF will be reviewed annually, with a full review undertaken at least every three (3) years.

Priority Areas

The following priorities, and areas of work, align with the current Odyssey House Victoria strategic objectives, and they offer many potential linkages and partnerships.

Priority Area 1:

Client Experiences and Outcomes

The objective of work in this priority area is to support improved care by increasing our understanding of which treatment types and processes are most effective and identifying any treatment gaps.

- OHV currently conducts an annual Client Experience Survey to get regular feedback about how well OHV functions.
- Research and evaluation will include different types of information from best practice evidence and from within OHV and outside it. Best practice evidence will be used to evaluate current models of care. These may include treatment or intervention settings, processes of care delivered, and target populations.
- OHV aims to evaluate the outcomes of our programs over time. Ideally, we would conduct at least one outcome study for every major OHV program every 5-10 years.
- Co-design will be an important part of all research and evaluation undertaken by OHV.
- OHV data is valued for its research potential and to enable OHV to better understand client outcomes and its service delivery.
- Feedback helps to improve and enhance individual outcomes and experiences, service outcomes, and OHV organisational outcomes and reputation. It also allows us to build and maintain communication with others.
- Improve outcome measures, including introducing repeat outcome measures, new measures, and clear measures of abstinence and relapse rates.

Priority Area 2:

Translational Research

Translation research is a priority area for OHV, as knowledge growth through research underpins improvements in OHV AOD services. This research can be fundamental or can be applied, directly addressing clinical problems, individual outcomes, issues, or the provision of AOD services.

The creation of knowledge does not, in itself, lead to widespread implementation and positive impacts on health. The knowledge must be translated into changes in practice and policy for the benefits and impacts to flow to Australians.

OHV will focus on one or more strategic areas each year, to identify changing needs, clinical policies, or practices, and bring recommendations to the OHV Executive and Managers about any implications or areas for implementation. The exploration will include an examination of the research literature, as well as the grey literature (relevant publications, reports, presentations, or documents) from peer organisations.

Priority Area 3:

Diverse Communities

The focus on diverse communities (including Aboriginal peoples, CALD, and LGBTIQA+ cohorts) is to ensure that members of these cohorts are receiving the best possible care from OHV. Collaboration and co-design are key to ensuring that OHV is culturally appropriate and understanding where the level of unmet demand for treatment lies and developing and testing new or existing targeted interventions where current service delivery may be insufficient.

Given the predominance of Aboriginal peoples and the limited number of Torres Strait Islander peoples in Victoria, the term 'Aboriginal peoples' is used in this policy to refer to both; however, no disrespect is intended for our Torres Strait Islander colleagues and communities. It is recognised that Torres Strait Islander peoples share the same rights and privileges when accessing the services of Odyssey House Victoria (OHV).

Furthermore, it is acknowledged that individuals who identify as Aboriginal will have different preferences about the language used to refer to their culture e.g. 'Koori'/'Koorie' (or relevant regional group), 'Indigenous', and/or 'Aboriginal / First Nations peoples'.

Priority Area 4:

AOD Workforce Development

This will be a long-term priority for OHV, focusing on managing workforce shortages, education, and upskilling through training and good placement of the necessary skilled staff.

Effective workforce development and planning means that a capable, supported and sustainable workforce will continue to meet the needs of people with AOD issues and their families into the future.

Priority Area 5:

Engagement and Collaboration

OHV has and wants to further engage in research partnerships and collaborations with different universities, service providers, and research centers. OHV is open to "one-off" partnerships and ongoing ones and will avoid exclusive arrangements. All partnerships and collaborations must share OHV values and philosophy/principles. Reasons for working together include:

- Increasing partnership engagement with new research and evaluation design and results for mutual benefit
- Benefitting from specialist knowledge and research that can lead to changes in how we work
- Working together for grants and funding and other cost-effective solutions.

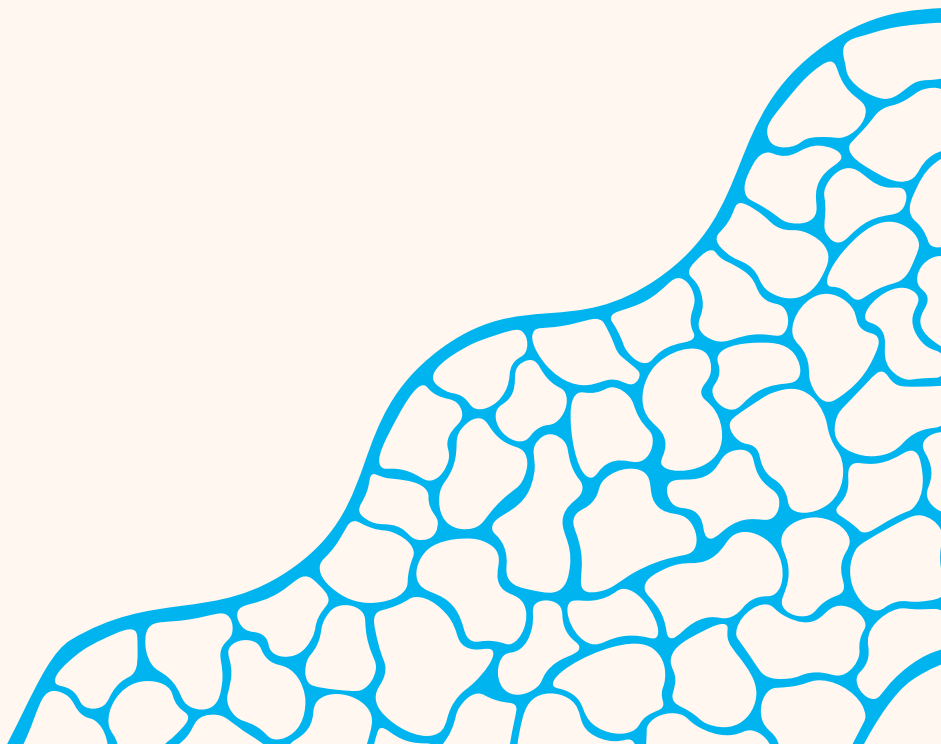
The Strategic Plan

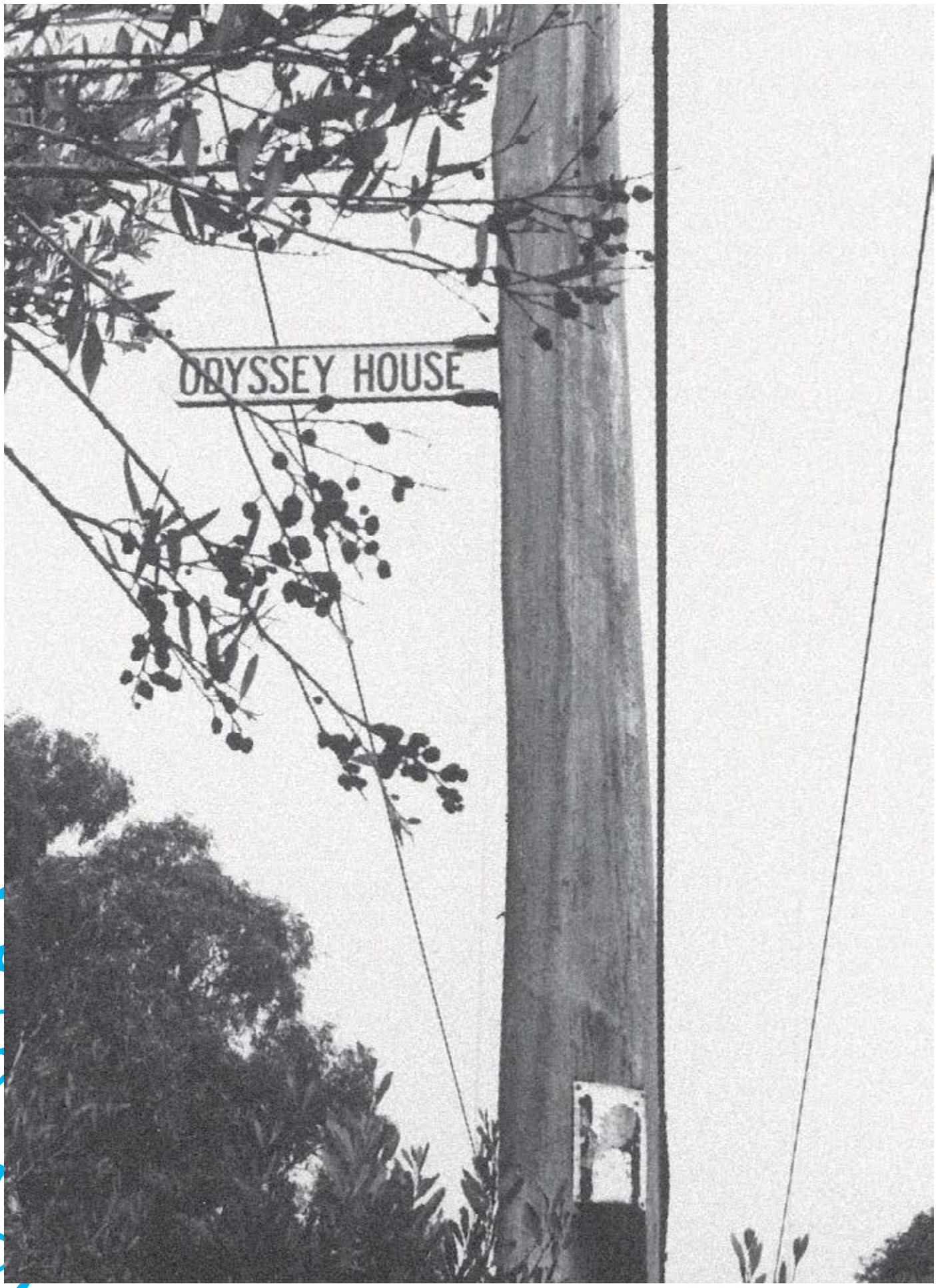
The REF is designed to align, where relevant, with the OHV Strategic Plan. The Strategic Plan incorporates the major initiatives and strategies to be pursued by Odyssey House Victoria and is reviewed on an ongoing basis.

The five objectives of the Stratgic Plan are:
1. Enhance Service Capacity & Outcomes
2. Build a Secure Financial Position
3. Develop Staff and Culture
4. Evaluate and Communicate Outcomes
5. Emphasise Relationships & Partnerships

The following tables align 4 of the 5 objectives of the Strategic Plan with a research and evalutaion action. Objective 2. Build a Secure Financial Postion has been omitted as it has no relevance to the REF.

The Research and Evaluation Actions may make references to specific Priorities for Action that can be found in the Strategic Plan.

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Enhance Service Capacity & Outcomes

Strategic Framework Priorities	Key Performance Indicators	Research and Evaluation Action
Develop, implement, and maintain administrative processes, databases, and systems to facilitate high-quality business and treatment standards across all OHV programs	ISO 9001 certification and ATCA standards are maintained	Client Experience Survey conducted annually
	Client outcome measures indicate a positive change in clients' drug use, health, and wellbeing	Introduce repeat outcome measures and may include a further measure of wellness, quality of life, or self-determination. This will be standardised across programs as much as possible but tailored to the individual program where needed. Also include measures of abstinence and relapse rates.
Develop client treatment plans in all programs and review them regularly	Annual reviews of client treatment plans indicate that programs are meeting their negotiated goals and expectations	Thematic review of findings – looking for commonalities, gaps, etc.
Conduct cross-team or external reviews of each program area at least annually and implement recommended measures for improvement	Annual program reviews/internal audits completed, and recommendations implemented where appropriate	OHV aims to evaluate the outcomes of our programs over time. However, as significant resources are required to do this well, OHV plans to run a limited number of outcome studies annually. Ideally, we would conduct at least one outcome study for every major OHV program every 5-10 years.
Maintain an innovative, profitable, and efficient Training Unit using OHV trainers and others with relevant sector experience	Achieve and maintain 70% course completion rates	Student pre/ post training feedback to improve course retention and suitability, e.g., the family violence training unit pre/post survey as mentioned in 1.8.

Develop and trial new or innovative treatment programs to enhance clients' outcomes and address unmet needs	Review changing client characteristics and unmet needs and adapt programs to suit	• OHV data is valued for its research potential. Examination of existing data and collection of additional data will enable OHV to better understand client needs and client outcomes as a result of our service delivery. This includes both administrative data related to client services and outcomes study data collected as part of routine data collection. Embedding further monitoring of outcome tools is also a priority. • Use rediCASE/other OHV data to do a desktop analysis of changing client characteristics over the last ten years. In early 2022, the OHV data warehouse was created. Currently, it draws data on clients, service events, and contacts from RediCASE (OHV's client management system), the VADC Service Event Statements, and Penelope (the ACSO database) and places it in a database where it can be used to create reports about clients outcomes and service delivery and to support quantitative research • See what the changes are and develop new initiatives and programs to suit.
	Several new programs are developed and trialed	• Translational research is applied here to develop or adapt programs based on scientific research translated into practice at OHV. Therefore, research outcomes must effectively translate the outcomes of research into initiatives and clearly articulate how these findings can achieve a 'real world' impact. • Often to be done in collaboration partnership with universities and other institutions such as the Deakin/ Odyssey Partnership and the 'Our Relationships' program etc.
Enhance consumer participation and input into service design and delivery	Implement consumer participation policies, and respond to consumer feedback	• Co-design will be an important part of all research and evaluation undertaken by OHV. In this document, the term 'co-design' means active engagement of research participants, clients, their families, and staff, in the design, roll-out, and evaluation of services and products. Research teams should, wherever possible, include clients. • Feedback helps to improve and enhance individual outcomes and experiences, service outcomes, OHV organisational outcomes, and reputation. It also allows us to build and maintain communication with others. This information can be used to make better-informed decisions
	Annual survey of client satisfaction	Annual Client Experience Survey
Maintain processes to identify and manage risk including OH&S, clinical, physical, financial, reputational, and regulatory	Bi-Annual review of risks conducted and used to inform the risk management plan	• Research Working Group (RWG) was developed to assess the risk and impact of any research or evaluation undertaken at OHV. • The CEO, RC, RWG, and EMS will consider the overall effectiveness of the research, any financial or other resources required; including any risks to participants and/or perceived or actual conflict of interest; as well as potential reputational risks.
	VOICE staff cultural survey	Examine in more detail, any risk identified on the staff survey.

Improve access, cultural safety, and relevance of OHV programs and services for Aboriginal and Torres Strait Islander peoples	Review policies and procedures to improve access to, and responses to, the broadest range of clients	Research and evaluation focus on the Aboriginal and Torres Strait Islander experience at OHV. This includes the Client Experience survey which included an Aboriginal and Torres Strait Islander component. It will also be looked at in developing and adapting our services model as per 1.6 and 1.8 as there is significantly more of this cohort in the TCs than previously. Research and evaluation may address the following areas: • Improving data collection for diverse populations. • Cultural safety and appropriateness. • Determining the level of unmet demand for treatment of diverse populations across different regions in OHV. • Understanding and addressing the impacts of stigma and discrimination; and • Developing and testing new or existing targeted interventions where current service delivery may be insufficient.
Improve access and relevant support to a diverse range of clients including Culturally and Linguistic Diverse (CALD) communities, people with disabilities, and Gay, Lesbian, Bisexual, Transgender, Queer, and Intersex (LGBTQI+) people	Review policies and procedures to improve access to, and responses to, the broadest range of clients	Research and evaluation focus on CALD and LGBTQI+ cohorts. This includes the Client Experience survey which included a diverse communities component. It will also be looked at in developing and adapting our services model as per 1.6 and 1.8 Research and evaluation may address the following areas: • Improving data collection for diverse populations. • Cultural safety and appropriateness. • Determining the level of unmet demand for treatment of diverse populations across different regions in OHV. • Understanding and addressing the impacts of stigma and discrimination; and • Developing and testing new or existing targeted interventions where current service delivery may be insufficient.
Improve solution focussed support and evidence-informed practice across all OHV programs to enhance recovery and well-being outcomes	Review and implement service improvements to better support the holistic needs of clients and residents across all OHV programs in line with the OHV Treatment Framework	• The objective of work in this priority area is to support improved care by increasing our understanding of which treatment types and processes are most effective and identifying any treatment gaps. • Research and evaluation will include different types of information from best practice evidence and from within OHV and outside it. • Best practice evidence will also be used to evaluate current models of care. Models of care are not standardised and vary according to a wide range of factors. These may include treatment or intervention settings, processes of care delivered, and target populations. The objective of work in this priority area is to support improving care.

Develop Staff and Culture

Strategic Framework Priorities	Key Performance Indicators	Research and Evaluation Action
Attract and retain a skilled workforce capable of addressing the drug and alcohol, mental health, and other treatment and support needs of clients	Regular surveys of employee engagement reveal a culture that is very supportive of employee performance, satisfaction, innovation, and wellbeing	The Voice Survey is conducted every 1 or 2 years for staff feedback as mentioned in 1.8. This will include the diverse cultures mentioned in 1.10 and 1.11.
Provide flexible and attractive opportunities for staff development	Training opportunities provided based on the outcome of staff surveys or performance and development reviews	• Desktop analysis of clients for the last ten years will reveal trends among the needs of clients for upskilled staff. Identify these gaps. • Clinician staff surveys to ascertain their current level or skill and if they would like to upskill, e.g., family violence skills. • Pre/post-training surveys and any other staff feedback as mentioned in 1.8.
3.4 Encourage and resource staff to increase productivity and explore new program models	Feedback from Managers indicates that staff have taken up some new evidence-based initiatives or ideas to enhance their efficiency or effectiveness	RC to help facilitate and support any staff with ideas for translational or service evaluation research which could be used for higher learning, such as a Master's or Ph.D.
	High-quality innovations & opportunities for improvement suggested by staff	Annual innovation grants to encourage staff to continue this and try new programs and initiatives.

Evaluate and Communicate Outcomes

Strategic Framework Priorities	Key Performance Indicators	Research and Evaluation Action
Conduct ongoing research and evaluations of Odyssey programs and incorporate practice and research-based outcome measures into service delivery where practical	Data on client outcome measures are collected and analysed annually where practical	Introduce repeat outcome measures and may include a further measure of wellness, quality of life, or self-determination. This will be standardised across some programs and tailored to the individual program where needed. Also include measures of AOD use, well-being, and relapse rates. As per 1.2.
Utilise academic institutions to enhance the quality of our program evaluations	Increase the number of evaluations that include an external University academic	As per 1.6 research and evaluation activities will often be done in collaborative partnerships with universities and other institutions such as the Deakin/ Odyssey Partnership and the 'Our Relationships' program etc. Further relationships will be fostered and encouraged.
Periodically benchmark Odyssey's policies and practices against other similar organisations	Assessment of Odyssey House against "best practice" benchmarks indicates a strong performance	Review service models and outcomes of similar organisations to see how OHV is performing.
Present papers at major conferences and publish articles in the sector and academic journals outlining program outcomes	At least five presentations p/a made in external professional forums about OHV performance or innovations/experience	OHV strongly encourages the publication of OHV research and evaluation findings in peer-reviewed journals. In addition to other publications such as media and reports. This is recommended to be part of the research plan; to make sure the way the research is set up is suitable for publication.
	Increased number of successful submissions made for OHV, staff, or program awards	• With the RC, OHV encourages and will enable staff to present policy or practice research and insights at conference presentations and posters. • For external researchers, there will be a discussion regarding permission for publication. Deidentified data and OHV name may be used in reports and peer-reviewed journals after permission is given by OHV. OHV will have permission to review this decision. OHV intellectual property ownership will be respected and discussed in terms of any publications etc.

Emphasise Relationships & Partnerships

Strategic Framework Priorities	Key Performance Indicators	Research and Evaluation Action
Develop and maintain new policies and practices to enhance holistic client care and service integration (internal and external) for all OHV programs	Develop and implement new practices around identified gaps in service integration to better support all client's and residents' holistic and specialist needs	Best practice evidence and evaluating current service models will include co-design which involves building relationships with staff and clients to encourage them to input their ideas, in particular, diverse populations as mentioned in 1.10 and 1.11.
Create and maintain new partnerships and consortium arrangements to address service gaps and gain access to new resources	Above average level of success in gaining financial and other types of support from Government, Trusts, Foundations, businesses, sponsors, and the community for partnership projects and services	As per 1.6 OHV has and wants to further engage in research partnerships and collaborations with different universities, service providers, and research centers. OHV is open to "one-off" partnerships and ongoing ones and will avoid exclusive arrangements. All partnerships and collaborations must share OHV values and philosophy/principles. Reasons for working together include: 1. Increasing partnership engagement with new research and evaluation design and results for mutual benefit 2. Benefitting from specialist knowledge and research that can lead to changes in how we work 3. Working together for grants and funding and other cost-effective solutions.

Internal and External Research & Evaluation Processes

The RC, RWG, and Executive will oversee and monitor research activities at OHV and are guided by the Terms of Reference (available in a separate document). The RC can be contacted at research@odyssey.org.au.

The pathway for external research, internal higher degree research, and internal evaluations and research is expressed in the diagram below.
External research, internal higher degree (post-graduation) research, and internal evaluations must include:

- Research questions intended use and planned outcomes.
- Focus on quality improvement of services or the client experience.
- Consistency between intended use and purpose for which data is being collected; and
- Ethics approvals as required.

Researchers will initially need to send a written statement summarising:

- Research questions, aims, planned outcomes, and intended use of research.
- The impact and involvement of OHV staff and clients; and
- Where they are obtaining resources from.

If approved, researchers will then complete the Assessment Guide for the RWG. A minimum of 5 committee members is needed to approve the project.

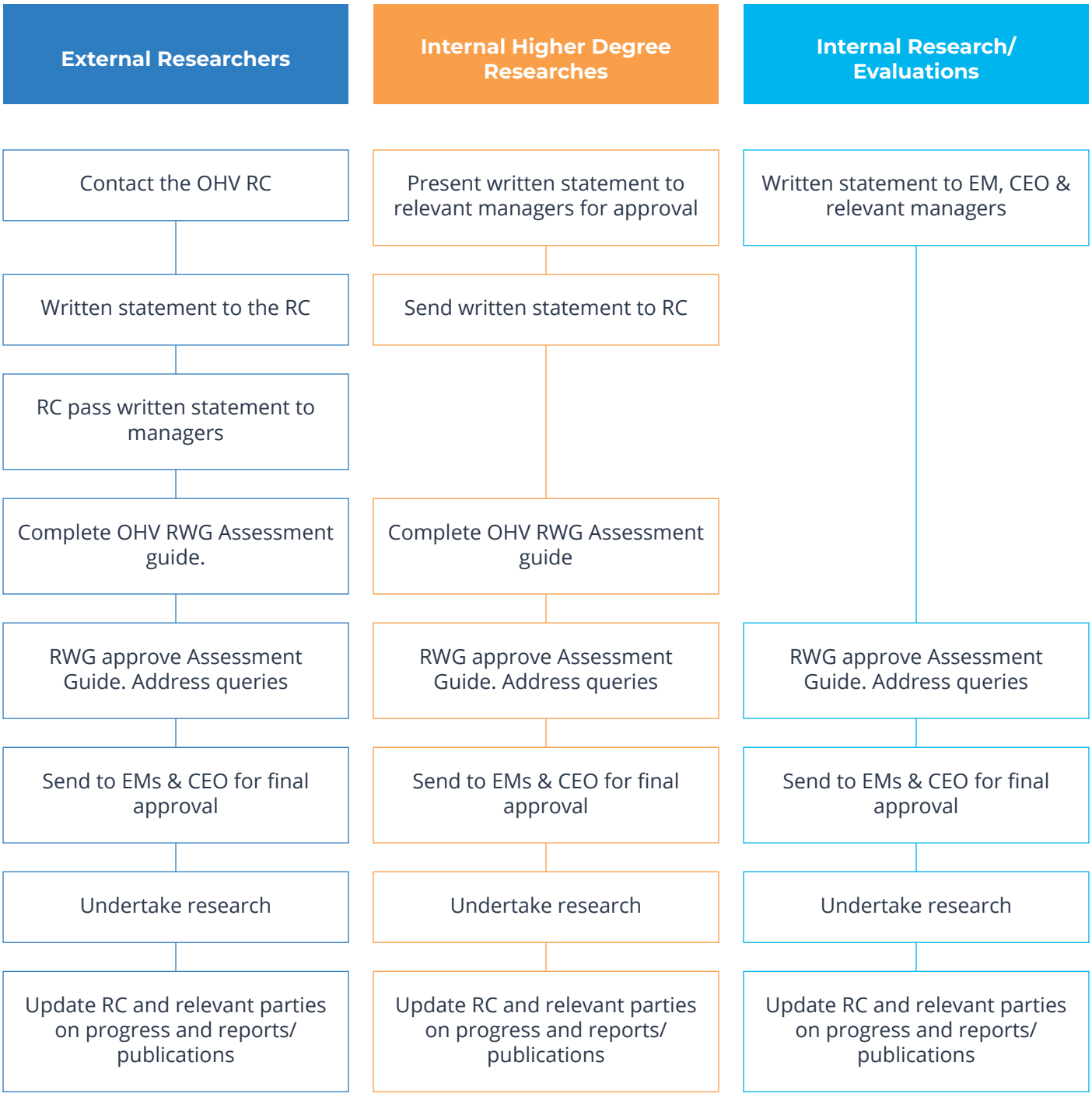
The Assessment Guide covers:

- Project Title
- Chief Investigators
- Collaboration/ Partnerships
- What the Project is addressing
- Target Population (age, gender, TC or CS, etc.)
- Project Timeline
- Project Aim
- Project Assessment and Outcome Goals
- Supporting Research (e.g., lit review, reports) Ethics Approvals
- Funding
- Potential Impact on Staff & Clients
- Follow-up with clients
- Expectations/ roles of OHV Staff
- Presentations/ Training for OHV Staff
- Development of Resources (if applicable)
- Final Reports & Journal Articles

Publication

OHV strongly encourages the publication of OHV research and evaluation findings in peer-reviewed journals. In addition to other publications such as media and reports. This is recommended to be part of the research plan; to make sure the way the research is set up is suitable for publication.
With the RC, OHV encourages and will enable staff to present policy or practice research and insights at conference presentations and posters.
For external researchers, there will be a discussion regarding permission for publication. Deidentified data and OHV name may be used in reports and peer-reviewed journals after permission is given by OHV. OHV will have permission to review this decision. OHV intellectual property ownership will be respected and discussed in terms of any publications etc.

Diagram 1: External and Internal Research & Evaluation Flowchart



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