CARER GATEWAY PROCESS EVALUATION KEY FINDINGS
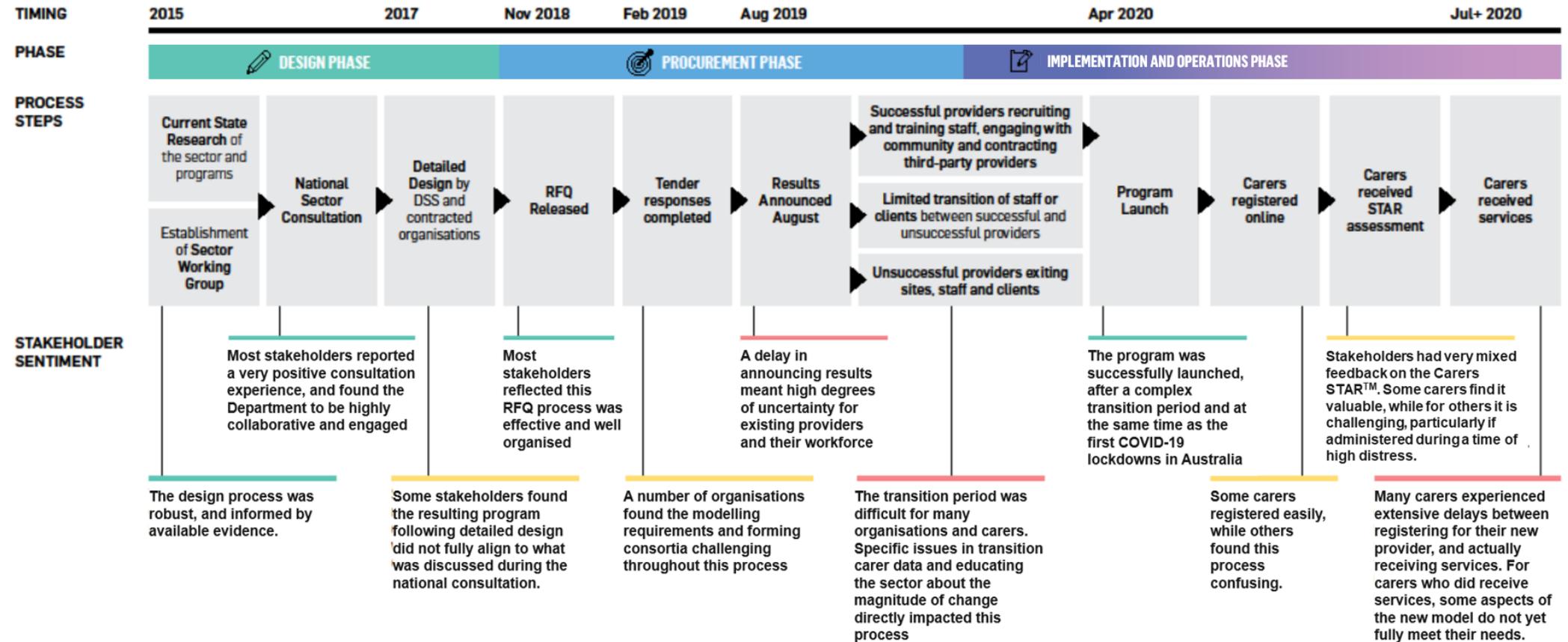
JUNE 2021

CONTEXT

Across Australia, there are an estimated 2.65 million carers who provide support and assistance for loved ones who live with additional care needs (Department of Social Services, 2019). The value of informal care provided by Australia's carers has been estimated to be $77.9 billion per year. Carers play a crucial role in our society, providing unpaid and ongoing support to those most in need (ABS, 2020).

Carer Gateway is a Commonwealth funded national program led by the Department of Social Services, and was launched in April 2020. It provides online, telephone and face-to-face support to carers across Australia. The Department is undertaking a comprehensive evaluation of Carer Gateway, including a baseline evaluation, ongoing program monitoring, a process evaluation, a carer wellbeing survey, and an impact evaluation. Urbis has been commissioned to deliver the process evaluation, commencing in December 2020 and concluding in June 2021. This document provides a summary of the Urbis findings and recommendations.

PROCESS EVALUATION METHOD

The process evaluation was delivered between December 2020 and June 2021 and included three phases. Phase 1 Inception and Planning involved development of an evaluation plan, tools and an ethics approval process. Phase 2 Interim Data Collection and Reporting involved a review of program and website data, consultation with n=75 carers, and the development of an Interim Report. The evaluation concluded with Phase 3 Final Data Collection and Reporting, which involved consultation with service providers and sector stakeholders, as well as additional analysis of program data and carer wellbeing survey data. All data was then synthesised and used to inform the development of recommendations to support the ongoing delivery of the program. All findings and recommendations are presented in the Final Report,

SUMMARY OF KEY FINDINGS

Timeline

TIMING	2015	2017	Nov 2018	Feb 2019	Aug 2019	Apr 2020	Jul+ 2020

PHASE: DESIGN PHASE | PROCUREMENT PHASE | IMPLEMENTATION AND OPERATIONS PHASE

PROCESS STEPS:
- Current State Research of the sector and programs
- Establishment of Sector Working Group
- National Sector Consultation
- Detailed Design by DSS and contracted organisations
- RFQ Released
- Tender responses completed
- Results Announced August
- Successful providers recruiting and training staff, engaging with community and contracting third-party providers
- Limited transition of staff or clients between successful and unsuccessful providers
- Unsuccessful providers exiting sites, staff and clients
- Program Launch
- Carers registered online
- Carers received STAR assessment
- Carers received services

STAKEHOLDER SENTIMENT:

- Most stakeholders reported a very positive consultation experience, and found the Department to be highly collaborative and engaged
- Most stakeholders reflected this RFQ process was effective and well organised
- A delay in announcing results meant high degrees of uncertainty for existing providers and their workforce
- The program was successfully launched, after a complex transition period and at the same time as the first COVID-19 lockdowns in Australia
- Stakeholders had very mixed feedback on the Carers STAR™. Some carers find it valuable, while for others it is challenging, particularly if administered during a time of high distress.

- The design process was robust, and informed by available evidence.
- Some stakeholders found the resulting program following detailed design did not fully align to what was discussed during the national consultation.
- A number of organisations found the modelling requirements and forming consortia challenging throughout this process
- The transition period was difficult for many organisations and carers. Specific issues in transition carer data and educating the sector about the magnitude of change directly impacted this process
- Some carers registered easily, while others found this process confusing.
- Many carers experienced extensive delays between registering for their new provider, and actually receiving services. For carers who did receive services, some aspects of the new model do not yet fully meet their needs.

SUMMARY OF RECOMMENDATIONS

Deliver awareness raising and educational support about the model	Improve frontline capability in collecting and using Carers STAR™ data	Increase monitoring of compliance for Carers STAR™ completion rates	Continue the COVID-19 'fast-track' intake option for carers with extremely high levels of need	Improve integration of online, telephone and face-to-face components	Review respite processes	Re-incorporate social connection for carers