Acknowledgments

This work was completed with the assistance of Anne McKenzie and Caron Watkins from the Manning Valley Neighbourhood Services Inc.

We would also like to thank the many key informants involved with the MHCSR Program. We thank them for their time and insights and trust that their views are adequately represented in this report. The full list of those consulted is provided in Section 2.4.

ARTD consultancy team

Fiona Christian

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<thead>
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<th>Abbreviation</th>
<th>Full Form</th>
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</thead>
<tbody>
<tr>
<td>MVNS</td>
<td>Manning Valley Neighbourhood Services</td>
</tr>
<tr>
<td>MHCSRP</td>
<td>Mental Health Court Support and Referral Program</td>
</tr>
<tr>
<td>ALS</td>
<td>Aboriginal Legal Service</td>
</tr>
<tr>
<td>CLSD</td>
<td>Co-operative Legal Services Delivery Program</td>
</tr>
<tr>
<td>IDRS</td>
<td>Intellectual Disability Rights Service</td>
</tr>
<tr>
<td>CLC</td>
<td>Community Legal Centre</td>
</tr>
<tr>
<td>MNCCLC</td>
<td>Mid North Coast Community Legal Centre</td>
</tr>
<tr>
<td>CALD</td>
<td>Culturally and Linguistically Diverse</td>
</tr>
<tr>
<td>LA</td>
<td>Legal Aid</td>
</tr>
</tbody>
</table>
Executive summary

The program

In 2016, Manning Valley Neighbourhood Services (MVNS) received a grant from the Law and Justice Foundation of New South Wales to deliver MHCSRP in the Taree area as a one-year project.

The MHCSRP is designed as a non-legal, single point of contact service providing support for people with mental health issues through their local court and legal processes. The program has two components: information and referral and court support.

The program facilitates information and referral between community legal and non-legal services and for people attending court. The Project Coordinator and the MHCSR volunteers act as an information and referral point for clients or services with clients that:

- have mental health issues who need legal information or referral to legal services, or
- are accessing legal services who are identified as needing support from mental health services.

The court support component of the MHCSRP draws on the model implemented by Intellectual Disability Rights Service (IDRS), who deliver a proven volunteer based model to successfully support people with an intellectual disability through the court system.

The evaluation

The evaluation is being undertaken to assess the effectiveness of program delivery and the extent to which it is achieving its intended outcomes. This will provide evidence to inform future project development.

The evaluation will describe the implementation of the MHCSRP, document the changes in the model over the life of the project and gather evidence on the effectiveness of the trial project method in achieving the desired outcomes for clients.

Key Findings

Clear articulation of the nature and scope of the program

- MVNS consulted with the relevant stakeholders and conducted thorough research to identify the service gap and stakeholder groups affected by the issue of concurrent mental health and legal difficulties. They assessed how Taree’s socioeconomic situation affected the legal and mental health literacy of its residents, and reviewed findings of the importance of mental wellbeing for those interacting with the justice system.
MVNS, in their grant application to the Law and Justice Foundation, clearly articulated this service gap for people with mental health issues needing support and assistance to negotiate the court processes. The application also identified the issue from the perspective of the courts and local legal services.

The program theory was also informed by literature and assessment of other similar successful programs. The grant application clearly specified how the intervention will bring about change by introducing a single point of contact to simplify the process for clients and other stakeholders involved. ARTD later worked with the MVNS to refine the program theory and develop a program logic making the less tangible assumptions more explicit.

**Program supported by policies and procedures, administration systems, communication and resources**

- MHCSRP has comprehensive policies covering a wide range of areas for the benefit of the service, its volunteers and its clients. The Coordinator and Volunteer roles have also been clearly defined in the program documentation.
- During the program development and since launch, the program has made contact with a number of legal, mental health and other community services. These relationships have been fostered through networking and media releases.
- Appropriate documentation has been developed outlining procedures for services to refer clients to the program as well as procedures and responsibilities of volunteers and staff to refer out clients to other services. The program has developed a number of systems to support client referrals out to needed services including a database of referral contacts and a referral matrix that links local services to specific issues.
- Before and during the May to December period, MVNS conducted a number of events and resources to promote the service to potential volunteers and local stakeholders. These included advertising through Law Week in May, an interagency presentation in August, media releases resulting in interviews on local radio and articles in the local paper, the official program launch in September, another media release in November to recruit more volunteers, and continuous communications through brochures, posters and the MHCSRP website.
- The Client Daily Diary forms are short, easy for volunteers to fill out, and capture all the key information for each client. However, monitoring can be improved through better data management processes.
- MHCSRP steering committee meetings show communication with court registrar and staff beginning before the commencement of the program. However, a particular process for liaison with court staff has not been formalised in these documents, and the Court Users Forum was not active for most of the duration of the project.

**Program implementation has been targeted and flexible**

- The MHCSRP supported 167 clients to negotiate court processes from July 2016 –May 2017).
  - over half (59%) of the clients supported were male.
  - Most (91%) of these clients had mental health issues.
– Just over half (51%) of clients had support person with them. Of the 84 clients with support present, most (50) still requested direct support by volunteers.
– Most (75%) of clients had been to court before.
– About one fifth of clients had been to court for matters related to traffic while most (84%) went for other matters.
– Less than half (45%) of clients had contact with some health or community services before attending court.
– Eighteen clients wanted to represent themselves at court. After speaking with a volunteer, 9 sought legal representation.
– Volunteers attended Legal Aid interviews with 32 clients during October-16th May 2017 period.
– On average, volunteers spent over an hour with a client (77 minutes). This time varied between 10 minutes to five hours.

- The early consultation with ALS ensured that the program design is suitable for the cultural context and resulted in the program supporting a high proportion of clients identifying as Aboriginal or Torres Strait Islander (17% of the total clients supported).
- Almost all volunteers felt that training adequately prepared them to start the program. They expressed that support from the Coordinator and resources provided to them, such as the referral matrix, were sufficient to get them through any challenging situation.
- MCHSRP invested in establishing relationships and setting up processes for referral intake. Despite this preparation, just 13% of MCHSRP clients were referrals. Most (82%) connected with the service on the court day through a volunteer or had used the service before. Stakeholders offered a number of suggestions why more clients were not referred to the service. Some suggested that in future increased emphasis should be put on engaging with probation and parole services, psychologists, staff from the mental health unit, and GPs.
- Though the low level of referral intake is contrary to the early expectations from the program, the relatively higher number of people referred out is an unexpected positive outcome. A total of 89 people were referred to other services including mental health, housing, financial, family/relationship, Legal Aid, MNCCCLC, welfare, counselling, emergency relief, drug and alcohol and other community services. This could indicate that clients may not have been connected to services before attending court.

Program outcomes

- All clients are satisfied with the MHCSRP service. Those who responded to the satisfaction survey, felt much better after speaking to MHCSRP volunteer than they did before leaving home.
- Although the average scores improved for all three categories, the greatest change was in clients feeling they had no or very little support before leaving home to feeling well supported at the time of filing the survey (mean score change of 5.5) followed by feeling stressed and anxious at the time of leaving home to feeling ok after speaking to the volunteer. Most people (close to 60% of the clients giving a rating of above 5) felt they knew what they would have to do before leaving home and hence it didn’t make as much of a difference speaking to the volunteer in this regard. Most clients mentioned volunteers giving guidance and explanations about how to navigate the court system,
offering kindness and support, and helping them manage paperwork and legal support they were offered from other services.

- Stakeholders believed that the program had positive outcomes for Taree court. Most stakeholders commented on the ability of volunteers to make the court process smoother by helping clients to remain calm and stay at court. Some commented on the way that the program had raised awareness of mental health at Taree court, which was previously not dealt with as openly.

**Suggestions for improvement**

Almost all stakeholders interviewed were convinced that MHCSRP is essential to fill in the gap in service provision. The large majority of stakeholders felt that the program complemented, rather than duplicated, existing services.

Though a few recommendations for future improvement emerged:

- Formalise the program so all relevant stakeholders are fully aware of the objectives of the program processes. While a volunteer program is very good at filling the existing gap, replacing it with employed workers might further enhance the client outcomes and also help increase the trust and support from stakeholders. Alternatively two components can be incorporated into the program with the volunteer role being quiet support, and paid roles taking on the responsibility of referrals.
- Additionally, the communication between the various stakeholders should be formalised (e.g. volunteers communicating with solicitors or referral agencies).
- Greater engagement with the court.
- Volunteers taking on advocacy role though this might also mean changing the recruitment strategy to attract people who are more suited to the role.
- Volunteer training to increase focus on what they can offer help on and when to refer them to others for expert advice (i.e. not overstepping on boundaries).
- Further develop mental health referral network
- Increase emphasis on referrals as that a very useful avenue to catch people out of the loop. A few also suggested increased follow ups on referrals by the program. The referrals can also be improved by targeting the right services emphasising on probation and parole, psychologists and mental health unit, GPs.
- Invest more in recruiting Indigenous volunteers.
1. Introduction

1.1 The policy context

Manning Valley Neighbourhood Services, through the Co-operative Legal Services Delivery Program (CLSD), identified a service gap in the Taree area for clients presenting with mental health issues who are due to appear in the Local Court for criminal or tenancy matters. The CLSD established a Mental Health Justice Working Group to facilitate discussion and action between the legal and mental health sectors.

The Working Group investigated how other programs, such as the Intellectual Disability Rights Service (IDRS), successfully help vulnerable people with their legal issues at court. They also undertook a client survey and literature review of state and federal research reports. These reports identified that the Taree community remains one of the more disadvantaged locations in NSW, with:

- community members more likely to have spent time in prison and to have a significant mental health problem
- the likelihood of disadvantaged groups to ignore their legal problems or leave them un-finalised
- the important role that the non-legal sector has as the first point of contact in assisting people with mental problems identify a legal issue
- the high proportion of people appearing before courts and entering the prison system with a mental illness
- the need for a simple gateway to enhance early legal intervention
- the individual and systemic barriers to accessing legal services and participating effectively in court proceedings, such as not understanding how the court system works, lacking confidence to seek support, and not knowing who to seek support from.

1.2 The Mental Health Court Support and Referral Program

Manning Valley Neighbourhood Services (MVNS) received a grant from the Law and Justice Foundation of New South Wales to undertake the Mental Health Court Support and Referral Program in the Taree area.

The evidence gathered during the trial will provide a foundation for additional grant funding or for the project to be absorbed into an existing mental health organisation/project partner program. The program commenced working with clients in July 2016.
1.2.1 Service model/program components

The MHCSRP is designed as a non-legal, single point of contact service providing support for people with mental health issues through their local court and legal processes. The program has two components: information and referral, and court support.

The program facilitates information and referral between community legal and non-legal services and for people attending court. The Project Coordinator and the MHCSR Volunteers act as an information and referral point for clients or services with clients that:

- have mental health issues who need legal information or referral to legal services, or
- are accessing legal services who are identified as needing support from mental health services.

Court support is provided by trained volunteers who support clients by acting as a useful link to court services, and a friendly face in an intimidating environment. Volunteers support clients on the day of their court proceedings. This service can be given to potential clients through either of two pathways:

- referral to the Project Coordinator from partner community agencies, and assignment to a volunteer
- direct engagement through court services or by MHCSRP volunteers at Taree Court on list day Tuesdays.

The court support component of the MHCSRP model draws on the model implemented by IDRS, who deliver a proven volunteer based model to successfully support people with an intellectual disability through the court system.

Since the pilot launch in July 2016, MHCSRP has undergone a number of small changes to develop the model to best suit clients and stakeholders. A key feature of the MHCSRP is periodic evaluation to enable accurate and responsive changes for this purpose.

1.2.2 Intended outcomes

Through the MHCSRP, the target group was expected to benefit from:

- reduced stress, anxiety and other barriers they face in participating effectively in court and legal proceedings
- increased willingness to attend, remain at and fully participate in court
- better communication with Police, Legal Aid and court staff
- early identification of potential issues and linkage to appropriate legal advisors or mental health services
- support in navigating and understanding court processes and procedures

The link between the service model and the intended outcomes are illustrated in the program logic.
There is a gap in the service system for people with mental health issues needing support and assistance to negotiate the court processes.

---

**Figure 1. Program Logic**

- **Input**
  - The project partners collaborate effectively and engage other stakeholders to support the project.

- **Effective delivery**
  - Partner agencies refer to and receive referrals from the MHCSRP.
  - Sufficient volunteers are present at court on list day and tenants tribunal.
  - Clients receive accessible and timely service through volunteers or referral to the Project Coordinator.
  - Volunteers are able to build trust with clients and understand clients’ mental health and other needs.
  - Volunteers support clients through their court process.
  - Volunteers receive ongoing support.
  - The MHCSRP works effectively with legal representatives and court staff.
  - The MHCSRP is well managed.
  - The MHCSRP is responsive to circumstances that arise during implementation.

- **Outcome**
  - Clients are supported in linking with community support services.
  - Clients are supported in communicating with Legal Aid, solicitors and court staff.
  - Clients are more willing to participate in the court/legal process.
  - Clients experience reduced stress and anxiety at court.
  - Clients have a better understanding of court processes and procedures.

- **Program documentation**
  - The MHCSRP has clear documentation e.g. policies and procedures, steering committee minutes, data collection and review processes.

---

**MHCSRP Evaluation**

**MHCSRP is conducted in a way that provides a clear model and evidence base for future funding.**
2. The evaluation

2.1 Background

MVNS planned for evaluation to be part of the program from its inception, stating in the grant application that their “approach is to trial the developed model and periodically evaluate the program to enable fine-tuning as required and to ensure that the project is delivering the desired quality outcomes of our target groups and ensuring that the program represents the efficient use of resources.”

A professional evaluator was accordingly engaged before the project was launched. However, this work did not continue, and ARTD Consultants was approached in October 2016 to take up this work.

2.2 Purpose

The evaluation is being undertaken to assess the effectiveness of program delivery and extent to which it’s achieving its intended outcomes. This will provide evidence to inform future project development.

2.3 Scope and focus

The evaluation will describe the implementation of the MHCSRP, document the changes in the model over the life of the project and gather evidence on the effectiveness of the trial project method in achieving the desired outcomes for clients.

2.4 Methods

The key evaluation questions, related guiding questions and evaluation methods are summarised in table 2.

Interviews/focus groups are labelled as follows:

1. MVNS and MHCSRP staff and steering committee
2. volunteers
3. court staff including Legal Aid, Aboriginal Legal Service and Community Legal Centre solicitors
4. clients
5. other stakeholders
### Table 1. Evaluation questions and methods

<table>
<thead>
<tr>
<th>Evaluation question</th>
<th>Related guiding questions</th>
<th>Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>To what extent was the design of the program suitable in meeting the needs of clients and key stakeholders?</strong></td>
<td>To what extent was the nature and scope of the need or problem to be addressed clearly articulated?</td>
<td>Document review, Interview 1</td>
</tr>
<tr>
<td></td>
<td>Were the underlying assumptions about how change occurs clearly identified?</td>
<td>Document review, Interview 1, 3, 4, 2, 5</td>
</tr>
<tr>
<td></td>
<td>To what degree was the program design suitable for the cultural context?</td>
<td>Admin data analysis, Interview 4, 2, 1, 5</td>
</tr>
<tr>
<td></td>
<td>To what extent did the program design meet client and key stakeholders’ needs?</td>
<td>Interview 4, 5, Client satisfaction data</td>
</tr>
<tr>
<td><strong>To what extent is the program supported by policies and procedures, administration systems, communications and resources?</strong></td>
<td><strong>Policies and procedures</strong></td>
<td></td>
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<tr>
<td></td>
<td>Have effective processes to receive client referrals been established?</td>
<td>Document review, Interview 1, 5, 4, Administrative data</td>
</tr>
<tr>
<td></td>
<td>Have effective processes to refer clients to other services been established?</td>
<td>Document review, interviews 1, 4, 5, administrative data analysis</td>
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<tr>
<td></td>
<td>Have effective processes for liaison with court staff been established?</td>
<td>Document review, interviews 1, 2, 3</td>
</tr>
<tr>
<td></td>
<td>Are Coordinator and Volunteer roles clearly defined?</td>
<td>Document review, interviews 1, 2</td>
</tr>
<tr>
<td></td>
<td>Are Coordinator and Volunteer support processes in place?</td>
<td>Document review, interviews 1, 2</td>
</tr>
<tr>
<td></td>
<td>Did the policies and procedures of the auspice organisation cover all the needs of the project?</td>
<td>Document review, interview 1</td>
</tr>
<tr>
<td><strong>Administration and monitoring systems</strong></td>
<td><strong>Do Client court support forms provide needed management, referral and reporting data?</strong></td>
<td>Document review, interviews 1, 2, administrative data analysis</td>
</tr>
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<td></td>
<td><strong>Do Client satisfaction surveys provide useful feedback?</strong></td>
<td>Interviews 1, 2, client satisfaction data</td>
</tr>
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<td></td>
<td><strong>Does the Administration database support the management, monitoring and reporting of the project?</strong></td>
<td>Interview 1, administrative data analysis</td>
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<tr>
<td><strong>Communication strategy</strong></td>
<td></td>
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</tr>
<tr>
<td>Evaluation question</td>
<td>Related guiding questions</td>
<td>Methods</td>
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<td>----------------------------------------------------------------------------------------------</td>
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<td></td>
<td>Is there a timely and comprehensive communication strategy for recruiting volunteers and engaging stakeholders and referral agencies?</td>
<td>Document review, interview 1, 2, 5</td>
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<td></td>
<td>To what extent do referrers and other local services understand the service MHCSR P is providing?</td>
<td>Interview 5</td>
</tr>
<tr>
<td></td>
<td>To what extent are the program, its goals and methods understood by solicitors, court staff and police?</td>
<td>Interview 3</td>
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<tr>
<td></td>
<td>Have changes in the program eligibility or processes been communicated to all stakeholders in a timely way?</td>
<td>Interviews 3, 5</td>
</tr>
</tbody>
</table>

**Budget and resources**

|                     | Are there appropriate resources allocated to the MHCSR P?                                                                                                                                                               | Interview 1, administrative data analysis                                                    |
|                     | Are there enough funded hours for the Coordinator?                                                                                                                                                                       | Interview 1, administrative data analysis                                                    |
|                     | Are there enough volunteers for the MHCSR P?                                                                                                                                                                            | Interview 1, administrative data analysis                                                    |

**To what extent is the service being delivered as intended?**

<table>
<thead>
<tr>
<th>Coordinator and volunteers</th>
<th>To what extent has the project been able to recruit a Coordinator with the necessary knowledge, skills and attitudes?</th>
<th>Interviews 1, 3, 5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Has the project Coordinator received timely and relevant training?</td>
<td>Interview 1</td>
</tr>
<tr>
<td></td>
<td>Has volunteer training been delivered?</td>
<td>Document review, interview 2</td>
</tr>
<tr>
<td></td>
<td>To what extent was volunteer training effective in preparing volunteers for the context and role?</td>
<td>Interviews 1, 2</td>
</tr>
<tr>
<td></td>
<td>To what extent is volunteer performance in their role monitored and developed?</td>
<td>Interviews 1, 2</td>
</tr>
</tbody>
</table>

**Clients**

<p>| How many clients receive service through the MHCSR P? | Administrative data analysis |</p>
<table>
<thead>
<tr>
<th>Evaluation question</th>
<th>Related guiding questions</th>
<th>Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>What are the demographic characteristics of clients who receive services from the MHCSRP?</td>
<td>Administrative data analysis</td>
<td></td>
</tr>
<tr>
<td>What proportion of clients referred to the MHCSRP meet the program priority target group?</td>
<td>Administrative data analysis, interviews 1, 2</td>
<td></td>
</tr>
<tr>
<td>What proportion of clients are first engaged in the program at court?</td>
<td>Administrative data analysis</td>
<td></td>
</tr>
<tr>
<td>Who is referring clients to the MHCSRP?</td>
<td>Administrative data analysis</td>
<td></td>
</tr>
<tr>
<td>To what extent do clients understand the service offered?</td>
<td>Interviews 2, 3, client satisfaction survey</td>
<td></td>
</tr>
</tbody>
</table>

**Assistance at Court**

| To what extent are the Coordinator and volunteers able to engage un-referred clients at court? | Administrative data analysis, interviews 1, 2                                                                                                                                 |                                                                                               |
| To what extent are the Coordinator and volunteers able to provide assistance to clients at court? | Interviews 1, 2, 4                                                                                                                                                                                                            |                                                                                               |
| To what extent are volunteers able to obtain assistance in supporting clients at court? | Interviews 1, 2                                                                                                                                                                                                               |                                                                                               |
| To what extent is assistance provided through MHCSRP within critical timeframes?    | Interviews 1, 2, 3                                                                                                                                                                                                            |                                                                                               |

**What are the outcomes of the MHCSRP for clients?**

<p>| To what extent do clients have a better understanding of court processes and procedures? | Interview 4, client satisfaction survey, administrative data analysis                                                                                                                                                    |                                                                                               |
| To what extent do clients experience reduced stress and anxiety at court?            | Interview 4, client satisfaction survey                                                                                                                                                                                   |                                                                                               |
| To what extent are clients more willing to participate in the court/ legal process?  | Interviews 2, 3, 4, client satisfaction survey, administrative data analysis                                                                                   |                                                                                               |
| To what extent are clients’ potential issues identified early?                      | Interviews 3, 5, administrative data analysis                                                                                                                                                                          |                                                                                               |
| To what extent are clients linked to needed legal, mental health and other services? | Administrative data analysis, interviews 1, 2, 4, 5                                                                                                           |                                                                                               |</p>
<table>
<thead>
<tr>
<th>Evaluation question</th>
<th>Related guiding questions</th>
<th>Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>To what extent has MHCSR improved clients’ capacity to navigate the court system?</td>
<td>Client satisfaction survey, interviews 1, 2, 3, 4</td>
<td></td>
</tr>
<tr>
<td>To what extent are clients satisfied with the service they have received through the MHCSR?</td>
<td>Client satisfaction survey, interview 4</td>
<td></td>
</tr>
<tr>
<td><strong>What are the outcomes of the MHCSR service for the courts and police processes?</strong></td>
<td></td>
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<tr>
<td>To what extent has MHCSR filled a service gap at Taree Court?</td>
<td>Interviews 1, 3, 5</td>
<td></td>
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<tr>
<td>To what extent has client communication with court stakeholders improved?</td>
<td>Interview 3</td>
<td></td>
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<tr>
<td>To what extent has client court attendance improved?</td>
<td>Administrative data analysis, interviews 3, 4</td>
<td></td>
</tr>
<tr>
<td>To what extent has court punctuality improved?</td>
<td>Administrative data analysis, Interview 3</td>
<td></td>
</tr>
<tr>
<td>To what extent has court preparation improved?</td>
<td>Interviews 3, 4</td>
<td></td>
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<tr>
<td>To what extent has MHCSR impacted on the costs of court processes?</td>
<td>Interview 3</td>
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</table>

### 2.4.1 Document review and administrative data analysis

Secondary data sources used for analysis included:

- Funding application
- Minutes for the MHCSR steering committee (July 2016 – April 2017)
- Volunteer newsletters (July 2016 – April 2017)
- Daily diary data (July 2016 – 16 May 2016)
- Coordinator’s work plan and job description
- Volunteer job description
- Policy handbook
- Return to court and MHCSR referral forms
- Overview of tasks and subcommittees
- MHCSR brochures, media releases and other publicity
- MHCSR referral matrix
- Stakeholder and referral contact lists
- Orientation checklist and program documents

### 2.4.2 Interviews and focus groups

In April 2017, ARTD visited Taree and conducted face to face or phone interviews with
- four clients
- the Coordinator
- six volunteers
- Taree Court Registrar
- and seven steering committee members/stakeholders.

Where permission was given, interviews and focus groups were recorded. Responses were collated under evaluation questions that applied across each interview type. These responses then underwent qualitative analysis to understand different perspectives or common themes on the same issues.

2.4.3 Client satisfaction survey

In January 2017 a short client satisfaction survey was implemented to capture the level of satisfaction with MHCSRP service. The clients were asked to fill out the survey after the volunteer was done providing the clients with the required support. It asked them to recall and rate how they felt about going in to court before leaving home and then rate (on a scale of 1 to 10) how they currently felt about going in to court in terms of knowing what they’ll have to do, anxiety and feeling supported. A total of 24 clients responded to the survey out of the 65 clients seen by the program between January and 16 May, giving a reasonable response rate of 37%.
3. Findings: MHCSR Program design

3.1 Appropriateness of program design

3.1.1 Clear articulation of the nature and scope of the problem

In 2015, MVNS submitted a grant application to the Law and Justice Foundation that clearly articulated the service gap for people with mental health issues needing support and assistance to negotiate the court processes. MVNS described how the problem affected their work with clients seeking non-legal support at court as they lacked the knowledge to provide general legal information and advice, or any access to that information and advice, and had no point to refer them to.

MVNS also articulated the full scope of the issue from the perspective of the courts and local legal services who saw the need for some people who presented to receive mental health support at court.

Through this and other consultation, MVNS identified the following groups affected by the issue:

- people with a lived experience of mental health issues who also face summary criminal offences or housing tribunal issues (the primary beneficiaries)
- people with a lived experience of mental health issues who also have a more general legal problem
- support networks and families
- the justice system and those working in it
- other non-legal mental health service providers.

MVNS also articulated how the need fit within a state and national context through a document review. This outlined Taree’s socio economic situation within New South Wales, how this affected knowledge of legal and mental health issues of its residents, and previous findings about the importance of prioritising mental wellbeing for those interacting with the justice system. In this way, MVNS described a thorough understanding of the problem, the drivers behind it, and could confidently assert that no existing program in their local area addressed the issue.

3.1.2 Identification of theory of change

MVNS staff outlined their assumptions about how change occurs in their grant application to the Law and Justice Foundation. This described how the program Coordinator would act as an information and referral point between mental health-based and legal-based services, equipping both sectors to better support their clients, and how the target group could receive the needed support at Court through referral to the MHCSRP, or engagement at
court on list days. They clearly identified how the single point of contact would simplify the process for clients and other services, making change more likely to occur, and how MHCSRP volunteers would be trained to give appropriate support and information according to their expertise, and support clients to gain outside support and information as needed. This was backed up by literature and comparisons to other proven programs. However, the grant application did not fully articulate how the program brings about internal change for clients, allowing them to remain at court or better engage with the court processes.

ARTD worked with MHCSRP staff to develop a program logic (see Figure 1.) The program logic is a visual representation of the important components of the program, and how these components work together to bring about change for people with mental health difficulties who have legal issues in the Taree area. The model begins at the bottom with the problem to be addressed, and is linked to the ultimate intended outcomes at the top through a series of short, intermediate and longer term outcomes. Each box in the model is a condition that is thought to be necessary to move towards the following outcomes. In combination the conditions are thought to be sufficient (with certain assumptions and notwithstanding external factors) for ensuring the outcome occurs.

Through this process, ARTD and MHCSRP staff were able to make explicit those less tangible assumptions about how change occurs for clients, such as how increased understanding of court processes and procedures could lead to reduced stress and anxiety at court, which may lead to increased willingness to participate in the court and legal process. This illustrated more of the logic of why the MHCSRP is helpful, and also allowed future alterations to the client satisfaction survey, to test those less tangible links in the logic chain.

### 3.1.3 Process of the program development

Program development and implementation is described in the Steering Committee meeting minutes of February 2016 to April 2017, and the Volunteer Newsletters of July 2016 to April 2017. Between 4 and 13 members were present at the Steering Committee meetings during the period and the meeting minutes’ record different ideas discussed for program publicity, engagement of stakeholders and training partners, engagement of the Program Coordinator, and issues arising throughout program implementation.

### 3.1.4 Communication strategy for recruiting volunteers and engaging stakeholders

Before and during the May to December period, MVNS conducted a number of events and developed a number of resources to promote the service to potential volunteers and local stakeholders. These included advertising through Law Week in May, an interagency presentation in August, media releases resulting in interviews on local radio and articles in the local paper, the official program launch in September, another media release in November to recruit more volunteers, and continuous communications through brochures,
posters and the MHCSRP website. Steering committee documentation identified specific recruitment and media subcommittees formed to manage effective engagement.

3.2 Program supported by policies and procedures, administration systems, communications and resources

3.2.1 Governance

The MHCSRP has a central Steering Committee made up of representatives from the program, MVNS and key CLSD partners including Legal Aid, Mid North Coast Community Legal Centre, Aboriginal Legal Services, Hunter New England Local Health District, Intellectual Disability Rights Service, Flourish Australia, North Coast TAFE and Tenancy Advice and Advocacy Service. The Committee's Terms of Reference outline that its roles include providing expert independent advice to the Coordinator, and supporting project implementation through active contribution to stakeholder engagement, overseeing project development and direction, the project scope and plans, resolving any issues affecting achievement of project aims, and approving any changes to the program model.

The document review showed that the Committee met in most months during the January 2016 – May 2017 period; minutes for June, September, and December were not sighted. Several sub-committees were also formed to target issues such recruitment, training, data collection and evaluation, and policies and information management.

3.2.2 Policies and procedures

The MHCSRP has comprehensive policies covering a wide range of areas for the benefit of the service, its volunteers and its clients. Areas covered by the program’s policies and procedures include:

- privacy and confidentiality
- professional conduct
- service user feedback and complaints
- conflict of interest
- grievances
- sexual harassment
- safety
- WHS
- access and equity
- volunteer role, support and induction/leaving
- referral and service requests.

Although we understand from interviews with stakeholders that the following areas were addressed in meetings and practice, in our review we have not seen documents outlining:
- liaising with court staff
- a publicity strategy
- procedures for increasing the number of referrals
- professional development for Coordinator and volunteers.

**Client referral processes**

**Referrals to the MHCSRP**

During program development and since launch, the MHCSRP has made contact with a number of legal, mental health and other community agencies. These relationships have been fostered through networking events, on site meetings arranged by the Coordinator with managers and staff, an interagency presentation about the program, and media releases informing other services of the work that the MHCSRP is able to do for their clients, and how to access the program. Appropriate documentation has been developed to support this, including a program brochure, a referral and service policy outlining the responsibilities of all agencies involved and internal requirements for establishing and maintaining effective referral networks, and a comprehensive referral intake form.

**Referrals to other services by the MHCSRP**

The MHCSRP Referral and Service Request Policy outlines the responsibilities for volunteers and staff in referring clients to needed services.

The program has developed a number of systems to support client referrals out to needed services. These include a referral matrix linking local services to specific issues including homelessness, debt, need for food, mental health services, grief, parenting, drug and alcohol problems, medical problems, carer overburdening, family breakdown, legal problems and need for social support. The program is also equipped with a database of referral contacts including names, email addresses and phone numbers for:

- Aboriginal Legal Centre
- Mid North Coast CLC
- Benevolent Society
- BIRIPi
- Breakthru
- CatholicCare
- Flourish Australia
- Legal Aid
- Manning Mental Health Services
- Mission Australia Housing
- Pathfinders
- Samaritans
- Mid Coast Tenant Advice Service
**Liaison with court staff**

MHCSRP steering committee meetings show communication with court registrars and staff beginning before the commencement of the program, to get feedback on how the service could best work with existing court processes, and to use court-supported events to further publicise the program. However, a particular process for liaison with court staff has not been identified in these documents.

**Definition of Coordinator and Volunteer roles**

Both the Coordinator and Volunteer roles have been clearly defined in the program documentation. The Coordinator project role, its scope, responsibilities, and required hours (15 over two or three days) have been detailed in the official job description published in June 2016. The Volunteer job description also clearly outlines 12 role requirements and responsibilities, which are elaborated on in the Volunteer section of the MHCSRP policy guide. The Coordinator and Volunteers have access to these documents.

**Coordinator and Volunteer support processes**

Coordinator’s job description required the ability to work with minimal supervision, with accountability to the MVNS. Volunteers have clearly defined and implemented support processes in place. A flow chart outlining volunteer interactions with clients explicitly identifies opportunities to seek support from the Coordinator and highlights that this is appropriate whenever a volunteer feels that they need support. If a volunteer does not feel that their support needs with a client have been met, the MHCSRP has a process for handing that client over to the Coordinator, who can deal with any larger issues and reassign the client to another volunteer if appropriate. Volunteers are also given support in the form of resources including a clear explanation of who to take instructions from, their rights and responsibilities, and an orientation kit. Volunteers have the opportunity to debrief, ask questions, and give and receive feedback at monthly volunteer meetings with the Coordinator.

Volunteers involved for a long period are supposed to receive supervision at regular intervals, and all volunteers exiting the program are given feedback, and the opportunity to comment on the service and their experience.

All volunteers have received orientation and training including:

- an outline of the volunteers’ rights and responsibilities
- the process at court
- the purpose and process of data collection
- making referrals
- do’s, don’ts and court etiquette
- the role of the Coordinator
- Possible problems and solutions
Mental Health First Aid training
Legal Aid training

3.2.3 Administration and monitoring systems

The program is supported by a comprehensive suite of administration and monitoring tools. The following forms are filled by volunteers and the Coordinator to monitor progress:

- client data diary – this sheet is completed by volunteers for every client supported, and later entered into an excel sheet
- floater summary/ Coordinator daily summary
- referral form
- return to court form

The forms are short, easy for the volunteers to fill out and capture all the key information on each client including demographic details, how they connected with the service, referral details, feedback on the service, details of follow up after the matter has been heard by magistrates, identification of client needs and outcomes.

Monitoring and reporting can be improved through adding validation rules to the data collation spreadsheet to ensure that the data entered is consistent. This will make both data entry and analysis more efficient.

However, some limitations were identified by the volunteers that did not allow them to collect data consistently. One stakeholder commented that volunteers were repeatedly encouraged to fill out the intake and satisfaction forms, but that key issues such as literacy and drug issues, and referrals provided by the service were still not being accurately collected.

Volunteers expressed their discomfort asking clients to rate the service during such an emotional time for them, and felt that this somewhat tainted the support they were offering. Some volunteers also doubted the validity of asking whether a client would recommend the service to a friend while standing so close to a volunteer.

Volunteer performance

Volunteer performance is monitored at court as part of weekly de-briefings.

3.3 Changes to the model

Initial program development was in part based on assumptions made by the Steering Committee about referral to and use of the program. These were informed by their theory of change and input from community stakeholders and court staff. Assumptions included the belief that the program would receive most of its clients through referral, that supporting clients through tenancy issues would be a main feature of the program, and that the program
would be inundated with clients. Once the program was implemented, these assumptions were tested and the program developed to suit the reality of Taree Court, the legal sector, the community and community services sector.

ARTD made a number of recommendations for the program in the interim evaluation report, largely to do with record keeping and data collection. Following the report, volunteers were given further instruction about data collection during meetings and in the volunteer newsletter.

Figure 2 describes all the changes to the program model over time.
**Figure 2. Changes to the program model over time**

<table>
<thead>
<tr>
<th>Month</th>
<th>Changes</th>
</tr>
</thead>
</table>
| August | Client Daily Diary form updated to capture:  
- mental health issues  
- self-representation  
- assistance given to sign up for Legal Aid or MNCCCLC  
- mental health and other referrals made  
- follow up with clients |
| September | Role of Lead Volunteer removed, Coordinator present at all list days. |
| October | Recruitment begins for second round of volunteers. |
| November | Volunteers provide Legal Aid with information on clients’ previous involvement with community services. |
| December | On-Call volunteer added for afternoons. |
| January | Volunteers no longer go into legal conferences with Legal Aid. |
| February | Positive feedback about community referrals leads to increased emphasis on connecting clients to services. |
| March | On-Call volunteer re-instated because of increased afternoon clientele. |
| April | Client satisfaction surveys introduced for evaluation. |

**Key**
- Volunteers
- Data Collection
- Legal Aid
4. Findings: Implementation of the MHCSRP

4.1 Clients receiving service through the MHCSRP

Details of clients receiving service through the MHCSRP is captured through the Client Daily Diary form which is completed for every client supported by the volunteers. A new version of the Client Daily Diary was introduced in October 2016 to capture additional details relevant to the refined evaluation questions. Therefore, additional data reported below is captured only for clients seen between October and 16 May 2017.

The MHCSRP supported 167 clients to negotiate court processes from July 2016 to May 2017.

- Over half (59%) of the clients supported were male.
- Most (91%) of these clients had mental health issues.
- Just over half (51%) of clients had support person with them. Of the 84 clients with support present, most (60%) still requested direct support by volunteers.
- Most (75%) of clients had been to court before.
- About one fifth of clients had been to court for matters related to traffic while most (84%) went for other matters.
- Less than half (45%) of clients had contact with some health or community services before attending court.
- Eighteen clients wanted to represent themselves at court. After speaking with a volunteer, nine sought legal representation.
- Volunteers attended Legal Aid and Community Legal Centre interviews with 26 clients during October-December 16 and following changes only 6 in period January to May 2017.
- On average, volunteers spent over an hour with a client (77 minutes). This time varied between 10 minutes to five hours.
During January and May 2017, volunteers also had short 15 minute support interactions with an additional 71 clients. Though a full Daily Diary form was not completed for these clients, the data collected shows:

- The majority of the clients (77%) supported were male.
- Most (75%) of these clients had mental health issues.
- Just over half (56%) of clients had a support person with them.
- Most (63%) of clients had been to court before.
- Around 66 of the clients (92%) sought legal representation.
- Over half (56%) of the clients were approached by MHCSRP volunteer on the day while a few approached the volunteer themselves (24%) or had used the service before (17%).

4.1.1 Suitability for cultural context

More than five percent of the Greater Taree area’s population is Indigenous, and Indigenous people make up more than 8.6% of the population of Taree City itself. As the program deals with concepts like mental illness and legal authority that have different meaning and connotations between groups, it was important that the program design suited the paradigms of a diverse group of cultures. During project development, MVNS established a partnership with the Aboriginal Legal Service of Taree and Legal Aid Port Macquarie, who represent Aboriginal people at court.

A representative of the ALS sat on the program’s Steering Committee for the full duration of the program. This representative reached out to other Indigenous services including Biripi and Tobwobba Aboriginal Medical Services during the development stage, and actively contributed thoughts and ideas to the development of the model. They commented that the program was appropriate enough to suit the needs of Indigenous people at court, and that although there were some teething issues in its early stages, the MHCSRP took some weight off ALS staff members’ shoulders by keeping clients calm and in the vicinity of the court for the whole day.
During the July 16 - May 17 period, 17% all clients identified as Aboriginal or Torres Strait Islander. This high proportion suggests the program design was suitable for the Indigenous cultural context; in that people felt comfortable engaging with volunteers and discussing sensitive topics. However, this review is based only on available data, rather than the explicit views of Indigenous, CALD or other residents of Manning Valley.

Table 2.  Background of clients

<table>
<thead>
<tr>
<th></th>
<th>Number</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N=167</td>
<td></td>
</tr>
<tr>
<td>Indigenous</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indigenous</td>
<td>27</td>
<td>17%</td>
</tr>
<tr>
<td>Not Indigenous</td>
<td>129</td>
<td>83%</td>
</tr>
<tr>
<td>Missing</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>CALD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CALD</td>
<td>4</td>
<td>2%</td>
</tr>
<tr>
<td>Not CALD</td>
<td>157</td>
<td>94%</td>
</tr>
<tr>
<td>Missing</td>
<td>6</td>
<td></td>
</tr>
</tbody>
</table>

Source: Client Daily Dairy, July’16 – 16 May’17

None of the clients who participated in an interview identified as Aboriginal or Torres Strait Islander, so the specific views of these clients cannot be commented on. However, one stakeholder suggested that the program would have benefitted from targeting Indigenous volunteers and recommended this for the future of the program.

4.1.2 Client engagement

Three of the four clients interviewed were approached on the day by volunteers, while one was put in contact with the Coordinator ahead of time by another service. Even though a few stakeholders recalled instances where the presence of volunteers was overwhelming, all clients interviewed said they were comfortable with the way they were approached by volunteers, some mentioning their professionalism, others their empathy to the difficult situations that clients were in. One client commended the volunteers on the way they identified who might need support at court, particularly the way they never overstepped boundaries when meeting people.

Some mentioned volunteers speaking about general things (sit-beside approach), before they discussed the reason for being at court, which was helpful in distracting them from their stresses. Clients who returned to court multiple times said that the volunteers were sensitive to their needs each time – e.g. when they were alone, the volunteer stayed with them for
multiple hours, whereas if they came with a support person, the volunteer would “check in” on how they were going. Some clients mentioned that volunteers seemed particularly trustworthy which made it easy for them to build a relationship. All the clients said that volunteers listened to clients and tried to understand where they were coming from

“They came up to me and spoke to me while I was smoking outside, once we started to talk, I was happy to talk and it made me feel better. She chatted about general things with me, animals and all kinds of things. It really helped put my mind at ease”

Some clients who had been with the program for longer saw how the emphasis of the program had changed where initially the questions were more direct about whether clients had a mental health issue, to later when it became more of an informal chat.

All the volunteers emphasised that a gentle approach was key to successfully engaging clients; though some differed in the level of informality they were comfortable with when they approached clients. One volunteer commented that clients seem puzzled when they are initially approached, but that they are fine after some explanation.

Volunteers felt that the program was largely engaging clients who would most benefit from the service, with the caveat that some people do not wish to have support, as is their right. A couple of volunteers pointed out that this did not necessarily mean people who were ‘mentally ill’ but also just generally those who felt alone and afraid in a difficult environment.

4.1.3 Client needs

According to volunteers, most clients needed emotional support (85%) followed by help understanding court procedures and processes (49%). A few needed help in verbal communication (21%), and reading and understanding documents (11%).

Table 3. In your opinion, in what areas did the needs of the client lie?

<table>
<thead>
<tr>
<th>Need</th>
<th>Number N=159</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional support</td>
<td>135</td>
<td>85%</td>
</tr>
<tr>
<td>Court procedures and processes</td>
<td>78</td>
<td>49%</td>
</tr>
<tr>
<td>Verbal communication support</td>
<td>33</td>
<td>21%</td>
</tr>
<tr>
<td>Literacy</td>
<td>17</td>
<td>11%</td>
</tr>
<tr>
<td>Other</td>
<td>16</td>
<td>10%</td>
</tr>
</tbody>
</table>

*multiple response question, 8 missing
Source: Client Daily Diary, July’16 – 16’May’17
4.1.4 Volunteers

Volunteer recruitment and training

All but one volunteer interviewed heard about the program through a newspaper advertisement - the remaining volunteer was told about the program through a TAFE program. Most volunteers said that the program aligned with their existing interests, and that they had been part of or were planning to be part of employment or study in a similar field to the program. One commented that it was exciting to be a part of something that was just getting off the ground, and interesting to see how a pilot program would run. Others were passionate about helping people in their community or giving back in some way. Only one volunteer had been involved in any other kind of volunteering before this program.

All volunteers underwent a similar recruitment process involving an expression of interest, a meeting, filling out and submitting forms, Police and WWC checks, interviews and training. People engaged in the second round of volunteers described responding to scenarios given as part of the screening process. Volunteers were happy with the recruitment process and appreciated its thoroughness. Some mentioned frustration with cancelled training, and being unsure of when they would be confirmed as official volunteers.

Most volunteers highlighted the legal aspects of training as the most valuable, particularly learning from Legal Aid and CLC representatives, and visiting the court before commencing the program. A few found the mental health first aid most valuable, as it taught or refreshed interesting concepts about supporting people in distress. Almost all volunteers felt that training adequately prepared them to start the program, with one wishing that there had been some more opportunity to imitate more experienced volunteers during their first day. However, volunteers all expressed that support from the Coordinator and resources provided to them, such as the referral matrix, were sufficient to get them through any challenging situation.

Volunteers suggested a number of improvements to training. Role plays of how to approach clients or dealing with challenging situations were widely suggested. One volunteer thought that the boundaries and consequences of over-stepping boundaries with clients or court staff should be made overly clear, so as to avoid some issues that arose during initial implementation. Other recommendations included more training in services available in Taree and what they offer, questions to ask clients, clarity on who is who in the court, and building connections between volunteers and local services through volunteer meetings.

Volunteer’s role

A challenge for the program appeared to be different understandings of the role of volunteers. Stakeholders and volunteers themselves viewed their role or their potential role to include:
- quiet support
- calming and relaxing clients
- helping clients remain at court
- helping clients manage paper work for court
- offering particular support and information to clients at court for the first time
- explaining legal terms or procedures
- providing referrals
- connecting people to services relating to issues other than the reason for court attendance
- providing follow up on referrals after court days
- gathering clients’ previous mental health history
- providing support to allow other court services to focus on more difficult aspects of their role
- humanising the court experience
- improving the efficiency of the court
- advocacy

Stakeholders’ views of how effective volunteers were in their role therefore depended on how they defined that role.

**Volunteer support and professional development**

All volunteers spoke highly of the continuous support they received from the Coordinator. They felt that communication was clear and regular, the volunteer roster was timely, and they were well informed about court protocol or any arising issues. They also felt that the referral resources they had (such as the matrix) were helpful, training provided was useful, and that they could turn to the Coordinator whenever there was a need.

The debrief process for coping with challenging clients or events was also clear to volunteers. They stated that the Coordinator was always happy to talk after court or the next day if volunteers needed to debrief, and that they could approach MVNS if needed. They also used regular meetings to debrief with the Coordinator and improve their practice.

One commented that speedier responses from the Coordinator on non-court days would be helpful. Another said they would like to increase their referral knowledge so they didn’t have to depend on the Coordinator as much.
### 4.1.5 Referral intake

MCHSRP invested in establishing relationships and setting up processes for referral intake as detailed in section 3.2.2. Despite this preparation, just 13% of MHCSRP clients were referrals. Most (56%) connected with the service on the court day through a volunteer, 26% had used the service before.

**Table 4. How did the client connect with the service on the day?**

<table>
<thead>
<tr>
<th>Number</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approached by MHCSRP volunteer on the day</td>
<td>92</td>
</tr>
<tr>
<td>Have used the service before</td>
<td>43</td>
</tr>
<tr>
<td>Approached MHCSRP volunteer</td>
<td>8</td>
</tr>
<tr>
<td>Referred by ALS</td>
<td>7</td>
</tr>
<tr>
<td>Referred by unknown</td>
<td>4</td>
</tr>
<tr>
<td>Referred by MNCCCLC</td>
<td>4</td>
</tr>
<tr>
<td>Referred by Legal Aid</td>
<td>3</td>
</tr>
<tr>
<td>Referred by D&amp;A</td>
<td>1</td>
</tr>
<tr>
<td>Referred by Catholic Care</td>
<td>1</td>
</tr>
<tr>
<td>Referred by MSS</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>164</td>
</tr>
</tbody>
</table>

**Missing** 3

Source: Client Daily Dairy, July’16 –16 May’17.

Stakeholders offered a number of suggestions why more clients were not referred to the service. Some suggested that in future increased emphasis should be put on engaging with probation and parole services, psychologists, staff from the mental health unit, and GPs.

For the services that were aware of the program, stakeholders suggested that:

- These services offered their own, similar support to clients
- Services were not aware of clients going to court
- Service staff were too busy with their regular duties to connect clients to the program
• Services did not have ‘whole of person’ thinking that included support for a client’s emotional experience at court
• Services had limited notice themselves of who would be present at court
• There was a disconnect between a client being offered a service and making the call to the Coordinator
• The staff member in contact with the Coordinator did not have the influence or network to pass on information to the rest of the organisation
• The newness of the program lacked credibility for services to remember and refer to.

Though the low level of referral intake is contrary to the early expectations from the program, the relatively higher number of people referred out (as detailed in the following section) is an unexpected positive outcome.

4.1.6 Referrals from MHCSRP to other services

The program has been effective in linking clients with other support services. Between July and May, a total of 89 people were referred to other services including mental health, housing, financial, family/relationship, Legal Aid, MNCCCLC, welfare, counselling, emergency relief, drug and alcohol and other community services (this includes 13 clients with whom the volunteers had short 15 minute support interactions).

Three clients interviewed were connected to services through their volunteer. These ranged from intensive services like housing and mental health support, to community programs that clients might be interested in to build connections. Clients mentioned that volunteers were sensitive to services that clients were already linked with, and whether or not a client was willing to engage with new ones.

“Yes, they linked me with [service] and I see them weekly and they actually help me quite a lot, I see them twice a week and they help me with basically everything” [Client]

Clients not receiving a referral to other services could be due to:

• Them not needing referral at the time
• Volunteers were not dealing with the client directly but a support person
• Not enough time to make a referral
• Client refusing a referral

Volunteers felt that the smoothness of referring a client to services depended on the client, the level of service needed and whether they are willing to be referred. Some volunteers felt it was tricky to understand the boundaries – not being advocates or case workers but still supporting people to get the help they need. These volunteers felt that having the Coordinator nearby meant that they could defer to her opinion and experience. One volunteer commented that it was easier to link clients to services if they came back to court
multiple times, whereas after meeting with a client once, it was difficult to know if a referral would stick.

Volunteers who had been part of the program for longer commented on initial challenges making referrals without the skills and knowledge of where to refer to. They said that the list prepared by the Coordinator and more experience of their own had dealt with this challenge.

4.1.7 Working with other services at court

Volunteers and stakeholders commented on some challenges during the program with relationships between MHCSRP and services at court. Volunteers had no issues with court staff, other than a general attitude that volunteers weren’t welcome. They commented that support workers and solicitors didn’t seem to understand the purpose of volunteers at court apart from those supporting victims of domestic violence.

Some stakeholders felt that volunteers, particularly in the initial recruitment round, had overstepped boundaries with clients and court staff, assuming knowledge or authority that they did not have. Stakeholders expressed concern that volunteers’ passion for the project and interest in clients’ issues lead them to break confidentiality and focus on things outside their role. However, it is important to note that most stakeholders felt that this issue had diminished over time with training and more specific volunteer selection, and that this issue was not unexpected with a pilot program.

Volunteers also highlighted that there should be more focus on how to ensure they don’t overstep on boundaries as an improvement to initial recruitment training as described in section 4.1.4.

4.1.8 Follow up after being heard by magistrate

Volunteers followed up with a total of 103 clients after their matter was heard by the magistrate. In the follow up, volunteers mostly checked clients understanding of magistrate’s direction (71%), and confirmed their next court appearance date and list of requirements (50%). A few were not followed up, either because the volunteer did not feel there was a need or they were unable to meet the client after court.

<table>
<thead>
<tr>
<th>Table 5. Follow up assistance given to clients</th>
<th>Number (n=103)</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checked their understanding of magistrate’s directions</td>
<td>73</td>
<td>71%</td>
</tr>
<tr>
<td>Confirmed next court appearance date and list of requirements</td>
<td>51</td>
<td>50%</td>
</tr>
<tr>
<td>Waited for them to get clarification from legal rep</td>
<td>42</td>
<td>41%</td>
</tr>
<tr>
<td>Description</td>
<td>Count</td>
<td>Percentage</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>-------</td>
<td>------------</td>
</tr>
<tr>
<td>Assisted with paperwork or bonds etc. at registry</td>
<td>22</td>
<td>21%</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
<td>7%</td>
</tr>
</tbody>
</table>

*multiple response question - 16 missing

Source: Client Daily Diary, Oct '16 – 16 May '17.
5. Program impact and outcomes

5.1 Outcomes of the MHCSRP for clients

All clients who provided feedback were satisfied with the MHCSRP service. Those who responded to the satisfaction survey, felt much better after speaking to MHCSRP volunteer than they did before leaving home (See Figure 4 below).

Figure 4. Thinking back to before you left home, how did you feel about going into court today? And how do you feel now

Although the average scores improved for all three categories, the greatest change was in clients feeling they had no or very little support before leaving home to feeling well supported at the time of filing the survey (mean score change of 5.5) followed by feeling stressed and anxious at the time of leaving home to feeling ok after speaking to the volunteer. Most people (close to 60% of the clients giving a rating of above 5) felt they knew what they would have to do before leaving home and hence it didn’t make as much of a difference speaking to the volunteer in this regard. Most clients mentioned volunteers giving guidance and explanations about how to navigate the court system, offering kindness and support, and helping them manage paperwork and legal support they were offered from other services.
“I thought we need more things like this! Really worthwhile, lots of young people feeling lost.” [Client]  

“Sometimes when I’m nervous I don’t listen very well, and the solicitor would say things and I would take it out of context or panic, and then [volunteer] would explain it to me.” [Client]

Stakeholders involved in the program also reported getting positive feedback about the program; they added that program helps clients feel much more comfortable at court, not only links the clients with the relevant services but also the support person if needed; helps clients understand the processes and remain at court by staying with them through the day.

**Improved understanding of court processes**

All but one client – who had a lot of previous experience with courts – felt they had a better understanding of the court system because of their involvement with a volunteer. Clients said that volunteers:

- gave support on how to behave in court
- explained the court process
- helped them understand that court proceedings take time, and not to worry about that
- gave guidance and explanations about how to get through the court system
- supported them to talk with the Legal Aid solicitor
- helped them manage paperwork and Legal Aid support

“I was nervous waiting, it felt like if I was waiting that was a bad thing, but [volunteer] taught me it wasn’t like that.”

**Reduced stress and anxiety at court**

All the clients interviewed also said that they felt highly anxious (“a mess”) before meeting with their volunteer. A few mentioned that volunteers initially just sat with them and chatted about general things - the ‘sit beside approach’. This distracted the clients from their stresses and calmed them down. They saw volunteers as trustworthy and kind people offering support when they needed it the most.

Two out of four clients had previous experience in a court case. Both said their previous experiences were very unpleasant and that having a volunteer present made a huge difference to their experience.

“At one point during my first court visit, I couldn’t even stand when the magistrate came in because I was so afraid and nervous. But when they were with me, they helped me be calm. That support is everything.” [Client]

“It wasn’t until I met them that I felt better about the program. I know I do better if I have someone with me to distract me from my anxiety” [Client]
5.2 Outcomes of the MHCSRP for court

Stakeholders believed that the program had positive outcomes for Taree court. Most stakeholders commented on the ability of volunteers to make the court process smoother by helping clients to remain calm and stay at court. Some commented on the way that the program had raised awareness of mental health at Taree court, which was previously not dealt with as openly.

A few stakeholders believed the program had more potential to support clients and other services in the court than had been actualised. They suggested that the program could alleviate the workload and burden for other programs by focusing purely on supporting a client, so that other staff could focus more on their own specialties.

5.3 Unintended outcomes

A few unintended outcomes were also identified including:

- Assisting the families and friends of clients (support people) to access services, especially for clients in or taken into custody
- Raised awareness of mental health in Taree
- Clients with Tenancy issues were not able to be supported
6. Conclusion and recommendations

6.1 Program design

The MHCSRP program design was informed by consultation with relevant stakeholders, a literature review and research with a clear articulation of theory of change and evaluation framework in the early stages. The program is well supported by policies and procedures, an administration system, communication and resources. The program adequately supports volunteers and welcomes feedback from clients and other stakeholders to ensure continuous improvement.

6.2 The program implementation

The MHCSRP supported 167 clients to negotiate court processes in eleven months. The program has supported a high proportion of clients identifying as Aboriginal or Torres Strait Islander indicating the program design is suitable for the cultural context of Taree and surrounding areas.

The program invested in establishing relationships and setting up processes for referral intake. Although the number of clients referred to the service was not as high as expected, the high numbers of referrals out to other programs is an unexpected positive outcome of the program, as clients are better linked to community services.

Clients and their support people overwhelmingly expressed appreciation and gratitude for the MHCSRP service. They reported that volunteers had reassured, supported, and clarified things for them, helping them develop a better understanding of court processes and experience less anxiety before their court appearance. These outcomes for clients are aligned with the MHCSRP’s theory of change, suggesting that the program is positively contributing to longer term outcomes for clients, those close to them, and Taree Court.

6.3 Suggestions for improvements

Almost all stakeholders interviewed were convinced that MHCSRP is essential to fill in the gap in service provision. The large majority of stakeholders felt that the program complemented, rather than duplicated, existing services. Some people commented that other services, family members or friends could provide similar support or referrals that the program provided, but most felt that by making this role their core business, the MHCSRP left room for other services to support people in more specialised ways. Participants also commented that although this support could be offered through other avenues, it was clear that some people were falling through the cracks and remaining disconnected from community services in Taree.
“That was always the challenge; people (working at court) didn’t have time to provide support. The volunteers are also picking up people who haven’t accessed services, which is that key thing in our area, it’s difficult to get connected if you’re not already in” [Stakeholder]

“Our workers did a similar thing to what the Coordinator and the volunteers do, but I don’t think its duplication because people wouldn’t come across our radar who are seen by [the Coordinator] and the court support program” [Stakeholder]

“Instead of going through all the micro-managing of where a client has to be referred to, they have phones on hand where they are able to do the referral there and then while we’re dealing with other clients.” [Stakeholder]

A few recommendations for future improvement emerged:

- Formalise the program so all relevant stakeholders are fully aware of the objectives of the program processes. While a volunteer program is very good at filling the existing gap, replacing it with employed workers might further enhance the client outcomes and also help increase the trust and support from stakeholders. Alternatively, two components can be incorporated into the program with the volunteer role being quiet support, and paid roles taking on the responsibility of referrals.
- Additionally, the communication between the various stakeholders should be formalised (e.g. volunteers communicating with solicitors or referral agencies).
- Greater engagement with the court.
- Volunteers taking on advocacy role though this might also mean changing the recruitment strategy to attract people who are more suited to the role.
- Volunteer training to increase focus on what they can offer help on and when to refer them to others for expert advice (i.e. not overstepping on boundaries).
- Further develop mental health referral network
- Increase emphasis on referrals as that a very useful avenue to catch people out of the loop. A few also suggested increased follow ups on referrals by the program. The referrals can also be improved by targeting the right services emphasising on probation and parole, psychologists and mental health unit, GPs.
- Invest more in recruiting Indigenous volunteers.

**6.3.1 Recommendations for improvement**

- We recommend outlining the following policies and procedures on record to help address areas of operation of the program:
  - liaising with court staff
  - a publicity strategy
  - procedures for increasing the number of referrals
  - professional development for the Coordinator and volunteers.
  - Coordinator support processes
- Monitoring can be improved through better data management process:
  - Validation rules need be added to excel workbook ‘Client Daily Diary’ to control for data entry errors.