



Communities
& Justice
Youth Justice

YOUTH ON TRACK
PERFORMANCE FRAMEWORK
2020

Aim of the Framework

The aim of the *Youth on Track Performance Framework 2020 (The Framework)* is to identify and evaluate the efficacy of the Youth on Track (YoT) early intervention scheme and the YoT service provider (the Provider). The scheme and the Provider are assessed against a range of outcome measures and performance standards. *The Framework* outlines the aims, principles and objectives of Youth on Track.

Measuring Outcomes

The Framework outlines the four key expected outcomes from Youth on Track if implemented with integrity (see page 4). Outcome one is assessed bi-annually by Youth Justice NSW (YJNSW) and outcomes 2 to 4 are measured quarterly and reported on by the Provider in the *Quarterly Key Performance Indicator Report* (see pages 11-13 for the report template).

Measuring Performance Standards

The Framework also outlines the performance standards that the Provider is expected to meet. The standards aim to ensure the service is provided under the 'What Works' guidelines and any offence-focused interventions are delivered with program integrity. Meeting and measuring the performance standards are the responsibility of the Provider.

A select number of the performance indicators are measured each year through the Quality Assurance Process (QAP) (see pages 8-10 for more detail). The table on page 5-7 outlines possible indicators against each performance standard. The QAP involves a self-assessment by the Provider and then an Annual Review by YJNSW.

Aim of Youth on Track
Youth on Track aims to reduce re-offending by young people and prevent them from having long-term involvement in the criminal justice system.
Principles of Youth on Track
The key principles of the scheme include: <ul style="list-style-type: none">• Intervening earlier to divert young people from the criminal justice system• One-on-one case management to manage and support young offenders• Separating treatment from punishment• Responding to risk and need rather than simply to crime• Responding promptly to enable a response to an immediate problem
Objectives of Youth on Track
<ol style="list-style-type: none">1. To identify young people at high risk of continuing in the criminal justice system in a timely way2. To provide one-on-one case management and evidence-informed interventions targeted to address the individual criminogenic risk factors of the young person3. To provide an evidence-informed family intervention to support the family of young offenders to reduce the young person's contact with police
Expected Outcomes of Youth on Track
<ol style="list-style-type: none">1. Young people's formal contact with police is reduced2. Young people's wellbeing is improved by reducing their criminogenic risk and needs3. Young people's participation and achievement in education or employment is improved4. Families display more positive family behaviours and ability to support their children

Performance Standards

1. Young people and their families engage positively and remain engaged in the scheme until meeting completion requirements
2. Young people and their families are provided with a quality service that follows evidence-informed practice and the 'what works' principles to address the individual's criminogenic risks
3. Case planning reflects the assessment and goals of the young person and family
4. Service provision reflects the cultural identity and needs of the young person and family
5. Local services are brokered where required to meet identified needs
6. Service provision is efficient and responsive
7. Appropriately skilled and experienced staff are recruited and trained
8. Strong quality assurance and continuing improvement mechanisms are employed
9. Strong relationships are made and maintained with key stakeholders to ensure collaborative service provision
10. Relevant legislation, particularly in relation to child protection, records management and work, health and safety, is complied with

OUTCOME MEASURES				
PERFORMANCE	KEY QUESTIONS	KEY PERFORMANCE INDICATORS	DATA SOURCE	REPORTING FREQUENCY
1. Young people's formal contact with police is reduced	To what extent did Youth on Track participants <ul style="list-style-type: none"> reduce their informal contact with police reduce their offending decrease the seriousness of their offending 	<ul style="list-style-type: none"> Minimum of 75% of participants reduce or stabilise their formal contacts with police 12 months post referral compared to 12 months pre-referral. 	Police Data & analysis by JJ	Bi - annually
2. Young people's wellbeing improved by reducing their criminogenic risks and needs	To what extent did Youth on Track participants: <ul style="list-style-type: none"> improve their family and living circumstances increase their connection with pro social peers reduce their alcohol and other drug use increase their involvement in leisure and recreational activities reduce their anti-social behaviour and attitudes 	<ul style="list-style-type: none"> Minimum of 50% of participants reduce their YLS/CMI-AA score after 3 months Minimum of 70% of participants reduce their YLS/CMI-AA score after 6 months 100% of participants with an initial high or medium-high YLS/CMI level reduced their YLS/CMI-AA score by completion 	Provider data (Optional: A self report or standardised tool)	Quarterly
3. Young people's participation and achievement in education or employment is improved	To what extent did Youth on Track participants (both young people and carers): <ul style="list-style-type: none"> Improve their participation in education or employment Improve their strategies to assist the young person in attending education or employment 	<ul style="list-style-type: none"> Minimum of 40% of participants who had a high level for Education & Employment domain at first assessment, improve their Education and Employment Domain score at minimum time frame and exit. 	Provider data (Optional: A self report or standardised tool)	Quarterly
4. Families display more positive family behaviours and ability to support their children	To what extent did parents involved in Youth on Track improve their family interactions and appropriate monitoring and discipline of the young person, where suitable?	<ul style="list-style-type: none"> Minimum of 30% of participants who had a high level for Family Circumstances domain at first assessment improve their Family Circumstances score at minimum time frame and exit. 	Provider data (Optional: A self report or standardised tool)	Quarterly

PERFORMANCE STANDARDS			
STANDARD	INDICATORS	EVIDENCE SOURCE	REPORTING FREQUENCY
1. Young people and their families engage positively and remain engaged in the scheme until meeting completion requirements	1.1 50% of eligible referrals (up to the site target) lead to a young person consenting 1.2 70% of exited and completed participants engage in the scheme for the minimum timeframe based on their initial YLS/CMI risk level. 1.3 Strategies used to respond to reasons for the young person and family declining to participate 1.4 Strategies used to respond to reasons for the young person and family disengaging from the scheme 1.5 Strategies used to engage/re-engage participants 1.6 Strategies used to keep participants engaged 1.7 Percentage of young people who meet their minimum timeframe for YoT and who complete Fast Track 1.8 Other indicators may be included as part of the QAP	<ul style="list-style-type: none"> • Provider data • Case Files • Exit Surveys • Resources • Staff interviews • Case studies 	Quarterly via the Characteristics report and when included in annual Quality Assurance Process
2. Young people and their families are provided with a quality service that follows evidence-informed practice and the 'what works' principles to address the individual's criminogenic risks	2.1 Number and percentage of young people engaged and completed a behaviour intervention 2.2 Reasons for not completing a behaviour intervention 2.3 Number and percentage of families engaged in family intervention and for how long 2.4 Substantiation of evidence-informed behaviour and family intervention 2.5 Evidence that intervention delivered with program integrity 2.6 Service provision identifies and responds to issues of domestic and family violence 2.7 Evidence that family intervention is being delivered with program integrity 2.8 Safety plans are in place for young people who experience or use violence in the home 2.9 Other indicators may be included as part of the QAP	<ul style="list-style-type: none"> • Provider data • Case Files • Exit Surveys • Resources • Safety plans • Staff interviews • Client interviews • Case studies 	When included in annual Quality Assurance Process
3. Case planning reflects assessment and young person and family goals	3.1 YLS/CMI-AA completed as per service specification, licence and training requirements 3.2 Young people meet their case plan goals 3.3 Goals set for high and medium risk domains from the assessment 3.4 Goals reflect risk/needs/responsivity 3.5 Young people and families participate in case planning meeting 3.6 Young people and families understand their goals and the reasons for Youth on Track involvement 3.7 Goals within the case plan adhere to SMART and are reviewed with the young	<ul style="list-style-type: none"> • Provider data • Case Files • Exit Surveys • Case plans • Resources • Staff interviews • Client interviews • Case studies 	When included in annual Quality Assurance Process

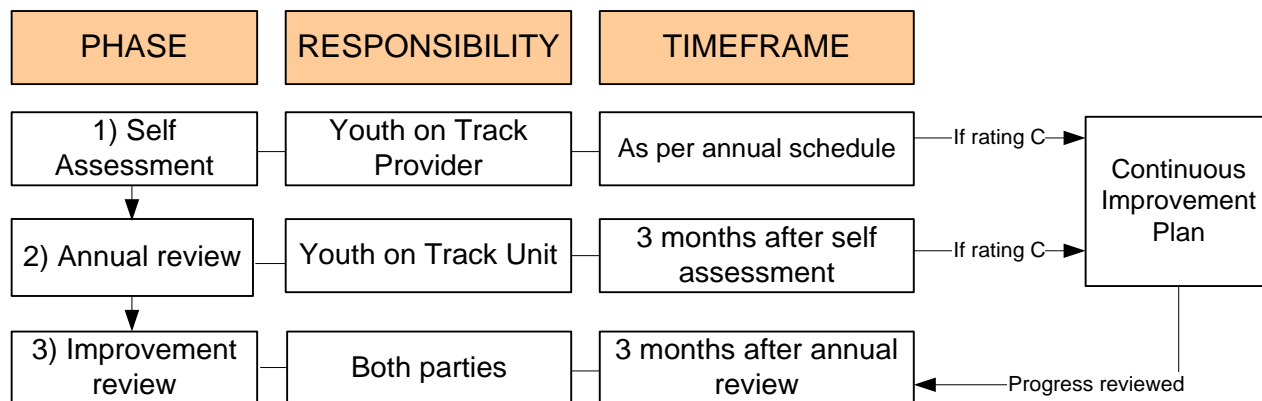
	<p>person regularly</p> <p>3.8 Other indicators may be included as part of the QAP</p>		
<p>4. Service provision reflects the cultural identity and needs of the participants</p>	<p>4.1 Satisfaction by Aboriginal participants</p> <p>4.2 Percentage of Aboriginal young people engaged is the same or larger than the percentage of Aboriginal young people referred</p> <p>4.3 Staff are trained in cultural awareness</p> <p>4.4 Interventions are tailored (or developed) to meet the needs of Aboriginal participants</p> <p>4.5 Strategies used to engage Aboriginal young people at the same rate as non-Aboriginal young people</p> <p>4.6 Staff reflect the cultural mix of clients or partnerships developed with other services to meet cultural needs of clients</p> <p>4.7 Other indicators may be included as part of the QAP</p>	<ul style="list-style-type: none"> • Provider data • Participant surveys • Staff training records • Project Plan • Case studies • Aboriginal participation and outcome plan 	<p>When included in annual Quality Assurance Process</p>
<p>5. Local services are brokered where required to meet identified needs</p>	<p>5.1 Young people participate / complete with external agencies to meet criminogenic need</p> <p>5.2 Young people engage with or referred to an external agency in their exit plan to address criminogenic need</p> <p>5.3 Participants reporting awareness of ongoing community resources available to them</p> <p>5.4 Other indicators may be included as part of the QAP</p>	<ul style="list-style-type: none"> • Provider Data • Case Files • Exit Survey • Stakeholder & client interviews 	<p>When included in annual Quality Assurance Process</p>
<p>6. Service provision is efficient and responsive</p>	<p>6.1 Time to first contact from referral</p> <p>6.2 Time to completion of first YLS/CMI-AA (target within 4 weeks of consent) and development of first case plan</p> <p>6.3 Time to development of first case plan</p> <p>6.4 Level and length of service matches YLS/CMI-AA risk</p> <p>6.5 YLS/CMI-AA is conducted approximately every 12 weeks</p> <p>6.6 Appropriate use of brokerage</p> <p>6.7 Reasons for declining/disengaging from the scheme</p> <p>6.8 Time frames for disengagement and completion are monitored and reviewed</p> <p>6.9 Compliance with the Equity Plan</p> <p>6.10 Evidence that responsivity factors are considered in case planning</p> <p>6.11 Disability screening tool used and follow up assessment sought where appropriate</p> <p>6.12 Conflicts of interest considered, responded to, and recorded</p> <p>6.13 Other indicators may be included as part of the QAP</p>	<ul style="list-style-type: none"> • Provider Data • Case files • Staff Survey • Conflict of Interest Register • Equity Plan • Stakeholder interviews Case studies 	<p>When included in annual Quality Assurance Process</p>

<p>7. Appropriately skilled and experienced staff are recruited and trained</p>	<p>7.1 All staff meet standards defined by Schedule B of the SCHCD Award 7.2 All staff meet standards defined by evidence-informed intervention requirements 7.3 All staff complete training in YLS/CMI-AA within timeframes set out in the mandatory training outline 7.4 All staff complete training as per <i>Youth on Track Training Requirements</i> 7.5 Staff can demonstrate a strong understanding of risk, needs, responsivity when working with young people 7.5 Other indicators may be included as part of the QAP</p>	<ul style="list-style-type: none"> • Provider evidence • Staff training records • Staff survey • Staff interviews • 	<p>When included in annual Quality Assurance Process</p>
<p>8. Strong quality assurance and continuing improvement mechanisms employed</p>	<p>8.1 Evidence of the Provider's quality assurance procedure 8.2 Self-assessments completed on time 8.3 Evidence of the Provider responding to performance concerns 8.4 Continuing Improvement Plan strategies implemented and successful 8.5 Other indicators may be included as part of the QAP</p>	<ul style="list-style-type: none"> • Provider evidence • Quality Assurance Self Assessments • Continuing Improvement Plans • Staff interviews 	<p>When included in annual Quality Assurance Process</p>
<p>9 Strong relationships with key stakeholders to ensure collaborative service provision</p>	<p>9.1 Evidence of working relationship with Youth Justice locally and central office 9.2 Stakeholders engaged (in particular referring agencies) in Regional Governance Committees or other management level contact and at least quarterly meetings held 9.3 Service Level Agreements developed where appropriate 9.4 Local inter-agency meetings/forums attended 9.5 Complaints handled efficiently and in a timely manner 9.6 YoT providers meet obligations outlined in schedule 5 of the MoU with NSW Police and meet commitments at the local level of a cooperative and collaborative approach 9.7 Evidence of working relationships with relevant local stakeholders 9.7 Other indicators may be included as part of the QAP</p>	<ul style="list-style-type: none"> • Provider evidence • Complaints and Feedback Register • Stakeholder survey • Evidence of referrals to YCPC • Staff interviews 	<p>When included in annual Quality Assurance Process</p>
<p>10 Relevant legislation, particularly in relation to child protection, records management, privacy and work, health and safety, is complied with</p>	<p>10.1 Mandatory reporting conducted and recorded 10.2 Staff working with children checks verified and recorded 10.3 Consent forms completed 10.4 Young people and families demonstrate understanding of consent 10.5 <i>NSW State Records Act 1998</i> complied with 10.6 Records accurately and securely recorded and stored 10.7 Risk assessments completed and recorded 10.8 Staff understand and follow Home Visit policies and procedures</p>	<ul style="list-style-type: none"> • Provider evidence • Case files • Client survey • Staff survey • WHS procedures and records 	<p>When included in annual Quality Assurance Process And As required by Service Agreement</p>

	10.9 Strategies used to ensure privacy legislation is not breached when considering sharing information 10.10 Other indicators may be included as part of the QAP		
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YOUTH ON TRACK QUALITY ASSURANCE PROCESS

The purpose of the quality assurance process (QAP) is to encourage a culture of continuous quality improvement within all Youth on Track sites. The QAP encompasses a three-phase process that involves: self-assessment, annual review and improvement review.



PHASE 1: Self-Assessment

The Provider is expected to provide evidence of self-assessment annually to the Youth on Track Unit. The Provider is required to develop a Quality Assurance Procedure within 3 months of commencing operation which demonstrates how they will conduct quality assurance in line with the Youth on Track QAP and who is responsible for quality assurance within their agency.

Each financial year the Youth on Track Unit will inform the Provider of the performance standards and the schedule for that year. The Provider is required to provide evidence of effective delivery of service against each of the performance standards for at least six months prior to the self-assessment date.

1. Leading the self-assessment

The self-assessment process must be led and managed by the Provider's Manager. They should create a climate of trust in which the employees are able to provide assessments in the required format across developed performance indicators. It is essential that all staff are aware that quality assurance is an ongoing process which provides the opportunity to provide meaningful measures about the level of service delivery.

2. Use of robust data

The provision and analysis of robust data will be a vital foundation of self-assessment. The Provider is expected to draw upon a wide range of performance data to inform their self-assessment report.

Examples of data that may be used includes:

- data/reports from client database
- case notes and case plans
- staff meetings and supervision sessions
- service records e.g. training registers, Aboriginal participation outcome plan and Equity plan
- observation of practice
- staff, young people and family questionnaires/interviews
- observations and feedback from other stakeholders
- case studies and presentations

3. File reviews

When selecting files to review for the self-assessment, providers should choose a minimum of six files covering a broad cross section of participants including Aboriginal young people, young people engaged for minimum timeframes based on their initial level of assessment and young people who have completed or disengaged. Providers should choose a different set of files to those they review for the self-assessment for the annual review.

4. Ranking

The Provider must assign a ranking to each performance indicator being assessed each year using the following range:

- **A = Good Practice** (Difficult to envisage any further improvement) 90%-100% compliance. (Evidence that the Provider adheres to and fully understands the Youth on Track standard and has produced a comprehensive solution or achievement).
- **B = Some Good Practice** (substantial compliance) 70%-89% compliance. Clear evidence that the standard is being addressed in practice and is met most of the time.
- **C = Partial Development** (partial compliance) below 69% compliance. Clear evidence that some adherence to Youth on Track standard has taken place but improvement is required. The Provider must develop a Continuous Improvement Plan (CIP) when a ranking of C occurs.

5. Continuous Improvement Plans (CIPs)

Where the ranking is C, the Provider must draft a Continuous Improvement Plan (CIP). The plan must demonstrate how strengths will be sustained and improved and how key areas for improvement will be addressed over the next 3 months. Objectives in CIPs should be SMART – Specific, Measurable, Achievable, Realistic and Timed. The Provider has the flexibility to determine their own approach in relation to reviewing the progress of continuous improvement plans.

6. Submitting to Youth on Track Unit

A summary document outlining the outcome of the self-assessment, including CIPs if required, must be submitted to the Youth on Track Unit within the scheduled timeframe.

PHASE 2: Annual Review

1. The Review Team

The review is conducted by the Review Team led by the Youth on Track Unit.

2. The Review (Onsite or Paper)

The review maybe conducted onsite or while reviewing documents supplied by the Provider. The onsite review is conducted in a way that minimises disruption to the normal daily functioning of the office. The review will consider evidence for the past 6 months of operation prior to the review date (3 months prior to self-assessment and 3 months post self-assessment).

During the day, the Review Team may use a variety of assessment approaches including:

- random file and document checks
- informal and formal discussions with young people and case managers
- case manager and management focus groups
- interviews with young people and online employee surveys via “Survey Monkey”
- review of data reports
- internal/external stakeholder feedback

PHASE 3: Improvement Reviews

Improvement reviews are conducted three months after the annual review to allow follow up on progress of Continuous Improvement Plans. The Provider must provide evidence to the Youth on Track Unit of progress towards completing the CIP.

Continuous Improvement Plan template (CIP)

Complete one form per performance standard / measure that was assessed as ranking C.

YOUTH ON TRACK CONTINUOUS IMPROVEMENT PLAN				
Youth on Track provider:		Youth on Track location:		Date Plan Prepared:
Performance standard / measure	Strategies to improve performance	Responsibility	Planned Completion Date	Progress
Supporting documentation:				
YOUTH ON TRACK PROVIDER MANAGEMENT USE ONLY				
Outcome of review by manager: Evidence sufficient / Evidence insufficient		Assessed by manager as (either A, B, or C)	RANKING	Signature of manager Date
Comments:				
YOUTH ON TRACK UNIT USE ONLY				
Outcome of review by manager: Evidence sufficient / Evidence insufficient		Assessed by manager as (either A, B, or C)	RANKING	Signature of manager Date
Comments:				

Quarterly Key Performance Indicators Report Template

Organisation:

Location:

Reporting Period:

PART 1: Performance Indicators

Key Performance Indicators	Targets	Results %	Comments / Explanation if target not met / Strategies to improve
1. % of suitable referrals that are accepted up to site referral target	100%		
2. Minimum % of suitable young people consenting to participate	50%		
3. Minimum % of participants engaged in the scheme for the minimum timeframe based on their initial YLS/CMI risk level.	70%		
4. Minimum % of participants who reduce their YLS/CMI score after 3 months.	50%		
5. Minimum % of participants who reduce their YLS/CMI score after 6 months	70%		
6. Minimum percentage of participants with an initial high or medium-high YLS/CMI level who reduce their YLS/CMI score at program completion	100%		
7. Minimum percentage of participants who reduce or stabilise their formal contacts with police 12 months post referral.	75%		To be completed by YoT Unit
8. Minimum percentage of participants who had a high level for Education & Employment domain at first assessment, who improve their Education and Employment Domain score at minimum time frame and exit.	40%		
9. Minimum percentage of participants who had a high level for Family Circumstances domain at first assessment who improve their Family Circumstances score at minimum time frame and exit.	30%		

PART 2: Please attach one case study that demonstrates offence-focused interventions and outcomes

PART 3: Quarterly Characteristics Report

[Date] to [Date]		Site 1		Site 2		Total	
		N	% of total	N	% of total	N	% of total
All Data Below is for referrals							
No. of Referrals	Number of referrals to YoT provider						
	<i>On waiting list</i>						
	<i>Accepted</i>						
	<i>Other</i>						
Referral Source	COPS						
	YLO						
	Education						
	Youth Justice						
	Solicitors						
	DCJ-CS						
	Health						
	Other						
Gender	<i>Male (% of referred)</i>						
	<i>Female (% of referred)</i>						
Aboriginality	<i>Aboriginal identified (% of referred)</i>						
Age	<i>10 to 14 year olds (% of referred)</i>						
average age = XX yrs	<i>15 to 17 year olds</i>						
GRAM Score	<i>Moderate to low risk of reoffending <0.6</i>						
	<i>Moderate to high risk 0.6-0.7</i>						
	<i>High risk of reoffending >0.7</i>						
No. of young people	Number of young people referred						
	<i>Young people with 1 referral</i>						
	<i>Young people with 2 referrals</i>						
	<i>Young people with 3+ referrals</i>						
Existing FACS or FACS funded case manager							
Engagement type	Number of referrals accepted						
	<i>Unsuitable</i>						
	<i>Pending Consent</i>						
	<i>Declined</i>						
	<i>Declined - Unable to contact</i>						
	<i>Consented</i>						
All Data Below is for young people who have consented							
Engagement breakdown	Consented (% of those accepted)						
	Consented (% of those who could be contacted)						
	<i>Currently Engaged (% of consented)</i>						
	<i>Disengage</i>						
	<i>Exited to another agency</i>						
	<i>Program Completed</i>						
Gender	<i>Male (% of consented)</i>						

	<i>Female (% of consented)</i>			
Age	<i>10 to 14 year olds (% of consented)</i>			
average age = 14.8 yrs	<i>15 to 17 year olds</i>			
Aboriginality	<i>Aboriginal identified</i>			
YLS/CMI	<i>Low level</i>			
	<i>Medium level</i>			
	<i>Medium-High level</i>			
	<i>High level</i>			
Intellectual Disability & Mental Health	<i>Screened as possibly having ID</i>			
	<i>Diagnosed ID</i>			
	<i>Diagnosed Mental Health Issue</i>			
Domestic and Family Violence	<i>Victim of domestic & family violence</i>			
	<i>Charged with domestic & family violence</i>			
Existing FACS or FACS funded case manager				
Services and Interventions				
Interventions by YoT	<i>Behaviour intervention (% of yp consenting)</i>			
	<i>Family intervention (% of consented)</i>			
Age of yp for family intervention	<i>10 - 14 years old</i>			
	<i>15 - 17 years old</i>			
Service Type Referred to	Accommodation			
	Alcohol and Other Drug			
	Domestic & family violence			
	Disability			
	Education			
	Employment			
	Family Support			
	Financial			
	Health			
	Legal			
	Mental Health			
	Recreation			
	WDO / SDRO			
	Other			

This report must be the signed by the Provider's contact person listed on the Service Agreement.

I certify that the terms of the funding agreement and the purposes of Youth on Track Performance Framework 2020 have been met.

Signature:
Date:
Position in Organisation: