

TACKLING INDIGENOUS SMOKING

Guidance on filling out your performance report

General tips

- You must report against all 5 Indicators – each indicator is different and you should provide information specific to each area. Don't repeat data/information across indicators, however, you can refer to related information already provided for another indicator.
- Provide an update of progress since the previous report – don't repeat previous information (please check your last report).
- When compiling your responses think about the activity - 'how is it helping?' and 'how do I know what we are doing works?'
- Make a clear distinction between TIS-funded activity and other activities, including those of your organisation/ACCHO.
- Keep within the word limit. Where it is necessary to include attachment, only include those that provide data or other evidence that relates to the performance indicators (and short term outcomes) - **see the additional documents on the TIS Portal – TIS Program Logic and National Performance Indicators.**
- Narratives should be a short description of the most important activities that are contributing to changing smoking in your communities.
- If you are using percentages, use figures as well e.g. '50% (44 out of 88) of those surveyed remembered the information'.
- Where you can, provide a denominator (eg. 10 women [aged 18 and above] out of 200 in the community attending smoking cessation groups).

PRELIMINARY

We have tried to include a mixture of qualitative and quantitative information in the examples below. This is the preferred method for measuring performance.

Most of the examples are actually measuring outputs rather than the outcomes. This is an acceptable alternative where outcome focussed data is not yet available. Over time, organisations are expected to be working towards reporting focused on outcomes, not outputs, as their projects become established.

The worked examples are pitched at organisations that have developed new data collection strategies but have not yet implemented these. For example, developing surveys for events or for organisations implementing smoke-free workplaces.

Organisations with established monitoring strategies for TIS are asked to report (or attach) the results of their surveys and other data collection methods.

TIS Indicator 1	Good practice example for TIS indicator 1	
<p>Quality and reach of community engagement</p> <p><i>(i.e. reaching smokers, community and organisational leaders)</i></p> <ul style="list-style-type: none"> • What are your key activities to reach smokers/ prevent smoking in your community/ies? (outputs) • How are these activities helping to reduce smoking in your community? (outcome) • Challenges and how you overcame them (in the reporting period) 	<p>The TIS team has further developed its social media campaign on Facebook (<i>provide name</i>) with additional videos and resources, which we have promoted widely in x community (output). As a result, our social media engagement has increased over the past 6 months, with ‘likes’ on our Facebook page rising from 10 to 500 (outcome). We have recently built a Snapchat profile to promote a local anti-smoking campaign to a target audience of 12 to 24 year olds (<i>provide name</i>) (output).</p> <p>We developed an online survey during the reporting period and have used the responses as a baseline to measure user understanding of the key messages. This survey will be repeated every 12 months to measure the reach of the impact of messages over time (outcome). Survey results will be included in our next progress report (outcome).</p> <p>We have been working to engage the Boards of all Aboriginal community controlled organisations (10 organisations) in communities x, y and z (output), on engaging and educating community leaders on the harms of smoking for the community, and the need for community-level change. Out of 30 Board Members approached, 5 agreed to be non-smoking ambassadors, and have attended a number of TIS activities during the reporting period, including Quitskills training (outcome).</p> <p>We have obtained brief intervention training for 5 internal staff and 10 external staff (from xyz organisations) (output). This activity has resulted in a 10% increase in referrals to the TIS team by external organisations (outcome).</p> <p>The TIS team has developed a survey for existing and past brief intervention clients who have agreed to be surveyed, that will be distributed every six months (output). This survey will measure the retention of information on TIS messages and referral pathways, as well as keeping track of smoking cessation rates, over time (outcome).</p> <p>Challenges: Because of the very high smoking rates in our community the team finds it difficult to engage smokers without continuous contact. The team is often overstretched, particularly when some are attending a local event at another community. We deal with this by focusing on building understanding and skills at the leadership level of community organisations to take action to address smoking. We are re-prioritising our activities and priority groups on a regular basis.</p>	
Examples of possible data you could	Examples of outputs	Examples of outcomes

<p>use for TIS Indicator 1 when creating your report (as per example above)</p>	<p># of brief interventions at events / outreach visits (output)</p> <p># of TIS team outreach visits to communities in region (names) (output)</p> <p># of events (include names) with TIS activities (attendance/stallholder/posters/leaflets (output)</p> <p># schools / # of children participated in anti-smoking education program (output)</p> <p># of education sessions delivered across the region; # of attendees at these sessions (output)</p> <p># support groups held with pregnant women (output)</p> <p>Narrative on social marketing strategy (eg. local posters, media advertising produced and distributed, Facebook page launched and moderated) (output)</p> <p># of website hits / Facebook likes/ analysis data (output)</p> <p># community leaders engaged to provide leadership and support in tobacco cessation (output)</p> <p># community leaders actively supporting TIS (output)</p>	<p># / % brief intervention recipients that quit/cut down in the reporting period (e.g. survey results) (outcome)</p> <p>x out of y (%) brief intervention participants that got additional support to quit (eg. visited GP, called Quitline, joined quitgroup) (outcome)</p> <p>% of participants in social marketing and community education activities understanding messages about smoking / intending to quit/ quit (e.g. survey results) (outcome)</p> <p>#/% people surveyed learned new information about support to quit (outcome)</p> <p>% of participants in social marketing and community education activities understanding messages about smoking / intending to quit/ quit (e.g. survey results) (outcome)</p> <p>% of participants in social marketing and community education activities understanding messages about smoking / intending to quit/ quit (e.g. survey results) (outcome)</p> <p>#/% people who reported seeing the materials/ retention of information x months after ads (e.g. survey results) (outcome)</p> <p>Narrative on <u>impact</u> of engaging community leaders and any support provided to TIS (outcome)</p>
----------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

TIS Indicator 2	Good practice example for TIS indicator 2
<p>Organisations involved in tobacco reduction in the region</p> <p><i>(i.e. connecting with other organisations in the region)</i></p> <ul style="list-style-type: none"> • Case study on collaboration / partnerships (outcome) • Is the above activity helping to extend support or referrals for your clients? (outcome) • How is the above activity helping to reduce smoking in your community? (outcome) • Challenges and how you overcame them (in the reporting period) 	<p>In the past 6 months we have established a regional tobacco control network comprising senior representation (CEOs or Managers) from all Aboriginal community controlled organisations in communities x, y and z; the Primary Health Network (<i>name</i>); and the TIS Innovation Grant project lead (<i>name</i>) (outcome). The network will meet 4 times a year. We are developing a tobacco action plan for the group’s endorsement (output). This will include key actions for supporting tobacco reduction within their organisations, such as smoke-free workplace policies.</p> <p>The TIS team has a regular timetable of visits/contacts with the following local organisations:</p> <ul style="list-style-type: none"> • X Netball Club and X football club to implement a smoke free policy and smoke free zones – we promote these clubs as case studies (output). • X hospital and X health care centre to promote existing resources for pregnant Aboriginal women accessing these services (Quit 4 U Quit 4 2 App and resources shared on the TIS portal by other TIS teams) (output). We delivered 3 education sessions (output) at pre-natal classes (attendance = 50 women and a family member) (output). For the next reporting period, we’ll be working with maternal health workers to focus on reaching women earlier in their pregnancy. We have met with the project manager for the TIS innovation grant on smoking cessation for pregnant women at X community (output), and we are sharing our materials and strategies working with health services (output). We will hold a teleconference each month to share information on how we are working with pregnant women to reduce smoking (outcome). <p>We widely promote referral (and/or) smoking cessation guidelines to other Aboriginal organisations in the region and encourage them to refer members of the community to our organisation’s tobacco team for support (output). We work closely with the Aboriginal counsellor at the Quitline and have arranged community visits and attendance at all major community events (<i>name these</i>) (output). All of our resources and educational materials contain the Quitline details and information on the Indigenous service. During the reporting period there was an increase of 7% in the number of referrals to our TIS team from outside services (i.e. not from the ACCHO) as a result of this work (outcome).</p> <p>The TIS team has worked with local primary schools in 4 communities (<i>name these</i>) to develop an anti-smoking campaign targeted at primary school-aged children in the region (output). The package includes monthly newsletters for teachers and other school staff and local youth workers to promote the campaign and key events (output). It also includes a survey for school children on recall of TIS messages (output). This survey will be redistributed every 6 months to the</p>

	<p>same children, when revisiting the school, to test message recall over time.</p> <p>Challenges: We have no challenges with this work in the reporting period. Good progress has been made in these areas.</p>	
<p>Examples of possible data you could use for TIS Indicator 2 when creating your report (as per example above)</p>	<p>Examples of outputs</p>	<p>Examples of outcomes</p>
	<p>Daily/weekly/6 monthly visits with Aboriginal Health Service/other health services / organisations (output)</p> <p>Collaboration with x organisations in events/ joint activities in the region including xxx (output)</p>	<p>x/% of organisations in region enforcing tobacco action plans (outcome)</p> <p>x/% of organisations in region as ongoing TIS partners in events/ activities (outcome)</p>

TIS Indicator 3	Good practice example for TIS indicator 3	
<p>Building capacity to support quitting <i>(training for TIS workers, other health staff and frontline services)</i></p> <ul style="list-style-type: none"> • Narrative on TIS-related training and information delivered to broader (non-TIS) staff, CEO/ Board members, other organisations • Impact of TIS activities on understanding and confidence of TIS staff, other frontline workers and community leaders to address smoking (outcome) • Challenges and how you overcame them in the reporting period 	<p>We promote Quitskills brief intervention training to workers attending all community events and whenever we meet with other organisations, including promoting the training to board members (output). Some external (non TIS) services have taken up the training and this has resulted in a 10% increase in referrals from external organisations (outcome). To complement the Quitskills training, the TIS team developed a short training package (2 hours) for local mainstream health services on providing culturally appropriate quit support (output), which the TIS team will deliver in the next reporting period. This aims to increase referral opportunities for both the ACCHO and TIS team.</p> <p>All members of the TIS team (6 staff) have completed Quitskills training (output), and team feedback suggests all are more confident in delivering advice and support (outcome). We also organised for 5 Board members to attend Quitskills (output), and this has been particularly effective in changing the mind-set of a number of these people and 4 have agreed to promote the smoke free message in future as broadly as possible (outcome).</p> <p>All members of the TIS team attended the NBPU workshop on monitoring and evaluation training (output). This helped us to develop surveys to measure the impact of our work with mainstream health services, our smoke-free workplace strategy, and the impact of anti-smoking advocates (surveys are attached) (outcome). We will conduct these surveys in the next reporting period.</p> <p>Challenges: There has been some resistance to becoming involved in the promotion of non-smoking message due to what is perceived as more important priorities or because people see the issue as ‘too hard’. The training has been a good opportunity to highlight the impact of smoking on the community and to provide strategies to address it. It is also an opportunity to promote success stories in our community.</p>	
<p>Examples of possible data you could use for TIS Indicator 3 when creating your report (as per example above)</p>	<p>Examples of outputs</p> <p>Training – x / % of TIS staff have completed formal training in the reporting period (output) including:</p> <ul style="list-style-type: none"> • Quit Skills (Brief interventions) • Monitoring and evaluation training <p>X / % of Other staff within the organisation trained in brief</p>	<p>Examples of outcomes</p> <p>Increased capability to deliver brief interventions and tobacco cessation advice by professionals in contact with Aboriginal and Torres Strait Islander people (results of baseline and follow up survey of training participants and clients) (outcome)</p>

interventions (also name their roles) (output)

X / % of organisation leaders (CEO/ Board members)
trained in brief interventions (output)

X / % of staff in other organisations trained in brief
interventions (also name their roles) (output)

TIS Indicator 4	Good practice example for TIS indicator 4	
<p>Referrals to appropriate quitting support</p> <p><i>(Information on how the TIS program has supported access to quitting support)</i></p> <ul style="list-style-type: none"> • How does your organisation manage referrals? (eg. does the organisation have a smoking cessation service to refer out to, or are smokers referred into the TIS program?) • Are referrals changing over time (increasing/ decreasing?) (outcome) • Does your organisation refer smokers to the Quitline? If not, why not? • Challenges and how you overcame them in the reporting period 	<p>We developed a smoking referral pathway to the TIS team to share with all health service staff (output). Clinicians can refer patients to the TIS team through the patient database (GP referrals from June to December = 50 (up from 0)) (outcome). We are targeting GPs to discuss smoking with their patients, as reporting on smoking status is currently recorded only for 50% of clients (output – an increase in % of clients smoking status recorded would be an outcome). Our Health Promotion unit meets regularly with the clinical unit of our organisation (output). Over the past 6 months, we have promoted the referral pathway into the TIS team, promoted the Quitskills training for clinical staff, and provide information and resources. We work together on delivering consistent information and referrals at community events (output).</p> <p>We are developing referral pathways to the Indigenous-specific Quitline service through building a relationship between the Aboriginal Quitline counsellor and our communities (outcome). A Quitline stall will feature at all community events for the next reporting period to build awareness of the Quitline service for Indigenous callers (output). We have asked the Quitline to provide their six-monthly data on referrals for Indigenous smokers made by the TIS team and other health services in the region (outcome).</p> <p>As a result of brief interventions with 50 smokers, the TIS team has supported 9 smokers to access smoking cessation support (including the Quitline, the MyQuit buddy app, and clinical support) (outcome).</p> <p>Challenges: The TIS team is the major service provider in tobacco cessation and there is limited opportunity to refer to other culturally appropriate services. Community members are reluctant to use the Quitline as they do not feel comfortable talking to a stranger, so we are focused on building awareness and trust of the Quitline service to increase its use as a support to quit. See also National Performance Indicator 2.</p>	
<p>Examples of possible data you could use for TIS Indicator 4 when creating your report (as per example above)</p>	<p>Examples of outputs</p> <p>x smokers referred out (to a support service/Quitline/ health service / support group – please specify service) (output)</p> <p>x smokers referred into the TIS program (eg. GP/AHW referrals to tobacco action workers (TIS or other – specify</p>	<p>Examples of outcomes</p> <p>An observed increase of 10% in the number of clients using Quitline’s Indigenous service compared to the previous year (based on data provided by Quitline) (outcome)</p> <p>Establishment of ongoing partnership with Quitline that includes agreement for data sharing (outcome)</p>

	which) (output) Clinical data if available eg. x of pharmaceutical referrals for NRT products (output)	
--	--------------------------------------------------------------------------------------------------------------	--

TIS Indicator 5	Good practice example for TIS indicator 5	
<p>Supporting smoke-free environments <i>(Reducing second-hand smoke in homes and public spaces, limiting areas where smoking is accepted, de-normalising smoking in the workplace and community)</i></p> <ul style="list-style-type: none"> Strategies to promote smoke-free workplace policies (eg. workers provided free smoking cessation support/ rewarded for quitting with additional leave) Strategies to promote smoke-free households and public spaces (eg. local campaigns/ smoke-free community days) Challenges and how you overcame them in the reporting period 	<p>The TIS team has implemented a major campaign on smoke free homes through local media outlets, social media and via other organisations (e.g. the ACCHO) in the reporting period (output). The campaign (<i>Don't smoke near us</i>) had an emphasis on child health and the harm inflicted from passive smoking. The campaign resulted in an increase in referrals into the TIS team from people wishing to get advice on implementing a smoke free home and strategies for discouraging others to smoke in the home (referrals = 30 up from 0) (outcome). We ran a workshop for support agencies to provide information to home owners to promote the campaign and to provide strategies for families to keep their homes smoke-free (output). The number of current smoke free homes in community x (5) has increased by 20% following the campaign (outcome) (participants are asked to fill out surveys, with follow-up surveys run on a regular basis, to gauge retention/relapse).</p> <p>The TIS team continues to contact and support organisations in the region (n=12) to develop and enforce smoke free workplaces (output). For example, we worked closely with (name) Indigenous organisation in our community in the reporting period. The coordinator agreed that a smoke free workplace could assist in improving the health of staff in the organisation, but was unsure how to go about changing the current environment. We assisted through providing examples of a smoke free policy, and working through how it could be implemented and enforced. We promoted the Quitnow website and explained different referral pathways to smoking cessation support. TIS also provided examples of signage. We continued to support the organisation with the implementation through regular visits and encouragement. The organisation now has a smoke free policy which includes incentives for staff members to quit (additional day of leave for quitters) (outcome) and 10 staff members have been referred to tobacco cessation support, and 5 staff members are currently attempting to quit (outcome).</p> <p>The coordinator has become an advocate for smoke free workplaces and homes and continues to refer staff and friends to the TIS team (outcome).</p> <p>Challenges: The team has had difficulty in convincing organisations to become smoke free, particularly where this has been tried in the past. In these cases we have continued to make regular contact, in order to build up relationships. Coordinator x, as well as the Community Leaders mentioned above, have also been of great assistance in breaking down resistance.</p>	
Examples of possible data you could	Examples of outputs	Examples of outcomes

<p>use for TIS Indicator 5 when creating your report (as per example above)</p>	<p>x workplaces have received support to become smoke-free and /or developed a policy (output)</p> <p>x home support package distributed (% of households reached in community) (output)</p> <p>x family homes have received weekly/monthly/6 monthly support to become smoke free (output)</p> <p>x community events have been supported by the TIS team to become/continue to be smoke free (output)</p>	<p>x / % staff who are smoke-free at work (outcome)</p> <p>% of organisations in the region enforcing smoke-free workplace policies and spaces (outcome)</p> <p>x / % of smoke free public areas and events established in the region (outcome)</p> <p>x / % of households that have gone smoke-free indoors (outcome)</p> <p>x / % of households that remain smoke-free indoors for more than 3months (outcome)</p>
----------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------