HEAL PROGRAM

Evaluation Report

March 2022

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Acknowledgements

I acknowledge the Traditional Owners and Custodians of the lands on which this report was written, the Wurundjeri Woi-Wurrung People of the Kulin Nation, and all First Nations' Peoples of the lands on which the HeaL Program was delivered. I pay my respects to their Ancestors and Elders past and present and acknowledge sovereignty has never been ceded.

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List of shortened forms

AIRR	Assessment, Intake, Referral and Response
AOD	Alcohol and other drug
CLC	Community legal centre
COVID-19	Coronavirus disease (COVID-19)
ECLC	Eastern Community Legal Centre
FVIO	Family violence intervention order
HeaL	Holistic Empowerment Advocacy Legal

Glossary

Community service professional	ECLC uses this term to describe a diverse range of qualified and skilled professionals in support, case work or advocacy roles. This includes social workers, welfare workers, youth workers and professionals with psychology, health or other qualifications.

Executive summary

This evaluation was commissioned by Eastern Community Legal Centre for the purposes of assessing the effectiveness of the HeaL Program, documenting learnings to inform future integrated practice programming and identifying recommendations for strengthening HeaL. The evaluation covered the HeaL Program's operations from 1 July 2019 to 28 February 2022 and was conducted between 15 February and 21 March 2022.

During the period under assessment, the Program assisted 30 clients, nearly half of whom were referred by a health service. The HeaL Program provided these clients 73 representation services, 26 legal advice services and 6 information services. The five most common legal problem types that HeaL clients received assistance for were criminal matters, fines, traffic offences, family violence intervention orders and credit and debt.

The HeaL Program also provided 22 secondary consultations – 12 to ECLC staff and 10 to external community services.

All clients who provided feedback on their experience with the HeaL Program described that assistance helped improve their wellbeing. Clients commonly reported that support from the HeaL Program reduced their stress levels, helped them to move on with their lives and helped them feel more in control of their lives. Clients also consistently reported feeling well supported by HeaL staff. They described the Client Advocate and lawyers as being caring, respectful and excellent at communicating in ways the client could understand. For numerous clients this was a stark contrast to experiences with other lawyers. Clients reported high levels of trust in their HeaL supports and described feeling safe and empowered to address their legal issues as a result.

Practitioner skills and approaches identified as important for building critical rapport and trust and supporting positive client outcomes, included trauma-informed approach, communication skills, empathy, flexibility and going at the client's pace. Organisational culture and resourcing were also found to be important for successful implementation of integrated services.

Involvement with the HeaL Program was found to have a marked impact on participating lawyers from the Community Law Program. Lawyers reported a deeper and more holistic understanding of clients with complex needs and how to effectively support them, particularly the importance for clients to go at their own pace and the need to build strong trust.

The evaluation findings draw attention to challenges that can be expected when implementing an integrated practice model, including that close collaboration between different professionals can be unfamiliar and uncomfortable, client work can be resource intensive and emotionally demanding while also rewarding and impactful, and that the pool of lawyers experienced in working in integrated service models is small.

The evaluation captured learnings that can support practitioners in the application of ECLC's Better Practice Principles for integrated practice. Learnings included:

- Flexibility and adaptability are critical qualities for all members of an integrated practice team; staff who are not comfortable to work with a degree of uncertainty and respond flexibly, will be neither effective nor happy in an integrated practice program. (Principle 8)
- For practitioners working exclusively in an integrated service model that supports complex and highly vulnerable clients who find it difficult to self-manage, the experience can be isolating, intense and emotionally draining. It is essential that practitioner wellbeing is closely monitored and well supported. (Principle 8)

- Relationship and personality matter. The degree of collaboration required under integrated service models will only be possible if those involved and working intensely together are a good fit with each other. Integrated practice requires the right people for the job and the right people for each other. (Principle 10)
- Meeting the client at their pace often requires lawyers to work much more slowly than they typically would. Lawyers accustomed to working in a results-focused manner can find this challenging. It can require a considerable shift for lawyers to value, preference and/or be comfortable with a more process-focused approach. (Principle 11)
- Managing clients' risks to themselves is particularly challenging for the community service professional. Community service professionals are often accustomed to working to a lower threshold of risk triggering a response than lawyers work to but working in an integrated practice they are bound by the same confidentiality requirements as the lawyer and therefore, in the absence of client consent, can only act if there is "imminent risk" of harm to the client. This can be personally and ethically challenging for the community service professional to reconcile. It is important that the relationship between lawyer and community service professional is such that they can candidly discuss their concerns and obligations, and that there is a coordinator/manager for the integrated service to whom they can escalate concerns about risk. (Principle 14)

Recommendations

The evaluation findings point to the following recommendations for the HeaL Program:

i. To maximise flexibility and continuity of legal support for clients, continue efforts to recruit a dedicated lawyer for the HeaL Program.

If/when a dedicated lawyer is recruited:

ii. Consider an integrated practice model where a dedicated lawyer supports most HeaL clients, with a small number of lawyers from the Community Law Program (i.e. those with interest and requisite qualities and skills) assisting when demand is high, or to assist clients with legal issues in areas of law outside the HeaL lawyer's expertise.

Other program aspects to address:

iii. Conduct targeted awareness raising of the HeaL Program among potential external referrers (including local NDIS providers, mental health services, housing services and AOD services), noting that the Program would require additional resources to meet the resulting increases in demand.

iv. Explore options for periodically checking/testing quality of different communication platforms used with clients, to ensure accessibility.

v. Continue to trial and develop effective and appropriate ways to collect timely feedback from clients to continue informing program development.

vi. Explore additional methods to measure the impact of integrated services for practitioner skills and service development.

vii. Provide structured learning opportunities to continue strengthening the understanding and skills of Community Law Program lawyers working with the HeaL Program, regarding holistic approach and trauma-informed practice. Participation in integrated practice meetings with staff from other integrated services within ECLC, and participation in externally facilitated reflective practice meetings are recommended and as at the time of this report, were being planned for.

1. Introduction

1.1. Context and background to the HeaL Program

Eastern Community Legal Centre (ECLC) is a multidisciplinary legal centre that has a strong focus on working with communities across the eastern suburbs of Melbourne to resolve legal problems, advocate for rights, improve the justice system and alleviate socio-economic disadvantage. ECLC recognises that some groups within the community are more likely to confront persistent barriers to accessing help and managing legal problems and therefore prioritises delivering comprehensive advice and advocacy services to these community members, whilst also working to address the causes of the disadvantage they experience.

As identified in ECLC's Strategic Plan, these priority communities are: Children and Young People; People Experiencing or at Risk of Family Violence; Indigenous Australians; Older People experiencing or at risk of elder abuse; Lesbian, Gay, Bisexual, Transgender, Intersex and Queer peoples; People who Experience Language or Cultural Barriers; People Experiencing or At Risk of Homelessness; and, People with a Disability or Mental Illness.

In 2016, ECLC (funded by Victoria Legal Aid's CLC Innovation and Transformation grant) established the Enhanced Entry Project, a project that aimed to provide holistic high quality legal help to clients from ECLC's priority communities. It did this by developing a centre-wide Triage Framework that identified clients from its priority communities; and by providing an Enhanced Intake Service that offered a multidisciplinary approach in connecting community members with the relevant legal help.

Although the Enhanced Entry Project: End of Project Evaluation Report (2018) found that the Triage Framework and Enhanced Intake Service had been successful in identifying priority clients with complex needs and produced a range of positive outcomes for clients, it also identified the increased resources that were necessary to do this work and highlighted the need for the organisation to further develop its integrated practice approach in this context.

In 2019, ECLC received funding from the Victorian Legal Services Board and Commissioner to establish a new 'Integrated Practice Service Team' to develop an integrated practice model to respond to community members that were being identified through ECLC's Triage Framework with additional barriers to accessing legal help. This led to the development of the HeaL program.

1.2. HeaL Program aim and objectives

The aim of the HeaL program was to provide people from ECLC's priority communities with a service that effectively responds their intertwined legal and psychosocial needs, specifically:

- People experiencing homelessness;
- People experiencing a mental health issue; and,
- People experiencing a dependence on alcohol and/or other drugs.

By integrating the skills of a Community Lawyer and a Client Advocate with the support of a Co-ordinator, the HeaL program was tailored to provide a holistic service that is flexible and responsive to the diverse needs of clients experiencing increased barriers to accessing the legal system.

Furthermore, through the development of strong relationships with key partner agencies the program intended to better connect legal services with housing, mental health and Alcohol and Other Drug services.

1.3. Program logic

The HeaL logic model summarises the program's inputs, outputs (activities and participation) and the short-medium- and long-term outcomes the program intends to bring about. It also outlines the assumptions underpinning the logic model and key external factors that might affect whether outcomes are achieved. See Figure 1.

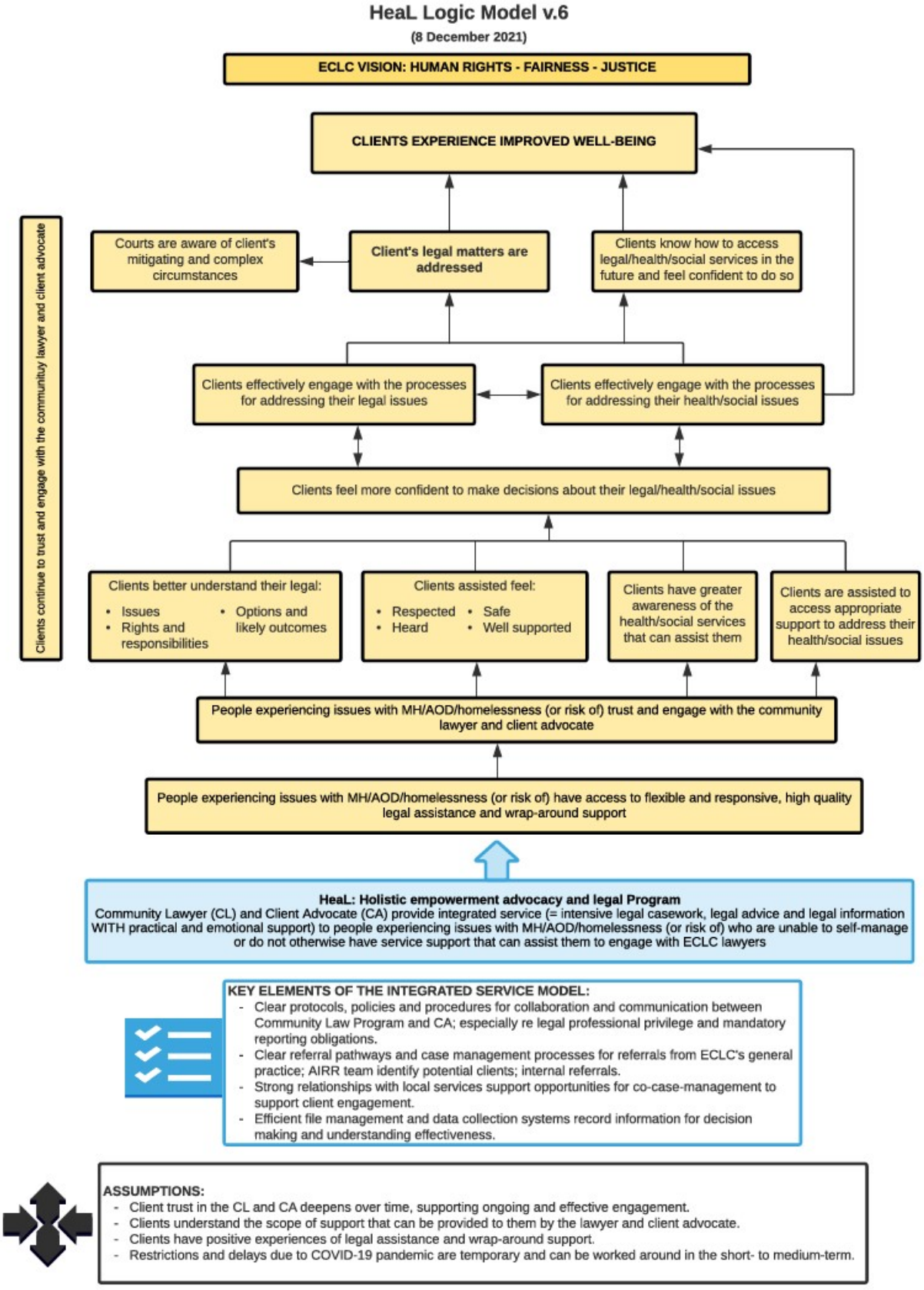

Figure 1: HeaL Program Logic Model

1.4. Scope of the evaluation

This evaluation was commissioned by ECLC to assess the effectiveness of the HeaL Program, to document learnings to inform future integrated practice programming and to identify recommendations for strengthening HeaL.

The evaluation covered the HeaL Program's operations from 1 July 2019 to 28 February 2022.

The evaluation was designed to answer the following **key questions**:

1. Who did the Program assist and how?
2. To what extent did the Program bring about its intended outcomes for clients? (Refer to Logic Model)
3. How was the HeaL Program implemented?
4. What insights did the Program provide about factors that support or hinder successful implementation of multidisciplinary and integrated service models?
5. What insights did the Program provide about how to achieve better outcomes for people experiencing issues with MH/AOD/homelessness?
6. To what extent did the Program contribute to strengthening multidisciplinary and integrated practice in ECLC?

The evaluation used qualitative methods, including review of key project documentation, appraisal of project delivery statistics, analysis of monitoring data, and interviews with clients, HeaL Program staff and other ECLC staff involved with the Program. Full details of the methodology are described in section 6.

2. Program implementation

2.1. Clients assisted

The HeaL Program assisted **30 clients** between 1 July 2019 and 28 February 2022.

Client demographics:

- 20 (67%) were female and 10 (33%) were male
- 27 (90%) had a disability and/or mental illness (cf. 34% of ECLC's community law clients)
- 23 (77%) had experienced family violence (cf. 44% of ECLC's community law clients)
- 19 (63%) were experiencing issues with alcohol and/or other drugs
- 10 (33%) were experiencing or at risk of homelessness (cf. 8% of ECLC's community law clients)
- 3 (10%) identified as Aboriginal and/or Torres Strait Islander (cf. 2% of ECLC's community law clients)

HeaL Program clients frequently presented with **multiple vulnerabilities**.

- 10 (33%) presented with a disability and/or mental illness, AOD issues *and* were experiencing or at risk of homelessness
- 9 (30%) presented with a disability and/or mental illness, AOD issues, were experiencing or at risk of homelessness *and* had experienced family violence.

Approximately half (45%) of HeaL clients were **referred to the Program** by a health service and one in five were referred by a community support service (see Figure 2).

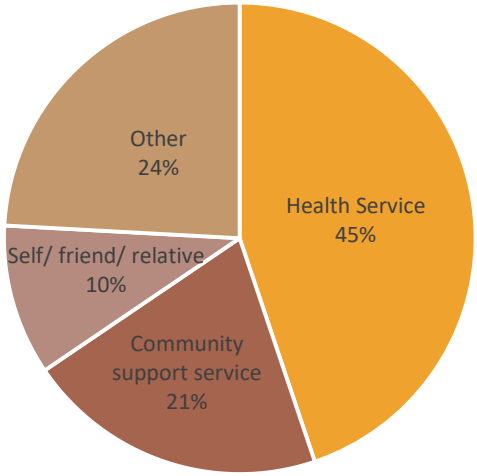

Figure 2: HeaL client referral sources[1]

[1] See Table 2 (Appendices) for detailed breakdown of referral sources.

Secondary consultations

The HeaL Program provided

- 22 secondary consultations
  - 12 were provided internally by the HeaL Client Advocate to ECLC staff
  - 10 were provided externally by the HeaL team to community services

2.2. Legal assistance

The HeaL Program provided:

- 73 representation services[2]
- 26 legal advice services[3]
- 6 information services[4]

HeaL Program clients were more likely to receive representation services than ECLC's community law clients: 21 HeaL clients (70%) received one or more representation services, compared with 9% of ECLC's generalist clients.

To date, the **five most common legal problem types** that HeaL clients received assistance for through the Program were:

i. Criminal matters (most commonly breach of FVIO, acts intended to cause injury, and minor illicit drug offences) – 26%
ii. Fines – 18%
iii. Traffic offences (mainly unlicenced driving, careless/dangerous driving, drink driving and regulatory offences) – 17%
iv. Family violence intervention orders – 9%
v. Credit and debt – 8%

See **Error! Reference source not found.** for further detail.

[2] Representation services includes representation in litigated matters as well as carriage of matters in an ongoing, representative capacity that do not proceed to a court, tribunal or inquiry.

[3] "A Legal Advice Service is the provision of fact-specific legal advice to a Service User in response to a request for assistance to resolve specific legal problems." (p.5, National Legal Assistance Data Standards Manual v3 July 2021)

[4] "An Information Service is the provision of information to a Service User in response to an enquiry about: a) the law, legal systems and processes, b) legal and other support services to assist in the resolution of legal and related problems. The information provided is of general application." (p.4, National Legal Assistance Data Standards Manual v3 July 2021)

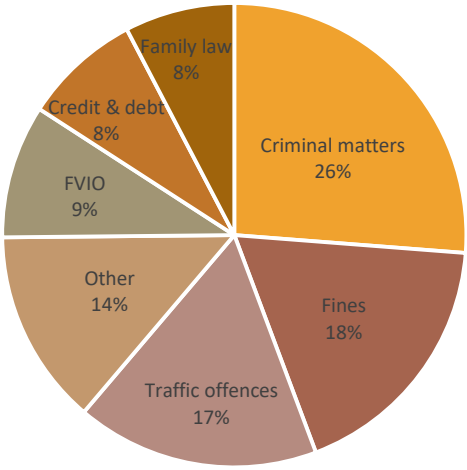

Figure 3: Legal problems the HeaL Program assisted clients with[5]

2.3. Psychosocial assistance

Mental health was the main psychosocial issue the Client Advocate assisted HeaL clients with. Help included assisting clients with self-care and stress reduction strategies (e.g. mindfulness and grounding exercises) to support them through their legal appointments and engagement with the legal system. The Client Advocate also reported helping clients with warm referrals to mental health services, housing services and AOD services.

Among the six clients who provided feedback, two reported that they were advised by the HeaL Program of other services that they did not already know about, that could help them with their psychosocial issues. These included financial counselling, AOD services and the Work and Development Permit (WDP) scheme.[6]

[5] See Table 3 (Appendices) for detailed breakdown of legal problems clients were assisted with.

[6] The WDP provides vulnerable and disadvantaged people with a non-financial option to address their fine debt. https://online.fines.vic.gov.au/Support/Work-and-Development-Permit

2.4. Evolution of the program and the impacts of COVID-19

The HeaL program was established and fully staffed by September 2019, and the first few months were focused on staff inductions, program development, team cohesion and establishing relationships with key partner agencies. The program was able to respond to clients from early November 2019 and commenced partnership activities with key partner organisations from February 2020. Unfortunately, in March 2020 the COVID-19 pandemic and the associated lockdowns greatly affected the intended rollout of the HeaL program, particularly the program's intended partnership and outreach activities, as all services faced the challenge of transitioning to remote service delivery.

During this time the HeaL program also experienced a number of staff changes and recruitment during the pandemic proved to be challenging, particularly the recruitment of a HeaL Community Lawyer. In order to continue service delivery of the HeaL program, the Managing Lawyers from ECLC's Community Law Team worked alongside the HeaL Client Advocate, integrating their skills in responding to community members who were being identified with additional barriers to accessing legal help. The program also further developed relationships with key services within the region to improve referral pathways and ensure the accessibility of the program, as well as foster opportunities for co-case-management and support.

Throughout the COVID-19 pandemic and associated Victorian lockdowns, the wellbeing of ECLC's community and clients was profoundly impacted, particularly for those who were already experiencing great vulnerability. As a result, the HeaL program became a critical program in responding to the intertwined legal and psychosocial needs of clients accessing ECLC.

In October 2021, the HeaL program was formally re-developed to be delivered as part of ECLC's Community Law Program, assisting people accessing ECLC for their legal needs, who were also experiencing complex psychosocial challenges.

By integrating the skills of a Client Advocate within the Community Law Team, the intention was that a greater number of clients accessing ECLC would be afforded the opportunity to receive a holistic service that was more flexible and responsive to their needs.

Rather than a strong external partnership focus, the program was instead focused on strengthening its internal referral pathways and case management processes by providing internal professional development opportunities and secondary consultation.

3. Findings

3.1. Client outcomes

3.1.1. Outcomes achieved

Client well-being

All clients who provided feedback on their experience with the HeaL Program described that assistance helped improve their wellbeing.

Clients commonly reported that support from the HeaL Program reduced the stress of unresolved legal issues and helped them to move on with their lives.

> The weight off my shoulders. Having it all finalised. I can just get on with my life. I don't have to worry about this anymore. (HeaL client)

> It made a difference in that my fines are organised and I'm paying them off [by working at a] shop... it made the chaos more organised. (HeaL client)

> It is just a nightmare to try to navigate on your own. But I feel like the best way to describe it is - just imagine going from complete confusion to knowing there's nothing to worry about. I actually don't ever, ever stress about it anymore. I used to be in tears. I used to have panic attacks, I used to not be able to sleep. It was just always a constant worry in my mind. (HeaL client)

All but one of the clients interviewed reported that the amount of control they felt they had over their lives was "better" because of assistance from HeaL (one client said they experienced no change).

> I felt like I didn't have any control with the hearing coming up, but they definitely helped with controlling the situation, making me feel like everything was under control. (HeaL client)

ECLC lawyers who have supported HeaL clients reported observing reductions in stress exhibited by clients as their legal matters were resolved.

> Often once they get to the end of that process and they've got an outcome, you can really feel and see the relief that everything's over and they've managed to get themselves through it. (ECLC lawyer)

For 6 of the 8 clients for whom appraisal forms[7] were completed at file closure, their well-being was rated as "better" than at the time of referral to the Program. HeaL staff described improvements in self-esteem, relationships and mental health during the course of the file.

[7] The Client Appraisal form is completed by the Client Advocate and Community Lawyer who assisted the client, at the time of file closure. The form guides advocate and lawyer to reflect on the client's time with the Program, and document their observations and professional judgment about the client's overall engagement and the impact on their well-being.

Client engagement

All stakeholders interviewed described that the HeaL Program helps clients who find it difficult to self-manage and who would typically disengage from legal support or not seek assistance in the first place, to engage with the processes for addressing their legal issues.

Among 8 closed files, the HeaL team gave a median overall rating of 8 out of 10 for client engagement with the processes for addressing their legal issues. Most clients attended scheduled appointments 'sometimes' and were contactable or returned calls 'sometimes'. When they did attend, most clients 'usually' or 'always' asked questions during appointments with the HeaL team and 'always' attended court for their hearing dates.

Lawyers described several examples of clients that did not or would not have engaged without the support involvement of the Client Advocate, such as a client who had been a 'no-show' at four separate appointments prior to referral to the HeaL Program.

> [The Client Advocate's involvement] absolutely changed [the client's] ability to engage with the service and their legal matter. (ECLC lawyer)

Likewise, several clients described that they had been about to give up trying to address their legal issue(s), when they found the HeaL Program.

> If it wasn't for that service, I would have given up, because trying to get someone to understand my complex matter, and because of my mental health diagnosis... it was really difficult. I didn't get taken seriously by other lawyers. I'd had a really bad experience… So usually I would just bury and avoid it until it becomes a massive problem and that's what it was getting to. (ECLC client)

The Client Advocate's commitment to understanding clients, building trust, and checking in on them over time, was described as contributing to meaningful engagement by clients with both legal and psychosocial issues.

> Because [the HeaL program is] flexible and demonstrate care and understanding of their situation, they tend to engage in a really different way. And that gives us the opportunity to support them with their legal problems which are quite often exacerbating their mental health or their substance use... That trust and engagement and time spent with them in understanding their situation then also gives us a lot of trust to refer them into the broader system and try and get them holistic support for their [other] needs. (Community service professional)

It was reported that there are numerous clients who continue to engage with the HeaL Program, even when things are not going well for them. This was considered a sign of strong engagement for a client group who typically disengage with services when challenges with mental health, AOD or housing intensify.

Confidence to make decisions

Clients also reported that assistance from the HeaL Program helped them feel more confident about making decisions about their legal issues. They described having faith in the expertise of the HeaL team to understand their situation, provide good advice and represent them effectively.

> I didn't know what to plea or do or say. They made feel confident I was getting the right advice and they were doing what they could for me. Especially the way they spoke to the judge in the hearing. 10/10. I couldn't be

> happier with how I was represented. Really professional and efficient and just really good and honest and nice. They really took out the key points of the situation and explained that to the judge in an effective way. (HeaL client)

> I learnt a lot from them. I learnt my rights and I feel stronger. I will go through more legal processes again in the future, but I feel strong enough now to do it. (HeaL client)

Understanding legal issues, rights and responsibilities, options and likely outcomes

Clients who provided feedback reported that assistance from the HeaL Program helped them better understand their legal issues and how they could address them.

> [Seeing the lawyer and Client Advocate gave me a] better understanding of what was going on and what my options are and how to go about things. (HeaL client)

Clients praised the Client Advocate's and the lawyers' communication skills, describing that these made all the difference to them understanding their legal issues and rights.

> They are exceptional at language and make it easy to understand, whereas lawyer jargon, it does my head in. Even normally when you ask a question and it's answered, you have no idea what is going on, but with [HeaL staff] that has never happened. (HeaL client)

Feeling supported, heard, safe and respected

All clients who provided feedback for the evaluation reported that they felt very well supported by their lawyer and the Client Advocate. They described being supported by a skilled team who communicated effectively and were available to them when they needed them.

> [I felt] that I was being helped by people with my best interests who knew what they were doing. (HeaL client)

> They were always right there if I needed anything. They were actively on the case. They kept me updated with what was happening. They let me know I could contact them any time. (HeaL client)

> If I think of something I just make a very simple note and I know that I'm going to be able to ask that question. Even better than that, I'm going to get an answer that is told to me in a way that no one else would ever explain things to me. (HeaL client)

Several clients reported that support from the HeaL program helped them feel like they had someone on their side, where previously they felt alone and often overwhelmed by their legal and other issues.

> A sense of support where I wasn't in it on my own… It was really helpful to have people to speak to about what was going on, so I didn't feel alone in what I was going through. (HeaL client)

Clients described feeling listened to, understood, cared for and respected. Clients who had experienced trauma or had poor experiences with lawyers reported this was particularly valuable.

> I felt understood... Just listening to my story and really understanding and giving a fresh perspective and clarity on everything [helped my mental health]. (HeaL client)

> Just the feeling of being supported. That made the biggest difference. It wasn't even the outcome; it was the sense of being supported and understood. I was in the biggest hole of all time. They chased me up on things. Some days I just couldn't deal with things and they were always really understanding about it. (HeaL client)

> They show so much care and understanding and respect and both are an absolute delight. (HeaL client)

> They cared about my safety. I felt I could really trust them. It's hard when you go through trauma to trust anyone. Anyone in a higher position is a threat. That level of trust with them and no judgment. I was able to unpack everything and get through it. (HeaL client)

One of the lawyers interviewed described their approach to listening to clients:

> I always try and make sure that I hear their voice and give them the space and the opportunity to be able to talk about what is going on in their lives. And often those conversations will take over from talking about their legal issues, because sometimes they can't talk about their legal issues until they've spoken about whatever else is going on in their lives. (ECLC lawyer)

Accessing legal help in the future

All clients interviewed reported that they know where to get help if they have another legal problem in the future and that they feel more confident to do so.

All clients interviewed said it was 100% likely they would recommend the service to others.

> I cannot talk highly enough about [the Client Advocate]. What she has done and how she has done it – I completely understand everything now. To me they are superheroes. They saved the day. (HeaL client)

3.1.2. Factors impacting client outcomes

Enablers

The evaluation identified the following practitioner skills and approaches within the HeaL Program as important factors for building critical rapport and trust, and supporting positive client outcomes:

- Trauma-informed approach
- Listening to clients' stories and doing so at their pace
- Communication
  - Clear communication with clients and using their preferred mode of communication[8]
  - Continuous communication between the Client Advocate and lawyer, including briefings before and after meeting with clients
- Flexibility
- Empathy
- Understanding and accepting that clients may prioritise other issues ahead of addressing their legal matters

[8] One client noted that the quality of three-way calls has frequently been poor, with volume issues such that one speaker is inaudible. They expressed that this was extremely frustrating and interrupted otherwise great communication. Improved telephone quality was requested.

- Lawyers attending when the Client Advocate conducts the client's psychosocial assessment helps them understand client's complex needs better
- Following up with clients when they miss appointments and/or communication drops off (Client Advocate)
- Extensive understanding of other support services (Client Advocate)

The role of the Client Advocate was noted as vital to helping clients understand and accept their legal position.

> Sometimes your legal options are really difficult to hear and having someone there to support you to hear that and validate that it's really difficult to hear, and it's not what you wanted to hear, and it's probably a choice that you didn't want to have to make. Having an advocate there to validate and support helps bring these people on board with their journey. (ECLC lawyer)

Challenges

HeaL staff reported that HeaL clients frequently experience a strong sense of injustice which can be a barrier to them digesting and accepting legal advice being offered. The Client Advocate described that expressing empathy and assuring the client (based on a foundation of trust) that the lawyer will help them achieve the best possible outcome, helps clients accept and understand the information and advice provided. Another approach reported by HeaL staff was to offer to provide information and advice to clients over multiple appointments, rather than a single appointment, to avoid overwhelm. This might involve breaking down information into parts across different meetings, or it might involve repeating the same information over as many meetings as the client needed to understand.

> Especially clients with complex trauma, very quickly they will feel overwhelmed. Their window of tolerance is narrow and talking about legal matters is really triggering for them. A lot of negative emotions will come out, like anger, injustice, and sometimes they get so emotional that there's no way we could continue. (Community service professional)

> Their understanding [was most helpful]. When they knew it was too much for me to deal with, when I had to go through my past, they kept staying we can stop. They did it gradually. They were really empathetic. (HeaL client)

The COVID-19 pandemic also presented challenges for the Program. All support services to which the Client Advocate would refer HeaL clients were impacted by lockdowns and work from home requirements, such that some could offer only remote and/or limited assistance, which was not always suitable.

3.1.3. Case stories[9]

Paula's story

Engagement with support services, criminal charges withdrawn, and mental health improved

Paula was initially referred to the Eastern Community Legal Centre after being involved in a car accident that had resulted in a number of criminal charges. She was subsequently referred to the HEAL program by the Community Law team, as they were finding it very difficult to engage with her over the phone and to get comprehensive instructions in relation to the charges, because of the mental health challenges she was experiencing.

When Paula initially engaged with the HEAL program she was extremely distressed. She reported that she had not committed the crimes for which she had been charged, and instead that the claims were false. She was also able to disclose that she had a long history of trauma, an Acquired Brain Injury, Post Traumatic Stress Disorder and a history of alcohol misuse.

Through the time that she was involved with the HEAL program, Paula experienced a series of legal problems including criminal charges for possession of cannabis, and leaving the scene of an accident. She also had a number of fines.

Supporting Paula through the criminal legal process was extremely difficult as it took some time to build her trust, ensure she had an understanding of the legal process and her options within the legal system and to get her clear instructions. This included a number of integrated appointments with the HEAL Community Lawyer and Client Advocate supporting her to safely engage with the legal system, within circumstances that felt completely unjust to her. It also involved collaborating with a number of support services that Paula was linked into, scheduling critical appointments around the COVID-19 related lockdowns, and negotiating a number of safety concerns Paula had in attending the Court.

With the HEAL program supporting Paula to resolve her legal matters, it was noticeable that she had built a strong rapport with the team and the way she was presenting at appointments and engaging with the service had greatly improved over time.

Paula's criminal matters were successfully resolved, with the charges around the accident being withdrawn by Police and she received no conviction for the drug charge. Her fines were withdrawn.

Although Paula was initially distrustful of engaging with other services, the HEAL team were able to ensure that she remain linked in with a number of services that would provide future support, including access to services through the NDIS.

Paula has reported that the HEAL program supporting her to resolve her legal matters, had a huge impact on her and her mental health. She felt that through this experience that she had learnt to face life's challenges with a positive attitude and that she was more able to have healthy and positive relationships with those close to her.

[9] Pseudonyms have been used to protect clients' privacy.

Tim's story

Engagement with ACCO AOD worker, conviction avoided, mental health treatment and employment secured

Tim is a young Aboriginal man, who was referred to ECLC by a financial counsellor. After missing multiple appointments with the Community Law team, ECLC's Intake Officer identified Tim as having a number of complex needs and made an internal referral to the HEAL program.

At the time of his referral Tim had more than 7 criminal charges in relation to property damage, handling stolen goods and possession of a weapon. He also had a number of outstanding fines. Tim had also recently been detained by Victoria Police and taken by Ambulance to the Emergency Department under the Mental Health Act due to erratic behaviour, threatening suicide and threatening to harm a family member.

The HEAL Client Advocate made multiple attempts to contact Tim to engage him with the HEAL Program. On one of these occasions Tim answered the phone and presented as under the influence and his speech was very unclear. During this call Tim was able to communicate his hesitancy and stress in engaging with a legal service and the Client Advocate was able to reassure him about the holistic support that would be available to him through the HEAL Program. Tim agreed to an integrated appointment that included the Client Advocate with the Community Lawyer at a more suitable time.

Although Tim found it difficult to attend appointments at the scheduled times, the flexibility that the HEAL program was able to offer him, ensured that Tim remained engaged with the legal service.

Through a series of appointments, Tim was able to disclose that he had a challenging childhood and had experienced a difficulty in learning at school due to undiagnosed ADHD and due to a disruption caused by his family moving from interstate and back. He started using illicit substances during Year 12.

Tim had been diagnosed with Generalized Anxiety Disorder (GAD), Bipolar Affective Disorder (BPAD), Attention Deficit Hyperactivity Disorder (ADHD) and substance misuse. He was connected with his GP for ongoing care and was on a waitlist for case management through the local mental health service.

Tim reported that he was grieving for the loss of his friend to suicide about a month before the criminal offences. He had also lost more than $4,000 from gambling and had run out of his medication for days before his presentation to Hospital. He was experiencing issues with his family and was subsequently homeless, couch surfing with friends. He described his life as 'chaotic'.

Tim had previously been referred to a number of services including a Psychologist and Alcohol and Other Drug counselling services, however he had always found it difficult to engage and was 'exited' from these services.

The HEAL program assisted linking Tim to an Aboriginal Community Controlled Organisation, where he was able to build a successful connection with one of their AOD outreach workers. Tim started attending Narcotics Anonymous meetings and was also able to secure a casual job. Although his life continued to be chaotic and there were periods where Tim relapsed and had periods of substance use, Tim did not miss any of his HEAL appointments and he was able to follow through with the legal processes.

The HEAL Community Lawyer and Client Advocate were able to support Tim to attend the Court Hearing to respond to the criminal matters. Tim plead guilty to the charges and was able to articulate his remorse. He was sentenced to a 12-month good behaviour bond without conviction, an outcome that he was very pleased with.

Since that time the HEAL team has remained in contact with Tim and continue supporting him with the outstanding fines by making an application for the fines to be withdrawn based on special circumstances. The Team is also supporting him to link in with appropriate services after he relocated to another region. Tim has also started receiving psychiatric treatment from the Continuing Care Team at his local mental health service. He feels as though his life is slowly getting back on track and he is optimistic that with the support he has in place that he is able to work towards recovery.

3.2. Integrated practice at Eastern Community Legal Centre

> It's so hard to separate psychosocial and legal needs. Responding in isolation doesn't address the core problem. We don't try to replicate what other services do (e.g. mental health services) but being able to provide mental health support while [clients] access legal advice is integral to their engagement, understanding, empowerment and sense of hope… It's much harder to represent effectively when not responding to needs holistically. You cannot achieve the same results in isolation. (Community service professional)

3.2.1. Impact of HeaL on integrated practice at ECLC

Lawyers who participated in the evaluation reported that working with the HeaL Program had influenced their skills, and their understanding of and attitudes towards integrated practice in a range of ways, described below.

- Deeper understanding of the importance of trust and greater openness to take more time with clients and work at their pace to obtain comprehensive understanding of the client's circumstances and instructions on their matter(s)

> Spending that time with the client to actually hear their life story gives them a sense of confidence that you know where they're coming from, and you know the history of what's going on, so you can take into account their circumstances and history. (ECLC lawyer)

> If it takes one appointment, it takes one, if it takes 10 then so be it. (ECLC lawyer)

> Certain clients may need to go through that process several times to come to some sort of outcome… even if it's the same advice, that advice can be very overwhelming just as a one off and they may not have absorbed everything and then they sometimes need it again… I feel like 80% of why HeaL works is that it's trust building through many appointments. (ECLC lawyer)

> I was in some appointments where I barely talked, and it can feel a little bit like 'why am I here?' But part of the reason why you're there is because of that trust building and getting a sense of the client and their whole self. (ECLC lawyer)

- More holistic understanding of the circumstances and experience of clients with complex needs

  I gained more of an understanding of client's needs and that they've got different circumstances and… that the legal issue may not be the only thing that's going on or the main thing that they care about… So I often ask clients now, things like, 'do you have any other matters that you need some assistance with? Is there anything else that's going on that we need to be aware of or that you would like to disclose, or do you just want to focus on your legal issue?' Just opening that dialogue. (ECLC lawyer)

- Strengthened trauma-informed practice

  It's really teaching me how to work in a more trauma-informed way and to be able to recognize the issues they're going through… really trying to acknowledge what the client is going through and working on a strength-based approach… encouraging the client and saying to them 'you're doing really well. I understand this is stressful' and being as supportive as I can in the context of being a lawyer, because often the news that we need to deliver as lawyers, isn't the news that people want to hear. (ECLC lawyer)

- Self-reflections on their role and skills

  I think it was actually very challenging to be told 'this legal issue is just as, or not as, important as this other social issue'. I think it's just difficult as a lawyer to let the law take a bit of a backseat. (ECLC lawyer)

  I feel fundamentally changed as a lawyer after working in the HeaL program. When I first went into doing work with the program, with the advocate, I thought 'I've got experience with clients with lots of trauma and who are experiencing really difficult circumstances in life. I've got this.' And then the discovery that it was actually way more challenging than I thought it would be. (ECLC lawyer)

- Understanding that due to things like stigma or shame, clients may not self-identify as having the vulnerabilities that make them eligible for integrated support, and being sensitive to that in making referrals

  Because they don't self-identify as needing housing assistance or mental health assistance, they don't go to any of those services. They think 'well, I don't need help with those services. I need help with my legal issue, with these criminal charges.' So it's a gradual kind of nudging, a process of speaking to the clients of maybe the benefits of engaging with those types of services, and then the client engages with those services based in their trust with our service. (ECLC lawyer)

3.2.2. Factors impacting integrated service delivery

This section describes factors that supported and hindered implementation of the HeaL Program.

Enablers

Through their experience with the HeaL Program, key informants to the evaluation identified the following as the most important factors for successfully implementing integrated service models.

- Practitioner qualities: patience, flexibility, willingness to learn about another discipline, strong problem solving and communication skills, ability to work collaboratively, high tolerance for uncertainty, understanding of trauma, understanding of holistic approach, and strong professional skills/experience
- Organisational culture of quality not quantity
- Resources to support practitioners to work together (including training, clear guidance, facilitated reflective practice sessions, program manager)
- Realistic caseload expectations for lawyers (especially if the integrated service is delivered through a Community Law Program)

> You do really need that flexible approach and ability to work in that grey kind of space. (ECLC staff)

Challenges

Key informants to the evaluation reported a range of challenges delivering the HeaL Program. Some challenges were inherent to integrated practice while others were particular to the HeaL Program.

- Close collaboration can be uncomfortable – Closely and continuously working alongside another professional when supporting clients is unfamiliar territory and consequently, at least initially, can be uncomfortable and confronting.

> It's not a comfortable space when you always have another person along… and asking questions in relation to your professional [approach] with clients. (Community service professional)

- Intense and emotionally challenging work – While practitioners found supporting vulnerable clients with complex needs rewarding, it could also be intense and emotionally demanding.

> It may look like a really straightforward, legal case that you can open and shut quickly, but consider this client to be like four clients worth of caseload in terms of the amount of work and time you have to spend on it, because it's not just time with the clients, it's also time debriefing with the advocate, working together so you are both on the same page. Often you need downtime because sometimes clients can be quite distressed or activated during the call and it can be very emotionally gruelling to have some of those phone calls, and so you need downtime to also take care of yourself. (ECLC lawyer)

- Opportunity cost – Providing integrated services to high need clients is resource intensive, taking 3-4 times as much time as assisting clients who can self-manage. When community lawyers are assisting HeaL clients, they can take on fewer other clients, which makes it more challenging for lawyers and intake staff.

> I think many of the lawyers new to HeaL struggled with the idea that this one client with a fairly simple legal issue would be so time consuming. (ECLC lawyer)

> In reality, demand is high so we do have to say 'no' to other people wanting help which can get quite stressful. (ECLC staff)

- Staffing – The Program had trouble recruiting a suitably skilled and experienced lawyer (after the first lawyer engaged left). It was reported that at this time, while integrated practice is still relatively new, there are few lawyers who have experience working in an integrated, holistic way with community service professionals.
- Holistic, trauma-informed approach – it takes time, practice and support to understand and adapt to this way of working. When new to this approach, practitioners may not appreciate the extent to which extra time spent understanding clients and the complexities of their lives is an investment that will enhance the support they can provide to clients and the outcomes that may be achieved.
- Providing sufficient flexibility – It is more difficult for lawyers from the Community Law Program to provide flexible appointments and coordinate with the Client Advocate to support HeaL clients, than it is for a dedicated HeaL Program lawyer.

> It can take a huge toll on a service to provide that level of support. It's resource intensive and hard for practitioners to manage their own calendars [when] being so flexible. It puts pressure on practitioners. (ECLC staff)

- Continuity – Community Lawyers typically have only 1 or 2 HeaL clients at a time and will assist many other clients in between contact with their HeaL clients (especially if a HeaL client chooses to focus on other issues or is uncontactable for a period), such that continuity can be lost. Additionally, because the Client Advocate typically has more continuous contact with the client, by default they sometimes end up taking a lead role in the collaboration and/or needing to remind or re-brief the lawyer, which can increase their workload.

Learnings

Table 1 describes the HeaL Program's learnings about ECLC's Better Practice Principles for integrated practice.[10]

[10] It was beyond the scope of this evaluation to consider all 15 principles. Learnings are presented for the 7 principles that key informants spoke most about.

Table 1: Learnings about ECLC's Better Practice Principles for integrated practice

PRINCIPLE	LEARNINGS
1. Strong partnerships and relationships	▫ Good communication between lawyers and the client advocate is essential. This means being willing and able to communicate about emotional challenges experienced when working with HeaL clients, as well as clearly and continuously communicating about all aspects of the client's assistance as well. ▫ For integrated service models structured so that numerous lawyers are periodically involved (cf. one or more dedicated lawyers who work exclusively with the integrated service), it is more challenging for strong and effective working relationships to grow. If there is just one community service professional, they will need to continuously adapt to different styles, capacities and personalities, depending on which lawyer they are working with. At the same time, a model so structured has the potential to provide access to a greater range of legal expertise.
6. Understand and support professional obligations	▫ It is vital that the coordinator/management team provide clear structures and support to professionals working in integrated practice to navigate challenges and enhance requisite skills (e.g. trauma-informed practice) so that these do not fall to one of the professions over the other and foster power imbalances and/or isolation.
7. Clear role definition and team structure	▫ Having a team structure that incorporates a role dedicated to coordination or oversight of the integrated program's operation is critical, even for very small programs comprising just one lawyer and one other professional.
8. Practitioner skills specific to integrated practice	▫ Flexibility and adaptability are critical qualities for all members of an integrated practice team; staff who are not comfortable to work with a degree of uncertainty and respond flexibly, will be neither effective nor happy in an integrated practice program. ▫ Working collaboratively with other practitioners can require a big shift of approach. - Lawyers are typically used to working alone and leading their own cases; having to confer with another professional about strategy and approach is unfamiliar. Not all lawyers are able to shift to the level of collaboration required for integrated practice. - Community service professionals are likely to have experience working collaboratively with practitioners from different disciplines, through involvement in multidisciplinary teams. While this provides good grounding, they need to be prepared and able to work at an even deeper level and intensity of collaboration in an integrated service model. ▫ For practitioners working exclusively in an integrated service model that supports complex and highly vulnerable clients who find it difficult to self-manage, the experience can be isolating, intense and emotionally draining. It is essential that practitioner wellbeing is closely monitored and well supported (e.g. through regular reflective practice and debriefing opportunities, time and support for self-care, etc.).

PRINCIPLE	LEARNINGS
10. Shared practice	▫ Relationship and personality matter. The degree of collaboration required under integrated service models will only be possible if those involved and working intensely together are a good fit with each other. Integrated practice requires the right people for the job and the right people for each other. ▫ Organisational strategies and approaches that support practitioners to work collaboratively include: flexible caseloads/KPIs; allowing practitioners to exercise their discretion and professional judgment about how and when to meet with clients together and when to meet individually; workplace culture that preferences quality over quantity.
11. Person-centred support, including flexible service delivery	▫ Person-centred support involves recognising and respecting the client's priorities. For lawyers it can be challenging to accept that what they consider to be a significant or urgent legal issue, for the client is not a top priority. ▫ Meeting the client at their pace often requires lawyers to work much more slowly than they typically would. Lawyers accustomed to working in a results-focused manner can find this challenging. It can require a considerable shift for lawyers to value, preference and/or be comfortable with a more process-focused approach. ▫ A flexible approach to appointments is critical, especially for complex clients who find it difficult to self-manage. Even with the support of an advocate, such clients may frequently need to reschedule and/or have repeat appointments to cover information already shared; engagement is enhanced the more the integrated service can accommodate these needs. ▫ Sitting in on any psychosocial assessments conducted by the community service professional is a helpful way for lawyers to obtain a holistic understanding of the client's circumstances and health and social issues, and a deeper appreciation of the complexity of their needs. This can inform how a lawyer provides legal advice and how they are able to represent them in their legal proceedings.
14. Ongoing identification, mitigation and management of risk	▫ Managing clients' risks to themselves is particularly challenging for the community service professional. Community service professionals are accustomed to working to a lower threshold of risk triggering a response than lawyers work to but working in an integrated practice they are bound by the same confidentiality requirements as the lawyer and therefore, in the absence of client consent, can only act if there is "imminent risk" of harm to the client. This can be personally and ethically challenging for the community service professional to reconcile. It is important that the relationship between lawyer and community service professional is such that they can candidly discuss their concerns and obligations, and that there is a coordinator/management team for the integrated service to whom they can escalate concerns about risk.

4. Conclusions

4.1. Appropriateness and effectiveness of the HeaL Program

Like so many programs operating over the last two years, the HeaL Program was impacted by the COIVD-19 pandemic and associated lockdowns and needed to undertake ongoing adaptations to provide the intended support to its target group. Overall, most evaluation participants were of the view that the re-developed model (whereby various lawyers from ECLC's Community Law Program worked with the Client Advocate to support HeaL clients) worked well and had strengths, but that the original model with a designated HeaL Program lawyer was preferable.

The evaluation found that the re-developed model provided the HeaL Program access to lawyers with a wider range of expertise than the original model. It was also found that involvement with the re-developed model had a range of positive impacts on participating lawyers, including better understanding of clients with complex needs, and a deeper understanding of and appreciation for integrated practice, with flow on effects for their usual practice. At the same time, it was more difficult under the re-developed model for lawyers from the Community Law Program to provide the levels of flexibility and continuity a designated lawyer could under the original model, service features particularly important for effectively supporting the targeted client group.

These findings point to the importance of considering and prioritising among two competing benefits. While a dedicated lawyer on balance appears better for HeaL clients, the involvement of community lawyers in the HeaL Program has potential over time to enhance their skills which can benefit the larger group of ECLC clients supported by ECLC's Community Law Program.

While the HeaL Program did not assist as many clients as originally expected, the evaluation found good evidence that it achieved intended results (as articulated in the Program's logic model) for the 30 clients helped. Feedback from clients was overwhelmingly positive, with several describing that support from the HeaL staff was life changing. Clients described feeling supported and treated with a level of respect and care that for them was uncommon. Clients reported that HeaL staff helped them understand their legal issues and options in such a way that they could make decisions and move on with their lives. All clients reported that support from the HeaL Program helped reduce their stress and gave them the feeling they had someone on their side.

4.2. Learnings

As a new program, operating in a new space, it was expected from the outset that the HeaL Program would afford ECLC important learnings. The Program therefore incorporated ongoing opportunities for reflection and adaptation, which proved even more important in the context of the COVID-19 pandemic. This evaluation captured the learnings identified by staff (and indicated by clients and their experiences) as most important for HeaL and other integrated practice services operating at ECLC in the future. The full list of learnings can be found in Table 1, however attention is drawn to the following five, which are suggested as the most critical:

- Flexibility and adaptability are critical qualities for all members of an integrated practice team; staff who are not comfortable to work with a degree of uncertainty and respond flexibly, will be neither effective nor happy in an integrated practice program. (Principle 8)
- For practitioners working exclusively in an integrated service model that supports complex and highly vulnerable clients who find it difficult to self-manage, the experience can be isolating, intense and emotionally draining. It is essential that practitioner wellbeing is closely monitored and well supported. (Principle 8)
- Relationship and personality matter. The degree of collaboration required under integrated service models will only be possible if those involved and working intensely together are a good fit with each other. Integrated practice requires the right people for the job and the right people for each other. (Principle 10)
- Meeting the client at their pace often requires lawyers to work much more slowly than they typically would. Lawyers accustomed to working in a results-focused manner can find this challenging. It can require a considerable shift for lawyers to value, preference and/or be comfortable with a more process-focused approach. (Principle 11)
- Managing clients' risks to themselves is particularly challenging for the community service professional. Community service professionals are often accustomed to working to a lower threshold of risk triggering a response than lawyers work to but working in an integrated practice they are bound by the same confidentiality requirements as the lawyer and therefore, in the absence of client consent, can only act if there is "imminent risk" of harm to the client. This can be personally and ethically challenging for the community service professional to reconcile. It is important that the relationship between lawyer and community service professional practitioner is such that they can candidly discuss their concerns and obligations, and that there is a coordinator/manager for the integrated service to whom they can escalate concerns about risk. (Principle 14)

5. Recommendations

The evaluation findings point to the following recommendations for the HeaL Program:

i. To maximise flexibility and continuity of legal support for clients, continue efforts to recruit a dedicated lawyer for the HeaL Program.

If/when a dedicated lawyer is recruited:

ii. Consider an integrated practice model where a dedicated lawyer supports most HeaL clients, with a small number of lawyers from the Community Law Program (i.e. those with interest and the practitioner qualities and skills identified in section 0) assisting when demand is high, or to assist clients with legal issues in areas of law outside the HeaL lawyer's expertise.

Other program aspects to address:

iii. Conduct targeted awareness raising of the HeaL Program among potential external referrers (including local NDIS providers, mental health services, housing services and AOD services), noting that the Program would require additional resources to meet the resulting increases in demand.

iv. Explore options for periodically checking/testing quality of different communication platforms used with clients, to ensure accessibility.

v. Continue to trial and develop effective and appropriate ways to collect timely feedback from clients to continue informing program development.

vi. Explore additional methods to measure the impact of integrated services for practitioner skills and service development.

vii. Provide structured learning opportunities to continue strengthening the understanding and skills of Community Law Program lawyers working with the HeaL Program, regarding holistic approach and trauma-informed practice. Participation in integrated practice meetings with staff from other integrated services within ECLC, and participation in externally facilitated reflective practice meetings are recommended and as at the time of this report, were being planned for.

6. Methodology

6.1. Evaluation Purpose

This evaluation was commissioned by ECLC to assess the effectiveness of the HeaL Program, to document learnings to inform future integrated practice programming and to identify recommendations for strengthening HeaL.

The evaluation was designed to answer the following **key questions**:

1. Who did the Program assist and how?
    a. How many people did the Program assist?
    b. What legal issues were people assisted with?
    c. What psychosocial issues were people assisted with?
2. To what extent did the Program bring about its intended outcomes for clients? (Refer to Logic Model)
    a. Understanding legal issues, rights and responsibilities, options and likely outcomes
    b. Clients feel safe, heard, respected, and well supported
    c. Increased confidence
    d. Increased engagement
    e. Improved well-being
3. How was the HeaL Program implemented?
    a. To what extent was the Program implemented as planned?
4. What insights did the Program provide about factors that support or hinder successful implementation of multidisciplinary and integrated service models?
    a. Key challenges to implementation fidelity
    b. Enablers
    c. Effective adaptations
5. What insights did the Program provide about how to achieve better outcomes for people experiencing issues with MH/AOD/homelessness?
    a. What factors supported better outcomes? (Explore practitioner and client-focused principles[11])
    b. What factors hindered or undermined better outcomes?
6. To what extent did the Program contribute to strengthening multidisciplinary and integrated practice in ECLC?
    a. To what extent did involvement with the Program influence understanding of and attitudes towards multidisciplinary and integrated practice among community lawyers?
    b. To what extent did involvement with the Program influence the skills of community lawyers to deliver holistic legal help within multidisciplinary teams?
    c. To what extent did involvement with the Program influence the skills of community lawyers in their usual practice?

The evaluation covered the HeaL Program's operations from **1 July 2019 to 28 February 2022**.

[11] Integrated Practice – Better practice principles, ECLC

6.2. Data collection methods

This evaluation employed qualitative methods. Data collected from different Project stakeholders was triangulated to test the validity of the data and answer the key evaluation questions as fully and confidently as possible.

6.2.1. Document review

The evaluation reviewed the following key project documents:

- Project plans (initial and amended)
- Project data reports (including client demographic data, referral sources, problem types)[12]
- Client appraisal forms
- Client case stories x2

6.2.2. Stakeholder interviews

Purposive sampling was used to invite key stakeholders who have been involved with the HeaL Program to participate in the evaluation. All stakeholders approached consented to participate.

Semi-structured interviews were conducted with **9 stakeholders**:

- Client Advocate x1
- Lawyers
    - Managing lawyers x2
    - Community lawyers x2
- Integrated Practice Principal x1
- AIRR officer x1
- Clinical supervisor x1
- NDIS Specialist Support Coordinator x1

With stakeholder permission, interviews (conducted by videoconference or phone) were recorded and transcribed in full for analysis.

6.2.3. Client interviews

Semi-structured interviews were conducted with **6 clients** – 4 whose files had closed and 2 who had concluded one matter but had other ongoing matters.

Where permission was given, client interviews were recorded and transcribed in full, otherwise extensive notes were taken during the interview, partly paraphrased summaries and partly verbatim.

6.3. Data analysis and report writing

Interview data were analysed for themes using NVivo 11 software[13].

The Evaluator prepared a draft of the evaluation report which was reviewed by ECLC. Feedback was incorporated into the final version of this report.

[12] Compiled by ECLC's Manager, Quality and Evaluation, and provided to the evaluator.

[13] Specialist software for qualitative data analysis.

All sections of the report were written by the Evaluator, other than sections 1.1, 1.2, and 2.4 which were written by the Integrated Practice Principal.

6.4. Limitations

Client voice in this evaluation is limited to feedback from only 6 of the 30 HeaL clients. While client feedback was exclusively positive, it must be noted that other HeaL clients may have had different experiences. Feedback from the HeaL team and community lawyers however, are consistent with an overwhelmingly positive experience for clients of the HeaL Program generally.

Appendices

Table 2: HeaL client referrers

Referral source	N=29	
	n	%
Health Service	13	44.8
Other[14]	7	24.1
Community support service	6	20.7
Self/ friend/ relative	3	10.3

Table 3: Legal problems the HeaL Program assisted clients with

Legal problem	N=183	
	n	%
Criminal matters	48	26.2
Fines	33	18.0
Traffic offences	31	16.9
Family violence	17	9.3
Credit and debt	15	8.2
Family law	14	7.7
Other[15]	12	6.6
Personal safety intervention orders	8	4.4
Consumer law	5	2.7

[14] Included health/community services department, financial counselling service, other legal assistance service and other community support (e.g. youth worker, disability worker).

[15] Included: Births, deaths, marriages; civil law; wills and probate; child protection; crimes compensation.