Appendix 1 The data

General information to help readers interpret the tables presented in this report is given in Appendix 1 of the national report. Additional information relevant only to the tables for Victoria follows.

A1.1 Agency participation

Table A1.1: SAAP Client Collection: agency participation rates and forms returned with informed consent and valid consent, by region and primary target group, Victoria, 2005–06

	Agencies ^(a)		Fo		
	Total	Participation rate	Total	Consent	Valid consent ^(b)
Region	Number	%	Number	%	%
Eastern Metropolitan	35	82.9	7,150	94.4	86.3
North and West Metropolitan	104	92.3	10,536	86.9	80.9
Southern Metropolitan	67	89.6	31,963	88.0	85.4
Barwon South Western	26	96.2	2,806	81.9	78.0
Gippsland	24	100.0	2,064	84.5	67.0
Grampians	34	100.0	2,252	93.3	87.2
Hume	32	75.0	2,021	85.1	77.9
Loddon Mallee	25	84.0	3,435	87.2	78.5
Statewide	7	100.0	2,666	79.9	74.4
Total	354	90.4	64,893	87.9	82.9
Primary target group					
Young people	140	86.4	7,742	89.0	83.7
Single men only	14	100.0	2,258	90.4	88.0
Single women only	18	100.0	2,468	87.9	80.6
Families	30	96.7	3,711	90.3	79.8
Women escaping domestic violence	66	89.4	10,533	82.3	73.2
Cross target/multiple/general	86	91.9	38,181	88.8	85.6
Total	354	90.4	64,893	87.9	82.9

(a) 'Agencies' refers to the number of agencies that were 'in scope'—that is, that should have been participating in the reference period.

(b) 'Valid consent' here refers to all forms with a valid statistical linkage key (see 'statistical linkage key' in the Glossary).

Note: Table based on forms returned from agencies in scope for the Client Collection during the reference period. Not all agencies funded under SAAP are required to participate in the Client Collection. For example, agencies that provide only support to other agencies or casual assistance lasting less than 1 hour on a given day and which is not of an ongoing nature are not required to participate in the collection. Consequently, some agencies funded under SAAP (see Chapter 2) are not included in this table.

Sources: SAAP Administrative Data and Client Collections.

A1.2 Additional counting rules

In the tables in this report, when counting clients or support periods in particular groups, the following rules have been used in addition to those outlined in Appendix 1, Section 1.4 of the national report.

Region

Administrative regional classifications developed by the Victorian Department of Human Services are used in the report. The State's administrative regions, which consist of three metropolitan regions, five rural regions and one statewide classification, are as follows:

- Eastern Metropolitan
- North and West Metropolitan
- Southern Metropolitan
- Barwon South Western
- Gippsland
- Grampians
- Hume
- Loddon Mallee
- Statewide.

Appendix 2 SAAP NDCA Client Collection form

★ indicates questions that <i>require</i> the <i>informed consent</i> of the client.
AGENCY ID D D M M Y
★ ALPHA CODE Letters of first name 1st 2nd 3rd 4th 5th 6th Letters of last name 1st 2nd 1st 6th
★ DATE OF BIRTH OF CLIENT D D M Y Y Y Y day month estimated unknown unknown year
3 Source of referral/information 1 please tick one box only 2 self 13
family/friends 16 school/other education institution 2 community services department 3 police/legal unit/correction institution 17 3 health services 18 4 psychiatric unit 7 5 SAAP agency/worker 9 1 other government department 10 2 other non-government organisation 11 other (please specify) 999 999 don't know/no information 0 IF CONSENT IS NOT OBTAINED PLEASE GO 0

★ 4 Country of birth of client		* 8 Main income source before and after support
Australia	1	please tick one box only in each column Before After
other (please specify)		No income
-		no income 1
* 5 Does the client identify as being of Aborigina or Torres Strait Islander origin?	al	registered/awaiting benefit 2
no	1	Government payments
yes, Aboriginal	2	youth allowance 33
ves, Torres Strait Islander	3	
yes, both	4	project (CDEP)
, job, jobin [ABSTUDY 31
★ 6 Presenting reasons for seeking assistance		Austudy payment for students aged 25 years and over 28
please tick as many circles as apply		disability support pension 12
Interpersonal relationships		age pension 13
time out from family/other situation (2	parenting payment 34
relationship/family breakdown	3	DVA payment (pension or support) 35
interpersonal conflict) 4	other type of allowance or benefit 36
sexual abuse (domestic/family violence () 7) 6	Other income
physical/emotional abuse (\bigcirc 5	workcover/compensation 19
	0.0	maintenance/child support 20
Financial gambling (20	wages/salary/own business 21
budgeting problems (23	spouse/partner's income 22
rent too high (24	other (please specify) 999
other financial difficulty (21	client left without providing any information 98
Accommodation		don't know 99
overcrowding issues	27	
eviction/asked to leave (25	
emergency accommodation ended (11	* 9 Labour force status before and after support
previous accommodation ended (26	please tick one box only in each column Before After
Health		employed full time 1 (35 hours per week or more)
mental health issues (28	employed part time (less than 35 hours per week) 2
problematic drug/alcohol/substance use (10	unemployed (looking for work)
psychiatric illness (13	not in labour force (see manual) 5
other health issues (Other reasons	29	client left without providing any information 98
gay/lesbian/transgender issues (30	don't know 99
recently left institution (12	
recent arrival to area with no means of support $$ (14	* 10 Student status before and after support
itinerant (15	Please tick one box only in each column Before After
other (please specify) (999	not a student
don't know/no information (0 (primary/secondary school student 2
		post-secondary student/employment training 3
* 7 Main presenting reason for seeking assistance		client left without providing any information 98
please write only ONE code number from Question 6	6	don't know 99
eg 0 2 7		

★ 11 Type of house/dwelling <u>immediately</u> before and after this support period	★ 13 Who was the client living with <u>immediately</u> before and after this support period?
please tick one box only in each column Before After	please tick one box only in each column Before After
Improvised dwelling/sleeping rough	alone 10
improvised dwelling/car/tent/squat 1	with both parents 1
street/park/in the open 2	with one parent and parent's spouse/partner 2
House/dwelling	with one parent 3
house/flat 3	with foster family 4
caravan 4	with relatives/friends temporary 16
boarding/rooming house 5	with relatives/friends long-term
hostel/hotel/motel 6	with spouse/partner 7
Institutional setting	with spouse/partner and child(ren) 8
hospital 7	alone with child(ren) 9
psychiatric institution 8	living with other unrelated persons 13
prison/youth training centre	other (please specify) 999
other institutional setting 10	client left without providing any information 98
client left without providing any information 98	don't know 🦳 99 📃
don't know 99	* 14 Location of client's last home
 ★ 12 Type of tenure (legal right to occupy a dwelling) immediately before and after this support period please tick one box only in each column Before After SAAP/CAP funded accommodation (including THM crisis) 1 SAAP/CAP medium/long term accommodation 2 	suburb/town state postcode overseas 9998 don't know/no information 0
other SAAP/CAP funded accommodation (eg hostel, motel etc) 3	15 Was a case management plan agreed to by the end of the support period?
No tenure institutional setting 4 improvised dwelling/sleeping rough 5 other (no tenure) (please specify) 6	please tick one box only yes 1 ▶ Go to question 16 no, client did not agree to one 4 ▶ Go to question 17 no, support period too short 5 ▶ Go to question 17
Tenure purchasing/purchased own home 7 private rental 8	no, other <i>(please specify)</i>
public housing rental 9 community housing rental 10 (including THM transitional)	16 To what extent were the client's case management goals achieved by the end of the support period?
rent-free accommodation 11 boarding 12	not at all 1
client left without providing any information 98 don't know 99	most 3 all 4

Support to client				
please tick as many circl	es as apply	Needs identified by worker	Provided	Referral arranged
Housing/accommodati	on			
SAAP/CAP accomm	nodation (including THMs and other SAAP	\bigcirc	\bigcirc	43
assistance to ol	managed properties) otain/maintain short-term accommodation	\bigcirc	\bigcirc	39
	in/maintain medium-term accommodation	\bigcirc	\bigcirc	○ 49
	e to obtain/maintain independent housing	\bigcirc	\bigcirc	○ 42
Financial/employment				
	to obtain/maintain government allowance	\bigcirc	\bigcirc	37
	employment and training assistance	\bigcirc	\bigcirc	5
	financial assistance/material aid	\bigcirc	\bigcirc	6
	financial counselling and support	\bigcirc		0 7
Personal support		\bigcirc		0 1
	incest/sexual assault support	\bigcirc	\bigcirc	45
	domestic/family violence support		\bigcirc	46
	family/relationship support	\bigcirc	\bigcirc	47
	emotional support	\bigcirc	\bigcirc	48
	assistance with problem gambling	\bigcirc	$\overline{\bigcirc}$	36
General support/advoc	acy	<u> </u>	Ŭ	Ŭ
	living skills/personal development	\bigcirc	\bigcirc	14
	assistance with legal issues/court support	\bigcirc	\bigcirc	25
	advice/information	0	\bigcirc	27
retriev	al/storage/removal of personal belongings	\bigcirc	\bigcirc	29
	advocacy/liaison on behalf of client	$\overline{\bigcirc}$	Õ	30
Specialist services				
	psychological services	\bigcirc	\bigcirc	12
	specialist counselling services	\bigcirc	\bigcirc	44
	psychiatric services	\bigcirc	\bigcirc	13
	pregnancy support	\bigcirc	\bigcirc	33
	family planning support	\bigcirc	\bigcirc	34
	drug/alcohol support or intervention	\bigcirc	\bigcirc	0 16
	physical disability services		\bigcirc	0 17
	intellectual disability services	\bigcirc	\bigcirc) 18
	culturally specific services	\bigcirc	\bigcirc) 19
	interpreter services	\bigcirc	\bigcirc) 20
	assistance with immigration services	\bigcirc	\bigcirc	38
	health/medical services	\bigcirc	\bigcirc	26
Basic support				<u> </u>
	meals	\bigcirc	\bigcirc	○ 21○ 22
	laundry/shower facilities recreation			\bigcirc 22
	transport	\bigcirc		 23 24
		\bigcirc		
		\bigcirc	\bigcirc	999
other (please specify) _		\bigcirc		998

18 If SAAP/CAP accommodation was provided (including please provide details	ng THMs and other SAAP managed properties)
Note: If the client had more than 12 accommodation period copy of this page, complete details, and staple it to this p	ods in this support period, you should photocopy a blank page.
1 Type of accommodation Date of accommodation please tick one box only please complete all boxes D D M M Y Y Y crisis/short term 7 Start Image: Complete all boxes Image: Complete all boxes medium/long term 8 Finish Image: Complete all boxes Image: Complete all boxes other SAAP 9 Image: Complete all boxes Image: Complete all boxes Image: Complete all boxes	7 Type of accommodation please tick one box only D D M M Y
2 Type of accommodation please tick one box only please tick one box only D D M M Y Y Y Crisis/short term 7 Start medium/long term 8 Finish other SAAP 9	8 Type of accommodation Date of accommodation please tick one box only please complete all boxes D D M M Y Y Y crisis/short term 7 Start Image: Complete all boxes Image: Complete all boxes medium/long term 8 Finish Image: Complete all boxes Image: Complete all boxes other SAAP 9 Image: Complete all boxes Image: Complete all boxes Image: Complete all boxes
3 Type of accommodation Date of accommodation please tick one box only please complete all boxes D D M Y Y Y crisis/short term 7 Start Image: Complete all boxes Image: Complete all boxes medium/long term 8 Finish Image: Complete all boxes Image: Complete all boxes other SAAP 9 Image: Complete all boxes Image: Complete all boxes Image: Complete all boxes	9 Type of accommodation Date of accommodation please tick one box only D D M M Y Y Y Y crisis/short term 7 Start D D M M Y Y Y Y medium/long term 8 Finish D D D M H Y Y Y Y other SAAP 9
4 Type of accommodation Date of accommodation please tick one box only please complete all boxes D D M M Y Y Y crisis/short term 7 Start Image: Complete all boxes Image: Complete all boxes medium/long term 8 Finish Image: Complete all boxes Image: Complete all boxes other SAAP 9 Image: Complete all boxes Image: Complete all boxes Image: Complete all boxes	Date of accommodation please tick one box only please tick one box only D D M M Y Y Y crisis/short term 7 Start D D M M Y Y Y medium/long term 8 Finish D D U U U U U other SAAP 9 9 U U U U U U U U
5 Type of accommodation Date of accommodation please tick one box only please complete all boxes D D M Y Y Y crisis/short term 7 Start Image: Complete all boxes Image: Complete all boxes medium/long term 8 Finish Image: Complete all boxes Image: Complete all boxes other SAAP 9 9 Image: Complete all boxes Image: Complete all boxes	Date of accommodation Date of accommodation please tick one box only please complete all boxes D D M M Y Y Y crisis/short term 7 Start Image: Complete all boxes Image: Complete all boxes medium/long term 8 Finish Image: Complete all boxes Image: Complete all boxes other SAAP 9 Image: Complete all boxes Image: Complete all boxes Image: Complete all boxes
6 Type of accommodation please tick one box only Date of accommodation please complete all boxes D D M M Y Y Y Y crisis/short term 7 Start Crisis/short term 8 Finish Other SAAP 9	12 Type of accommodation Date of accommodation please tick one box only please complete all boxes D D M M Y Y Y crisis/short term 7 Start Start

 Accompanying children should be record Complete a separate client form for each 						
 ★ 19 ALPHA CODE FOR ACCOMPANYING CHILD(REN) For short names fill in with 2's. For missing names fill in with 9's. ★ DATE OF BIRTH OF CHILD(REN) 	Letters of first name Letters of last name D D M	1st 2nd 3rd 4th M Y Y	Sth 6th M/F for male or female	Letters of first name Letters of last name	Ist Ist <th>h 5th 6th M/F for male or female</th>	h 5th 6th M/F for male or female
 Complete date as best you can. If day unknown, tick box "day unknown". If month unknown, tick box "month unknown". If year unknown, provide best estimate and tick box "estimated year". 			nated ear			mated ear
20 Sex of child(ren)			nale 1 nale 2			nale 1 nale 2
★ 21 Country of birth of the child(ren)	other	Austr (please spec		other	Austi (please spec	
★ 22 Is the child of Aboriginal or Torres Strait Islander origin?	no 1 yes, Aboriginal 2 yes, Torres Strait Islander 3 yes, both 4			yes, Torre	yes, Aborig es Strait Islar yes, b	nder 📃 3
23 Support to child(ren)						
Indicate above if no assistance was given or tick as many circles below as apply	Needs			Needs		
Accommodation SAAP/CAP accommodation (including THMs and other SAAP managed properties)	identified by worker	Provided	Referral arranged	identified by worker	Provided	Referral arranged
School liaison/child care school liaison child care Personal support	\bigcirc	\bigcirc	↓ 4↓ 3	\bigcirc	\bigcirc	↓ 4↓ 3
help with behavioural problems sexual/physical abuse support skills education	000		 ○ 1 ○ 24 ○ 17 	000		 ○ 1 ○ 24 ○ 17
structured play/skill development General support/advocacy access arrangements advice/information			 22 5 15 			 22 5 15
advocacy Specialist services specialist counselling	Ŏ	Ŏ	 18 23 	Ŏ	Ŏ	 18 23
culturally specific services health/medical services Basic support	00	00	 10 19 	00	Ŏ	○ 10○ 10○ 19
meals showers/hygiene recreation	\bigcirc		 11 12 13 	000		 11 12 13
transport	0	Ŏ	0 13	\bigcirc	Ŏ	14
other (please specify) other (please specify)	\bigcirc	\bigcirc	999998	\bigcirc	\bigcirc	999998

Note: If the clie and staple it to		nan 5 accompanyir	ng children in a sup	port period, y	ou should photoco	ppy a blank copy of	f this page, co	mplete details,
Letters of last name	onth estir	M/F for male or female	Letters of last name	onth estir	5th 6th M/F for male or female		nonth esti	th 5th 6th M/F for male or female
		nale 1 nale 2			nale 1 nale 2			male 1 male 2
other	Austr (please spec		other	Austr (please spec		othe	Aust r (please spe	
yes, Torre	yes, Aborig es Strait Islar yes, b	nder 📃 3	yes, Torre	yes, Aborig es Strait Islar yes, b	ider 📃 3	yes, Torr	yes, Aboriç es Strait Islaı yes, I	nder 📃 3
1			1			1		
Needs identified by worker	Provided	Referral arranged	Needs identified by worker	Provided	Referral arranged	Needs identified by worker	Provided	Referral arranged
00		 ↓ ↓	0		○ 4○ 3	0		 ↓ ↓
0000	0000	 1 24 17 22 		0000	 1 24 17 22 		0000	$ \begin{array}{c} & 1 \\ & 24 \\ & 17 \\ & 22 \end{array} $
000		 5 15 18 			 5 15 18 			 5 15 18
000		 23 10 19 		$\bigcirc \bigcirc \bigcirc \bigcirc$	 23 10 19 			 23 10 19
0000 000 000 0 0 0		 11 12 13 14 999 998 			 11 12 13 14 999 998 		0000000	 11 12 13 14 999 998

RETURNING FORMS TO THE NDCA

- In the first week of each month, send the forms of *clients* who have left the agency in the last month to the NDCA in the prepaid envelope provided.
- Forms should reach the NDCA by the 15th of each month.
- Include a completed Form Return Sheet with your forms. If no clients left your agency in the last month record **zero** forms to return on the Form Return Sheet. This ensures that your agency is counted as participating in the National Data Collection. The NDCA is required to notify State/Territory funding departments of agencies that do not return forms (or Form Return Sheets) each month.

30 JUNE 2005 AND 31 DECEMBER 2005

- In the first week of July 2005 and in the first week of January 2006, you should notify the NDCA of clients who are still being supported as at 30 June 2005 and 31 December 2005.
- For clients who are ongoing at 30 June 2005, refer to the *July 2005 Transfer Guide* and transfer the information from the old 2004–2005 form to the new 2005–2006 form. Return the old form to the NDCA along with the forms of *clients who have left your agency in the last month*. Retain the new form in your agency until the client has finished his/her support period.
- For ongoing clients at 31 December use the December Form Return Sheet and note in the box provided the number of clients being supported on 31 December 2005. It is important to send in a December Form Return Sheet even if you did not have any client forms to remit or you had no ongoing clients.

If you do not need the materials sent to you, please return them in the NDCA Reply Paid envelope.

Glossary

Accommodation period	The period during which a <i>client</i> was in SAAP <i>supported</i> <i>accommodation</i> . A client may have no accommodation periods or one or more accommodation periods within a <i>support period</i> . The dates on which each accommodation period began and ended during the support period are collected for clients but not for accompanying children. However, it can be reasonably assumed that an <i>accompanying child</i> will have the same accommodation period start and end dates as their parent(s) or guardian(s) in the majority of cases.				
Accompanying child	A person aged under 18 years who:				
	• has a parent or guardian who is a SAAP <i>client</i> ; and				
	 accompanies that client to a SAAP agency any time during that client's support period; and/or 				
	• receives assistance directly as a consequence of a parent or guardian's support period.				
Accompanying child support period	Each <i>support period</i> in which the child either accompanies a parent or guardian to a SAAP <i>agency</i> or receives assistance as a result of a parent or guardian's support period.				
	Within an accompanying child support period the child may receive one-off assistance and/or support over a period of time. Since the child may not be supported for the entire duration of a parent's or guardian's support period, it is not possible to assess the exact length of support for an <i>accompanying child</i> .				
Agency	An organisation or establishment that receives a specified amount of SAAP funds to provide services.				
Alpha code	A predetermined combination of letters from a client's name, together with a letter designating the client's sex. A 'valid alpha code' is an alpha code that is given with informed consent, and contains only letters from the alphabet and ends in either M or F to indicate the client's sex.				
Client	A person who is <i>homeless</i> or at imminent risk of homelessness who:				
	• is accommodated by a SAAP <i>agency</i> ; or				
	 enters into an <i>ongoing support relationship</i> with a SAAP agency; or 				
	• receives <i>support</i> or assistance from a SAAP agency which entails generally one hour or more of a worker's time, either with that client directly or on behalf of that client, on a given day.				
	This includes people who are aged 18 years or older and people of any age not accompanied by a parent or guardian.				

Closed accompanying child support period	An accompanying child support period associated with a closed support period.
Closed support period	A <i>support period</i> that had finished on or before the end of the reporting period -30 June 2006.
English proficiency group 1 countries	Canada, Ireland, New Zealand, South Africa, the United Kingdom, the United States of America and Zimbabwe.
English proficiency group 2-4 countries	Countries, excluding Australia, that are not included in <i>English proficiency group</i> 1.
Homeless person	A person who does not have access to safe, secure and adequate housing. A person is considered not to have access to safe, secure and adequate housing if the only housing to which they have access:
	• damages, or is likely to damage, their health; or
	• threatens their safety; or
	 marginalises them through failing to provide access to: adequate personal amenities, or
	 the economic and social supports that a home normally affords; or
	• places them in circumstances which threaten or adversely affect the adequacy, safety, security and affordability of that housing; or
	• has no security of tenure – that is, they have no legal right to continued occupation of their home.
	A person is also considered homeless if he or she is living in accommodation provided by a SAAP <i>agency</i> or some other form of emergency accommodation.
Ongoing support relationship	An ongoing support relationship exists between a SAAP <i>agency</i> and a person if some assistance has been provided to that person, and it is expected that future contact will occur between the person and the agency for the purpose of providing additional assistance. Future contact can be assumed if:
	• a definite appointment has been made with the person to work through particular problems/issues; or
	 an agreement has been reached with the person to work through particular problems/issues even if a specific appointment has not been made; or
	• the agency expects the client to return for more assistance within a month.
	However, an invitation to return to the agency in the future if the need arises does not constitute an ongoing support relationship. Rather it should simply be seen as an offer to enter into a new <i>support period</i> or to provide assistance at some future time.
Recurrent allocations	Amounts of money specifically allocated during the reporting period by a state or territory department either:

	• to a SAAP <i>agency</i> to fund salaries and associated on-costs, and ongoing operating costs; or
	• for use by each state or territory for such purposes as training, research, evaluation, administration, and asset replacement or purchase.
Referral	For the purposes of the National Data Collection, a referral involves a formal process – not simply the provision of information. A (formal) referral occurs when a SAAP <i>agency</i> contacts another organisation and that organisation accepts the person concerned for an appointment or interview. A referral has not been provided if the person is not accepted for an appointment or interview.
Statistical linkage key (SLK)	A statistical linkage key (SLK) is a derived variable that allows demographic data about the same <i>client</i> to be combined across support periods without the name of the client being recorded. For the purposes of the National Data Collection, a valid SLK is comprised of a valid <i>alpha code</i> and <i>valid date of birth</i> that were supplied for a <i>support period</i> where the client gave informed consent.
Support	Assistance, other than <i>supported accommodation</i> , provided to a <i>client</i> as part of an <i>ongoing support relationship</i> between a SAAP <i>agency</i> and the client. For the purposes of the National Data Collection, support also includes contact with, or work on behalf of, a client for generally more than one hour on a given day. Support may be provided to the client individually or in group sessions.
Support period	Commences when a <i>client</i> begins to receive <i>support</i> and/or <i>supported accommodation</i> from a SAAP <i>agency</i> . The support period is considered to finish when:
	• the client ends the relationship with the agency; or
	• the agency ends the relationship with the client.
	If it is not clear whether the agency or the client has ended the relationship, the support period is assumed to have ended if no assistance has been provided to the client for a period of one month. In such a case, the date the support period ended is the last contact with the client.
Supported accommodation	Accommodation paid for or provided directly by a SAAP <i>agency</i> . The accommodation may be provided at the agency or may be purchased using SAAP funds—at a motel, for example.
Unmet need	An unmet need occurs when a SAAP <i>agency</i> worker assesses that a <i>client</i> needs a support service during their <i>support period</i> , and that service is not provided or referred.
Valid date of birth	For the purposes of the National Data Collection, a valid date of birth is the client's date of birth provided with informed consent and for which:

- the day, month and year of birth are completed and not estimated; or
- the day and month of birth are completed and not estimated, and the year of birth is completed (either estimated or not estimated).

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