



# FIRST STEP ..... LEGAL

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## Lessons learned in building internal evaluation capacity

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## Acknowledgements

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Independent researcher and criminologist, Dr Karen Gelb, reviewed the evaluation methodology, conducted interviews with First Step Legal staff and prepared much of the analysis in this report: her ability to distil key lessons was invaluable. Laura Brennan, Deputy Director, First Step Legal has been a consistent champion and leader of the evaluation while Lisa Ward, Consultant, Health Justice Partnerships has overseen the journey from its inception.

Most importantly, we thank First Step Legal staff for their commitment to the learning journey and to capturing and quantifying the impact of integrated legal help.

# Key lessons

**1. Privilege client engagement and wellbeing**

**2. Make data collection everybody's job**

**3. Embed data collection in daily workflows**

**4. Invest in data oversight**

**5. Engage staff in the design of survey tools**

**6. Consider a 'benchmark' client wellbeing tool**

**7. Import expertise but do most of the work inhouse**

**8. Extract and apply the data along the way**

**9. Renew evaluation champions throughout**

**10. Factor in staff turnover from the outset**

**11. Anticipate the challenges of client follow up**

**12. Appreciate the value of qualitative data**

## About this report

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**In 2020, First Step Legal (FSL) committed to building its internal evaluation capacity. Since then, FSL has invested heavily in the design of data collection tools, the development of an electronic file management and data collection system, the integration of data collection processes into daily workflows, and in skilling and motivating legal staff to value data collection and dedicate time and effort accordingly. Leveraging this investment, FSL has partnered with the University of Melbourne to conduct a robust outcome evaluation of its health justice partnerships.**

**Much has been learned along the way.**

**Following publication of the formal evaluation findings,<sup>1</sup> it's time to reflect on the journey. Using two data collection methods – a review of internal documentation developed during the evaluation plus interviews with key staff – this brief report presents reflections on lessons learned by FSL in its four-year journey to become a learning organisation.**

### Why did First Step Legal embark on this journey?

FSL's mission is to increase access to justice for particularly vulnerable people, by bringing integrated legal help to them, wherever they present for support.

It does this by partnering with services across the mental health, substance use, family violence and homelessness sectors. FSL actively embeds itself within these settings, enabling it to find and connect with people whose often serious legal needs may otherwise go unmet. Working hand-in-glove with the client's clinician or case worker, FSL provides an integrated legal service that supports the whole person, breaking down traditionally siloed services.

While integrated legal help is accepted as best practice, there's limited empirical data regarding its effectiveness and health justice partnerships constitute just a fraction of the legal assistance sector. To realise the vision of embedding legal help across the health, housing and community service sectors, FSL committed to capturing the impact of integrated legal help that extends well beyond resolution of the client's legal matter.

### What did the evaluation involve?

The evaluation was designed to test the assumption that improved access to integrated legal assis-

tance has a positive impact on clients' health and wellbeing, as well as their legal outcomes. Quantitative and qualitative data were collected over a period of 2.5 years.

The evaluation only included clients who were receiving ongoing legal assistance and representation from FSL: clients receiving information, referral and discrete advice services were not part of the study.

Quantitative data was collected via a comprehensive 'baseline' survey with data captured by the lawyer in face-to-face intake meetings. Similar metrics were collected at 3-, 6-, 12- and 24-month intervals in a follow-up periodic survey to capture changes in client circumstances over time. The follow-up surveys were generally conducted over the phone by specially trained volunteers or, for clients with particularly complex needs, by FSL's in-house social worker. Both the baseline and periodic surveys contained the Personal Well-Being Index (see below).

The qualitative data captured client and staff perceptions of the impact of FSL's work across all health justice partnerships. The data was collected via interviews with a group of clients, clinical staff and senior managers from each partner and First Step Legal's legal staff. Interviews were conducted by an independent researcher in the last six months of the evaluation period.

<sup>1</sup> Available at [https://www.firststep.org.au/first\\_step\\_legal\\_publications](https://www.firststep.org.au/first_step_legal_publications)

## Key lessons

### 1. Privilege client engagement and wellbeing

The service model used by FSL is a highly relational one, relying on lawyers to engage meaningfully with clients to address their legal and non-legal needs. Over the life of the evaluation, one of the biggest challenges for FSL was minimising the impact of data collection requirements on client trust, wellbeing and engagement.

The baseline survey covered difficult topics – drug use, homelessness, personal wellbeing – topics that could potentially be traumatising for clients. To maintain a therapeutic overlay, the intention was for the information to arise ‘organically’ from lawyers’ conversations with clients, rather than having lawyers work mechanically through a checklist. Though lawyers had significant input into the design of the data collection tools (see below), it wasn’t until the baseline survey was implemented that the tension between building rapport with clients through genuine conversation and collecting responses to the survey questions became clear. This became the subject of much deliberation within FSL.

It was agreed that the overriding consideration was client wellbeing and that legal practitioners should be able to exercise their judgment regarding how best to collect client data. For example, some took instructions then doubled back to check the survey questions for any topics that might have been missed. Others used a case manager or volunteer to sit in on the intake interviews and record survey data as it arose from the conversation. It wasn’t unusual for a therapeutic decision to be made to halt collecting baseline data due to client wellbeing concerns and to continue at another time. In this way, the lawyers were generally able to meet the data collection requirements while privileging client engagement and maintaining a trauma-informed lens.

Significantly, a number of ongoing clients were excluded from the evaluation all together because of concerns about the impact it may have on their wellbeing and/or engagement with FSL.

A therapeutic approach was also fundamental to collecting follow-up survey data. Prior to each survey, non-legal staff or volunteers would check with the client’s lawyer to find out where their matters were up to, to identify any aspects of their life to which non-legal staff or volunteers needed to be alert, and to make sure that conducting the survey wouldn’t cause the client any harm. At first this information was provided on a structured template, which added considerably to the lawyer’s workload. Ultimately, a short email was enough to provide relevant information to ensure it was an appropriate time to try to engage the client and to allow non-legal or volunteer staff to establish rapport quickly with them. This mechanism of looping back to the lawyer before each survey ensured that the evaluation continued to be trauma informed as each client progressed through the different data collection points. In future, however, FSL is keen to secure resourcing to enable lawyers to complete follow-up surveys, ensuring a consistent, relational approach to data collection is embedded at all stages.

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## 2. Make data collection everyone's job

A strength of FSL's research methodology was that responsibility for data collection and entry was shared across the organisation, mitigating the risks arising if this is vested in one role.

Responsibility for collecting and entering baseline data was assigned to each lawyer from the outset. While the initial intent was for lawyers to collect and enter the baseline survey data, inevitably, tensions arose between completing client legal tasks - the primary function of FSL - and the additional work needed for the evaluation. FSL experimented with different models, including having non legal staff and volunteers collect and/or enter some of the baseline survey data. Ultimately, however, the lawyers took carriage of this task.

In contrast, responsibility for collecting follow-up survey data shifted over the course of the evaluation. Different non-legal roles (including para-legal staff, case managers, social workers and skilled volunteers) were tasked with conducting follow-up surveys over the life of the evaluation. While all these staff were trained in research ethics, interview techniques, distress protocols and data counting rules, the reality is that this work was often allocated according to available resources rather than best research practice.

On reflection, there was a need for clearer expectations around specific roles and responsibilities, particularly as the practice trialled various process refinements. While adaptation was important, better role clarity would have enabled FSL to respond flexibly while preserving the integrity of its internal evaluation capacity. In particular, responsibility for follow-up surveys would have been better allocated to one or two key roles within the practice, ideally lawyers.

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## 3. Embed data collection in daily workflows

FSL's decision to task lawyers with responsibility for baseline data collection and entry was sound, enabling the collection of baseline data to be firmly embedded within daily workflows. This was further supported by enhancements to the legal practice management software, Actionstep, which automated and/or prompted data collection at critical points.

It proved more challenging to embed the collection of follow-up data into the daily workflows of non-legal staff and volunteers due to changing roles, higher turnover rates and the need for multiple follow-up surveys to be conducted on a rolling basis, with complex scheduling requirements. Unsurprisingly, client-related paralegal tasks often took priority over follow-up survey work. In hindsight, FSL may have achieved higher client follow-up rates if this aspect of the evaluation were more firmly embedded within the practice's workflows.

#### 4. Invest in data oversight

While everyone at FSL was invested in the evaluation process, it was important to have one person responsible for monitoring data quality. Key tasks included monitoring the timely administration of both baseline and follow-up surveys; auditing the quality of data collection and intervening early when problems arise.

For much of the evaluation, FSL's administrator role was charged with these functions. However, four different people were in this role in the 2.5-year evaluation period. Due to staff changes, leave and competing organisational priorities, no one was available to perform this function at various stages of the evaluation. This had a direct impact on the quality of data collected and resulted in delays in data capture, especially in respect of follow-up surveys.

By way of example, the administrator role was responsible for monitoring when follow-up surveys were due and liaising with the relevant lawyer to identify creative ways to make contact if the first one or two attempts were unsuccessful. When no one was available to undertake this function, follow-up rates declined quickly.

Similarly, the administrator role was initially charged with convening a monthly working group of those involved in conducting follow-up surveys. This was designed to mitigate the risk of inconsistent data capture that can arise when multiple people are involved. The forum provided an opportunity to check that everyone was collecting data in the same way, and to find solutions for challenging data collection issues that were arising during these early stages of the evaluation. However, as the administrator role changed, the monthly meetings fell away and inconsistencies in data capture began to emerge.

In hindsight, the quality and quantity of data capture would have been enhanced if FSL had articulated the operational oversight role more clearly and prioritised its continuity throughout the evaluation period.

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#### 5. Engage staff in the design of survey tools

FSL spent significant time and effort developing the survey tools, balancing the desire to collect a comprehensive data set with a deep respect for the client experience. Importantly, this work was done by the full team of staff who would be applying the tools: both legal and non-legal staff. This was critical in ensuring the questions were clear and fit-for-purpose, that staff understood the function of each question and that coded answer fields were sufficiently comprehensive.

The baseline surveys that were finally implemented included a large number of questions about people's health and wellbeing in addition to their legal issues. While many of the questions covered topics that would normally have been discussed at intake even prior to the evaluation, the length of these surveys and the wide-ranging topics covered (such as number of house moves, emergency department visits and substance use) at times tested clients' patience. Because staff were involved in survey design, they

were well equipped to respond when clients queried why certain data was being collected and to exercise discretion regarding which data may be omitted on a case-by-case basis.

The early involvement of legal staff in the design of data collection tools also opened up an ongoing conversation regarding how best to use the tools once they were in place. Lawyers shared information about how and when to ask the survey questions, what to say to clients about participating in the evaluation and how to foreshadow the follow-up surveys in a way that would encourage clients to participate in the months to come. These conversations allowed lawyers to learn from each other's experiences, especially in the early days of the evaluation.

## **6. Import expertise but do most of the work inhouse**

FSL relied heavily on its partnership with the University of Melbourne for technical advice regarding research design, data collection and data analysis. At the back end of the evaluation, an external research and evaluation expert was engaged to assist with translating academic findings into plain language and presenting the material in an accessible format. Along the way, independent research interviewers were contracted and advice was drawn from a range of sources including Health Justice Australia, Victoria Law Foundation and networks of independent evaluation and research entities.

Importantly however, responsibility for survey design, data collection, data entry, data extraction and data 'sense making' was held internally. This was a deliberate choice, made early in the evaluation journey, to ensure that FSL built internal capabilities that would sustain ongoing evaluation efforts after the initial project was complete.

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## **7. Consider a ‘benchmark’ client wellbeing tool**

A key aim of the FSL evaluation was to identify the impact of the health justice partnership model on client wellbeing. To measure this, FSL sought a tool that would be sufficiently straightforward to administer to clients with complex needs at a particularly difficult time in their lives and allow for comparison between the FSL client cohort and the broader population.

The Personal Wellbeing Index - Adult (PWI-A)<sup>2</sup> was ultimately chosen. This is a simple 8-question measure of a person's subjective wellbeing that has been used widely in the general Australian population for many years, including, for example, in the HILDA household survey.

By using a tool that is regularly applied in the general community, FSL has been able to benchmark its client cohort against the Australian population to understand the wellbeing deficits that clients experience. This has been a useful tool for communicating the complexity of the FSL client group relative to the wider community, and to map changes in clients' subjective assessment of wellbeing over time.

<sup>2</sup> Available at <https://www.acqol.com.au/uploads/pwi-a/pwi-a-english.pdf>



## 8. Extract and apply the data along the way

Ongoing commitment to evaluative practice was greatly enhanced when FSL staff could see and apply the outputs from the data they were collecting. For example, a snapshot of key client demographics and metrics were shared and analysed at team meetings at various points in the evaluation as were qualitative insights arising from in depth interviews with clients and partner organisations. These conversations were rich and stimulating, serving to keep the evaluation in sight, discuss its implications for practice, and show the value of data collection efforts. They were reinvigorating moments, when the impact of the work was made visible.

However, while FSL successfully embedded its internal capacity around data collection, the task of extracting and applying the data was more episodic. In hindsight, data should have been extracted routinely and used in a more visible, meaningful way to inform practice operations. Regular analysis of data can help identify changes in the nature of the work and the needs of clients. It can illuminate gaps in staff training and/or offer structured opportunities for receiving feedback, helping improve daily practice.

Moving forward, FSL is committed to embedding the application of data into routine practice processes and decisions.

## 9. Renew evaluation champions throughout

At times, FSL found it challenging to keep staff committed to the data collection and entry tasks that robust evaluation requires. An evolving workforce and complex clients made it hard to motivate staff to persist with data collection when unable to contact clients time and again.

Substantial time and effort was spent early in the evaluation period to identify and build champions within the organisation – people who saw the value of evaluation not just for external stakeholders, but for the practice itself. These champions were able to bring a level of enthusiasm to the idea of being evaluated, helping to motivate staff as the evaluation was implemented.

Over time, however, the champions moved on. Though staff became familiar and confident with the tasks involved in the evaluation, its long duration meant that motivation waned mid-way through, especially in the absence of champions. Noting this shift, FSL deliberately cultivated new champions to refresh and reset the commitment. A new Practice Manager was central to this process, introducing oversight and audit practices and, more importantly, regaining commitment in the ‘hearts and minds’ of staff by focussing on the value of evaluation for client outcomes.

*“When staff could see and apply the outputs from the data they were collecting, conversations were stimulating and the impact of the work was made visible.”*

## 10. Factor in staff turnover from the outset

Several references have been made to the challenges that staff turnover presented for the FSL evaluation.

At the start of the process, the external evaluator provided staff and volunteers with online training regarding the ethical collection of reliable, consistent quantitative data for evaluative purposes. The session was seen as valuable in providing guidance on how to achieve the required academic integrity, such as ways to avoid asking leading questions.

Staff and volunteers were able to return to the session recording at any time to refresh their understanding, and new staff could access the same content, but there was no in person follow-up training during the evaluation. Having a single session at the start of the evaluation period meant that the gravitas of messages imparted by the external evaluator may have been diluted over time.

While it's important to invest appropriately in training at the start of an evaluation period, it's equally important to sustain that investment to provide further education as the evaluation progresses. Follow-up sessions can help to refocus staff and offer new staff the opportunity to attend live training.

## 11. Anticipate the challenges of long-term client follow-up

As noted, the evaluation was designed to follow-up FSL's complex client group at 3, 6-, 12 and 24 months, capturing their health, wellbeing and legal outcomes up to two years after intake. While some were happy to participate in follow-up surveys, it proved difficult to reach many clients - particularly for the final two surveys. This is unsurprising given the mobility and complexity of the client group and reflects well documented experiences elsewhere.

Despite efforts to find optimal times to call (best between 4pm and 6pm, and never before 11am) and to frame the survey in different ways, only 9% of clients completed surveys at the two-year point. As discussed, the inevitable challenges in reaching clients were compounded by changing responsibilities for this task within FSL and periodic vacancies in the data oversight role.

Moving forward, FSL is eager to explore a more relational approach to client follow-up, consistent with its broader service model. Options include tasking lawyers and/or the in-house social worker with this function. Notwithstanding resource implications, this approach may also afford better opportunities to respond to client wellbeing concerns and/or new legal matters as they arise.

*“Despite best efforts, it proved difficult to reach clients for follow up, particularly at the 12 and 24 month marks. This is unsurprising given the mobility and complexity of the client group.”*

## 12. Appreciate the value of qualitative data

Evaluation is not just about the numbers. Interviews with clients, health and housing partners and legal staff provided rich insight into the impact of FSL's model and helped to make sense of the extensive quantitative data collected.

Qualitative data allowed FSL to demonstrate the impact of the health justice partnership model on clients, bringing the voice of lived experience to bear and conveying people's stories in a powerful and touching way.

The qualitative data also provided a compelling picture of the value that integrated legal help brings to health, housing and legal staff, with many referring to significant improvements in their skills and job satisfaction and a reduction in job related stress. The interview data provided rich insight into specific aspects of the FSL service model that are most valued by clients and staff and highlighted important opportunities for improvement.

Most of the staff and client interviews were conducted in the last 6-8 months of the evaluation period. Again, staff turnover in FSL's health and housing partners meant that important insights from those who had left the organisation were missed along with insights from clients who'd lost contact with the service. On reflection, qualitative interviews should have commenced earlier and been scheduled across the full 2.5-year period.

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## The learning journey continues...

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FSL has dedicated significant time and resources to building its internal evaluation capabilities. Lessons learned along the way are being reviewed and changes implemented.

Importantly, FSL has committed to retaining key elements of the formal evaluation and incorporating them as standard practice. Both the baseline and periodic surveys have been reviewed internally by lawyers and the majority of data fields retained. However, important refinements have been made to enhance usability for staff and improve the experience for clients. The Personal Wellbeing Index has also been retained. Reflecting the challenges of long-term client follow-up, moving forward, FSL has elected to administer the periodic survey at two points only: 6 and 12 months after intake.

Many challenges remain. FSL is keen to become more sophisticated in its use of data to inform routine practice decisions and to share this data with health and housing partners to support ongoing service improvements. Similarly, there's still untapped potential for health and legal partners to share client data at intake, reducing the need for clients to retell their stories. These and many other opportunities lie ahead.

However, a fundamental shift has occurred and the practice of ongoing internal evaluation is now firmly embedded within the FSL culture. At induction, new staff are told that evaluation is simply part of the work. Evaluation tasks are routinely considered when reviewing roles and responsibilities, revisiting position descriptions and making resource allocation decisions. The role of evaluation at FSL was well summarised by one staff member interviewed for this report: 'it's certainly part of our psyche.'

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